



**PROJECT
HOPE**



Editor's Note

Dettol Bangea Swachh India, since its inception as a complimentary "force for good" for the national Swachh Bharat Mission, has touched & improved the lives of millions of Indians by enhancing their hygiene and sanitation practices & therefore public health, alongside contributing significantly to the local and national economy.

Originally, DBSI initiatives have been delivered through individual silos; however, since 2016, we have brought in a few variations for example in Maharashtra where all the strands were brought together in partnership with infrastructure & government stakeholders to deliver holistic improvement. That President of India's award winning initiative is not the only innovation from the DBSI stables – Project Hope is the latest but definitely not the last.

Project Hope (Asha in Hindi) reflects not only RB's core ethos of "business with a purpose" but also the integrated approach of the Prime Minister led national Swachh Bharat Mission, where hygiene, sanitation are identified as, aside from drivers of cleanliness & healthier lives, being key parts of a rural vibrant economy that includes the talents of women in rural India.

Far too many children still today die from water borne diseases such as diarrhea; and the burden of loss is more often than not borne by rural poorer mothers who lack both knowledge and resources to prevent those diseases. Project Hope targets diarrhea by empowering mothers and care givers in association with the international Save The Children's diarrhea initiative, and reduce/eradicate the devastating effects of the disease on children.

The initiative empowers women both as change leaders and entrepreneurs/wage earners to transform their local communities by improving health & hygiene standards through knowledge & adoption of best practices while also having significant impact to the local economy. The focus was on creating awareness and knowledge about hand-washing – thus creating demand for low cost but effective health & hygiene products supported by an efficient supply chain (made up of the local population).

In the pilot, the project created a market for low cost product (Asha soap) with a sustainable & effective supply chain with a substantial share (within a very limited time) with considerable rise in awareness and best practices of hand washing with soap. This report articulates that journey.

Like all our initiatives, none of this would have been possible without the proactive support of the state governments and local administrations and the support & hard work of our partners, Peהל (Jagran), Home Remedies and Intellectap. Our grateful thanks to all of them & the exemplary RB team that once again rose to the occasion.

Sincerely

Nitish Kapoor
SVP
RB – South Asia

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Executive Summary

RB, along with its partners, Pehel – the CSR arm of Jagran, Home Remedies and Intellectap have launched the Project Hope – a project that encompasses improving public health through better hygiene and sanitation; empower women as Change Leaders as well as economically and drive holistic transformation in communities.

That is the "purpose" which is fulfilled through a core basic product – the asha soap for hand-washing; which is marketed in the rural hinterlands through women entrepreneurs and change leaders as part of a Behaviour Change Campaign (BCC) to tackle the scourge of diarrhea in rural Indian communities especially children, in partnership with Save the Children (STC).

The project, in its pilot phase has met and exceeded outreach targets, facilitated better behaviour & practices when it comes to hygiene and sanitation especially hand-washing, created a sustainable market for asha soap, all the while empowering women and transforming communities.

This report provides a snapshot of the activities undertaken by the project and their respective outcomes and impact.

The context

Waterborne diseases, such as diarrhea, often easily preventable have long been symptoms of the lack of adequate sanitation and hygiene standards and practices in India. The diseases, especially diarrhea, manifest as a scourge both at the human level as well as the wider socio-economic level. Be it more than a million children losing their lives annually or stunting among almost 50% of children across all strata of society to the annual economic loss of \$120 billion to the national GDP – the malignant impact of these easily preventable diseases is felt across society.

However, the diseases are symptoms of the inadequate public health standards which arise from poor hygiene and sanitation standards and practices. While some of the poor practices can be attributed to the lack of adequate sanitation and waste management infrastructure; much of it is due to the mindsets and flawed notions of cleanliness and good sanitation practices that have been passed down through generations exacerbated with lack of education and exposure to best practices. RB's flagship "Dettol Banega Swachh India" (DBSI) has taken up the challenge of changing behavior as part of its mission to reach out and improve hygiene & sanitation standards of 100 million Indians by 2020.

Thus proactively complimenting Prime Minister Narendra Modi led India's national Swachh Bharat Mission. The various strands of DBSI as well as bespoke integrated projects have already touched millions of lives and communities, rural and urban alike, and have improved quality of life of Indians by significantly enhancing the hygiene and sanitation standards and practices across the country.

RB and its partner network have introduced a new innovation to the DBSI suite of offerings - Project Hope.

