



ADITYA BIRLA



EMIL

Impact Assessment Report

Lifeline Express – Singrauli

Essel Mining & Industries Limited

A part of Aditya Birla Group

Submitted by :



Certificate

This is to certify that the Impact Assessment report titled: '**Lifeline Express- Singrauli**' 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 presents findings by CSRBOX, derived from reviewing secondary sources and conducting primary-level interactions. CSRBOX developed and implemented the impact assessment framework in alignment with the project's objectives and indicators.

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Founder and CEO, CSRBOX

Acknowledgement

CSRBOX conducted the Impact Assessment for Lifeline Express project in Singrauli, 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.

Lastly, we thank all the beneficiaries and doctors, who took out time to interact with us. 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 by 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 authorized 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 Ltd., 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 as personnel in related industries.

With Specific to Impact Assessment of Lifeline Express Program under Essel Mining & Industries Ltd. (FY2022-23):

- CSRBOX has neither conducted an audit or due diligence nor validated the financial statements and projections provided by Essel Mining & Industries Ltd.
- Wherever information was not available in the public domain, suitable assumptions were made to extrapolate values for the same.
- CSRBOX must emphasize that realizing the advantages/enhancements resulting from the recommendations set out within this report (based on secondary sources), is dependent on ongoing validity of the underlying assumptions. 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 realization 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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Abbreviations

Sr. No.	Abbreviation	Full Form
1.	BRSR	Business Responsibility and Sustainability Report
2.	LLE	Lifeline Express
3.	NPCBVI	National Program for Control of Blindness & Visual Impairment
4.	NPCDCS	National Program for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke
5.	NPPCD	National Program for Prevention and Control of Deafness
6.	OPD	Out Patient Department
7.	SEBI	Securities and Exchange Board of India

Executive Summary

Background

Aditya Birla - Essel Mining & Industries Ltd. (EMIL) actively engages with local communities to enhance societal well-being. As a responsible corporate organisation, EMIL undertakes a wide range of enriching activities and collaborates with community organisations to build a more equitable society. They provide resources to community stakeholders through awareness campaigns, capacity-building initiatives, tools, and infrastructural support.

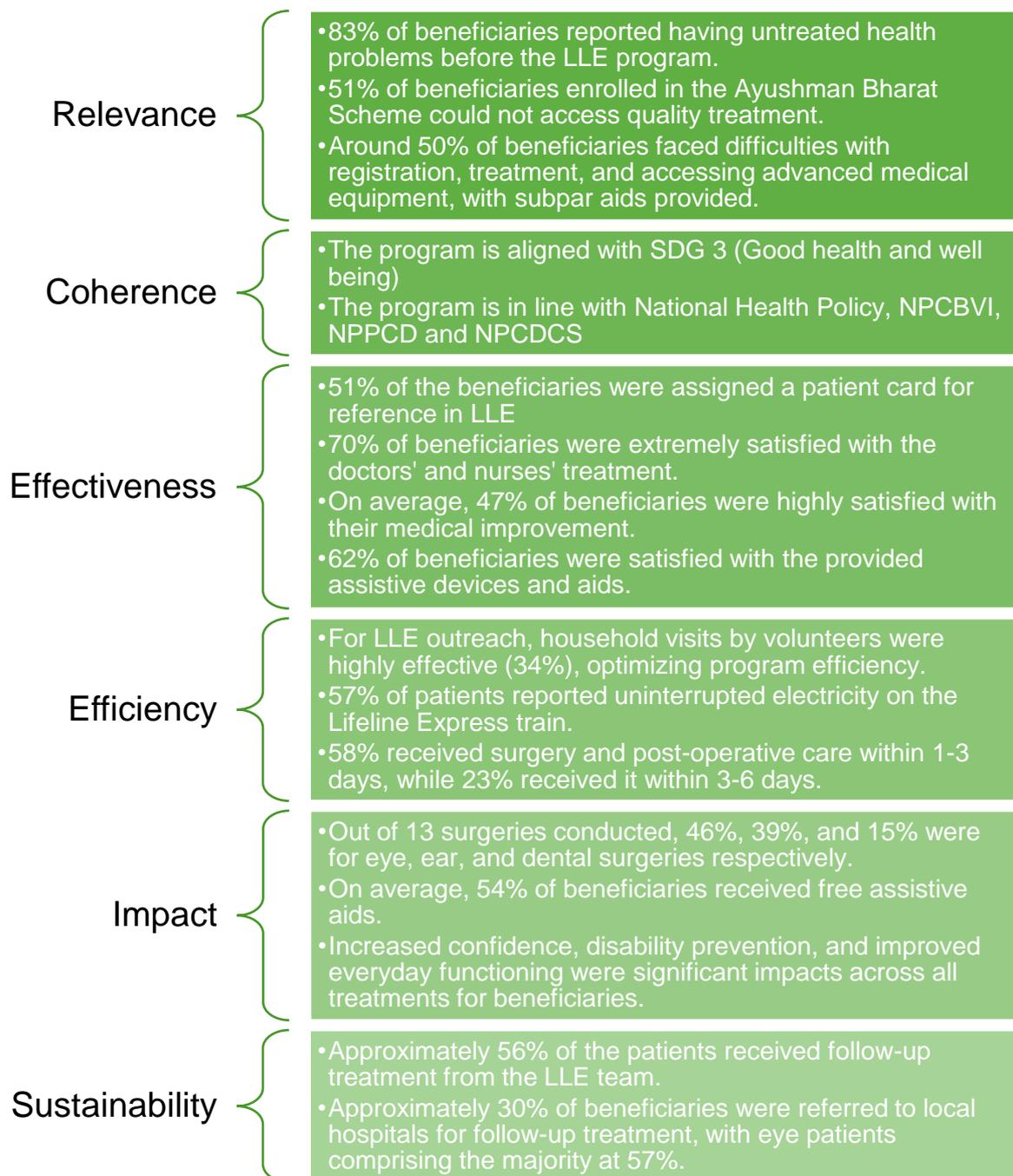
Connecting with marginalized communities is central to EMIL's core values. They embrace the principle of trusteeship, prioritizing the well-being of underserved populations over business interests. Their CSR activities are dedicated to improving the quality of life in rural communities and aim to positively impact their lives.

Project Details

The Lifeline Express is a unique initiative delivering medical care to underprivileged communities in India. For over 28 years, this mobile hospital has served millions nationwide. India's healthcare system faces significant challenges, such as limited access to medical facilities, inadequate resources, and a shortage of healthcare professionals. The Lifeline Express addresses these issues by providing high quality, free medical care to remote areas, ensuring accessibility for the most vulnerable. This report evaluates the program's impact in 'Singrauli', Madhya Pradesh, 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.



It is evident that the project aligns 100% with the following UN SDG and ESG principles.

SDG Goals

<p>SDG GOAL: 3</p>  <p>3 GOOD HEALTH AND WELL-BEING</p>	<p>The Lifeline Express supports SDG 3 by offering accessible healthcare, effective treatment, medications, and assistive devices free of charge. Beneficiaries were educated about preventable disabilities, contributing to their overall well-being.</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

<p>National Health Policy (NHP)¹</p>	<p>The primary objective of Lifeline Express is to tackle preventable disabilities by offering access to high-quality medical services in remote regions. Consequently, the activities of LLE fully adhere to the goals of the NHP.</p>
<p>National Program for Control of Blindness & Visual Impairment (NPCBVI)²</p>	<p>The Eye treatment provided in LLE helped in treating preventable disability. Thus, this program aligns with NPCBVI.</p>
<p>National Program for The Prevention & Control of Deafness (NPPCD)³</p>	<p>The Ear treatment provided in LLE helped in treating preventable disability. Thus, this program aligns with NPPCD.</p>
<p>National Program for Prevention & Control of Cancer, Diabetes,</p>	<p>There were screening facilities provided for breast and cervical cancer for 5 days in LLE. Thus, aligning with NPCDCS.</p>

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

² <https://npcbvi.mohfw.gov.in/Home>

³ <https://nhm.gov.in/index1.php?lang=1&level=2&sublinkid=1048&lid=604>



Chapter 1:

Project Overview and CSR Initiatives of EMIL

1.1 CSR Initiatives of EMIL

EMIL, a distinguished member of the Aditya Birla Group, is a prominent figure in the industrial realm, celebrated for its steadfast dedication to excellence and sustainability. Benefiting from a rich heritage of over five decades marked by innovative ventures and ethical business practices, EMIL boasts a diverse portfolio spanning mining, infrastructure development, and related sectors. With an unwavering commitment to innovation and efficiency, EMIL maintains rigorous environmental standards and prioritizes corporate social responsibility.

EMIL is dedicated to enhancing social and economic progress in communities, especially those from vulnerable backgrounds. Driven by a vision to generate lasting value for all stakeholders, EMIL is deeply committed to promoting economic prosperity, societal advancement, and environmental welfare throughout its operations. The company's commitment to corporate social responsibility is evident through initiatives spanning five key thematic areas, strategically implemented across its operational regions. These initiatives encompass infrastructure development, sustainable livelihoods, healthcare and family welfare, education, and skill enhancement, coupled with initiatives aimed at empowering women through various social causes.

EMIL is dedicated to enhancing social and economic progress in communities, especially those from vulnerable backgrounds. The company's commitment to corporate social responsibility is evident through initiatives spanning five key thematic areas, strategically implemented across its operational regions-

Healthcare

- To render quality health care facilities to people living in the villages and elsewhere through a range of initiatives, including hospitals, primary health care centres, mother and childcare projects, immunization programs.

Education

- To spark the desire for learning and knowledge at every stage.

Sustainable Livelihood

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

Infrastructure Development

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

Social Change

- To advocate and support Gender equality, Espousing basic moral values, run Awareness programmes on anti-social issues.

1.2 Programme Overview

The nation's healthcare system grapples with various obstacles, including restricted access to medical facilities, insufficient resources, and a shortage of healthcare professionals. Essel Mining & Industries Limited (EMIL) has embarked on a transformative Corporate Social Responsibility (CSR) project in collaboration with Impact India Foundation, known as the Life Line Express (LLE). This innovative hospital train plays a crucial role in addressing these challenges by providing high-quality medical assistance to remote communities. Operating free of charge, the Lifeline Express ensures that even the most marginalized segments of society have access to essential healthcare services.

The Lifeline Express travels to aspirational districts, offering medical services at specific locations for 21 days. EMIL has provided funding to support this initiative, which aims to deliver healthcare assistance to families in need. The overarching goal is to raise awareness and alleviate the burden of preventable disabilities. The project encompasses various primary and secondary stakeholders, underscoring its comprehensive approach to healthcare outreach.

The 227th Lifeline Express project was implemented in the aspirational district of 'Singrauli' at 'Bargawan' Railway Station, in Madhya Pradesh, spanning from 16th December 2022 to 5th January 2023.

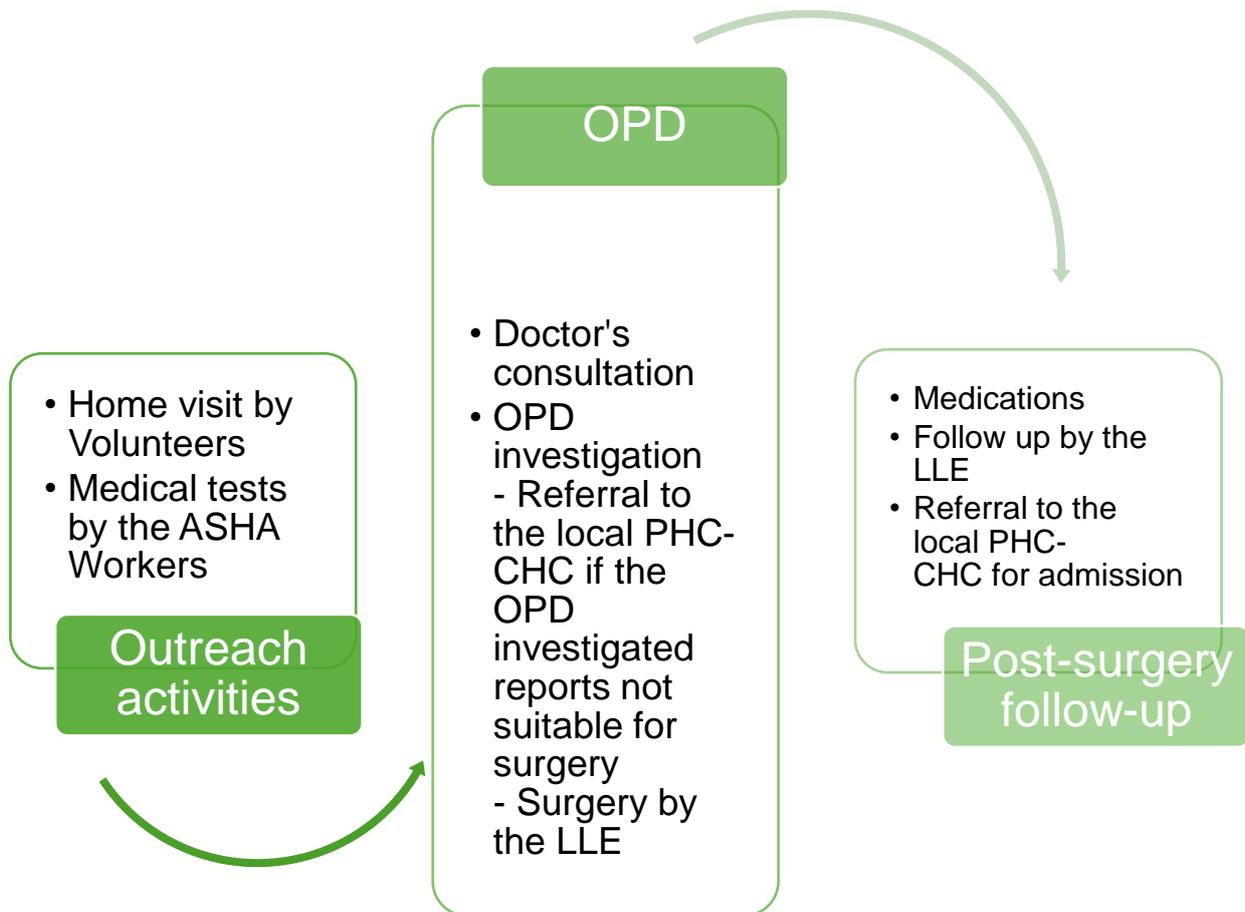
The district spans an area of 5675 km². With a population of 11,78,273, there is a gender distribution of 52% males and 48% females.⁵

Major scope of work in the Lifeline Express programme:



⁵ <https://singrauli.nic.in/en/demography/>

Patient Treatment and Surgery Procedure Followed by Lifeline Express



1.3 Programme Activities



Major activities conducted as a part of the LLE programme are mentioned in the table below:

- **Mobilisation and outreach of the programme**
 - Identifying the ASHA workers and local volunteers who will take up outreach and awareness in the community.
 - Spreading awareness in the community through home visits, posters/ banners, and word of mouth.
 - Conducting blood tests, and identifying patients for treatment in the Lifeline Express.
 - Assigning patient cards to the beneficiaries.

