Vol. 1 Issue 4, 2014

CSR Mandate

Enabling Sustainability

Banka BioLoo -Ushering a Mindset Change

Wockhardt -Creating a Healthier World

Dial 108 -Save Life & Property Empowering the Global Poor the Pro Bono Way

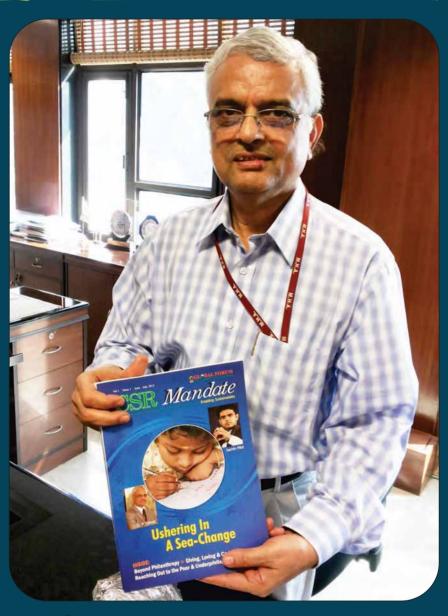
THE MAN AND THE MISSION TOWARDS BETTER SANITATION

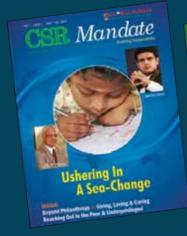
- Dr. Bindeshwar Pathak

CSR MANDATE LAUNCHED

magazine to have come out of Forum for Community Development Foundation (FCD), an initiative of New Media. It was launched in New Delhi by Shri. O.P. Rawat, the then Secretary, Department of Public Enterprises (DPE), Ministry of Heavy Industries, Govt. of India.

New Media's Community Division-Forum for Community Development Foundation is looking forward to a fulfilling and responsible working relationship with all PSUs, Corporates and NGOs as the nation embrace the new Act that will implement CSR initiatives by all stakeholders thus making us socially responsible citizens, contributing and giving back to the society that has given us so much in return.









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Dr. 13-03-2014

MESSAGE



It is a known fact that 21st century is the century of Knowledge, Ideas and Innovations are the driving forces of this era. The documentation of trends and practices of good governance is the need of the hour to spread the awareness and implementation,

The endeavor of providing a platform to the thought leaders and decision makers for sharing their vision, goals, inspiring stories and the people they help, deserves sincere appreciation.

I convey my compliments and best wishes to New Media Communication Private Limited for its meaningful publications like CSR Mandate magazine.



Atuta Imchen, Executive Editor.
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Marol-Maroshi Road, Marol,
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ACCOLADES



SEWA Count 40...



સ્વાશ્રયી મહિલા સેવા સંઘ (સેવા) Self Employed Women's Association (SEWA)

સેવા ચાલીસી...

Dr. 2/11/2013

REF.NO: SEWA/ADMN./211/2013

Atula Imchen, Executive Editor,

New Media Communication Private Limited, New Media House, 1, Akbar Villa,

Marol - Maroshi Road, Marol Andheri (E), Mumbai – 400 059.

Dear Atulaben

Thank you for sending us the article – A Movement of the Women. By the Women, For the Women in the 2nd issue of CSR Mandate.

We appreciate very good coverage of SEWA philosophy, activities and out reach. With Regards

Sincerely yours Pratibha Pandya Admn. Officer



Congratulations on a well thought out issue.

Ruchira Gujral Corporate Engagement and CSR United Nations Children's Fund

SEWA Reception Centre, Opp. Vesona Garden, Bhadra, Ahmedabad - 260 001.

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TETE-A-TETE



CSR Must Focus on Empowering North-Eastern Rural Women

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Maverick Marcomm, Andheri (E), Mumbai- 400059. +919004314563

$\mathbb{F}_{\text{oreword}}$



The general election results are out and India has said in clear and unambiguous terms that it wants to be counted among the best nations of the world. There is also hope that India will accelerate its trajectory of growth. However, this cannot be achieved by a country where people are largely hungry and sick, with no proper nutrition and sanitation to sustain them. A majority of the people just eke out a living with hardly any scope to earn decent wages, let alone dream of prosperity and success.

So, as India prepares to take on the world in terms of economic growth and prosperity, it has become even more imperative for all of us to help build a healthy and a happy India, where majority has access to clean drinking water, nutritious food and proper sanitation. It is only when the basics of good life are met that we can hope our citizens positively participate in every aspect of the country's growth, fulfilling their own hopes and aspirations alongside.

The first and foremost priority is on ensuring a reasonably well-fed India which is by and large healthy, mentally and physically by creating awareness about sanitation and healthcare and evolving a support system for preventive healthcare through direct intervention.

Comprehensive sanitation and healthcare programmes in urban and rural areas benefiting a large underserved community is one of the topmost works on hand for both government and the business communities, as it is a known fact that only healthy and stress-free people help develop a healthy nation.

Yet, unbelievable though it may seem, but even today in rural India, one woman dies every five minutes during childbirth, often due to poor health, unsafe and unhygienic home birth practices and inadequate access to quality healthcare. As the world moves forward with breakneck speed in this information age, a large section of our population in rural and underserved areas still do not have access to decent and most basic primary healthcare.

Mismanagement, inadequate funds and vested interests have played out their role until now and it is time that we put things in the right perspective and make honest and sincere endeavours to make basic primary healthcare services accessible to the underprivileged communities. The aim should not only be to provide certain basic medical treatment facilities but also to create awareness in healthcare and hygiene, but support preventive and promotive healthcare through a chain of activities in a sustainable manner.

In the last few years, some strides have been made by both public and private sectors. We bring some interesting stories of corporate social responsibility in healthcare, sanitation and wellness. We hope our readers will enjoy reading about these interesting and innovative ways to bring healthcare to underprivileged people in India. A lot is yet to be achieved, but we are happy that an emphatic beginning has been made.

Kamaljit Swaroop Vice Chairperson

New Media Communication Pvt. Ltd

Editorspeak



Dear Reader,

Greetings. While the election results emphasise the fact that Young India is rising and India is Shining, our country continues to throw up many paradoxes; it is a country where, by and large happiness, wealth and good health until now is available to only a few.

In fact, most Indians do not even have access to good nutrition and sanitation, let alone good health. India's streets and lanes in villages and cities are strewn with human faeces, contaminating food, water and the surroundings, spreading diseases that have been long wiped out from most advanced nations of the world.

With regard to the Indian healthcare sector, it suffers from underfunding and understaffing apart from bad governance. Although significant strides have been made since Independence, 70 percent contribution comes from the private sector. India continues to account for 21 percent of the world's burden of disease and 20 percent of the world morbidity and mortality as it shoulders 16 percent of world's population. Only 1-2 percent of what the world spends on health is spent in India. With an increase of 2.5 percent on health in 12th Five-Year Plan, adding up to 6.0 percent GDP, India ranks among the bottom five countries with the lowest public health spending globally.

Krishna Giri (MD) Health & Public Services, Accenture India said, "Our report identifies the importance of shifting from 'infrastructure focus' to 'productivity focus' to generate corresponding improvements in India's healthcare access. This can only be achieved if larger fund allocation for healthcare is accompanied by effective and innovative interventions to improve the existing healthcare ecosystem in order to achieve global standards."

The report throws up three major challenges hampering healthcare sector and the delivery of healthcare services:

Substantial gaps in healthcare infrastructure: Hospital bed density in India at 0.9 per 1,000 population falls hopelessly short of WHO laid guidelines of 3.511 per1,000 patients. There is a huge inequity in utilization of facilities at the village, district and state levels.

Low healthcare insurance service coverage leading to high out of pocket spending: Nearly 80 percent of spend in India is out-of pocket, due to limited insurance coverage, both personal and government-funded. This translates into limited reach of medical facilities, which is a serious concern, considering that 70 percent of India's population is young and capable of leading a full and productive life for itself and the country.

Medical manpower remains inadequate: India currently has approximately 600,000 doctors and 1.6 million nurses, translating into one doctor for every 1,800 people. The recommended WHO guidelines suggest one doctor for every 600 people. There is also a clear disparity in the manpower present in the rural and urban areas.

Hence, increasing medical staff and infrastructure along with a comprehensive adaptation of Information Technology for success of government run projects is imperative. At the same time corporate sector must come forward to work hand in hand with governments to catapult India among the healthy nations.

As India stands at the cusp of a new dawn, new aspirations, and hopes to be counted among the stronger nations of the world, we bring heartening and thought- provoking stories, opinions and views from India's government and private sectors on how healthcare, sanitation and nutrition is shaping up in the current state of affairs.

Wish you happy reading.

Archana Sinha

Editor

THE ACT & THE IMPACT

For Companies, CSR, a Win-Win Business Proposition



Parul Soni

ection 135 of the Companies Act 2013 (The Act) will change the way businesses behave, act and do business in India. According to the Act, starting 1 April 2014, every company with a minimum net worth of Rs. 500 crores, turnover of Rs. 1,000 crores or a net profit of at least Rs.5 crores will need to spend at least 2.0 of their average net profits on Corporate Social Responsibility (CSR) activities. These funds can be spent on projects or programs relating to activities specified in Schedule VII of the Act. This mandate will impact about 16,000 companies and it is estimated that Rs. 22,000 crores will be spent on CSR activities. When such a large amount of funding flows into the economy with a focus on CSR activities, it is expected to create substantial impact on the target areas. A discussion on the scale of the impact and some of the areas that will be impacted is as follows:

Development of Society

Such large scale funding of CSR activities by the private sector will go a long way in nation building. As per Schedule VII of Section 135, these funds can be utilized for various activities such as eradicating hunger and poverty, promoting healthcare and sanitation, safe drinking water, gender quality, education, enhancement of vocational skills and livelihoods, ensuring environmental sustainability, etc. This ensures that the funding is channelled for

the most under-developed and underserved section of the society, deprived of basic human necessities. It is assumed that over the years, we will see a lot of improvement in the basic social indicators in areas where companies have proactively initiated CSR activities. CSR will be structured for better impact on society and the economy.

New Employment Generation

As companies incur expenditure on CSR activities, a lot of new employment opportunities will be generated. Planning, implementation, monitoring and reporting of CSR activities will require lots of manpower. Currently, most companies have small teams for managing their CSR activities, but now professional project management staff, administration staff, technical staff and employees with experience in development sector will be required in large numbers. CSR consultants will be required to help about 16,000 companies chalk out their CSR strategies. This spending will have a multiplier effect and a lot of indirect jobs will also be created. New business opportunities will arise in the form of CSR consulting companies, recruitment agencies specializing in developmental sectors and audit agencies amongst others.

Funding of Cash-Starved Sectors

Another feature of the Act is that it also channels funds towards cash-starved

A LARGE AMOUNT OF MONEY SHALL BE SPENT F O R CONDUCTING CSR ACTIVITIES, SO I THINK THE BIGGEST IMPACT THAT THE ACT WILL HAVE ON BUSINESSES IS THAT IT WILL BRING A CERTAIN SHIFT IN ATTITUDE TOWARDS ITS CSR ACTIVITIES. BUSINESSES WILL BE FORCED TO PLAN ABOUT THE IMPACT THAT THEY ARE CREATING THROUGH THEIR CSR ACTIVITIES AND NOT JUST EARMARK AND SPEND CERTAIN AMOUNT OF MONEY FOR CSR

sectors that have found it difficult to raise funds otherwise. Preservation of heritage, arts and culture, encouraging Olympic sports, contribution to armed forces veterans and war widows and technology business incubators are all included in the gambit of CSR activities, Archaeological Survey of India (ASI) has been struggling to carry on its conservation and excavation projects due to shortage of financial resources. Getting private sector companies to partner with the government in preservation of our national heritage is an excellent idea. A successful example of a public-private partnership for restoration of a historic building is that of Humayun's tomb, Delhi. The ASI partnered with the Aga Khan Trust for Culture and Sir Dorabji Tata Trust for the restoration work of the structure. This helped them raise more than \$650,000 for the tomb's garden restoration. With the Act coming into force, I am sure we shall be able to cite many other such examples in the near future.