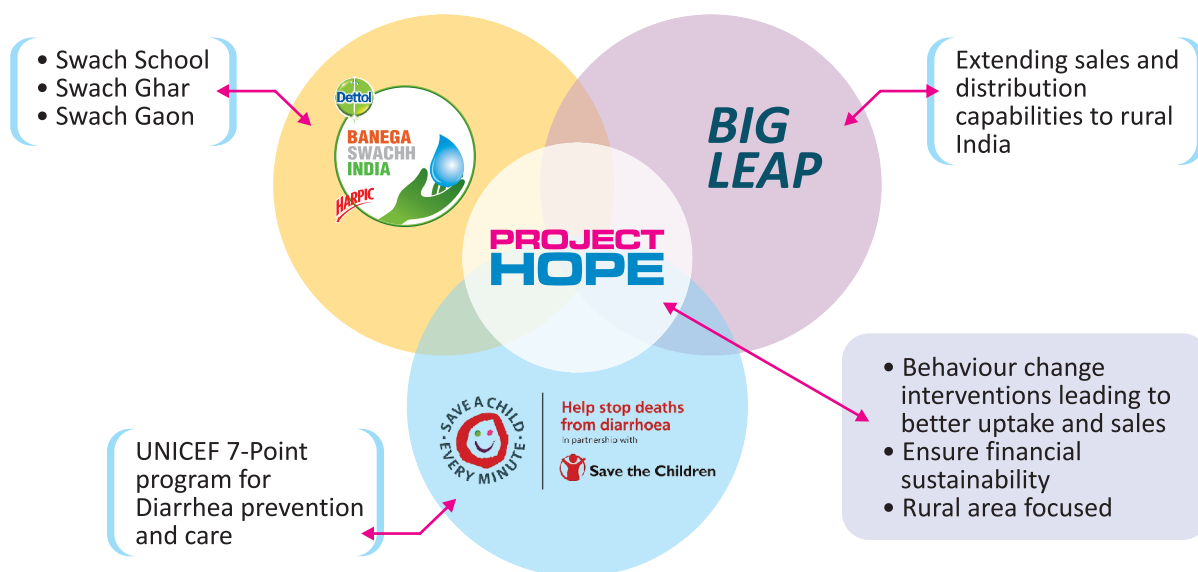
About the Project

It is RB's pioneering model for market-based, sustainable and scalable prevention and care of diarrhoea which is at the intersection of the DBSI aims to transform behavior & tackle public health challenges; and RB's corporate goals of penetrating rural markets with its health and hygiene products especially those related to hand washing and cleaning of toilets.

The aim is to empower communities especially women with the knowledge of best practices of hygiene and sanitation along with economic opportunities be it entrepreneurial or employment. Project Hope also reflects RB's ongoing partnership with Save the Children's campaign to reduce and eradicate the devastating impact of diarrhea on children by 2020.

Image 1:

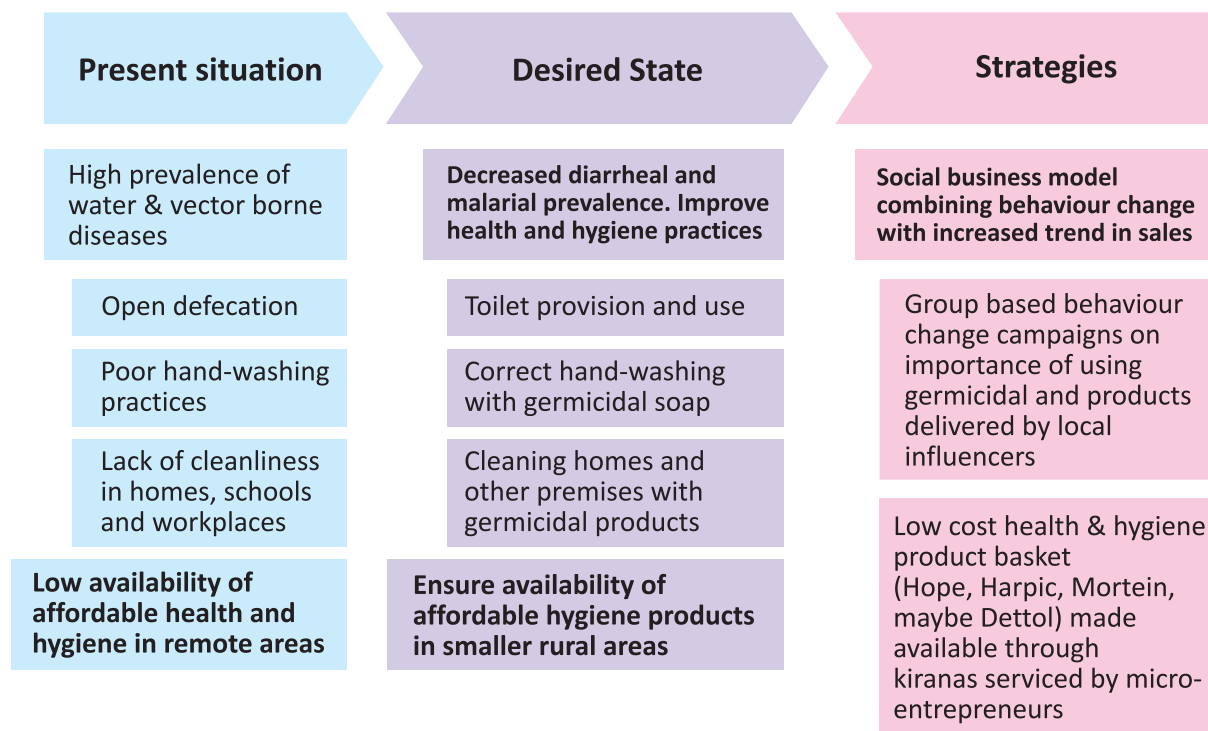
Project Hope at the intersection of 3 programs at RB



