

# An Impact Assessment Study of CSR Initiatives of Titan Ltd.

Titan Kanya Sampoorna Program – CARE India

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### **Executive Summary**

This study aims to comprehensively and systematically assess the impact of the Titan Kanya Sampoorna CSR initiative by Titan Company Ltd. in the year FY2020-21 in collaboration with CARE India. The Titan Kanya Sampoorna Program is a multiple-thematic, holistic education program in the Cuddalore district of Tamil Nadu, for which Titan has an association with Care India.

The study relies on primary data collected from a variety of sources. Primarily, it draws upon rich insights gained from detailed, structured interviews with various stakeholders of the CSR initiatives. These stakeholders include Titan's CSR leadership team, leadership and operational teams of the implementation partners, project beneficiaries (girl-children) and their parents, community associates, school principals, and teachers engaged in the girl children's formal education, etc.

Further, the study relies on various documents, presentations, internal records, evaluation data provided by implementation partners, testimonial videos, and observations. The study also relies on reviewing the relevant extant literature on CSR in India, focusing on girl-child development.

Given the large scale and scope of CSR activities at Titan, a comprehensive impact assessment of this key CSR project has many benefits. First, it helps Titan understand the overall societal impact it is creating through its CSR spending. It also points out the areas in which improvements are possible. Finally, Titan can use this report to make suitable changes to its CSR initiatives and sever as a key input into the conceptualization and design of its future CSR initiatives to maximize its societal impact from CSR.

Overall, the impact created by the Titan Kanya Sampoorna CSR initiative was assessed on various dimensions. From the girl children's perspective, we assessed the impacts on (1) improvement in education inputs; (2) interest in education; (3) performance in education; (4) greater ambition and dreams; (5) value system; (6) positive attitude and habits; and (7) parental attitude regarding girl child education.

From the parents of the girl-child's perspective, we assessed the impact on the dimensions of (1) parental propensity toward inclusion of girl child in the program; (2) parental attitude towards education of daughters; (3) change in parental attitude towards girl-child autonomy; (4) parental perception of the impact of girl-child education; (5) parental perception of improvements in girl-child due to program; (6) changes in parental aspirations for girl-child; and (7) changes in parental perception of prospects of girl-child.

On an overall basis, our study of the impact of the Titan Kanya Sampoorna CSR program implemented in association with CARE India reveals that there has been a significant positive impact on the girl children enrolled, their parents, and the local community where they belong from. Almost all the stakeholders involved have expressed a strong desire for the program to be continued in their locality. In fact, given the highly beneficial impact, we recommend

that in the future, Titan continues the program, develops it further in terms of scope, and expands its geographical coverage to other parts of India that have similar needs.



### **Acknowledgment**

We are grateful to Titan Co. Ltd. for allowing us to work on this CSR impact assessment study. We want to express our sincere gratitude to Mr. NE Sridhar, Vice President and Head of Corporate Sustainability Titan Co. Ltd., and the entire CSR team of Titan Co. Ltd., for the opportunity to carry out this study and for their support throughout the effort. We greatly appreciate the efforts of Ms. Prathibha AN and Ms. Santhi PS from the CSR team in helping us throughout the impact assessment study.

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We want to thank Mr. R. Devabalan, Program Manager CARE, for coordinating the data collection efforts and providing the relevant detailed information on the Titan Kanya Sampoorna CSR project. Mr. Devabalan and his teammates, including Prajeesh Kumar P K, Technical Coordinator-KML&E, provided an excellent overview of the program, shared the background material and helped coordinate the data collection efforts.

Without the efforts and help of the people acknowledged herein, we would not have been able to carry out this CSR impact assessment study satisfactorily.

Yours Sincerely,

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#### 1 Introduction

Titan Industries Limited was incorporated in 1984 as a joint venture between the Tata Group and the Tamil Nadu Industrial Development Corporation Limited (TIDCO). Titan has its registered office in Hosur and a corporate office in Bangalore, in Karnataka. In addition, it has manufacturing and assembly plants located in Dehradun, Pantnagar, and Roorkee – in the state of Uttar Pradesh ("Titan Company Ltd.," n.d.).

#### 1.1 CSR at Titan Ltd.

As part of the Tata group, Titan shares the value of giving back to the community. This value system transcends the profit-making motive pervasive in businesses worldwide to include community well-being as integral to business success. Much before the advent of the mandatory CSR spending rules, Titan's commitment to social responsibility and looking after the underprivileged in society was deeply profound. The company makes a conscious effort to encourage its employees to participate in voluntary activities and ensures at least 2% employee participation in its CSR activities (*CSR Initiative | Titan Corporate*, n.d.).

