

Impact Assessment Report

# Lifeline Express- Godda

**Essel Mining & Industries Limited**

A part of Aditya Birla Group



## Certificate

This is to certify that the Impact Assessment report titled: '**Lifeline Express – Godda**' is an original study conducted by CSRBOX and is submitted to Essel Mining & Industries Limited.

The Impact Assessment Study has been conducted as per the requirements of the Companies Act, 2013 and the Companies (Corporate Social Responsibility Policy) Rules, 2014, as amended, and is compliant with the requirements of the law.

This study contains findings by CSRBOX, which are based on the review of secondary sources, and primary-level interactions. The impact assessment framework used by CSRBOX was created and implemented by the objectives and indicators of the project.

Bhomik Shah

Founder and CEO, CSRBOX

## Acknowledgement

CSRBOX conducted the Impact Assessment for Lifeline Express project in Godda, in FY 2022-23. We would like to thank Essel Mining & Industries Limited for their constant support and guidance throughout the impact assessment process.

Additionally, we would like to express our sincere gratitude towards the project implementation partner, Impact India Foundation for their continuous assistance throughout the assessment process and for enabling a better understanding of the project life cycle. Their kind support helped us with smooth data collection and field visits.

Lastly, we thank all the beneficiaries and secondary stakeholders, such as doctors, nurses, the District Program Manager, and volunteers who took out time to interact with us on the field as well as virtually. Their valuable insights have been instrumental in understanding the ground-level realities and holistic understanding of the Lifeline Express project.

## Disclaimer

- The Impact Assessment Study has been conducted in accordance with the requirements laid out in the Companies Act, 2013 and the Companies (Corporate Social Responsibility Policy) Rules, 2014, as amended, ensuring compliance with the applicable legal requirements.
- This report shall be disclosed to those authorised in its entirety only without removing the disclaimers. CSRBOX has not performed an audit and does not express an opinion or any other form of assurance. Further, comments in our report are not intended, nor should they be interpreted as legal advice or opinion.
- This report contains an analysis by CSRBOX considering the publications available from secondary sources and inputs gathered through interactions with the leadership team of **Essel Mining & Industries Limited**, Impact India Foundation, project beneficiaries, and various knowledge partners. While the information obtained from the public domain has not been verified for authenticity, CSRBOX has taken due care to obtain information from sources generally considered to be reliable.
- In preparing this report, CSRBOX has used and relied on data, material gathered through the internet, research reports, and discussions with personnel within CSRBOX as well personnel in related industries.

## With Specific to Impact Assessment of Lifeline Express Program Under Essel Mining & Industries Limited (FY2022-23):

- CSRBOX has neither conducted an audit, or due diligence nor validated the financial statements and projections provided by Essel Mining & Industries Limited;
- Wherever information was not available in the public domain, suitable assumptions were made to extrapolate values for the same;
- CSRBOX must emphasise that the realisation of the benefits/improvisations accruing out of the recommendations set out within this report (based on secondary sources), is dependent on the continuing validity of the assumptions on which it is based. The assumptions will need to be reviewed and revised to reflect such changes in business trends, regulatory requirements, or the direction of the business as further clarity emerges. CSRBOX accepts no responsibility for the realisation of the projected benefits;
- The premise of an impact assessment is 'the objectives' of the project along with output and outcome indicators pre-set by the program design and implementation team. CSRBOX's impact assessment framework was designed and executed in alignment with those objectives and indicators.

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## Executive Summary

### Background:

Aditya Birla - Essel Mining & Industries Limited (EMIL), as a responsible corporate organisation, actively engages with local communities to enhance societal well-being. The company conducts a wide array of enriching activities and collaborates with community organisations, aiming to build a more equitable society.

EMIL provides various resources to community stakeholders, including awareness campaigns, capacity-building initiatives, tools, and infrastructural support. EMIL is committed to connecting with marginalised communities, a commitment deeply embedded in their core values. They embrace the concept of trusteeship, prioritising the well-being of underserved populations over business interests. Their CSR activities are dedicated to improving the quality of life in rural communities, striving to make a positive impact on their lives.

### Project Details:

Essel Mining and Industries Limited (EMIL) has partnered with Impact India Foundation to launch the Lifeline Express (LLE), a transformative Corporate Social Responsibility (CSR) initiative. This mobile hospital train delivers essential healthcare services, including surgeries and health education, to underserved communities across India. The Lifeline Express operates in remote areas for 21 days at a time, providing critical medical care and raising awareness about preventable disabilities. The services provided by Lifeline Express are free of cost, ensuring accessibility to even the most vulnerable sections of society. This report evaluates the impact of the program in Godda during FY 2022-23.

### Impact Highlights:

During the impact assessment, the study team developed an evaluation matrix based on appropriate parameters. The impact of this project was evaluated based on OECD-DAC Framework components: Relevance, Coherence, Effectiveness, Efficiency, Impact, and Sustainability.

<b>Relevance</b>	<ul style="list-style-type: none"> <li>• 86% of the beneficiaries who took the treatment from LLE have annual income of less than 1 lakh</li> <li>• 32% of the beneficiaries reported that they were suffering from health problems but were not able to get treatment, prior to LLE intervention</li> </ul>
<b>Coherence</b>	<ul style="list-style-type: none"> <li>• The program is aligned with <b>SDG 3 (Good health and well-being)</b></li> <li>• The program is in line with <b>National Health Policy, NPCBVI, NPPCD and NPCDCS</b></li> </ul>
<b>Effectiveness</b>	<ul style="list-style-type: none"> <li>• 68% of the beneficiaries were extremely satisfied with the treatment given by the doctor</li> <li>• 49% of the beneficiaries were highly satisfied with the improvement in their medical problem</li> </ul>
<b>Efficiency</b>	<ul style="list-style-type: none"> <li>• 89% of the beneficiaries reported experiencing uninterrupted treatment processes, unaffected by interruptions in electricity</li> <li>• All of the beneficiaries were extremely satisfied with the hygiene and cleanliness maintained inside the train</li> </ul>
<b>Impact</b>	<ul style="list-style-type: none"> <li>• 64% of the beneficiaries reported an improvement in their knowledge about preventable disability</li> <li>• 42% of the beneficiaries mentioned a restoration to their normal daily functioning</li> <li>• 39% of beneficiaries reported a reduction in disability-related complications.</li> <li>• 52% were assigned a patient card for reference in the Lifeline Express.</li> </ul>
<b>Sustainability</b>	<ul style="list-style-type: none"> <li>• 20% of the beneficiaries of <b>Dental</b> and <b>15% of ENT patients</b> were referred to the local district hospital</li> </ul>

Overall, the project is in 100% alignment with the below **UN SDG** and **ESG** principles is evident.

#### Sustainable Development Goals:

	<p>Lifeline Express aligns with SDG 3 as it provides accessible healthcare, effective treatment, medicines, and assistive devices free of cost. The beneficiaries were given knowledge about various preventable disabilities which aided in sustaining their good health.</p>
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## ESG Principles:

### Principle 2

- Business should provide goods and services in a manner that is sustainable and safe

### Principle 4

- Business should respect the interests of and be responsive to all its stakeholders

### Principle 8

- Business should promote inclusive growth and equitable development

## National Priorities:

<b>National Health Policy (NHP)<sup>1</sup></b>	The Lifeline Express operated to address preventable disabilities by providing access to quality medical services in remote areas. Thus, the operations of LLE are in complete alignment with the objectives of NHP.
<b>National Program for Control of Blindness &amp; Visual Impairment (NPCBVI)<sup>2</sup></b>	The Eye treatment provided in LLE helped in treating preventable disability. Thus, this program aligns with NPCBVI.
<b>National Program for The Prevention &amp; Control of Deafness (NPPCD)<sup>3</sup></b>	The Ear treatment provided in LLE helped in treating preventable disability. Thus, this program aligns with NPPCD.
<b>National Program for Prevention &amp; Control of Cancer, Diabetes, Cardiovascular Diseases &amp; Stroke (NPCDCS)<sup>4</sup></b>	There were screening facilities provided for breast and cervical cancer for 5 days in LLE. Thus, aligning with NPCDCS.

The Lifeline Express Project has made a significant contribution to healthcare by providing sustainable care to beneficiaries and equal opportunities to those who previously had difficulty accessing healthcare facilities. As a way forward, the project can expand the coverage of the Lifeline Express Program and enhance its familiarity among the community.

It is advisable to increase the duration of the outreach period from 15-20 days to 20-25 days.

<sup>1</sup> <https://main.mohfw.gov.in/sites/default/files/9147562941489753121.pdf>

<sup>2</sup> <https://npcbvi.mohfw.gov.in/>

<sup>3</sup> <https://main.mohfw.gov.in/sites/default/files/51892751619025258383.pdf>

<sup>4</sup> <https://nhm.gov.in/index1.php?lang=1&level=2&sublinkid=1048&lid=604>

## Abbreviations

ABBREVIATION	MEANING
ASHA	Accredited Social Health Activist
AWW	Anganwadi Worker
BRSR	Business Responsibility and Sustainability Report
CSR	Corporate Social Responsibility
ENT	Ear Nose Throat
ESG	Environmental, Social and Governance
FY	Financial Year
IIF	Impact India Foundation
LLE	Lifeline Express
NGO	Non- Governmental Organisation
NPCBVI	National Program for Control of Blindness & Visual Impairment
NPCDCS	National Program for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke
NPPCD	National Program for Prevention and Control of Deafness
OECD	Organisation for Economic Co-operation and Development
OPD	Out Patient Department
SDGS	Sustainable Development Goals
SEBI	Securities and Exchange Board of India
UN	United Nations

# Chapter 1: Project Overview and CSR Initiatives of EMIL



## 1.1 CSR Initiatives of the Organisation

EMIL's CSR initiatives revolve around nurturing social and economic empowerment among their stakeholders, emphasising vulnerable demographics. These initiatives are extensively implemented through strategic collaborations and partnerships with esteemed organisations. Guided by the United Nations' Sustainable Development Goals (SDGs), EMIL's CSR programme design is meticulously structured. Their primary partners encompass individuals, governmental bodies, authorities, panchayats, and local communities. Key focus areas for EMIL include:<sup>5</sup>

### Infrastructure Development

- To set up essential services that form the foundation of sustainable development

### Sustainable Livelihood

- To provide livelihood in a locally appropriate and environmentally sustainable manner

### Healthcare

- To render quality healthcare facilities to people living in the villages and elsewhere

### Education

- To spark the desire for learning and knowledge at every state

### Social Causes

- Advocate and support various social issues such as: dowry-less marriage, widow remarriage, gender equality, de-addiction campaigns, awareness programs on anti-social issues and espousing basic moral values.

## 1.2 Programme Overview

Essel Mining and Industries Limited (EMIL) has initiated a transformative Corporate Social Responsibility (CSR) endeavour in collaboration with Impact India Foundation, called the Lifeline Express (LLE). This innovative venture aims to deliver crucial healthcare services to underserved communities throughout India via a specialised mobile hospital.

The Lifeline Express is a train carriage transformed into a mobile hospital offering vital medical services including surgeries for different complications in body parts such as ear, eye, orthopaedic, gynaecological, and ENT procedures, along with health education, to remote areas lacking adequate healthcare access. EMIL's partnership with Impact India Foundation (IIF) underscores its dedication to making a substantial impact on the lives of marginalised populations by addressing healthcare disparities and promoting wellness. The Lifeline Express, operating as a hospital train provides medical services in various aspirational districts for 21 days, to raise awareness and alleviate the burden of preventable disabilities. The project encompasses a wide range of primary and secondary stakeholders. By utilising the Lifeline Express, EMIL persists in making a positive difference in numerous lives, offering hope, and healing, and promoting healthcare equity for those in greatest need.

<sup>5</sup> <https://www.esselmining.com/wp-content/uploads/2022/09/csr-policy.pdf>

The 226th Lifeline Express programme was implemented in the Aspirational District of Godda in Jharkhand from 15<sup>th</sup> November – 5<sup>th</sup> December 2022. The Lifeline Express was stationed at Poreyahat Railway station. Adequate space and infrastructure at Poreyahat Railway Station facilitated the operation of the Lifeline Express. The initiative was introduced to address the inadequate health facilities in the district.

### A brief profile of Godda, Jharkhand

- **Area:**  
The district spans an area of 2110 km<sup>2</sup>.
- **Total population:** 1,311,382<sup>6</sup>
  - i. Males: 678,486
  - ii. Females: 632,878
- **Administrative Divisions:**<sup>7</sup>
  - i. Number of Villages: 2311
  - ii. Number of Towns: 01
- **Health Infrastructure:**<sup>8</sup>  
There are only 3 to 4 government hospitals accessible to the general public.

Ranchi is the nearest big city, patients requiring super speciality services need to travel 330 km from Godda to access these facilities.