The Conceptual Framework of the Project

The Theory of Change (ToC) paradigm adopted by the project embraced an integrated approach that shuns the exclusivity of just exploring certain dimensions of change (such as just focusing on social and behavioral changes). Instead the project's ToC incorporated and integrated key constructs from various dimensions into a model that could be applied to a variety of behaviours, population and settings.

The diagram below lays out an accurate reflection of the intellectual approach to the project.



The Objectives & Expected Outcomes of the Project

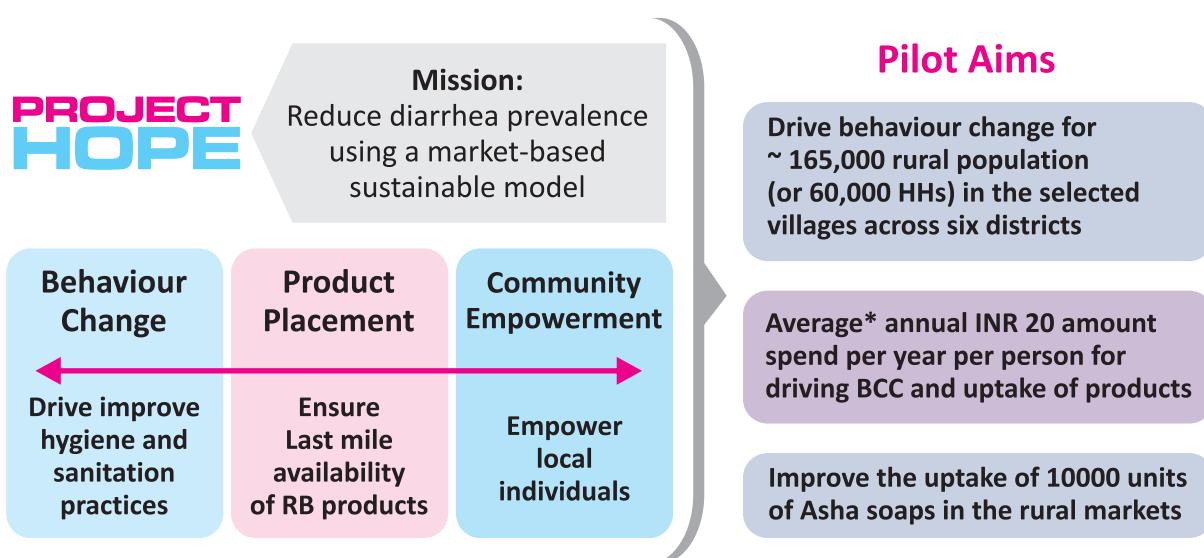
Project Hope is RB's pioneering model for market-based, sustainable, and scalable prevention and care of diarrhoea. As laid out above it is positioned in the intersection of key initiatives of RB that squarely aligns corporate "bottomline success" with public good.

The programme, especially due to its partnership with Save the Children's campaign, was designed to comply with the 7-Point plan for comprehensive diarrhoea control designed by UNICEF and WHO specifically for Promotion of hand washing with soap for prevention especially in mothers and Community-wide sanitation promotion and good hygiene practices.

Aside from that the programme had a three pronged vision:

- Drive behaviour changes campaigns for product adoption
- Create low-cost health and hygiene products for the BoP (2 products created thus far) and build a sustainable last-mile distribution and sales model especially for rural areas
- Community Empowerment: empower the local community through knowledge and also by creating economic activities including entrepreneurial & employment opportunities (such as village level health educators and Asha Amma's)

The aims of the programme at launch have been succinctly captured below.