Technology Business Incubators (TBIs) provide an enabling environment for the growth of innovative start-up companies. By nurturing start-ups, TBIs indirectly facilitate growth of the economy through creation of new jobs and generating income and output. While the government is setting up incubation centres across the country, the private sector joining hands in this initiative could provide immense momentum to this exercise. Incubators established in partnership with the private sector would ensure technology experts from the industry to participate as mentors for the incubators.

Reporting of CSR Activities

There are strict monitoring and reporting norms for the CSR activities. Unlike earlier, CSR activities and reporting is structured, mandatory, compliance oriented, impactdriven. Moreover, CSR reporting has now become a governance function. A board level CSR committee is required to formulate and recommend the CSR policy of the company and the CSR activities shall be undertaken as per its policy. The Act also mandates that all the activities undertaken for CSR should be reported in the public domain through the company websites. In fact, a format for the reporting is part of the rule. This will facilitate uniformity of reporting and accountability of actions. As a result, last mile impact of these

activities can be studied and measured. This will enable a shift in the focus of the reporting of CSR activities as well as of the corporates from funds spent on CSR to the impact that they have been able to create.

Change in Attitude of Companies

A large amount of money shall be spent for conducting CSR activities. So I think the biggest impact that the Act will have on businesses is that it will bring a certain shift in attitude towards its CSR activities. The businesses will be forced to plan about the impact that they are creating through their CSR activities and not just earmark and spend certain amount of money for CSR. It is of utmost importance to have a proper planned CSR strategy in place which is executed by a professional and experienced team. Otherwise there are chances of misuse or wastage of precious resources, time and effort.

Thus it can be concluded that the impact of the Act would be far-reaching and across sectors. Through this Act, the government has invited the private sector to participate with it for a sustainable, balanced and inclusive development of the economy and the society. And there is no doubt that the private sector will respond in a praiseworthy manner. Through their CSR interventions, the private sector will be able to make a definitive positive impact on the lives of innumerable individuals, better the quality of lives, and collaborate with the government in various nation-building initiatives. Moreover, this is a great opportunity for companies to develop their own branding as a socially responsible company, attract the best talent, and strengthen relationships with stakeholders. The companies should not look at CSR as an obligation but make it a way of doing business and align their CSR strategy with their business goals. This will result in a win-win situation for everybody - the government, the private sector and the society at large.

Parul Soni is Executive Director & Leader - Development Advisory Services, Ernst & Young LLP

Disclaimer: The views expressed above are by the author himself and do not represent Ernst & Young



Thomson Reuters Foundation Offers Free Legal Service

Empowering the Global Poor the Pro Bono Way



Urvashi Devidayal

he Thomson Reuters Foundation uses the skills, value, and expertise of Thomson Reuters to trigger change and empower people across the world. The Foundation stands for free, independent journalism, human rights, women's empowerment, and the rule of law. Monique Villa, who has been ranked among the world's 100 Most Influential People in Business Ethics by Ethisphere, took over the Foundation in 2008 and introduced a number of programs that have had a tremendous impact in the social sector.

Among them is Trust Law, a global pro bono service, connecting NGOs and social enterprises with the best law firms around the world. In three years since the launch of the program, Trust Law has generated the equivalent of \$35 million in pro bono legal assistance to organizations across the world. With staff in six countries and fluency in 18 languages, the program connects the world's best lawyers with high-impact social enterprises and extraordinary NGOs. TrustLaw is committed to spreading the practice of pro bono to every country.

In India, Trustlaw has a reach of over 160 NGOs & social enterprises and a rapidly growing list of law firms that are extending

their support to these organizations. Currently, we are working with 55 of the leading law firms and lawyers in the country that are actively picking up projects posted by our service. We have successfully connected over 60 projects in the region working both with domestic organizations as well as international organizations that have requested assistance in India. The projects we have helped on range from everyday legal matters that arise for our NGOs and social enterprises (e.g. general commercial advice, IP, employment issues etc), to large cross-border programmes. The connections to free legal assistance help organisations focus on their mission instead of spending resources on legal expertise.

One of the unique features of TrustLaw is that we ensure credibility and quality by ensuring that someone from our Foundation is involved in each project from start to finish. It starts with a due diligence and reference check during our outreach to pro bono clients. We want to ensure that the organizations that are accessing the network of pro bono lawyers are non-discriminatory and have a vision for social change. The same diligence goes in to checking with the lawyers who are taking



ONE OF THE UNIQUE FEATURES OF TRUSTLAW IS THAT WE ENSURE CREDIBILITY AND QUALITY BY ENSURING THAT SOMEONE FROM OUR FOUNDATION IS INVOLVED IN EACH PROJECT FROM START TO FINISH. IT STARTS WITH A DUE DILIGENCE AND REFERENCE CHECK DURING OUR OUTREACH TO PRO BONO CLIENTS. WE WANT TO ENSURE THAT THE ORGANIZATIONS THAT ARE ACCESSING THE NETWORK OF PRO BONO LAWYERS ARE NON-DISCRIMINATORY AND HAVE A VISION FOR SOCIAL CHANGE. THE SAME DILIGENCE GOES IN TO CHECKING WITH THE LAWYERS WHO ARE TAKING THIS ON BECAUSE THEY BELIEVE IN THE IMPACT OF S U P P O R T I N G ORGANIZATIONS BEYOND JUSTMONEY

this on because they believe in the impact of supporting organizations beyond just money. As Kunal Thakore, Partner, Talwar Thakore & Associates, said: "I think most lawyers often wonder how they can give back. Donating money is the easier thing to do, but time and work is definitely a better way to contribute back. The goodwill that we see in the legal community will have a tremendous impact."

Considering that India is expected to be one of the fifth largest economies by 2020, the scale of the humanitarian and social challenges that face our population of a billion plus people is tremendous. One of the key solutions of overcoming extreme poverty and reducing equality gaps is education. "There are approximately 320 million children in the country and only about 10 to 12 percent of these children end up going to college. Around 50 percent of them drop out of 5th grade and almost 4.0 percent don't even go into primary school which is a huge problem in the country", says Meghna Rakshit, Director of Communications, Teach for India. TrustLaw helped connect Teach for India with Mayer Brown International, a leading law firm in the US to help them set up a 501c organization. This would allow them to access funding from both NRI (Non-Resident Indians) and forward thinking Americans who understand that the scale of the issue goes beyond borders.

On a domestic front, J Sagar Associates, one of India's top firms worked on various projects through us. One project of note was with Nuru Energy, an energy generation enterprise that has developed a pedalpowered energy generator operated by micro-entrepreneurs across India to provide energy for rural communities and income to the entrepreneurs, in a country where half a billion people still have no access to electricity. Nuru Energy needed to adapt an existing shareholder agreement to support Nuru's expansion in India. TrustLaw has also been able to assist Nuru Energy in Mauritius, United States, Kenya, and the Netherlands. There is an increasing trend of social enterprises expanding their reach beyond India to other countries in Asia and increasingly towards Africa. "Being bootstrapped and in startup phases, social enterprises can really use the expertise of law firms to understand country specific dynamics and the nuances of working within

a country's legal framework when they are looking to expand to new countries", commented Meenakshi Kishore, who manages the Sankalp Forum in India.

Another great project we have worked on with SaveLife Foundation is to help connect them with Dechert, a US based law firm, coordinating a cross border legal analysis on the Good Samaritan Laws in other countries. India has the highest number of road accident deaths in the world, and so-called 'Good Samaritan Laws' have historically encouraged bystanders to assist those injured on the road without fear of being sued or prosecuted. SaveLIFE Foundation will use the comparative research to advocate for effective 'Good Samaritan' legislation in India.

For TrustLaw, India has become one of the fastest growing regions and we expect the program to expand not only in the major metros but beyond to Tier 2 cities that are seeing a rise in social enterprises and active social sector organizations. Further, as we start reaching out to our neighboring countries, we see the region as an active pro bono community.

Urvashi Devidayal currently works for the Thomson Reuters Foundation managing the working to the TrustLaw Connect program for South Asia. She is reaching out to the beneficiaries - NGO's, charities, social enterprises and social businesses to join the network. Along with this, Urvashi is also reaching out to the major law firms, lawyers and corporate counsels in this region to offer their pro bono support to these organizations. Urvashi has over 10 years of work experience in the US, UK and India, including over four years at the Climate Group, which she helped set up in India. Urvashi has a degree in Economics from Ohio Wesleyan University. She is also the current President of the American Alumni Association (a 40 year old charitable organization), and is on the Advisory Board of Kranti (an NGO working to empower daughters of sex workers). She is based in Mumbai, India.

To find out more about the program and how you can participate, please contact U r v a s h i D e v i d a y a l - Urvashi.devidayal@thomonsreuters.com/02 2 6180 7086.

Their website is www.trust.org

INNOVATIVE MODELS

Aim to Help Firms Create & Retain Workforce



Bally Sappal

he impending challenge for India is to address the former Indian Prime Minister's ambitious target of skilling 500 million citizens by 2022. Could recent CSR policy changes in India provide a solution to solving India's labour market challenges and provide a global workforce? This article provides a potential model for companies to create and retain the workforce they need.

India's Labour Market Challenges

The world population is rapidly ageing. By 2020 the global population aged 65 and above is expected to reach 1.3 billion – almost doubling from 530 million in 2010, indicating a potential global shortage of 47 million working people. According to a study by the Boston Consulting Group for the PHD Chamber of Commerce & Industry, it is anticipated that by 2020, India could lead the world's workforce numbers and have a surplus of 56 million people to meet this shortfall.

India's businesses struggle to meet growing labour demands, due to low levels of employability and critical skills amongst its citizens who often have inadequate formal skills training and restricted access to education. This is supported by a recent McKinsey report. Employers therefore experience high attrition rates, increased hiring costs and loss of productivity.

With an estimated 8.0 percent projected growth rate until 2022, a skilled labour force is crucial to India's future development to meet global and national labour market needs.

The Companies Act 2013

Could the recent Companies Act 2013 in India, form part of the solution to these labour market challenges? The new bill requires companies above a certain size to spend at least 2.0 percent of a three-year average annual profit for CSR activities. Ernst & Young estimates the law will cover 3,000 companies and \$2 billion of annual expenditures on CSR activities.

The Bill's activities include eradicating hunger and poverty; promotion of education; women empowerment; environmental sustainability; employment enhancing vocational skills or contributions to government set-up funds.

With a move away from donations and a project focus, the Act allows engagement with external agencies including foundations, other companies and NGOs. Tremendous opportunities, therefore, exist for companies in India to meet their labour market needs and develop innovative cross sector collaborations with charities and training providers to lead employability programmes.

Potential Models for Companies

Thagath, an innovative model developed as a result of the Common Purpose, Dishaa initiative provides an employer led solution to bridge the gap between education and employment. This builds on successful UK models such as the Activity Agreement Pilot, which supported thousands of young people into learning and work. Thagath aims to be funded by employers through CSR policy requirements to work with local education and training providers and charities to enable youth access to employment and provide bespoke skilled, job-ready employees by:

- 1. Recruiting and assessing young people's personal and social development needs
- 2. Providing individualized support including coaching and careers guidance
- 3. Rewarding progress and success with incentives and financial support
- 4. Offering bespoke skills and training packages (i.e. literacy, numeracy, IT, skills training, mentoring and work experience)
 - 5. Direct Entry to Employment

The time is ripe for innovative models such as Thagath to be developed and replicated by businesses to attract, develop and retain a skilled diverse workforce to meet their local and global labour market needs. Complementary existing government programmes include the National Skills Development Corporation, which incorporates a public private sector approach to build India's workforce and the STAR (Standard Training Assessment and Reward) voucher scheme launched in August 2013 to support one million young people to gain a

vocational skill.

