



PARTNERING **FOR** PROGRESS

CARE INDIA'S EXPANDING SCOPE OF CORPORATE ENGAGEMENT





ACKNOWLEDGEMENT

To the many corporates who have made our journey towards poverty reduction and social justice rewarding. And to those who will join us soon.

CARE India recognises that its efforts and success in reducing poverty can be redoubled by the interventions, ability and knowledge of several partners, especially the corporates. Aligning efforts with corporates has proven to be mutually beneficial and accelerated shared values, outcomes and impact. While we have absorbed their financial acumen and systemic approaches to bridge India's wide gap between the rich and the poor, they have used opportunities provided to develop new markets and improve their productivity.

Our confidence in a lasting collaboration between us and business organisations to create equity among larger sections of society finds expression in this report. We hope to engage with many more corporates and harness their untapped potential to influence outcomes at scale.

CONTENTS

About CARE 5

Seeking opportunities for corporate collaboration 6

Access to better healthcare 8

Enhancing inclusiveness of migrants 10

Bridging the education gap 12

Disaster response and preparedness 17

Our Partners 20

Engaging with CARE India 23





ABOUT CARE

CARE is an international humanitarian organisation fighting global poverty and social injustice, with a special focus on working with women and girls to bring lasting change in their lives and communities. As a non-religious and non-partisan organisation, CARE works with communities to help overcome poverty by supporting development and providing emergency relief where it is needed most. Today, CARE implements programmes in 86 countries worldwide, reaching some 122 million people in Africa, Asia, Eastern Europe, the Middle East and Latin America and the Caribbean.

CARE has been working in India for over 60 years, through well-planned and comprehensive programmes in health, education, livelihoods and disaster preparedness and response. The overall goal is the empowerment of women and girls from poor and marginalised communities leading to improvement in their lives and livelihoods.

In India, CARE focuses on the empowerment of women and girls because they are disproportionately affected by poverty and discrimination; and suffer abuse and violations in the realisation of their rights, entitlements, and access and control over resources. Also, experience shows that when equipped with the proper resources, women have the power to help whole families and entire communities overcome poverty, marginalisation and social injustice.

The corporate sector (private and public) is a very crucial stakeholder for CARE India. Corporate engagement has evolved from a traditional grant-based approach to a strategic and sustainable one. This document showcases CARE India's experience in working with the corporate sector - its strategies and outcomes. While it underscores accomplishments and elements adaptable to future plans, it also signals new areas for possible cooperation and purposive action to help achieve social impact at scale.



SEEKING OPPORTUNITIES FOR CORPORATE COLLABORATION

Our recent endeavours have been focussed on finding avenues for corporate engagement by exploring common spaces and shared values. , orchestrating their activities to increase the impact of our initiatives many times over.

CARE recognises that the complex issues faced by modern India cannot be resolved just by the state, civil society and institutional & bilateral donors. A wide lens approach that accommodates many more partners has become indispensable to avoid failures and multiply the odds of success. The calls to leverage the efforts and capabilities of the corporate sector to step up the impact of poverty reduction programmes are growing louder as companies are particularly well-placed to engage with these challenges.

CARE is active in seeking to collaborate, co-operate, co-create and co-innovate with the corporates. It has attuned itself to new approaches to maximise the developmental impact of the corporates; use their resource pools and expertise efficiently; and in return,

lend impetus and recognition to the corporate growth trajectory.

We provide below snapshots of our partnerships with the corporate sector. Apart from providing a quick assessment of our joint efforts, it could pave the way for future collaborations and forays into unexplored areas of work.

Women's empowerment is a cross cutting theme in CARE India's work and an integral part of its corporate engagement framework. We actively use the **Women's Empowerment Principles** (WEPs) to promote gender equity and increased participation of women at the workplace, supply chain and community. In partnership with UN Women and UN Global Compact Network, CARE India has created a platform to advocate for a greater commitment to WEPs by Indian companies.

Women play a major role in the food and agricultural sector in India. It is also a sector where our 'impact population' of *dalits* and tribal women and girls work.

CARE India's work in value chain aggregation is one the many key approaches of the livelihoods strategy which helps empower such women to increase productivity, access better market linkages, and take informed decisions. The corporate sector plays a vital role in such value chain engagement. By combining efforts with us on several projects, they have augmented, amplified and rejuvenated our initiatives and future plans are to intensify their engagement and possibly that of many new entrants.

