



WIPRO ENTERPRISES PRIVATE LIMITED

REPORT ON CSR IMPACT ASSESSMENT

OF

PROMOTING PREVENTIVE HEALTHCARE

PROJECT

2023-2024



Introduction to Corporate Social Responsibility

Corporate Social Responsibility (CSR) represents a company's ethical obligation to engage with society beyond profit-making. It embodies a proactive approach to addressing socio-economic and environmental challenges by supporting initiatives that foster inclusive development, well-being, and sustainability.

Under the Companies Act, 2013, CSR has evolved from a voluntary gesture to a statutory responsibility. Companies surpassing specified financial thresholds are required to allocate a portion of their average net profits toward socially impactful projects. These activities span across diverse sectors such as healthcare, education, environmental sustainability, skill development, and empowerment of marginalized communities.

The essence of CSR lies in integrating social good with core business strategies. It encourages companies to be active stakeholders in nation-building by not only adhering to compliance norms but by investing in long-term change. Through effective CSR, companies can create measurable social impact while enhancing their own reputation, trust, and stakeholder value.

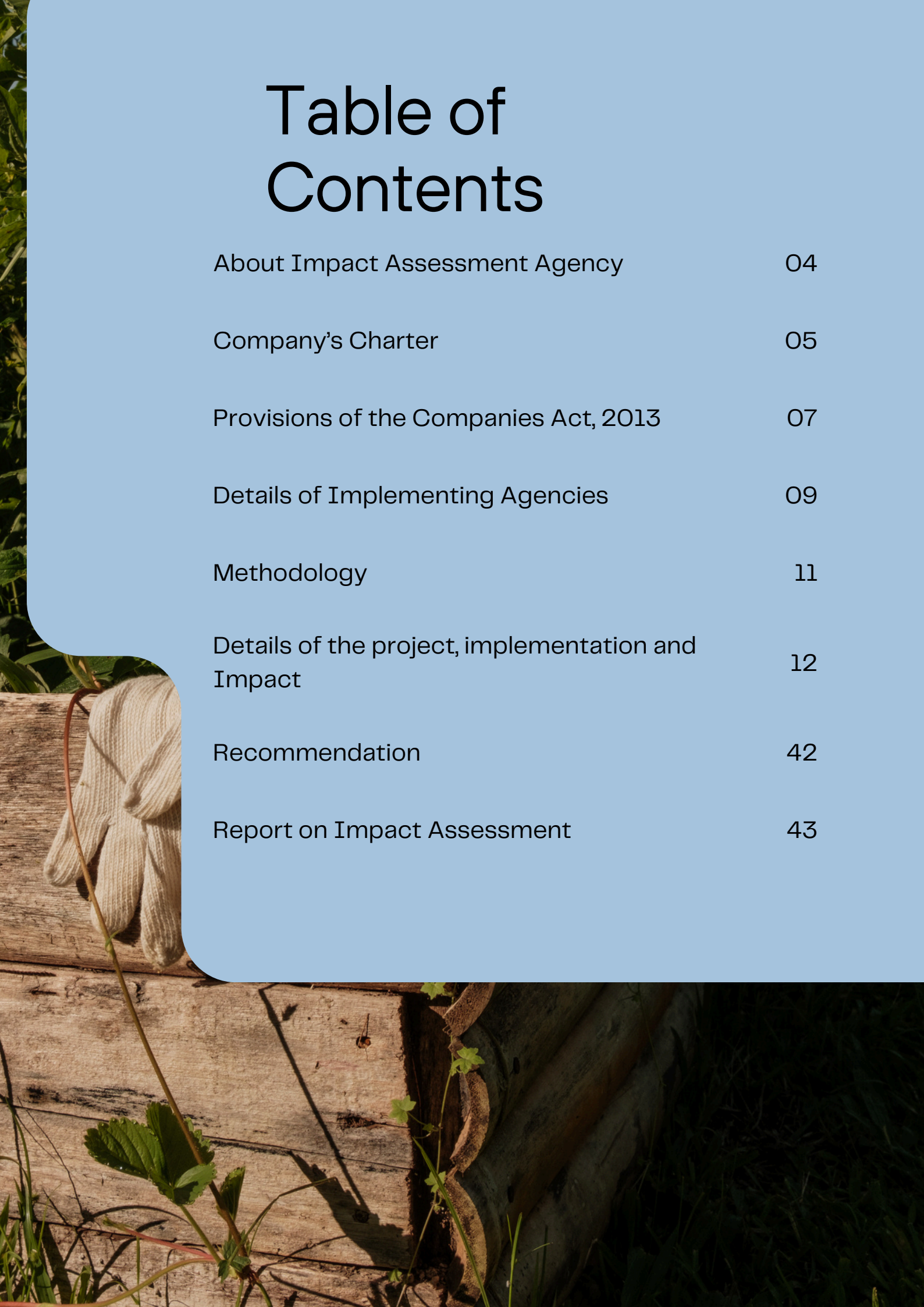


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About CSR Impact Assessment Agency

V Sreedharan and Associates is a firm of Company Secretaries in practice having its office in Bengaluru. The firm provides professional consultancy services on Corporate Law and Compliance.

The firm provides competent, efficient and expert advice on ensuring and enhancing corporate compliances.



Charter

Wipro Enterprises Private Limited (hereinafter referred as ‘Wipro Enterprises’ / ‘the Company’) Charter on Corporate Social Responsibility:

Wipro Enterprises emphasizes the importance of deep and meaningful engagement with social issues, grounded in a long-term commitment that can bring about real change at the grassroot level. This approach recognizes the mutual benefits it offers to both business interests and societal well-being. Wipro Enterprises operates its social programs based on strong ethical principles, good governance and sound management practices. The company upholds transparency and rigorous reporting as part of its commitment to public scrutiny.

The Company is dedicated to capacity building, community empowerment, including socio-economic growth, environmental protection, the promotion of green and energy-efficient technologies, the development of underprivileged regions and the upliftment of marginalized sections of society.

The company remains committed to conducting business operations in a socially responsible manner. Its vision encompasses sustainable business growth while minimizing environmental impact and maximizing positive social contributions.

The Company’s approach to CSR centres around addressing systemic social issues in a meaningful and effective manner. It’s CSR policy reflects the principles and strategies that have guided its longstanding commitment to corporate citizenship and social responsibility.

All CSR projects undertaken by Wipro Enterprises align with the CSR policy and comply with the activities listed in Schedule VII of the Companies Act, 2013.

Charter

Wipro Enterprise's social responsibility and sustainability efforts are supported by three key pillars:

THE STRATEGIC

They choose domains and issues to engage with that are force multipliers for social change and sustainable development.

THE SYSTEMIC

They choose to engage on systemic issues that require deep, meaningful and challenging work. The objective is to affect systemic change at ground level over a period of time.

THE DELIBERATIVE

They emphasize on depth and on long term commitment implies a deliberative approach that precludes spreading ourselves thin. By implication, this also means that we are wary of expanding and growing our social programmes as ends in themselves. We will continue to adhere to this approach going forward.

Provisions of the Companies Act, 2013

THE COMPANIES ACT, 2013 PROVISIONS VIS-À-VIS CSR IMPACT ASSESSMENT APPLICABILITY

Ministry of Corporate Affairs ('MCA') vide its notification dated 22nd January 2021 amended the Companies (Corporate Social Responsibility Policy) Rules, 2014 which inter alia includes the provisions relating to CSR Impact Assessment. MCA also vide FAQ dated 25th August 2021 have provided the clarifications on the requirement of Impact Assessment.

Accordingly, every company having average CSR obligation of ten crore rupees or more in pursuance of subsection (5) of section 135 of the Companies Act, 2013 in the three immediately preceding financial years, shall undertake impact assessment, through an independent agency, of their CSR projects having outlays of one crore rupees or more, and which have been completed not less than one year before undertaking the impact study. , thus the assessments focused on projects completed before one year.

Wipro Enterprises has the CSR obligation of ten crore rupees and the following 3 projects which have an outlay of Rs. 1 crore and above which requires impact Assessment:

Sl. No.	Details of the project
1	Renewable Energy
2	Promoting Preventive Health Care
3	Santoor Scholarship

Provisions of the Companies Act, 2013

The Impact assessment report will form part of the CSR Report to be annexed to the Board's Report for the Financial Year 2024-25 and the website link of such report will be available in the Board's Report. We have been appointed by the Company to conduct the impact assessment of the aforementioned projects and to provide our report on the same. We have conducted the impact assessment of all the above-mentioned projects.ve conducted the impact assessment of all the above-mentioned projects.

Details of Implementing Agency and Other Organisations Involved in the Project

Wipro Cares is the Implementing Agency, an employee-led community initiative arm of the Wipro Foundation. It is a 'not-for-profit' trust registered in the year 2003 under the Indian Trusts Act 1882. It is an earnest initiative that aims to make compelling and channelized contributions in the areas of Education, Primary Healthcare, Community Ecology and Disaster Response in proximate communities.

Community Health Care, the program to which this report pertains to is one out of the ten programs in which the Wipro Cares supports and implements through various NGOs and Societies engaged in the work of primary health care services especially in rural areas.