- **Orientation of frontline health workers/ volunteers on health care awareness**
 - Training the volunteers and ASHA workers on conducting the outreach and awareness programme, taking blood tests, and identifying people for issues like cataracts, etc.
 - Orientation of doctors on the entire functioning of the Lifeline Express, mentioning their roles and responsibilities.

- **Provision of diagnostic and surgical services to rural communities of Singrauli**
 - Setting up the OPD for consultation and referral for treatment.
 - Setting up the surgery/operation theatre.
 - Provision of 4-5 ambulances for transporting patients from the OPD to the Lifeline Express.
 - Referring the patients to nearby hospitals for post-operative care and further treatment.





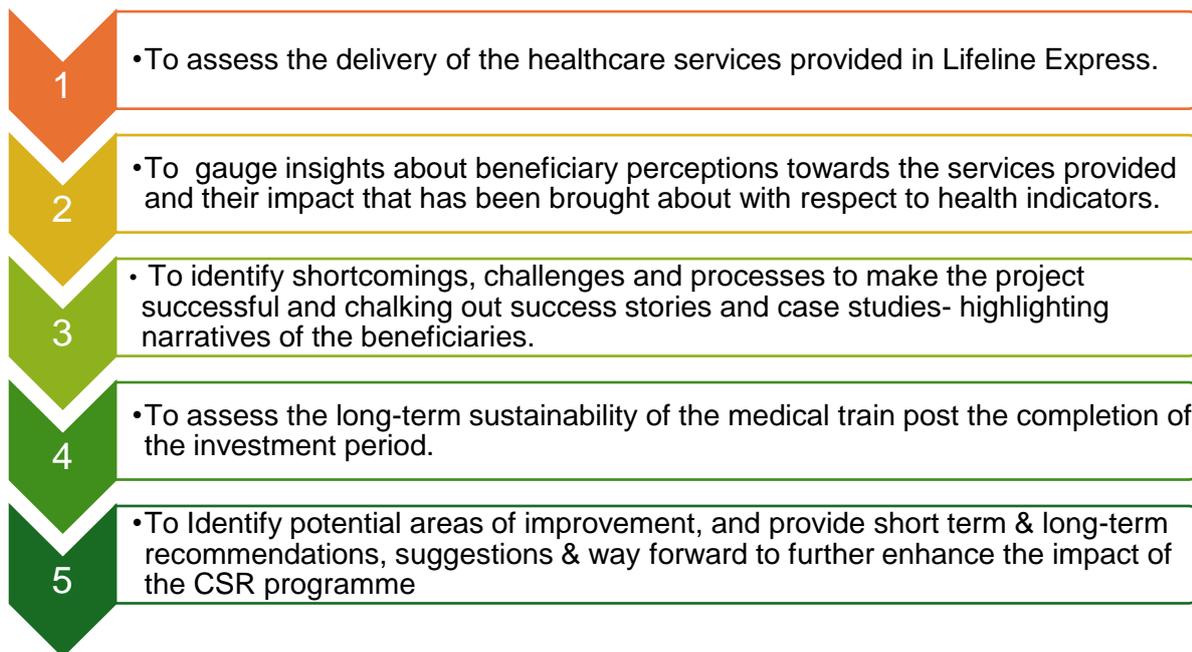
Chapter 2:

Design and Approach for Impact Assessment

2.1 Objectives of the Study

The EMIL- CSR team forged a strategic partnership with India Impact Foundation to facilitate the implementation of the Lifeline Express initiative across the Singrauli district. This collaboration was responsible for programme's outreach, training of medical personnel, and the operational efficiency of Lifeline Express (LLE). Recognising the importance of evaluating the impact of their investment, the EMIL- CSR team has commissioned an in-depth impact assessment study.

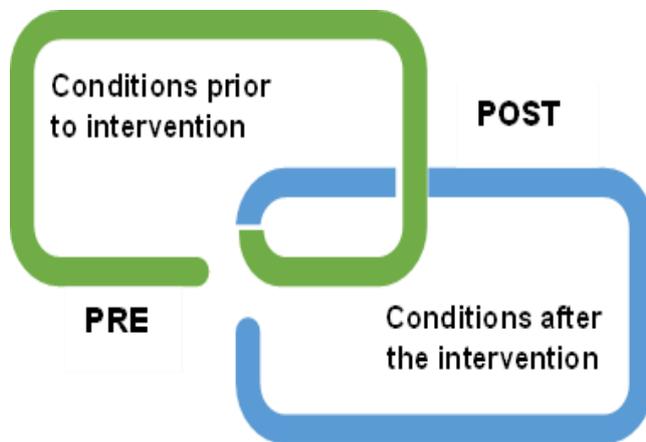
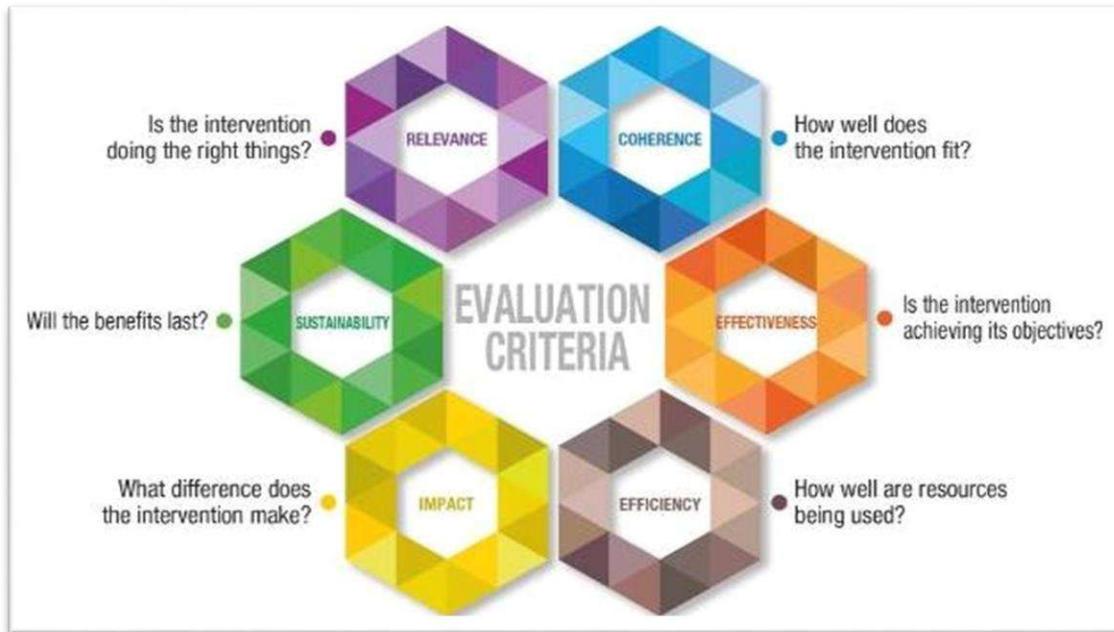
The objectives of the impact assessment study are as follows:



2.2 Evaluation & Framework Indicators

Evaluation Approach:

The study's objectives and primary areas of investigation directed the development of the evaluation, with a central focus on learning. In this segment, CSRBOX outlines its strategy for crafting and implementing a rigorous, adaptable, and outcome-driven evaluation framework/design.



To measure the impact of the project, a **pre-post-project evaluation approach** is adopted for the study. This approach relies on the respondents' recollection ability. With this approach, beneficiaries are queried about their conditions before and after the project intervention. The disparity aids in comprehending the project's contribution to enhancing the intended beneficiary condition. This approach, at best, can comment on the contribution of the project to improving living standards, though it may not be able to attribute the

entire change to the project. Other external factors may also play a role in bringing positive changes along with the project. Hence, contribution will be assessed, but attribution may not be entirely assigned to the project.

Framework:

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

Relevance

- The extent to which intervention objectives and design respond to beneficiaries, global, country, and partner/institution needs, policies, and priorities.
- Example: Was there a need for the Lifeline Express to be conducted in Singrauli?

Coherence

- The extent to which other interventions in the country, sector, or institution support or undermine the intervention and vice versa.
- Example: Is the intervention in line with the SDGs, Government schemes/priorities?

Effectiveness

- The extent to which the intervention achieved, or is expected to achieve, its objectives and its results.
- Example: Did the intervention achieve its objectives?

Efficiency

- The extent to which the intervention delivers or is likely to deliver, results in an economic and timely way.
- Did the intervention reach the beneficiaries in a time and cost efficient manner?

Impact

- The extent to which the intervention has generated or is expected to generate significant positive or negative, intended or unintended, higher-level effects.
- Example: Was the intervention able to spread awareness on preventable disability in the community?

Sustainability

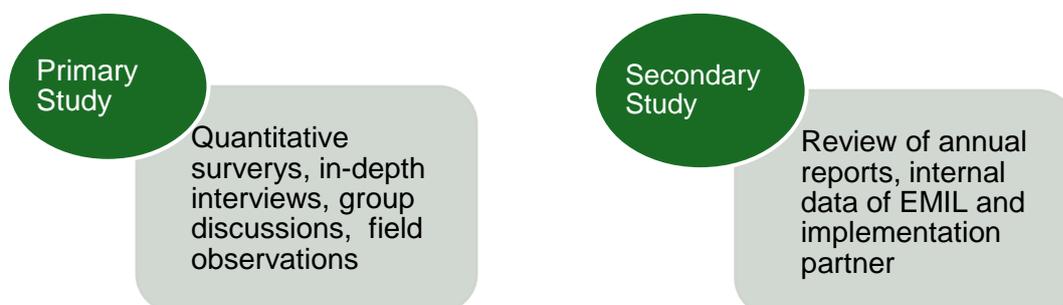
- The extent to which the net benefits of the intervention continue or are likely to continue.
- Example: Was the continuity of the treatment ensured after the Lifeline Express left the district?

The impact assessment has aligned itself with the impact parameters as per the criteria mentioned in the Terms of Reference. The following parameters are prioritised to satisfy the criteria of the Impact Assessment – **Relevance, Coherence, Effectiveness, Efficiency, Impact, and Sustainability.**

Framework Pillars	Information Indicators
Relevance	<ul style="list-style-type: none"> • Status of existing health infrastructure in the district. • Socio-economic indicators of ‘Singrauli’ district. • Accessibility of trains for marginalised and vulnerable groups such as lower castes, women, and children.
Coherence	<ul style="list-style-type: none"> • Alignment with National and State Health Level Schemes and the project’s effect on improving the health indicators. • Alignment with SDG Goals.
Effectiveness	<ul style="list-style-type: none"> • The extent to which the targets and indicators of the project have been achieved by mapping out the output, outcome, and impact against them. • Quality of the medical staff and the train infrastructure
Efficiency	<ul style="list-style-type: none"> • Time taken to complete each surgery. • Cost-effectiveness of the functioning of the train. • Transportation services for the beneficiaries.
Impact	<ul style="list-style-type: none"> • Improvement in health indicators of Singrauli. • Effectiveness of the outreach process. • Ability of the beneficiaries to identify preventable disabilities and get treatment for the same.
Sustainability	<ul style="list-style-type: none"> • Referring the patients to nearby hospitals and health centres to ensure the continuity of the treatment process.

2.3 Sampling

A two-pronged approach to data collection and review has been chosen for the assessment. The secondary data is obtained through literature review, while the primary data is collected from qualitative and quantitative data collection methods. This methodology enabled us to gather valuable insights related to the impact from a holistic, 360-degree perspective that includes all pertinent stakeholders necessary for the study.



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.

2.3.1 Quantitative Sampling

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

S. No.	Primary Stakeholder for Quantitative Survey	Sample
1	Beneficiaries who received dental treatment	28
2	Beneficiaries who received eye treatment	93
3	Beneficiaries who underwent ENT treatments	33
4	Beneficiaries who underwent orthopaedic treatment	02
5	Beneficiaries who underwent gynecological treatment/ cancer screening	04
6	Beneficiaries who underwent plastic surgery	02
	Total	162

** 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.

2.3.2 Qualitative Sampling

The list of stakeholders is mentioned below:

S. No.	Secondary Stakeholder for Qualitative Survey	Sample
1	Doctors	1
	Total	1

** Out of the seven doctors' contact numbers provided, only one doctor was available for interview. Two numbers were incorrect, and despite repeated attempts, other doctors could not be reached.