Manipal City and Guilds and CEO John Yates see the opportunities generated from the Company Act 2013 as a catalyst to shake up the area of skills development. This could provide huge benefits for those at the bottom of the pyramid, business development opportunities for the skills development industry and employers by meeting labour market needs and demonstrating their social impact in local communities.

The exciting challenge is now for businesses to work collaboratively to develop cross-sector partnerships to work more innovatively to meet their labour needs and CSR requirements.

Bally Sappal is a consultant specialising in corporate social responsibility and cross sector partnerships. She has initiated cross-sector collaborations for The Big Lottery Fund in the UK involving multinational corporates, charities, funders and academics aimed at increasing their collective social impact. She has authored several publications and national articles on Corporate Social Responsibility and cross-sector collaboration. She has also developed social enterprise models using CSR policies in India to address global labour market challenges.

Bally sits on the Board of Trustees of homeless charity Connections at St Martin's in the Field, and acts as Secretary to Odanadi UK, advising on anti-trafficking initiatives. As Programme Manager at Odanadi she facilitated the first high profile anti-trafficking state network in Karnataka, India in 2011 across 26 NGOs.

She can be reached at: sappalconsulting@gmail.com

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WITH A MOVE AWAY FROM DONATIONS AND A PROJECT FOCUS, THE **ACT ALLOWS ENGAGEMENT WITH EXTERNAL AGENCIES INCLUDING** FOUNDATIONS, OTHER COMPANIES AND NGOS. TREMENDOUS OPPORTUNITIES, THEREFORE, EXIST FOR COMPANIES IN INDIA TO MEET THEIR LABOUR MARKET NEEDS AND DEVELOP INNOVATIVE CROSS SECTOR COLLABORATIONS WITH CHARITIES AND TRAINING PROVIDERS TO LEAD **EMPLOYABILITY PROGRAMMES**

Turning Sulabh into a Synonym for SANITATION

Dr. Bindeshwar Pathak, Founder - Sulabh International Social Service Organisation



He is Renaissance Man, Humanist, Social Scientist, Engineer, Administrator, Institution Builder, Philosopher, Social Reformer, Missionary. These are but a few adjectives to describe Dr. Bindeshwar Pathak, Founder - Sulabh International Social Service Organisation. The icon of sanitation and social reform, Dr. Pathak has made a difference to the lives of millions in India and in other countries by freeing them from social prejudices and discrimination. His love for the downtrodden- the scavengers, the untouchables, the widows and the people who are not given a second thought by most - these are his heartbeat. This love is expressed through his lifelong fight for their acceptance into mainstream society. He is born to help the helpless. An internationally-acclaimed expert on sanitation, to him goes the credit of implementing the low-cost toilet technology - Sulabh Shauchalaya System. A relentless campaigner against open defecation and for the eradication of the manual scavenging system, Dr. Pathak is the recipient of many national and international honours. In an interview with CSR Mandate, the Father of the Indian Sanitation Movement, talks about the incidents that have provided him his ultimate life-long mission. Excerpts.

What inspired you to dedicate your career to social reform and upliftment of underprivileged sections of society?

The incidents which occurred and the experiences I underwent in my formative years sowed the seeds of my decision to

dedicate my career to social reform aimed at improvement of the living conditions of the underprivileged.

I spent my childhood in a joint family in a village. There was hardly a house in the village with a household toilet. This necessitated us to go out to the nearby fields









to answer the call of nature. The difficulty was more for women who had to get up at the break of dawn or after sunset to go to the field and defecate in the open. My mother and aunts had to do this and it was indeed a daily humiliation for them.

Added to this practice was the prevalence of caste-oriented social practices like untouchability. I belong to an orthodox Brahmin family. An untouchable would do our household chores. It was general belief that bad luck befalls on a person who touches an untouchable. My curiosity, overcoming the ingrained fear of facing the consequence professed by the said belief, prompted me to touch the untouchable to see what exactly would happen to me if I did so. Unfortunately, when I did so, my grandmother saw it and raised a ruckus. Much to my chagrin, I was subjected to a cleansing ritual by being administered cow's urine, mixed with dung, and sand mixed with holy Ganges water. I stood humiliated. The incident left a permanent mark on my mind.

Later, I joined Gandhi Centenary Celebration Committee and was assigned to work in its cell dealing with liberation of the scavengers, a community of untouchables, who manually clean human excreta. I went to live in a colony of untouchables in the town of Bettiah in the district of Champaran in Bihar. The purpose was to familiarize myself with their lifestyle. Two incidents occurred there which greatly influenced my decision to devote myself to uplift this section of society.

As I was out for a morning walk one day, I heard a woman's cry emanating from a shanty. It was a young bride who was forced by her in-laws and husband to take up scavenging. My intervention on her behalf was met with questions on her very survival and supporting herself financially. Scavenging was the only option, according to her in-laws, as she was an untouchable. I felt defeated as I could not give them a solution. The second incident was when a young boy was gored by a bull. The crowd, which had come to rescue the boy, withdrew upon learning that the boy was from the scavenger colony. The boy died while being taken by some of us to the hospital.

These incidents disturbed me and reinforced in me the conviction that I should dedicate my career to uplift the scavengers,

eradicate untouchability and eliminate defecation in the open as much as possible.

How did Sulabh International Social Service Organisation come into force? How was the technology of two-pit pour-flush toilet, Sulabh Shauchalaya System developed? To what extent has this technology been disseminated globally?

To deal with the problems mentioned above, I studied the problems and found that these existed and had roots in the Pauranic period and had found approving mention in ancient texts. For example, in a Puran, it is stated that one should defecate as far away from one's house as the distance covered by an arrow at the point of its fall. Scavenging arose because of need for privacy during defecation felt by the feudal lords and the rich. Scavenging had the sanction of the royalty and the nobility during the Mughal period. It continued during the period of the British rule. It was however left to Mahatma Gandhi to first draw attention to the problems of the scavengers, untouchability and open defecation. Various committees were formed which made in-depth study of the problems but they did not come up with a solution to eliminate the practice of scavenging.

I came up with a solution for this problem by inventing the two-pit; pour-flush onsite compost forming toilet technology. I installed the first two-pit technology based toilets in the compound of the Arrah Municipality office. In 1970 I formed Sulabh Shauchalaya Sansthan subsequently changing it to Sulabh International. It is now known as Sulabh International Social Service Organisation. We were seven when we first started. We are now touching 50,000 members.

My study in preparation for this technology led me to a WHO publication, "Excreta Disposal for Rural Areas in Small Communities" by Wagner and Lanoix. I reasoned that if the technology worked in a particular area with certain parameters then logically it should work in another similarly circumstanced area with mutatis mutandi applicability. It was an instant success which is evident from the fact that by now, Sulabh has built nearly 1.3 million Sulabh design based toilets in households and nearly 55



I CAME UP WITH A SOLUTION FOR THIS PROBLEM BY INVENTING THE TWO-PIT; POUR-FLUSH ONSITE COMPOST FORMING TOILET TECHNOLOGY. I INSTALLED THE FIRST TWO-PIT TECHNOLOGY BASED TOILETS IN THE COMPOUND OF THE ARRAH MUNICIPALITY OFFICE. IN 1970 I FORMED SULABH SHAUCHALAYA SANSTHAN SUBSEQUENTLY CHANGING IT TO SULABH INTERNATIONAL. IT IS NOW KNOWN AS SULABH INTERNATIONAL SOCIAL SERVICE ORGANISATION. WE WERE SEVEN WHEN WE FIRST STARTED. WE ARE NOW TOUCHING 50,000 **MEMBERS**

million more by other agencies. The main reason for such large scale dissemination is because it is technically appropriate, cost-effective, easy implementation with locally available material and culturally acceptable. It has unique onsite human waste disposal mechanism and is durable.

Globally, the technology has spread to various countries of Africa. Representatives from 14 countries viz., Ethiopia, Mozambique, Uganda, Cameroon, Burkina Faso, Kenya, Nigeria, Senegal, Ghana, Zambia, Tanzania, Cote d' Ivorie, Mali and Rwanda have received training (at Sulabh) to build Sulabh design-based toilets in their respective countries.

I also invented another technology called Human Excreta-based Biogas Plant linked to public toilets and attached with Sulabh Effluent Treatment device is in operation in more than 200 of nearly 8,000 public toilets maintained by us. Biogas plant linking allows toilet effluent to flow into it under gravity. The effluent then passes through the processes of sedimentation, filtration, aeration, being passed over charcoal and under UV rays reducing BOD to much less than the accepted level of 30 mg/l; in fact much less than even 10mg/l. The treated effluent can be released in any water body without causing pollution besides possessing good nutrients. The methane gas released from human waste can be utilized for lighting

mantle lamps, street lighting cooking and warming oneself during winters. This technology is best suited for high rise buildings like hospitals, hotels etc. in areas where sewerage has not been laid.

Public toilets linked biogas plants with attached Sulabh Effluent Treatment (SET) device have been built in Kabul, Afghanistan. Our technology has also been successfully implemented in Vietnam, Bangladesh, China and Indonesia; and other countries too have displayed interest in implementing Sulabh design-based individual household technology and methodology of running and maintaining public toilets.

What is your assessment of adequate sanitation and hygiene for under privileged and marginalized sections of society in India?

Sanitation facilities for the underprivileged and marginalized sections of society are inadequate and there is little consciousness about hygiene.

The primary reasons for this are lack of awareness and lack of education and funds.

In the rural areas the practice of defecating in the open is widely prevalent. This is due to absence of household toilets. The only way out is to educate people about the necessity and importance of toilets. In addition, there should be adequate funding

IN URBAN AREAS, THERE IS WOEFUL INADEQUACY OF TOILETS IN THE SLUM AREAS. EVEN IF PEOPLE HAVE MONEY TO BUILD A TOILET, LACK OF SPACE IS A BIG HINDRANCE, A SOLUTION CAN BE CONSTRUCTION OF PUBLIC TOILETS RUN ON PAY-AND-USE BASIS. FUNDING CAN BE DONE BY THE GOVERNMENT OR CONSTRUCTION BEING UNDERTAKEN UNDER BUILT OPERATE TRANSFER (BOT) SYSTEM. VIABILITY IN RUNNING A PAY-AND-USE BASED PUBLIC TOILET COMPLEX IS ANOTHER LIMITING FACTOR. THIS CAN BE OVERCOME BY IMPLEMENTING CROSS-SUBSIDIZATION SYSTEM WHERE SURPLUS FROM AN ECONOMICALLY VIABLE TOILET CAN MEET GOOD THE REVENUE SHORTFALL IN AND OF AN UNVIABLE TOILET COMPLEX. ANOTHER IMPORTANT STEP CAN BE ALLOWING FREE USE OF A TOILET COMPLEX TO CHILDREN AND THE **INDIGENTS**

through Gram Panchayats in areas covered by them and through local bodies where notified area committees or municipalities exist. Nirmal Gram Yojna has been a successful tool setting right the deficiencies. Publicity and involving high-profile people have also contributed to spread of awareness.