Working with the communities for over six decades, we have access to some of the remotest villages in India and understand the needs of the 'Bottom of the Pyramid' (BoP). This knowledge and access to the BoP has enabled us to assist several companies redesign their products and services as per the community needs. More significantly, it has helped companies invest in the future sustainability of their own products.

India is the world's second largest producer of textiles and garments. The textile and garment manufacturing industry employs close to seven million people. Women and girls form a large and significant part of this workforce. CARE India plans to consciously work with this sector to improve the lives of millions of women employed as workers.

The extractive sector is becoming one of the largest agents of development in India today (especially in rural areas) with the potential to have profoundly positive as well as negative effects on communities. The areas of resource extraction and associated industries in India map directly onto almost all of CARE India's priority states. Women and girls are often excluded from such activity and their Vulnerability is increased in Dalit and Adivasi communities.

CARE India's strategy to engage with High Impact Industries (HIIs) aims to create a symbiotic relationship that serves the community.

CARE India's Girls Education Programme works to help girls complete primary education and access formal schools; provide on-site academic support to enhance the quality of teaching; nurture leadership skills amongst girls, and strengthen institutional support to education. It has made eminent sense to combine our strengths in this sector and corporate dynamism (technical know-how, innovative technologies, infrastructure and investments in quality education modules) to build a future literate India. We hope to further build up this cooperation.

CARE India's health programmes work to provide essential services to the most vulnerable communities.

We promote new born care and immunisation, reduce malnutrition in children, decrease infant and maternal mortality rates, and protect those affected by or susceptible to HIV/AIDS and TB.

Companies, especially those in the pharmaceutical industry, have a very critical role to play in improving access to healthcare among the poor. Technological innovations, in particular, provide solutions to improve access and quality. Evolving robust partnerships with such trail blazing corporations has and can help us mobilise a vast range of resources and actions required to bring about sustained and transformational change on a significant scale.

CARE India helps communities build their capacity to better cope with and recover from disasters. With a closely knit network of local authorities, civil society, and community based partners, CARE acts quickly to fulfil community needs. Emergency relief is one area where the corporate sector plays a major role by providing financial and non-financial resources. CARE works with corporates to prepare communities to cope with disasters and reduce losses and is keen to bring many more corporates into the fold of disaster preparedness and mitigation.





ACCESS TO BETTER HEALTHCARE

As the second most populous country in the world, the healthcare structure in India is over burdened by its increasing population. The health of a woman is closely linked to her educational and socio-economic status. Despite maternal mortality rates showing a decline in India, thousands of women continue to die every year due to lack of access to basic healthcare facilities; and where they are available they are of poor quality aggravating the situation.

India also has the highest under-five mortality with over two million children dying before their fifth birthday. About 90% of these deaths are preventable. One-third of all malnourished children live in India and 46% of children, especially those under three years, are underweight.

CARE India's health programme is designed to provide health essential services to women and children belonging to the most vulnerable communities. It attempts to promote essential newborn care and immunisation, reduce malnutrition in children, decrease infant and maternal mortality rates, and protect those

affected by or susceptible to HIV/AIDS and TB. It has reached out to 60,000 and five million participants under its HIV/AIDS and TB projects respectively.

CARE India partners with stakeholders, including the public sector, private sector and civil society, to reduce health inequalities by addressing the social determinants of health and revitalising primary health care.

FOCUS OF CARE INDIA'S HEALTH PROGRAMME

- Improved access to and utilisation of primary and preventive health care services
- Enhanced quality of health services
- Strengthening participation and use of services by women and most marginalised communities
- An enabling environment created where health rights are realised by the poor and most marginalised populations, especially women and girl children

A medley of approaches and models has been used to provide better healthcare services to women and girls. They broadly include an intermingling of the following: strengthening public health systems; training of the community health workers; counselling of the beneficiaries such as mothers through home visits; as well as enhancement of counselling skills of the field staff. CARE India has also developed comprehensive capacity building kits and developed IEC and BCC material to generate awareness on health issues among the stakeholders.

To address the early childcare needs, CARE India has replicated the “5x5 model” to integrate critical needs of children during early childhood into a simple yet systematic and highly effective programme. Using the broad framework of this global model, CARE India has shaped an India-specific essential package to improve the quality of life and long-term developmental outcomes for vulnerable children. The period in the package stretches from conception to entrance into primary school, and the focus is on regions afflicted by poverty.

Further, CARE India has developed an MIS (Management Information System) to determine the outcome and impact indicators of its health initiatives.

