



do more
feel better
live longer

Annual CSR Report

2020-21



Healthy communities form the foundation of strong, sustainable societies. As a responsible corporate citizen, GSK continues to work tirelessly with its partners and stakeholders to address the needs of millions of people without access to basic healthcare in India.

Our CSR approach supports our purpose to help people
do more, feel better, live longer. Through
our CSR programmes, we strive to address identified national priorities,
improve access and support people in vulnerable communities.

Our Impact

25 million tablets

contributed to World Health Organization (WHO) to support mass drug administration across the country



Over 3,660 ASHA workers trained in 5,080 villages

across two districts in Uttar Pradesh for Morbidity Management and Disability Prevention (MMDP) for lymphatic filariasis (LF)

Integrated approach to child nutrition

deployed across **5,000** households, spanning adolescent health, pre- and post-natal care, nutritional status checks and addressing violence among women and children in Mumbai, Maharashtra

- 73% of total deliveries were institutional deliveries
- 48% eligible married women in the reproductive age cohort are using family planning techniques
- 74% of the cases registered against violence were investigated and were found to be genuine, 18% of total cases reported were resolved
- 200 new Community Action Group (CAG) members enrolled, taking the tally to 741 active members



Reducing the prevalence of malnutrition by providing maternal and child care to over **600** households in Naya Basti district of West Bengal

Our Impact

Providing access to clean sanitation facilities and child cabinets established in 20 schools for over **10,000 beneficiaries** in Nashik, Maharashtra

- Members of this cabinet are delegated responsibilities pertaining to maintaining personal and community hygiene
- Mobile bus sessions, webinars, phone calls leveraged for engaging students on water, sanitation and hygiene (WASH)



Remedial education for school dropouts thereby encouraging the integration of more than **70 children** into formal schooling in Gurugram, Haryana by providing a parallel **education support system** through learning centres

Upliftment of **120** unprivileged and deprived girls through free residential formal school education, co-curricular activities, and vocational training in Patna, Bihar



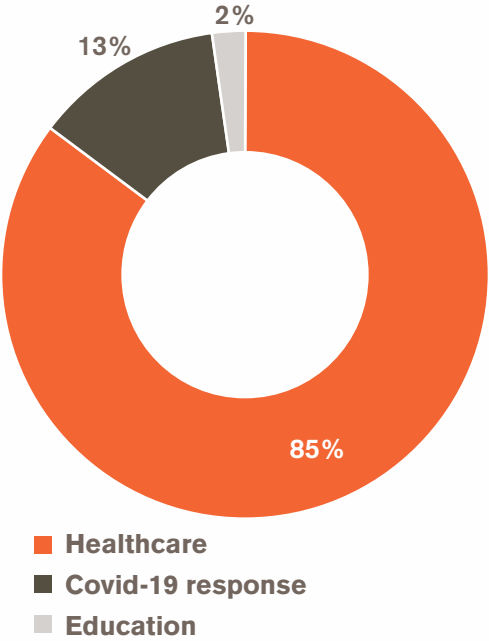
Contributed to the Prime Minister's Citizen Assistance and Relief in Emergency Situations (PM CARES) Fund, **provided medical supplies and protective gear to support the government** in its relief and rehabilitation measures to address the adverse impact of the COVID-19 pandemic in India

Financial summary

Total CSR obligation
INR 1086.04 lakh

Total amount spent
INR 1087.29 lakh

Framework-wise spends



A photograph of a middle-aged woman with a warm smile, sitting on the ground in a rural setting. She is wearing a white sari with a vibrant green and yellow leaf pattern and a blue border. A red bindi is visible on her forehead. Her hands are clasped in her lap. In the background, there are colorful tarps (red and yellow) and the head of a dark-colored animal, possibly a goat, on the left. The ground is dry and dusty.

Partnering India
to eliminate
lymphatic filariasis

Lymphatic filariasis (LF), also known as elephantiasis, is a disfiguring and debilitating vector-borne disease spread by Culex mosquitoes and the second leading cause of disability globally.