Titan Company has received the 'President of India's Award' for employing the disabled. Titan Company, a signatory to the Global Compact, is a recipient of the prestigious "Helen Keller Award" and the "Mother Teresa Award". The company has been ranked with the highest rating of 4 in the 'Karmayog CSR Rating of India's Top 500 Companies' from 2007 to 2012. It has also been awarded the Golden Peacock Award on Environment Management by Frost & Sullivan. Also, Titan has received recognition from the Tamil Nadu Government as the best Company in CSR activities(CSR Initiative | Titan Corporate, n.d.).

Encouraging women has always been an integral part of business for Titan. It has been hiring and training women since 1987 to become watchmakers. The company has also extensively used self-help groups to make women more productive. This has led the company to include girls and their education as an essential part of its CSR activities. Titan has taken several initiatives to improve the lives of the poor and underprivileged in society- girl children being one of them. Titan is sponsoring various CSR projects to empower girl children.

The Titan Kanya Sampoorna program takes a holistic approach towards girl child education, nutrition, health, livelihood, and wellbeing. The Titan Sampoorna programme is being implemented with CARE India in the Cuddalore district of Tamil Nadu. It benefits about 100,744 people in 80 Gram Panchayats and 234 villages in Kattumannarkoil and Sreemushnam blocks to address the root causes of these challenges. The education interventions reach out to primary, middle and high and higher secondary schools in Keerapalayam, Kammapuram, Mangalore and Nallur blocks. This multi-sectoral project focuses on women below 35 years of age and addresses issues such as newborn and maternal health, early child development, girl leadership, and skill development for a lasting change.

The program takes support from the existing Anganwadi system of the government to ensure regular preschool education in 209 Anganwadi centers. CARE supports Anganwadi workers to conduct regular monthly mothers' meetings at the centers to educate women on basic pre- and post-natal services. The programme has improved facilities at 30 Anganwadi centers to become Model Anganwadi Centres.

The school interventions trains primary school teachers on Early Grade Reading besides developing resource materials, print-rich materials, and teaching aids to help teachers improve children's reading competency in Tamil. It has set up community libraries to help children and adolescent girls access the library in villages without reading facilities. The programme has set up Life Skill Centres were to provide employment training, jobs, career planning ability, skill referrals, and entrepreneurship training to thousands of young women.

### 1.2 Scope and objective of CSR impact assessment study

The study analyzes Titan Kanya Sampoorna initiative implemented by CARE India. For this study, the CSR impact evaluation will be performed for the project implemented in the Cuddalore district of Tamil Nadu.



### 2 Methodology

The study involves an analysis of the Titan Kanya Sampoorna schemes being implemented by CARE India. The CSR impact assessment followed a case-based methodology. Data about the CSR project was collected from various sources. The primary data required to assess the CSR project impacts were collected through video calls, telephone calls, and other online modes. This was because of the travel-related restrictions due to India's prevailing Covid-19 pandemic situation and the short time duration of the study.

First, the researchers interviewed selected members of the CSR leadership team of Titan. The discussions focused on understanding the vision of the Titan CSR leadership team. These leadership level interviews also helped the researchers get a detailed background and understanding of the CSR projects that were included in the study. All the interviews were conducted using video-conferencing facilities. The interviews were recorded wherever possible. In addition, during the interviews, the researchers took detailed notes for future reference.

The researchers identified interviewees from the partner organization, beneficiaries, and other stakeholders. They also finalize the key objectives of each interview and the interview medium. Titan's CSR team coordinators and the leadership team of partners helped schedule and set up the telephonic/ video interviews. On average, each interview lasted 20 minutes. Based on the comfort of the respondent interviewee, the interviews were conducted in either English or Hindi and translated into local languages when needed. Wherever possible, the interviews were audio-recorded for ease of reference. If the respondents were not comfortable recording, the interviewers took detailed notes during the telephone/ video calls.

A questionnaire-based survey was conducted to assess the program's impact. In all, 250 girl-children enrolled in the program responded to the questionnaire survey. The parents of the girl-children filled out a separate survey questionnaire enrolled in the program. Also, 101 parents spread across various districts where the program is being run responded to the survey questionnaire. In addition, 256 young women and mothers who were beneficiaries of the program responded to a separate questionnaire to assess the program's impact.

