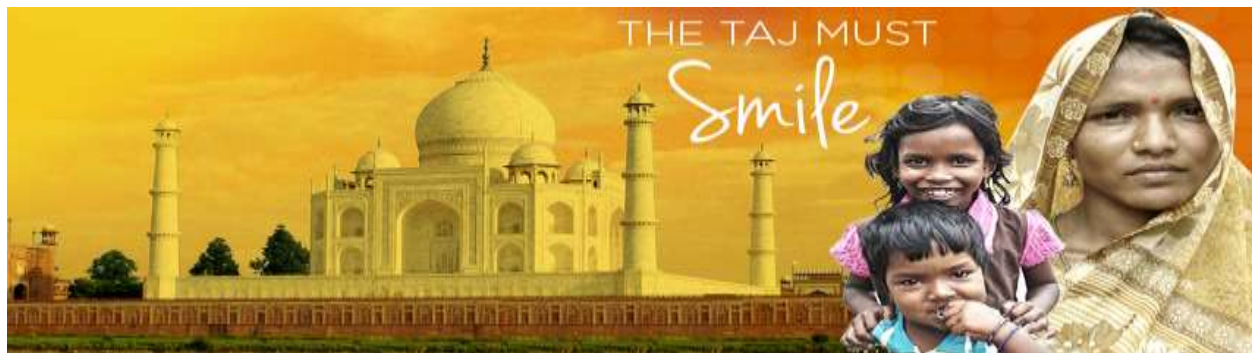
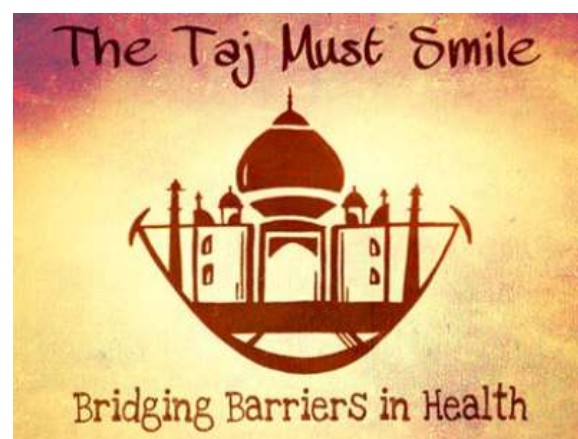


Case Study 22 The TAJ MUST SMILE

Sanjeev Vyas



A Public Private Partnership in health communication outreach with key messages promoting healthy behaviors for reproductive, maternal, and child health in the country. The social and behaviour change communication (SBCC) campaign aimed to be a multistakeholder campaign involving the private sector, civil society, celebrities & key opinion leaders, and media coming together to make every Indian aware of healthy behaviors.



Figures 1 & 2: The campaign logo branding

Introduction

The overall goal and approach of U.S. Agency for International Development (USAID/India)-funded Improving Healthy Behaviors Program (IHBP), managed by FHI 360 from June 2011 to March 2014 was to improve adoption of positive healthy behaviors through institutional and human resource capacity building of national and state institutions and through development of strong, evidence-based SBCC programs for government counterparts. The project focused on four program areas: Family planning (FP)/reproductive health, maternal and child health (MCH), tuberculosis, and HIV/AIDS. Technical Advice from IHBP focused on strengthening institutions and human resource capacity for SBCC in the Ministry of Health and Family Welfare (MOHFW), including the National AIDS Control Organization (NACO), the Central TB Division (CTD), and the National Institute of Health and Family Welfare (NIHFW), a MOHFW-affiliated training institution.

At the request of the National Health Mission, a government-led country-wide program had been initiated to improve health outcomes in India through a continuum of care or lifecycle

approach called RMNCH+A (Reproductive, Maternal, Neonatal, Child, and Adolescent Health). IHBP created a series of 360-degree communication materials, initially on reproductive health and maternal health followed by campaigns on HIV/AIDS, tuberculosis and adolescent health. These campaign materials were developed and produced after extensive testing with target groups with the help of leading research and communications agencies.

As part of its scope of work, IHBP had the mandate to extend the impact and scope of its work through generating interest and leverage in project-supported areas by the Government of India (GOI) and the private sector. The project aimed to achieve a 1:1 leveraging ratio to USAID funds expended.