The LF elimination strategy has two components: (1) to stop the spread of infection (interrupting transmission); and (2) to alleviate the suffering of affected populations (controlling morbidity).



In order to interrupt transmission, districts in which LF is endemic must be mapped and a strategy of preventive treatment called mass drug administration (MDA) needs to be implemented to treat the entire at-risk population. We have been donating Albendazole tablets, used during MDA to World Health Organization (WHO), since the inception of the programme in 2000.

A core strategy of morbidity management and disability prevention (MMDP) is also needed in addition to MDA. Suffering caused by the disease can be alleviated through a minimum recommended package of care to manage lymphedema and hydrocele. We have partnered with Project Concern International (PCI) and have been working to mobilise lymphedema and hydrocele patients and link them with the services in endemic districts in Uttar Pradesh.

The goal of this project is to reduce patient vulnerability while increasing demand for MMDP services. The solution or means to achieve this goal is a cost-effective, sustainable and scalable model that will complement the efforts of and build the capacity of the Uttar Pradesh (UP) state government by:

1. development of critical systems, protocols, and tools;
2. outreach activities; and
3. partnerships and linkages; PCI generates a low-cost, sustainable, and scalable model in partnership with the state government to increase demand for and improve access to hydrocele services at facility-level. The focus is on home-based care for the lymphedema patients.

The project assists the state government in updating the line listing of patients - both hydrocele and lymphedema (based on the symptoms) through the ASHAs. It also supports in creating awareness about LF and mass drug administration in the communities.

Hotspots

650 million

Indians at risk of contracting LF

It is reported in 256 districts across 21 states/UTs in India

Our commitment

3.86 billion

Albendazole tablets donated in India till date

In FY 20-21, GSK donated 25 million Albendazole tablets to the World Health Organization (WHO) to support MDA efforts across the country.

Yearly performance highlights

Area covered

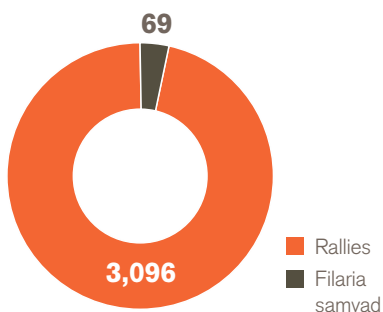
5,080 villages in **35** blocks

ASHA training

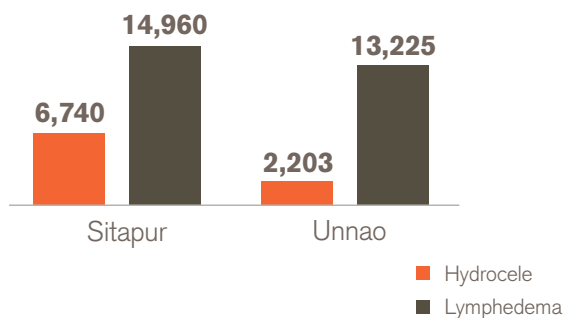
3,660 trained sessions

Project performance trends and metrics

Awareness sessions



New cases enrolled with ASHAs



Stories of change

Empowering communities to access morbidity management services

Sarojini Devi is a resident of Padri Kalan Gram Panchayat, Bichhiya Block, Unnao district, Uttar Pradesh. She has been suffering from Lymphatic Filariasis (LF) for 30 years. She has a severely swollen, painful leg and reduced mobility. She experiences acute attacks with high fever and severe body pain from time to time. Her natural defences have been severely weakened by the disease. Looking for an end to her suffering, Sarojini Devi approached the government, private and even ayurvedic doctor but couldn't get any relief.