In urban areas, there is woeful inadequacy of toilets in the slum areas. Even if people have money to build a toilet, lack of space is a big hindrance. A solution can be construction of public toilets run on payand-use basis. Funding can be done by the government or construction being undertaken under Built Operate Transfer (BOT) system. Viability in running a payand-use based public toilet complex is another limiting factor. This can be overcome by implementing crosssubsidization system where surplus from an economically viable toilet can meet good the revenue shortfall in and of an unviable toilet complex. Another important step can be allowing free use of a toilet complex to children and the indigents.

Tell us about the Sulabh International Academy of Environmental Sanitation. What is the focus of its curriculum, and about its international student community?

This Academy is a Registered Society from 1993. It is engaged in the development of:

- > New and sustainable technologies and their implementation
- > Demonstration and dissemination of information to bring socio-economic reforms
- > Capacity building and knowledge management in environmental sanitation
- > Promotion of projects and consultancy services in the fields of environment, water conservation and wastewater treatment, sewerage, storm water drainage, safe sanitation and waste management, etc.
- Providing housekeeping services for office buildings, roads, housing colonies etc.
 The curriculum focuses on:
- > Curriculum development, documentation and networking.
- > Formulation, monitoring and implementation of projects relating to environmental sanitation with focus on water, sanitation, health and hygiene.
 - > Capacity building and training for both

national and international professionals including civil servants, policy makers, officials of central, state and local governments, academic institutions including schools, private sectors, NGO's, CBO's, grass roots workers and user communities in the villages etc.

UN-HABITAT and has made significant contribution in bridging the sanitation gaps existing in various regions. It has worked in South Asia and Africa. It has sent its experts to several countries as part of UN-HABITAT Missions.

Internship training was organized by the Academy for 200 students from different Indian universities and 138 students from different countries viz. Japan, USA, UK Germany, France, Nepal, Bangladesh, Thailand, Zambia, Uganda, Cameroon, Ghana, Nigeria, etc. To this was added exclusive on-site training for stakeholders to enable them to conduct programme appraisal under Yamuna Action Plan.

Training was organized for people of Hirmithla village under CSR programme and for the people of Moradabad village under the project funded by World Vision. Harmithla village under CSR initiative has been made an open defecation-free village.

Under the guidance of the Academy, the towns of Alwar and Tonk have been made scavenger-free towns.

Under 'Nirmal Bharat Abhiyan', an orientation programme on sanitation was organized in five blocks of Morigaon district in Assam. Masons have been trained in toilet construction in many villages in Assam.

What kind of policy initiatives from the government would improve community health and sanitation facilities in rural India?

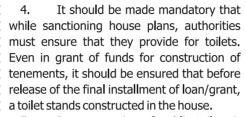
The following policy initiatives appear to be necessary.

- 1. There should be adequate funding.
- 2. There should be a focal ministry responsible for sanitation and funds required for the purpose of creating sanitation facilities should be routed only through a focal ministry rather than through different ministries/sources.
- 3. Commercial banks should be directed to extend loan facility for construction of sanitation facilities. The loans should be on soft term basis.

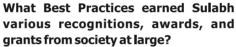






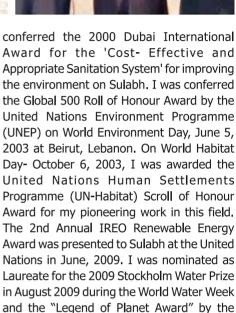


5. In construction of public toilets it should be ensured that construction and subsequent maintenance responsibilities are vested in one and the same body and there is no division of responsibility between the two activities.



I was conferred one of the highest civilian

awards, 'Padma Bhushan' in 1991 for my in sanitation development and social service. His Holiness Pope John Paul II gave audience to me at the time of conferment of the International St. Francis Prize for Environment (Canticle of all Creatures) in 1992. In June 1996, Sulabh technology was declared one of the Global Urban Best Practices by United Nations Centre for Human Settlements (UNCHS) at Habitat II Conference held at Istanbul. The UNHabitat and Dubai Municipality



Please share your experiences in the social upliftment and economic development of India's scavenger community. What major challenges remain in eradicating the social stigma borne by the scavenger community in India?

Vice-President of the French Senate, during

the Founding Congress World Green Games

at Paris, France on June 4, 2013.

The invention of two-pit pour-flush compost forming toilet technology, as

mentioned, enabled Sulabh to relieve the scavengers from their humiliating work. Scavengers earned Rs. 200-300 a month, barely enough to meet even their basic requirements. They even lost this pittance wage when relieved from this work. The problem of finding an alternative arose. Sulabh came up with a solution by initiating a training programme. During the training period they were given a stipend which now averages to Rs.









3,500/- per month per person. The training is in market oriented trades viz. food processing, cutting and tailoring, embroidery, beauty care, bag making. A training centre named 'Nai Disha' was established at Alwar in 2003.

Sulabh helps trainees in marketing their products. Once nexus with the market is established, a scavenger essays on his own and starts earning approximately Rs. 2,000 to 3,000 a month. Articles made by them are marketed locally or under arrangement made with hotels or through purchase centres.

But, economic reliance to an extent as detailed above is not enough to eliminate social discrimination and the climate of social separateness which scavengers continue to feel. This in turn necessitated undertaking steps to enhance their social status and social integration by doing away with social barriers between scavengers — the untouchables on the one hand and the other members of the social main stream. In 1998, I arranged for scavengers to be taken to

temples which had till then, allowed entry only to people of upper and intermediate castes. The priests were resisting our entry but I persuaded them and they allowed us to enter. After this visit to the temple, the then Prime Minister, Rajiv Gandhi and the President of India, R. Venkataraman, granted our group an audience and appreciated the courageous action of the socially discriminated scavengers.

I went a step further in Alwar. They not only visited the temple but also arrangements were made that they worship and made offerings along with the local priests. They had meals together with the upper class people. Erstwhile scavengers found entry into the households of the very people they had once worked as scavengers. Social interaction became a common sight between them. It is a sea-change from the social stigma and discrimination faced by the scavengers; when people feared even their shadow; when a scavenger had to announce his arrival or his presence by stamping his staff on the ground or wearing a bell around his neck. Leftovers and even their wages were dropped into their hands from a height. Their children's playmates were pigs and pups. They cleaned the toilets with their hands and scraped, with their nails the excreta which stuck to the bucket toilets. They suffered inhalation of unbearable stench mitigated by chewing strong smelling tobacco. It was my invention of the two-pit system and my efforts to integrate the scavengers into the mainstream of society which rehabilitated them and gave them new freedom and economic reliance.



Roadmap is firstly, to provide toilets to as many people as possible in the country. Secondly, spread the movement to the SAARC countries and the developing countries of South East Asia and Africa.

How best can India's corporate sector spend at least a part of this CSR budget towards promoting the goal of community health and sanitation?

I can give you an illustration:

Community health and sanitation can best be achieved by spending some money on







ABSENCE OF SANITATION IS A SOURCE OF NUMEROUS DISEASES WHICH LEADS TO ENERVATION AND LOSS OF MAN-DAYS THAT CAN BE UTILIZED IN PRODUCTIVE ACTIVITIES FOR WHICH PURPOSE OBSERVANCE OF HYGIENIC TOILET PRACTICES IS NECESSARY. THERE SHOULD BE AVAILABILITY OF SANITARY TOILETS, ESPECIALLY SO AT WORK PLACES, FACTORY PREMISES, AT THE LABOURERS' QUARTERS, TRUCK YARDS ETC.

educating a girl child about the importance by observing practices of elementary hygiene. It is the girl child who is the seed of future motherhood. Community health in a big way begins with commencement of the stage of motherhood when provided with adequate nutrition, vaccination and subsequently, the infant mortality aspect being taken care of by preventive measures through vaccination etc. Educating people about parenthood is equally necessary. All this lays foundations of good health in future.

The other aspect is sanitation. Absence of sanitation is a source of numerous diseases which leads to enervation and loss of mandays that can be utilized in productive activities for which purpose observance of hygienic toilet practices is necessary. There should be availability of sanitary toilets, especially so at work places, factory premises, at the labourers' quarters, truckyards etc. Through CSR, independent household toilets and community toilets can be provided side by side with their

maintenance or even repair and renovation of existing toilets along with imparting awareness about need for construction of such toilets; creating awareness about sanitation by undertaking motivation, education, communication, training, designing, estimation, implementation, maintenance and follow-up work and sponsoring agency taking care of resource mobilization, monitoring and supervision. Alongside, CSR can also mean imparting vocational training, providing education through English medium to the students from the disadvantaged community so they do not feel left behind. The efforts, as a part of discharging CSR, may also involve implementing rehabilitation programmes and as Sulabh has done, improving the lot of especial categories like that of the widows from Uttarakhand, Varanasi and Vrindavan. Crèches for child care can also be established.

Do share with us the high points of your distinguished career.

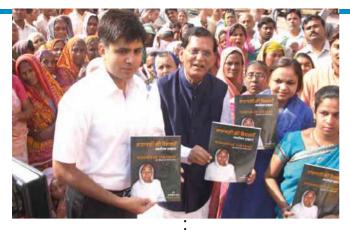
In 1970, I founded Sulabh Shauchalaya Sansthan, now known as Sulabh International Social Service Organisation.

In 1973, I persuaded a Member of Bihar Legislative Assembly (MLA) to write a letter to the then Prime Minister of India, Mrs. Indira Gandhi, about the situation and liberation of scavengers, requesting her to pay personal attention to the problem. Within a fortnight, a reply from Mrs. Gandhi was received by the MLA stating therein that she was writing to the Chief Minister to give personal attention to this matter. This gave an impetus to sanitation work being given importance by Government of Bihar and Sulabh being provided opportunity to enter the field of sanitation.

In 1974, Sulabh started the work of conversion of bucket toilets into Sulabh ones in Patna. The local self-government department which was considering recognizing Sulabh as a catalytic agent to work between government, local bodies and beneficiaries, cleared my proposal in April 1974.

In 1978, a national seminar was organized by the Government of India, WHO and UNICEF in Patna. It was attended by officials, experts, State Secretaries and Chief Engineers of the Central and respective State







I WOULD LIKE BEST TO BE REMEMBERED FOR **BRINGING ABOUT** REVOLUTION IN THE SANITATION SCENARIO BY MY REVOLUTIONARY INVENTIONS OF THE TWO-PIT TOILET **TECHNOLOGY AND** EXCRETA-BASED BIOGAS PLANT BEING LINKED TO PUBLIC TOILETS. THE **BBC WHILE** ACKNOWLEDGING OUR ACHIEVEMENTS, FEATURED SULABH **SANITATION** TECHNOLOGIES AS ONE OF THE FIVE INVENTIONS OF THE WORLD HAVING GREAT SOCIAL IMPACT

Governments. They went on a door to door visitation to see the functioning of individual toilets and also public toilets at public places. After seeing these toilets for the first time in India, it was recommended that both the programmes implemented in Bihar should be extended to the other states of India.

In 1979, UNDP came into the picture and for seven years, it evaluated the schemes of low-cost sanitation and the conditions of water pit latrines. It prepared a manual for low-cost sanitation and distributed it amongst the international agencies and to countries of Asia, Africa and Latin America.

Public toilet constructed and maintained by Sulabh in Bhutan. Five public toilets with biogas digesters and also Sulabh effluent treatment plants have been put up at Kabul in the war-torn nation of Afghanistan. An awareness programme was conducted there to make people aware of the advantages of using the toilets. The public toilets are functioning efficiently even during the extreme cold winter.

Sulabh has trained professionals from 14 African countries in 2005 and 2006 in the techniques of construction and maintenance of both types of toilets. Sulabh has started consultancy work in Mozambique, Ethiopia and Bangladesh.