PARTNERSHIPS WITH THE PRIVATE SECTOR

The private sector has been instrumental in helping accelerate progress to improve women's and children's health through innovative and sustainable solutions. This contribution has been recognised and acknowledged worldwide.

Keen to explore the many promising possibilities that exist within this sector, CARE India has partnered with various private sector companies for its multiple health projects. Some of these partnerships include:

- A tie-up between UBS and CARE to enable children from disadvantaged communities in Bihar to have good health and quality education in their early years.
- MERCK and CARE have collaborated on a maternal health initiative in Uttar Pradesh. The objectives of this initiative are to significantly increase individual, household and community action that directly and indirectly improves maternal and newborn health and to enhance system and institutional capabilities for sustained improvement in the sector. This integrated approach has won the approval of many other agencies and government officials. They have expressed keenness to tap into CARE's expertise in

child development, nutrition, health and livelihood initiatives.

- Sustainable Education and Health among Tribals (SEHAT) is a project funded by ICICI Foundation. Our partners - the Department of Women and Child Development and the Department of Health - also implement and coordinate its activities. SEHAT is being implemented in Sidhi and Shahdol districts of Madhya Pradesh where the focus is on combating malnutrition by strengthening both the public health systems and the agriculture value chain. The idea is to enable children less than three years and their mothers access improved nutrition and health services.
- Project IMPACT (Initiative to Manage People-Centered Alliances in Control of Tuberculosis) supported by Lilly Foundation is a subset of the original IMPACT project in the State of West Bengal, supported by USAID. This project is focussed on improving the treatment adherence of re-treatment and Multidrug-Resistance Tuberculosis patients (MDR TB). The project aims to detect 34,485 cases for new treatment, complete 14,400 re-treatments and attend to 300 MDR-TB patients. Counselling support is also being provided to MDR TB patients in two Direct Observed Therapy-Short Course (DOTS) plus sites.
- Community Integrated Health Initiative, a project funded by Cairn India Limited, is in Barmer district of Rajasthan. As a part of this project, CARE India is working towards improving the health status, strengthening the delivery of National Health Programmes, mobilizing communities for better health, and bringing about significant reductions in the maternal and infant mortality. While strategically engaging with and mobilizing women at the community level, CARE India is also partnering with community leaders, existing Village Health Nutrition and Sanitation Committees, Self-Help Groups and ASHAs. The major emphasis is upon developing an accountable system, both at the community and the local governance level, to strengthen gender relations.





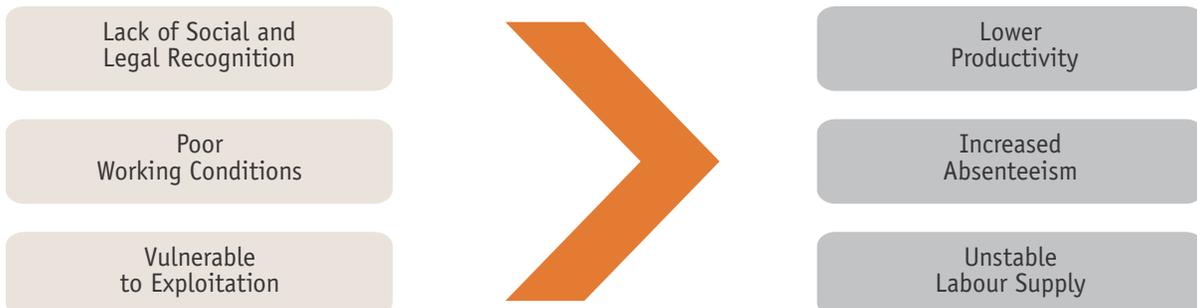
ENHANCING INCLUSIVENESS OF MIGRANTS

The phenomenon of internal migration – people who move within national boundaries – is a worrisome challenge in India. This is because when uprooted from their homes, migrants become an invisible, uncounted and recognised group, stripped of their rights.

Empirical and conceptual constraints in measuring numbers make the problem a hidden one and hence an enormously underestimated social malaise. Yet projections indicate that levels of internal migration are set to intensify.

Lead source states of internal migrants include Bihar, Uttar Pradesh, Madhya Pradesh and West Bengal. The search for livelihoods is the primary reason for this exodus of people from state to state. Migrants bulk up the labour force in urban centres and in most cases form the majority workforce. The unorganised sector is a major employer of migrants.