Sarojini Devi recalls consuming anti filarial drugs which were administered by the ASHA during the last Mass Drug Administration round for elimination of lymphatic filariasis in her village. Due to lack of awareness, other family members including her husband Om Prakash and four sons did not take the LF preventive drugs. The PCI team informed the family about the importance of LF preventive drugs which will help them to prevent other family members from being infected with the debilitating disease. With the understanding that their entire family needs to consume drugs to prevent the disease, Sarojini Devi and Om Prakash decided that their entire family will consume LF preventive drugs in the next round of MDA. Along with this, Sarojini Devi was provided support in understanding home-based care of lymphedema and she is practicing the same.



Medical officers undergo training in Unnao



Cluster meeting undertaken by ASHAs

Feedback from the field

To assess the stakeholder participation in the project, a brief discussion was held with eight ASHA workers and eight block coordinators of the two districts (Sitapur and Unnao).

Project discussion summary FY 2020-21

- 100% of the ASHA workers (four in total) said that lack of cleanliness and non-consumption of medicines was the reason behind lymphedema being a major concern in the district/village.



- 75% of the ASHAs (six in total) said that mosquito control, timely administration of medicines and proper maintenance of hygiene can help to eradicate the disease.



- 100% of the block coordinators surveyed said that there has been significant improvement in the participation of ASHA workers in the awareness activities.



- Patients are aware of the symptoms and cause of lymphedema and hydrocele. All of them cited the correct symptoms: pain, swelling in leg, fever and causes such as unhygienic and lack of clean areas and mosquito bites.



Supporting the healthcare needs of mothers and children



There is a global momentum for improving nutrition and countries have made strides in scaling up nutrition programmes in pursuit of the Sustainable Development Goals (SDGs), particularly Goal 2 which aims to end hunger and all forms of malnutrition by 2030.

Society for Nutrition, Education & Health Action (SNEHA)

We have partnered SNEHA to implement an integrated approach to tackle child nutrition in Mumbai, Maharashtra. The main objective of the SNEHA Centre, supported by GSK, is to improve the nutritional status of adolescents, married women at pre- and post- conception and after delivery, and of children aged 0-2 years in the vulnerable communities of Mankhurd area of M/E ward within Mumbai. The project focusses on the first 1,000 days of motherhood and childcare. This project addresses healthcare from two sides - on the demand side by attempting to create awareness and promote better quality of health services; and on the supply side, by working with public sector health providers, Municipal Corporation of Greater Mumbai (MCGM) and Integrated Child Development Services (ICDS) to improve the quality of healthcare services.

Yearly performance highlights

Newly married women of reproductive age (MWRA) using family planning
303
48.33%
of the target achieved

Number of institutional deliveries
160
75.47%
of total deliveries

Violence cases registered
192
73.56%
of identified cases

Children covered under periodic anthropometry
1,196
22.17%
of total children visited



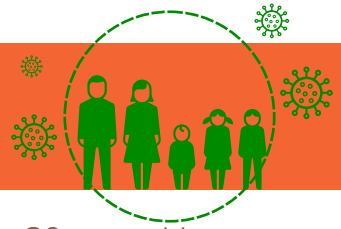
Anthropometry for nutrition assessment



Feeding nutritious food to a child during Ushnavan event

Stories of change

Saving lives amid the COVID-19 pandemic



Family background: Anam is a 20-year-old woman living in Janta Nagar, Mumbai, in a joint family. Her husband works in Saudi Arabia and provides for the family.

Core issue: Registration of ante-natal care (ANC) and delivery in hospital during the COVID-19 outbreak.

Intervention: Community organiser Subiya came across Anam during her daily home visits. Subiya spoke to her and found that she was five months pregnant and her pregnancy had still not been registered in any medical facility. Subiya spoke to her mother-in-law and told her about the importance of ANC registration for a healthy and safe pregnancy. After several visits, the mother-in-law was convinced and accompanied Anam for pregnancy registration.

A few days before her delivery date, Anam suffered a high fever and visited Sathe Nagar Health Post for a check-up where she was administered medication to manage her fever. One week later, she felt severe labour pain and was taken to Shatabdi Hospital by her mother-in-law. On reaching the hospital, the doctor checked her case paper and related documents and said that she might have contracted COVID-19 and hence cannot be admitted to the hospital. Later that night, Subiya received a call from her community action group (CAG) and heard the case. She then consulted her supervisors at SNEHA and discussed as to what could be done to support Anam.