Wipro Cares plays a crucial role in partnering with various NGOs to address healthcare needs of the people of India. These NGOs in turn, manage healthcare clinics and organize various camps to deliver healthcare services. The impact assessment of these initiatives reveals the significant contribution made by Wipro Cares and its NGO partners in improving healthcare access, promoting preventive measures and addressing the healthcare challenges faced by communities.

Details of Implementing Agency and Other Organisations Involved in the Project

Following are the list of NGOs through which Wipro Cares carries out the CSR activities.

Organisation name	Location	Domain
Adhar Bahuddeshiya Sanstha	Amalner, Maharashtra	Healthcare
Chaitanya Rural Education and Health Society	Hindupur, Andhra Pradesh	Healthcare
Hand in Hand India	Sriperumbudur, Tamil Nadu	Healthcare
Health Education Agricultural Development Society (HEADS)	Devanahalli, Karnataka	Healthcare
Humana People to People India (HPPI)	Baddi, Himachal Pradesh	Healthcare
Helping Hand Foundation	Maheshwara, Hyderabad	Healthcare
Karnataka Health Promotion Trust (KHPT)	Tumkur, Karnataka	Healthcare
Rural Development Institute-HIHT	Haridwar, Uttarakhand	Healthcare
Savitribai Phule Mahila Ekatma Samaj Mandal-Sanjeevani	Aurangabad, Maharashtra	Healthcare
Rehoboth Sustainable Development Foundation (RSDF)	Sriperumbudur, Tamil Nadu	Community Ecology

Methodology

In order to assess the impact of the CSR community projects on healthcare, field visits were conducted to interact with NGO partners and ultimate beneficiaries and collect relevant data. **Out of the 10 identified community projects focused on healthcare, two projects namely:**

1. **Comprehensive Community Health Program** implemented in the Bahadarabad Block of **Haridwar, Uttarakhand**, in partnership with the **Rural Development Institute (RDI)** of the Himalayan Institute Hospital Trust.
1. **Aadhar Urban Arogya Project** implemented in **Amalner, Maharashtra** in partnership with **Aadhar Bahuddheshiya Sanstha**.

The above projects were selected for the purpose of the impact assessment for the period and preparation of this report. The objective of these field visits was to directly engage with the NGO partners and field workers and the beneficiaries to understand their experiences and gather first-hand information regarding the effectiveness of the healthcare interventions.

During the field visits, beneficiaries interviews were conducted using questionnaires to capture their feedback, satisfaction levels and perceived impact of the healthcare initiatives on their well-being. Open-ended discussions were also facilitated to gain insights into the specific health outcomes experienced by the patients and any challenges encountered during their journey.

In addition to beneficiaries interactions, on-site observations were made to assess the overall functioning of the healthcare project. The feedback from ultimate beneficiaries, perspective of the medical staff, from the area where we had visited has also been considered in the preparation of this report.

The data collected during these field visits was then analysed using both qualitative and quantitative methodologies. The findings from these field visits and data analysis have been presented and discussed in the subsequent sections of the impact assessment report, providing valuable insights into the effectiveness and impact of the CSR community projects on healthcare.

Details of Project, its Implementation and Impact

1

Comprehensive Community Health Program (CCHP)

Implemented in the Bahadarabad Block of Haridwar, Uttarakhand, in partnership with the Rural Development Institute (RDI) of the Himalayan Institute Hospital Trust.

Wipro Enterprises provides the CSR contribution to Wipro Cares. Wipro Cares in collaboration with its NGO partners, actively manages healthcare Projects in underserved areas using the CSR Contribution made by Wipro Enterprises.

The Healthcare project in the Bahadarabad Block of Haridwar, Uttarakhand, is being implemented by Rural Development Institute (RDI) of the Himalayan Institute Hospital Trust. An NGO founded with a mission to enhance the health and wellbeing of vulnerable communities.

The Himalayan Institute Hospital Trust is a society registered under the Society Registration Act 1860. The Society was founded by the great yogi, H.H. Dr. Swami Rama, in the year 1989. Today, the Society (HIHT) is engaged in multifarious activities in the field of research, education, health care, social and outreach.

This project aims to improve the health, development, and well-being of children by addressing critical factors from preconception to early childhood. The project employs a multifaceted approach, targeting malnutrition, maternal health, mental well-being of the pregnant women. The project is designed to create a supportive environment to enhance the coverage of maternal, child health, adolescent health, and school children health.

Details of Project, its Implementation and Impact

Key Components of the Health Program

Maternal and Child Health	Adolescent Health	School Health
Care during pregnancy and lactation period including newborn and infant	Formulation of School Health and Hygiene Clubs	Establish School Health Hygiene Clubs
Strengthening existing health system through capacity building program	Involvement of Teachers, Parents and other stakeholders	Organize School Health Camps on health education, hygiene and nutrition
Engaging stakeholders and ensuring male participation in maternal health care	Capacity building of Peer Educators and enabling peer learning mechanism	Promote WASH activities at school level

Convergence with the existing system of the Government:

The project aims to enhance holistic child development through a government-wide approach, focusing on service convergence. It addresses existing gaps and aims to activate convergence committees at the block and district levels. The project also strives for improved coordination, shared priorities at the community level, and plans to establish collaboration with key government departments.

Additionally, it adapts learnings from a successful health and nutrition initiative for institutionalizing convergence mechanisms at the Gram Panchayat level.

FIELD VISITS AND OBSERVATIONS

Preliminary Meeting

On 17th June 2025, the Impact Assessment and Wipro Cares team visited Dehradun (Uttarkhand) for a preliminary meeting with the team from the Rural Development Institute (RDI, NGO). The RDI team shared an overview of the institute and the “Comprehensive Community Health Program” being implemented across 12 villages in the block — Aneki, Aurangabad, Bongla, Rohalki, Jaswawala, Teliwala, Ibrahimpur, Alipur, Salempur, Khallateera, and Hazaragrant.

Dr. Rajiv Prasad, Deputy Director of RDI, along with his team, provided valuable insights into the project’s objectives, scope, and on-ground impact.



(“The Impact Assessment and Wipro Cares team with Dr. Rajiv Prasad (fourth from the left in the middle row).”)

Field Visit to Hazaragrant (Block Bahadrabad) (18 June 2025)

Key Interactions:

“The Impact Assessment team engaging in key discussions with the implementing team responsible for executing the Comprehensive Community Health Program on the ground.”

- **Mrs. Sangitha Chouhan**, Block Coordinator (Bahadarabad): Manages 14 facilitators. Shared details on the intervention depth, coordination with ASHA workers, and the effectiveness of training and support provided by RDI.

- **ASHA Facilitator (Alipur, Salempur, Ibrahimpur)**: Manages 80–90 pregnancy-related registrations per month. Highlighted RDI's role in identifying high-risk pregnancies (HRPs), facilitating government hospital linkages, distributing **248 nutrition kits** in 2023–24, and organizing **school hygiene awareness sessions**.

- **Anita Chouhan**, ASHA Worker (Rohalki): Recounted a case of a vulnerable woman abandoned during pregnancy. With RDI's support, delivery was safely conducted, and both mother and child remain healthy.

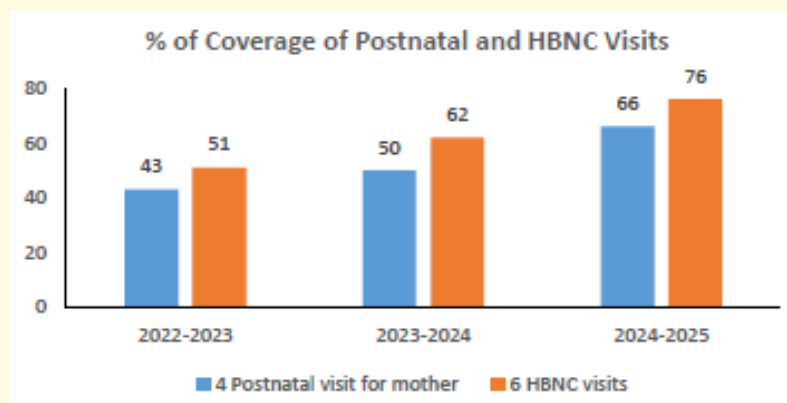
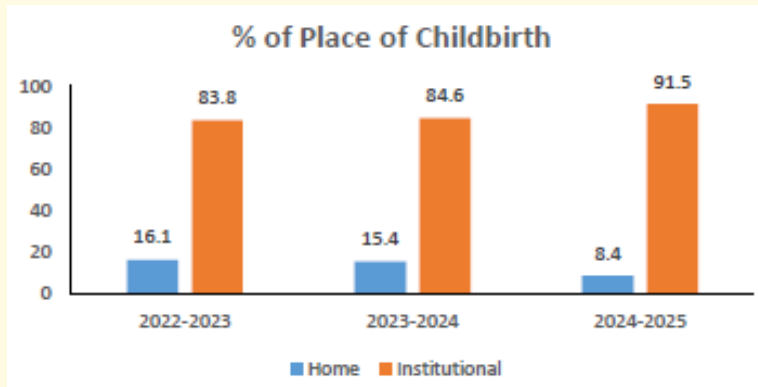


- **Kavitha**, ASHA Worker: Spoke on the **decline in home deliveries**, citing how institutional delivery awareness has improved through the program. Shared a critical case where RDI arranged emergency ambulance support for a remote HRP case, 40 km from the hospital.