Though not a homogeneous category, statistics show women constitute an overwhelming majority of migrant labour. The textile and garment industry, for example,



employs a huge woman work force. While all migrants continually face problems of social exclusion, women migrants face double discrimination on account of their gender. The lack of social and legal recognition, poor and hazardous working conditions, the absence of shelter and health facilities and discrimination at every level accentuates their marginalisation. The fall out of such social apathy is lower productivity, increased absenteeism and erratic work patterns (that plays havoc with the supply chain).

Taking inspiration from CARE Bangladesh's achievements in finding place for the displaced, CARE India in collaboration with a private sector partner undertook a situational analysis of migrant workers in the National Capital region (NCR). This was followed by a programme designed to improve their socio-economic conditions.

CARE India views the magnitude of the migrant workforce as a huge opportunity and their plight as one needing urgent intervention.

It is keen to learn from and apply the sustainability and women's empowerment models that CARE has successfully implemented in several countries. These experiments have been executed in partnership with the corporate sector.

CARE India's vast experience in the areas of health, financial literacy and education and its deep understanding of the socio-economic issues puts it at an advantage to work with brands and buyers to find solutions to the complexities of migrant labour situation.





BRIDGING THE EDUCATION GAP

Despite a major improvement in literacy rates during the 1990s, the number of children who are not in school remains high. Gender disparities in education persist, far more girls than boys fail to complete primary school.

Girls are less likely to enrol in school and more likely than boys to drop out, particularly as grade levels increase. Nearly 30% of girls drop out before completing primary school and less than half continue to secondary school (UNICEF). This is driven by a number of factors, including

traditional social and cultural attitudes that devalue women and girls and prioritise education for boys, the absence of schools in rural areas, restrictions on girls' mobility, and the low value attached to education in many communities.

Weak and gender-insensitive school systems make pursuing an education extremely difficult, even for parents who would like to see their daughters educated. In areas where some castes and tribes are particularly



marginalised and vulnerable, girls face even more barriers to getting an education.

Education is seen as an important tool in enabling women and girls to participate in decisions that affect their lives and in improving their social status. It is also essential to help them become more empowered socially, economically and politically. CARE India's education programme, hence, consciously seeks to engage learners in a process of critical enquiry and provide them with opportunities to build conceptual tools through formal and alternative education.

It helps girls complete primary education and access formal schools, provides on-site academic support to teachers in government schools, nurtures school-community relationships, and offers alternative education opportunities for women and adolescents who never enrolled or dropped out early. These alternative education programmes emphasise science, technology and mathematics, and challenge teachers, students and parents to critically consider their beliefs.

CARE India's Girls' Education Programme (GEP) goal has been to improve life opportunities for girls and women through their increased participation in formal and alternative education. While largely working towards realising the rights of the children, especially girls to elementary education, CARE India also recognises a life-cycle approach to learning. Thus, a learning continuum allows CARE India to work with multiple age groups of learners, reinforcing their knowledge, skills and abilities as they relate to basic competencies appropriate to their development in life.

Since 2006, CARE India through the GEP has been taking ahead the learning from the pilots. It has developed operational plans to deepen its work within the larger context of government programmes and schemes such as the *Sarva Shiksha Abhiyaan*. There has been continued focus on addressing vulnerabilities among children, especially girls and women of marginalised communities, so that they are able to make decisions and assert themselves to avail their entitlements and realise their rights.



STRENGTHENING KASTURBA GANDHI BALIKA VIDYALAYAS (KGBVs)

CARE India implements this project with the support of several donors. The intent is to improve educational access and quality in KGBVs located in Uttar Pradesh, a state known for its poor human development indicators. The overarching goal of this project is to ensure children, especially girls, from marginalised communities demonstrate improved learning in math and science in 27 KGBVs of Uttar Pradesh.

The programme has worked perseveringly to challenge beliefs that exclude girls from playing an active role in public life besides working towards improving the quality of their education. While developing basic language, science and mathematics skills among girls is an important aspect of the project, the focus is as much on the development of leadership qualities, communication skills and confidence. It is this nuanced approach that distinguishes it from several other interventions in the field of education.

Provision of on-site academic support to the teachers especially in language, science and mathematics, supporting them in preparing lesson plans, strengthening learning resources such as teaching learning materials, and improving the overall learning environment for girls are the other CARE India initiatives to improve learning outcomes in KGBVs.

CARE's technical team also continually attempts to gain insights into the concerns and issues faced by girls and facilitates their interaction with teachers, which is key to promoting confidence and self-esteem among the girls.