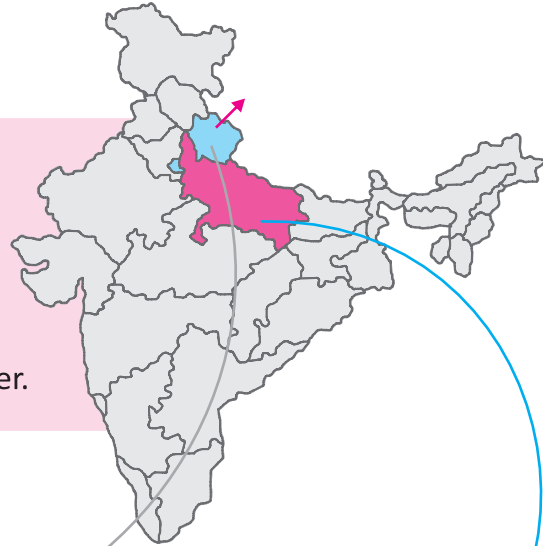


OBJECTIVES of PROJECT HOPE

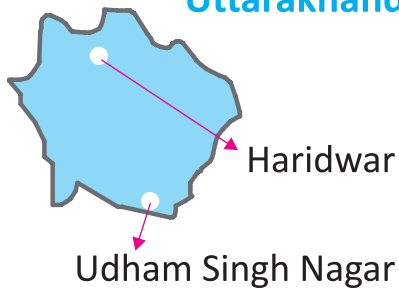
- Drive Behaviour Change Campaign (BCC) for product adoption to reduce mortality and morbidity as well as impacting co morbidity arising out of poor sanitation and hygiene
- The uptake of products specifically developed by RB under the pilot

Project Deployment

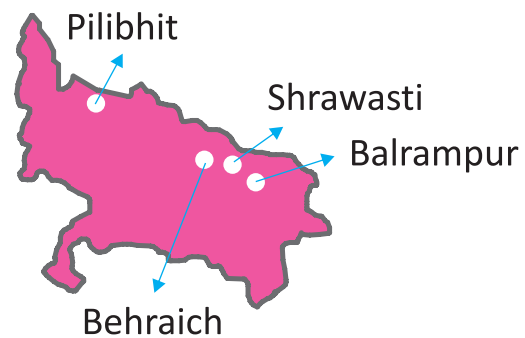
The initial pilot project was deployed in 2 states **Uttar Pradesh** and **Uttarakhand**, encompassing a total of six districts with four in the former and two in the latter.



Districts in Uttarakhand



Districts in Uttar Pradesh



125 villages from 6 districts selected



110 villages targeted for Intervention

The villages were targeted in the following manner:

Districts in Uttar Pradesh

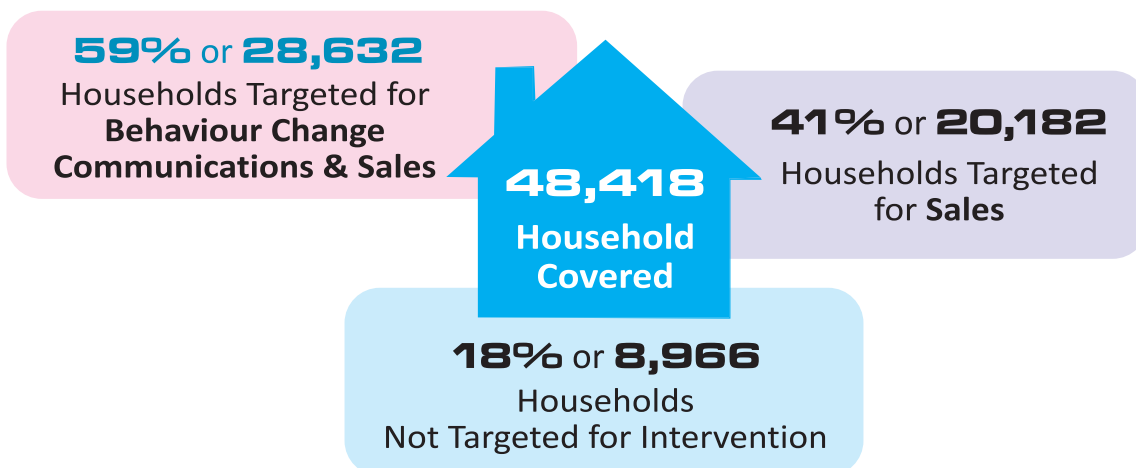
Districts in Uttarakhand

	Number of villages covered for BCC +Sales (RCT1 and RCT 2)	Number of villages covered for sales only (RCT 2)	Villages with No Intervention
Shrawasti	9	2	7
Bahraich	13	11	6
Balrampur	12	15	3
Pilibhit	19	11	0
Haridwar	7	2	2
Udham Singh Nagar	4	5	0
TOTAL	64	46	18

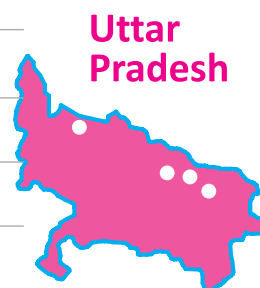
Breakdown of Targeted Activities on Villages



Based on the data available to the project team the villages were further broken into target households:



Districts	Block	BCC + Sales	Sales	Don't touch	Total
Shrawasti	Gilaula	3759	853	2024	4612
Bahraich	Payagpur	7736	4725	4219	12461
Balrampur	Tulsipur	5474	7448	1886	12992
Pilibhit	Amariya	8618	6011	--	14629



Haridwar	Laksar	1568	216	837	1784
Udham Singh Nagar	Sitarganj	1477	929	--	2406
TOTAL		28632	20182	8966	48814

Uttarakhand



Behaviour Change Communication Strategy & Activities

Changing individual and collective behavior of the targeted households and villages were one of the pre-defined key performance indicator for Project Hope.