Personnel from the SNEHA programme contacted hospital staff and requested them to take up the case as Anam's husband lives abroad and there was no one other than her mother-in-law to support her. After a few

rounds of discussion, the doctors at Shatabdi Hospital of MCGM admitted Anam and she delivered a baby boy that same night. Anam was kept in hospital for the next three days. When asked to be discharged, doctors said that she had to get tested for COVID-19. On testing, her reports came positive for COVID-19. The doctors closely observed her baby who was found to be normal and healthy.

After two days of continued treatment, Anam and her baby were shifted to Nair Hospital (which specialises in facilitating the delivery of pregnant women who have tested positive for COVID-19) along with her baby. Her child was kept in a different room and she was allowed to come in contact with her child only for breastfeeding. She fed expressed breast milk to her baby. Meanwhile, the other family members were also tested for COVID-19 and were put in home quarantine. The BMC staff was also contacted by our CAG members for disinfecting the area surrounding their house.

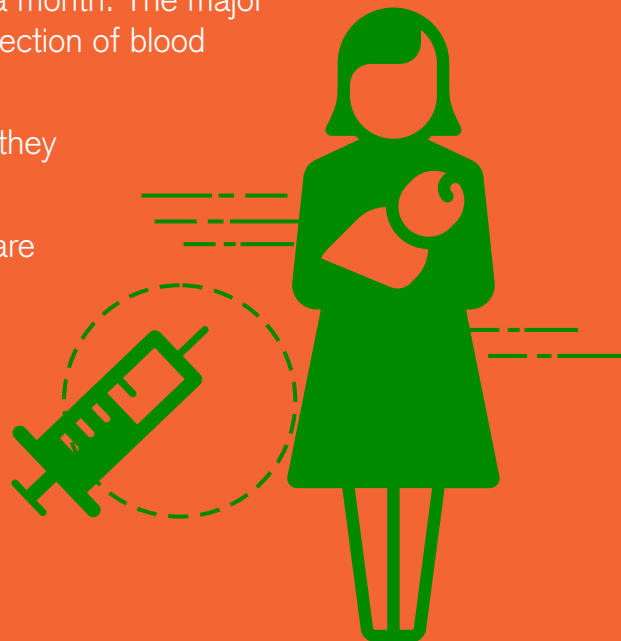
Result: After being under observation for 14 days, Anam returned home with her baby. She is healthy and fit to take care of her newborn now. SNEHA's close collaboration with the healthcare system and rapid response from the staff helped Anam deliver her child in a safe environment.

Feedback from the field

The interviews were conducted with four adolescent girls, four community action group members, four ante-natal care women and three lactating mothers.

Project discussion summary for FY 2020-21

- 100% of the respondents have attended three meetings each. The sessions were on the topics of food, health, emotional state and mental resilience.
- 100% of the respondents said that they have received health check-ups from the SNEHA team. Two out of four respondents were diagnosed with anaemia.
- The activities undertaken by community action group (CAG) are immunisation programmes, distribution of condoms, support on delivery of babies and sonography. The team has conducted around five meetings with the community on these topics.
- The CAGs conducted a cleanliness drive in the last quarter, although they have engaged an average of 25-30 beneficiaries each on these topics individually on a monthly basis.
- 100% of the respondents indicated that they go for health check-ups every fortnight or once in a month. The major check-ups conducted comprised inspection of blood pressure, height, etc.
- All of the respondents have said that they are attending post-natal check-ups.
- All of the respondents said that they are breastfeeding their child.