In addition, the Titan CSR team and its partner agencies shared qualitative and quantitative data about various aspects of the CSR initiative. This included various internal documents, presentation files, before-after photographs, internal reports, etc. The organization had organically generated this data during the planning and implementation of these initiatives.

The impact assessment of the CSR initiative followed a multidimensional approach. Two researchers independently studied the impact of each CSR initiative on seven dimensions related to the impact on the girl-children enrolled in the program, viz, (1) improvement in education inputs; (2) interest in education; (3) performance in education; (4)

greater ambition and dreams; (5) value system; (6) positive attitude and habits; and (7) parental attitude regarding girl child education.

From the girl child's parents' perspective, we assessed the impact on the dimensions of (1) parental propensity toward inclusion of girl child in the program; (2) parental attitude towards education of daughters; (3) change in parental attitude towards girl-child autonomy; (4) parental perception of the impact of girl-child education; (5) parental perception of improvements in girl-child due to program; (6) changes in parental aspirations for girl-child; and (7) changes in parental perception of prospects of girl-child.

Any differences in rating/ impact assessment among the two researchers were discussed and resolved. If required, the client was approached again to obtain greater detail or clarity to resolve any differences in opinions among the researchers. In the sections that follow, we describe the CSR initiative and analyze in detail the initiative's overall impact on various dimensions.



# 3 Titan Kanya Sampoorna Program (CARE)

The Titan Kanya Sampoorna program is a multi-sectoral intervention in Health, Education and Livelihoods, focused on women and girls. The primarily targeted beneficiaries are girls from marginalized Dalit communities to help them lead healthy and productive lives.

# 3.1 Overview of the program

The Titan Kanya Sampoorna Program through CARE India was launched in 2017 in the Cuddalore district of Tamil Nadu. Initially, CARE thought of the project as a lifecycle approach. Then realized that the project did not cover the entire lifecycle of the beneficiary. Thus, the program was redesigned as a multi-sectoral intervention. The project is unique. There are 3 distinct parts to the program. This includes livelihood, education, and healthcare of the girl child. These three are treated in a standalone way. Sometimes, there is a mix of two components based on the opportunity.

### 3.2 Need for program

Given the ground-level conditions in the Cuddalore district of Tamil Nadu, the Titan Kanya Sampoorna Program through CARE India was seen as timely and highly required. Following are the conditions that have led to the necessity of such a program.

- Low accessibility to government mechanisms: In many villages, the Anganwadi centers are located on the outskirts of villages, where mothers find it challenging to visit their children. Also, the Anganwadi centers sometimes do not find it possible to proactively reach out to all the mothers and girl children in need of their services.
- Poor maintenance: Many government facilities and Anganwadi centers lack good drinking water and sanitation facilities.
- Low awareness and consequent low utilization levels: The Anganwadi centers are tasked with providing food and nutrition supplements to young mothers and children. However, there is poor awareness about the presence of such supplementary nutrition and its benefits among the general population. Thus, young mothers and children are often reluctant to use the nutritious food provided in the Anganwadi centers. Thus, their services are underutilized.
- Overworked Anganwadi workers and school teachers: Anganwadi workers and school teachers in rural
  schools are overworked and need mentoring and ongoing training. Since the parents themselves are often
  uneducated in this region, the Anganwadi workers and teachers are more burdened with trying to provide
  support in meeting the girl children's health, education, and developmental needs.

- The low teacher-pupil ratio in government schools: A low teacher-pupil ratio makes it difficult to provide individual care, attention, and guidance to weak students. Consequently, these students remain laggards in learning, do not achieve their age-appropriate learning levels, and are often poorly educated.
- High levels of female dropout rate: Girls often drop out after the 10<sup>th</sup> standard due to accessibility issues
  and puberty. The girls drop out after the 10<sup>th</sup> class because schools are located distantly, and parents are
  reluctant to educate their girls after puberty.
- Girls' empowerment: The girl child faces many hindrances and challenges while growing up. These result in the girls becoming underconfident, unaware of their rights, and unable to seek justice. Girls are not trained in negotiation, critical thinking, and judgment to handle situations that violate their rights.

### 3.3 Aims & Objectives of the program

The overarching aim of the intervention is to achieve a systemic and lasting change among targeted beneficiaries by providing them access to critical life opportunities by enhancing their skills, capabilities, and health. Another key objective of the program is to create a thriving environment for girl children.

- To significantly improve maternal and neonatal health and nutrition behavior through effective community action;
- To improve the school readiness and learning outcomes of the children in selected ICDS and primary and upper primary schools;
- To strengthen the entrepreneurship/employability skill of adolescents and youth in the targeted villages.