Trends

Institutional Delivery Trends

Local surveys reflect a **year-on-year increase in institutional deliveries**, indicating behavioural shifts catalyzed by the program.

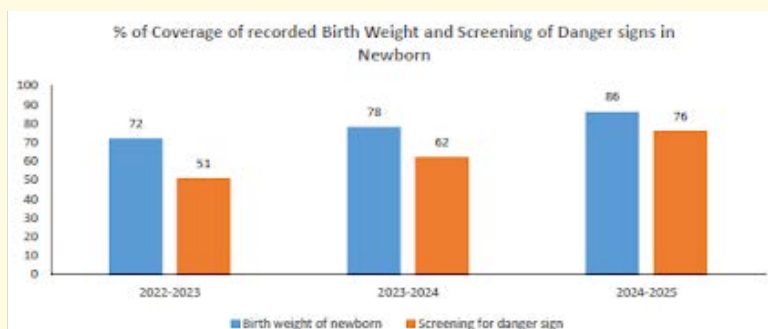


Percentage of Postnatal HBNC Visits – Trends

The data indicates a consistent rise in Home-Based Newborn Care (HBNC) visits post-delivery, reflecting improved outreach and follow-up by trained frontline health workers.

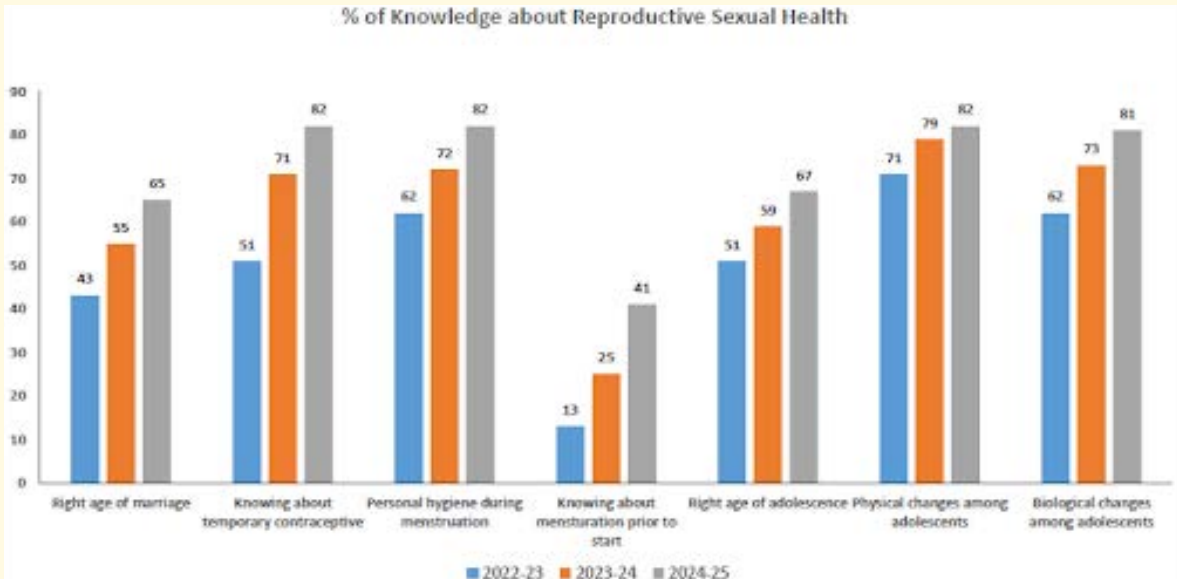
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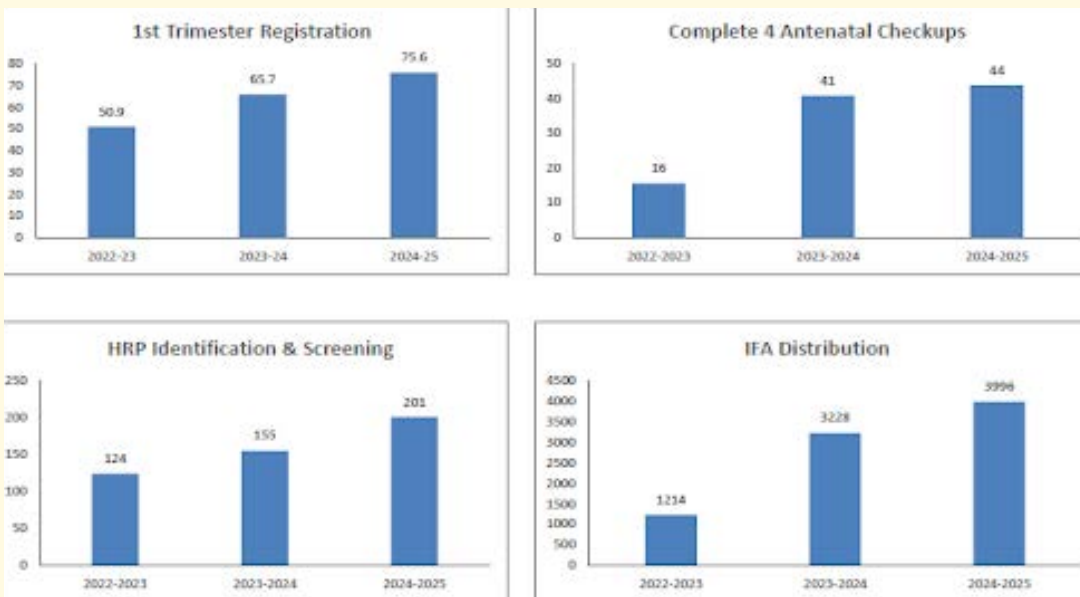
Knowledge of Adolescent Health

Awareness levels among adolescents have notably improved through structured school and community sessions, with increased understanding of hygiene, nutrition, mental health, and reproductive wellness.



Antenatal Care

The program has led to a steady increase in antenatal registrations and timely check-ups, ensuring early identification of high-risk pregnancies and improved maternal health outcomes.



Visit to a monthly Camp in Hazaragrath Village

We visited **Rajkiya Uchh Prarthmika Vidhyalaya**, a government school located beside **Anganwadi Kendra No. 6** in the same village. This site regularly hosts **monthly health camps** for women, focusing on essential healthcare check-ups.

Mr. Sanjay Arora, the Headmaster of the school, highlighted the pivotal role played by **ASHA workers and Anganwadi staff** in implementing the program with RDI and its team.

He shared how the initiative has significantly benefitted not only the women but also the **students and the wider village community**.

Special emphasis on topics like personal hygiene, menstrual health, and the use of sanitary pads has led to increased awareness and improved practices among adolescent girls and their families.



("Impact Assessment team outside Rajkiya Uchh Prarthmika Vidhyalaya during a monthly health camp, accompanied by Mr. Sanjay Arora, Headmaster of the school")

At the Anganwadi Centre, we met Ms. Mahruk, a practising gynaecologist who was deputed by RDI to lead the health camp for the day. As part of RDI's rotating panel of medical professionals from its affiliated medical college, she was responsible for conducting maternal health check-ups and providing counselling to pregnant and lactating women.



Ms. Mahruk walked us through the services being offered under the Comprehensive Community Health Program, highlighting the program's strong focus on preventive healthcare and nutritional support.

(Ms. Mahruk, gynaecologist deputed by RDI for the day's camp, attending to beneficiaries during the monthly maternal health session at Anganwadi Kendra No. 6.)

Beneficiaries attending the camp expressed positive feedback, noting that they had received free consultations and essential medications, including iron, folic acid, zinc sulphate, calcium, and Vitamin D3, all provided under the program to address common nutritional deficiencies.

“The pregnant women, who are the ultimate beneficiaries of the program, also shared that they received nutritional kits—specifically provided to those identified as High-Risk Pregnancies (HRPs).



Mrs. Nancy, who holds an **MD in Pharmacy**, is a representative of RDI and a **regular volunteer** at health camps conducted across villages under the program. During our visit, she provided valuable insights into the healthcare services being delivered, including antenatal and postnatal care, nutritional supplementation, and patient counselling. Her continued engagement across multiple camps has contributed significantly to building trust within the community.

A few of the interviews we conducted in Hazaragrath village included:

1. Mrs. Deepa (33), wife of Mr. Amit
2. Mrs. Shabana (29), wife of Mr. Waseem
3. Ms. Sadeeja (20), wife of Mr. Shabreen
4. Ms. Muskan (23), wife of Mr. Mehboob

(“Medical card of a beneficiary documenting antenatal check-ups and nutritional supplementation under the Comprehensive Community Health Program”)

Card No. 1

MATERNAL HEALTH
Rural Development Institute/Wipro Health Care
800 7112195

Wipro

Name of Women	Age	Husband Name	Village	LMP	Mobile No.
Meenakshi	29 Yrs	Vishal	Hazaragrath	2/3/25	9171618121

☐ 1st Trimester ☐ 2nd Trimester ☐ 3rd Trimester ☐ 4th Trimester

Date of Visit	Any High Risk Sign	Examination	Advice
11/6/25		B.P-100/80 S-97 Hb-8.4 Wt-52 Ht-149	cap iron-100 cap calcium-100
15/7/25		CBC, Hb, HIV, VDRL, HBsAg, VAM, TST Wt-54 kg Ht-146 cm BP-100/60 mmHg	Adv cap iron twice daily cap calcium twice daily folic acid after 3 weeks of 5 mg Plan to start 2 mg of 5 mg Methylen...