In 2003 and 2006, UNDP in its Human Development Report recommended the use of Sulabh technologies by international agencies and other nations and wrote about the successful functioning and self-sustainability of public toilets in India. UNDP has also prepared a report for Harvard University.

Establishment of training centre 'Nai Disha', where erstwhile scavengers are educated and trained to be economically self-reliant.

Entry of scavengers to the Nathdwara and Vishwanath temples. These events created ripples and was cataclysmic in its effect in the social set-up. It brought about the change in attitude towards scavengers. They gained social recognition and social status. But the event which added glamour to the life of the erstwhile scavengers was their participation in a fashion event when they walked the ramp at the UN headquarters in New York. To crown it all, the Supreme Court asked for my help in taking up the welfare of widows of Vrindavan. This programme is continuing on the lines of the training programme initiated at 'Nai Disha'.

You are a multifaceted personality with achievements across the spectrum. What do you want to be remembered most for?

I would like best to be remembered for bringing about revolution in the sanitation scenario by my revolutionary inventions of the two-pit toilet technology and excreta-based biogas plant being linked to public toilets. Even the BBC while acknowledging our achievements, featured Sulabh Sanitation technologies as one of the five inventions of the world having great social impact.

Further, another significant achievement is the rehabilitation of the scavengers which had never been attempted by anyone else, as well as the setting up of the unique experiment at 'Nai Disha' training centre for the rehabilitation of the scavengers.

The other one is when I ensured common worship and dining for the untouchables and others. These practices have led to elimination of social discrimination and untouchability and have helped the scavengers join the social mainstream.

F ocus

Banka's Bio-Toilets Usher in Mindset Change, Curb Open Defecation

Sanitation facilities in India are alarmingly poor with over 600 million people (half of India's population) having no access to toilets. People are forced to defecate in the open. This poses health hazards, raises environmental concerns and leads to water contamination. According to government statistics, 50 percent of the Indian populace does not have a toilet in their homes. Of this, 67 percent are in rural areas. Under the Indian government's "Total Sanitation Mission", the government aims to eliminate the problem of open defecation by 2022.

Challenges

Age-old traditions and cultural barriers are a major challenge, primarily in developing countries like India. For instance, many households believe that the "house is like a temple" and anything like a toilet should not be situated in/near the house. They are happy to defecate in the open, away from the house. Apart from this, a toilet is low on the list of priorities for many. Cellphones or television, for that matter, is seen as "more important" than a decent toilet. People are oblivious to or unconcerned about water or environmental pollution due to the fecal matter lying in the open or left on the ground untreated.

Lack of Sanitation – Economy, Health and Environmental Perspectives

According to the World Bank, inadequate sanitation costs India the equivalent of 6.4 percent of GDP. Most affected are the vulnerable groups. For instance, children account for 88 percent of the diarrhearelated deaths due to water pollution and inadequate sanitation. There is also an important gender dimension since women and girls suffer most, for instance risking sexual assault while defecating. The urbanrural divide is also significant; two-thirds of India's rural population defecates in the open.

In regions where a large percentage of the population does not have adequate sanitation facility or where waste is untreated, sewage flows directly into streams, rivers, lakes and wetlands, thereby affecting ecosystems, fouling the environment and exposing millions to diseases. In the context of urbanization, domestic waste water, sewage and solid waste improperly discharged presents a variety of concerns and become a breeding ground for communicable disease vectors contributing to air, water and soil pollution. Human excreta have been implicated in the transmission of many infectious diseases including cholera, typhoid, infectious hepatitis, polio, cryptosporidiosis, and ascariasis. Many of India's rivers, including the Ganga, are prey to this.

According to UNICEF, every dollar spent on improving sanitation generates economic benefits (about nine times) that far exceed the required sanitation investments.

Economic & Financial Losses of Inadequate Sanitation

The World Bank also states that India loses Rs. 24,000 crore annually due to lack of toilets/hygiene. The Indian Ministry of Health and Family Welfare pointed out that more than Rs.120 crores is spent every year on poor sanitation and its resultant illnesses. The rail corrosion costs Indian Railways more than Rs. 350 crore every year. Colossal amounts are being spent on cleaning the major rivers or setting up sewage treatment facilities. For instance, the Ganga river cleaning project is estimated to add a burden of Rs. 4,600 crore on the Indian government. Similarly, Yamuna Action Plan Phase-II has been formulated by Ministry of Environment and Forests, with a project cost of Rs. 387.17 crores. Additionally, laying of Interceptor Sewerage System along Najafgarh, Supplementary and Shahdara Drains in a 59km-long route has a project cost of Rs. 2411.60 crore.

Such huge burdens could be reduced or made negligible by the massive implementation of bio-digester toilets.

There is no doubt a movement by a number of organizations to raise awareness and do something about this menace of open defecation. Banka Bioloo Pvt. Ltd has been relentlessly pursuing this and wants to make India free from open defecation as effective sanitation prevents diseases and provides health protection to the individual, the community, and society at large.





Namita Banka

ELOO

Banka Bioloo, a women-led organization based in Hyderabad, whose main focus is to deal with the problem of open defecation that takes place every day, has been engaging, promoting and developing innovative environmental friendly products and services for human waste management system. It builds/promotes/manufactures and supply ELOO - The BioDigester toilets. This technology helps in degrading human waste in the most effective manner. This sanitation system can be installed at places where conventional toilets facility cannot be made available. Banka BioLoo uses the biodigester technology and its various applications to provide eco-friendly sanitation systems and solutions across India, and notably to Indian Railways to transform the night-soil-laden-rail tracks to faecal-matter-free tracks.

Banka Bioloo's offerings include bio-toilets (or bioloos) for families, public and community bio-toilets and bio-toilets for schools and institutions, bio-tanks for Indian Railways, bio-digesters (the bacterial culture) and bio-tanks, and upgrade of septic tanks to bio-tanks. The company also service bio-toilets. It has also entered into an annual maintenance and operations contracts with different Railway zones. It has a bio-tank manufacturing plant and a bio-digester inoculation facility.

The company is ably led by Namita Banka, Founder and CEO. As a woman, Namita is better able to understand the WaSH (water, sanitation and hygiene/health) needs of her fraternity. She is keen and passionate about improving the lives of the marginalised

66

THE WORLD BANK ALSO STATES THAT INDIA LOSES RS. 24.000 CRORE ANNUALLY DUE TO LACK OF TOILETS/HYGIENE. THE INDIAN MINISTRY OF HEALTH AND FAMILY WELFARE POINTED OUT THAT MORE THAN RS.120 CRORES IS SPENT EVERY YEAR ON POOR SANITATION AND ITS RESULTANT ILLNESSES. THE RAIL CORROSION COSTS INDIAN RAILWAYS MORE THAN RS. 350 CRORE EVERY YEAR. COLOSSAL AMOUNTS ARE BEING SPENT ON CLEANING THE MAJOR RIVERS OR SETTING **UP SEWAGE** TREATMENT **FACILITIES**





THE COMPANY IS ABLY LED BY NAMITA BANKA. FOUNDER AND CEO. AS A WOMAN, NAMITA IS BETTER ABLE TO UNDERSTAND THE WASH (WATER, SANITATION AND HYGIENE/HEALTH) NEEDS OF HER FRATERNITY. SHE IS KEEN AND PASSIONATE ABOUT IMPROVING THE LIVES OF THE MARGINALISED POPULATION, AS ALSO THE WOMENFOLK WHO ARE MORE SUSCEPTIBLE TO ILLNESSES. DISEASES, MOLESTATION OR RAPE, WHILE THEY ARE ATTENDING TO NATURE'S CALL IN THE **OPEN**

population, as also the womenfolk who are more susceptible to illnesses, diseases, molestation or rape, while they are attending to nature's call in the open.

With a strong team of highly experienced professionals having done in-depth research and study about the ill-effects of absence of sanitation on the society and the environment, Banka Bioloo has therefore developed a strong understanding and expertise in sanitation and the pain-points of people. This has enabled them to identify, and provide affordable, effective and safe sanitation systems and solutions. The hardworking team tries to reduce costs for the user, making the bio-toilet unit sturdy, training people in the right usage, and striving to bring about behavioural change. Substantial work in sanitation with Railways and DRDO has given them more confidence in developing effective solutions.

Banka's solutions address the following needs/pain points of the end-user:

Meet the need for basic, easy-to-install and hygienic human waste disposal mechanism in areas with no infrastructural facilities currently.

Address the need for a cheaper and easy-to-operate alternative to the traditional waste disposal system.

The bio-toilet system consists of an easy to erect super-structure, a multi-chambered matriced bio-tank that holds the bacterial culture and allows the treatment of the human waste. The system does not need any external energy for treatment, rather emits pathogen-free effluent water that is good for gardening and similar purposes; and bio-gas that could be used for cooking or heating. The system meets all regulatory and environmentally compliances and enhances

the socio-environmental fabric of India.

The bio-digester technology was developed and patented by Defence Research and Development Organisation (DRDO), an Indian government arm, for the defence personnel. The enterprise is pioneering this, in an integrated approach, and taking this effective and innovative sanitation solution to the civil population with varying applications. The bio-digester is a consortium of anaerobic bacteria, which have been screened and gradually adapted to work at temperatures as low as -5°C through the isolation of psychrophilic bacteria from Antarctica/Siachen. These convert the organic waste into water, methane and CO2. The anaerobic process inactivates the pathogens responsible for water-borne diseases. Bio-digesters serve as reaction vessels for bio-methanation and provide anaerobic conditions and the required temperature for the bacteria.

For her contribution towards this cause, DRDO has aptly called Namita Banka the 'Torchbearer of Bio-Toilets'.

Indian Sanitation Situation

According to a study done by Banka Bioloo, the following are the methods of human waste management or treatment:

Pit latrine - collects human waste in a "pit" that has to be periodically emptied. The waste is either treated centrally or dumped in the ground. The former consumes energy in transportation and treatment, whereas the latter contaminates the environment and ground water, leading to diseases and health hazards.

Septic tank - retains the human waste, and is also periodically emptied and cleaned. They also emit foul smell and any leakage



BANKA BIO-LOO BUILDS, PROMOTES. **MANUFACTURES AND** SUPPLY ELOO - THE BIODIGESTER TOILETS. THIS TECHNOLOGY HELPS IN DEGRADING HUMAN WASTE IN THE MOST EFFECTIVE MANNER. THIS SANITATION SYSTEM CAN BE INSTALLED AT PLACES WHERE CONVENTIONAL TOILETS FACILITY CANNOT BE MADE AVAILABLE

harms the groundwater.

Sewage treatment plant - the other major practice is of hugely built sewage treatment facilities or plants (commonly called STPs). The human waste is transported via sewer lines to the central facility and treated using colossal amount of energy.

Bio-toilets, in contrast, treat the human waste at source. There is no need to carry, no spoiling of environment or groundwater, and it does not require any energy or heavy infrastructure. On the contrary, there are other benefits of the bioloo. The system leaves pathogen-free water as effluent that can be re-used. For large bio-tanks, methane can be collected and used. These can be installed anywhere, without specification of land type, terrain, distance, etc. The company provides not only a toilet but also "on-site" waste treatment facility. This ensures that the household is not dependent on an external infrastructure for waste transportation and treatment.

The entire concept of bioloo is socially and environmentally driven. In India, many of the marginalized sections and the not so better offs (rural and urban) do not have access to sanitation facilities. They defecate out in the open, or in unhygienic conditions. The bioloos are an affordable and durable solution to the challenge of lack of toilets.

For societies striving to meet the Millennium Development Goal - 7; and the Sustainable Development Goals, post-2015, bio-toilets are a fitting solution. India is one of the countries which have not paid sufficient attention to sanitation. Thus, it becomes absolutely necessary to provide and improve basic sanitation.