The program seeks to attain these goals by pursuing the following specific objectives.

- Improving the health and nutrition of pregnant and lactating mothers
- Ensuring early childhood care by strengthening the Anganwadi system
- Building the capacity of Anganwadi workers
- Ensuring the optimal functioning of School Management Committees
- Promoting girl Leadership
- Deepening community engagement through community-level meetings
- Educating and empowering adolescent girls
- Facilitating ownership of all the stakeholders to ensure project sustainability

# 3.4 About the implementation partner

CARE India works with the most vulnerable communities, particularly girls and young women, in Srimushnam and Kattumannarkoil Block of Cuddalore district, Tamil Nadu, to address unequal power relations and gender inequality in society.

CARE India focuses on strengthening the capacities and capabilities of girls and women from vulnerable communities like the Dalits. CARE India applies multiple targeted strategies to enable and provide life-changing opportunities for girls in different age groups.

CARE India formulated preliminary project plans and engaged with relevant government stakeholders. CARE India worked with Titan to establish the required management structure and implementation processes, including recruiting project and administrative staff members. They also worked together with the Titan CSR team to develop key community-level processes for conceptualizing and designing strategies and interventions to address issues related to education, health, and livelihood activities for girl children.

#### 3.5 Program Description

The program is operational in 209 Anganwadi centers across 83-gram panchayats in 2 Blocks within Tamil Nadu. The CARE India team has a 6-member field staff who provide technical support. The program is implemented through an implementation partner NGO called REAL for frontline activities. The NGO has about 70 field staff members responsible for implementing the program. In addition, the program also placed 20 additional ad hoc teachers for academic support in high schools and higher secondary schools as subject teachers (science, mathematics, etc.).

The traditional development approaches of segregating communities and families by age have limited success in significantly changing their ability to come out of the cycle of poverty, cope with shocks, or access entitlements. Hence, a multi-sectoral approach has been followed in this project. This approach covers the target population in the age group of 0 to 35 to bring sustainable changes in families over 5 years period.

The project design looked at working together with the community and the government mechanism/ system (schools, anganwadis, etc.). The project focused on improving the living standard of girls and extending opportunities to them. This was achieved by working with the state government's education department and the Anganwadi centers.

The project team met key officials to create rapport with the Government agencies responsible for implementing essential health and education programs and ensuring their commitment to the project's scope. This includes ICDS District Project Officer, Medical Officers, PRI members, and School Headmasters.

The CARE India team members coordinated with the Medical officers, attended their monthly sectoral meetings and planned their activities jointly. The CARE India team worked with the school head masters to gather basic information about the schools and plan school improvement activities. It worked with the District Administration to secure the requisite permissions for conducting trainings, working with the ICDS, SSA, and panchayat members.

#### 3.5.1 Capacity Building Trainings

Under capacity building initiatives, the project carried out activities at two levels. One at the community level, wherein the project built the capacities of the leaders of the community-based organizations and village-level volunteers who are the project's key stakeholders. This is because the project activities will be implemented in partnership and collaboration. The other set of interventions was at the project level. The capacities of the frontline project staff and project team build on technical aspects of health, education, and livelihood to take up activities that reach the community level with shared understanding and mission.

#### 3.5.1.1 Volunteer and CBO Capacity Building

Capacity building of federation leaders: The project organized capacity-building programs for leaders of self-help groups (SHGs). The key outcomes of this were that the leaders of the federation agreed to partner and collaborate with CARE India to implement project activities besides ensuring that all three interventions (Health, Education & Livelihoods) reach out to the entire population of the village. They specifically agreed to support the project in skilling and LSC activities.

Orientation for Project volunteers: The project organized orientation programs for volunteers and leaders of SHGs from various villages. They were oriented on Kanya Sampurna project activities and strategies for mobilizing adolescent girls and youths in communities with the help of local SHG leaders. Livelihood coordinators facilitated sessions on promoting employability opportunities for youths in their villages, methods and techniques in forming groups, and conducting youth group meetings. The health coordinators spoke about the importance of Maternal Infant Young Children Feeding Practices (MYCN) and how SHGs can take leadership in promoting activities for making rural areas clean and hygienic.

### 3.6 Beneficiary segment-wise interventions

The girls are divided into various cohorts based on their ages to target specific interventions based on specific needs. These are 0-3 years, 3-6 years, 6-14 years, 14-16 years, 16-18 years, and 18+ years.