The Lifeline Express Programme was implemented keeping in mind the following broad objectives:



Delivering consultations to individuals residing in remote regions of India using the LLE



Referring patients to secondary and tertiary care facilities when necessary



Offering fundamental diagnostic, laboratory services and surgical services



Organising health camps



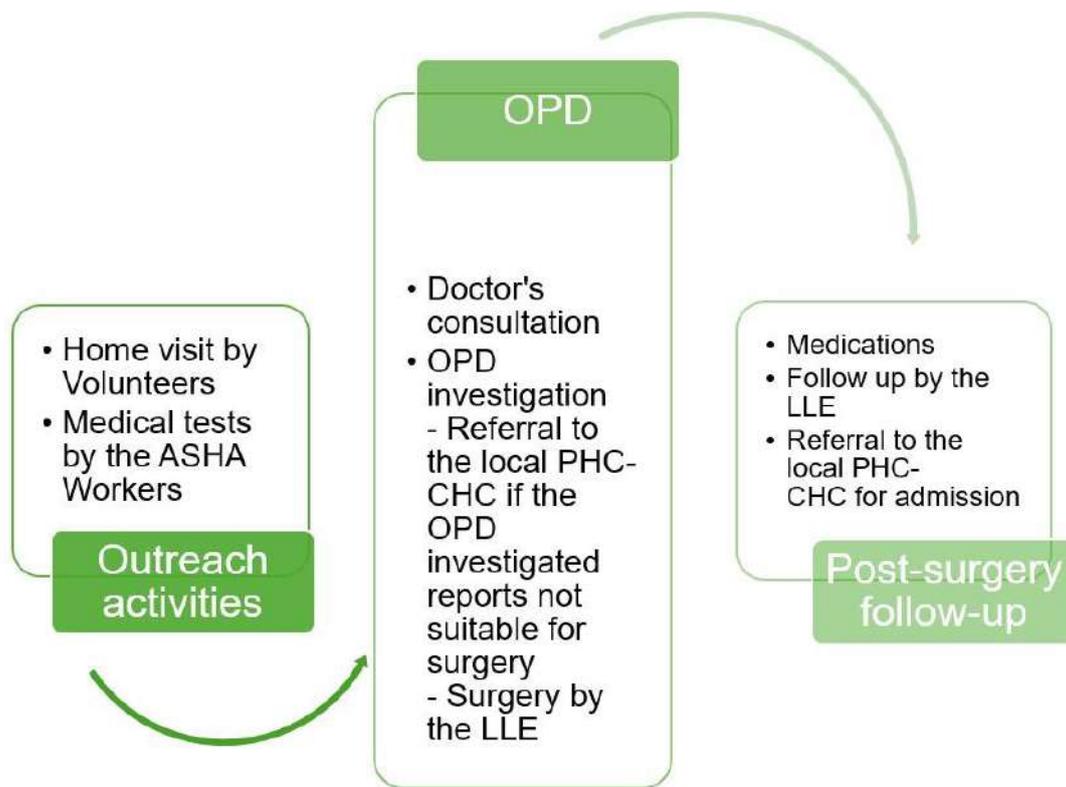
Dispensing kits and necessary healthcare products

<sup>6</sup> [Demography | Godda | India](#)

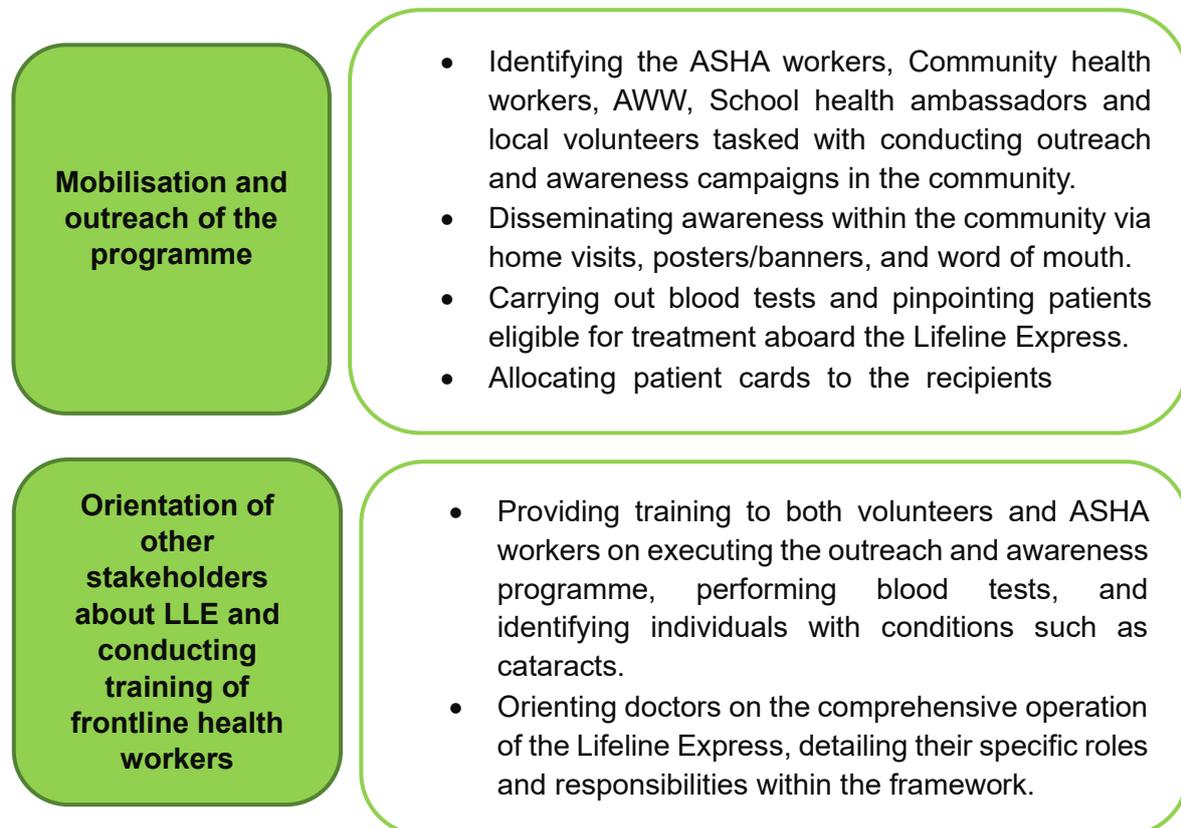
<sup>7</sup> [Demography | Godda | India](#)

<sup>8</sup> [Health | Godda | India](#)

## Patient Treatment and Surgery Procedure Followed by Lifeline Express



### 1.3 Major Programme Activities Conducted by the LLE:



**Provision of diagnostic, curative and surgical services to rural communities of Godda**

- Establishing the outpatient department (OPD) for consultations and treatment referrals.
- Establishing the provision of facilities for basic surgeries.
- Providing 4-5 ambulances for transporting patients from the OPD building to the Lifeline Express.
- Directing patients to nearby hospitals for post-operative care and additional treatment as

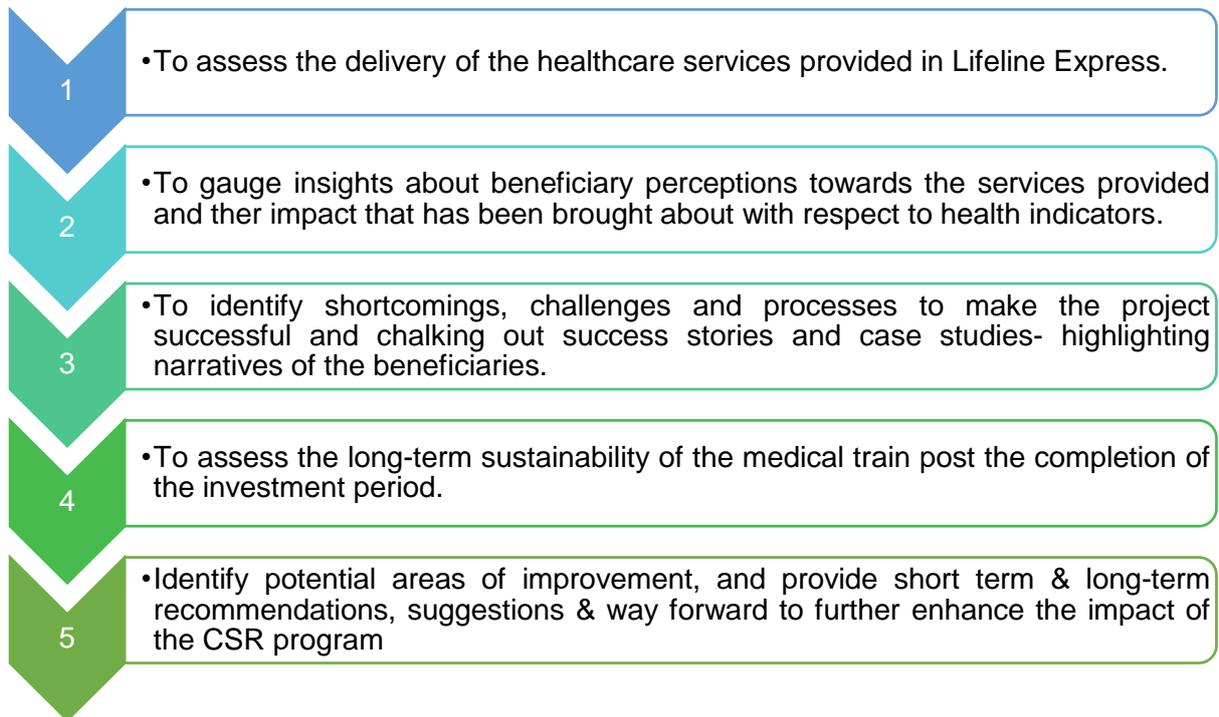


*Figure 1 Lifeline Express*

## Chapter 2: Design and Approach for Impact Assessment

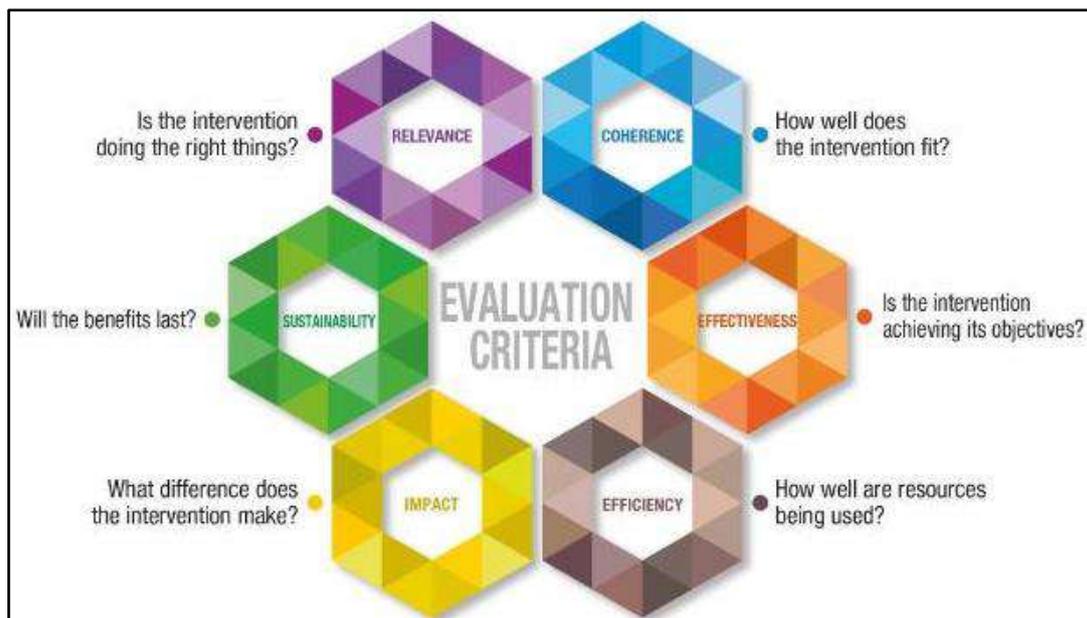


## 2.1 Objectives of the Study



## 2.2 Evaluation Framework

Given the objectives of the study to determine the effectiveness, efficiency, impact created, and sustainability of the project, the evaluation has used the OECD-DAC Framework. Using the criteria of the OECD-DAC framework, the evaluation has assessed the client's contribution to the results, while keeping in mind the diversity of factors that may be affecting the overall outcome. The social impact assessment hinges on the following pillars:



### Relevance

The extent to which intervention goals and design align with the needs, policies, and priorities of beneficiaries, as well as global, national, and partner/institutional contexts.

### Coherence

The extent to which other interventions within the country, sector, or institution either complement or hinder the effectiveness of the intervention, and vice versa.

### Effectiveness

The extent to which the intervention has accomplished or is anticipated to accomplish its objectives and produce its intended results.