In order to achieve those objectives, a Behaviour Change Communication (BCC) campaign was developed around the following six themes:

- 1 Health benefits through hand wash and improved sanitation
- 2 General Hygiene
- 3 Hand washing with soap
- 4 When to wash Hands?
- 5 Good sanitation practices
- 6 Toilet Cleaning (not implemented in the pilot project)



However only the top five themes were implemented on the ground as the sixth theme was related to toilet cleaning and the 'Asha powder' was not available for sales.

"Asha Amma"

Woman Health Worker

The Change Leaders

The Asha Ammas are locally identified women champions who will drive behaviour change in the local village community towards good sanitation and hygiene practices using Asha Soap brand.

The Asha Amma's will not be directly responsible for door to door sales of the product instead their attention will focus solely on changing behaviour in the community. While there is no direct economic opportunities involved with the role of Asha Amma – it still empowers women to become change leaders and help other women to adopt best practices of hygiene and hand-washing in their respective households. **Project Hope is expected to enable the following transformation in the lives of these women.**

Before the intervention

- Local village members with less knowledge in good health and hygiene practices
- Inability to influence households on general hygiene and hand washing
- Usually dependent on male members for income and recognition in the society
- Low skill base on community behavior change interventions



The efforts of these Asha Amma are recognized through

After the intervention

- Local community members with thought leadership in health and hygiene
- Influencers in the new mothers and young children for hand washing in soap
- Additional source of income generated for the household. Recognition in the local society thru events and facilitations
- Trained on community behavior changed interventions and could be utilized for other programs

- Souvenir / Appreciation Certificate to each Asha Amma
- Facilitation of top 3 Asha Ammas in a village every quarter (through gifts)
- Social enhancement and feeling of being associated with a good cause

The project benefitted from the participation of 44 Asha Ammas who undoubtedly made an impact on improving hygiene and handwashing practices but also by creating demand for the Asha soap.

The Asha Ammas alongside the project team were taken through a detailed training regimen to ensure they were equipped with all the necessary tools and tactics to succeed on the field.

Key Partners and Structure



RB is the project sponsor and is funding this project. In order to complement the efforts of STC across the selected districts and villages, RB is planning to hire an implementation agency to pilot a scalable social model 'project Hope' for market-based, sustainable preventive care for diarrhoea incidences through promotion and consumption of relevant products.

Jagran Pahel is the overall project coordination agency for the project that works closely with the RB team.

Jagran Pahel will support the project in pilot implementation, communication and training, design and printing of collaterals including BCC campaigns and sales monitoring and analysis, corrective action.



Intellectap is responsible for overall pilot management and steer the program including cost control.

Intellectap would support in developing project management guidelines, standard operating procedures, compile monthly / quarterly reports for Jagran Pahel to show the consumption patterns for various SKUs based on collated data and field visits, recommend course corrections on an on-going basis as needed, documentation of program learning and knowledge management and analyze pilot success and recommend future scale-up.

Home Remedies is the implementation partner for the project and would be responsible for ensuring the knowledge dissemination and behavior change communication on hand washing, personal hygiene and improved sanitation coupled with the uptake of Asha soap and other relevant products in the targeted rural community.

Home Remedies will be responsible to implement the entire pilot program in the selected villages through focus on increasing the habit of uses of hand washing soap 'Asha', creating and distributing communications collateral with focus on addressing good practices on hand washing and use and cleaning of toilets, door to door habit promotion and sales and aggregate monthly data on key indicators for behavior change and product uptake and consumption by the targeted rural households.



The delivery structure for implementation of Project Hope comprised of two teams 1) Project Steering Committee and 2) Pilot Delivery team.

The proposed delivery structure and operating framework were aimed for effective implementation of Project Hope and for timely progress and impact reporting that adheres to guidelines and expectations of the pilot project.

Outcomes and Impact

Reaching the Target Audience

Project Hope did exceed expectations in terms of the outreach campaign as well as number of interventions and in terms of meeting the core objective of women empowerment.

The figures below provide a snapshot of the project's outreach impact.

No. of Households

Aim of Pilot Project:
Reach 60,000 households

Actually achieved
70,000
households

Total Number of People Reached
70,000 X 4* = 2,80,000 (approx.)