2.4 Theory of Change

Activity	Output	Outcome	Impact
Mobilisation and outreach of the programme	Number of basic health check-ups conducted	Early identification of disorders	Access to quality care; Improved overall health indicators
	Number of patient cards given	Increased and better access to healthcare	
Provision of diagnostic and curative services such as surgeries to rural communities of Singrauli	1460 beneficiaries treated for eye-related problems	Knowledge building among the community on preventable disability	Better quality of life
	66 women provided consultation for screening and control of cancer		
	517 beneficiaries received consultancy and treatment for ENT-related problems	Reduced burden of preventable disability	
	32 beneficiaries received consultancy and treatment for bone and joint-related problems		
	28 Number of people provided cleft lip and other surgeries		
	419 beneficiaries were provided Treatment for dental problems		
	Provision of 4-5 ambulances for transporting patients		
	49 Number of patients Screened / treated / followed up to District Hospitals		

Conducting training and orientation of doctors/ PRIs/ frontline health workers/ volunteers on health care awareness	Number of frontline staff trained for outreach and awareness	Increased awareness in people about preventable disability	Promotion of health awareness in marginalised communities
	10 Number of volunteers trained	Increase in knowledge about self-healthcare	



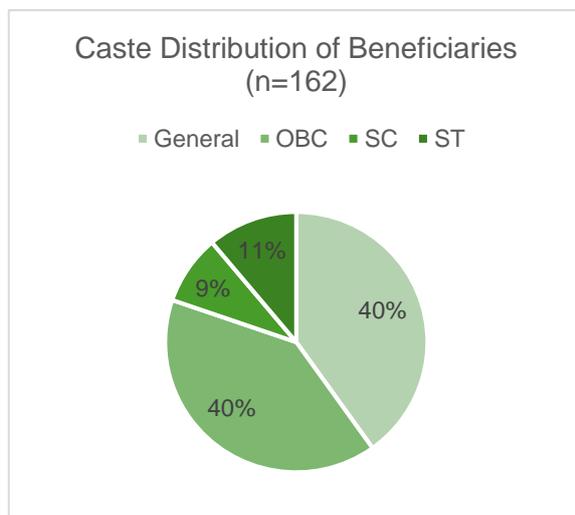
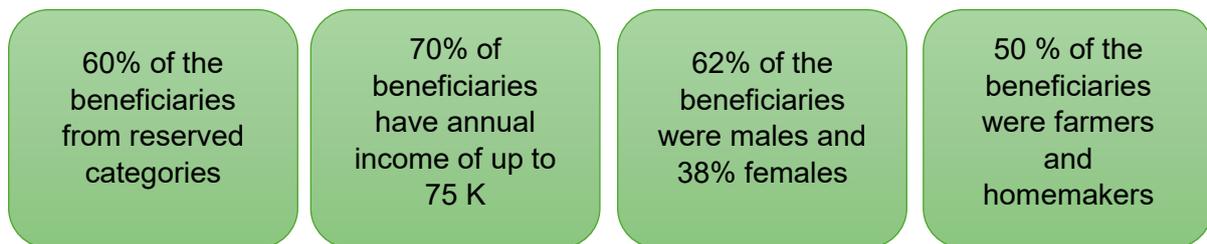
Chapter 3:

Findings of Impact Assessment Study

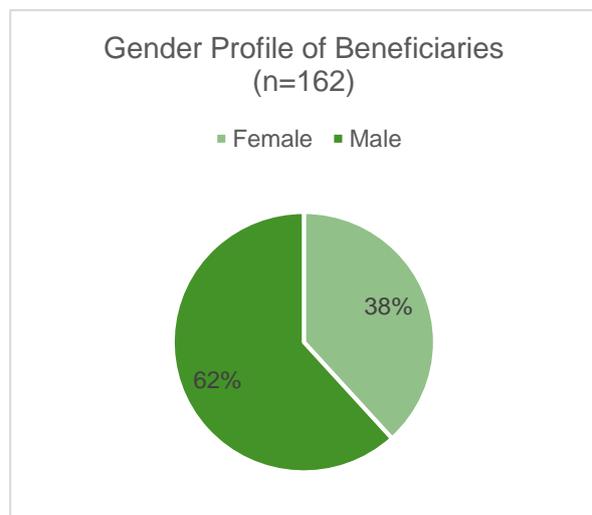
This section of the report presents a comprehensive analysis of the impact of the 227th Lifeline Express Project, in Singrauli, Madhya Pradesh. The analysis is based on responses from the primary beneficiaries' questionnaire, insights from conversations with key stakeholders, observations from field visits, and data from secondary research.

3.1 Beneficiary Profile

This section summarizes various factors, including gender, age, income, occupation, among others, about the targeted population. The examination of these factors helps in understanding the impact of the Lifeline Express.

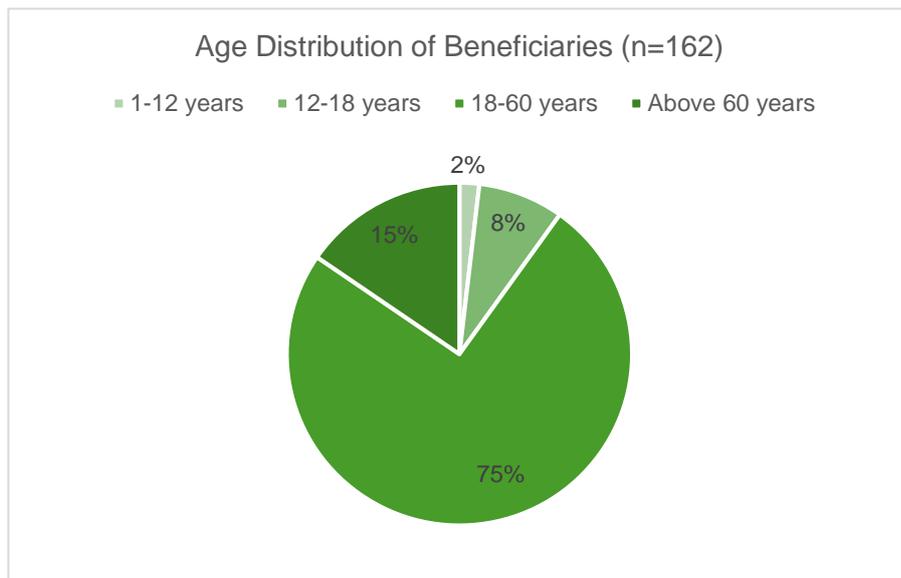


Graph 1: Caste Distribution of Beneficiaries



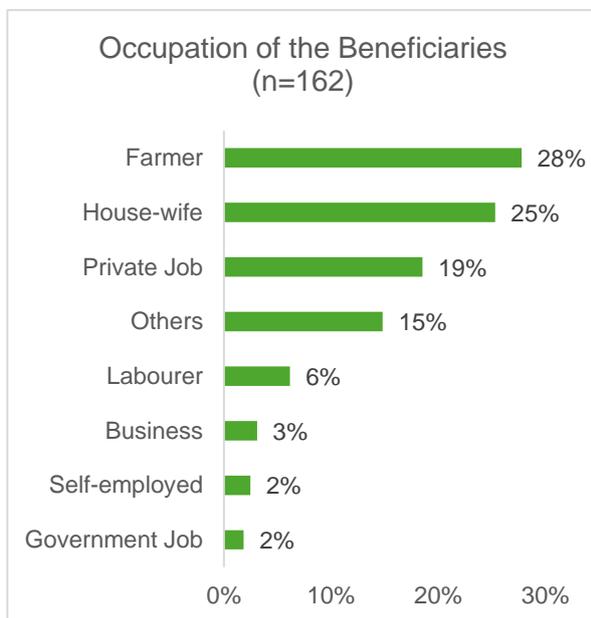
Graph 2: Gender Profile of Beneficiaries

Approximately 60% of the beneficiaries were from the reserved categories (Scheduled Caste, Scheduled Tribes, and Other Backward Classes). As the study encompassed a substantial sample size, it can be deduced that there was a comprehensive representation of socially marginalised beneficiaries, including a consideration of the gender component in the program.

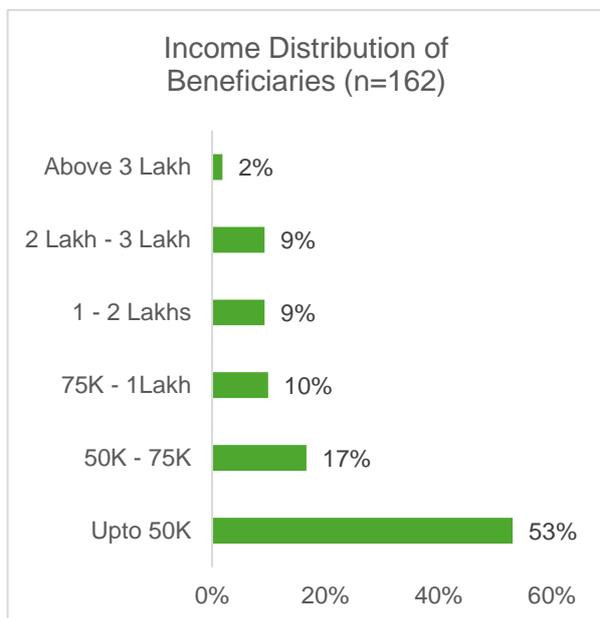


Graph 3: Age Distribution of Beneficiaries

About 75% of Beneficiaries belonged to the age group of 18-60 years, representing large strata of the society.



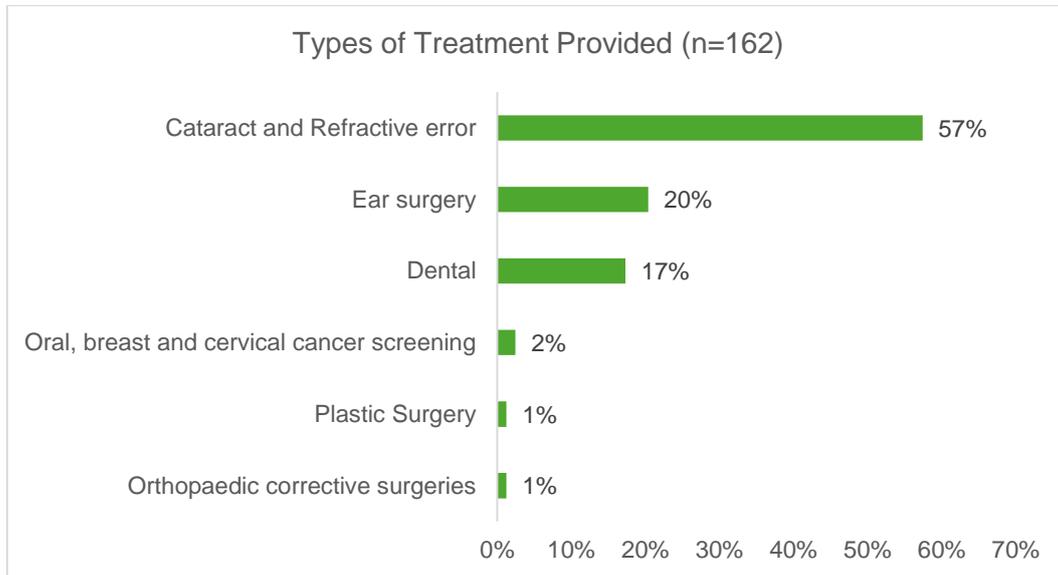
Graph 4: Occupation of the Beneficiaries



Graph 5: Income Distribution of Beneficiaries

It can be observed around 50% beneficiaries' population comprises of farmers and house-wives.

Around 70% of the beneficiaries have annual income up to Rs 75,000 representing the project caters to poor households.



Graph 6: Types of Treatment Provided

The study sample accurately reflects the high footfall of patients observed during the research. Out of the total surveyed beneficiaries, the majority received eye-related treatments (57%), followed closely by ear-related treatments (20%), indicating the prevalent healthcare needs in the population. Eye treatments were predominantly cataract surgeries and correction of refractive problems by providing spectacles. Ear problems mostly included middle ear surgeries.

Thus, the program was successful in having an adequate representation of the socially marginalised population, who generally do not have access to quality healthcare services.

3.2 Relevance

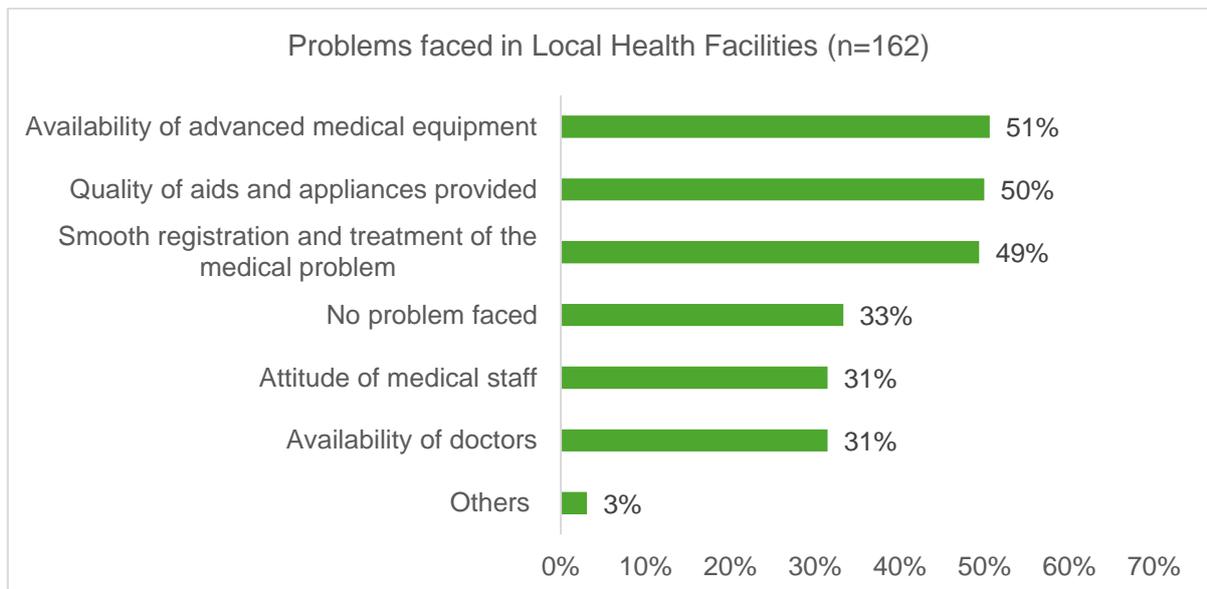
Approximately 50% of beneficiaries encountered difficulties with registration, treatment, and accessing advanced medical equipment, with subpar quality aids provided

51% of the beneficiaries were enrolled in 'Ayushman Bharat Scheme' but could not avail quality treatment

83% of the beneficiaries reported that they were suffering from health problems but were not able to get treatment, prior to LLE program



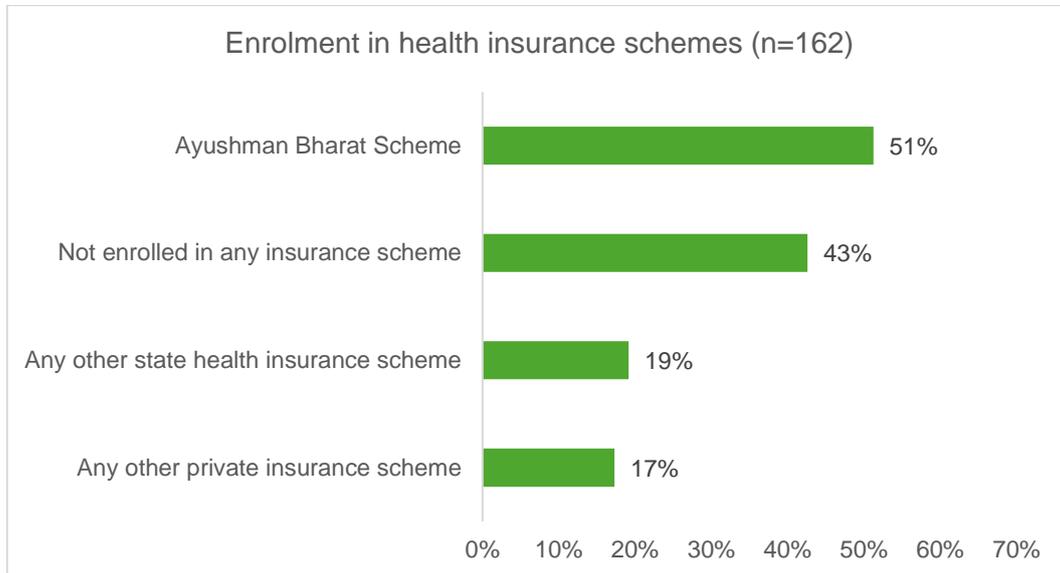
The primary objective of LLE was to provide healthcare services to underserved areas where the population lacks adequate medical facilities. This section examines the relevance of the Lifeline Express project to the needs of the local population.