### Efficiency

The extent to which the intervention efficiently and promptly delivers or is expected to deliver results cost-effectively.

### Impact

The extent to which the intervention has produced or is anticipated to produce significant positive or negative, intended or unintended, higher-level effects.

### Sustainability

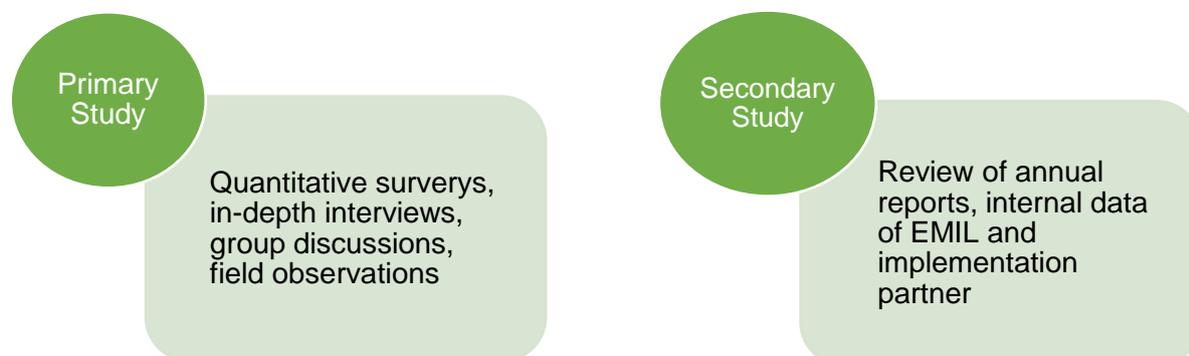
The extent to which the net benefits of the intervention continue, or are likely to continue.

## 2.3 Stakeholder Mapping

Primary Stakeholder	Mode of Data Collection	Secondary Stakeholder	Mode of Data Collection
<b>Beneficiaries (who received the treatment)</b>	80% Virtual Survey 20% Field Survey	<b>Doctors (one foreach type of treatment)</b>	In-depth Interview
		<b>Community Health Workers, Nurses</b>	In-depth Interview
		<b>ASHA workers</b>	In-depth Interview
		<b>Volunteers</b>	In-depth Interview
		<b>Lab Technician</b>	In-depth Interview
		<b>GovernmentOfficials (PHC/CHC officer, Quality Assurance Coordinator)</b>	In-depth Interview

## 2.4 Sampling

For the assessment, a two-pronged approach involving data collection and review has been chosen. The Secondary data was obtained from a literature review, while the primary data was obtained through qualitative and quantitative data collection methods.



The figure above illustrates the study approach used in data collection and review. The secondary study includes a review of annual reports, internal data, monitoring reports, government data & reports, and other studies and research by renowned organisations available in the public domain to draw insights into the situation of the area. The primary study comprises qualitative and quantitative approaches to data collection and analysis. The qualitative aspects include In-depth Interviews (IDIs), group discussions, and observation from the study area. The list of stakeholders is mentioned in the sampling section.

### 2.4.1 Quantitative Sampling

The sampling has been carried out on the beneficiary level. The table below shows the sampling strategy where we have considered a **Confidence Level of 95%** and a **7.5% Margin of Error for the project**.

S. No.	Primary Stakeholder for Quantitative Survey	Sample
1	Patients who underwent plastic surgery	1
2	Patients who underwent orthopaedics treatment	3
3	Patients who underwent dental treatment	26
4	Patients who underwent ENT treatments	32
5	Patients who underwent eye treatment	105
	<b>Total no. of patients</b>	<b>167</b>

*The sample is divided proportionately as per the treatment provided in the train. Interactions were dependent on the data availability provided by the implementation agency.*

**Limitation:** There was also a gynaecology patient involved in the study. Interaction with the patient was incomplete due to the patient's unavailability despite multiple contact attempts.

### 2.4.2 Qualitative Sampling

The table below gives the details of secondary stakeholders who were interviewed for the Godda location:

S. No.	Secondary Stakeholder for Qualitative Survey	Sample
1	Doctors	03
2	Nurses	03
3	ASHA workers	02
4	Volunteers	02
5	Quality assurance coordinator	01
6	Outreach volunteer coordinator	01
7	Block Programme Manager	01
	<b>Total</b>	<b>13</b>

### Limitations of the study

The team encountered minimal challenges during the study.

### 2.5 Theory of Change

Activity	Output <sup>9</sup>	Outcome	Impact
Mobilisation and outreach of the programme.	Number of basic health check-ups and outreach camps conducted.	Early identification of disorders.	<b>Knowledge building among the community on preventable disability.</b>
	Number of patient cards given.	Increased and better access to healthcare.	
Provision of diagnostic and curative and surgeries services to rural communities of Godda.	2290 people's treatment service provided for eye-related problems, A female was provided with screening and control of breast cancer.	Reduced burden of preventable disability.	<b>Better quality of life.</b>
	1420 people's treatment services provided for ENT-related problems		
	75 people's treatment services provided for bone and joint-related problems		
	27 people provided cleft lips and other plastic surgeries		
	786 people treatment services provided for dental problems		
	Number of patients screened /treated/ followed up for		

<sup>9</sup> The number was shared by the implementing team

	NCDs and referred to District Hospital		
Conducting orientation of doctors, nurses, workers/ volunteers on health care awareness	Number of frontline staff trained for outreach and awareness	Increased awareness in people about preventable disability	<b>Promotion of health awareness in marginalised communities</b>
	10 volunteers trained	Increase in knowledge about self-healthcare	

# Chapter 3: Finding of Impact Assessment Study



This section of the report includes detailed findings about the impact of the **226th Lifeline Express in Godda**. The following section indicates the insights drawn from the impact assessment study based on the **OECD-DAC framework's** standard parameters as outlined. The insights have been drawn adopting a 360-degree approach to data collection by gathering data through quantitative and qualitative methods from multiple stakeholders involved in the programme.

### 3.1 Beneficiary Profile

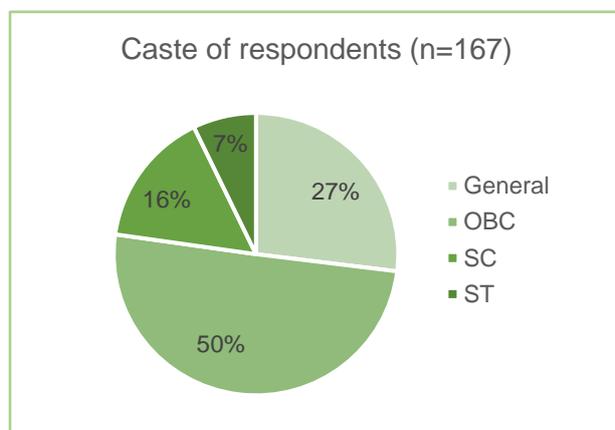


Figure 2 Caste of the Respondents

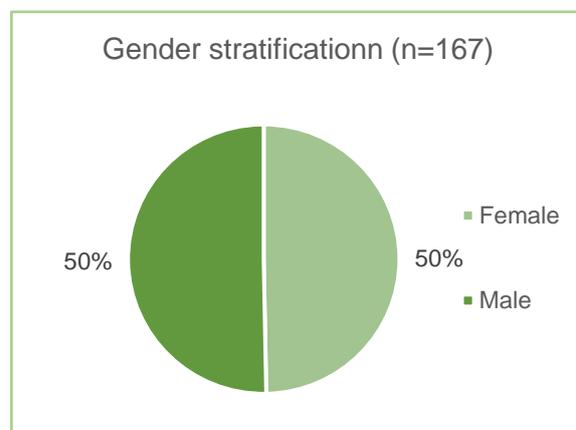


Figure 3 Stratification of Gender

With **50%** of the total comprising **females** and **50% males**, alongside **86%** of beneficiaries belonging to **backward categories**, the study reflects a substantial sample size. This indicates a thorough representation of socially marginalised individuals, incorporating gender considerations, within the programme.

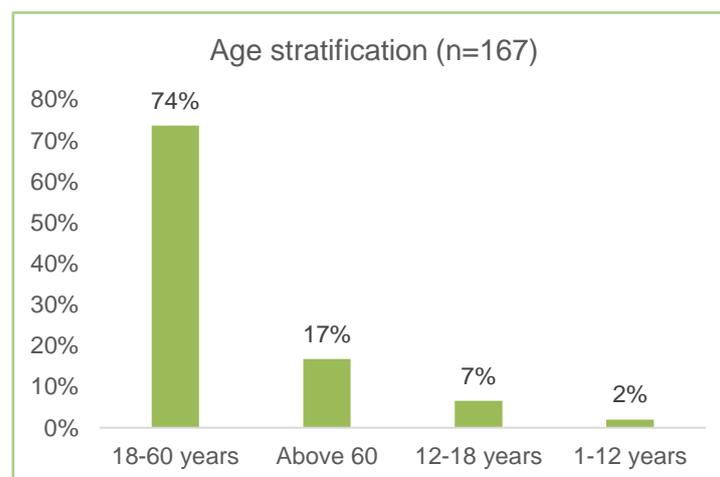


Figure 4 Age Stratification of the Respondents

A considerable number, accounting for **70% aged between 18-60 years**, with an additional **17% falling within the above 60 years** age range. This suggests that the programme has

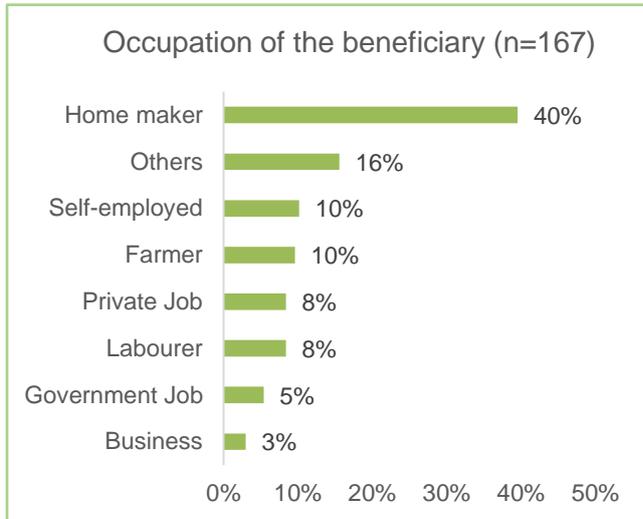


Figure 5 Occupation of Beneficiary

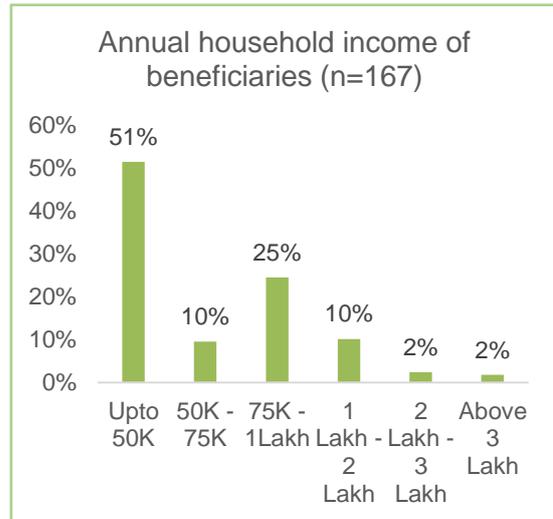


Figure 6 Annual household income of Beneficiaries

effectively assisted individuals across diverse age groups within the community, providing surgical support for various medical conditions.

The Lifeline Express project has made significant advancements in reaching individuals from diverse occupational backgrounds, with **40%** of beneficiaries **not engaged** in any employment, **10%** involved in **self-employment**, and another **10%** working as **farmers**. Moreover, a substantial **86%** of respondents reported an **annual income of 1 lakh**, highlighting the project's effectiveness in catering to economically diverse groups. This underscores the project's success in providing essential surgical support to those with limited financial means, thereby reducing the healthcare burden within the community.