Most of these activities have been made possible through the formalisation of a partnership with the state *Sarva Shiksha Abhiyaan* - a flagship government programme with state nodal bodies responsible for running KGBVs and improvements in formal schools. The programme's

favourable outcomes stem from a clear articulation in the partnership of the need for technical on-site support and capacity building of teachers (to improve classroom process, especially in the areas of language, math and science) and provision of equipment such as computers to aid the teaching and learning processes.

PROJECT HIGHLIGHTS

- The programme is reaching out to girls with almost negligible formal school experience
- It has strengthened understanding on quality education amongst teachers
- Children are now learning as per their learning level and have shown progress in learning outcomes
- A positive school environment has been created
- The programme has been successful in increasing the self-esteem and confidence level of children
- Quality education and exposure visits have resulted in expanding the girls' world view, they have as a result become aware of the world outside their school premises and their village
- Teachers have a better understanding of content and methodology
- There has been a demand to extend technical support to schools, which are not being covered by CARE





CARE'S GIRLS' EDUCATION PROGRAMME IN ODISHA

Under its umbrella Girls' Education Programme in Odisha, supported by several corporate partners, CARE India directly reaches out to 5,192 students in 50 villages. **The School Improvement Programme** under its **Leaders of Tomorrow** project reaches out to 6,083 students in 36 blocks of Mayurbhanj and Keonjhar districts. And, the **Udaan** programme (that accelerates learning for girls within residential schools) helps integrate approximately 100 girls from tribal communities each year into the formal education system.

CARE India has made huge strides in the field of education in Orissa and is successfully positioned as a technical support agency to Odisha's Primary Education Programme Authority. Its advocacy for school policies that foster gender equality and support for the implementation of India's Right to Education Act of 2009 (which legally entitles all children between the age group of six and 14 to free and compulsory schooling) has transformed it into an organisation with a clear vision and a roadmap whose ideas are gained public acceptance and support.

The ongoing project is striving to revolutionise educational opportunities for disadvantaged girls in Odisha. There is firm evidence to show that students directly involved with CARE initiatives, including its innovative *Udaan* programme for out-of-school girls, are able to catch up rapidly with their peers. Most are joining the mainstream education system and have a chance for self-determination and achievement, denied to girls from marginalised groups. CARE through this project has also been able to create ripple effects far beyond the

schools they directly support. This has come about due to the involvement of officials who have the power to influence broader educational policy. Convinced of CARE India's vision and enthused by the momentum their projects have gained, they have joined efforts to widen the circle of influence and bring benefits to many more children.

PROJECT HIGHLIGHTS

- The drop-out rates among girls have fallen perceptibly and attendance rates have improved
- Community involvement in education - identifying never-enrolled, drop-out and irregular students - has intensified. They have aided the enrolment of 34 girls who are today continuing their education
- Out of 292 students mainstreamed so far from *Udaan*, 176 are enrolled at KGBVs
- More than 15 non-CARE schools located near the targeted 50 primary schools have replicated the project's activities
- CARE's association with the Right to Education Forum - a coalition of educators and civil society groups in support of India's Right to Education Act - has resulted in significant policy advocacy and institutional learning towards the full realisation of the Act's goal of universal access to schooling

JOIN MY VILLAGE - IMPROVING QUALITY OF EDUCATION IN KGBVs AND UDAAN

As detailed earlier, CARE India has piloted and refined a residential education camp model called *Udaan* (to soar), designed to help girls aged 10-14 who are at extreme social and economic risk and who have missed out on education. *Udaan* has been running successfully in Uttar Pradesh for about 11 years, three years in Odisha and a year in Bihar. Through the 'Join My Village' initiative, CARE now takes the *Udaan* model to the state of Haryana.

A look at how it has taken shape so far in Haryana shows this picture. CARE has implemented basic activities to help establish an *Udaan* school in Mewat during the first



year of its programme. An unbroken continuum of activities have followed: they include adapting CARE's curriculum to the community in Mewat; orienting partners on the approach of *Udaan* (specifically around issues of lodging/boarding and academics); community mobilisation to identify and support girls to attend the programme; regular interaction with parents to talk about any changes their daughters may face because of their enrolment in the school; conducting teacher training; improving school libraries; and organising review meetings and community seminars to help build community support for girls' education.

To reiterate the driving force behind *Udaan*, one can say that the accelerated courses allow girls who never attended school, or dropped out early, to complete their basic primary education (grades 1-5) in 11 months, and transition to formal schooling in upper primary (grades 6-8) and secondary school. The programme's curriculum includes activities relating to basic competencies in subjects like science, language and math, and an equal emphasis on a social learning curriculum aimed at sharpening girls' critical thinking and leadership skills, as well as supporting their social development.