### 3.6.1 The 0-3 years cohort: Prenatal, maternal, and infant health

In the 0-3 years cohort, the main focus is on helping the mother through the pregnancy and helping the girl child's health. The focus is on strengthening maternal and nutritional support available to pregnant mothers, infants, and children. The program helps ensure that the pregnant woman is registered with the primary health center and the Anganwadi center to receive the required health and nutrition support through the government system. This includes regular health check-ups visits and getting benefits from the conditional payments scheme of the government. The objective is to ensure that each woman delivers a healthy baby. The program came up with a maternal, infant, and young child nutrition plan. When the project started, it was observed that most of the

Anganwadi workers were very new to the system. They needed the training to carry out health check-ups, weigh the infant, record various health parameters, etc.

### 3.6.2 The 3-6 years cohort: Preschool activities

In the 3-6 years cohort, the program ensures that the child who undergoes Anganwadi activity attends all the preschool activities. This helps develop cognizance and the basic concepts of math, numeracy, and literacy skills. The program also distributed pre-school educational materials among the 3-6 years old cohort. This material included learning material, charts, crayons, etc.

### 3.6.3 The 6-14 years cohort: Education, literacy, and numeracy

The program focuses on early grade reading in the 6-14 years cohort. In this, the focus is on reading the Tamil language. The program worked together with the education department and trained the primary school teachers. This helped enhance the reading capacity and capability of the children according to the age-appropriate grade. The program adopted three strategies for this. The first is the capacity building of school teachers. The children beneficiaries of the program will be benefitted through improved learning and enhanced teaching capacities of teachers. For this, an assessment was carried out on the teachers. Based on the evaluation, a core group was formed at the block level, drawing upon block-resource teachers (BRTs) whose responsibility is to train other teachers in their block. The gaps identified included that the teachers do not have teaching tools and do not have teaching-learning-material (TLM) such as posters, handbooks, activity worksheets, etc., in the Tamil language.

Also, since a majority of the primary schools had multi-grade classes, the teachers were finding it difficult to teach language by combining all the children in their primary school together. There are 1-2 teachers in a primary school in most cases. The program worked with the teachers to help them effectively teach multi-grade classrooms. The program helped the teachers prepare an activity plan for different classes. Also, the program showcased good teaching practices and helped the teachers improve their skills. By involving the BRTs, a curriculum was developed. Further, training programs were organized for the teachers by applying the BRTs. The training program was focused on using activity-based learning methods (instead of following a lecture-based method).

The simple activities designed, including, for example, a Just-a-minute activity was designed stating that the teacher should give a topic, and instantaneously, the students should be able to provide a one-minute long speech on the given topic. Earlier, teachers were very reluctant to sing and dance with the students. The program intervention encouraged them to do so and get involved. The program resulted in the girl children learning through various means such as action songs, just-a-minute activities, morning assembly, role plays, and story-telling sessions.

Also, many teachers would sit on a chair while the students had to sit on the floor. This created a divide and a distance between the students and the teacher. We tried to change the teachers mindset and got them to sit on

the floor. This would build a better bond and give the students a feeling that the teacher is someone who would support and mentor them, not a mere authority figure in the class.

The second was to develop a child-friendly learning ambiance and teaching material. The third aspect was working with the teachers to transform the classroom practices. It was understood and appreciated that each child has unique needs and their own pace of development. Thus, instead of relying only on quarterly, half-yearly, and annual exams, the program worked with the teachers and developed an assessment pattern based on which the teacher understood where each child was finding it difficult to read. This helped the teachers know whether the child had difficulty coding or decoding and found it challenging to connect the right words to form a sentence.

A school improvement and community coordinator followed up on the training sessions. They followed up on whether the teachers applied what they learned in training. Also, they tried to understand the practices that the teachers found helpful in the actual classroom environment. They identified the areas in which the teachers were struggling, and then the program team carried out regular handholding sessions and demonstrations of best practices.

The focus was on personal hygiene and menstrual hygiene sessions for girls in middle school's 6th to 8th standards. It was observed that the girls faced social stigma around menstruation. The program helped the girls prepare for menstruation, maintain a positive perception, and understand hygiene-related practices. To address these issues, adolescent girls' forums were set up to build awareness of health, sanitary and hygienic practices and strengthen their life, employment, and entrepreneurship skills by establishing life skill centers.