Among all the respondents, a significant majority, comprising **63%**, underwent **cataract and refractive error surgery** for their eyes, highlighting the Lifeline Express project's impactful intervention in addressing vision-related health issues within the community. Additionally, **20%** received **ear surgery** through the programme, demonstrating its commitment to addressing auditory health concerns. Furthermore, **18%** of the beneficiaries benefited from **dental surgery** provided by the Lifeline Express followed by orthopaedic surgery (2%) underscoring

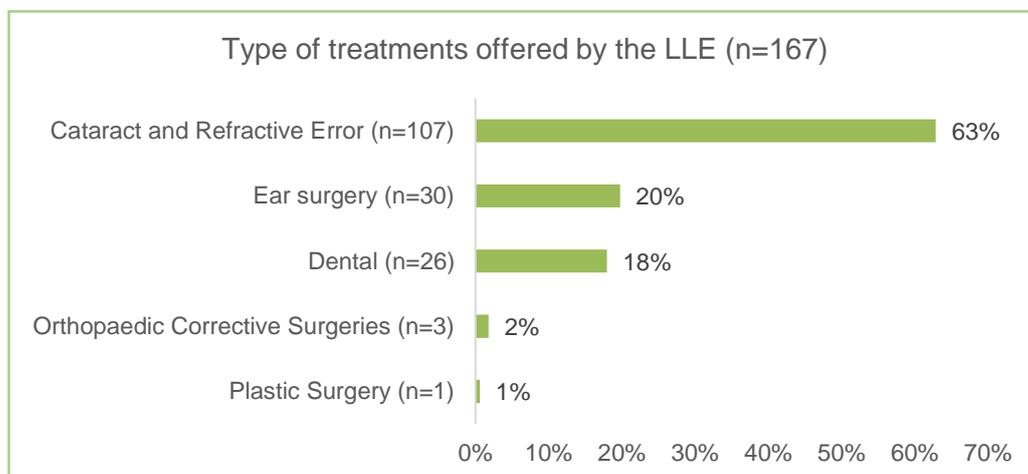


Figure 7 Type of treatments offered by the LLE

the project's comprehensive approach addressing to various healthcare needs, including dental care, among individuals in the community.



Figure 8 Different types of treatment provided in the LLE

### 3.2 Relevance

The primary objective of LLE was to provide healthcare services in underserved areas, where the population lack adequate medical facilities. This section examines the relevance of the Lifeline Express project to the needs of the local population.

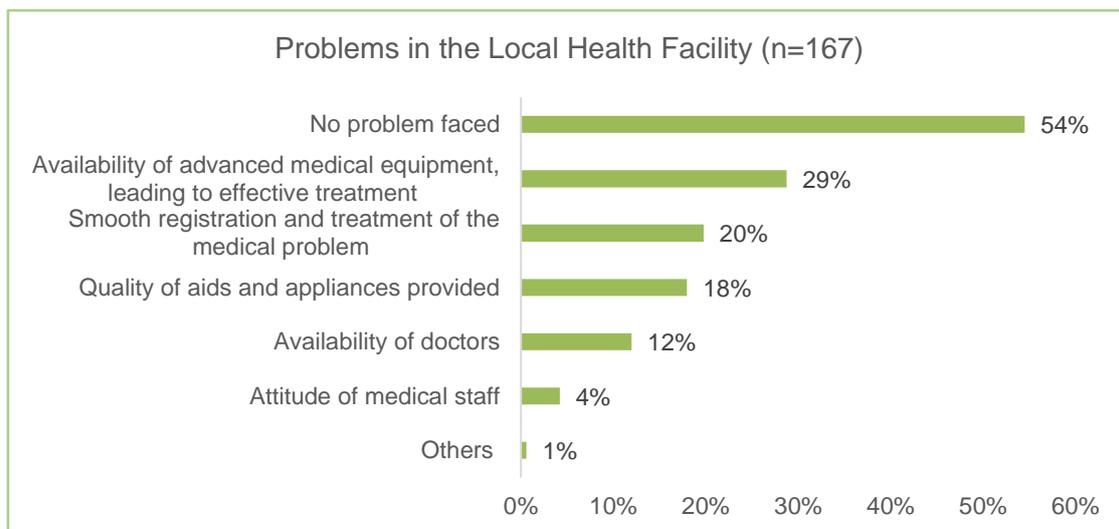


Figure 9 Problems in the local health facility

**49% of the beneficiaries were not enrolled in any insurance scheme and could not avail quality treatment**

**32% of the beneficiaries reported that they were suffering from health problems but were not able to get treatment, prior to LLE intervention**

**10% of beneficiaries having health problems did not have any knowledge about the disease/ health problem they were suffering from**

Of **54%** of respondents encountered **no difficulties** at the **local health facility**, while **29%** encountered challenges due to **insufficient advanced medical equipment**, affecting the effectiveness of treatment. Furthermore, **20%** expressed reservations regarding the seamless **registration** and treatment process for their **medical issues**, while **18%** encountered issues with the **quality of assistance** and **equipment provided**. Additionally, **12%** faced challenges related to **doctor availability**. These findings emphasise the crucial role of local-level enhancements (LLE) in improving healthcare accessibility.

The fact that **49% lacked insurance enrollment** highlights the urgent necessity for initiatives like the Lifeline Express, which provides vital healthcare services to uninsured individuals, ensuring equitable access to medical treatment.

**32%** of beneficiaries reported that they were suffering from health problems but were not able to get treatment. Additionally, **10%** of the beneficiaries suffering from **health problems** were **unaware of the reasons** for the same. The Lifeline Express doctors diagnosed them and provided suitable treatment, which makes these treatments extremely relevant for the beneficiaries.

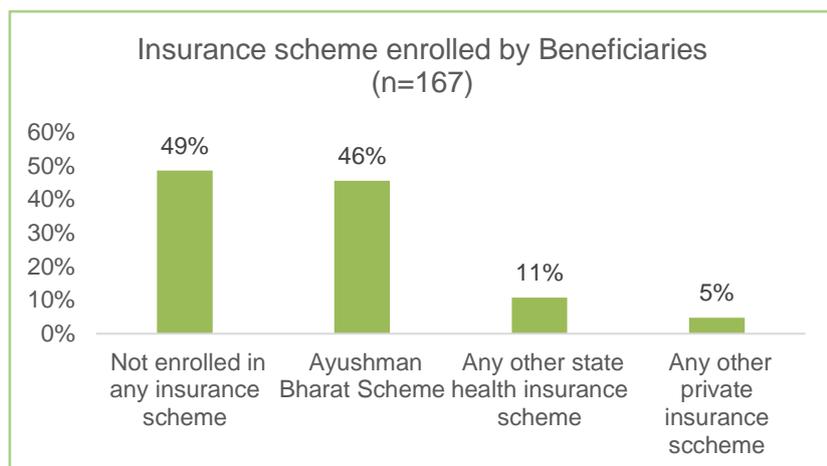


Figure 10 Insurance schemes availed by the respondents

*"I have witnessed firsthand the transformative impact of the LLE's free medical treatment and surgeries on economically challenged families in nearby villages. The support provided by the LLE has not only alleviated their physical suffering but has also instilled a newfound motivation to prioritise health and well-being. It's heartening to see families embrace medical care with renewed hope, all thanks to the opportunities afforded by the LLE."*

- Pritam Gadia – Volunteer



Figure 11 Interaction of the team member with the family of the beneficiary

The CSR initiative of EMIL effectively conducted health check-ups for individuals who were previously unaware of any underlying health issues, demonstrating its importance for the local community. This intervention played a pivotal role in facilitating regular medical check-ups and healthcare in the area.

### 3.3 Coherence

This section of the report examines the compatibility of the intervention with the sustainable development goals, existing policy frameworks, priorities of the country of intervention etc.

#### 3.3.1 Programme Alignment with SDGs

The United Nations adopted the Sustainable Development Goals (SDGs), also known as the Global Goals, in 2016 as a universal call to action to end poverty, protect the planet, and ensure that by 2030 all people enjoy peace and prosperity.

SDG Goals	SDG Targets	Alignment
	<p><b>Target 3.8</b></p> <p>Achieve universal health coverage, including financial risk protection, access to quality essential healthcare services and access to safe, effective, quality and affordable essential medicines and vaccines for all.</p>	<p>Lifeline Express was stationed in a region where people were facing difficulty in accessing health services, effective treatment, medicines and assistive devices were provided free of cost.</p> <p>Thus, the project led to the provisioning of quality health care and medicines for the community.</p>

	<p><b>Target 3c</b></p> <p>Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in the least developed countries and small island developing States.</p>	<p>Volunteers were trained to conduct medical tests and identify beneficiaries who can come and avail treatment in the Lifeline Express.</p> <p>This led to the development and retention of the health workforce.</p>
	<p><b>Target 3d</b></p> <p>Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks.<sup>10</sup></p>	<p>The beneficiaries were provided knowledge about various preventable disabilities, and when to get a check-up, thereby leading to knowledge building regarding health risk reduction among communities.</p>

### 3.3.2 Programme Alignment with ESGs

According to the Business Responsibility & Sustainability Reporting Format (BRSR) shared by the Securities & Exchange Board of India (SEBI)<sup>11</sup>, EMILs CSR Programme can be covered under the following principle:

<p><b>Principle 2</b></p> <ul style="list-style-type: none"> <li>•Business should provide goods and services in a manner that is sustainable and safe.</li> </ul>
<p><b>Principle 4</b></p> <ul style="list-style-type: none"> <li>•Business should respect the interests of and be responsive to all its stakeholders.</li> </ul>
<p><b>Principle 8</b></p> <ul style="list-style-type: none"> <li>•Business should promote inclusive growth and equitable development.</li> </ul>

### 3.3.3 Programme Alignment with CSR Policy

Schedule VII (Section 135) of the Companies Act, 2013 specifies the list of the activities that can be included by the company in its CSR policy<sup>12</sup>. The table below aligns the Lifeline Express Programme undertaken by EMIL with the MCA-approved activities.

Sub Section	Activities as per Schedule VII	Level of Alignment
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<sup>10</sup> <https://sdgs.un.org/goals/goal3>

<sup>11</sup> [https://www.sebi.gov.in/sebi\\_data/commondocs/may-2021/Business%20responsibility%20and%20sustainability%20reporting%20by%20listed%20entitiesAnnexure2](https://www.sebi.gov.in/sebi_data/commondocs/may-2021/Business%20responsibility%20and%20sustainability%20reporting%20by%20listed%20entitiesAnnexure2)

<sup>12</sup> [https://upload.indiacode.nic.in/schedulefile?aid=AC\\_CEN\\_22\\_29\\_00008\\_201318\\_1517807327856&rid=79](https://upload.indiacode.nic.in/schedulefile?aid=AC_CEN_22_29_00008_201318_1517807327856&rid=79)

i	Eradicating hunger, poverty, and malnutrition, <b>promoting health care, including preventive health care</b> and sanitation, including contributing to the Swachh Bharat Kosh, set up by the Central Government for the promotion of sanitation and making available safe drinking water.	<b>Completely</b>
ii.	Promoting education, including special education and employment <b>enhancing vocation skills</b> , especially among children, women, elderly and the differently abled and livelihood enhancement projects.	<b>Partially</b>

### 3.3.4. Programme Alignment with National Priorities

The Lifeline Express is aligned with the objectives of the following National Priorities:

National Mission	Objective	Alignment
<b>National Health Policy<sup>13</sup></b>	The primary aim of the National Health Policy, 2017, is to inform, clarify, strengthen and prioritise the role of the Government in shaping health systems in all its dimensions- investments in health, organisation of healthcare services, prevention of diseases and promotion of good health through cross-sectoral actions, access to technologies, developing human resources, encouraging medical pluralism, building the knowledge base, developing better financial protection strategies, strengthening regulation and health assurance.	The Lifeline Express operated with the main aim of addressing preventable disabilities by providing access to quality medical services in the remote district of Godda. Their focus was also on educating people about preventable disabilities. Thus, the operations of LLE are in complete alignment with the objectives of NHP.
<b>National Programme for Control of Blindness &amp; Visual Impairment (NPCBVI)<sup>14</sup></b>	NPCBVI operates with the primary objective of reducing the backlog of blindness through the identification and treatment of the blind at primary, secondary, and tertiary levels based on an assessment of the overall burden of visual impairment in the country. The key focus is to enhance community awareness of eye care and lay stress on preventive measures.	One of the key treatments provided in the Lifeline Express was that of eye-related problems, with the main aim of treating preventable disabilities such as cataract. Thus, the operations of LLE are in complete alignment

<sup>13</sup> <https://main.mohfw.gov.in/sites/default/files/9147562941489753121.pdf>

<sup>14</sup> <https://npcbvi.mohfw.gov.in/>

	This is done through strengthening the existing and developing additional human resources and infrastructure facilities for providing high-quality comprehensive Eye Care in all districts of the country.	with the objectives of NPCBVI.
<b>National Programme for The Prevention &amp; Control of Deafness (NPPCD)<sup>15</sup></b>	The main aim of this programme is to prevent avoidable hearing loss arising from disease or injury. Early identification, diagnosis, and treatment of ear problems responsible for hearing loss and deafness are the focus areas of NPPCD.	Ear-related treatments were provided in the Lifeline Express for 4 days – covering identification, diagnosis, and treatment for problems like hearing loss, deafness, etc. Thus, operations of LLE are in complete alignment with the objectives of NPPCD
<b>National Programme for Prevention &amp; Control of Cancer, Diabetes, Cardiovascular Diseases &amp; Stroke (NPCDCS)<sup>16</sup></b>	To prevent and control major NCDs, the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) was launched in 2010 with a focus on strengthening infrastructure, human resource development, health promotion, early diagnosis, management and referral.	There were screening facilities provided for breast and cervical cancer for 5 days. Thus, the operations of LLE are in partial alignment with the objectives of NPCDCS.