Problem Definition

As a cornerstone of its leveraging strategy, IHBP decided to take the spread of these government-approved health campaigns and messages to a wider audience, preferably through the private sector organisations by building a public private partnership on health communication.

PPP's were seen to be a viable strategy for health communications as this mechanism generally match financial resources, provide in-kind contributions, and share knowledge. Assets leveraged are deeply linked to harnessing the complementary resources of expertise, networks, and innovation toward a strategic end. Furthermore, partners leverage assets to produce an outcome that is equal to or greater than the sum of its parts.

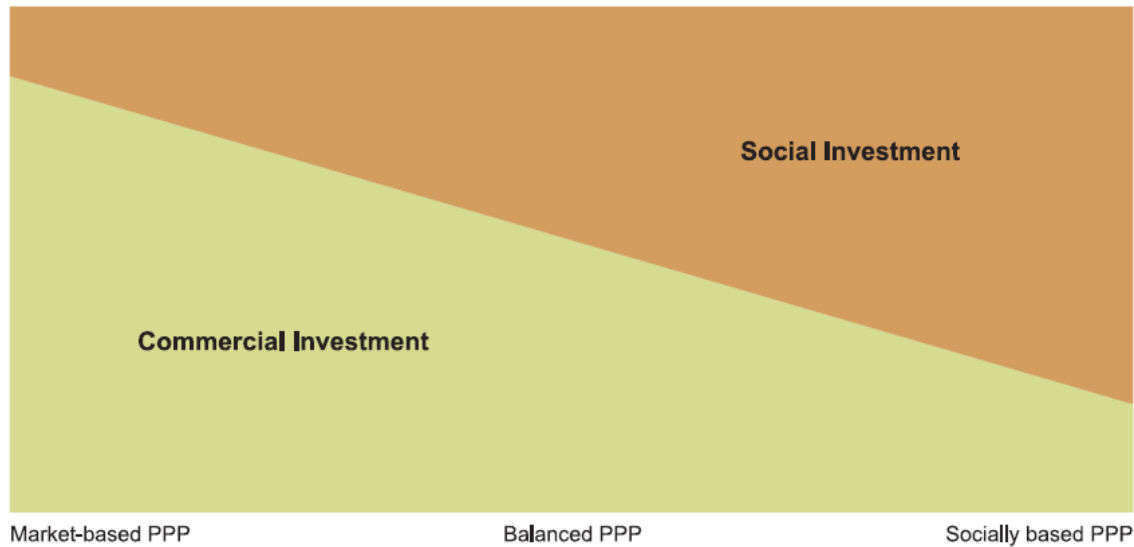
Competitive Analysis

However, given little success of PPP's in health in India and no notable initiative in health communication, it was a challenge to develop a strategy that would bring in private sector organisations to help spread the campaign messages among vulnerable and marginalized communities and groups. The aim was to devise a strategy that could create a movement which the entire nation could rally around. It was important that private-sector partners should participate alongside and thereby complement government efforts in raising awareness for the key campaign messages, thereby saving lives of thousands of women and children.

The three models of PPP shown in the diagram below —market-based, balanced, and socially based—hinge on whether the primary intended outcome of the intervention is commercial (profit-making) or social (improving public health). While every PPP has a double bottom line (in terms of having to produce both a commercial return on investment and a social return on investment), the three models can be differentiated in terms of their varying degrees of commercial and social investment.

Given that the classic example of the socially based PPP model are CSR programs, in which commercial enterprises help to expand social activities that are typically led by governmental or non-profit organizations, there was a case for a Socially based PPP in health communication — where IHBP could contribute a limited seed capital and invite in-kind investments from potential CSR and NGO partners.

Figure 3 Graphic depicting Commercial-Social mix defines the type of PPP



Source: Jeff Barnes; *Designing Public – Private Partnerships in Health*, July 2011

Stakeholder Analysis

In August 2013, the Indian parliament passed the Indian Companies Act, 2013 (the "New Act"), which replaced the Companies Act of 1956 thereby making India the first country to legally enshrine a corporate social responsibility (CSR) law.