# 3.6.4 The 14-16- and 16-18-years cohort: Leadership, health, and nutrition

A girls ' leadership program was implemented in the 14 -16 years and 16 - 18 years age group cohort. There were many components of the girls' leadership program. This included voice, decision-making, self-confidence, organization, and vision. This was intended to help the girls reflect on who they are in society. It allowed the girls to understand issues such as gender identity, gender barriers, gender stereotyping, etc.

Further, the program provided sessions on career guidance. This helped the girls identify the differences between a career and a job. It also helped them understand how gender plays a critical role in choosing a career. The girls underwent sessions to understand various career options and were encouraged to develop a career path for themselves.

Also, community libraries were set up in rural areas (with about 300 books on various topics) to help girls develop a reading habit and improve their reading and comprehension skills. This also included books on competitive exams for entrance into further education. The program created a platform for the girls to read books from the library and share their learning. The platform was working well, especially during the Covid-19 lockdown.

Given the widespread prevalence of anemia in adolescent girl children in the region, the program also increased awareness about malnutrition among adolescent girls. The discussions with the primary health care centers helped leverage the PHCs schemes for testing iron deficiency. The program took about 700 girls to their nearest PHC and got them tested for their hemoglobin levels to identify the presence of anemia. It also led to developing a structured curriculum to help adolescent girls understand the importance of health and nutrition and how they can stay healthy. The program created a catalog of the nutritional values of locally available food items (such as local fruits and vegetables) to help the girls understand the concept of a balanced diet. The program helped the girls understand that there was no need to consume expensive food. Instead, awareness was created about various locally grown, readily available, inexpensive food options (such as green leafy vegetables, pulses, etc.), which can still result in a balanced healthy diet for the girls.

During the Covid-19 lockdown, the program introduced psycho-social care for the girls. The program field staff observed that the adolescent girls were finding it difficult to manage their emotions. Thus, the program focused on different emotions and what needs to be done to manage the emotions effectively. Generally, these sessions were held within the schools. However, during the Covid-19 lockdowns, these sessions were held in the community. There are adolescent groups formed in 83-gram panchayats. They have regular fortnightly or monthly meetings conducted and coordinated by the program's life cycle educators. A register is maintained of who attended what training and meeting. A girls' leadership index (GLI) assessment is carried out every quarter as part of the program progress measurement. The GLI is a composite index of 24 variables. The data collected is used to understand the overall progress of the girl children and the overall trends of the program. The GLI data is available for over 600 girls through a self-administered tool. The GLI data includes data about constructs such as voice, decision making, collective action, etc.

# 3.6.5 The 18+ years cohort: Employment and entrepreneurship

The program has a multi-prong approach for girls in the 18+ age group, i.e., those studying in college. For those girls who wish to get a job, the program provides career guidance, exposure visits, training on soft skills and career-related skills, and facilitation of job interviews.

The program also supports the girls with basic computer literacy and conversation skills courses. The program works with many employers in large industrial cities such as Chennai, Tirupur, Coimbatore, Trichy, etc. The program organizes job fairs for the girls. The program has secured about 4,500 job offers for the girls with an average monthly salary of about Rs. 12,000. It also runs two life-skills centers where the girls who have completed college can undergo employment-oriented training.

The women who are married, have children, and therefore, or otherwise, cannot take up employment in cities are supported by the program to take up entrepreneurship. For women who wanted to set up their own business and

needed training and credit support for the same, the program provided credit at a very inexpensive rate. A psychometric assessment is carried out on these women to identify the areas they need support to run their business. Based on the discussions, the girls are helped in creating a business plan. The training covers business fundamentals and how to run a business and keep it profitable.

It also guides women entrepreneurs to build their businesses in a step-by-step manner. The program provides loans to about 30% of the entrepreneurs in the program. The rest, 70% of girls, were helped in getting subsidized loans from the banks and the schemes of the Women Development Corporation of the government of Tamil Nadu. Wherever there is a possibility, the program links the entrepreneurs to what is available from the government system.

Overall, the program creates support for girls to lead healthy and happy lives. The program focuses on girls' health, nutrition, education, and livelihoods.

### 3.7 Impact of the program

The impact of the program is observed at multiple levels. There is a greater demand for services and support at the community level. More people are approaching the primary healthcare centers and the Anganwadi centers for taking their support. They are taking the supplementary food given by the Anganwadi centers more regularly. The community has started seeing the value in the supplementary nutrition of Anganwadi centers and has started demanding it more strongly.