### 3.4 Effectiveness

This section of the report analyses the extent to which the intervention has achieved its objectives. The effectiveness of the project is analysed concerning the major objective of reducing the burden of preventable disability through providing medical and surgical services in the LLE hospital.

49% of the beneficiaries were highly satisfied with the improvement in their medical problem

68% of the beneficiaries were extremely satisfied with the treatment given by the doctor

<sup>15</sup> <https://main.mohfw.gov.in/sites/default/files/51892751619025258383.pdf>

<sup>16</sup> <https://nhm.gov.in/index1.php?lang=1&level=2&sublinkid=1048&lid=604>

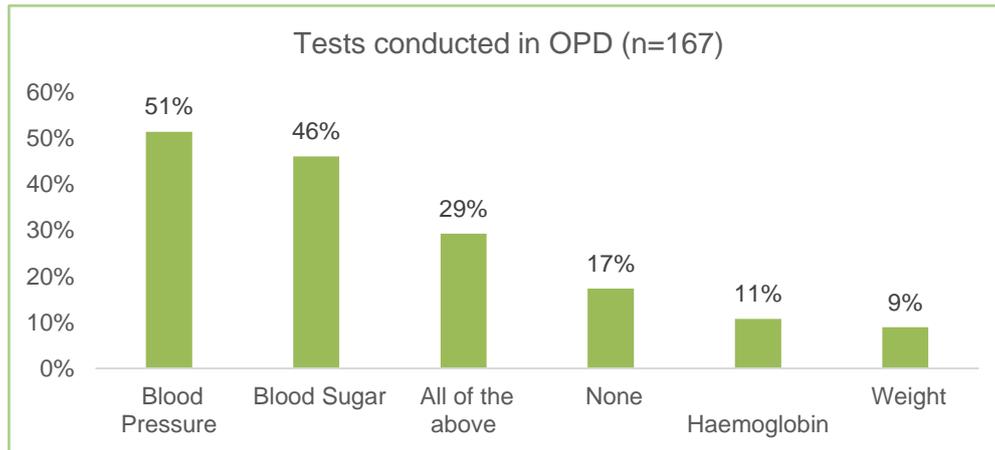


Figure 12 Tests conducted in OPD by the LLE team

A crucial component of the pre-operative process involves a series of diagnostic tests. These assessments serve two purposes: to confirm the underlying medical condition and to evaluate the patient's fitness for surgery. This process is carried out for both existing patients who possess a patient card and for individuals who learned about Lifeline Express through other means, such as posters, village announcements and word of mouth. Among the patients who reported that there were tests conducted in the OPD, Blood Pressure, Blood glucose, and Haemoglobin were the most common tests.

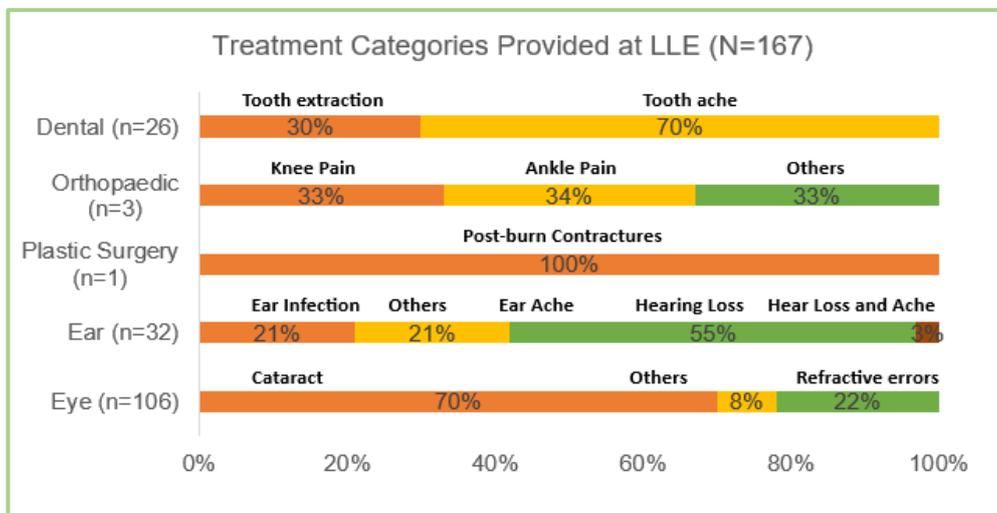


Figure 13 Treatment categories provided by the LLE team

The Lifeline Express offers treatment for a range of medical conditions, including dental, orthopaedic, plastic surgery, ear, and eye ailments. Skilled doctors from various regions of the country bring their expertise to the train, ensuring specialised care tailored to address each specific health issue.

An average of **9%** of all patients were given **surgery** in the Lifeline Express, and **49%** of them were **highly satisfied with the improvement** in their medical problems. The patients were highly satisfied with the treatments given by the doctor for dental, gynaecological and

orthopaedic surgeries whereas, there was scope for improvement for the eye and ear surgeries provided by the doctors.

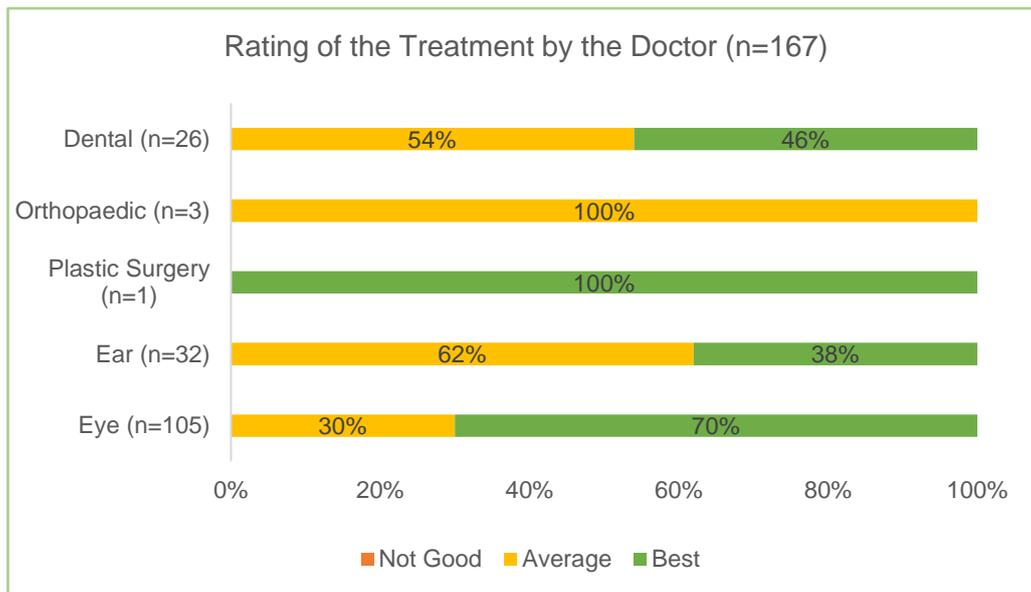


Figure 14 Rating of the treatment by the doctor

Among the respondents who underwent **plastic surgery**, each of them reported having the **best experience** with their treating doctor. Similarly, all the **orthopaedic patients** expressed satisfaction with their doctor, followed by **70% of eye patients** and **46% of dental patients**.

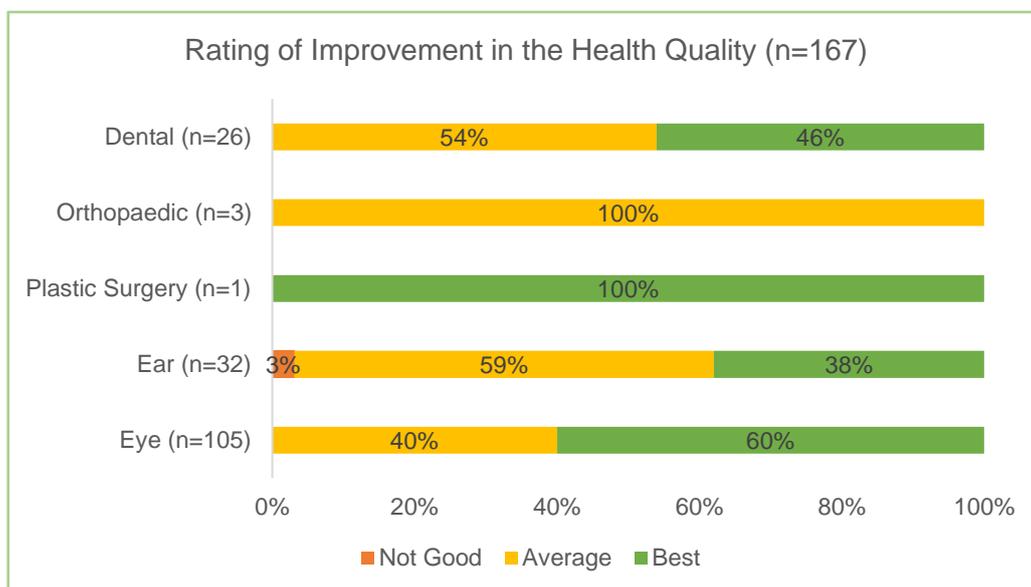


Figure 15 Rating of improvement in the health quality

Post-treatment, the beneficiaries were provided with various assistive devices such as callipers, hearing aids, spectacles, etc. This was provided free of cost. All respondents (**100%**) who underwent **dental procedures** expressed **high satisfaction** with the quality of aid provided. Followed by **95% of ear patients** and **79% of eye patients**. Additionally, **all the respondents** who underwent **orthopaedic surgery** reported being **moderately satisfied** with the quality of aid received.

The rating scale was categorised as a score of 1 as "not good," and ratings 2 and 3 are grouped as "average." Ratings of 4 and 5 are combined and considered as a rating of "best".

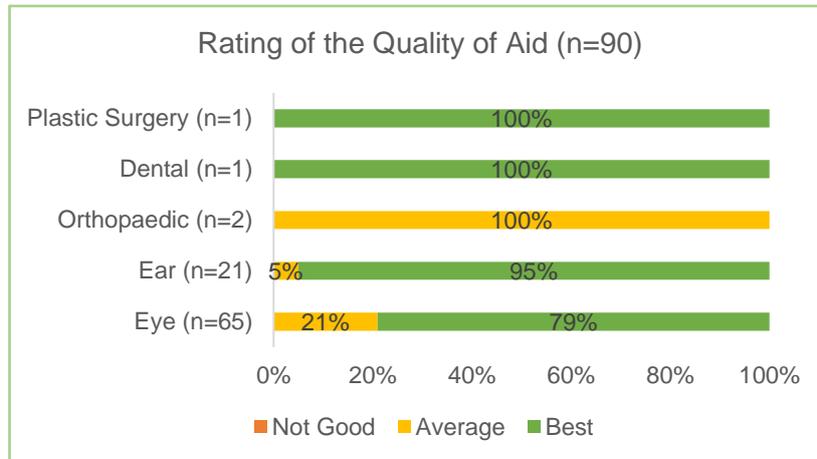


Figure 16 Rating the quality of aid

**Post-Treatment Recovery:** After undergoing surgery, individuals were sent to nearby local hospitals, like CHCs and PHCs for rest and recovery.

Each patient receives careful attention during treatment at the Lifeline Express. In cases where additional care is necessary after surgery, doctors refer patients to nearby hospitals. There, they are closely monitored for any potential side effects or complications.