The law came into effect from April 1, 2014 and the rules as outlined in Section 135 of the Companies Act made it mandatory for Indian companies and foreign companies operating in India of a minimum turnover and profitability to spend two percent of their average net profit for the past three years on Corporate Social Responsibility (CSR). Annual CSR reports are a requirement of the law and must cover information about the CSR policy, the CSR committee, the amount of CSR expenditures and details of where the money is spent. While companies are not penalized for failing to spend their required amount, they must publicly disclose why they were not able to.

There is a long list of permissible areas for CSR funding. These include such purposes as ending hunger and poverty; promoting public health; supporting education; addressing gender inequality; protecting the environment; and funding cultural initiatives and the arts. The New Act encourages companies to spend their CSR funds in Indian and in areas where they operate, but money cannot be spent on activities undertaken that are part of the normal course of the company's business or on projects for the exclusive benefit of employees or their family members.

With CSR gaining prominence in corporate India, IHBP identified CSR Foundations as its primary potential partners. In order to understand their needs and gaps, an extensive stakeholder mapping exercise was undertaken. A secondary analysis of the top hundreded CSR spenders

from industry data were analysed. Additionally, fifteen CSR Managers were interviewed with the objective of identifying how and why the communication campaign materials offered by IHBP could be of value to them. Some viable paths that emerged were - community health interventions, workplace health, employee volunteering programs, and cause-related marketing.

Clearly, there was an opportunity IHBP and USAID along with the Ministry of Health & Family Welfare to play the role of *aggregators and/or Incubators* – Identify organizations that have a useful mix of corporate members and have these groups co-convene as a strategic group of potential partners to promote the cause of maternal health through communication. This strategy was seen to be in sync with the Mission’s India Partnership Strategy that aims at investing in partnership platforms and alliances that address industry-wide challenges, bringing together resources and expertise from a range of sectors and organizations, linking U.S. expertise with the Indian private sector, and tapping into broad knowledge networks.

As such, a creative ignition platform was required to build a multi-stakeholder movement that could continue to have resonance and could be easily adopted even after the end of the project. The creative ignition platform could be converted into a national movement that would then draw the attention of corporate CSR, NGOs, media and other institutions and be a ready platform that influencers, celebrities and key opinion leaders could easily associate with. An umbrella pitch was required for the multiple stakeholders with whom IHBP wanted to engage that could eventually provide and outreach of important preventive health messages to the public at large.

For IHBP to have the largest possible impact on the target group, enlisting influencer support was crucial to share the message effectively. Celebrities, health influencers, NGOs and corporate organisations who actively engaged their target audience and were also involved in similar social impact activities were identified. However, to ensure the message doesn’t get fragmented given that they were reaching out to people across India on an array of topics, it was decided that an umbrella campaign ‘theme’ should be devised. ‘The Taj Must Smile’ campaign was born of this need.

About The Taj Must Smile – Aims and objectives

In spite of being a booming economy, India has remained woefully behind in terms of medical literacy. Many deaths happen purely because people don't know about simple healthy behaviors which can help prevent disease and subsequent death. Health indices paint a very grim picture of India. Maternal mortality in India in 2012 stood at 178 per 100,000 live births, putting the nation behind 128 countries. Tuberculosis (TB), claimed 500,500 deaths on average per year. Taboos regarding menstruation result in many adolescent girls suffering from infections. Rural and urban base of the pyramid groups were not aware of behaviors which could be adopted to prevent these diseases. While investments in health infrastructure are essential, any additional behavior change communication efforts would supplement the governments’ ongoing efforts.

The Taj Must Smile leverages the fact that India’s monument of pride, the Taj Mahal, was built in circa 1632 by Mughal emperor Shah Jahan as a symbol of eternal love for his wife, Mumtaz Mahal, who died giving birth to their 14th child. Mumtaz Mahal died during childbirth probably because of lack of awareness of health-related issues, poor health-seeking behavior and access to quality healthcare which was not as developed in the seventeenth century India as it is today. However, some 400 years later, although India has made much progress in reducing the number of maternal deaths, the country still has the dubious distinction of having among the world’s highest maternal mortality rate (MMR). The Taj Mahal will “smile” when more Indians embrace measures they can take to have a healthy life for themselves and their children.

