



ABOUT GSK

GSK Consumer Healthcare Ltd is the category leader in Indian health food drinks industry. Our flagship product Horlicks leads the market, while Boost is among the top three health food drink brands that India prefers. GSK Consumer Healthcare Ltd is an associate of GlaxoSmithKline plc. of U.K, one of world, largest consumer healthcare companies. We have a heritage that goes back over 160 years In India we have an engaged workforce of over 3800 employees. GSK also markets and distributes a range of everyday health products such as Eno, Crocin, Iodex and Sensodyne. Our marketing and distribution network comprises over 800 distributors and a direct coverage of over 8 lakh retail outlets.

FOCUS AREA

Maternal health and Child care (for e.g. Maternal and child micro-nutrient/ dietary supplementation/ Food fortification for children, women and general population/ Iron Folic Acid supplementation/ Vitamin A supplementation);b. Infant and Young Child Feeding practices (for e.g. Appropriate care-giving and feeding behavior e.g. exclusive breastfeeding and complementary feeding/ minimum dietary diversity/ responsive feeding, feeding behaviors and stimulation);c. Disease management (for e.g. de-worming and diarrhea control/ treatment of Severe Acute Malnutrition/ reduction in stunting/ nutrition interventions in emergencies);e. Maternal health (for e.g. Reproductive and health services to improve birth spacing, nutrition for pregnant and lactating women);f. Household food security and social safety nets (for e.g. Cash transfers, delivery of emergency food aid tailored to nutritional needs of women and children, Provision of minimum food aid to vulnerable households);g. Water, sanitation and hygiene (for e.g. Provide access to high quality, safe drinking water, access to proper hygiene and sanitation, WASH, health and family planning services);h. Education and awareness (for e.g. Classroom education, women empowerment, early child development, child protection, mid-day meals, awareness campaigns for malaria, AIDS, tuberculosis etc.)

TARGET STATE

Gurgaon

OBJECTIVES

"The genesis of Mission Health , our CSR program, is inspired from GSK,Äôs goal of helping people do more, feel better and live longer. The mission is linked to the need of the country, engaging with key stakeholders and linking our brands with purpose, cause and focus.

Aligned with United Nations, (UN) Sustainable Development Goals (SDG), Government of India, National Health Policy and National Nutrition Mission the aim of Mission Health; GSK CH,Äôs CSR programme is to improve the nutritional status of mother, child and adolescents leading to overall improvement of the national health indicators.

Mission Health is implementing programme in the following thematic areas:

Nutrition ,Äì Improving micro-nutrient status of children and mothers by creating awareness, better access to micronutrients, nutritional assessment and linkages with government nutrition programmes, particularly National Nutrition Mission.

WASH: Create awareness, build skills, improving access to programmes on safe & clean water, sanitation , hygiene (WASH) leading to good health

Food Safety: Surakshit Khadya Abhiyan for capability and capacity building on food safety for high impact sectors (mid-day meal, railways, institutional/places of worship) through fssai,Äôs FOSTAC training, fellowship for school and college students to raise awareness about fssai,Äôs safe and nutritious food project.

Dengue Prevention: Continuous medical education for doctors and pharmacist. Awareness building on prevention, management and early testing of Dengue.

Mission Health has been operational for many years and has made continuous progress over the years. It is planned to be continued for years to come. Mission Health may be understood as our continuous effort towards achievement of SDG 2: Zero Hunger and SDG 3: Good health and wellbeing."



COMPANY BRIEF

COMPANY HEADQUARTER

Gurgaon

GEOGRAPHICAL AREA(S) WHERE THE INITIATIVE IS OPERATIONAL

Andhra Pradesh, Assam, Bihar, Delhi NCR, Haryana, Karnataka, Madhya Pradesh, Punjab, Uttar Pradesh

MENTION THE NAMES OF THE SPECIFIC DISTRICTS/ VILLAGES/ AREAS IN THE CHOSEN STATE

Andhra Pradesh , Rajahmundry, Assam - Barpeta, Bihar - Gaya, Delhi NCR , Gurugram, Haryana , Sonapat, Karnataka , Hubli, Madhya Pradesh , Vidisha, Punjab , Nabha (Patiala) Uttar Pradesh , Gorakhpur, Varanasi, Mirzapur, Allahabad, Faizabad, Bahraich

THE INITIATIVE TAKEN BELONGS TO WHICH OF THE FOLLOWING CATEGORIES?