Case Study

Sitamma stays with her family in Rudraram village, on the outskirts of Hyderabad. Many houses in this small village do not have toilets and family members defecate in the open. In March 2013, some members of the student chapter of Engineers Without Borders (EWB), studying in Gitam University, situated close to Rudraram, decided to "change this". They got together and decided to undertake a project to help provide sanitation facilities in the village. The Chairman of EWB supported the cause and arranged funds, and EWB partnered with Banka BioLoo, the premier DRDO bio-

digester technology licensee to install biotoilets. Based on the family composition, their eagerness to be a part of the project, keenness to share a small portion of land for constructing the bio-toilet as well as willingness to contribute a small percentage of the cost, five families were selected. Using a healthy combination of student efforts, work input from family members, sponsored funds and some contribution from the beneficiary families, Banka BioLoo, in partnership with EWB. installed five bio-toilets. These families are healthier than before, have stopped defecating in the open and the womenfolk are the most relieved lot. They do not depend on government or external authorities to collect/transport and treat the waste anymore. The unique technology provides "on-site" treatment of human waste.

The families continue to avail ESEH (Economic, Social, Environmental and Health) benefits for themselves as well the society at large. Available to the user at a very affordable price and enhancing the productivity of the family, apart from easing the burden of waste treatment are the demonstrated economic benefits. Socially impactful, bio-toilet is the sanitation facility available to the user. Removing the stigma of open defecation and providing a sense of security and dignity to the womenfolk, bio-toilet is a great social support and necessity. Environmentally friendly, these bio-toilets nurture the ecosystem. They treat the fecal matter at source without any requirement of energy. In the process, pathogen-free water is released, which is very good for gardening and similar purposes, as also biogas that could be utilized for cooking etc.

Another 20 families will be provided biotoilets. This student community is keen to develop a 10 km radius around the university as an open defecation free area.

The villagers are still unable to relate health problems to poor sanitation conditions. This will take time but Banka strongly believe that as awareness spreads, people will realize that sound sanitation is crucial to their overall well-being and ecology. Behavioral Change Communication (BCC) will be the tilting and decisive factor in overcoming the many taboos.

V IEW POINT



NUDGING PEOPLE TO USE TOILETS, A STEP TOWARDS **TOTAL SANITATION**



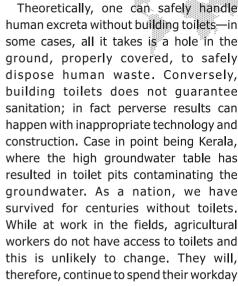
Women feel the need for toilets the most, and are, therefore, the biggest beneficiaries when they are constructed.

Toilets, and the lack of enough of them, are a recurrent topic on prime time news these days. It would have been difficult to imagine such a situation just a couple of years back.

We need to remember that our real goal is not toilets, but sanitation. The former is easier to understand. The latter is much more than just toilets. Sanitation, by the

textbook, means the process of keeping people and places free from dirt and germs and thereby, infection and disease. This is achieved by the safe handling and disposing of human excreta, garbage and other waste. Other requirements include personal hygiene (including hand-washing and menstrual hygiene), clean food and water, storm water management, and more. So toilets are only one step in the long road to complete sanitation. However, evidence suggests that it is one of the most important steps.





in no-toilet zones. The goal of the Nirmal Bharat Abhiyan, the flagship programme in rural sanitation, on which Rs.6,140.2 crore had been spent through 2011, is an "open defecation-free society". Getting there quickly will be very difficult from where we stand today.

One of the current projects of Arghyam, a B angalore-based charitable foundation, is a very close engagement with the Government of Karnataka to generate demand for toilets in villages. Modernity arising from urbanization, care

and protection of women, and comfort of the feeble and ailing are three big reasons why people have built toilets. It appears that targeting communication towards the felt needs of women will yield the highest impact. Women feel the need for toilets the most, and are, therefore, the biggest beneficiaries when they are constructed. However the decision to build, or otherwise, is usually taken by men, who do not seem to have felt a need for toilets, and hence de-prioritize them. How then, do we push this agenda? One idea is to position the building of toilets as an act of male responsibility, a positive deviance worth emulating. In our study, men found the











Sustainable sanitation through the eyes of a child

Painting by Narendra Singh, Class X, Manipur

idea aspirational and desirable. Will the idea of a responsible man building a toilet for his adolescent daughter do the trick as a communication message?

Assuming that the demand is spawned, what happens then? The Nirmal Bharat Abhiyan provides significant money to families as an incentive for building a toilet-upwards of Rs.9,000 per household. But accessing this money is not easy. We have seen many problems on the ground. These range from process ambiguities, lack of adequate administrative capacity, difficulty in accessing seed capital, as well as an insufficient technical appreciation for the type and quality of toilets to be constructed. It is critical that these supplyside issues be addressed, in parallel with the creation of demand.

Once the toilets are built, getting everyone in the family to use the toilet is quite another ballgame. In a majority of cases, only the women or children use the toilets. Sometimes, no one uses it at all. Open defecation is natural, has no space constraints and is a social norm in most of rural India. Toilets are seen as a "discount" acquisition from a government scheme. There is a lot of disgust associated with a toilet, and more so with one in your own backyard. There is also an initial sense of unfamiliarity that causes anxiety—which way to sit? How long before the pit fills up? All this often means that the behaviour change towards toilet usage does not take off, Our research findings provide a base for thinking about interventions designed to "nudge" people into using the toilet often enough that it becomes a habit. This is where an understanding of human psychology and ways to modify human behaviour can inform public policy and scheme implementation.

Much work has happened and is happening in sanitation. Many models do exist. But sanitation is a complex problem. More research and innovation is needed. Diverse knowledge and expertise of community mobilizers, communication and behavioural professionals, health, financial, technology and process experts—from both the public and private sectors, need to come together, if we are to make substantial progress. Working through this journey is like solving a jigsaw puzzle. Though challenging, it is extremely exciting and engaging. We need more people to join this effort. Knowledge and expertise from both the public and private sectors is needed to solve the sanitation problem.

Jayamala Subramaniam is Chief Executive Officer, Arghyam, a foundation focused on domestic water and sanitation



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Needs Urgent Cleansing

Poor sanitation and community health are critical issues in India today, which need to be addressed urgently. 3S India is a company offering ecofriendly waste management solutions in the country. It is ranked among the top 50 Social Impact Enterprises in India. In an exclusive interview to CSR Mandate, 3S Founder - CEO Rajeev Kher, makes an assessment of the sanitation problem in India and suggests ways to tackle it. Excerpts.

Tell us about the milestones achieved by your company since its inception.

3S India, a brand of Saraplast Pvt Ltd is a unique manufacturing as well as service oriented approach to promote better sanitation, health, hygiene and above all dignity to people. Founded in 1999, as a partnership firm, 3S today is amongst the 50 top Social Impact Enterprises in India which manages and safely disposes millions of litres of liquid waste annually as per the environmental norms and saves more than 100 million litres of fresh water. The company through its services aims to empower more than quarter of a million people annually with dignity and basic access to sanitation.

3S has achieved several milestones since its inception. Some of which are mentioned

below.

- > Setting up the manufacturing plant in 2006 is one of the biggest milestones, which helped in improving and maintaining the quality of products and the cost of service.
- > Investment by leading impact investment fund "Aavishkar" helped in augmenting existing infrastructure as well as increasing our scale of activities.
- > CEO and Founder Rajeev Kher of Saraplast was appointed Director on the Board of Directors of Portable Sanitation Association International (PSAI), in 2010, the first Indian/Asian to be appointed as such.
- > Invited by former US President Bill Clinton to attend the Clinton Global Initiative in New York City USA, 2010 2011. This gave us a broader view to look at impact business from a global perspective and also

the philanthropic attitude of various people around the world.

What is 3S focus and service & product portfolio?

3S is driven by a vision to make available the basic human right of sanitation and thus better hygiene and longevity a reality in today's world. The company services portable restrooms from the most populated cities to the remotest areas in India.

We manufacture and offer a wide range of portable sanitation solutions which include specialty, mains free restrooms, septic systems, wash stands, urinals and allied cleaning and waste management services in six regions of India. All our products are made from eco-friendly, recyclable materials providing an environmentally safe,

comprehensive sanitation and waste management solution to human waste. Our services include installation of toilets/restrooms, cleaning, evacuation, waste disposal and recycling the sewage water.

We essentially provide our services at special events, social and religious gatherings, un-served settlements, labour camps, construction and infrastructure, refineries,

> s I u m a n d communities and

for

disaster management. We have a wide range of mains free as well as sewer/septic connected products meeting international standards and the requirements of all kinds of needs, be it the Mobiloo - a sturdy single walled unit with a hardy twin sheet door that is available in Indian and Western style toilet tanks, or JOHNNY'S BOX: The Aussie designed indigenously produced doubled walled , award winning combination for luxury events. or SIXER Urinal: a unique design which is mains free and catering to six users at the same time with a patented

flushing mechanism, very popular at large gatherings and at construction sites.

In services, we provide evacuation and cleaning of portable toilets and fixed restrooms using automated cleaning and evacuation systems designed as per international norms and best practices. We also have a micro enterprise modelled community sanitation model in schools and BOP sector.

How is your company addressing sustainability and green concerns while developing products and services?

All our products are made from recyclable material and provide environmentally safe and comprehensive sanitation and waste

management services. High density polyethylene (HDPE) shells are used for the entire body of the toilet cabin as against fiber glass or FRP which has been commonly used until now. HDPE as against FRP is 100% recyclable and is a modern engineered high quality polymer which after thermoforming using an ergonomic design, each can be very easily and properly cleaned especially in climates like ours.

These toilets follow international norms as followed by German DIN, United States

ANSI and British BIS standards. Light weight and durable offers great mobility making them easily transportable from place to place, without much effort. There is minimal repair if regularly maintained and cleaned and gives a long life allowing regular site-to-site movement.

The units are Mains free - which means no sewerage or septic connection is required. Waste is evacuated using high quality, specially designed vacuum suction machines mounted on trucks. Toilets are charged with a bio friendly additive or tablet for odour removal and primary degradation of waste.

The waste is disposed off as per international waste regulation norms into a sewage treatment plant or designated sewer line as indicated by the client and permissible by the relevant local body. A new pilot is



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LESS THAN 20% OF INDIANS HAVE ACCESS TO SANITATION. IN RURAL AREAS A MERE 3.0% OF THE POPULATION HAS ACCESS TO SANITATION AND IN URBAN AREAS, MERELY 20% OF THE POPULATION HAS ACCESS TO WATER /FLUSH TOILETS CONNECTED TO SEWAGE SYSTEM

underway where the waste water is being treated to recover water suitable to a level for agriculture and construction too.

A mains connected option is also available where the unit could be hooked onto the sewerage system or septic tank.

What is your assessment of adequate sanitation and hygiene for under privileged and marginalized sections of society in India?

A survey by Water Aid (international NGO) has ranked India second on the list of the "World's Worst Place for Sanitation". India is one of the fastest growing economies in the world however, less than 20% of Indians have access to sanitation. In rural areas a mere 3.0% of the population has access to sanitation and in urban areas, merely 20% of the population has access to water /flush toilets connected to sewage system. There is an urgent need to change the poor sanitation conditions in each section of society in India. 3S, with its mission to provide better health and hygiene and a dignified life, strives to bring about this change.

The ratio of toilets to people in the marginalised section is quite poor and immediate improvement for this is necessary. Portable toilets could be a key to this problem. It would drastically reduce open defecation and also provide safety and security to female users. If managed professionally, it will also reduce the number of illnesses and diseases that are spreading due to poor sanitation, thus reducing the health bill that the government is spending on at a humongous scale.