Graph 7: Problems faced in Local Health Facilities

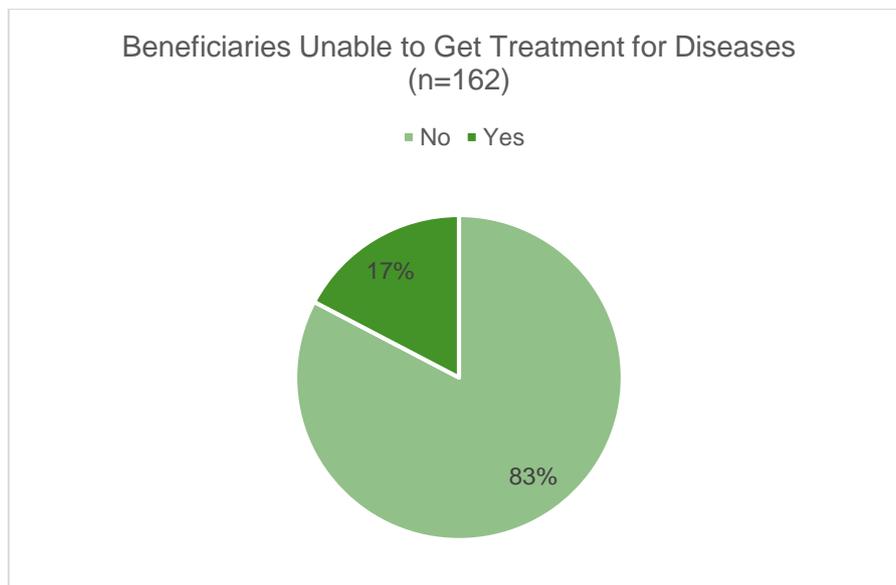
Before the intervention, beneficiaries encountered numerous difficulties accessing health facilities. About 50% faced challenges with smooth registration and treatment of medical

issues, struggled to obtain advanced medical equipment, and found the quality of aids provided to be poor.

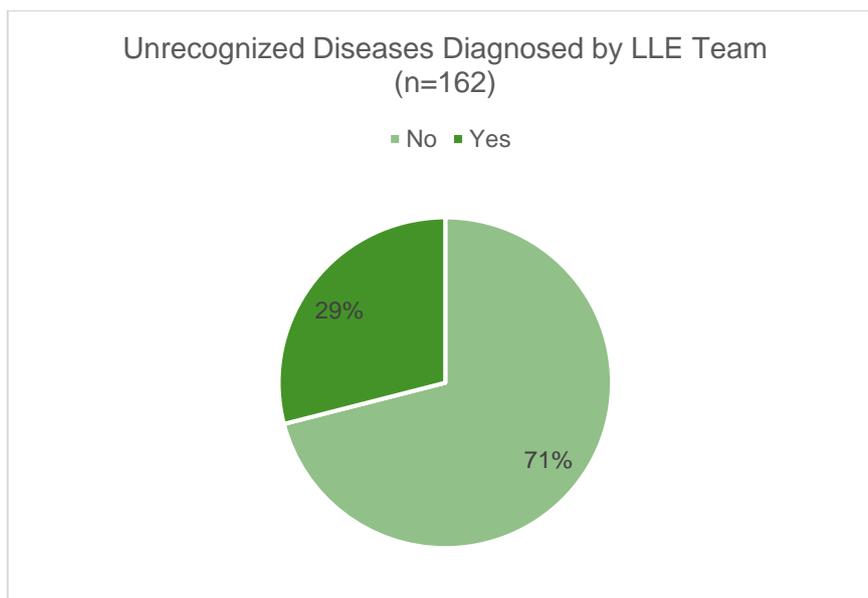


Graph 8: Enrolment in health insurance schemes

The fact that 43% lacked insurance enrolment highlights the urgent necessity for initiatives like the Lifeline Express, which provides vital healthcare services to uninsured individuals, ensuring equitable access to medical treatment.



Graph 9: Beneficiaries Unable to Get Treatment for Diseases



Graph 10: Unrecognized Diseases Diagnosed by LLE Team

As observed, approximately 83% of beneficiaries were unable to receive the necessary treatment for their ailments. Additionally, around 29% of beneficiaries were diagnosed with previously unrecognized diseases. These findings highlight the relevance of EMIL's intervention.

Overall, the CSR intervention of Lifeline Express signifies the relevance for the local community, which lacked access to regular medical check-ups and medical facilities in the area.

3.3 Coherence

3.3.1 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.

The table shows the alignments of the intervention with the approved activities by the Ministry of Corporate Affairs.

Sub- Section	Activities as per Schedule VII	Alignment
i)	Eradicating hunger, poverty, and malnutrition; promoting health care including preventive health care and sanitation including contribution to the 'Swachh Bharat Kosh' set up by the Central Government for the promotion of sanitation and making available safe drinking water;	Completely

ii)	Promoting education, including special education and employment enhancing vocation skills, especially among children, women, elderly, and the differently abled and livelihood enhancement projects.	Partially
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3.3.2 Alignment with Sustainable Development Goals (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.

Sustainable Development Goal	Target	Alignment
	<p>Goal 3: Good Health and Well-Being Ensure healthy lives and promote well-being for all at all ages</p> <p>Target 3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all</p> <p>Target 3c 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>Target 3d Strengthen the capacity of all countries, in particular</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. Thus, the project led to the provisioning of quality health care and medicines for the community.</p> <p>Volunteers were trained to conduct medical tests and identify beneficiaries who can come and avail treatment in the Lifeline Express. This led to the development and retention of the health workforce.</p> <p>The beneficiaries were provided knowledge about various preventable disabilities, and when to get</p>

	developing countries, for early warning, risk reduction and management of national and global health risks	a check-up, thereby leading to knowledge building regarding health risk reduction among communities.
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3.3.3 Alignment with ESG Principles:

According to the Business Responsibility & Sustainability Reporting Format (BRSR) shared by the Securities & Exchange Board of India (SEBI), EMILs CSR Program can be covered under the following 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.

3.3.4 Alignment with National Policies:

The CSR programme is aligned with certain National priorities, like policies, guidelines, or schemes. The Lifeline Express programme is aligned with the objectives of the following National Priorities:

National Policy	Alignment with the Programme
<p>1. National Health Policy (NHP)</p> <p>The policy aims to achieve optimal health and well-being for everyone, regardless of age, by prioritizing preventive and promotive healthcare in all development initiatives. It strives for universal access to high-quality healthcare services without causing financial strain. This involves enhancing accessibility, improving service quality, and reducing healthcare costs.</p>	<p>The primary objective of the Lifeline Express is to combat preventable disabilities by offering quality medical services in remote regions. Their focus was also on educating people about preventable disabilities. Therefore, the operations of LLE are completely aligned with the goals of the National Health Policy (NHP).</p>
<p>2. National Program for Control of Blindness & Visual Impairment (NPCBVI)</p>	<p>The eye treatment offered by LLE has been effective in addressing preventable</p>

<p>NPCBVI is a centrally sponsored scheme, which targets the reduction of blindness and visual impairment. It offers comprehensive eye care services, including preventive measures and treatment. The initiative aims to eradicate avoidable blindness through activities like cataract surgeries, refractive error treatments, and creating awareness about eye health.</p>	<p>disabilities, thus demonstrating alignment with NPCBVI objectives.</p>
<p>3. National Program for The Prevention & Control of Deafness (NPPCD)</p> <p>The Policy is aimed at preventing and controlling deafness and hearing impairment. It emphasizes early identification, intervention, and rehabilitation, offering screening camps, hearing aids, cochlear implants, and awareness campaigns.</p>	<p>The ear treatment facilitated by LLE has proven effective in addressing preventable disabilities, thereby aligning with NPPCD objectives.</p>
<p>4. National Program for Prevention & Control of Cancer, Diabetes, Cardiovascular Diseases & Stroke (NPCDCS)</p> <p>This initiative is aimed at preventing and controlling cancer, diabetes, cardiovascular diseases, and stroke. It focuses on early detection, diagnosis, and treatment, along with promoting healthy lifestyles and raising awareness about risk factors.</p>	<p>Screening facilities for breast and cervical cancer were available on the Lifeline Express, aligning with NPCDCS objectives.</p>

3.4 Effectiveness

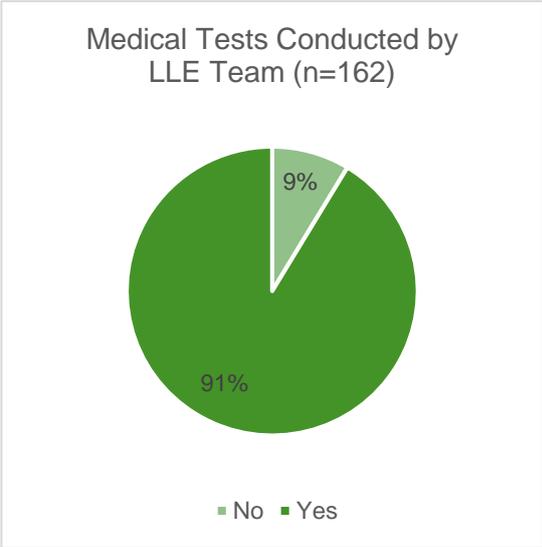
This section of the report analyses how effectively the intervention has met its objectives. The project's success is evaluated in terms of its primary goal: reducing the burden of preventable disability by providing medical and surgical services at LLE Hospital.

On an average 47% of the beneficiaries were highly satisfied with the improvement in their medical condition.

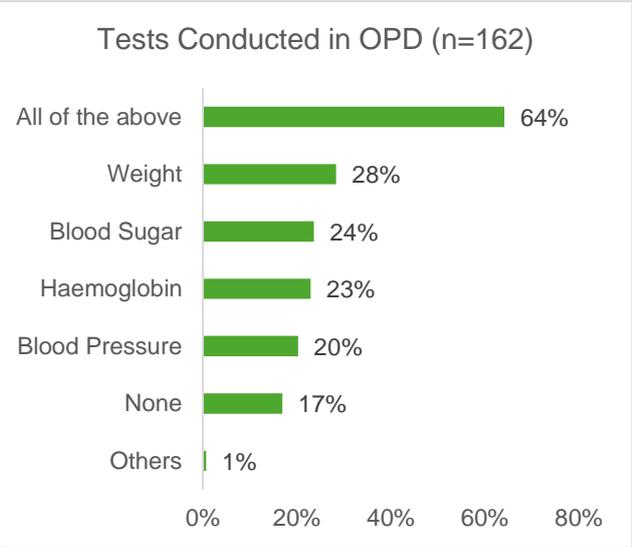
70% of the beneficiaries were extremely satisfied with the treatment given by the doctors and nurses

62% of all beneficiaries satisfied with the assistive devices / aids provided

On average, 43% of beneficiaries achieved full recovery, while 54.5% were referred to local hospitals for follow-up treatment.



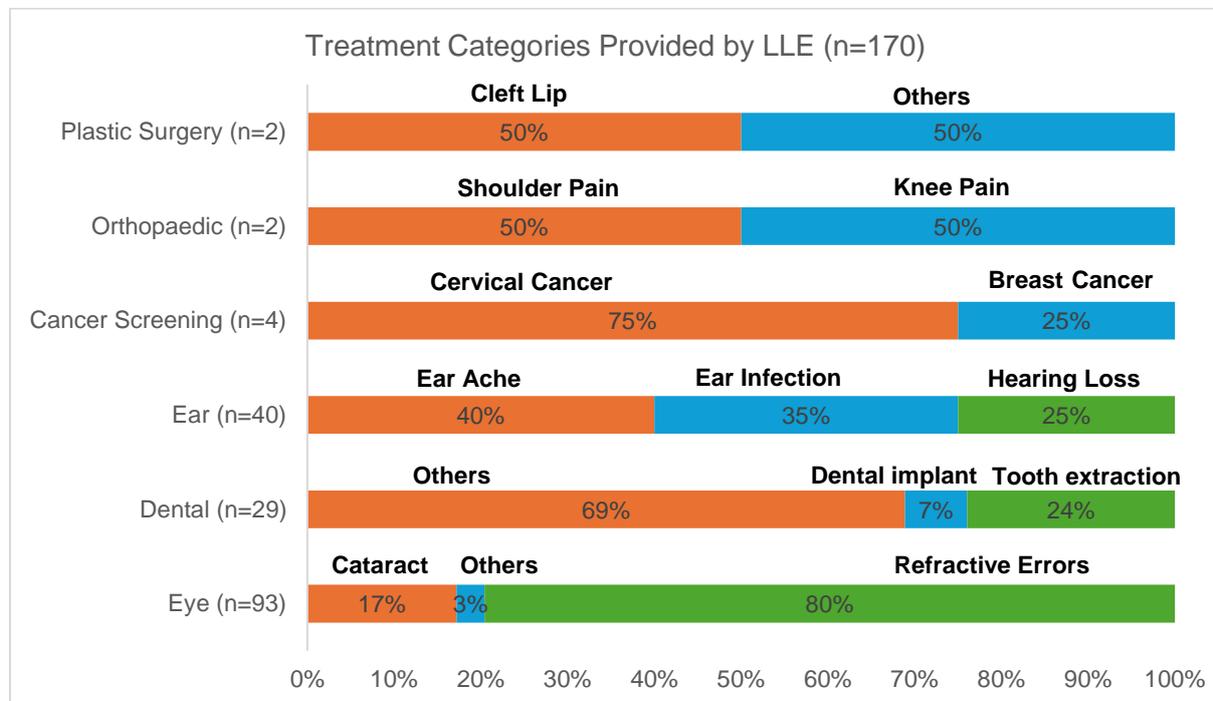
Graph 11: Medical Tests Conducted by LLE Team



Graph 12: Tests Conducted in OPD

As a crucial step in the pre-operative process, various tests were performed to diagnose the patients' medical conditions or assess their fitness. This was carried out for both individuals who already possessed a patient card and those who learned about Lifeline Express through alternative channels. Other methods of spreading awareness about LLE involved posters, village announcements, and word-of-mouth referrals.

It is noticeable that 91% of the beneficiaries underwent medical tests. Among them, approximately 64% reported that all the tests, including those for blood pressure, blood sugar, weight, and haemoglobin, were conducted.