BITAN

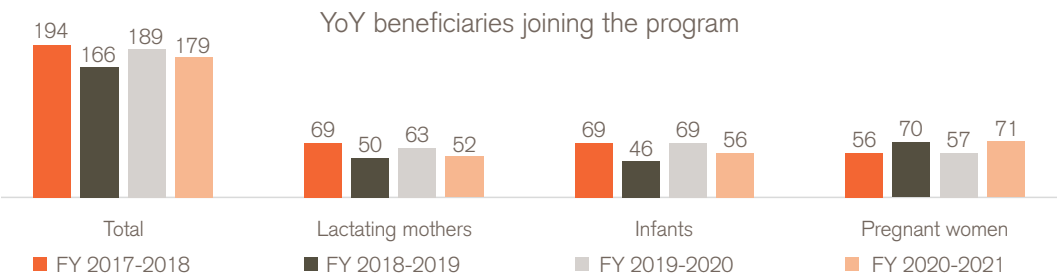


Since 2015, the project at BITAN aims at providing holistic care for vulnerable pregnant women, lactating mothers and newborns residing in the Naya Basti slum in Maheshtala Municipality (South 24 Parganas district). It is a community mobilisation project to improve maternal and newborn healthcare. Based out of this area, the project caters to nearly 600 households. Activities include awareness and sensitisation programmes, nutrition and health camps, health check-ups at government facilities, mobilising institutional deliveries, timely scheduled immunisation, etc.

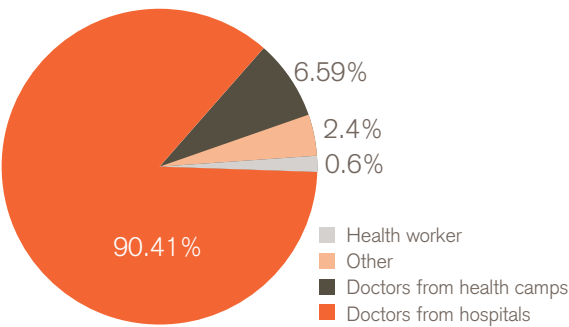
Yearly performance highlights



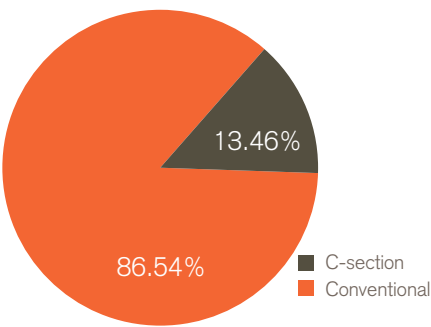
Project performance trends and metrics



Medical attendants in charge of deliveries

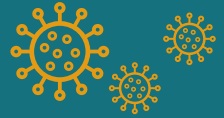


Type of deliveries



Stories of change

Bringing about a meaningful difference in the lives of those impacted by the pandemic



Manowara Khatun is an intellectually and verbally disabled pregnant woman from Naya Basti. Her husband is a van puller. When she was identified by BITAN as a pregnant woman, she was already six months pregnant according to her last menstrual period (LMP). She was unwilling to undergo institutional delivery or institutional check-up. BITAN provided counselling services to her and her family, to promote awareness about the benefits of institutional delivery. After several counselling sessions, she was inclined to go for check-ups in a hospital. When

Manowara started to go through labour pains, BITAN arranged for a car to take her to the hospital. During the lockdown, she went to the state general hospital and gave birth to a baby boy. Both mother and child were safe and well.

Manisha Kumari is a pregnant woman from the number 19 Brick Field area, her husband is a daily wage labourer. Manisha was in her father's place when she was identified by BITAN and she was six months pregnant. Manisha would have all her check-ups done at her native place. After returning to her husband's home, her in-laws did not allow her to go for check-ups. BITAN intervened and counselled the beneficiary as well as her in-laws about the importance of institutional check-ups and institutional delivery.

After several counselling sessions, her in-laws did not stop her from undergoing institutional check-ups. During lockdown, she was admitted to the nearest state general hospital and delivered a baby girl. Both Manisha and her daughter are keeping safe and well.

In both cases, successful institutional deliveries were made possible due to BITAN's cooperation and intervention.