The campaign sought to reinforce the national symbolism, while highlighting the underlying problem relating to women’s health awareness by drawing comparisons to the child-birthing tragedy of Mumtaz. Further, The Taj Must Smile ignition platform was a theme wide enough to include closely related issues of family planning and adolescent health along with core of maternal and child health.

Research

A market landscape analysis of PPPs related to healthcare in India was conducted in 2012. This analysis was aimed at gaining market insights related to private sector organizations in partnerships with central or state government and key areas in which these interventions were operating in. This ‘outside-in’ analysis helped in mapping the market and in identifying potential partnership opportunities.

At this point it was important to understand what would be the value proposition for stakeholder groups identified? What would encourage and motivate them to partner USAID, The Health Ministry and IHBP and join The Taj Must Smile campaign? Stakeholder consultancies were organized to understand these important issues and some of the things that resonated positively with potential partners emerged:-

- a. It was prestigious for private sector to be seen partnering with the Government of India and USAID in priority health areas as their efforts received additional credibility
- b. They were keen to get access to evidence-based 360 degree communication campaigns (including TV & Radio Public Service Ads, Posters, Handbills, Banners and Billboards, Wall paintings, Interactive educative games, Street-theatre scripts) developed by IHBP and endorsed by the government
- c. Access to the communication campaigns freed their own resources and saved time developing SBCC materials
- d. Private sector was happy to receive technical assistance from IHBP to build capacity of frontline health workers in conducting IPC and outreach; and help with impact measurement tools

A request to USAID and the government to allow partners adopting the SBCC materials (and using their own resources to print and broadcast these campaigns) to add their corporate branding, received a favourable response. This made the PPP ‘visible’ and was an added

attraction to the private sector.

The value proposition (or the promise of value we can deliver to our stakeholders in terms of relevancy, value and unique differentiation) to go with was defined as: An opportunity to partner with Government of India and USAID with free access to evidence-based, 360 degree health communication campaigns to build a healthy India.

A desk review and information from industry sources was compiled to develop a “hot list” of about 100 potential corporate foundations, businesses, bilateral programs, NGOs, and academic institutions that could be pitched for partnerships. Initial meetings organized to test the value proposition showed that the campaign track of Maternal and Child Health for community health programs found favour with corporate foundations, bilateral programs, and NGO’s. However, there was relatively lesser traction for partnerships in the area of family planning/ reproductive health (given the controversies surrounding previous government efforts in this area) and other health tracks.

Intervention

IHBP partnered with two key organizations to deliver The Taj Must Smile campaign. While Weber Shandwick PR was roped in for leading media advocacy and enlisting celebrities to lend support to the campaign, Idobro - a social enterprise idobro.com that facilitates an active and deeper model of engagement to map and implement market-based solutions - was signed up as the knowledge partner. IHBP collaborated with leading umbrella trade and industry bodies such as ASSOCHAM (Associated Chambers of Commerce of India), PHDCCI (PHD Chambers of Commerce and Industry) , FICCI (Federation of Indian Chambers of Commerce and Industry) and CII (Confederation of Indian Industries) to reach out to their members active in CSR initiatives in health.

The project participated in a variety of private sector events, such as industry conferences, exhibitions, and seminars to showcase its communication campaigns and explore potential partnerships. Some of these events also provided speaker opportunities as panellists or presenters.

Along with the support of Weber Shandwick and Idobro, IHBP organized a series of communication workshops aimed at senior executives from the CSR functions of private businesses and NGOs. The idea here was to showcase the 360 degree communication campaigns while sharing the consumer insights and creative ideas behind these campaigns. INHP invited the private sector representatives to a partnership whereby partners would get free access to all communication templates which they could then print or broadcast after adding their corporate branding.



Figure 4: Participating in industry events to pitch for corporate partnerships

A total of 14 private sector organizations signed MOUs with IHBP and a bilateral program utilized the communication campaign materials in a variety of ways within their program catchment areas.

While some reprinted the leaflets and posters and used these for their community outreach events such as health camps or put them up at schools and community halls, others played the Public Service Ads at TV screens at health facilities.



Figure 5: A community health worker of partner NGO femS3 at Agra in Uttar Pradesh with a women’s group discussing family planning choices using a detailer developed by IHBP



Figure 6: Poster on maternal health adapted by Bafna Pharmaceuticals Limited to promote Raricap - their Iron & Folic Acid tablets

Some partners extended the reach of these messages through their mobile phone or interactive radio services (mHealth programs) and even by buying time on national and local radio and television networks.