Field visit to Aneki Village

As part of our field visit, we also traveled to **Aneki village**, where we met a group of adolescent girls actively participating in an **arts and crafts training session**. These sessions are conducted on a **periodic basis** as part of the community engagement initiatives under the **Comprehensive Community Health Program**.

The training is facilitated by Mrs. Shika, a team member from RDI holding an M.A. in Arts, who brings both expertise and creativity to the sessions. Through this initiative, young girls are introduced to various forms of **traditional and contemporary handicrafts**, enabling them to explore their artistic talents while also developing important life skills such as **focus, discipline, and self-expression**.



“Mrs. Shika (first from the left), RDI team member and arts and crafts trainer, with the Impact Assessment team and a group of adolescent girls during a training session in Aneki village.”

In addition to enhancing their creative capabilities, the program indirectly promotes **mental well-being and confidence-building** among adolescent girls by providing them a supportive and interactive space. These activities serve not just as a recreational outlet, but also as a subtle educational tool to instill values of **self-care, hygiene, and social awareness**, which are integral to adolescent health education.

As part of capacity-building efforts under the program, **ASHA workers underwent structured training for a duration of six months**, delivered through both **offline and online modes**. The training modules included:

- Basic healthcare practices
- CPR (Cardiopulmonary Resuscitation) techniques
- Community-level maternal and child healthcare delivery

This consistent upskilling has significantly strengthened the program’s grassroots implementation.

Stipend Structure (as per field data):

- **ASHA Workers:** ₹750 per month
- **ASHA Facilitators** (3 in Bahadarabad Block): ₹1,000 per month
- **Block Coordinators** (2 in Bahadarabad Block): ₹1,000 per month

Aadhar Urban Arogya Project *implemented in Amalner, Maharashtra
in partnership with Aadhaar Bahuddheshiya Sanstha.*

Aadhar Bahudeshiya Sanstha Amalner,. A women-led organization working in the North Maharashtra region (Jalgaon, Dhule, Nandurbar) to empower marginalized communities.

Aadhar Sanstha Amalner has been dedicated to working with marginalized communities for over three decades, with a special focus on women and children. The organization provides critical support to victims of domestic violence and individuals affected by HIV/AIDS. Primary health care and maternal health care are core components of work.

Details of the Project and Its Implementation-

The Aadhar Urban Arogya Project was started with a goal to enhance the coverage of Maternal health and primary health, and create a bridge between the community and the Government health services.

Objective-

- To provide accessible, community-based PHC services to women, children, and adolescents
- To ensure early registration of pregnancies, promote institutional deliveries, and strengthen maternal and child health through regular health check-ups, growth monitoring, and counselling.
- To build community awareness around hygiene, nutrition, immunization,

To build the capacity of local health volunteers [Aarogya Mitra] to support ongoing health efforts and create sustainable change.

Key Components

Sr. No.	School Activity	Mental health awareness	Networking with Government Health System
1	A school activity was conducted in four schools, with the children participating	Mental health is a critical concern these days, approximately 10% of the population faces expensive mental health challenges	VHND sessions jointly organise in area and ensure that all mothers attended the session.
2	Conduct monthly sessions with children on health, personal hygiene, nutrition, and mental well-being.	In 2023-2025, arrange the session for promoting mental health, educate the community about mental conditions.	Build up strong referral with Government health system.

Sr. No	Primary Health Care	Mother and child Health care	Adolescent Health
1	Provide accessible community-based Primary Health Care service through weekly OPD.	Ensure early registration of pregnancy.	Formation of groups in each Area.
2	Specialist OPD pediatrics, gynecology and ophthalmology HB check-up camps for women to monitor women's Health.	Cover all migrant mother for ANC care, link existing Gov .MCH infrastructure and system.	Monthly regular session with adolescents on reproductive health, emotional well-being, menstrual Health and gender equality.
3	HB and Blood group check-up camps for the community to monitor Health.	Monitor of HRP mother's.	Counselling on child marriage issues.
4	Regular BP and sugar testing in OPD prevent secondary and tertiary care.	Regular session with pregnant and lactating mothers promotes frustration delivers.	Parents counselling on continues girls' education.
5	Regular awareness sessions on health, hygiene, nutrition, and anemia	Lab testing and Ultrasound of the Pregnant Mother.	De-addiction counselling.

Field Visit and Observations

Preliminary Meeting

On **1st July 2025**, the Impact Assessment team held a **preliminary discussion with Dr. Bharthi** and the core team of **Aadhar Bahuddheshiya Sanstha**, the implementing agency for the Aadhaar Urban Arogya Project in **Amalner, Maharashtra**. The meeting focused on key components of the project, including **preventive healthcare, women's health, and adolescent health interventions**.

Dr. Bharthi and her team explained the operational model of the project, which includes the establishment of **small clinic units** across various underserved localities in Amalner—specifically **Andarpura, Kasali Mohalla, Rupaji Nagar, Tadapura, Gandhlipura, and Khwaja Nagar**. Each clinic typically operates under the supervision of a General Physician (BAMS-qualified), assisted by a **Medical Assistant with BSW/MSW qualifications**.

It was shared that a **Medical Officer** is designated to rotate between these clinic locations on a regular basis, ensuring that each area receives consistent medical attention and continuity of care.

Dr. Bharthi, the **Project Head**, emphasized the **extreme backwardness** of the areas being served and underscored the **critical need for accessible primary healthcare** in these communities. The meeting provided the assessment team with a comprehensive understanding of the project's objectives, challenges, and the strategic approach adopted by Aadhar Sanstha to reach the urban poor through localized clinic-based interventions.



“Dr. Bharthi, Project Head of Aadhar Bahuddheshiya Sanstha, seen standing fourth from the right with the Impact Assessment team during the preliminary meeting.”

Field Visit and Observations

On **2nd July 2025**, the Impact Assessment team commenced its field visit by selecting **four areas** where the Aadhar Urban Arogya Project is actively being implemented: **Andarpura, Tadeपुरa, Kasali Mohalla, and Rupaji Nagar.**

The visit began at **Andarpura**, a densely populated locality comprising primarily **middle- and lower-income households** with **limited access to quality healthcare services**. Residents here predominantly rely on a **small clinic operated by Aadhar Bahuddheshiya Sanstha** under this CSR initiative.

Dr. Shusheel informed us that 40–50 patients typically visit the clinic on each OPD day, seeking treatment for various general health concerns.



(“Dr. Shusheel Kumar, accompanied by his assistant, attending to beneficiaries during the weekly OPD at he Andarpura clinic.”)

At the clinic (pictured), we met Dr. Shusheel Kumar Badgujar, a General Physician (BAMS) with over 12 years of service, who leads the weekly Outpatient Department (OPD) on Wednesdays. He is assisted by Mrs. Yogitha, a trained medical support professional.

While attending to patients, he emphasized the critical role the clinic plays in bridging primary healthcare gaps for a community of approximately **2,500 residents**.

We also interacted with **Mrs. Raisa Syed**, the designated **Arogya Mithra** for Andarpura, who is responsible for spreading awareness about the program and coordinating healthcare access—especially for **pregnant women** in the area. Her presence ensures **continuity of care and community engagement**, helping to establish trust and promote utilization of available healthcare services.



Beneficiary Interactions

Visit to Andarpura

During our visit to the **Andarpura clinic**, we interacted with several beneficiaries who shared their experiences with the program.

Mrs. Shenaz Bi, approximately 60 years old and a regular patient at the OPD, shared that she frequently visits for treatment of common ailments such as blood pressure, diabetes, and joint pain. She expressed satisfaction with the services provided and appreciated the easy accessibility to primary healthcare within her locality.

Mrs. Gulshan Begum, aged 42, echoed similar sentiments, stating that the clinic efficiently addresses most primary health needs of the community and offers timely consultations and basic medications.



“Impact Assessment team with the Aadhar team and local residents at the OPD site in Andarpura, joined by Mr. Afsar Pathan, President of the Madrasa Institute, which has generously provided the space for the clinic.”

The visit also highlighted strong community participation. The clinic space in Andarpura has been generously provided by a local Madrasa institute, reflecting collective support and involvement from residents. Interactions with local community members revealed consistently positive feedback, with many acknowledging the clinic’s impact in improving access to essential healthcare services.

The Impact Assessment team along with representatives from the Wipro Cares team engaged in interactive sessions with a group of adolescent girls participating in the program's awareness and education initiatives.

The sessions focused on personal hygiene management, including awareness about menstrual health, menstrual cups, and sanitary practices. During one-on-one interviews conducted by female members of the team, the girls confidently discussed their understanding of nutrition and anaemia prevention, stating that they regularly consume iron and folic acid tablets along with natural supplements like beetroot to maintain good health.