The project has also helped build the skillsets and capacity of the Anganwadi workers. Before the project started, there were no regular preschool activities in close to 90 percent of the Anganwadi centers in the region. The program made a significant difference in this regard. The program made them open the center for at least up to 4 pm every day. There are at least 2 hours of preschool sessions regularly organized for the children in the Anganwadi centers.

On the education front, due to the program's interventions, the teachers are better skilled at understanding what works and does not work with the children. Assessments on the extent of learning losses have revealed that the project has slowed down the extent of learning losses in the girl children. The oral language development and vocabulary of students have improved. The girls' engagement with the print medium has gone up. The girls are better able to connect with literature and books. The girls have improved their understanding of sounds, symbols, and words. This is reflected in better phonetics awareness, phonics and letter knowledge, and improved ability to recognize words. Further, the girls have improved comprehension, language fluency, writing skills, and expression.

The program seems to have made the most significant impact on girls' adolescent phase. The girls now have a better awareness of their rights and duties, can voice their opinions and civic issues, and better understand their

career goals and ambitions. The girls' collectives that have emerged from the program have become a vibrant platform within the community. They are also better aware of their health and nutrition needs, menstrual hygiene, and other issues that impact their growth, development, and well-being.

The life skills centers have also significantly impacted the girl children. There is a greater willingness to complete their education and migrate to larger cities, searching for well-paid jobs. Earlier, most girls were reluctant to leave their villages and instead would forego employment opportunities. Now, they have a greater openness to pursue their careers and, if need be, migrate alone for the same. The intervention in building soft skills has also had a significant positive impact on the employment and entrepreneurship front. Thus far, it is estimated that the program has supported about 3,000 girls in getting job offers (in manufacturing, BPOs, hospitals, and service sectors). The average monthly salary of these girls is about Rs. 12,000 to Rs. 14,000 plus free accommodation. The program has also supported about 1,200 young women in becoming entrepreneurs.

The program works well and efficiently because it leverages existing government schemes. The program helps build awareness among the young women to access the relevant government schemes ongoing. By changing knowledge levels and creating awareness, the young women can improve themselves on an ongoing basis.

#### 3.7.1 Overall impact assessment of the program

The project is currently operational in 83 Gram Panchayats and 2 Town Panchayats impacting about 43,000 households and 234 villages. On an overall basis, over 5,000 pre-school girls benefited from the program. The benefits were related to language, cognitive, socialization, and emotional development. The program helped the girl children become ready for school. Over 25,000 girls have improved their learning outcomes, such as reading and comprehending their mother tongue (Tamil language).

The girls' leadership program has benefited about 10,000 girls to complete their education up to the 10<sup>th</sup> standard and improve their confidence level in problem-solving skills to make better choices in completing education up to high school and or continuing higher education and aspiring to a career/ economically independent.

In addition, about 3,000 young women gained employment-related skills and received job offers. Further, about 1,200 young women became entrepreneurs and set up their businesses through the program interventions.

We assessed the program's impact on the two key stakeholders, i.e., the girl-child enrolled in the program and the parents. The quantitative and qualitative assessment of the program's impact is described in the following sections.

### 3.7.2 Impact of program interventions on the girl-child

The impact of the program interventions is seen on various dimensions. These include (1) improved educational inputs; (2) Increased interest in education; (3) Performance in education; (4) Greater ambition and dreams; (5)

Value system; (6) Positive attitude and habits; and (7) Girl-child's perception of changes in parental attitude. These impacts are described in detail below.



Figure 1: Beneficiaries of Titan Kanya Sampurna Project - CARE India

#### 3.7.2.1 Improved educational inputs

First, we evaluated improvement in educational inputs. The LC provides additional academic inputs that complement the girls' inputs from the school they are enrolled in. If the girls were already delighted with the school education, they would have been reluctant to attend the sessions at the LC. Thus, we probed whether the girls found the educational inputs at the LC to be better than those received in the school. An overwhelming 80% of girls (strongly agree) report that they go to the LC because it provides a better education than the school. 17% of girls agree with the statement. Only 1% of girls disagree or strongly disagree that they go to the LC because the LC provides a better education than the school.

To help in the holistic development of the girls, the LC also involves them in sports activities from time to time. To assess whether this encourages the girls to attend the LC, we sought to understand whether access to sports

activity was a reason for them to attend the LC sessions. As seen in Table 1Error! Reference source not found., 35% of girls (strongly agree) and 20% (agree) report that they go to the LC because they enjoy playing sports. 24.5% of girls (strongly disagree) and 15% (disagree) note that they do not go to the LC because they enjoy playing sports. 5% offer no opinion.