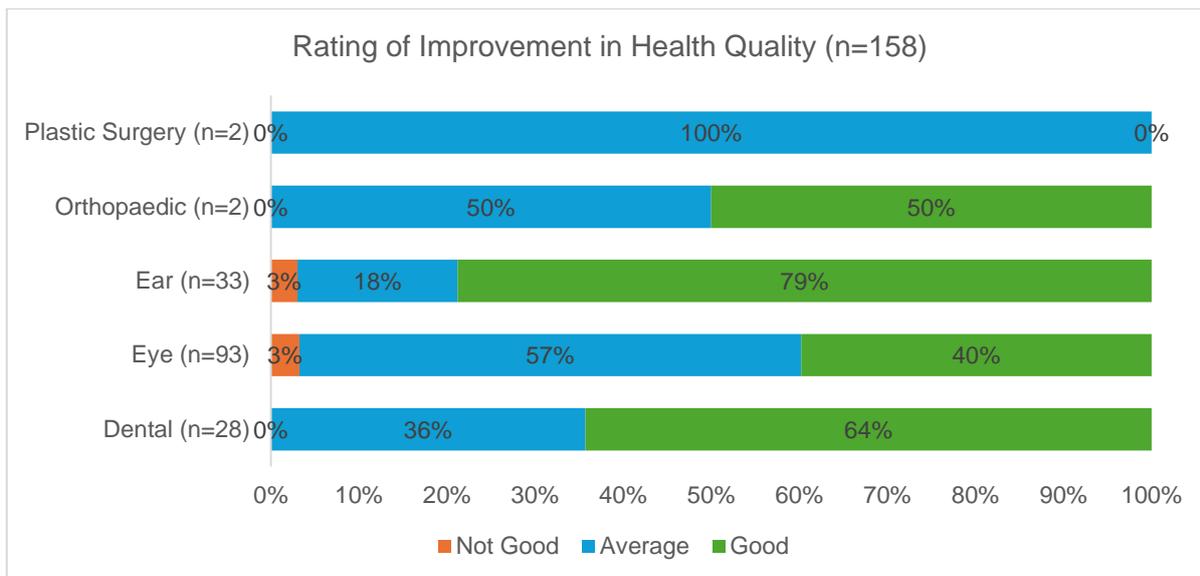
Graph 13: Treatment Categories Provided by LLE

As part of the CSR program, six types of treatments were offered: eye, ear, dental, orthopaedic, plastic surgery, and cancer screening. The Lifeline Express had qualified doctors from various parts of the country, each with their area of expertise. These doctors utilized their specialized skills to perform a range of treatments for different health issues.

It can be observed that the 'graph 13' indicates a total sample size of n=170. This is due to some patients receiving treatment in multiple categories within ear care and dental care. Consequently, the sample size has increased to account for these overlaps.

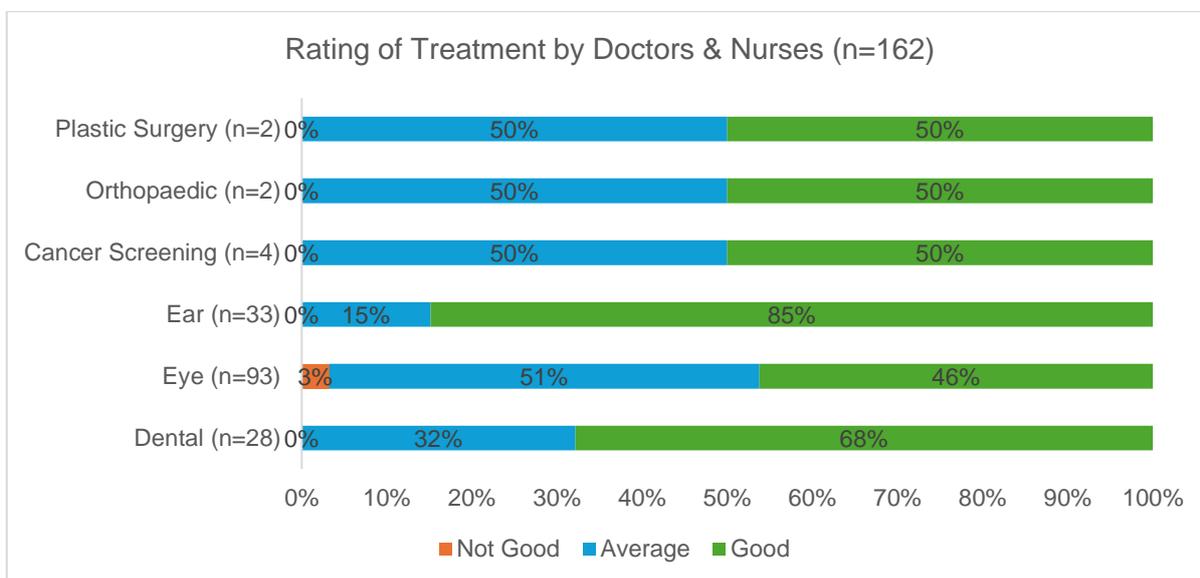
Below are some graphs showing the ratings provided by beneficiaries. The rating scale is categorized as follows:

1 - Not Good, 2-3 - Average, 4-5 - Good



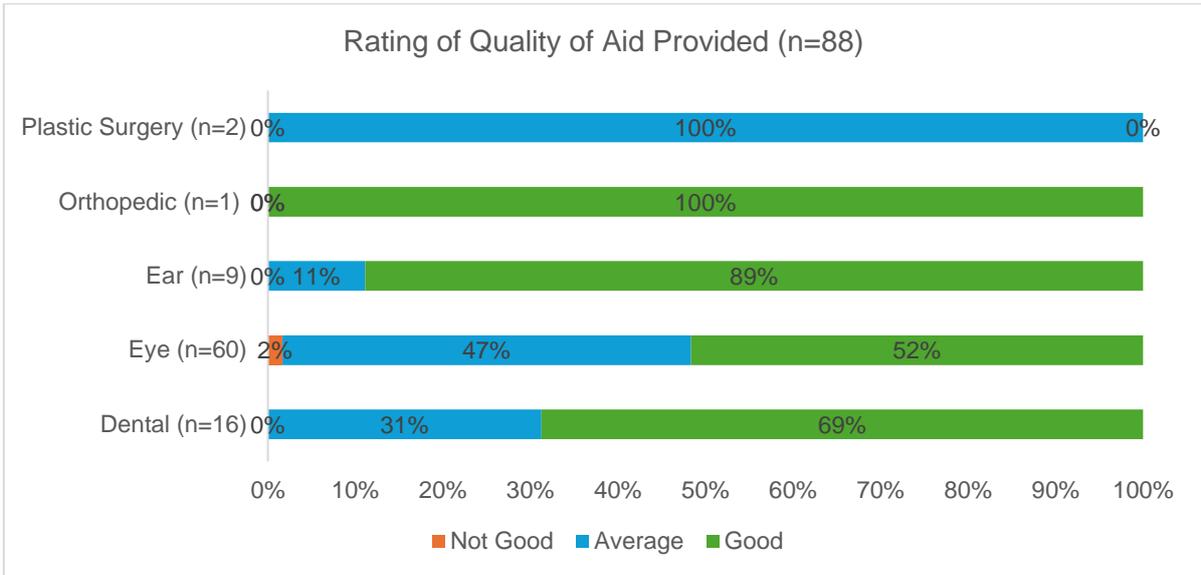
Graph 14: Rating of Improvement in Health Quality

Patients who received treatments in plastic surgery, ear care, and dental care were highly satisfied with their treatments. In fact, 100%, 79%, and 64% of the beneficiaries rated these treatments as 'Good', respectively.



Graph 15: Rating of Treatment by Doctors & Nurses

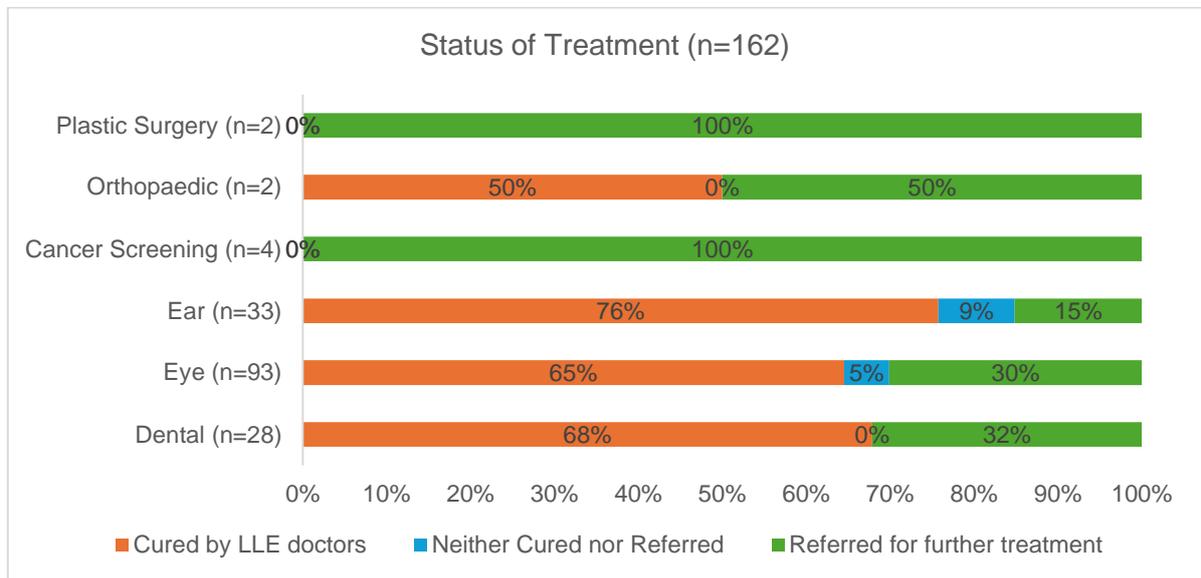
At least 50% of the beneficiaries were highly satisfied with the treatment provided by the doctors. Specifically, 50% of beneficiaries rated the treatment for plastic surgery, orthopaedics, and cancer screening by doctors and nurses as 'Good'. Additionally, 85% rated ear treatment by doctors as 'Good', and 67% rated dental care as 'Good'.



Graph 16: Rating of Quality of Aid Provided

Post-treatment, the beneficiaries were provided with various assistive devices such as callipers, hearing aids, spectacles etc. These were provided free of cost.

About 54% of the total beneficiaries received assistive aids. Among these, 100% of orthopaedic patients, 89% of ear patients, and 69% of dental patients were highly satisfied with the aids, rating them as 'Good'.



Graph 17: Status of Treatment

An average of 43% of the people were completely cured by the doctors in the Lifeline Express. Among them, 76%, 68%, and 65% of ear, dental, and eye patients, respectively, achieved complete recovery. In 54.5% of cases, patients requiring follow-up treatment were referred to nearby health facilities because the Lifeline Express operates at a specific location for only 21 days. Merely 2.3% of individuals felt their concerns were not addressed.

In summary, the health services were effectively delivered, completely aligning with the objective of the LLE CSR intervention. The nursing staff and doctors involved in the program ensured a seamless treatment process with no hindrances.

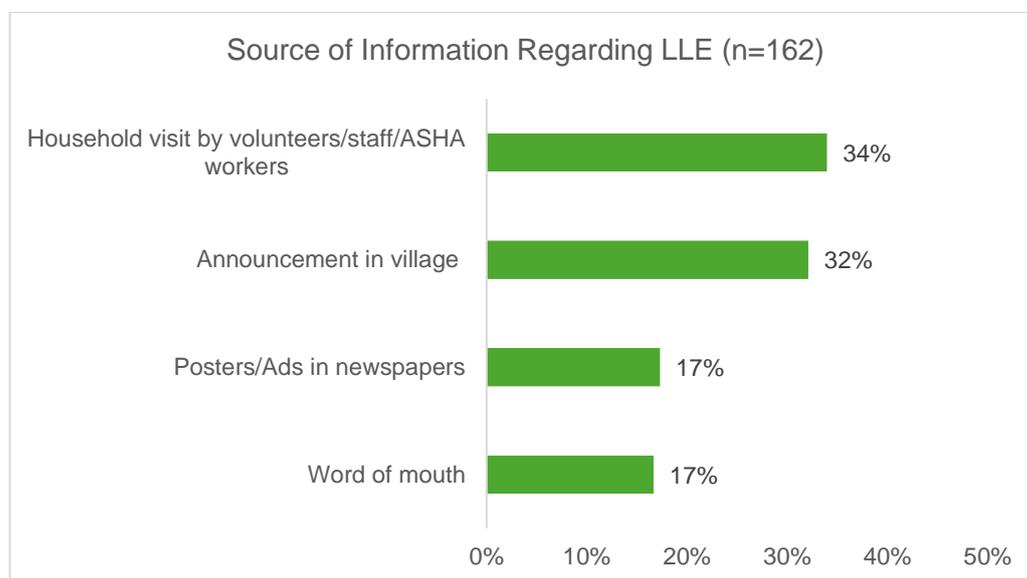
3.5 Efficiency

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

For outreach purposes of LLE, household visits by volunteers were the most effective (34%), optimizing program efficiency.

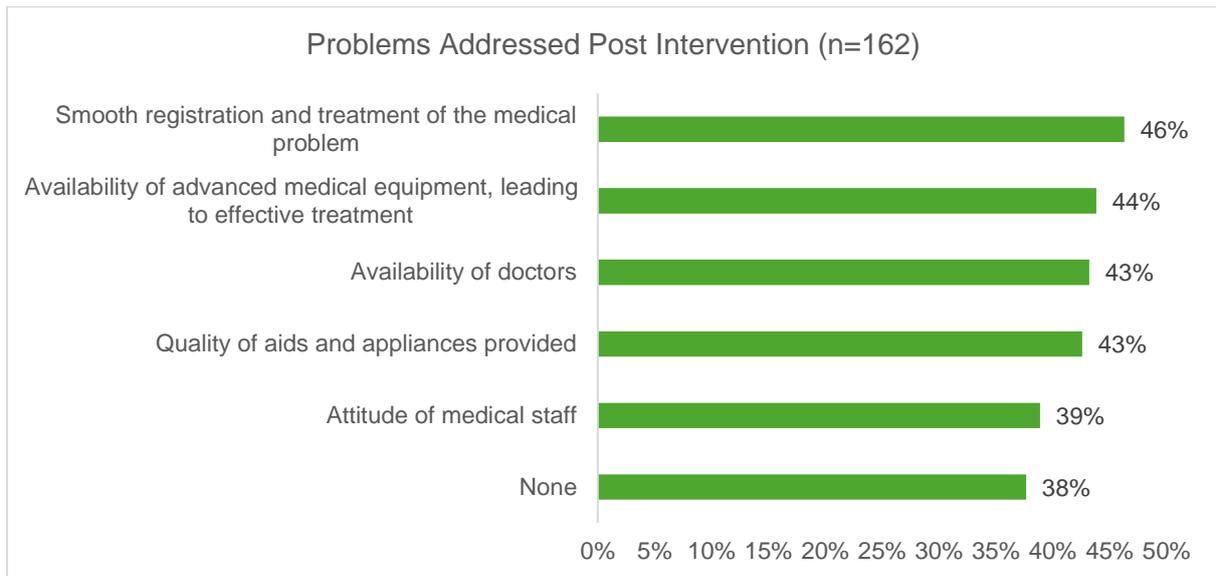
57% of patients reported uninterrupted electricity on the Lifeline Express train.