In the same setting, we also interacted with a group of women beneficiaries who shared their experience of receiving educational support and health counselling through the program. They spoke about how the initiative has empowered them with knowledge related to reproductive health, High-Risk Pregnancies (HRPs), and overall maternal well-being. Their feedback reflected the program's impact in creating a more informed and health-conscious community of women and adolescent girls.



Visit to Tadeपुरa

The Impact Assessment team next visited **Tadeपुरa**, a densely populated slum area in Amalner, where we met **Ms. Deepika Vijay Sapkale**, the **Arogya Mithra** appointed by Aadhar Bahuddheshiya Sanstha. She has been dedicatedly working in this locality for over **eight years**.

Tadeपुरa lacks even the most basic public health infrastructure, with **no existing government healthcare facilities**. The **weekly OPD run by Aadhar** under the CSR project is the sole source of primary healthcare services for the community. Residents of this area, most of whom fall below the poverty line, face serious issues related to hygiene, sanitation, and access to timely medical care.

During our visit, we engaged in a **group interaction with local beneficiaries**, who unanimously shared that Aadhar's intervention has brought critical relief to their area. They highlighted how **pregnant women** are regularly supported through weekly general OPDs, and a special monthly OPD is conducted exclusively for antenatal and maternal health care.



(“Front view of the weekly OPD setup in Tadeपुरa – a vital healthcare access point in an otherwise underserved locality.”)

Services include basic health check-ups, sonography referrals, and provision of medications such as iron, calcium, and folic acid. In cases where high-risk conditions are identified, the Aadhar team ensures the patient is referred to and escorted to an appropriate hospital for specialized treatment.



(“Ms. Deepika Vijay Sapkale, Arogya Mithra of Aadhar, attending to beneficiaries during the weekly OPD in Tadeपुरa.”)

(“Interaction with the ultimate beneficiaries in Tadeपुरa”)

Among the many women we spoke to, **Jagruthi, Komal, and Diksha** shared positive feedback on how the program has improved their access to timely medical intervention and strengthened their understanding of personal and reproductive health.

Visit to Kasali Mohalla

The third location of our field visit was Kasali Mohalla, a densely populated locality with limited public health infrastructure. Our visit coincided with an active OPD session under the Aadhar Urban Arogya Project.

We were first introduced to Dr. Sachin Patil, a 39-year-old pediatrician holding a BAMS and a postgraduate qualification. During our interaction, he provided insights into the frequency and scope of services being delivered under the project in Kasali Mohalla. The area hosts four OPDs per month, with one dedicated OPD for pregnant women, managed by Dr. Devayani, a 40-year-old gynaecologist. Additionally, specialized pediatric camps are organized once every two months, and ophthalmology camps are conducted twice a year across all operational areas.



We were also welcomed by Ms. Deepti Bhata Shireesanth, the Program Coordinator, and Ms. Gauhar Aara, the Arogya Mithra for this locality. They detailed their roles in community mobilization, patient tracking, and ensuring the seamless delivery of services.

(“OPD clinic in Kasali Nagar”)



(“Group interaction with local beneficiaries of Kasali Mohalla to gather feedback on the healthcare services provided under the Aadhar Urban Arogya Project.”)

During the visit, we engaged with several on-ground beneficiaries. **Mr. Dabeer Pathan**, a 65-year-old resident, shared how he relies entirely on the services offered under this program for his primary healthcare needs. Further, we conducted a **group interaction** with local residents just outside the OPD clinic. Despite the absence of an Anganwadi center in the vicinity, the feedback gathered was overwhelmingly positive, emphasizing the trust and dependency the community places on the healthcare services being rendered under the initiative.

Visit to Rupaji Nagar

Our final visit was to Rupaji Nagar, one of the most underdeveloped areas in Amalner. The locality is a small slum predominantly inhabited by members of tribal communities. The residents here, primarily daily wage laborers, lack access to even the most basic healthcare infrastructure, making this region particularly vulnerable.

We held a **group interaction** with the local community, during which we met **Ms. Harshali**, the Arogya Mithra assigned to this area. She briefed us about the services offered under the Aadhar Urban Arogya Project, with a special focus on **primary healthcare, antenatal and postnatal care, and child health services**.

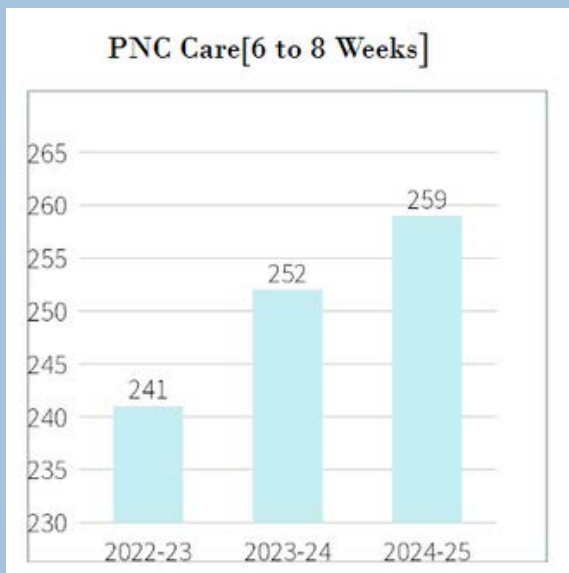
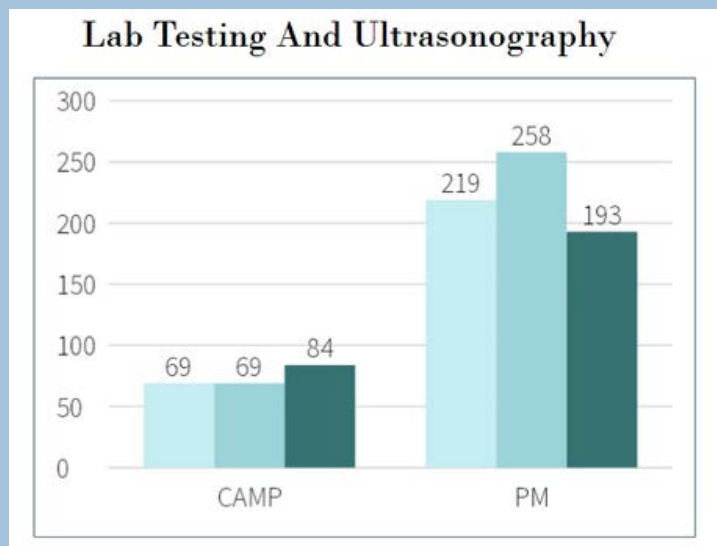
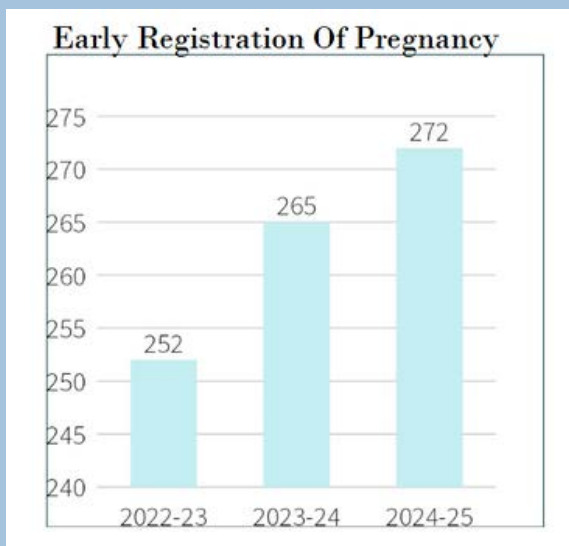
The clinic in Rupaji Nagar, set up by Aadhar, operates **weekly OPDs (every Friday)**, with **four general OPD sessions per month** and **one session dedicated exclusively to pregnant women**. This clinic is the **only healthcare facility** available in the locality and serves as a critical lifeline for the **approximately 400 residents**.



(“Community interaction with beneficiaries of Rupaji Nagar conducted in the open ground, highlighting the grassroots impact of the Aadhar Urban Arogya Project in this underserved tribal locality.”)