Figure 17 Procedures for eye OPD by the LLE team

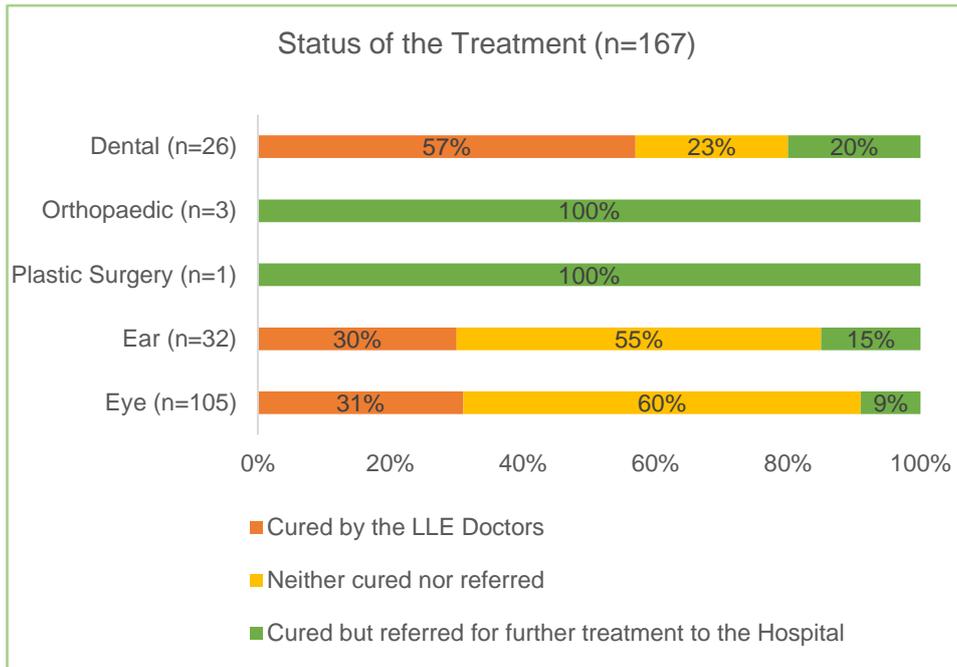


Figure 18 Status of treatment by the LLE

An average of **24%** of the people were **completely cured by the doctors in the Lifeline Express**. In **42%** of the cases, the doctors **recommended** the patients who needed follow-up treatment to the **nearby health facilities** because the Lifeline Express stays at a particular location for only 21 days. However, **34%** of the people felt that their **problem was not addressed**.

Overall, the health services were efficiently delivered, perfectly aligning with the objective of the LLE CSR intervention. The nursing staff and doctors involved in the programme ensured a seamless treatment process without any obstacles.



Figure 19 Post-treatment instruction to the patients

### 3.5 Efficiency

This section assesses the extent to which the intervention delivered results in an economical and timely manner.

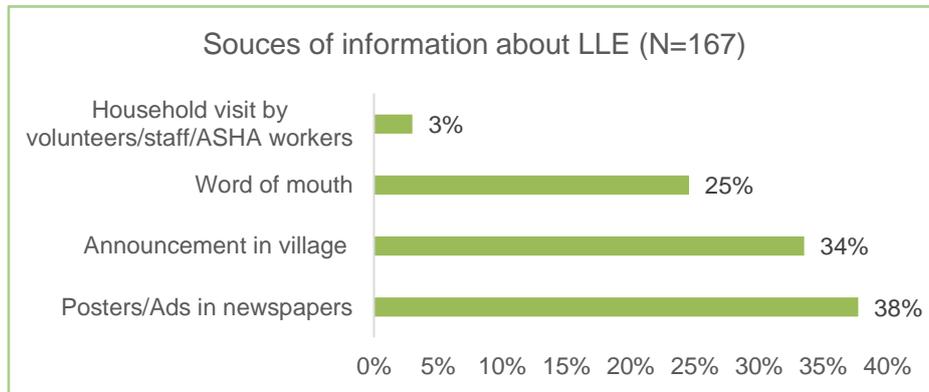


Figure 20 Sources of information about LLE

To maximise the Lifeline Express programme's outreach, multiple channels were utilised for advertising. According to surveyed beneficiaries, the most effective mediums of outreach were posters and newspaper advertisements (**38%**), announcements in villages (**34%**), word of mouth (25%) and household visits by volunteers (4%).

**89%** of the beneficiaries reported experiencing **uninterrupted treatment** processes, unaffected by interruptions in electricity or cleanliness issues.

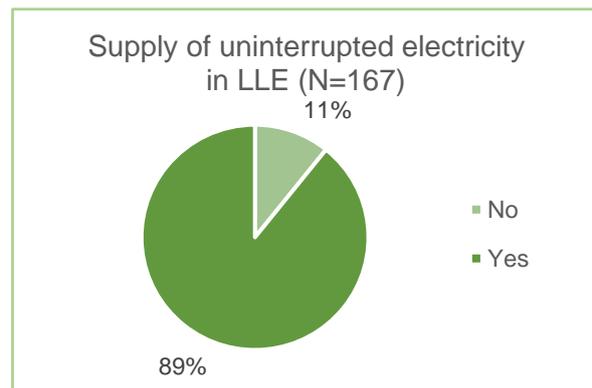


Figure 21 Supply of uninterrupted electricity in LLE

Once the patient is provided surgery/treatment, he/she is given a date and time for follow-up on the treatment. In cases where the treatment is given towards the end of the tenure of the Lifeline Express, the patient is usually referred to a nearby hospital, The LLE has tie-ups with local hospitals to ensure that proper follow-up is done for the patient.

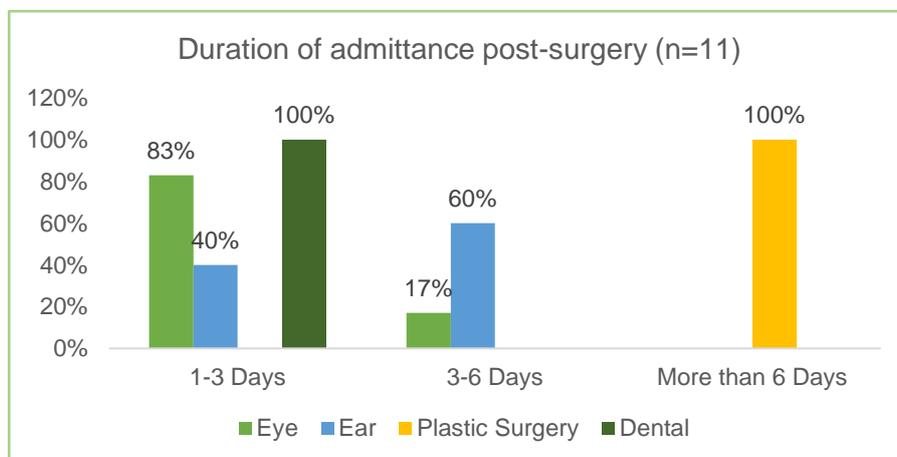


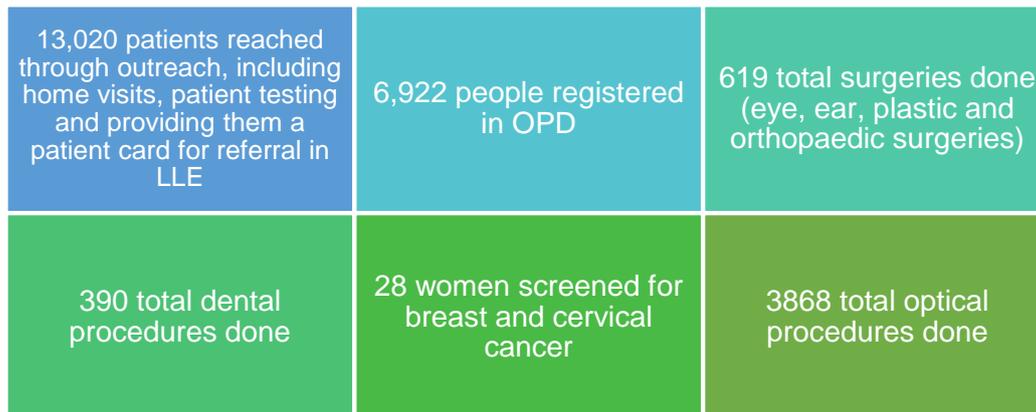
Figure 22 Duration of admittance post-surgery

For almost all the respondents of dental surgery patients, the process from surgery to post-operative monitoring was completed in 3 days, whereas for plastic surgery patients, the process took more time to complete.

**To ensure maximum utilisation of resources, the LLE staff streamlined the entire process – outreach, OPD registration, treatment and post-treatment follow-up. Inferring from the graphs above, it can be said that high levels of efficiency were maintained during the implementation of LLE.**

### 3.6 Impact

17



Of all the beneficiaries, **52%** were assigned a **patient card** for reference in the Lifeline Express.

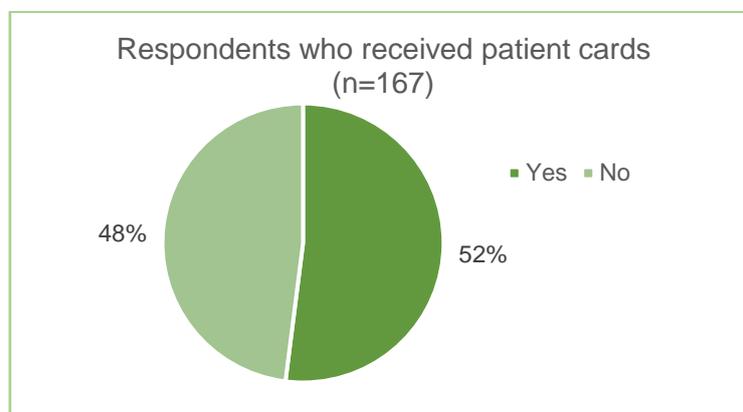


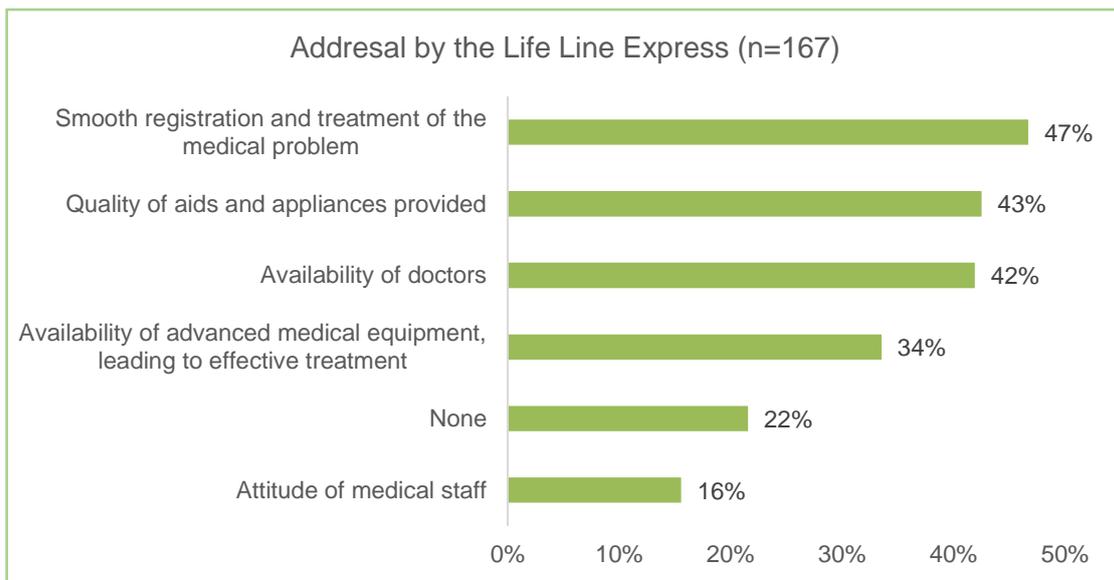
Figure 23 Respondents who received patient card

The visit of the volunteers aimed to identify patients who would require additional treatment at the Lifeline Express. Volunteers conducted various tests, such as blood pressure, blood glucose, haemoglobin, and weight measurements. Additionally, volunteers identified patients with preventable disabilities, including those with cataracts identified following basic eye and ENT check-ups.

This shows the CSR intervention’s efforts to maximise the impact, by undertaking door-to-door reach of the LLE programme and imparting knowledge about preventable disabilities.

<sup>17</sup> As provided in the Impact India Report 2023

The impact assessment of the Lifeline Express indicates significant improvements in healthcare accessibility and quality, as reported by the beneficiaries. The most notable advancement is in the streamlined registration and treatment process, appreciated by **47% of respondents**. Furthermore, **43%** of beneficiaries highlighted the **quality of aids and appliances** provided, while **42%** emphasised the increased **availability of doctors**. The availability of **advanced medical equipment**, which enhances the effectiveness of treatment, was recognised by **34%** of respondents, followed by the attitude of the medical staff which received positive feedback from **16%** of beneficiaries



*Figure 24 Addressal by the Lifeline Express*



*Figure 25 Use of various advanced medical equipment by the LLE team.*

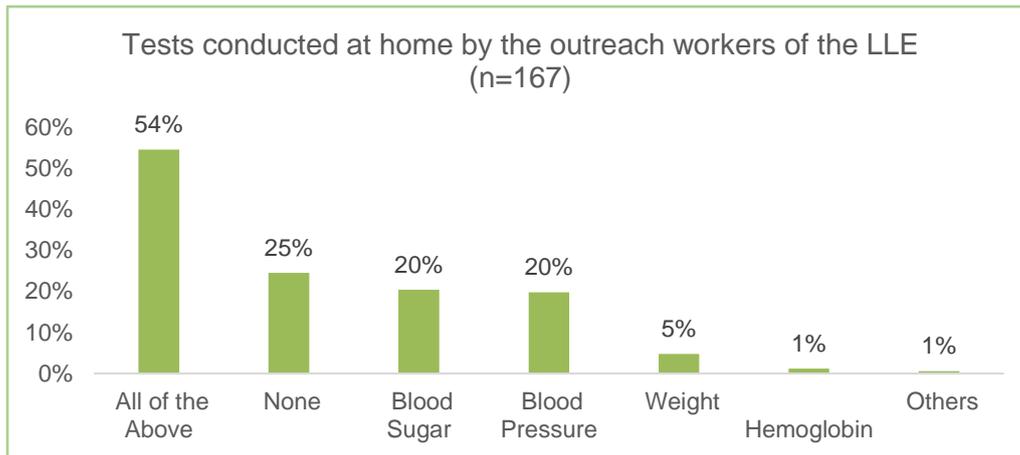


Figure 26 Tests conducted at home by LLE

EMIL's CSR initiative facilitated door-to-door provision of basic health check-ups to enable early patient identification. Among the various tests conducted at home, the highest percentages of patients underwent **all the tests (54%)**, **blood sugar (20%)**, and **blood pressure (20%)** examinations. Following these tests, volunteers issued patient cards for receiving treatment at the Lifeline Express.