58% received surgery and post-operative care within 1-3 days, and 23% within 3-6 days.



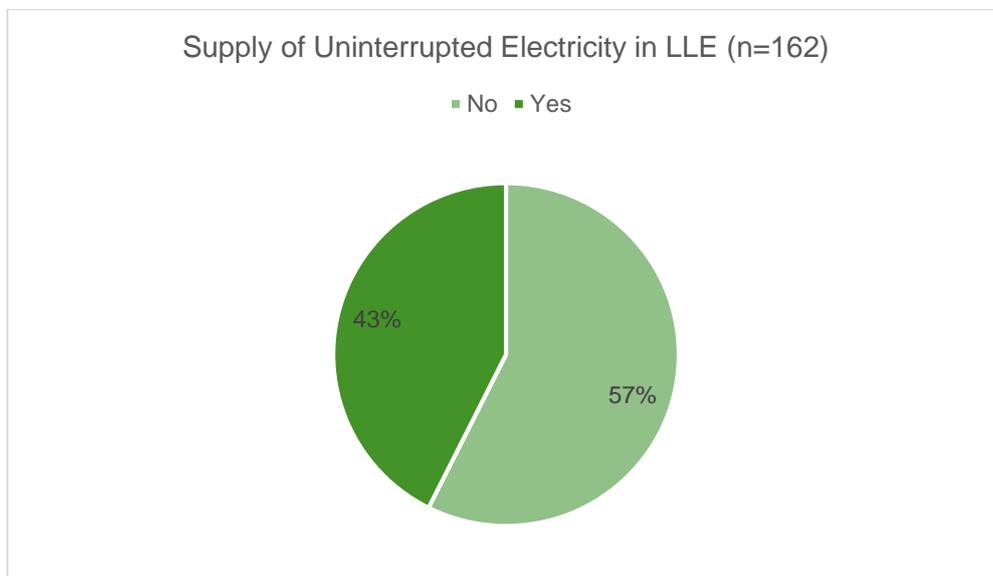
Graph 18: Source of Information Regarding LLE

To maximize the reach of the Lifeline Express program, various channels were utilized for promotion. According to surveyed beneficiaries, household visits by volunteers emerged as the most effective outreach method (34%). Respondents also cited other channels, including village announcements (32%), posters/advertisements (17%), and word-of-mouth referrals (17%).



Graph 19: Problems Addressed by LLE

The graph indicates that significant issues such as doctor availability, access to advanced medical equipment, smooth registration, and aid quality were resolved post the intervention by EMIL.

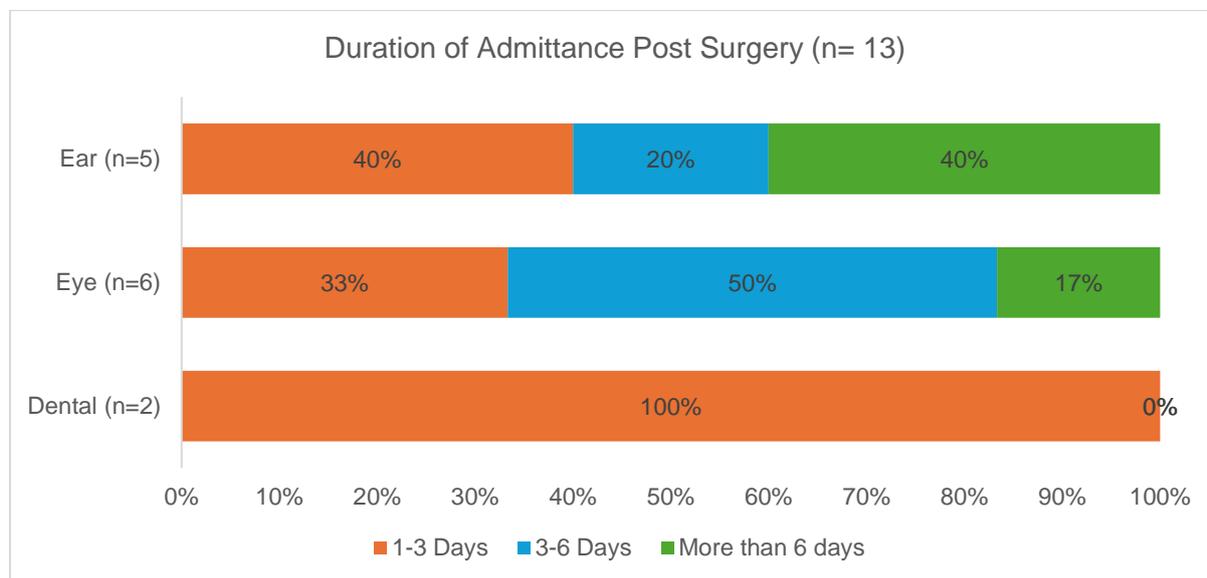


Graph 20: Supply of Uninterrupted Electricity in LLE

Proper treatment of patients required the train to function efficiently. According to 57% of patients, the Lifeline Express train had an uninterrupted electricity supply, which was crucial for administering proper and timely treatments.

After surgery or treatment, patients are given a scheduled date and time for follow-up care. If the treatment occurs near the end of the Lifeline Express's stay, patients are typically referred

to a nearby hospital. The Lifeline Express collaborates with local hospitals to ensure proper follow-up care for these patients.



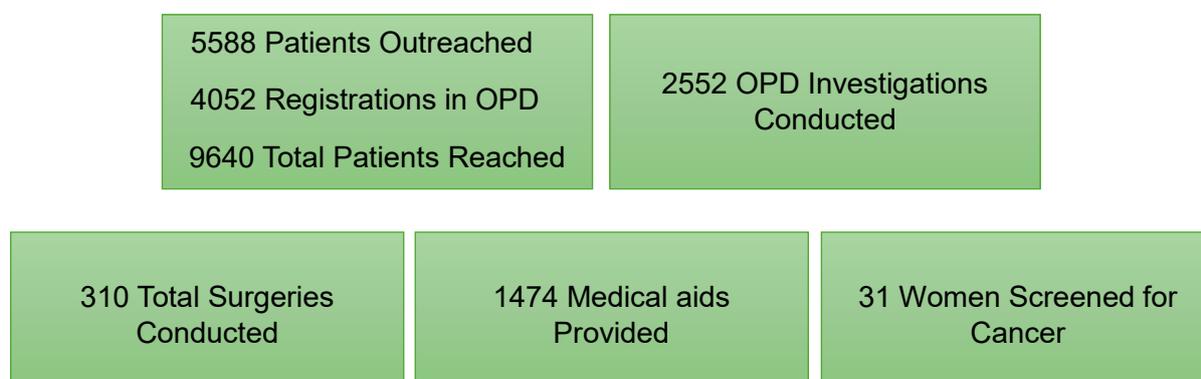
Graph 21: Duration of Admittance Post Surgery

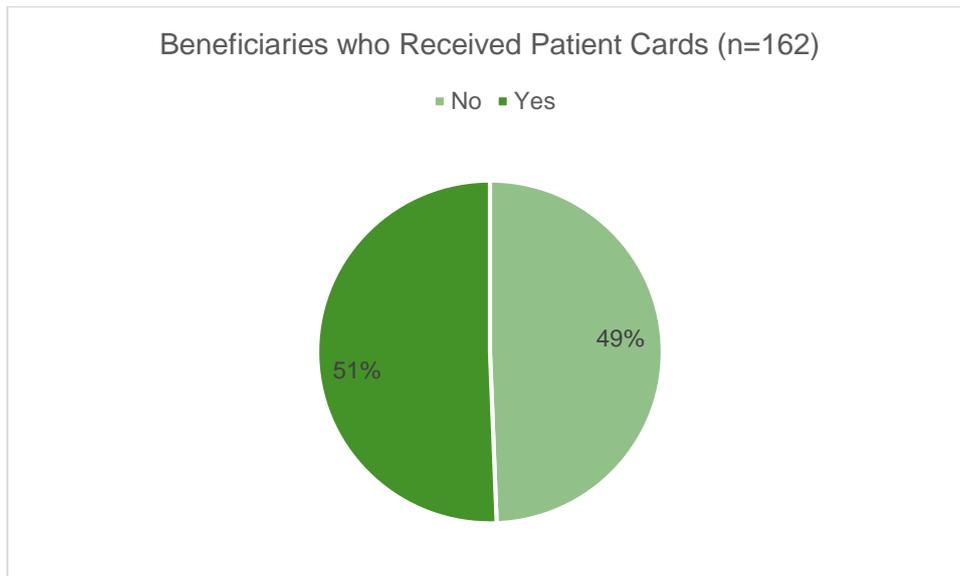
Approximately 8% of beneficiaries underwent surgery. Of these, about 58% received surgery and post-operative care within 1-3 days, while 23% received it within 3-6 days.

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

This section addresses the significance and potentially transformative effects of the intervention.

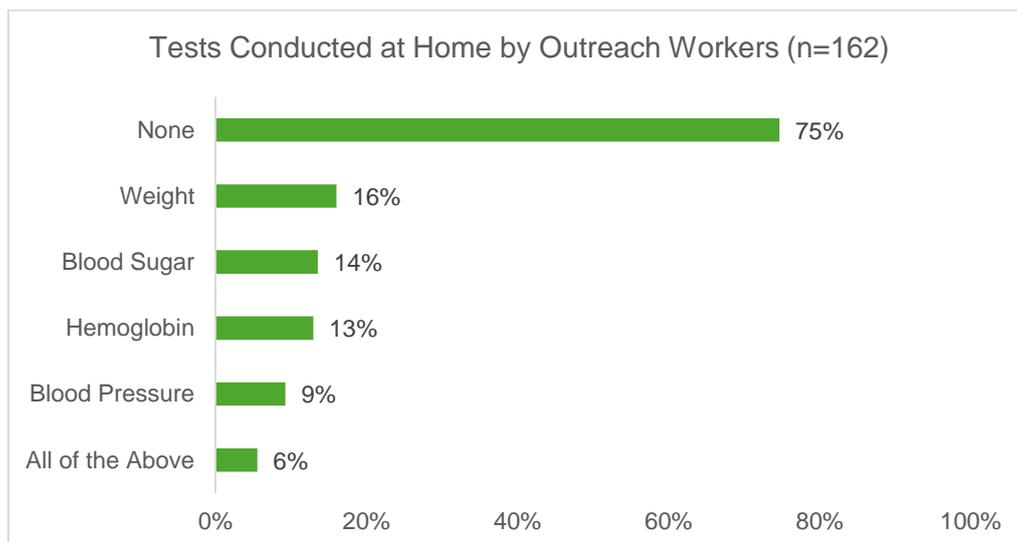




Graph 22: Beneficiaries who Received Patient Cards

Around 51% of the beneficiaries were assigned a patient card for reference in the Lifeline Express by the volunteers.

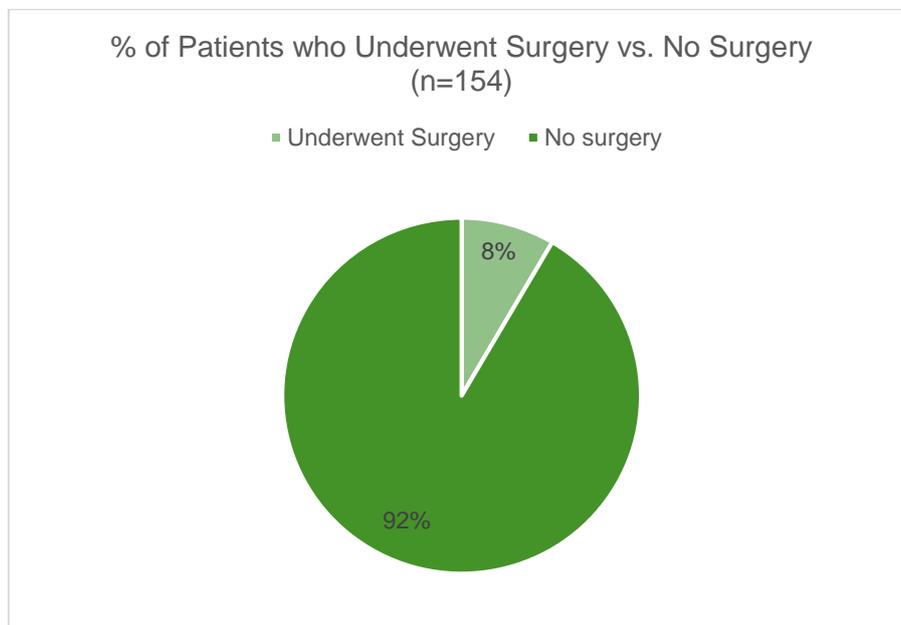
The volunteers checked the vitals such as Blood pressure, blood glucose, height, and weight. Apart from these tests, the volunteers also identified patients suffering from preventable disabilities. This included cataract patients- who were identified post basic eye and ENT check-ups. This shows the CSR intervention's efforts to maximise the impact by undertaking door-to-door reach of the LLE program and imparting knowledge about preventable disabilities.



Graph 23: Tests Conducted at Home by Outreach Workers

EMIL's CSR intervention ensured door-to-door services of basic health check-ups to ensure the early identification of patients.

Out of the total beneficiaries home visited, the highest number of patients were examined for weight (16%), blood sugar (14%) and Haemoglobin (13%). Upon conducting the necessary tests, the volunteers issued patient cards to individuals to facilitate their access to treatment on the Lifeline Express.

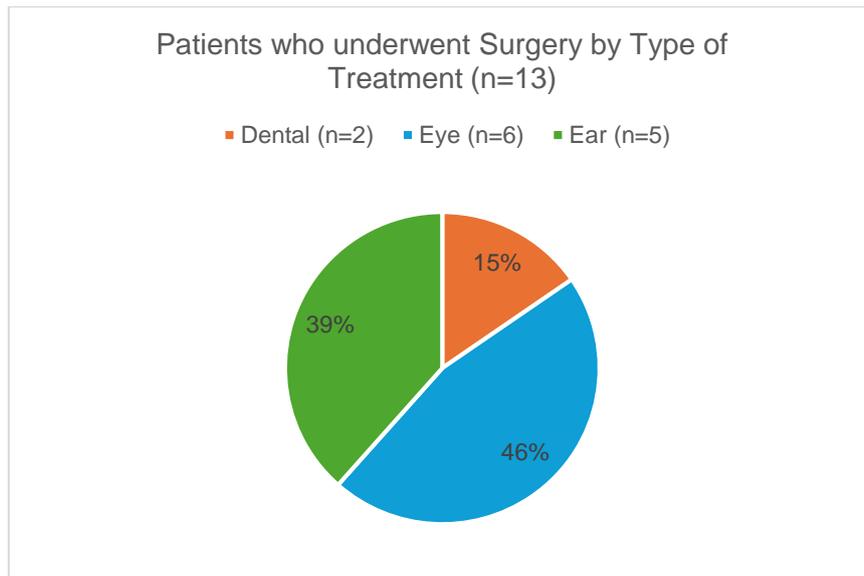


Graph 24: % of Patients who Underwent Surgery vs. No Surgery

It can be observed around 8% of beneficiaries underwent surgery.