Trends

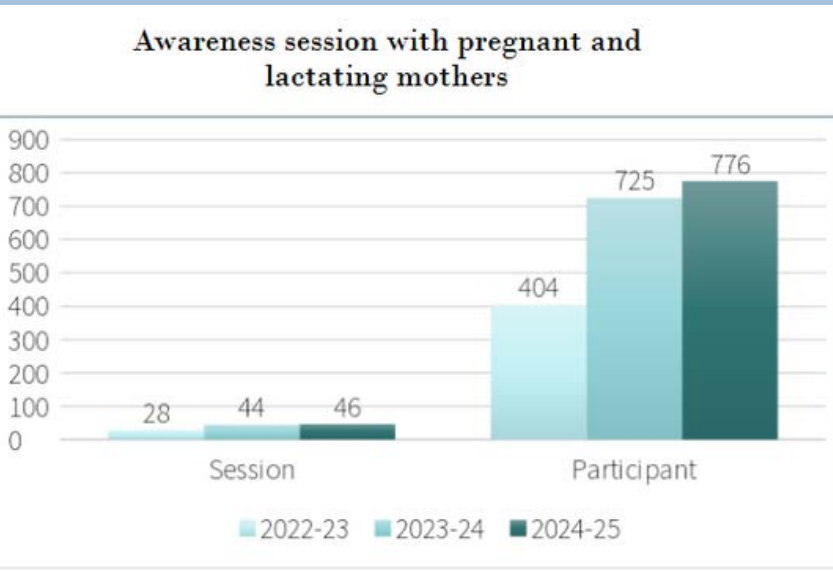
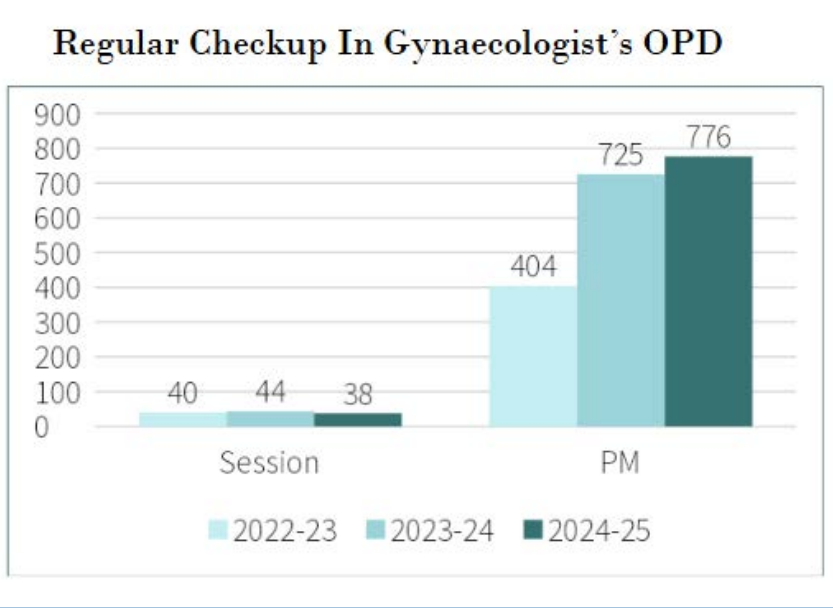
Year-on-year improvement in maternal health indicators including early pregnancy registration, lab testing and ultrasonography, and postnatal care—reflecting the increasing outreach and effectiveness of the Aadhar Urban Arogya Project.



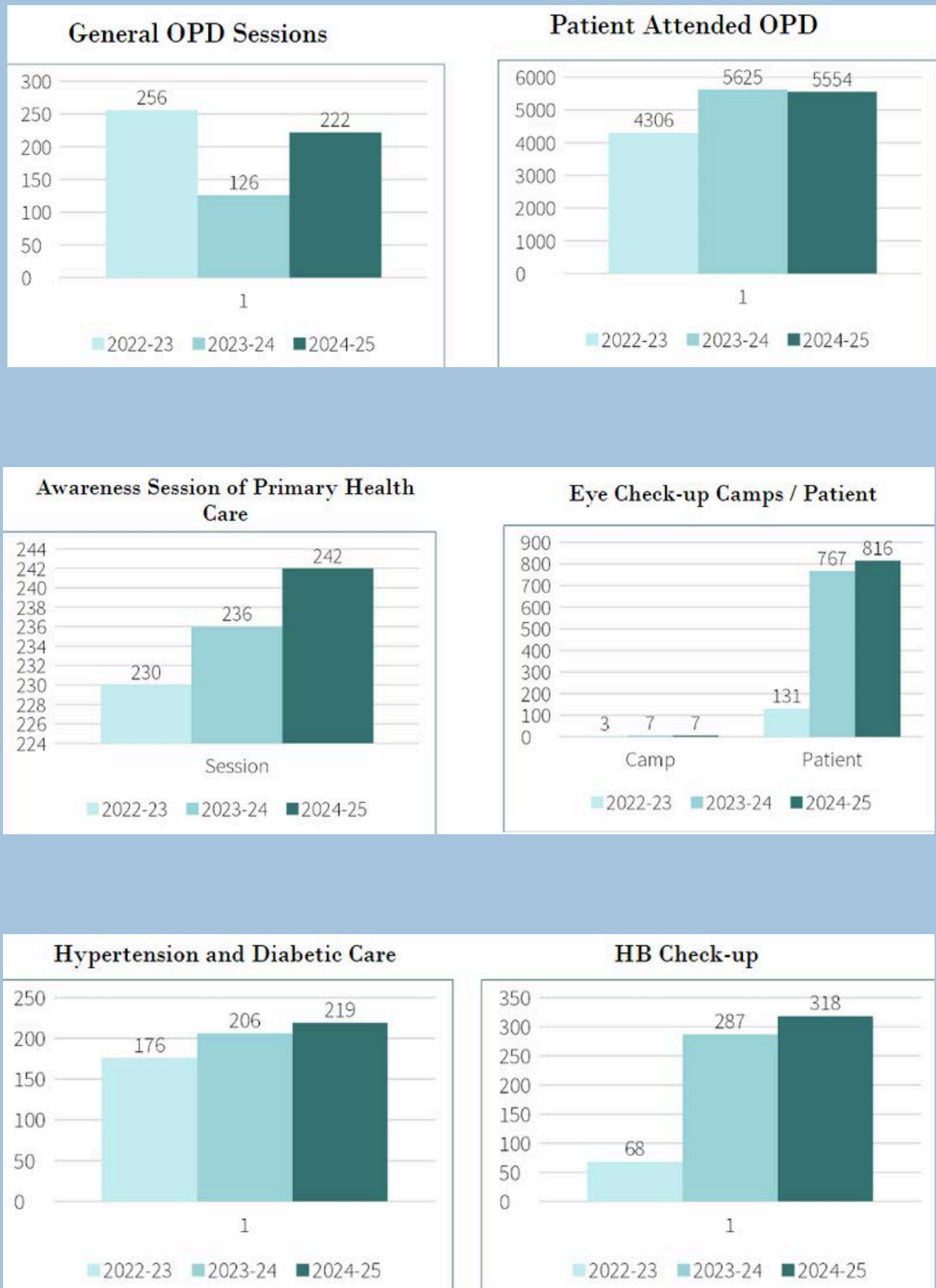
The data highlights progressive improvements across key maternal health indicators under the Aadhar Urban Arogya Project. Early registration of pregnancy has shown a steady increase from 252 in FY 2022–23 to 272 in FY 2024–25, reflecting enhanced community outreach and awareness. Lab testing and ultrasonography, both during camps and primary medical consultations, have also improved, indicating greater access to diagnostic care.

Additionally, Postnatal Care (PNC) within 6 to 8 weeks has risen from 241 to 259 over the same period, showcasing a strengthened follow-up mechanism and improved maternal health support. These trends reflect the growing impact and deepening trust in the program among underserved communities.

The **number of regular check-ups conducted in gynaecologist-led OPDs** rose consistently over the three-year period, from 404 patients in FY 2022–23 to 778 in FY 2024–25. Similarly, **awareness sessions for pregnant and lactating mothers** increased from 28 sessions in FY 2022–23 to 48 sessions in FY 2024–25, with participant numbers almost doubling—from 404 to 778. These figures underscore the project's expanding reach and its growing acceptance among expectant and new mothers in underserved communities.



Expansion of Primary Healthcare Services through Community OPDs and Health Camps



The data reflects a consistent year-on-year increase in general OPD sessions, patient footfall, and focused care for chronic conditions like hypertension and diabetes. Awareness sessions, eye camps, and haemoglobin (HB) check-ups have also seen notable growth, indicating improved preventive care outreach. These trends highlight the program's strengthened capacity to deliver accessible and diversified primary healthcare services in underserved regions.

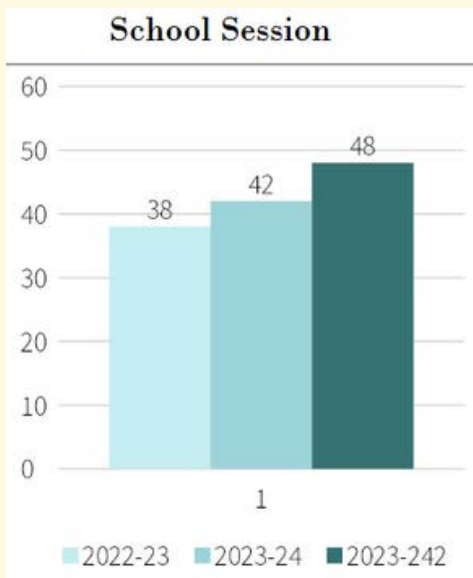
Some glimpse of the healthcare camp conducted in the localities.



Adolescent Health camp Images.