*average number of people per household 4-5 and this report is taking a conservative approach

No. of Interventions

3 interventions / household

Total
2,10,000
Interventions

Total Number of interventions
70,000 X 3 = 2,10,000

75% of people in target area aware of Asha Soaps (210,000 people)



Women Empowerment

Empowering women is key to not only transforming hygiene, sanitation and public health outcomes but also boosting rural economy.

Outreach:

1800 women participated in the Behaviour Change Communication Sessions

Economic Impact

80%

(i.e. 32 out of 40 people employed by the project were **women**)

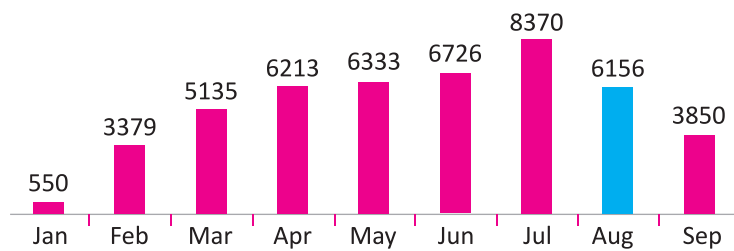
Penetration of Asha Soap



The aim for the project was to sale 10,000 units of Asha soap per month; however due to time taken to develop the potential market, **the average sales per month reached to 6,500 units per month.**

Total Asha soaps sold = 47,000 units

Sales Volume per month are as under



* Massive floods in the targeted districts during **August & September** reduced the pace of sales in the market.

Sales Volume based on households:

43% OR 30,191 households bought



47% in Shrawasti

48% in Udham Singh Nagar

42% in Behraich

42% in Balrampur

42% in Haridwar

Sales Growth:



Sales in January **550**

Sales in July **8370**

This reflects a 12X growth in sales of Asha soaps.

9% ↑

At the peak period, **Asha** gained about 9% of share of a very competitive market

Behaviour Change Campaign (BCC)

The BCC campaign focusing on improving behavior across hygiene and sanitation parameters but especially hand-washing had substantive impact on the target audience.

Below are the results of some of the key parameters:

✓ Hand-washing with Soap

90% of target BCC audience became aware of the benefits of hand-washing with soap along with threats of not doing so;

75% of target BCC audience used Asha soap at least once day for hand-washing or bathing;

50% of participants adopting the practice of having designated areas for soap & hand-washing at home

✓ Use of Soap at Critical Moments of the Day

60% of target BCC audience started using soap 3-5 times per day from 1-2 times a day

30% of targeted BCC audience could recall BCC messaging on health & hygiene

25% of targeted BCC audience were able to identify long \ term benefits of Asha soap

✓ Better Community Participation & Asha Soap Penetration

21% Monthly compounded growth when it comes to BCC intervention & number of households;

25% better participation rate among communities in BCC sessions

30% better penetration of Asha Soap where “Asha Amma’s” were deployed

The Challenges

The market i.e. the target audience was upfront with serious questions on the Asha soap at the inception of launch; however due to the outreach programme aided by effective new communication strategies to address the concerns of the potential customers – the challenges were over come.