Figure 7: A ‘Sakhi’ or Frontline Community Health Worker trained under Ambuja Cement Foundation’s CSR initiative in Darlaghat, Himachal Pradesh interacting with a mother during Post Natal Care (PNC) visit. She is detailing key messages through DIMAGI’s mobile CommCare device which integrated maternal health messages designed by IHBP



Figure 8: DFID’s demand generation strategy for contraceptives under ‘Project Ujjwal’ - Reproductive Health Project for the states of Bihar & Odisha adopted the ‘Mantra for happiness’ theme of the FP campaign developed by IHBP. Above: A banner of the ‘Khusi Ka Manta’ street theatre performance.. Below: A ‘Khusi Ka Mantar’ show underway in a small town of Bihar with the banners strung at the venue

The Taj Must Smile campaign also undertook a massive outreach effort and a Facebook page along with Twitter handle and You Tube were the main social media tools along with conventional media outreach through newspapers, radio, and television channels. Enlisting influencer support to help to share the message effectively was identified as a key media advocacy strategy. The team identified celebrities who actively engaged the majority of our audience and were also involved in similar social impact activities. Additionally, renowned doctors were requested to endorse newspaper articles supporting key campaign messages.



Figure 9: TTMS Campaign made extensive use of social media including a website, twitter, facebook and You Tube to build outreach

Celebrities and influencers played a pivotal role and provided *pro bono* support. Video messages from Olympic Gold Medallist Mary Kom as well as renowned celebrities including Gauhar Khan, Ronit Roy and Mouni Roy and singer Shaan supporting women and child health issues were recorded and uploaded on YouTube and Facebook. Articles from several celebrities were published in national and regional newspapers under The Taj Must Smile umbrella. DD National (government TV channel), NDTV, (leading news channel) and All India Radio, (widest radio network) aired programs and public service announcements disseminating key messages.

Alongside, these news articles and videos as well as IHBP’s communication materials were posted on Facebook and Twitter, reaching many more with messages on positive healthy behaviors.

Outputs

The Taj Must Smile campaign was hugely successful and over 800,000 impressions of the campaign messages were disseminated across Facebook. Over 58 million viewers were reached through programs and *pro-bono* public service announcements on India’s leading news channel, NDTV and government owned DD National television channels. STAR Plus TV channel also weaved the key message around care for a pregnant woman in their popular TV serial ‘Saraswati-Chandra’ where a doting husband explains to his newly-pregnant wife the importance of taking adequate rest, eating nutritious food, including green, leafy vegetables in her diet, as well as iron and calcium supplements, for a safe pregnancy. Some other events hosted by IHBP received coverage in national news on television, thereby reaching to millions of viewers across the country.

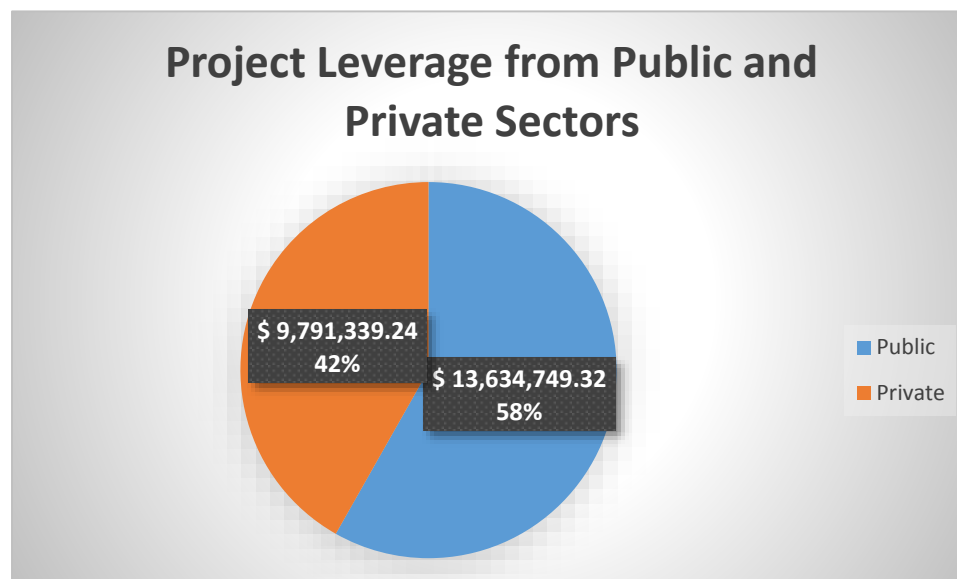
Radio announcements across the country’s largest radio channel, the government-owned All India Radio, expanded the campaign’s reach phenomenally. Multiple stories about the campaign launch, across 41 media titles.