Feedback from the field

The interviews were conducted with two self-help group (SHG) members, four eligible couples and one pregnant woman.

Project discussion summary for FY 2020-21

- All four eligible couples responded that they have attended sensitisation programs conducted by BITAN
- All the respondents mentioned that they received contraceptives from the Mahila Arogya Samiti (MAS) members
- As per the responses received from the SHG/MAS members, an average of four to five health check-ups are facilitated for pregnant women, lactating women and eligible couples.
- The members have started the SHG activities. The members were benefitted by the income gained from the business activities (saw-making) and were able to save and spend on treating cough and the common cold.
- As part of this programme, pregnant women receive timely counselling by the MAS members. They facilitate periodic check-ups in hospitals or municipal health centres.



School sanitation



School is important for the cognitive, creative and social development of children. Swachh Bharat: Swachh Vidyalaya is the national campaign driving 'Clean India: Clean Schools'. A key feature of the campaign is to ensure that every school in India has access to functioning and well-maintained water, sanitation, and hygiene (WASH) facilities. WASH in schools refers to a combination of technical and human development components that are necessary to produce a healthy school environment and to develop or support appropriate health and hygiene behaviours. Studies have noted that handwashing can reduce diarrhoea by more than 30% and respiratory infections by 16%.



GSK has partnered with Save the Children (STC) to provide WASH facilities in municipal schools in Nashik, Maharashtra. Under this project, we address a combination of technical and human development components that are necessary to produce a healthy school environment and to develop or support appropriate health and hygiene behaviours.

Yearly performance highlights

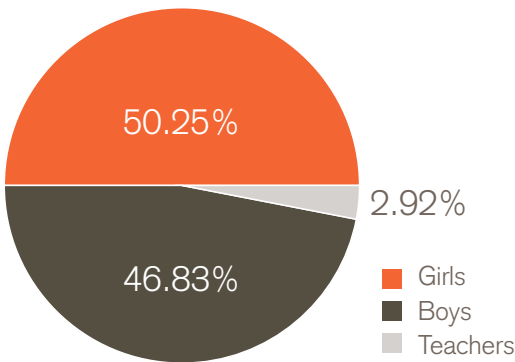
Number of
schools covered
20

Number of awareness
/training sessions
175 school sessions
25 community sessions

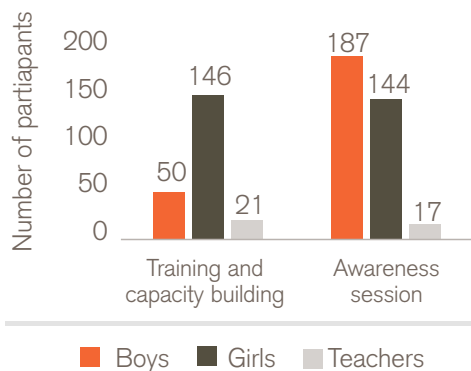
Number of
lives impacted
10,600

Project performance trends and metrics

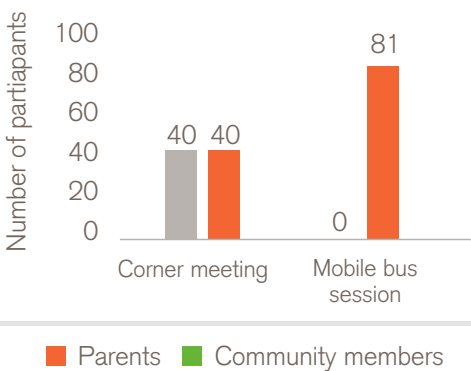
Number of beneficiaries



Sessions in school



Sessions in community



Child cabinet summit



Community awareness on WASH

Stories of change

The Changemaker: Poonam Nikam nominated for International Children's Peace Prize 2020