Figure 27 Tests conducted during Outreach Activities

Of the total studied beneficiaries who were provided with treatment, **12%** of the patients **received surgery**.

Among all patients who received **cataract and refractive correction** treatments, **60%** had surgery. Additionally, **25%** of **ENT** patients, **10%** of **dental** patients underwent surgery and **5%** of **plastic surgery**.

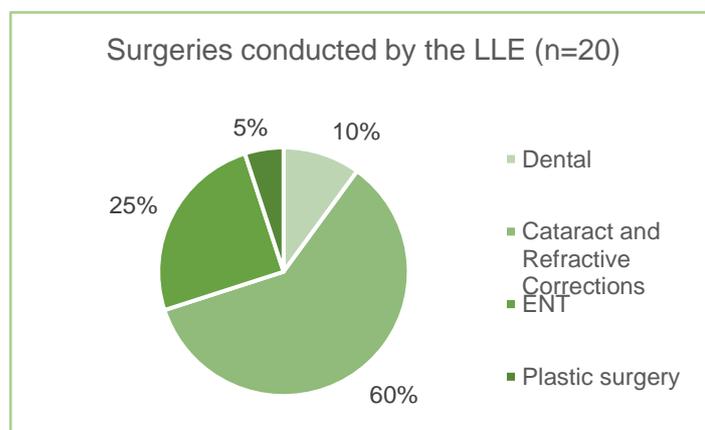


Figure 28 Surgeries conducted by the LLE

The table below shows the number of surgeries conducted for each treatment:

Surgery conducted by the LLE Team	Total number of patients who received treatment at the LLE	Total number of surgeries
Cataract and refractive surgeries	105	12
ENT Surgeries	32	5
Dental Surgeries	26	2
Plastic Surgeries	1	1
Orthopaedic Surgeries	3	0
<b>Total</b>	<b>167</b>	<b>20</b>

On average, **54%** of beneficiaries who underwent treatment or surgery received **assistive aids**, provided free of charge. The CSR intervention guaranteed the availability of these aids to maximise the impact of treatment. Beneficiaries were provided with aids such as spectacles, hearing aids, and callipers to support their treatment and ensure the complete resolution of preventable disabilities.

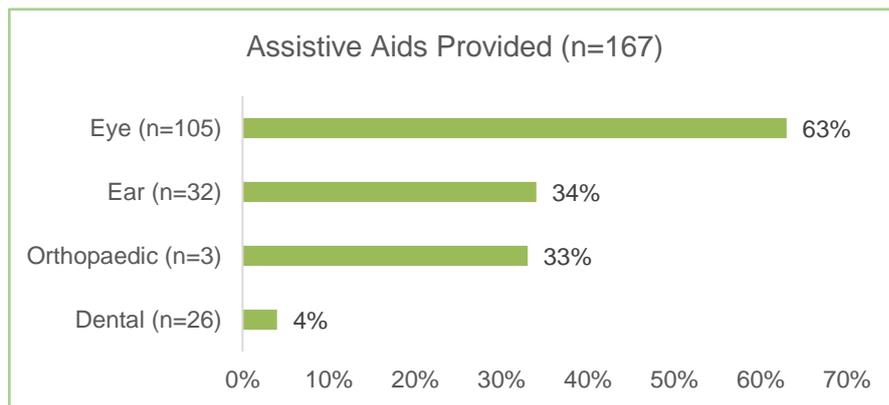


Figure 29 Assistive aids provided by the LLE team



Figure 30 Paediatric orthopaedic treatment by the LLE doctor

### 3.7 Sustainability

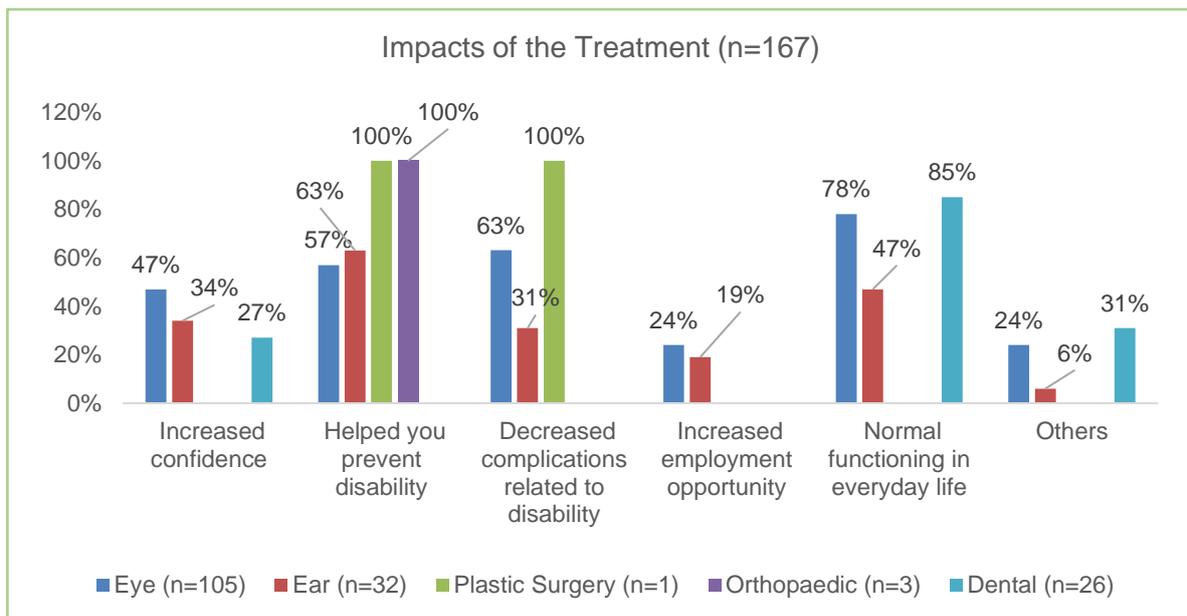


Figure 31 Impacts of the treatment by the LLE

The Lifeline Express successfully heightened community awareness about preventable disabilities. On average, **64%** of the beneficiaries stated that the treatment aided in **preventing disability**, while **42%** of the beneficiaries mentioned a **restoration to their normal daily functioning**. Furthermore, **39%** reported a reduction in **disability-related complications**.

Moreover, **26%** of them experienced **increased confidence** and actively supported others in recognising and **pursuing treatment for similar disabilities**. This awareness campaign was predominantly facilitated by volunteers and doctors associated with the Lifeline Express.

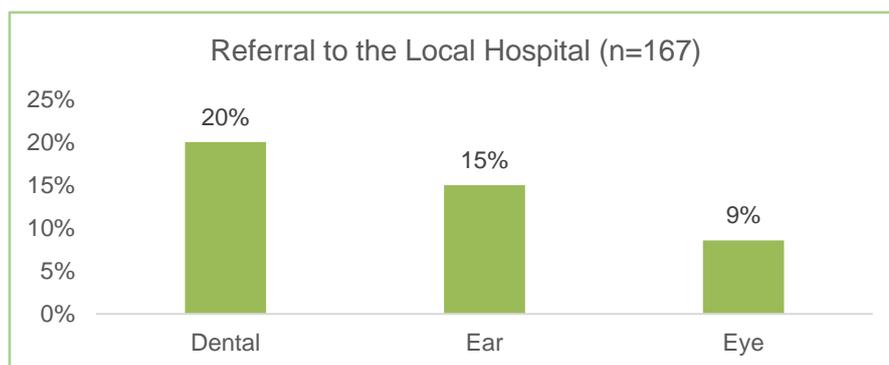


Figure 32 Referral to the local hospital by the LLE team

During its 21-day stay in Godda, the Lifeline Express witnessed patients achieving complete recovery, while others requiring further treatment were referred to local hospitals. This approach ensures comprehensive treatment, thereby advancing the sustainability of the CSR intervention's overarching objective. Through its partnerships with local hospitals and doctors, Lifeline Express ensures the fulfilment of every patient's treatment journey.

### 3.8 Impact Stories

#### Impact Story 1: Pathargram: From Doubt to Trust in Healthcare

Chanda Devi, a 30-year-old ASHA worker, had been sharing how, in the predominantly farming community of Pathargram, Godda, access to healthcare had once been a distant prospect. Scepticism had initially clouded perceptions of the Lifeline Express (LLE) free medical program, exacerbated by a lack of awareness about modern healthcare practices and mistrust towards ASHA workers. However, through targeted community engagement efforts, the LLE had successfully dispelled doubts, showcasing tangible treatment successes and empowering ASHA workers as trusted intermediaries. As awareness increased and trust built up, more villagers embraced the program with confidence, seeking timely medical assistance. Today, Pathargram stands as a testament to the transformative power of community engagement, where free, quality healthcare is not just a promise but a tangible reality.



Figure 33 Chanda Devi, ASHA Worker, Godda

*“I have witnessed firsthand the transformative impact of the LLE's free medical treatment and surgeries on economically challenged families in nearby villages. The support provided by the LLE has not only alleviated their physical suffering but has also instilled a newfound motivation to prioritise health and well-being. It's heartening to see families embrace medical care with renewed hope, all thanks to the opportunities afforded by the LLE.”*

- Pritam Gadia – Godda (Volunteer, 36)



Figure 34 Interaction of the team member with the beneficiary

## Impact Story 2: Rama Devi's New Vision: A Story of Hope and Health

Rama Devi resides with her family in the Godda district. She is a widow with a daughter who is happily married. Due to her vision impairment, Rama Devi faces difficulty in performing household tasks. When the LLE Project's medical train came to their locality, Rama Devi learned about it through community outreach efforts. At the camp, she underwent a comprehensive health check-up, including tests for blood pressure, and blood sugar levels, and an eye examination. As a result, she received a pair of glasses that significantly improved her vision. Rama Devi expressed her appreciation for the excellent treatment and care provided by the medical team. The quality of the glasses allowed her to perform household chores more efficiently and even engage in additional sewing work for extra income. Moreover, the medical team also addressed her chest pain issue and provided valuable guidance. Rama Devi praised the LLE Project for its support, emphasising how it had positively impacted the lives of many disadvantaged individuals like herself, enabling them to lead healthier and more productive lives.



Figure 35 Picture of a Beneficiary



Figure 36 Interaction of the team member with the Programme Coordinator

### Impact Story 3: Balram's New Hearing Journey

Balram Shah, aged 65, had been grappling with poor hearing for much of his life, which had created significant challenges in his daily interactions. Hindered by financial constraints and a lack of access to quality medical care, Balram had struggled to find effective solutions. However, with the implementation of the LLE program, Balram's health journey had taken a remarkable turn. The availability of free, high-quality medical services within the community had provided Balram with newfound hope and opportunities. Now, Balram joyfully shares how he can once again engage fully in conversations and reconnect with loved ones, thanks to the transformative impact of the LLE program.



*Figure 37 Interaction of the team member with the beneficiaries*

### Case Study 1: (Outreach Volunteers' Coordinator)

Mr Rinku Kumar has been associated with Lok Sabha Trust for the last 3-4 years. To ensure effective outreach, the LLE staff got in touch with the local NGOs, such as the Lok Sabha Trust. The Lifeline Express team chose Mr. Rinku to lead the outreach volunteers because he knows the community well. He, along with 20 volunteers, got training to do outreach work and basic tests like checking blood pressure and sugar levels. Mr Rinku explained that volunteers went to different villages in pairs to help as many patients as possible.

The Lifeline Express staff appointed Mr. Rinku as the outreach volunteers' coordinator due to his excellent rapport with the community. Along with 20 volunteers, Mr Rinku received training to conduct outreach for the Lifeline Express and perform basic tests such as blood pressure and blood sugar checks. He noted that the volunteers, working in pairs, visited various villages to reach as many patients as possible.