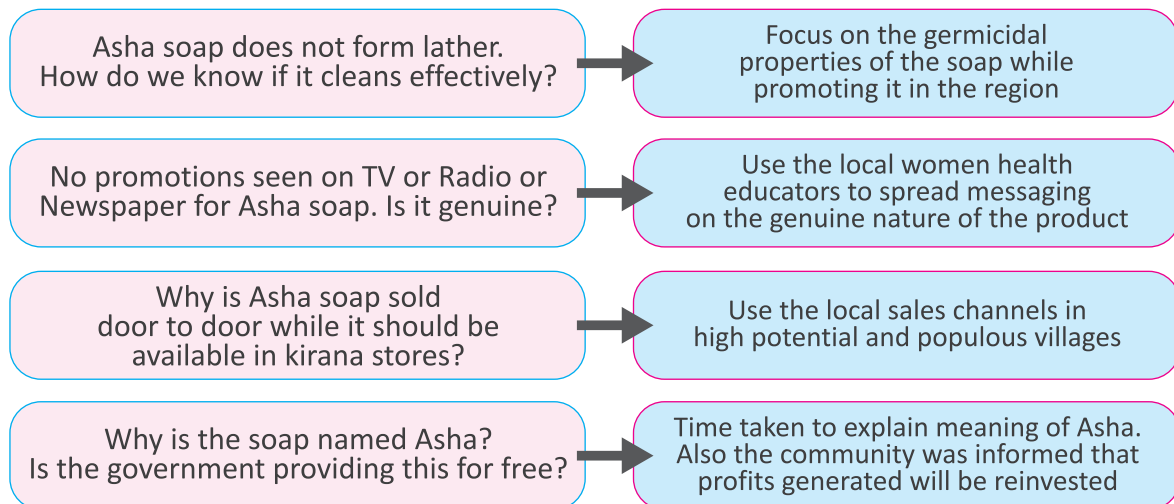
Customer Thoughts



Market building challenges for the Project

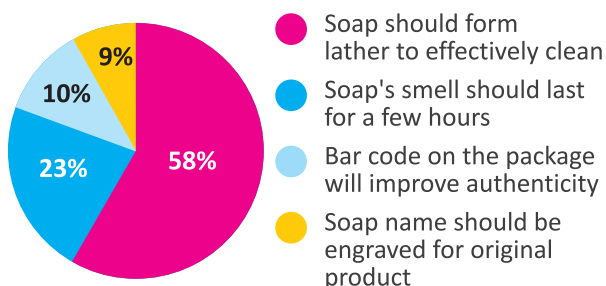
Market building challenges: What was observed during initial phase

Steps taken



The following figure highlights the changes of perception in the market over the course of the pilot project.

Market development: Changing Perception of the Community observed the project course



*Information collected after speaking to over 10 kirana stores and 25+ customers in the district of Shrivasti and Bahaich

Customer feedback on Asha Soap in July 2017



*Information collected after speaking to over 8 kirana stores and 45+ customers in the district of Shrivasti, Bahaich and Balrampur

Broader challenges affecting Project Hope

Slow uptake of the Asha soap and other challenges



Outreach related: Challenge Observed

- The male associates doing the door to door sales found less traction in the households as the women were hesitant to talk to them
- Many BCC participants questioned the logic for paying for the soap as other such NGOs and organizations (including STC) gave soaps for free
- Availability of the Asha soaps in the villages was required 24x7 post the BCC activities rather than once or twice in the week once the field executive visited the village

Proposed Recommendations / Solutions

- Local Women Health Educators has been utilized for BCC and promotion of Asha soap. There are higher chances of meeting the project targets in villages where women health educators have been deployed
- It was suggested that community be informed that investment of the profits generated from the soap will be reinvested for the betterment of the village
- Product placement of Asha soap in the local selling channels such as kirana shops and small medical stores

Project management related: Challenge Observed

- The field team struggled to record the MIS data correctly through the tablets due to poor internet bandwidth available. Discrepancies on dates and data lead to more lead time on analysis
- Uneven sales targets for the field executives: The sales target for each of the field executive were allocated based on vanilla cover of 2500 units per month and did not take into account the population or the sales potential of the village

Proposed Recommendations / Solutions

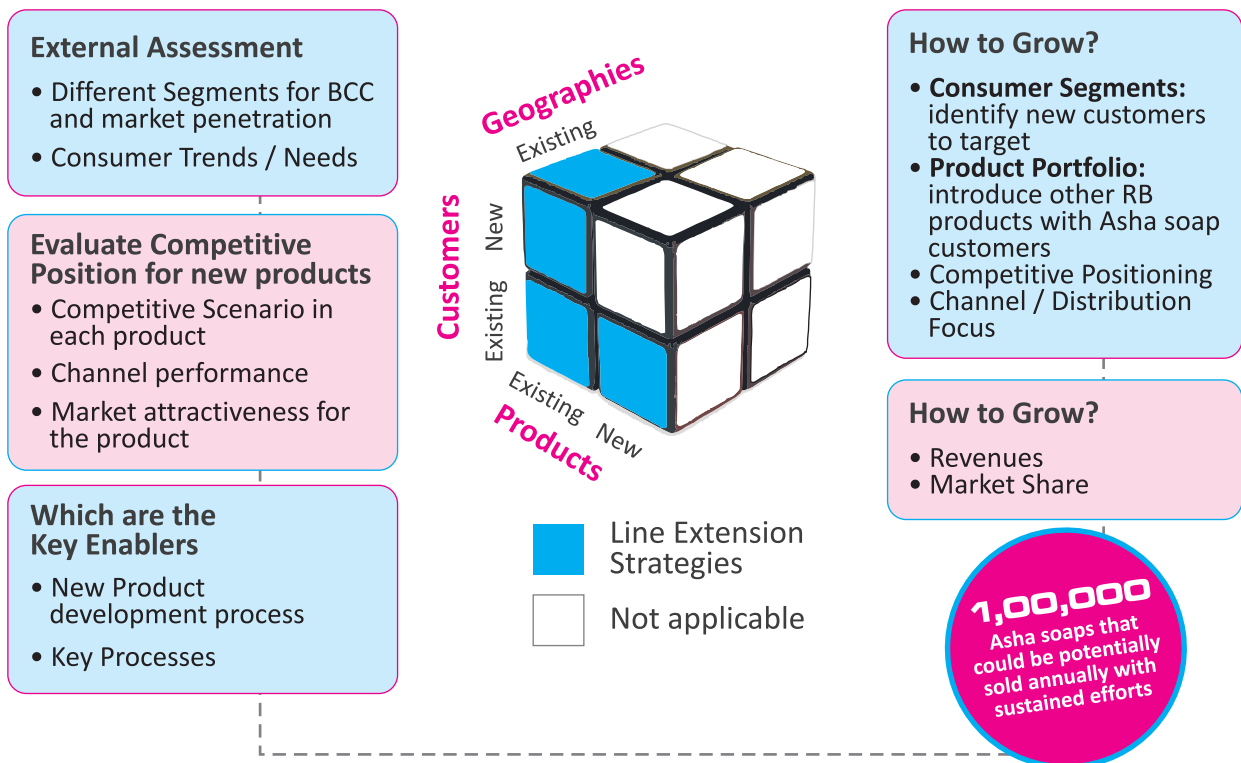
- Use of simple reporting systems through applications such as Whatsapp that required low internet bandwidth ensured that the data is recorded regularly and corrective steps taken quickly
- Sales target for each of the village based on the population (demand driver) and the spending power of customer (supply driver) has been articulated and shared with the project supervisor and the implementation manager