The 'Join My Village' accelerated learning programme is being implemented in Haryana in partnership with several agencies, including the Indian Government's Education Department and the SRF Limited. It is hoped that educating more and more girls this way can help create a larger movement where every girl child in India is educated.

PROJECT HIGHLIGHTS

- 54 KGBV schools are supported directly impacting 5,300 girls
- The Girls' Leadership Programme reaches 3,200 girls
- *Udaan* completes one successful year in Mewat
- 55 girls in Mewat now attend formal schools
- 433,825 people positively affected by GEP
- 232,000 mothers helped through the Maternal Health Project
- Maternal health services reaches a population of 1,166, 535



DISASTER RESPONSE AND PREPAREDNESS

Millions of people are affected every year by different disasters, posing a threat to their lives and livelihoods. While the frequency of disasters will increase over the next few years, owing to climate change, however, their impact can be reduced by increasing the resilience of communities to cope with these disasters.

Therefore, it is extremely essential that planned and systematic initiatives using disaster risk reduction approaches be implemented. Several studies in India have highlighted that a well-prepared community bounces back to normalcy much faster - than the less prepared community - in the aftermath of any disaster.

CARE India has been committed to reducing vulnerabilities of most marginalised communities created due to disasters by building their capacities to cope with and recover from disasters.

CARE **undertakes** immediate relief distribution and rehabilitation initiatives to secure the long-term development of these affected communities. In doing so it works closely with communities themselves, local

authorities, civil society organisations and community-based partners.

CARE India's emergency response and recovery initiatives focus on three key sectors namely livelihoods, water sanitation and hygiene (WASH) and shelter.



PRIVATE PARTNERSHIPS: STEPPING UP EMERGENCY MANAGEMENT AND PREPAREDNESS

The private sector's engagement in disaster response has grown significantly around the globe. Since the last decade, multinational corporations have become increasingly involved in the on-the-ground emergency response activities in partnership with humanitarian agencies or other actors who respond to such crisis situations.

A recent report from the World Economic Forum, in its global citizenship agenda states, 'such immediate actions undertaken by companies in response to disasters are not isolated philanthropic gestures. These are based on an understanding of their extended responsibility as part of a global citizenship in an increasingly interconnected world'.

COPING WITH CYCLONE THANE

A depression that formed in Bay of Bengal intensified as Cyclone Thane hit the south Indian state of Tamil Nadu and Union Territory of Puducherry in December 2011. In Tamil Nadu, the districts of Cuddalore, Villipuram and Nagapattinam were the worst affected and 735 villages within these districts were laid waste by the unforgiving rampage of the waters.

The havoc was caused by unaccountably heavy rains and high speed winds. Large numbers of people were rendered homeless as their homes were swept away by the severity and duration of the rainfall. The damage to fragile *kutcha* houses held together by sticks, bamboo and thatch was enormous. Vast swathes of land around homes too turned waterlogged making movement impossible.

With the electrical poles irreparably damaged, villages plunged into darkness and the availability of drinking water became scarce. Villages became thirst zones. Death, disease, deprivation and hunger became all too real.

After conducting rapid assessments, CARE India with financial assistance from Ford Foundation intervened in Cuddalore and Chidambaram *taluks* of Cuddalore district. In all, 1970 families belonging to the most marginalised communities (*Dalits*, Other Backward Caste's, Scheduled Tribes, women headed households, families with disabled people etc.) were reached and most affected sections in the area were provided with tarpaulin, candles, floor mats, match sticks and hygiene kits.

ANDHRA PRADESH FLOOD RESPONSE PROGRAMME (DISASTER RECOVERY INITIATIVE)

During the floods that devastated two southern Indian states of Andhra Pradesh and Karnataka in 2009, CARE India undertook relief distribution in partnership with multi-national companies like Wal-Mart, United Parcel Services (UPS) and Motorola.

Through this distribution drive, the organisation reached out directly to 4,000 families in Andhra Pradesh. Subsequently, CARE India also implemented a two-year recovery initiative namely Andhra Pradesh Flood Response Programme (APFRP) focusing on re-establishing livelihoods and providing shelters to affected families in the project areas.

This recovery initiative was followed through in partnership with ICICI Prudential - an Indian company in the banking sector. During this two-year initiative, CARE India reached out to 20,184 beneficiaries and indirectly to 1,00,920 beneficiaries. The project beneficiaries have included small and marginal farmers, landless labourers and women headed households, all of whom belonged to the most marginalised sections of the society.