Figure 10: National and local print and electronic media supported The Taj Must Smile campaign and media advocacy resulted in tremendously enhancing the campaign reach.

Discussion

The Taj Must Smile campaign was a unique, highly visible and successful PPP initiative in health communication and helped in increasing the outreach of important maternal and child health, reproductive health, adolescent health, and tuberculosis messages to the poor and vulnerable communities, both directly through government media spends and those of the partner organisations. It also helped IHBP surpass the 1:1 leveraging target. It successfully leveraged USD 23,426,088.56 over its lifetime and the central & state health ministries as well as private sector players continue to use the communication materials even in the year 2016-17 and beyond, thus demonstrating sustainable impact of The Taj Must Smile campaign.



The campaign partnerships helped partners realize the need and scope of SBCC in their community interventions. Furthermore, partners are collaborating among themselves and with other organizations to take some of the learnings forward and thus adding impact to their CSR initiatives.

The Taj Must Smile Campaign has won global recognition for its creativity, innovation, and impact. Some of the global communication awards won in 2015 are:

1. IPRA Golden World Awards in NGO Campaign and Public Sector Campaign categories
2. Stevie Bronze award – Communication Campaign of the Year in Public Service Category at the 12th Annual International Business Award for Corporate Communications, Investor Relations & Public Relations
3. Spikes Asia Award for the best Public Relations Campaign
4. South Asia SABRE Award in Public Affairs/Government Relations category

Private sector partners found great value in associating with The Taj Must Smile campaign which is evident from their contribution of resources in furthering the key messages through their programs or channels.

PARTNER SPEAK

“Since IL&FS is working with various state governments, particularly with Department of Health, we intend to scale up such initiatives and use these materials for any further engagement with them on menstrual hygiene, family planning, and maternal health.” - Dr. Arun Varma, Vice President and Group Head, Health Initiatives, IL&FS ETS, Ltd., National Capital Region, Noida

“We thank IHBP for providing us with material that is very user friendly and relevant for use in our comprehensive health interventions. It has added immense value to our effort in reaching out to communities with health messages in a most effective manner.” – Ms. Anagha Mahajani, General Manager – Program Research and Monitoring, Ambuja Cement Foundation, Mumbai

“With the help of IHBP partnership, we were able to produce a digital toolkit by converting the menstrual hygiene content provided to us as a Java toolkit, which is currently being used in the MIRA channel.” – Mr. Hilmi Quraishi, Director – Social Initiatives, ZMQ Development, Gurgaon

“We are extremely thankful to IHBP for showing such positive intent toward the introduction of the menstrual hygiene program in Satya Bharti Schools. The support provided has been extremely good and has helped us in planning out a smooth implementation strategy. Such partnerships help in channelizing common resources for good of the society.” – Mr. Antony Joseph Nellissery, General Manager – Programs, Bharti Foundation, Gurgaon

“A partnership of this kind with IHBP surely helps Jubilant Bhartia Foundation to extend its capacity as a foundation to collaborate with esteemed international organizations like USAID and the Government of India to bring health care consciousness among the vulnerable population of the country.” – Mr. Vivek Prakash, General Manager CSR, Jubilant Bhartia Foundation, National Capital Region, Noida

“We have invested in the maternal health campaign and are using it in health camps in the interiors of Bihar, Odisha, Jharkhand, and Uttar Pradesh. Doctors are very happy and show appreciations to Bafna and team for the posters and leaflets with very important messages which should be adapted by every women during pregnancy and after.” – Mr. Surendar, Product Manager, Bafna Pharmaceuticals Ltd., Chennai