CSR

SPECIFY THE TARGET GROUP OF THE INITIATIVE.

Pregnant and lactating women, Infants, adolescent boys and girls, school and college students, front-line health workers, food vendors and caterers

WERE THERE ANY PARTNERS IN THE INITIATIVE?

Yes

IF YES, WHO WERE THE IMPLEMENTATION PARTNERS IN THE INITIATIVE?

NGO/Development organisations

SPECIFY THE NAME OF THE PARTNERS INVOLVED IN THE INITIATIVE.

WHO, CII Foundation, The Akshaya Patra Foundation, Jon Snow R&T India Foundation, WISH Foundation, Save the Children India, SHARP, Sakshi

ARE YOU LOOKING FORWARD TO PARTNERSHIPS OR COLLABORATION IN FUTURE?

Yes

IF YES, WHAT TYPES OF COLLABORATIONS ARE BEING THOUGHT OF?

We continuously seek to engage with partners who are doing impactful work and where there is a possibility for GSK CH to be able to contribute its resources & expertise and leverage the competencies of the partner towards ideating and implementing projects which are in alignment with Mission Health. Partners may include, NGOs, trusts, foundations, section 8 companies, Government bodies, social enterprises, private companies etc.

IMPLEMENTATION

Through Mission Health we aim at reaching out to the most vulnerable and marginalized sections of the society. The key intervention pillars (inputs) for our program to be effective are: Outreach and awareness building, Capacity development through trainings and workshops, Systems strengthening

The immediate outputs of these interventions are - trained frontline health workers like ASHA, Anganwadi workers, professionals in the food, health and nutrition industry; improve knowledge, behaviour, aptitude and practices on nutrition and WASH among children, parents and community at large; and improved access to the various Government schemes.

In the longer term, the impact that will be created is sustainable behavior change and a healthier nation.

DO YOU HAVE ANY PLANS TO SCALE UP THE CURRENT INITIATIVE? IF YES, PLEASE MENTION DETAILS OF WHERE, WHEN AND HOW.

Despite the achievements we have made so far, we realise that the challenge in front of us is still enormous. In the coming years, we are aiming at a partnership with NITI Aayog and State Health Missions to provide technical expertise to further the objectives of National Nutrition Mission.

We have also established a strategic partnership with State Health Mission, Uttar Pradesh wherein we have adopted 28 Urban Health Centres. A total of 500 doctors and 500 pharmacists are to be trained in the health centres regarding prevention and treatment of dengue. Further, a total of over 1,10,000 community members will be made aware about dengue prevention and management.

In the domain of food safety, a total of 2490 people in the food industry are planned to be capacitated through food safety trainings and audits. In the safe and nutritious food project, 20 college students and over 2,00,000 school students are planned to be engaged with.

NOTE FROM THE CEO/MD/ PROGRAM IN-CHARGE:

GSK Consumer Healthcare's CSR programme 'Mission Health' is designed to address and complement the priorities of Government's National Health Mission and National Nutrition Mission. One of the key strategies to address malnutrition is to improve knowledge, build skills and drive access to safe & nutritious food. Mission Health, through its various initiative is a holistic attempt towards helping India achieve SDG 2: Zero Hunger and SDG 3: Good health and wellbeing. (Statement by Program-in-charge - Joydeep Sen Designation ,CSR lead, GSK CH India)

CHALLENGES

The magnitude of problem in the health and nutrition domain is significant, with multiple issues which includes problems like underweight children, stunting, anaemia etc. A significant challenge which we have observed is that the root causes for these problems are multi-dimensional in nature. From traditional beliefs and practices to lack of awareness to variations based on different age groups, the context in which we are intervening is extremely dynamic. The solution to such a problem requires the participation of different stakeholders. This at times creates the challenge of bringing all stakeholders on to the same page. At GSK, we approach our interventions with a long-term perspective and work towards facilitating consensus between different stakeholders by using our common objective of a healthy population as a connecting thread.

MENTION ABOUT THE SUCCESSFUL CASE STORIES THAT HAVE EMERGED FROM THE IMPLEMENTATION.