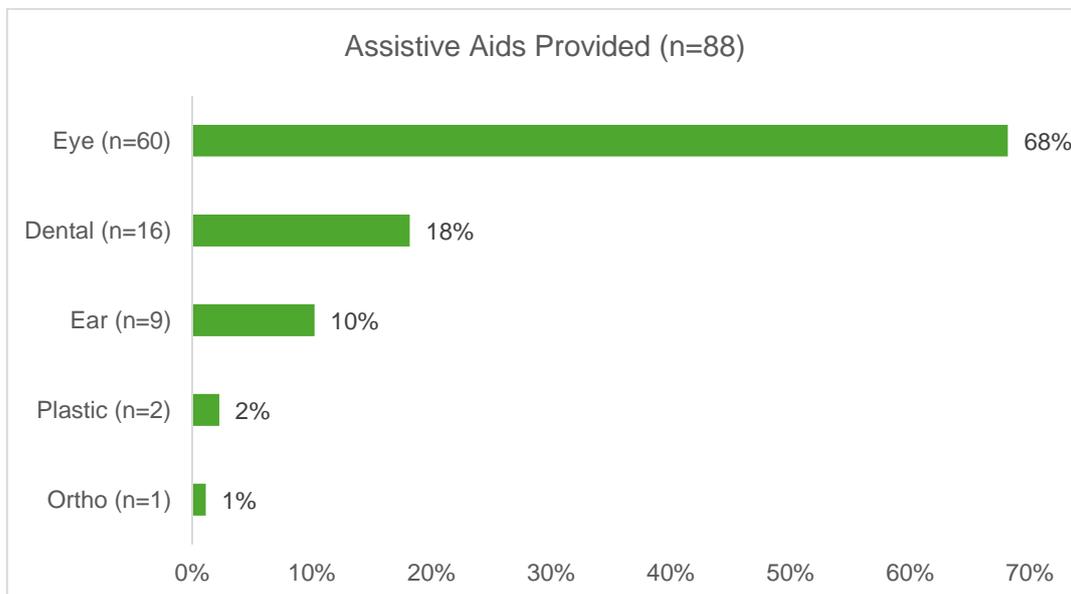
The table below illustrates the quantity of patients who received surgery categorized by treatment type.

Treatment Type	Total number of patients who received treatment at the LLE	Number of Patients who underwent Surgery
Dental Care	28	2
Eye Care	93	6
ENT	33	5
Cancer Screening	4	0
Orthopaedic	2	0
Plastic Surgery	2	0
Total	162	13



Graph 25: Patients who underwent Surgery by Type of Treatment

It can be observed from the graph that, out of total 13 surgeries conducted, 46%, 39% & 15% account for eye, ear and dental surgeries.

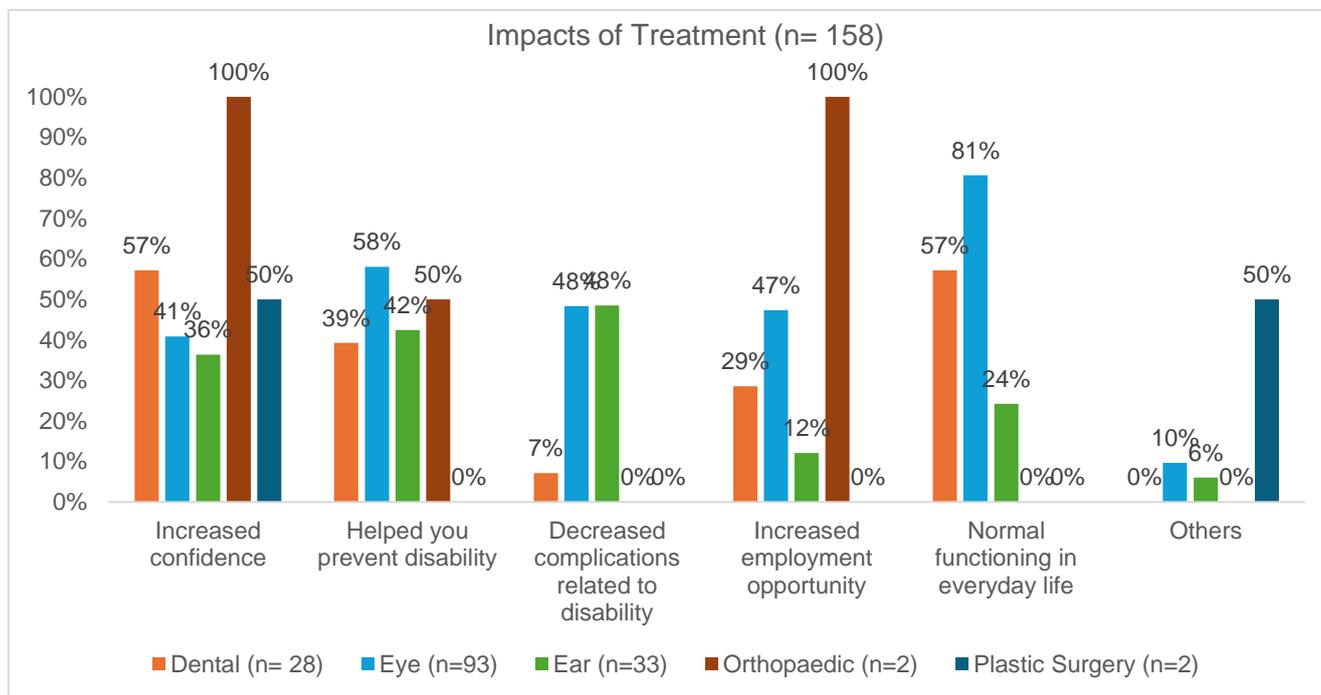


Graph 26: Assistive Aids Provided

On average, 54 % of beneficiaries were provided with assistive aids, all of which were provided free of cost. The CSR intervention focused on ensuring the availability of assistive aids to maximize the impact of the treatment provided.

Beneficiaries received assistive aids such as spectacles, hearing aids, callipers, and more, aimed at supporting their treatment and ensuring the complete resolution of preventable disabilities.

Below is the graph depicting the impact created by treating patients in Lifeline Express:



Graph 27: Impacts of Treatment

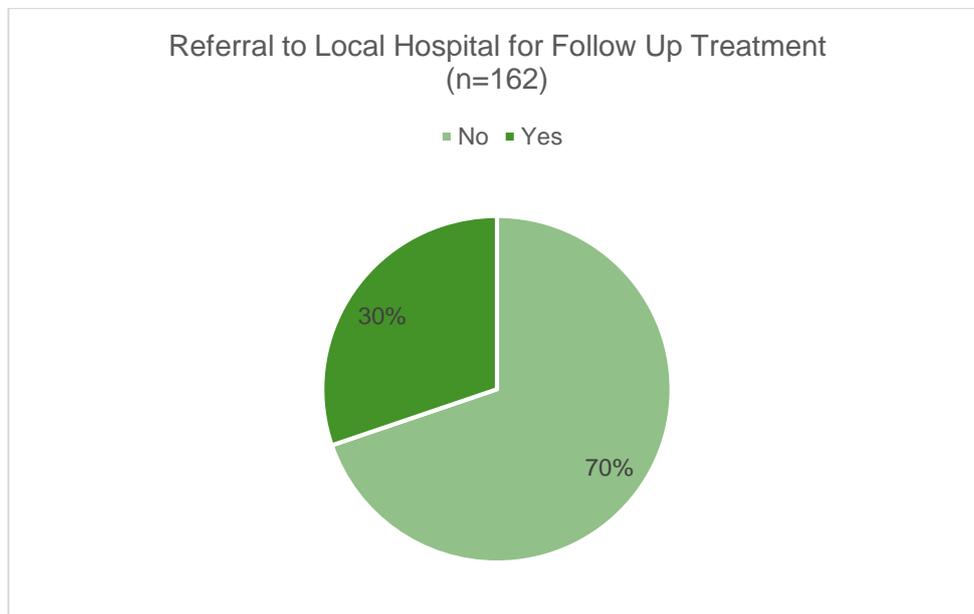
It can be observed that increased confidence, prevention of disability, and normal functioning in everyday life were among the major impacts across all treatment types for all beneficiaries.

The data findings underscore the significant impact of the LLE intervention in delivering healthcare services to previously inaccessible areas, effectively treating patients and catalyzing positive transformations in their lives.



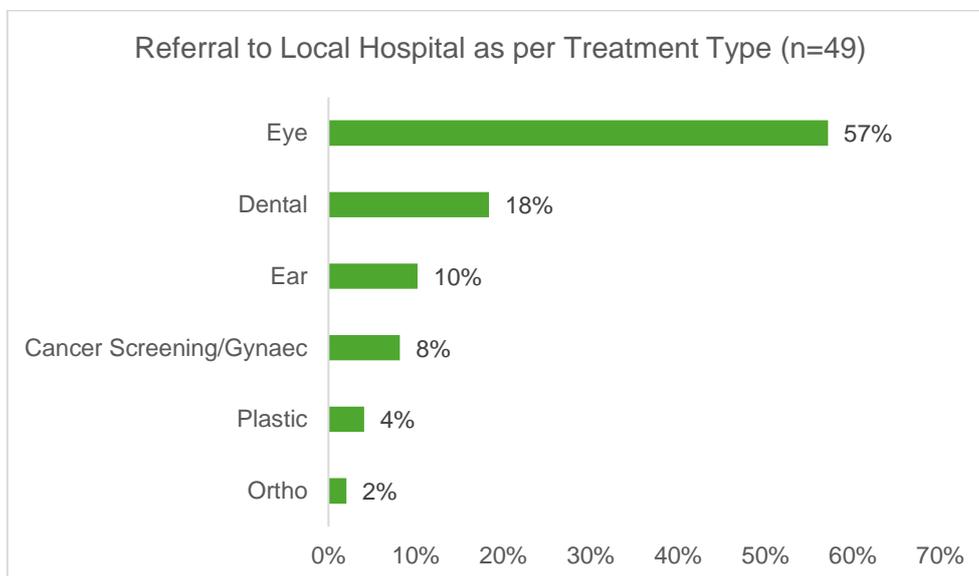
3.7 Sustainability

This section addresses the extent to which the benefits of the intervention are likely to be sustained and continue over time.



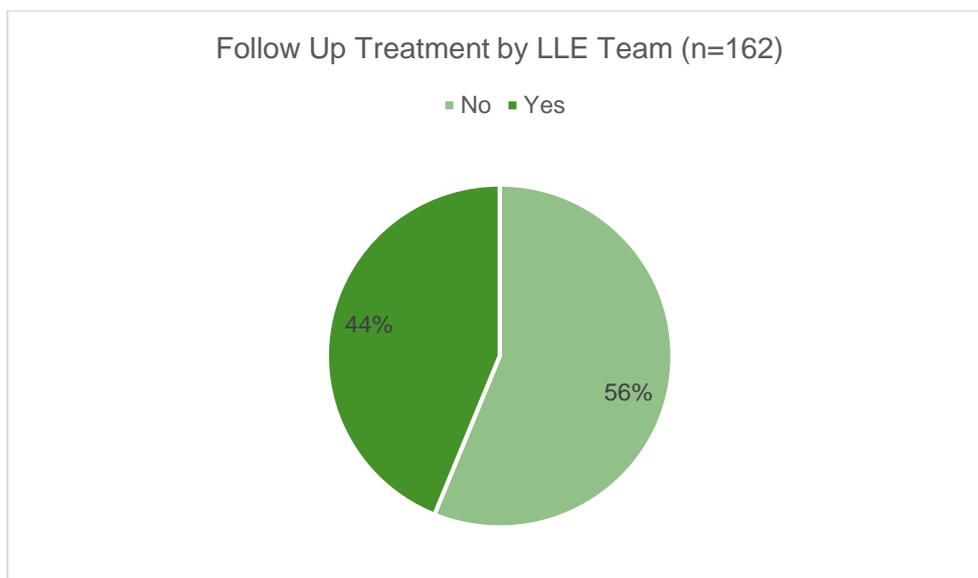
Graph 28: Referral to Local Hospital for Follow Up Treatment

About 30% of the total beneficiaries were referred to local hospital for follow up treatment.



Graph 29: Referral to Local Hospital as per Treatment Type

The Lifeline Express stayed at 'Singrauli' for 21 days. Some patients were completely cured in these 21 days, while some patients were referred to local hospitals for further treatment. This was done to ensure the complete treatment, hence making the entire objective of the CSR intervention sustainable. The LLE has tie-ups with the local hospitals and doctors, through which they ensure the completion of treatment of every patient coming to the LLE.



Graph 30: Follow Up Treatment by LLE Team

Around 56% of the patients were provided follow up treatment by LLE team.

The follow-up process is instrumental in ensuring that the treatments provided are effective and there is no re-appearance of symptoms. For this, the LLE staff had tied up with local hospitals through which they ensure a proper follow-up with the beneficiaries.

The Lifeline Express intervention demonstrated sustainability through its comprehensive approach, ensuring not only immediate treatment but also follow-up care in collaboration with local hospitals and doctors, thereby facilitating long-term health outcomes for the beneficiaries.

3.8 Impact Stories

Case Study - 1

Mr. Golari Shah, a resident of Singrauli District in Madhya Pradesh, faced significant challenges due to refractive errors in his eyes. Despite possessing an Ayushman Bharat Health Card, he encountered obstacles in accessing treatment, including a lack of information and proximity to quality healthcare facilities. Both private and government hospitals were not viable options; private care was too expensive, and government facilities lacked the advanced resources required for his condition.

Fortunately, the Lifeline Express, a mobile clinic sponsored by the Aditya Birla Group, offered free medical camps addressing diverse health concerns. During his visit to the medical camp, Mr. Golari underwent comprehensive assessments, including eye tests, blood pressure checks, and blood sugar monitoring. The on-site outpatient department (OPD) facilitated prompt evaluations by qualified doctors, leading to a successful cataract surgery performed by the Lifeline Express doctors.