Resources

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<https://www.unglobalcompact.org/library/2781>
3. Handbook on Corporate Social responsibility in India – Confederation of Indian Industries & PwC India 2013

- <https://www.pwc.in/assets/pdfs/publications/2013/handbook-on-corporate-social-responsibility-in-india.pdf>
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https://www.usaid.gov/sites/default/files/documents/1880/Understanding%20Private%20Sector%20Value_Assessment%20Report_Final.pdf
 6. The Taj Must Smile – Facebook Page <https://www.facebook.com/TheTajMustSmile>
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<https://www.fhi360.org/projects/improving-healthy-behavior-project-ihbp>
 8. Exploring FHI360 – Publication: The Taj Must Smile Nov 2014
<https://www.fhi360.org/resource/taj-must-smile>
 9. The Taj Must Smile Webpage <http://www.empowershe.org/TajHome.html>
 10. Rahul Roy and other celebrities support The Taj Must Smile
<https://www.mp3fordfiesta.com/mp3/rohit-roy-supports-the-taj-must-smile-campaign-part-2.html>
 11. Gauhar Khan supports The Taj Must Smile Campaign
<http://mp3ecoboost.com/mp3/5kKAWld9EvU2/gauhar-khan-supports-the-taj-must-smile-campaign.html>
 12. The Communication Initiative Network – Convening the communication and media development social and behavior change community
<http://www.comminit.com/global/content/taj-must-smile-campaign>
 13. YouTube <https://www.youtube.com/watch?v=drjwnfJoPDo>
 14. International Public Relations Association: IPRA Golden World Awards 2017
<https://www.ipra.org/golden-world-awards/winners/>
 15. IPRA Golden World Awards - Winners 2015
<http://content.presspage.com/uploads/542/ipragoldenworldawards-winners2015.pdf>
 16. The International Business Awards – PR Award Winners Communications or PR Campaign of the Year - Public Service (Bronze Stevie Winner – The Taj Must Smile)
 17. India PR and Corporate Communication Awards 2015
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 18. Spikes Asia 2015 PR Award Winners
<https://www.spikes.asia/winners/2015/pr/entry.cfm?entryid=2454&award=101&order=0&direction=1>
 19. Taboo around menstruation needs to be broken: Mary Kom
<http://www.oneindia.com/sports/taboo-around-menstruation-needs-to-be-broken-mary-kom-1541370.html>
 20. Boxing Champion Mary Kom Supports Menstrual Health for Rural Women in India
<http://www.browngirlmagazine.com/2014/11/world-amateur-boxing-champion-mary-kom-supports-menstrual-health-rural-women-india/>

Appendix 1: IHBP signed MOUs with 14 private sector organizations and one bilateral program

| S.No. | Partner | Geography | Activities/Interventions |
|-------|--|--|---|
| 1. | Ambuja Cement Foundation (Ambuja Cement, Ltd.) | Himachal Pradesh (Darlaghat), Gujarat (Ambujanagar) | mHealth maternal and child health program using FP and MH campaign videos embedded in CommCare for ANC and PNC visits through ‘Sakhis’ |
| 2. | Bafna Pharmaceuticals, Limited | Bihar, Uttar Pradesh, Odisha | Manufacturer of the Raricap range of IFA tablets and syrups. Organizes health camps in small towns and villages to check haemoglobin (Hb) levels and raise awareness about anemia; detailing to doctors through sales force |
| 3. | Bharti Foundation (Bharti Airtel, Limited) | Haryana, Punjab, Rajasthan, West Bengal, Uttar Pradesh, Tamil Nadu | The Foundation runs schools across India; proposes to use menstrual hygiene campaign to increase awareness on menstrual hygiene among school girls and mothers in 254 schools |
| 4. | Centre for Market Research and Social Development | Delhi | Community outreach activities to generate awareness on FP, MH, and AH under its Health and Family Welfare project in the urban slums of Delhi covering 100,000 people in 34 villages with a focus to supplement/strengthen the government health programs |
| 5. | Dimagi Software Innovations Private, Limited | Jharkhand, Himachal Pradesh | Developing a standardized MCH application, CommCare, for Jharkhand government, which will function as a mobile-based job aid support for “Sahiyas” to deliver better; collaborating in a mHealth program with Ambuja Cement Foundation in Himachal Pradesh |
| 6. | Fem Sustainable Social Solutions (femS3) | Cities of Agra, Mumbai | Community outreach on water and sanitation through NGO partners. femS3 used FP and MH campaign in their community outreach program |
| 7. | Gram Vaani Community Media Private Limited | Jharkhand | Community radio services and a mobile-phone-based voice interaction platform (<i>Mobile Vaani</i>) in rural India |
| 8. | IL&FS Education & Technology Services Limited (IETS) | Assam, Uttar Pradesh, Himachal Pradesh, Delhi | ITES is implementing the CSR program for Oil India Ltd. (OIL) in 2 districts of Upper Assam (Dibrugarh & Tinsukia) to reduce infant mortality rate (IMR) and maternal mortality rate (MMR). The FP, MH, and adolescent health (AH) campaigns have been translated and dubbed by ITES into Assamese; IL&FS is using FP and MH campaigns under its community health interventions around its highway project sites in |