School health Images



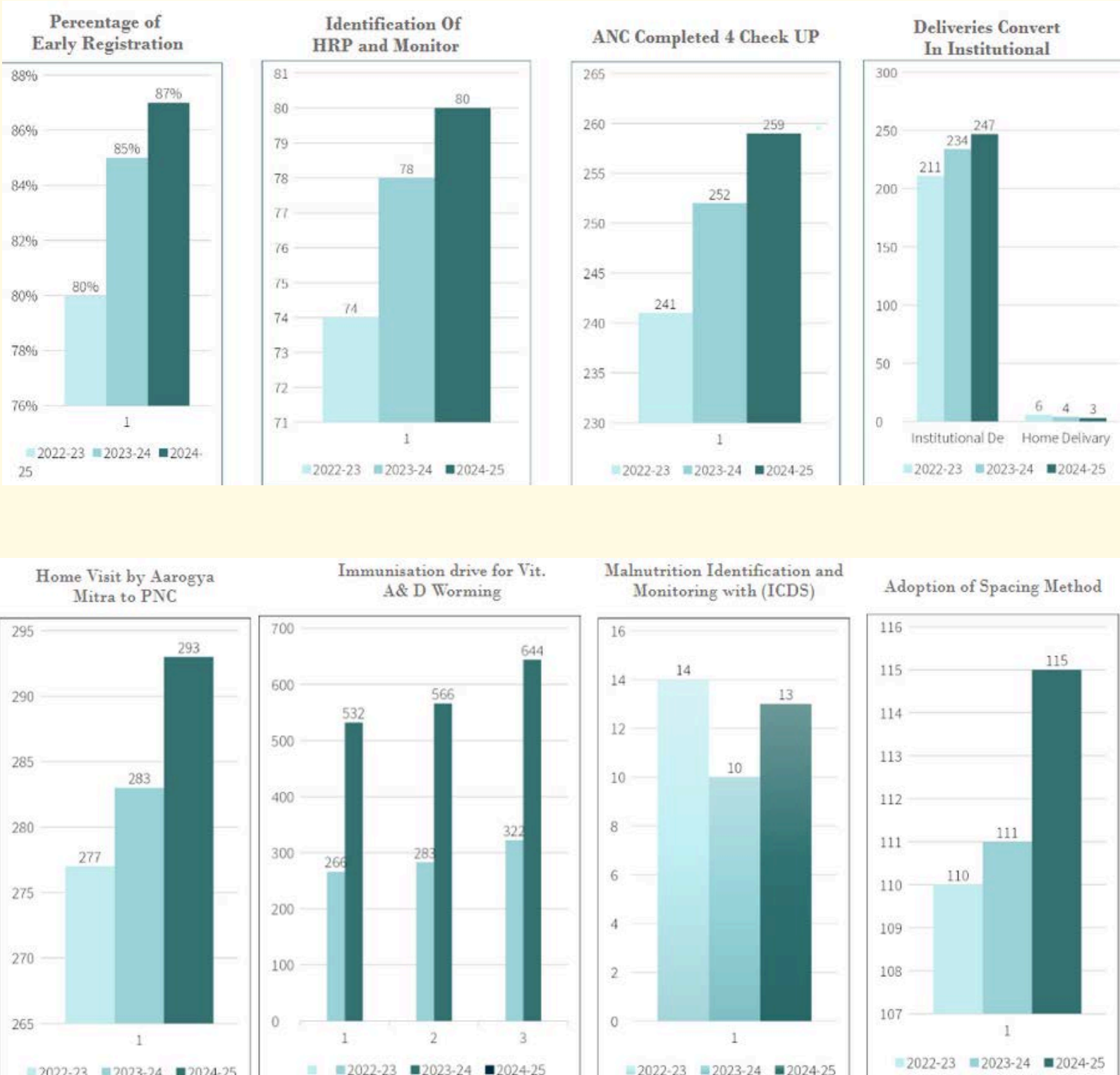
As it can be seen in the graph, that due to the NGO sessions and camps the No. of School going childrens have increased year on year.

A school activity was conducted in four schools, where area children's go

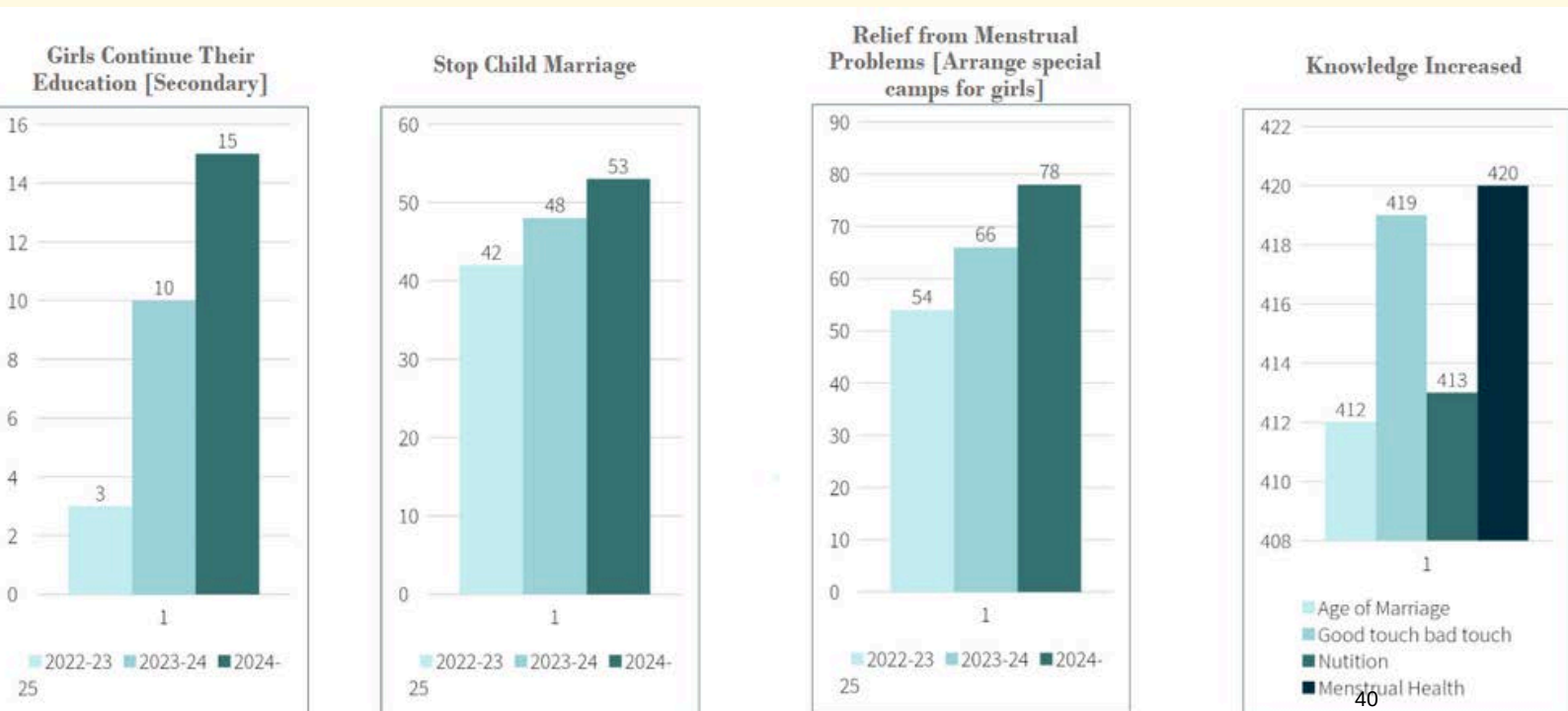
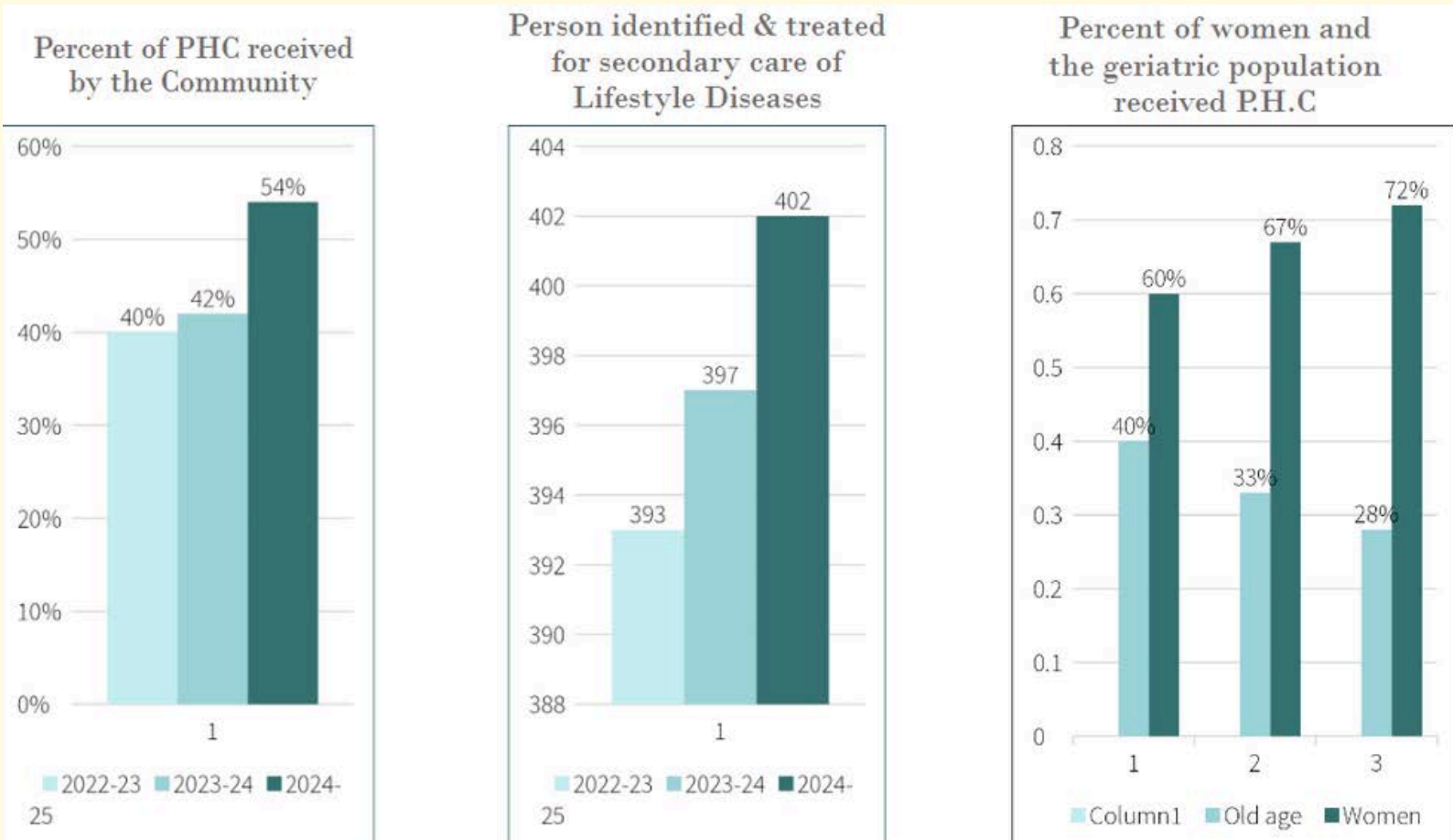