Recommendations for the Next Year

The figure below lays out a clear integrated approach to ensuring Asha soap can achieve the potential of selling at least 1,00,000 annually in the existing geographic market.

Suggestions and way forward for the project

Better market penetration and share in existing geographies of Project Hope



Success Stories

Project enablers: Women Entrepreneurs



Ms. Ruchi

Block Coordinator - Laksar, Haridwar

Project Hope has empowered women at the Grassroots level; Ruchi is one such example. She has been associated with the Project since March 2017. She efficiently covers 8 villages in Laksar Block and conducts community meetings to sensitize the community about hand washing at critical incidents.

Ruchi has been a consistent performer for the team and meets her BCC outreach / sales targets every month. She expresses that Project Hope has given her the opportunity to constantly grow and work towards the betterment of the community.



Ms. Geeta

Block Coordinator, Sitarganj, Udham Singh Nagar

Sitarganj, being a major hub for production of soaps of competitor brands, becomes a challenging territory for introducing a new soap such as Asha. Geeta has over come this challenge by actively conducting community meetings and carrying out Behaviour Change Communication to spread the USPs of Asha soap.

She takes immense pride by working towards the betterment of the community at large and is proud to be associated with the project.

"Asha Amma"

Women Health Educators Success Stories



Smt. Jagwanta

Woman Health Worker (Asha Amma), Gopalpur Village, Gilaula Block, Shrawasti, Uttar Pradesh

Jagwanta is a star performer; she has organized over 8 BCC sessions and has covered nearly 65% of the Households in the community.

She also has a record of selling over 200 soaps per month for the last 3 months and is popularly called as "Asha Bahu" in the local community. People of Gopalpur village recognize her and relate her with Asha Soap. She also covers the 2-3 nearby villages on foot in a day to communicate the importance of Hand washing, Hygiene and USPs of Asha Soap. A mother of 4, Jagwanta is constantly motivated to work for the betterment of her village and spreading the message of Hand Washing.



Ms. Pooja

Semryiawan Village, Prayagpur Block

Semryiawan village in Uttar Pradesh has about 150 Households and Pooja is known by all. She actively organizes community meetings in the village to spread awareness about Hand Washing and Benefits of using Asha Soap.

She sells close to 200 soaps in a month and has been associated with the project since its field implementation in January 2017.

Success Stories

Customer success stories for Asha soap



Smt. Gudda Devi

Semriyawan Village, Prayagpur Bloc, Bahraich, Uttar Pradesh

Smt. Gudda Devi suffered from severe skin rash that it became difficult for her to drape a piece of cloth around her body. Through Behavior Change Communication sessions carried out by Women Health Educators (Asha Ammas) and Block Coordinators, she was motivated to try Asha Soap.

After using the soap for 2 months along with consultation from the local health center, the rash on her body started to subside. She mentioned that Asha soap leaves her skin soft and moisturized- reducing the irritation caused by skin rash.



Master Sarvesh, 4 Years

Semriyawan Village, Prayagpur Bloc, Bahraich, Uttar Pradesh

Sarvesh suffered from prickle heat and skin rash and being a young child, it became difficult for this father to treat him with medicines;. By taking a bath with Asha soap twice a day, he got significant relief.

His father mentioned that he recommends this soap to other parents as well in Semriyawan and other villages nearby.

► Success Story from Koluha village, Bahraich





Project Hope is another reflection of RB's successful alignment of bottom line profits with its purpose to improve health and quality of life for Indians, which in essence drives the Dettol Banega Swachh India (DBSI) initiative.

This project not only just improves quality of life through best practices of hygiene and sanitation alone; but also through supporting and boosting the rural economy – therefore, undoubtedly a **“force for good”** in delivering a clean and new India.



**PROJECT
HOPE**