The project GSK-CH supported project PUSHTi in Nabha, Punjab takes the initiative to work towards improving status of nutrition and WASH with the specific goal to improve the health and nutrition status of Nabha residents by addressing undernutrition, micronutrient deficiencies, promoting healthy lifestyles and enhancing quality of health and sanitation services among vulnerable population including mothers and children. PUSHTi, which is an integrated approach towards improving nutritional status in first 1000 days and among adolescent girls, is being implemented by JSI Research & Training Foundation under Mission Health of GSK Consumer Health (GSKCH) in 6 villages of Nabha block situated in district Patiala, Punjab.

The project has facilitated increased access to nutrition services in alignment with Government of India provisions through various nutrition, health, WASH and rural development programs and the recently launched National Nutrition Mission. Community engagement has been central in problem identification and arriving at context specific actions. The project aims to contribute to the goals of the National Nutrition Mission of the GOI through „úright nutrition at right time,“ approach by targeting the most vulnerable age-groups through age appropriate and context specific, evidence-based nutrition interventions.

WAS THERE ANY BASELINE STUDY?

Yes

The project uses local, state, national policies on Health, Nutrition and WASH to plan effective strategies, creating networks, influence quality services, and/or create opportunities. To ensure widespread adoption of these sectoral efforts, the project complements the government programs instead of creating a parallel structure. The project has built linkages with local government leads, organizations/CBOs, field level workers, PRIs and Key Opinion Leaders (KOLs) to improve outreach and influence positive behaviour. Integrated strategies with these multiple sectors are being implemented in the intervention villages to influence individual choices, social norms and values. Information/knowledge is being delivered by a wide variety of activities by project team and village level stakeholders to improve individual choices and behaviours.

At project commencement, a Needs Assessment was conducted to assess the state of current situation such as knowledge, behaviours, practices, outreach of the services, interests, and possible opportunities. Based on the needs assessment, the project designed locally contextual IEC materials, SBCC messages and approaches. Identified stakeholders were trained and sensitized on the SBCC approaches to ensure community,“ participation in awareness generation campaigns and adapting the positive behaviours. The project also promotes convergent action under the leadership of SDM, Nabha and facilitates meetings with various line departments starting with Health, ICDS, Water and Sanitation and Panchayati Raj. The project would establish the pathways of convergent planning and action from sub-divisional level to village level.

WHAT WERE THE FINDINGS OF THE END-LINE STUDY?

Mission Health is an ongoing program; hence no end-line study has been necessary. However, GSK aims at conducting impact assessment studies at regular intervals. Findings of such studies will be shared as and when they are conducted.

IF THERE WAS A BASELINE STUDY, WHAT WERE THE FINDINGS OF THE STUDY?

A baseline study in 4 districts - Sagar (MP), Samastipur (Bihar), Gorakhpur (UP) and Hubli (Karnataka) was conducted to understand the status of primary health. It was found that:

Prevalence of underweight children was highest in Sagar, followed by Samastipur, Hubli and Gorakhpur.

Incidence of severe stunting and wasting was high in Gorakhpur and Sagar. Also, iodine deficiency was visible in only 12.7 percent cases but clinical symptoms from vitamin A and iron deficiency were visible for as high as 34.7 per cent and 38.7 per cent participants

MAJOR FINDINGS/ FINAL ANALYSIS

Some of the major findings that have emerged in the course of implementing the Mission Health program are:

Brining about a change in the knowledge, aptitude, behaviour and practice of communities is important.

The role played by frontline health workers is crucial and they need to be provided with adequate capacity building trainings and aid for them to be able to execute their duties effectively

Strengthening of systems and processes is extremely important to ensure that the program is effective and is implemented with the quality that was envisioned in the beginning.

ACHIEVEMENTS

Mission Health has made significant strides towards its goals.

During 2017-18 (last year) we have been able to

Serve 12 Million nutritious meals to 50,000 children in government schools

Conduct 119 parent teacher meetings, helping increase awareness levels on nutrition

Build knowledge on safe water, sanitation and proper hygiene (WASH) and safe & nutritious food to of over 1,50,000 students in 1500 rural Government schools

Conduct 67 FoSTAC trainings covering 1919 participants across 54 locations on food safety for MSME,Âs and MDM operators