Impact of Intervention

Mother And Child Health Care Statistics

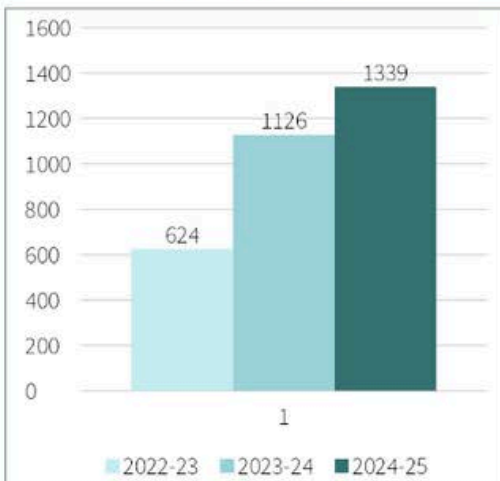


Adolescent Health statistics

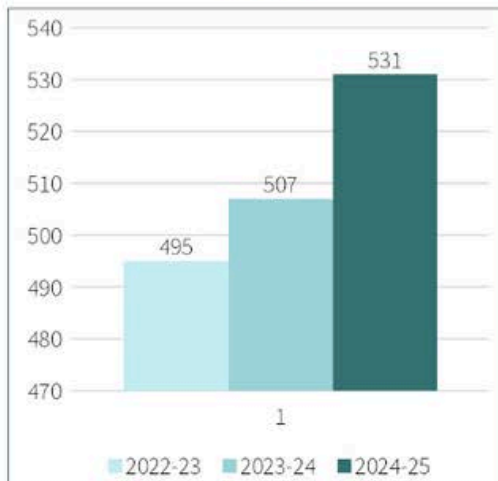


School Health Statistics

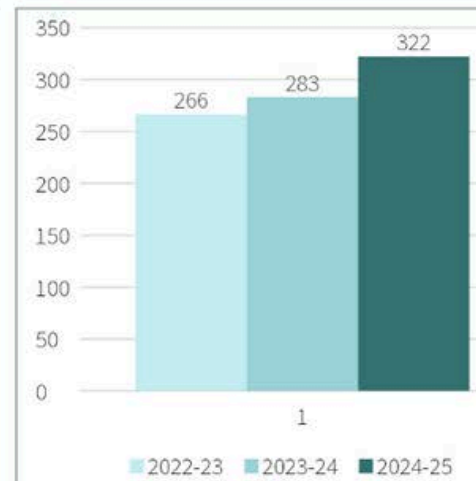
**Total number of children
Participating in the health, hygiene,
& Nutrition Session**



**No of children screened in the
health Camp for Treatment and
referral**



**Vitamin A and D warming
doses given to children**



Recommendations

Infrastructure and Equipment Support at Field Locations

Several field visits revealed limitations in terms of physical space, diagnostic equipment, and sanitation at OPD sites and community clinics. Wipro Cares, in consultation with its NGO partners, may consider providing infrastructure grants or equipment support such as BP monitors, weighing scales, hemoglobin testing kits, and mobile sonography vans, wherever required.

Enhance Digital Recordkeeping and Data Integration

A standardized digital system should be introduced for capturing patient data, OPD visits, antenatal/postnatal care records, and outreach efforts. This would allow for better longitudinal tracking of health outcomes, seamless integration with government schemes like RCH/ANM registers, and aid real-time decision-making by field coordinators and implementing agencies.

Invest in Establishing Rural Healthcare Centers and Mini-Hospitals

Wipro Enterprises may consider investing in the establishment of permanent healthcare infrastructure in underserved areas, such as Community Health Centers (CHCs), Maternal & Child Health Clinics, or Mini Hospitals in partnership with trusted NGOs or government agencies. These centers can provide essential outpatient care, maternal services, diagnostics, and basic emergency care—especially in remote regions where healthcare infrastructure is almost non-existent. Such infrastructure will leave a tangible, lasting legacy and align with the company's long-term vision for inclusive development.

Develop Mobile Medical Units (MMUs) for Outreach

To serve tribal, hilly, or inaccessible regions, Wipro Enterprises may invest in Mobile Medical Units (MMUs) equipped with diagnostic tools, medicine supplies, and teleconsultation capabilities. These vans, operated in collaboration with local health NGOs, could follow a scheduled circuit and offer primary care, ANC/PNC, and adolescent health services. MMUs offer flexibility, rapid response, and visibility for CSR outreach.

Support Infrastructure Upgrades in Existing Government Facilities

Wipro may consider allocating CSR funds toward strengthening the infrastructure of public health centres—such as Primary Health Centres (PHCs), government maternity wards, or district hospitals—by donating essential medical equipment (e.g., ultrasound machines, beds, pathology tools), improving sanitation infrastructure, or constructing waiting areas for women and children. This will demonstrate Wipro's commitment to public-private partnership in health equity.

REPORT ON IMPACT ASSESSMENT

The CSR contributions made by **Wipro Enterprises**, in collaboration with **Wipro Cares**, have continued to deliver meaningful and measurable improvements in community health outcomes. Through focused partnerships with grassroots NGOs such as the **Rural Development Institute (RDI)** in Haridwar and **Aadhar Bahuddheshiya Sanstha** in Amalner, the initiatives have extended vital healthcare services—including maternal and child health, adolescent health, and school-based wellness—to under-resourced populations across diverse geographies.

This year's impact assessment, conducted through comprehensive field visits, stakeholder interviews, and direct beneficiary interactions, revealed the **depth and reach of the interventions**. The deployment of trained **Frontline Health Workers (FLWs)**, **ASHA facilitators**, and **Arogya Mitras** has played a pivotal role in enhancing healthcare access in rural and semi-urban clusters. Primary health camps, gynaecological OPDs, nutrition counselling, sonography support for high-risk pregnancies, and health education sessions have led to measurable outcomes such as increased antenatal registrations, reduced home deliveries, and better management of chronic conditions.

The analysis—based on both **quantitative metrics** (such as service uptakes, session counts, and patient data) and **qualitative feedback**—affirms a positive behavioural shift within communities regarding preventive health practices and healthcare-seeking behaviour. Beneficiary testimonials and ground-level observations reinforce the **trust and acceptance** these programs have garnered over time.

The commitment of healthcare professionals, volunteers, and NGO teams, along with consistent CSR support from Wipro Enterprises, has facilitated the creation of localized healthcare ecosystems that are inclusive, responsive, and sustainable. These projects are not just improving health indicators—they are strengthening community resilience, building awareness, and instilling a sense of dignity and empowerment among underserved groups.

The impact assessment reaffirms that Wipro Enterprises' CSR initiatives in healthcare are aligned with the broader goal of **equitable and accessible healthcare for all**. Through integrated, collaborative, and community-led models, the efforts continue to generate a lasting and transformative impact.

For V. Sreedharan and Associates

Company Secretaries

Sd/-

(Pradeep B. Kulkarni)

Partner

FCS 7260; CP No. 7835

Date: August 07, 2025



V SREEDHARAN AND ASSOCIATES

Contact

compliance@sreedharancs.com