The project guided the beneficiaries on adopting appropriate techniques on livelihoods (vermicomposting, establishment of grain banks etc.) at the community and household level which helped in increasing their resilience to cope with future shocks and stresses stemming out of natural disasters.

COPING AND ADAPTING TO CLIMATE CHANGE

India is one of the most vulnerable countries to climate change and ranks among the top ten high risk countries. According to a United Nations Environment Programme Study, global warming will impact India's vast coastline with rising sea levels, resulting in ecological disasters.

Almost the whole of India can be characterised as suffering from a very high degree of human water security threat. High levels of water abstraction, pollution, population density and unregulated development as well as climate variability contribute to the threat. There is consensus that India is projected to experience an increase in precipitation across most of the country in the years to come.

An increase of up to 20% or higher could occur in western regions with more widespread increase of five-10% over the rest of the country by the next century.

'WHERE THE RAIN FALLS' (WtRF): A CLIMATE CHANGE ADAPTATION INITIATIVE

The 'Where the Rain Falls' is a three-year, eight-country project supported by AXA Research Fund and the John D. and Catherine T. MacArthur Foundation. The aim is to understand the impact of climate change on human mobility and hunger on the world's most vulnerable people. The eight countries involved in the study are: Bangladesh, Ghana, Guatemala, India, Peru, Tanzania, Thailand and Vietnam.

In the first phase of the project, CARE India in collaboration with United Nations University and the Tata Energy and Resources Institute (TERI), conducted an in-depth research on understanding the linkages between the above mentioned variables in Janjgir district of Chhattisgarh.

In the second phase, that is underway now, a two-year community based adaptation project is on in the district. The aim of this project is to ensure water security for *adivasi* and *dalit* women and girls in 20 villages of the district by 2025 so as to improve their well being and increase their resilience to climate change and the resulting natural disasters.

Key approaches include community mobilisation, capacity building of impact population and target groups and advocacy. The overall approach is decidedly rights-based and participatory.

CARE will be supported by technical partnerships for the rehabilitation of water structures. These partnerships will be established with independent experts as well as expertise available with government agencies at the district level.

EMBEDDING CORPORATE SUPPORT

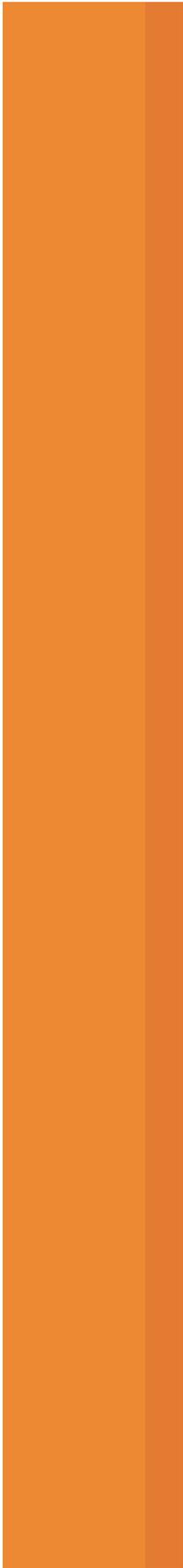
In the area of disaster response and preparedness, CARE India and the corporate sector can strategically collaborate for resources and expertise.

While in disaster response, financial resources will be critical for relief distribution, in the realm of disaster preparedness, the corporate sector can be engaged for their technical expertise in the areas of technology, logistics and telecommunication (especially to develop innovative models for establishing Early Warning Systems (EWS) in areas with multiple hazard profile). Community resilience to natural disasters can be built this way.

Similarly corporate engagement can also be harnessed to build capacity of the most vulnerable communities (e.g. women, elderly and other marginalised communities whose lives are most at risk).

Capacity building for organisational preparedness through pre-positioning of relief materials and trainings on disaster preparedness of corporate staff in crisis situations can be other areas of engagement.





OUR PARTNERS

NUTRITION, AMBITION AND APTITUDE

Kutch Livelihood Education Advancement Project (KLEAP) was launched in the Kutch district of Gujarat, India. This project in partnership with Cargill aims to improve the quality and accessibility of primary education and livelihoods in Kutch district. More than 70,000 children benefitted through the education initiative. More than 9,000 households in 228 villages across 5 blocks have gained opportunities to increase their income and improve their business skills, via training, market access and support. Cargill also supports a project in Madhya Pradesh aimed at reducing malnutrition among children.