You also offer portable washrooms to migrant workers at construction sites. What is the cost/benefit analysis?

Imparting dignity and providing a healthier approach towards life to the labourers working at the construction sites is important, but proper standard of sanitation at construction sites is a rarely discussed topic. These are the basic requirements to offer a healthy and hygienic surrounding to the labourers and also their families staying at labour camps.

Keeping the sites tidy and clean is very important for protecting health and safety at work. If not controlled properly, these

workers and visitors may face serious health issues which would result in them falling sick and increasing absenteeism and thus reduced productivity and delays in site completion. The restroom offers pride and dignity to the labourers who are tirelessly working to provide proper housing. It directly improves morale and site productivity.

Tell us about your pilot project of micro enterprise models at the BOP level.

We have executed and are already working on multiple models all over India. Recently we concluded one in Delhi at one of the largest slums there and had some phenomenal results for the viability of a BOP community. The sanitation model is being seen as a great tool for enterprise building and offering dignity and hygiene in the community.

Another few are being run in Pune and Mumbai on labour settlements and unfounded or poorly funded schools meant for the children of the BOP segment. Number of innovative tools using IT and various modern systems and methods are being tried out with the assistance of the MSDF and similar organisations. We also have a new first of its kind project being launched by 3S in Bihar for a fringe village near Patna. It will be the first project in rural India and also the first in Bihar along with the BMGF and PSI.

Tell us about your patrons and ongoing projects.

Our patrons range from the largest Indian construction companies like L&T, Lavasa, etc., to name a couple of big ones - where we provide restrooms and toilet cleaning services for their labour camps and also for their high rise buildings and infrastructure projects as well.

Large gatherings and religious events like Pandharpur and Alandi also avail our restrooms for the millions of devotees and visitors.

On the event site, we offer our restrooms to event companies like Percept, Scoop, Red Chillies etc.

How do you rate community and household sanitation facilities in rural India?

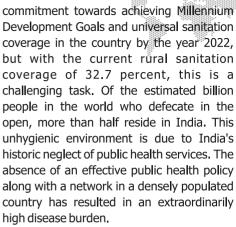
THE MAJOR CHALLENGES FOR INDIA IN TERMS OF SANITATION ARE LACK OF EDUCATION. IMPROPER DRAINAGE SYSTEM, POOR WASTE MANAGEMENT SYSTEM. UNAVAILABILITY OF WATER, LAND AND ELECTRICITY. THE CONSTRAINTS FROM THE EXECUTION SIDE THAT WE FACE ARE LACK OF SERVICE PROVIDERS. POLITICAL AND BUDGETARY PRIORITY. STRONG SUPPORT AND COORDINATION FROM GOVERNMENT AUTHORITIES.

We are focussing on urban sanitation and are not aggressively working in the rural areas of India. However, we educate labourers in urban areas who have migrated from rural backgrounds on the importance of sanitation and hygiene through various workshops which we organize at regular intervals. We believe that using our restrooms at work sites also motivates them to have their own clean restrooms at their villages and they voice their opinion for the same even when they go back to the villages.

The major challenges for India in terms of sanitation are lack of education, improper drainage system, poor waste management system, unavailability of water, land and electricity. The constraints from the execution side that we face are lack of service providers, political and budgetary priority, strong support and coordination from Government authorities.

The Government of India has declared its

restrooms at work sites also motivates them to have their own clean restrooms at their villages and they voice their opinion for the same even when they go back to the villages. Focussing on educating women on hygiene and sanitation has been one of our main agendas and our forte and we hold special workshops for this cause. We are tying up with different State Governments to provide our services in Tier II and III cities, along with a solution for fringe villages as We work closely with multiple NGOs and foundations and also with local governments. What are the major challenges faced in this context? The major challenges for India in terms of



What kind of policy initiatives from the government would improve community health and sanitation facilities in rural India?

Appropriate people with sufficient domain knowledge need to be engaged in the activity at the state and national level.

What Best Practices earned your company various recognitions, awards, and grants from society at large?

3S India has a unique business model of polyethylene portable sanitation service teamed with a powerful management and continuous team effort has made a difference in the common man's life in India. You can now see these at various construction sites, religious gatherings, events and even tourist sites where formerly finding a clean toilet was a major issue. We have received recognitions, awards and grants:

- > The first company in sanitation to be awarded ISO 9001:2008 certification in 2011
- > Winner in Health, Water and Sanitation Space in India, 2010. Awarded by Sankalp, a Premiere Social Enterprise.
- > Investment by Avishkar has helped us in expansion plans.
- > Awarded a grant through Business Innovation Facility Department for International Development (DFID), Govt. of United Kingdom to develop and scale the BOP model in sanitation.
- > Won India's first ever CNN IBN India Positive Awards, 2012.

What will be impact of mandatory CSR spend mandated by the government to spend 2.0% of their



Cost/Benefit Analysis

The average construction labourer frequents the toilet and restroom three times in an 8-hour shift. The labourer spends approximately 3-4 minutes in the restroom if it is on-site.

If the lavatory facility is off-site, the average labourer spends 15-28 minutes travelling to the facility and then 4-9 minutes using the facility. This adds up to 19-37 minutes a trip or up to over 1 $\frac{1}{2}$ hours. If you pay a labourer Rs.250 per day, that can amount to each worker getting up to Rs.30-50 or per 8-hour shift to use the restroom. If you add this amount for every labourer, you will see the cost the construction company pays for not offering portable restrooms.

Hence, portable restrooms increase productivity at site and saves time and money for the construction company and can give a quick ROI on the expense made.



profit on CSR. How will it impact the verticals your company operates in?

Health and sanitation is the most neglected sector in India where there is an urgent need to take important corrective measures. Thus, our company also works for community development in health and sanitation by working with various foundations on non-profit basis in rural and urban areas.

If the corporates initiate to spend 2.0% of their profit in this sector, it will definitely enhance the standard of living of the poor and help them lead a dignified life thereby positively affecting the business in this industry.

Your views on Sustainable CSR...

Every company/ corporate has a responsibility towards society and the community. A small contribution towards the development of the country in health and hygiene sector will certainly help in eradicate sanitation issues, thereby paving the way towards healthy living. A community sanitation project with a clear revenue model with succession planning for micro entrepreneurs and exits for companies /foundations is extremely essential. A continuous engagement of all stake holders is essential until the project is transferred to the community.

What are the major challenges faced in executing CSR projects in India?

The major challenge faced by a lot of people willing to execute CSR projects is the continuity of funding and sustainability in the absence of a donor or a proper revenue model that can be supported in the initial period with a clear business proposition and community benefit.

Tell us about your stint on the Board of Directors (2010-2013) at the Portable Sanitation Association International (PSAI).

It was definitely a very enriching experience working with people from the developing and developed world. Understanding local cultures of different countries and various success models and people issues was extremely beneficial to apply similar strategies in the Indian context. Understanding the importance given to sanitation as an essential or emergency service in many parts of the developing world made a great impact towards providing these services as urgent and essential in India. I got to know the need for quality sanitation and the technology required for executing the cleaning, evacuation, disposal and waste treatment in a way that is beneficial to not only the environment but also society at large.

Above all, the pride and dignity that people in the industry have was extremely overwhelming and inspired me to work even more passionately in the sector in India.

Your message to the younger generation...

Our mission and agenda is to educate people towards importance of sanitation and hygiene. Today the younger generation has access to internet, smart phones and what not at a very young age, but what we want for our future generation to have is the right to live a dignified and healthy life.

We have Johnny – the Mascot of our company to connect with the public in general and more so the youth and the children in society who will be the future ambassadors of health and hygiene.







From the desk of WHO Representative to India World Health Day 2014

Vector-borne diseases, the theme for this year's World Health Day (WHD) is timely. Affecting more than half the world's population and accounting for 17 percent global burden, these diseases are difficult to predict, prevent or control. In India, the burden and risk of vector-borne diseases (VBDs) is massive. Adding to the complexity is that VBDs have intensified in their severity due to climate and environmental change, and globalization. The WHD campaign, 'small bite: big threat', therefore, is well-timed as it brings renewed focus on sustainable control, elimination and eradication of VBDs.

The World Heath Days aims at raising awareness about the threats posed by insect vectors and the bacteria, viruses, and parasites they carry, collectively known as vector-borne diseases (VBDs); and to motivate families and communities to protect themselves through simple measures. It also ask that not only governments ensure that measures are in place for coordinated intersectoral actions, but also that citizens and communities are empowered in order to have an impact on prevention and control of VBDs.

Inefficient water management, rapid degradation of the environment, unplanned urbanization, and other human determinants such as housing, climate changes, widespread poverty, air travel and ineffective health systems all play a role in contributing to the spread of VBDs.

We also know that insect vectors that carry these diseases are very complex and versatile and can adapt themselves quickly to the changing environment, which makes the task of controlling these diseases even more difficult.

For most VBDs, no vaccine is available, leading to a large number of deaths, especially in children under five years in countries with extreme poverty. In addition, VBDs result in loss of productivity, school absenteeism, deeper impoverishment and higher health care costs, leading to an increased burden on public health services.

The world's fastest growing vector-borne disease is dengue, with a 30-fold increase in disease incidence over the last 50 years. Malaria is endemic in 16 states with more than 80 percent of malaria burden and more than 90 percent of malaria deaths. In addition, reports of severe and sometimes fatal disease in the usually milder vivax form of malaria have become more frequent. Lymphatic filariasis is prevalent in 250 districts with over 600 million people at risk. Japanese encephalitis (JE) is being reported from 20 states across the country with a case fatality rate of 20 percent. Visceral leishmaniasis (VL), also known as kala-azar puts an estimated 130 million population at risk in sandfly endemic areas.

In India, the burden is concentrated in the remote areas of the country with the poorest heath systems where the population is most exposed. Weak collaboration across agencies, sectors, and levels of government, including the regulatory mechanisms are some of the key challenges. Now is the time for robust collaboration and action across all sectors and for targeted community-level sensitization.

The challenge for India is to ensure that interventions reach all populations, particularly those of the most marginalized and vulnerable high-risk groups. The VBD control programme needs to define effective key components and necessary governance mechanisms in order to attain a sustainable control of VBDs that benefits all people.

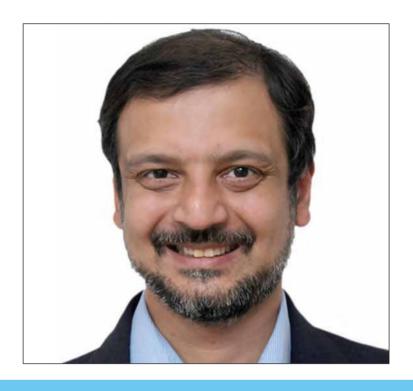
The recently conducted Joint Monitoring Mission on vector-borne diseases is a step towards reviewing disease control efforts through the health systems lens to address the gaps identified. We applaud the government for its leadership in adopting a health systems approach and intensifying inter-sectoral coordination to address VBDs in the country.

We at WHO remain committed to supporting the governmental efforts for effective and efficient control of vector-borne diseases in the country.

Dr. Nata Menabde

WHO Representative to India

Wockhardt - Creating a HEALTHIER WORLD



Wockhardt, one of the leading global pharmaceutical and biotechnology organisations, provides affordable, high-quality medicines to help the world remain healthier. A research-based global healthcare enterprise with relevance in the fields of pharmaceuticals, biotechnology and a chain of advanced super speciality hospitals, this Indian multi-national company has a multi-ethnic workforce of 8,600 Wockhardt associates from 21 different nationalities globally.