Mr. Rinku was highly supportive throughout the Lifeline Express initiative and expressed his willingness to participate in such efforts again. He believes that good health is the foundation of a happy life and felt honoured to play a crucial role in the Lifeline Express. By identifying and treating those in need, he helped prevent disabilities and improve lives.

### **Case Study 2: (Dr Achala Kamath, E.N.T)**

Dr Achala Kamath, an ear care specialist, participated in a healthcare program organised by the Lifeline Express (LLE) team. This initiative aimed to provide specialised medical care to underserved communities, offering critical treatments and healthcare services that would otherwise be inaccessible.

Dr Kamath expressed high satisfaction with the arrangements and organization of the team. She noted that the program was well-managed, equipped with all necessary treatment facilities, and staffed with trained personnel. This efficient setup allowed her to conduct successful treatments for a large number of patients.

The program saw a significant influx of patients on the very first day. Dr Kamath highlighted the patients' enthusiasm and engagement, as they actively asked questions and discussed their health concerns. This interaction was crucial for accurate diagnosis and effective treatment.

Doctors, including Dr Kamath, provided referrals to local health facilities for patients requiring long-term care. This approach ensured that recurring health issues could be managed locally, offering a sustainable solution for continuous patient care. She suggested that it would be beneficial for the LLE staff to conduct preliminary vital

checks, such as blood pressure and blood sugar levels before patients meet the doctors. This would streamline the process, allowing for the treatment of more patients. Additionally, she recommended the inclusion of trained anaesthetists to help calm patients, improving the overall treatment experience.

The program was highly successful in delivering healthcare services to people who lacked access to such facilities. Dr Kamath commended the Lifeline Express for its impactful service and strongly recommended its continuation in the next fiscal year.

### **Case Study 3: (Dr Priti H. Nirmal, Orthopaedic)**

Dr Priti H. Nirmal, an ophthalmologist, recently participated in a healthcare program aboard the Lifeline Express (LLE) train. Dr Nirmal commended the LLE team for their excellent functioning and the utilisation of new medical equipment, machinery, and medications for treatment. The program encountered a remarkable turnout, with approximately 700-800 patients seeking treatment on the first day alone.

Among the patients treated, several were diagnosed with cataracts. Dr Nirmal successfully conducted cataract surgeries, greatly improving the vision and quality of life for these individuals. The patients expressed satisfaction with the treatment provided, highlighting the effectiveness of the LLE initiative in addressing critical eye health issues.

For patients requiring post-treatment services, referrals were made to local health facilities. This ensured continuity of care and support for those in need of ongoing medical attention beyond the scope of the LLE train services.

The successful diagnosis and treatment of cataracts, coupled with the provision of referrals for post-treatment care, underscored the positive impact of the LLE eye care initiative.

Patients benefited not only from immediate medical interventions but also from access to follow-up services, improving their long-term health outcomes. Dr Nirmal's participation in the Lifeline Express program exemplifies the effectiveness of mobile healthcare initiatives in reaching underserved populations and addressing critical healthcare needs.

# Chapter 4: **Brand Equity**



## 4.1 Brand Equity- Overview

Brand Equity refers to a value premium that a company generates from a product or service through its name recognition. Organisations can enhance their brand value and reputation by providing service that is reliable, efficient, memorable, and of superior quality. In this study, we have determined the brand equity of the Aditya Birla – EMIL Group.

## 4.2 Brand Awareness and Familiarity

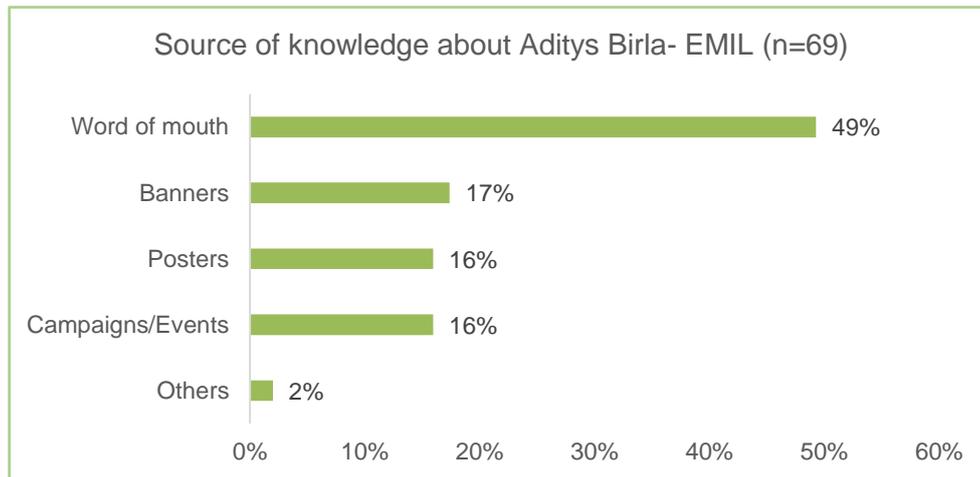


Figure 38 Source of knowledge about Aditya Birla- EMIL

The majority of the beneficiaries reported that they learned about Aditya Birla-EMIL through word of mouth, followed by banners, posters, campaigns and others.

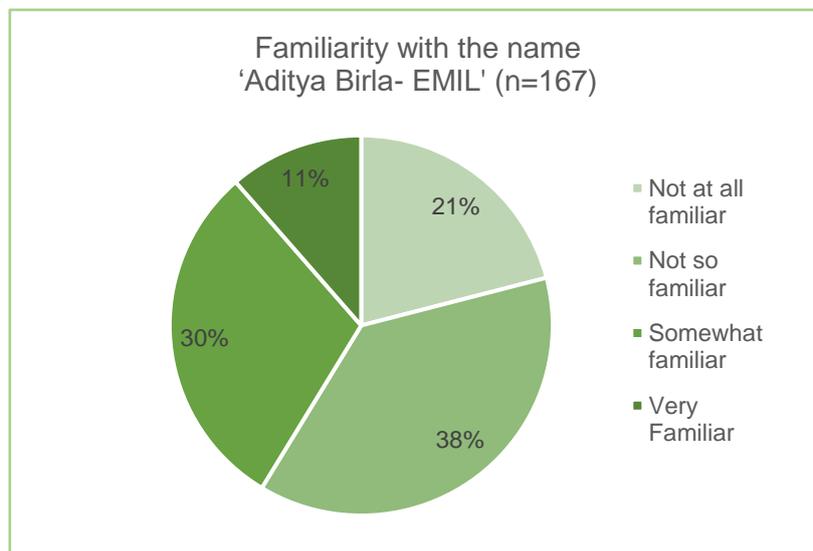


Figure 39 Familiarity with the name Aditya Birla

The beneficiaries were asked if they were aware and familiar with the brand. **11% of the beneficiaries reported that they were very familiar with the brand and 30% of them were somewhat familiar with the group's name.** This was because the beneficiaries had seen the logo on posters and banners in OPD centres.

**IMPACT INDIA FOUNDATION**

**226वां लाईफलाइन एक्सप्रेस प्रोजेक्ट**  
**पोड़ियाहाट रेलवे स्टेशन, पोड़ियाहाट**  
**जिला-गोड्डा (झारखण्ड)**

**निःशुल्क स्वास्थ्य कार्यक्रम : 15 नवम्बर से 05 दिसम्बर 2022 तक**

**ओ. पी. डी. समय :- 09 बजे से 04 बजे तक**

कार्यक्रम अनुसूची की क्रमिकता	ओ. पी. डी. / पूर्ण शब्द चिकित्सा	अपरेशन
आँख की जाँच एवं गोठियाबिन्द की सर्जरी	15 से 20 नवम्बर 2022	16 से 21 नवम्बर 2022
कान की जाँच एवं कान की सर्जरी	22 से 26 नवम्बर 2022	23 से 27 नवम्बर 2022
मुड़े हुए पैर का परिक्षण एवं सर्जरी (14 साल से निचे)	28 से 30 नवम्बर 2022	29 नवम्बर से 01 दिसम्बर 2022
कटे-फटे जोड़ की जाँच एवं सर्जरी	28 से 30 नवम्बर 2022	29 नवम्बर से 01 दिसम्बर 2022
दोँस की जाँच एवं उपचार	30 नवम्बर से 05 दिसम्बर 2022	30 नवम्बर से 05 दिसम्बर 2022
स्तन और ग्रीवा कैंसर जागरूकता एवं परिक्षण	15 से 20 नवम्बर 2022	

**नोट :-** 1. बरीज अपने साथ आधार कार्ड या अन्य पहचान पत्र अवश्य लायें।  
 2. भर्ती करने वाले रोगियों के साथ केवल एक व्यक्ति को सहयोग के रूप में अनुमति दी जावेगी।

**हेल्पलाइन नं०- 9820303974**


**जिला प्रशासन, गोड्डा**

Figure 40 Poster for information about the Lifeline Express in Godda

### 4.3 Experience with the Brand

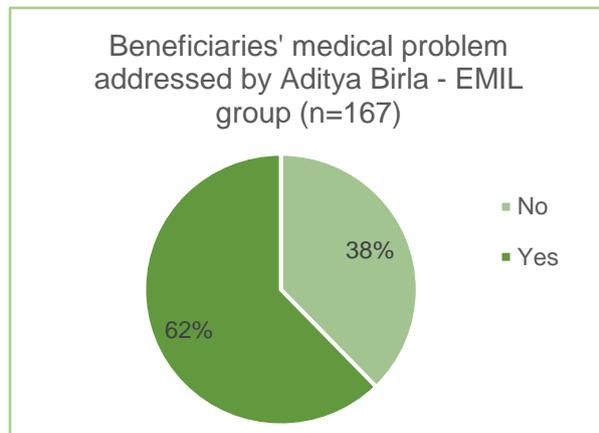


Figure 41 Address of the medical problem by LLE team

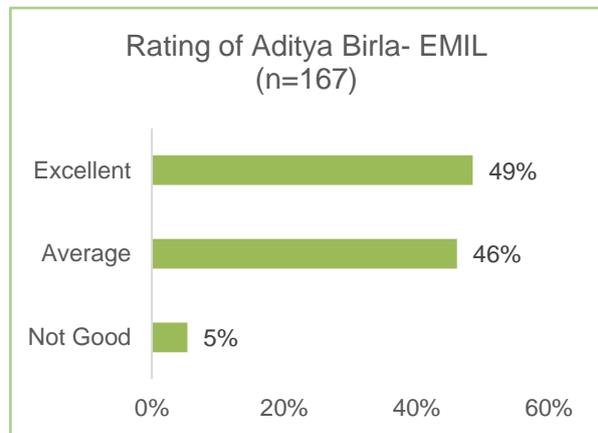


Figure 42 Rating of Aditya Birla

**62%** of the beneficiaries reported that their grievances/medical problems were **addressed by the Lifeline Express team**, and the majority of them said that there is a high probability of recommending the Aditya Birla-EMIL group to other people in the future. In general, beneficiaries had a **very positive** experience with the **Aditya Birla-EMIL group**. Following the introduction of the Lifeline Express Program, there is greater recognition of the brand, albeit with a lower likelihood of recommending it to others. Factors such as limited consultation time by the doctor and the doctor's advice against surgery left patients with a moderate view of the brand.

# Chapter 5: Recommendations and Way Forward



The following recommendations for the Lifeline Express are derived from quantitative sampling of beneficiaries and in-depth interviews (IDIs) with various stakeholders, including volunteers, doctors, government officials such as the DPM, and direct interactions with beneficiaries.

## **1) Operations**

- **Reduced frequency of patient transportation from homes to the OPD**

Due to the majority of the population being farmers or daily wage labourers, the timing of the bus for patient transportation was inconvenient for many. Increasing the frequency of the bus service would better accommodate the needs of patients.

- **Shortage of anaesthetic doses**

The shortage of anaesthetics doses posed a significant challenge during orthopaedic surgeries, particularly for paediatric cases, underscoring the critical need for prioritising anaesthetic availability. Maintaining adequate anaesthesia supplies and emphasising post-operative care protocols, including clear communication between surgeons and nursing staff to facilitate timely post-surgery monitoring and follow-up would lead to a significant impact on community health

- **Enhancement of Lifeline Express infrastructure**

Beyond the existing treatments, numerous prevalent health issues in Godda remain untreated. Expanding the Lifeline Express infrastructure to offer a broader range of treatments and specialised surgeries unavailable in nearby hospitals would address these issues, leading to a more significant impact on community health.

- **Enhancement of assistive aid quality**

Some beneficiaries received poorly fitting and durable spectacles. Improving the range of spectacle sizes would ensure more effective treatment for patients.

## **2) Branding**

- There should be an introduction of the brand name: Aditya Birla – EMIL on assistive aids provided. This would lead to better brand familiarity.



## **CSRBOX & NGOBOX**

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