Under the care of skilled professionals aboard the Lifeline Express, Mr. Golari received thorough eye examinations and necessary interventions. In addition to medical attention, he was provided with a meal, enhancing his overall experience. Following treatment, he received

prescription spectacles, significantly improving his vision and quality of life. Furthermore, he was referred to other hospitals for additional check-ups, ensuring ongoing support for his health needs.

The service Mr. Golari received from the Lifeline Express team was exceptional. The doctors, nurses, and other staff members were highly cooperative and supportive throughout his treatment. As a result, Mr. Golari is now thriving; his improved vision enables him to focus effectively on his work, which sustains his livelihood. He believes that his improved vision has not only prevented disability but also reduced complications associated with eye conditions.

Grateful for the invaluable assistance, Mr. Golari expressed heartfelt appreciation to the Lifeline Express and its benefactor, the Aditya Birla Group.

Case Study - 2

Rupesh Kumar Vaishya, a 36-year-old farmer, benefited significantly from the services provided by the Life Line Express (LLE). Living 30 kilometres away from the camp, Rupesh learned about the LLE from a poster and decided to attend, along with one or two family members who also sought treatment. Prior to this, Rupesh occasionally experienced ear pain, which he managed with eardrops that temporarily alleviated the discomfort.

Upon arrival at the LLE campus, Rupesh underwent basic health checks, including hemoglobin levels, blood pressure, diabetes, weight, and height assessments. During these examinations, it was discovered that Rupesh had a ruptured eardrum. This was a surprise to him, as he had only been treating the symptoms with eardrops and was unaware of the underlying issue. The medical team recommended surgery to address the problem. Following the operation, he was kept under observation for five to six days.

The facilities provided by the LLE were commendable. The train was well lit, and the quality of food served was high. After being discharged, Rupesh was given medication and eardrops. He reported no side effects and praised the care he received from the doctors and nurses.

Rupesh was particularly appreciative of the medical staff's attentiveness and the overall quality of the facilities and services at the LLE camp. He emphasized the importance of such camps for poor and needy individuals, advocating for their annual return to his area to provide much-needed healthcare services.

Case Study - 3

Sumit Sahu, a student residing in 'Singrauli' District, Madhya Pradesh, faced vision issues at a young age, hampering both his education and future prospects. Despite multiple hospital visits, his family could not afford the expensive treatments available in private facilities, leaving them without a solution. However, Sumit's fortune changed when he noticed posters advertising a medical camp organized by the Life Line Express, sponsored by the Aditya Birla Group.

Opting to attend, Sumit underwent various medical tests, including a thorough eye examination and assessments of his haemoglobin levels, blood sugar. While his overall health was satisfactory, his eyes required basic treatment rather than surgery, as prescribed by the doctors. Upon completing his treatment, he received spectacles from the Life Line Express, enabling him to resume his education with newfound clarity and hope for his future career.

This simple yet crucial aid proved to be transformative for Sumit, as it enabled him to perceive the world with newfound clarity and embark on his educational journey. Amidst the joy within his family, there lingered a hopeful anticipation for his son's promising and secure future.

The provision of free medical services by Aditya Birla's Lifeline Express had a profound impact on his life, enabling him to pursue his educational and career aspirations with newfound confidence. The transformative impact of the Life Line Express medical camp on Sumit Sahu's life serves as a testament to the power of accessible healthcare and community support. The intervention not only improved Sumit's vision but also empowered him to overcome obstacles and pursue his dreams with newfound confidence. This success story highlights the importance of initiatives aimed at providing equitable access to healthcare services, particularly for individuals from marginalized communities facing financial constraints.

Case Interview with Doctor

Dr. Surendar Rao, a plastic surgeon, stated that he attended to approximately 20-30 patients on the Life Line Express (LLE) train. He successfully conducted around 10 minor surgeries, while the remaining patients received appropriate-treatments or referrals to local health facilities as needed. Dr. Rao explained that since 'plastic surgery' is a super-specialty service, prolonged procedures were not feasible on the LLE train. For these procedures, the operating surgeon must provide post-operative care and monitor the patients. This was not possible because the train only stayed for 21 days at one location. However, he effectively treated numerous patients requiring short-term surgeries. Few patients were referred to local health facilities for post-operative care.

Dr. Rao recommended upgrading the LLE's technology and equipment. The doctors and the staff came from tier-1 cities who were accustomed to using state-of-the-art technology. Therefore, he proposed modernizing the ventilators to meet current standards used by anaesthetists to improve treatment effectiveness.

He praised the dedication of the LLE staff, emphasizing that their support was pivotal to program's accomplishment. Dr. Rao highlighted the significant impact of the LLE in delivering vital medical care and surgeries to marginalized and impoverished communities lacking access to health services. He advocated for the continuation of the LLE's mission to provide essential healthcare to underserved populations.



The positive experiences depicted in all case studies underscore the vital role of mobile healthcare services in rural areas.

The Life Line Express's effect on individuals' health and well-being illustrates the significance of such initiatives in reaching underserved populations and delivering essential medical assistance.



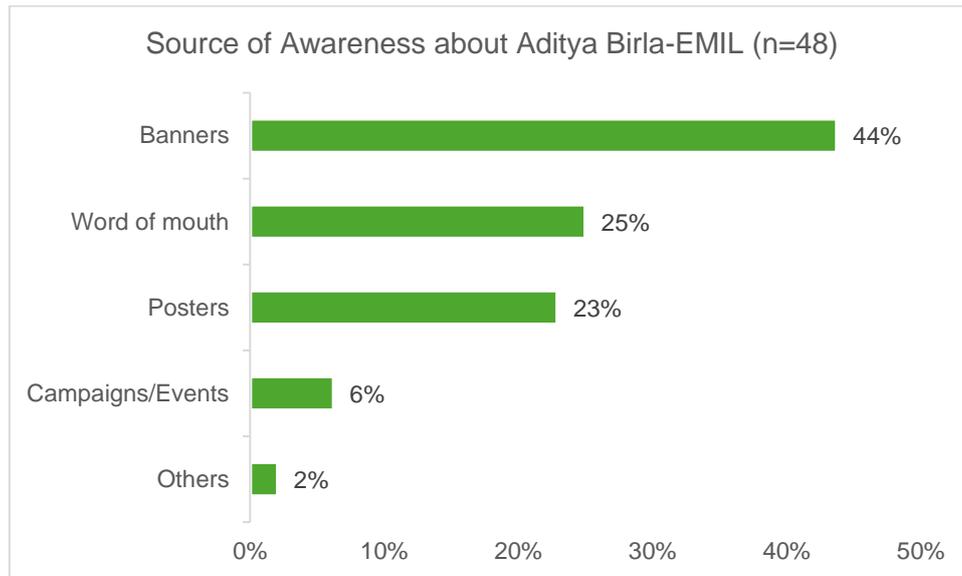
Chapter 4:

Brand Equity

4.1 Brand Equity- Overview

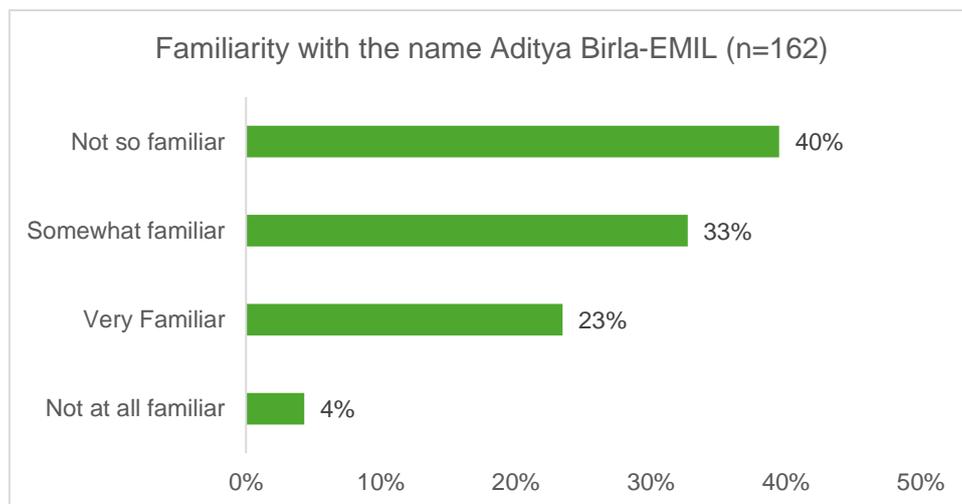
Brand Equity refers to a value premium that a company generates from a product or service through its name recognition. Organisations can enhance their brand value and reputation by providing service that is reliable, efficient, memorable, and of superior quality. In this study, we have determined the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

4.2 Brand Awareness and Familiarity



Graph 31: Source of Awareness about Aditya Birla-EMIL

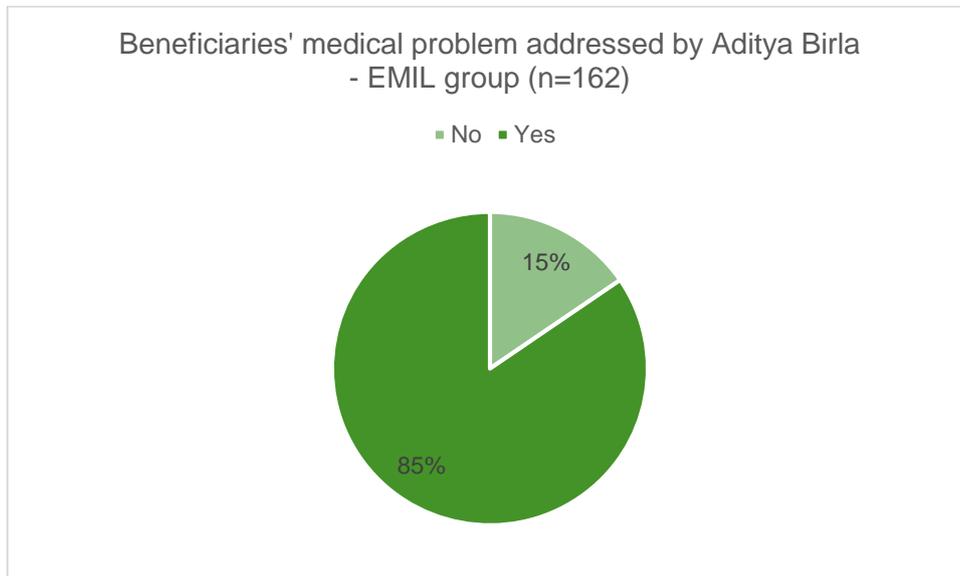
Word of mouth and **Banners** were the major source of knowledge about the brand. Posters also played a significant role in creating brand familiarity.



Graph 32: Familiarity with the name Aditya Birla-EMIL

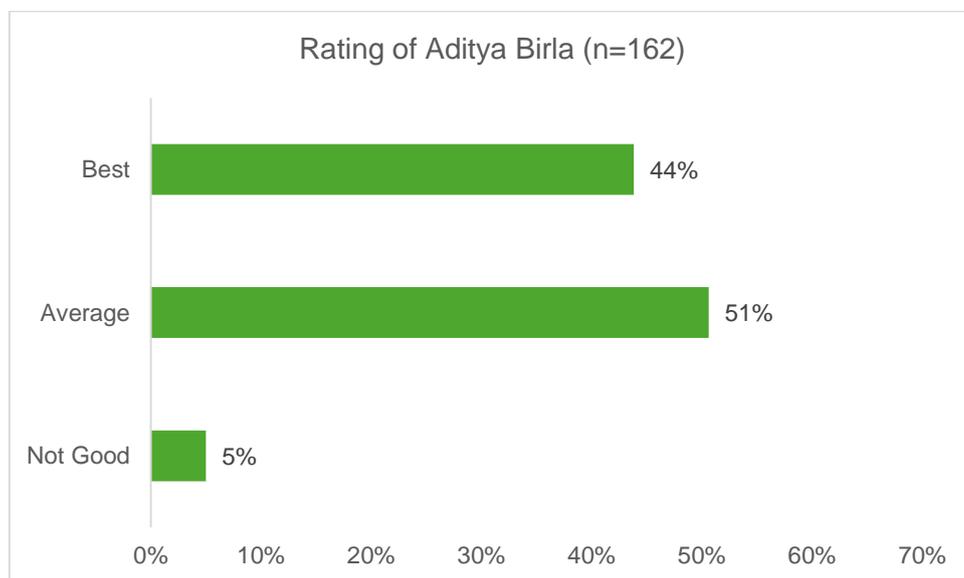
The beneficiaries were asked if they were aware and familiar with the brand. 56% of the beneficiaries reported that they were familiar with the brand, while 4% were not at all familiar with the brand's name.

4.3 Experience with the Brand



Graph 33: Beneficiaries' medical problem addressed by Aditya Birla - EMIL group

85% of the beneficiaries stated that Lifeline Express addressed their grievances or medical problems.



Graph 34: Rating of Aditya Birla Group

Overall, the beneficiaries had a positive experience with the Aditya Birla-EMIL group. After the implementation of the Lifeline Express Program, there is an increased awareness about the brand along with a probability of highly recommending the same to their friends/family or social circle.



Chapter 5:

Recommendations

Few recommendations with respect to the project are mentioned below:

Recommendations for Eye Treatment

Problem: Some beneficiaries who received eye treatment reported that they were not given eye drops or any medication that would have been beneficial for their future care.

1. Standardize Post-Treatment Kits:

Develop and distribute standardized post-treatment kits that include essential eye drops and medications. This ensures that all patients receive the necessary post-treatment care to support their recovery and long-term eye health.

Problem: Some beneficiaries reported that they received spectacles, which were not durable and effective.

2. Ensure Provision of Durable and Effective Spectacles: Ensure that spectacles provided are of high quality, durable, and effectively meet the vision correction needs of the patients. Implement quality control measures and partner with reputable suppliers to enhance the durability and effectiveness of the spectacles.

Recommendations for Dental Treatment

Problem: Beneficiaries generally reported that post-treatment care was insufficient and wanted the treatment to have more long-term benefits.

3. Strengthen Local Health Facility Partnerships: It is crucial to establish strong partnerships with local health facilities. This will ensure that patients have access to regular check-ups and follow-up treatments as needed, thereby improving overall health outcomes and maintaining the benefits of the initial treatment.

Recommendation for Outreach

4. Increase in duration of the outreach activity: In order to cover more population and ensure better knowledge of the Lifeline Express Program among the community, more time can be spent on outreach, from 15-20 days to 20-25 days.

Recommendation for Branding

5. The brand name "Aditya Birla – EMIL" should be introduced on all assistive aids provided. This will enhance brand recognition and familiarity.

ADITYA BIRLA



EMIL

CSRBOX & NGOBOX

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Submitted by :