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|-----|---|---|--|
| | | | Jharkhand, Delhi, Punjab, and HP. IL&FS adopted the Prevention of Parent to Child Transmission (PPTCT) of HIV/AIDS and Stigma & Discrimination campaigns in partnership with Oil India Limited under a Global Fund grant for Assam, Andhra Pradesh & Rajasthan |
| 9. | Janani (a part of DKT) | Bihar, Uttar Pradesh | Utilizing FP, MH, and AH campaigns as a part of demand creation for services through 150+ Surya and franchise clinics |
| 10. | JSPL Foundation (Jindal Steel & Power, Limited) | Jharkhand, Chattisgarh, Odisha | JSPL is integrating the FP, MH, AH, and HIV/AIDS campaigns for its community healthcare initiatives – “Kishori Express – health of adolescent girls,” “Sshodasi – low-cost sanitary napkin initiative,” and “Vatsalya – community initiative for safe motherhood through strengthening of existing health services” in the intervention areas of Jharkhand, Chattisgarh, Odisha, Haryana and Arunachal Pradesh with a focus to supplement/strengthen the government MCH program in the project areas |
| 11. | Jubilant Foundation (Jubilant Life Sciences, Limited) | Uttar Pradesh (Gajraula district), Haryana (Jhajjar district) | Community interventions in FP, MH, AH across 34 villages around Jubilant Life Sciences plant in Gajraula (Amroha) district of UP; outreach on health issues through doctor posted in medical van in Jhajjar district of Haryana (in partnership with CSR of Panasonic Limited) |
| 12. | RPG Enterprises (RP Goenka Group) | Maharashtra, Madhya Pradesh, Rajasthan, Gujarat | Employee volunteer program in villages surrounding its facilities in Jaipur (Rajasthan), Jabalpur (MP), Halol and Baroda (Gujarat), Vasai, Mumbai, and Nagpur (Maharashtra), and Mysore (Karnataka) |
| 13. | World CSR Alliance (a division of Grow Brands Worldwide Private, Limited) | Web presence | Existing online platforms like social media assets, website, and syndications to create a multiplier effect for the campaign. It will also sponsor a TV series (infomercials/ documentary/ talk show) to promote The Taj Must Smile campaign |
| 14. | ZMQ Development | Haryana, Uttar Pradesh | Digitization of IHBP campaigns for mobile delivery; integration of FP/MH content in their mobile application “MIRA Channel – Mobile Lifeline Channel for Women,” which targets GOI’s RMNCH+A strategy. ZMQ is also using the materials to disseminate health messages and reach base of the pyramid communities through |

| | | | |
|-----|------------------------------------|---------------|---|
| | | | organized human networks such as SHGs (self-help groups), micro-finance institutions (MFIs), health workers such as Mahua Mahila Vikas Sanasthan (MMVS), Mewat Development Agency (MDA), SHG federations, polio program partners |
| 15. | JHUCCP and DFID for Project Ujjwal | Bihar, Odisha | JHUCCP repurposed the FP campaign developed by IHBP and is making extensive use of the same as part of Demand Generation Strategy under Project Ujjwal – Reproductive Health and Family Planning Project for Bihar and Odisha funded by DFID. The Enter-Educate shows use the branding line “ <i>Khushi Ka Manatar Show</i> ” to pull crowds and inform them about modern contraceptive methods |