The company's core business is innovation. It uses science and technology to develop medicines and other products that improve the quality of people's lives through better health. It is of little wonder then that Wockhardt's CSR arm - Wockhardt Foundation has touched more than three million lives through innovative ways of bringing primary healthcare to

those at the extreme fringe of economic activities having no awareness of even the most basic healthcare. Through its various medical and social initiatives, the Foundation prides itself in starting a movement of sorts in promoting human values, social awareness and social development.

Wockhardt aspires to create a healthier world. Its strategic vision of 'More & More with Less & Less' has transformed into new ways of thinking, a new journey for growth, medical breakthroughs for patients and continuing value for all stakeholders including the communities in which it operates. Dr. Huzaifa Khorakiwala, Trustee and CEO, Wockhardt Foundation speaks to CSR Mandate about the social initiatives the company has taken up in the area of healthcare, sanitation and nutrition across India. Excerpts.



Being a leader in healthcare, Wockhardt has been involved in massive CSR work in this sector. Please tell us the key initiatives you have taken in restoring or augmenting primary health in the community.

Wockhardt Foundation, a part of the Wockhardt Group, is a national, secular, notfor-profit organization engaged in social service and human welfare activities for the underprivileged and rural communities. The Foundation is involved in many activities and programmes for the poor in the fields of health, sanitation and nutrition.

HEALTHCARE:

> Mobile 1000 - Mobile 1000 is Wockhardt Foundation's flagship programme that aims to operate 1000 Mobile health vans in rural India administering free primary healthcare to 25 million Indians every year in rural and urban India. The Mobile 1000 ambulance van is equipped with medical devices, medicines and is assisted by MBBS doctors, pharmacists and coordinators. The van visits remote areas to deliver primary health care services free of cost. Mobile medical units are the best and the most viable solution for providing access to primary healthcare facilities. Besides these, the vans also run eye clinics.

> Dr. Health – An initiative by Wockhardt Foundation which started in April 2013 for creating awareness in the community regarding health, illness, de-addiction, cleanliness, vaccination, etc. Through this initiative, the Foundation wants to highlight that precaution is always better than cure. 60,257 have benefitted from this service.

SANITATION:

> **Bio-Toilets -** Started in Jan 2013, this







WHARF WHICH STARTED IN 2002. P R O V I D E S NUTRITION TO HIV POSITIVE CHILDREN. WHARF HAS COME UP WITH NUTRITIONAL SUPPLEMENTS MADE FROM LOCALLY AVAILABLE FOOD GRAINS, CEREAL, PULSES AND MILLETS WITH NO ADDED PRESERVATIVES AND CHEMICALS. WHICH SUFFICES 1/3 OF DAILY NUTRITIONAL NEED OF INFECTED CHILDREN IF CONSUMED AS RECOMMENDED

innovative initiative helps alleviate the need for expensive sewage treatment and waste management and improve the poor sanitation situation in India. It is an environment-friendly waste disposal at the source. The past year has seen 32,000 people benefiting from the service.

- > Moksha This initiative aims to improve sanitation among poor women in India by providing sanitary napkins to them at affordable costs and creating awareness about the importance of maintaining good hygiene and sanitation for good health.
- > Shudhu aims at providing one of the most cutting edge solutions in clean drinking water across India and the world over. Total number of people who have benefitted from the service is 12,55,200. The Foundation is targeting to distribute Shudhu in all of their Mobile 1000 vans by 2014.
- > Jal Secure Launched in 2013, this initiative aim to ensure water security in the country, particularly for the welfare of the vulnerable, poor and socially backward communities.
- > Swasthya Chulha This project which aims to provide clean and effective method of cooking will be launched soon. It will provide an 80 percent reduction in smoke and toxic emissions along with 60 percent reduction in the fuel requirement and cooking time thus improving the health of the rural poor in India.

NUTRITION:

> Poshak - Started in 2012, this project is committed to making life better for children by addressing their nutritional needs thus boosting their immune system. The programme was initially started for HIV positive children and the supplement 'Poshak Porridge Mix' was developed to improve the immune system of children affected by HIV and AIDS in order to help them fight the disease. 750 HIV/AIDSinfected children and 6,160 malnourished children have benefitted from this project.

> WHARF which started in 2002, provides nutrition to HIV positive children. WHARF has come up with nutritional supplements made from locally available food grains, cereal, pulses and millets with no added preservatives and chemicals, which suffices 1/3 of daily nutritional need of infected children if consumed as recommended. The Jeevadhar nutrition supplements for HIV+ children helps improve their immune system. The project is committed to making life better for those individuals who are infected and affected by HIV and AIDS. Total number of children who have benefitted from the service is 9,968.

How does the mobile health programme help in providing healthcare on a sustainable basis? How many patients have you been able to reach through the programme both in urban and rural areas?

The mobile health programme, Mobile 1000, is the Foundation's flagship programme started in 2007 to provide high quality healthcare facilities free of cost to rural India. Mobile 1000 aims to operate 1000 Mobile Health Vans in rural India administering free primary healthcare to 25









million Indians every year in rural India. At present, the Foundation has about 85 mobile vans under its direct operations in 12 states of India, covering 25 villages in weekly cycles. Each van gives free primary healthcare to 25,000 poor patients per year. The van is equipped with doctors, pharmacists, medicines and diagnostic facilities. The van covers a radius of 20 villages every week.

There is a shortage of primary healthcare in the country. India has 600,000 villages but only 23,000 primary health centres. Only one in 25 villages can avail of primary healthcare facilities. Thirty percent of the village population travel about 30 km for access to basic primary healthcare. Through this programme, Wockhardt Foundation has helped bring primary healthcare to the doorstep of rural people. Till February 2014, 1,02,26,636 patients have benefitted from the programme.

The project has already been implemented in 11 states of the country — Uttar Pradesh, Andhra Pradesh, Orissa, Maharashtra, Gujarat, MP, Rajasthan, Bihar, Uttarakhand, Tamil Nadu, Karnataka

The new initiative implemented for the current year 2014 is the Patient Information System and U-Check [urine diagnostic device].

What kind of impediments have you encountered while carrying out the programmes and how did you overcome them?

It is difficult to direct the required talent

pool to rural areas since these areas do not have basic amenities like education, nutrition, healthcare, infrastructure. Also, doctors have reservations practicing in the villages as they feel it lowers their standard. However, over the years, Wockhardt has been able to build an efficient team of doctors who take turns to extend services to rural areas.

Please share details on the programmes-Jal Secure and Shudh.

JAL SECURE

In spite of plentiful water resources, India faces water scarcity due to inequitable distribution of water, ever increasing population and economic activities. Being an agricultural country, water is required in every urban, rural, semi-urban and semi-rural setting.

Wockhardt Foundation's Jal Secure programme works towards minimizing the situation of water crisis in India through planning and implementation of water security measures like water conservation, waste water treatment, rainwater harvesting, groundwater recharge, insitu water purification technology, water quality monitoring and watershed management.

Jal Secure was launched in 2013 with the aim of ensuring water security in the country, particularly for the welfare of the vulnerable, poor and socially backward communities. Jal Secure works on a PAN India model.

Through Jal Secure, we conduct purification of water that contains fluoride, arsenic, iron, nitrate and other minerals contamination through water purification treatment plants. In the next one year, we aim to install at least five rainwater harvesting structures and five water-treatment plants across different places in India. The Foundation also plans to start wastewater treatment plants once the rainwater harvesting and water treatment plants are established.

SHUDHU

Shudhu is an initiative aimed at providing one of the most cutting edge solutions in clean drinking water across India and the world over. We aim to educate the masses about the importance of clean drinking water, and to give them access to one of the



most efficient, easy and economical water purification methods available.

Shudhu is a NaDcc (Sodium Dichloroisocyanurate) tablet which is nontoxic and completely safe. Each Shudhu tablet purifies up to 20 liters of water within 30 minutes. Shudhu clears the water from all pathogens (bacteria, viruses, fungi and even E.coli bacteria) without leaving any odor or color, making it safe for drinking and cooking needs. This prevents diseases like typhoid, cholera, hepatitis, gastroenteritis, dysentery, diarrhoea as well as vector-borne diseases like malaria, chikungunya, dengue. A Shudhu tablet costing only one rupee can purify 20 liters of water in 30 minutes. Therefore, it is a simple and cost-effective way to disinfect water.

NaDCC is approved and endorsed by the World Health Organization and Bureau of Indian Standard as a safe and effective method for purification of drinking water. It is being used in 67 countries (especially for Disaster Management and the Defense Forces) for over 16 years now.

Bio-toilet is an interesting concept. Please elaborate on Wockhardt's solid waste management programme. How has this solid waste been used?

According to UNICEF and WHO estimates, 1/7th of the world's population openly defecate due to absence of toilets. Of these,





WOCKHARDT BELIEVES THAT THERE IS NO NEED TO DISPOSE HUMAN WASTE INTO A SEWAGE PIPE, TANK AND SUBSEQUENTLY THE RIVER, LEADING TO WATER CONTAMINATION - A COMMON PROCESS THAT IS REQUIRED IN CASE OF A NORMAL TOILET. SUCH WATER CONTAMINATION AND UNHYGIENIC SITUATIONS OBSERVED IN NORMAL TOILETS LEAD TO WATER-BORNE DISEASES. BIO-TOILET HELPS MAINTAIN SANITATION AND HYGIENE AND PREVENTS WATER-BORNE DISEASES

60 percent live in India. In Mumbai, more than 4 million people opt for open defecation due to unavailability of toilets.

Poor hygiene and sanitation facilities profoundly impacts human health. It is estimated that 10 million children under the age of five die globally every year due to improper sanitation. Of these, 2.4 million children are from India.

In such a scenario, Bio-Toilet is the need of the hour.

Bio-Toilet, based on hygiene and sanitation, is a complete waste management solution for India. It is an innovative initiative which alleviates the need for expensive sewage treatment and waste management and helps improve situation of poor sanitation in India. It is an environment friendly waste disposal at the source.

Through this initiative, Wockhardt Foundation aims to:

- > Provide improved sanitation facilities to the poor slum dwellers
- > Ensure pure waste discharge from toilets
- > Play a critical role in preventable healthcare and provide accessible healthcare to the poor and needy
- > Expand its social coverage in areas with low resources

A Bio-Toilet composes of the toilet structure and the bio-digester tank. The bio-digester tank contains anaerobic bacteria which decomposes solid waste into water and methane gas (biogas). The water is pure enough to be used for industrial and irrigation purposes. The benefits of biogas

are innumerable. It can be used as fertilizers, in biogas lamps for lighting and as fuel for cooking. The tank does not require repeat dosing of anaerobic bacteria owing to its ability to procreate.

Wockhardt believes that there is no need to human waste into a sewage pipe, tank and subsequently the river, leading to water contamination - a common process that is required in case of a normal toilet. Such water contamination and unhygienic situations observed in normal toilets lead to water-borne diseases. Bio-Toilet helps maintain sanitation and hygiene and prevents water-borne diseases.

How gratifying are these initiatives to the Wockhardt Foundation members?

Wockhardt Foundation's Mobile 1000 activity has led the team to encounter many heartwarming instances. People in villages need to travel long distances for primary and basic healthcare needs. The Mobile 1000 van equipped with primary healthcare facilities and trained personnel does a doorto-door visit to ensure timely help to those who have been left immobile by their sicknesses. They are provided care and given a new lease of life. Some do not even have money to afford basic medicines. They receive free medicines and healthcare services from these vans. This makes them very happy and grateful to Wockhardt Foundation's services. We in turn feel grateful to be able to help them lead a better life.

One of our initiatives, Khel, Khel Mein, is aimed at creating health and sanitation awareness in young school going children, which is indeed very satisfying as this will go a long way in building a healthy future for India.