Poonam Gautam Nikam, 14, is an emerging child champion who is becoming an inspiration for many in creating a healthy environment. She has emerged as a Changemaker in her school and community at Pathardi gaon, Nashik. Children's groups are formed through a democratic process by Save the Children. The champions for WASH awareness are called "Swachhta Parivartak (WASH Changemaker)". Poonam is currently the Swachhta Mantri (Sanitation Minister) of the Child Cabinet Group (CCG) in her school. Poonam and her fellow CCG members came out as whistleblowers and complained to the school principal on issues of unclean toilets at the school. As a result, the School Management Committee (SMC) took serious actions to keep it clean and operational. "I wish to make my parents proud by educating myself and excel in life not just for the upliftment of my family but to make some contribution to mankind", said Poonam. In 2020, she was nominated for the International Children's Peace Prize. She gave a powerful speech on the importance of washing hands and hygiene practices.

Feedback from the field

Four schools were selected for interviews from which all the four principals and seven teachers were interviewed to understand the status of the projects and its outcomes. Discussions were also held with the students.

Project discussion summary for FY 2020-21

- All the four schools in a survey said that they have access to piped water facilities from the Nashik Municipal Corporation (NMC) in their buildings while one school has access to rainwater harvesting facilities as well.
- All the four schools have toilets, all of which are segregated between girls and boys.
- Solid waste is disposed through NMC vehicles by all schools. All the respondents from the schools said that the waste collection vehicles would come once in two days or twice in a week.
- All the schools have conducted sessions/activities such as competitions for drawing and slogan making, a video session pertaining to WASH and liquid soap making activities. Each of these activities were conducted once.
- Every school has conducted one SMC meeting in the last quarter and five to six meetings in FY 2020-21.
- Four child champions also participated in the SMC meeting, who explained the hygiene practices, handwashing steps, community activities undertaken with the help of WASH volunteers, etc. Those participating were seen to be highly engaged in the activity.

Education



Education provides the means to the skills and wherewithal to participate in the economy and support people in finding gainful employment. Our aim is to promote better quality of education and drive holistic development, thereby bridging educational inequities.

Sakshi - TAP

Sakshi, with the support of TAP India, currently operates learning centres for out of school children (OoSC) throughout the National Capital Region (NCR). The aim is to upgrade the targeted beneficiaries to grade-level competencies by providing access to quality education, nutrition and healthcare. At the end of the annual intervention period, the targeted beneficiaries are mainstreamed into conventional educational channels, in this case, government schools for continuing their education.