INNOVATION AND INCLUSION, THE CORNERSTONES OF TRANSFORMATION

The Banking on Change project supported by Barclays seeks to enhance financial inclusion and access to financial services for 32,500 poor women from three districts in Tamil Nadu: Cuddalore, Nagapattinam and Kanchipuram. It directly benefits over 1.7 lakh individuals. This work aims to strengthen the SHGs and their federations and enables them to become sustainable community based institutions.

ADDRESSING MALNUTRITION TRANSFORMING LIVES

GSK Consumer Health supports project Briddhi which aims to improve the nutritional status among severely malnourished children in Purulia district of West Bengal. This project will impact 12,000 children in the age group of 3-6 years and 12,000 mothers.

ENABLING EQUALITY THROUGH OPPORTUNITIES

The Cashew Value Chain Initiative implemented in Cuddalore and Nagapattinam districts, reached to 1000 marginalised women. It operates in partnership with local and community-based organisations to promote an integrated approach where women not only gain economic empowerment, but also relevant education. Today, they are better aware of their entitlements and rights and have access to health and safety nets for times of distress.

TODAY'S CHILDREN, TOMORROW'S LEADERS

Merck supports CARE India's Early Childhood Development project in Chattisgarh. The focus is on: food and nutrition, child health, child development, child rights protection and economic strengthening. The project is operational in two districts of Chattisgarh state and will help 10,000 children in 100 anganwadi centers for intensive inputs. Merck also supports our *Udaan* project in Mewat under the Join My Village initiative. Mewat *Udaan* supports 100 girls in each batch.

DONATE. ALLEVIATE. EMPOWER

YES Bank and CARE India have entered into a partnership where YES Bank has launched a 'Social Deposit Account'. This account allows account holders to make a donation to CARE directly from his/her bank account. YES Bank customers can choose which cause they wish to support.

SUSTAINABLE GROWTH FOR A SUSTAINABLE FUTURE

With Teavana's partnership in 'Livelihood Improvement for Economic Security' (LIFE) project, CARE reaches out to 1,000 tribal small landholders involved in tea cultivation in Nilgiris, Tamil Nadu. The project supports in developing bank linkages, crop diversification and focus on health. The project also helps women get organised into self-help groups so that they can start earning independent income and become recognised in their own right.

RESILIENCE TO CLIMATE CHANGE

UPS is supporting CARE's intervention to empower 500 identified small and marginal tea farmers from scheduled tribes in Gudalur. This project will help the farmers with improved soil and water management practices. Improved soil health and water availability for tea cultivation enhances to make tea cultivation more resilient to climate change aberrations.

REBUILDING LIVES AND LIVELIHOODS

The recent floods in Uttarakhand left thousands dead and many homeless. CARE responded to the crisis by providing emergency relief and rehabilitation. CARE's efforts in Uttarakhand were supported by companies like – UPS, AXA, BNP Paribas, Colgate-Palmolive, Google, OCL and Barclays.



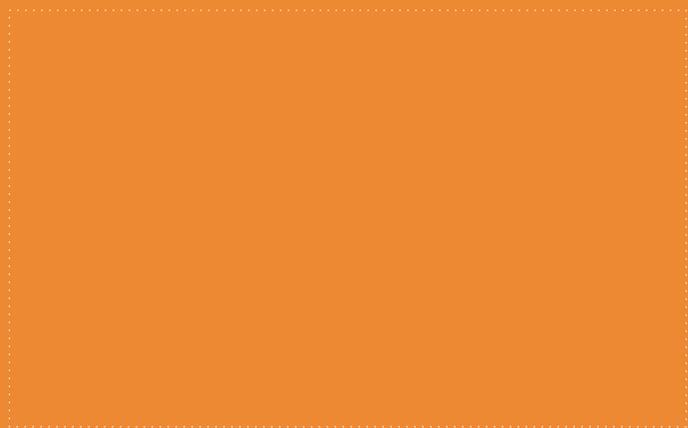
ENGAGING WITH CARE INDIA

By integrating corporate social responsibility (CSR) into their core business, companies can create shared value and make its social interventions sustainable. Moreover, a strategic approach to CSR can help companies make better social investments to achieve much higher social impact.

CARE has global expertise and experience in helping companies develop strategies for CSR. In India, CARE works with some of the leading Indian and international companies to help them design and implement their CSR interventions.

To achieve its goal of empowering five million women and girls from *dalit* and tribal communities, CARE India invites like-minded organisations from the private and public sector to join hands and work together to achieve impact at scale.

To explore partnership opportunities please contact us:





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