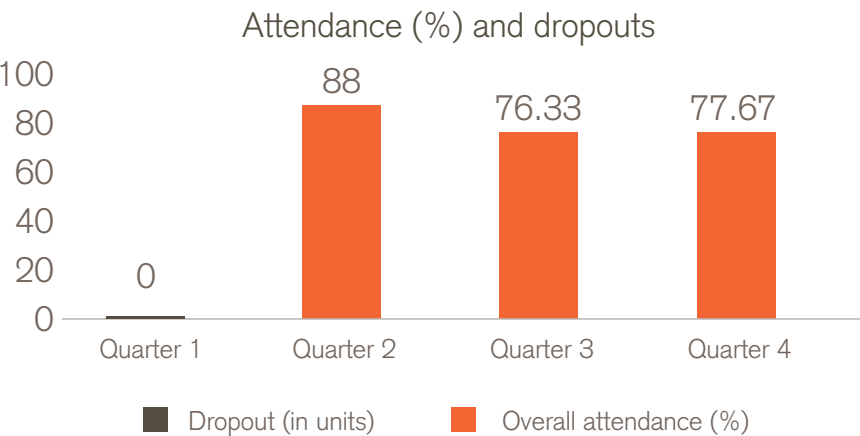
Yearly performance highlights

Number of
beneficiaries registered
70

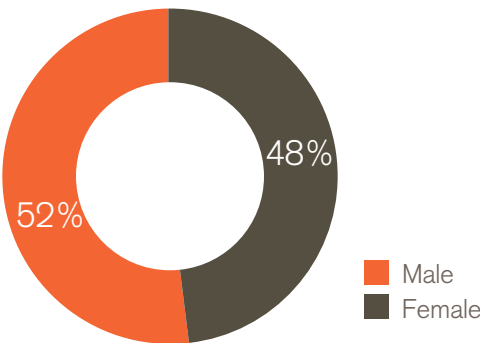
Number of
dropouts
0

Average
attendance (%)
74.76

Project performance trends and metrics



Gender ratio of students



Sessions on Mathematics



Sessions via home-based learning

Stories of change

Anshika, empowered by education

Anshika, a 10 year old girl hailing from a small town in Uttar Pradesh is currently residing in Gurugram, Haryana for the past four years. Her family moved to Gurugram in search of better livelihood opportunities. Her father got a clerical job at a company, but the money was not enough to support a family of six, the consequence of which was her not going to school and not getting any kind of formal education.



Sakshi had undertaken a survey to identify out of school students from Gurugram. She was shy when the teacher associated with Sakshi visited her home, but she did express her willingness to study. Because she was never a part of any classroom, she found it difficult to adjust. But, as time passed, she started paying attention in the classroom and further went on to perform well. She showed great interest in learning and was one of the finest students of the batch.

It was during the second lockdown, which also coincided with the time where children were to be mainstreamed that her father lost his job and her family was planning to move back because they had no financial security. Adding to these financial woes, she also did not have an Aadhaar card which further led to difficulty in Sakshi's mainstreaming. The teacher, Shama, spoke to her family in person and assured them that Sakshi will support them in whatever capacity possible and immediately supported them with dry rations for a month. She also got her Aadhaar card made to ensure no hindrance in her admission process.

The admission process is still underway and her name has been included in the list of students who will join school from the next session. Once the lockdown is over, she will be looking forward to going to school.

Feedback from the field

The points mentioned in this section are based on the interaction with five students from Gadouli and Bajghera.

Project discussion summary for FY 2020-21

- Students got the awareness of the remedial classes from the Sakshi team once the teachers visited their homes.
- Of the five students surveyed, six students said that Hindi is their preferred subject, two said they preferred English and others said they prefer all their subjects for study.
- Most of the students are satisfied with the programme and engage with the teachers for the learning process while a few of them were not aware of the day plan and class activities.
- To gauge learning outcomes, few of the students could respond properly on subject-specific questions: English (reciting a poem or reading a story), Hindi (students answered promptly) and Maths (few answered correctly on problems of addition and subtraction)



Nai Dharti





This project is dedicated towards the upliftment of unprivileged and deprived girls through free residential formal school education, co-curricular activities and vocational training. The programme aims to provide equal opportunities to enable the girls to excel, irrespective of their family background. The programme has supported a residential school in which 100 girls were enrolled in a school in Patna. 30% of these students are homeless while others hail from rag-picking and slum-dwelling families.

Yearly performance highlights

Number of
beneficiaries supported

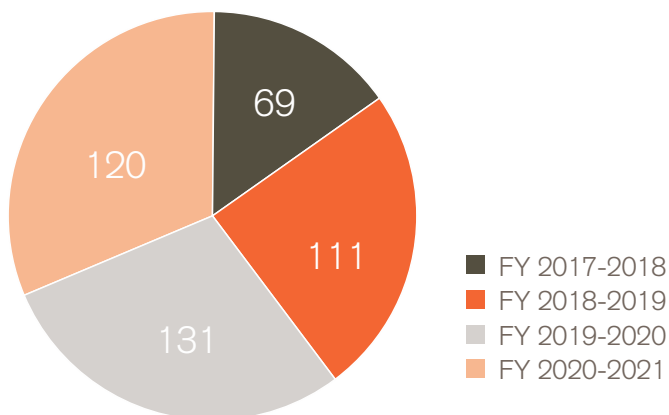
120

Average marks
obtained (%)

61

Project performance trends and metrics

YoY number of beneficiaries supported



Beneficiaries of Nai Dharti



Inter-school painting competition



do more
feel better
live longer

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