Table 1 - CARE India - Improved educational inputs

| Improved educational inputs  | 1   | 2   | 3  | 4   | 5   |
|--|-----|-----|----|-----|-----|
| I go to the center because the center provides a better education than my school | 0%  | 1%  | 2% | 17% | 80% |
| I go to the center because I enjoy playing sports                                | 24% | 15% | 5% | 20% | 35% |
| When I go to the center, I learn new things                                      | 0%  | 0%  | 0% | 18% | 82% |
| When I go to the center, I have a lot of fun                                     | 6%  | 10% | 3% | 24% | 57% |
| My school will be much better for me if there is activity-based learning         | 6%  | 6%  | 5% | 28% | 55% |
| My school would be much better for me if my school had more sports &             |     |     |    |     |     |
| extracurricular activities   | 3%  | 6%  | 8% | 28% | 55% |
| My school will be much better for me if my school has computer-based learning    | 9%  | 9%  | 8% | 21% | 53% |
| Average  | 7%  | 7%  | 4% | 22% | 60% |
| Maximum  | 24% | 15% | 8% | 28% | 82% |

The LC sessions help the girls learn new things, including input on current affairs and general knowledge topics. This motivates the girls to attend the LC. 81.5% (strongly agree) and 18.5% (agree) report that they go to the center because they learn new things. Almost none do agree. The educational inputs provided at the LC are activity-oriented. This helps the girls have fun while learning and keeps them engaged. 57% (strongly agree) and 23.5% (agree) report that they go to the center because they have fun. 6% of girls (strongly disagree) and 10% (disagree) note that they do not go to the center because they will have fun.

One of the reasons the LC attracts the girls is that it provides opportunities to be involved in activity-based learning, sports, and extracurricular activities. About 55% (strongly agree) and 28.5% (agree) report that their school would be much better if activity-based learning were. 6% of girls (strongly disagree) and 5.5% (disagree) note that their school would not be much better had there been activity-based learning. 5% offer no opinion. About 55% (strongly agree) and 28% (agree) report that their school would be much better had their school provided more sports & extracurricular activities. 3% of girls (strongly disagree) and 6% (disagree) report that their school would not be much better had it provided more sports & extracurricular activities. 8% of girls offer no opinion.

In some of the LCs, computer-based or tab-based learning was offered. This was found to be very useful and enjoyable by the girls. 53% (strongly agree) and 21% (agree) report that their school would be much better if it had

provided computer-based learning. 9% of girls (strongly disagree) and 9% (disagree) note that their school would not be much better if it had provided computer-based learning. 7.5% offer no opinion.



Figure 2: Zoom based video interviews with beneficiaries of the Titan Kanya Sampurna CARE India program

#### 3.7.2.2 Increased interest in education

Secondly, we evaluated whether the activities increased interest in education among the girls enrolled in the program. This helps us understand how the program affects the girls' interest in education. If the girls develop a keen interest in education through the program's interventions, they will be motivated to continue their education and study further. In our assessment, an overwhelming 75% (strongly agree) and 21% (agree) report that they go to the center because the center teacher is better than their school teacher. Further, as seen in Table 2, 81% (strongly agree) and 17% (agree) report that they go to the center because they are interested in studies.

Personal attention given by the teachers at the LC was another reason why the girls found going to the LC useful. In our survey, 63% (strongly agree) and 26.5% (agree) report that they go to the center because they get personal attention and help there. The activities at the center help the girls revise the concepts that they have learned in school. This allows them to clear their doubts and be more thorough in their studies. In the study, about 45% (strongly agree) and 24.5% (agree) report that they go to the center because they can practice what they learned at that school. 46% (strongly agree) and 26% (agree) report that their school will be much better if their school teacher pays more individual attention to them. About 11% of girls (strongly disagree) and 9.5% (disagree) report

that their school will not be much better if their teacher pays more individual attention to them. Only a minuscule 7% of girls remain unsure.

Table 2: CARE India - Increased interest in education

| ncreased interest in education   | 1   | 2           | 3  | 4   | 5   |
|--|-----|-------------|----|-----|-----|
| go to the center because the center teacher is better than my school teacher   | 0%  | 1%          | 3% | 21% | 75% |
| go to the center because I am interested in studies                            | 0%  | 0%          | 1% | 17% | 81% |
| When I go to the center, I get personal attention and help                     | 4%  | 4%          | 2% | 26% | 63% |
| When I go to the center, I can practice what I learned at school               | 14% | 10%         | 6% | 24% | 45% |
| My school will be much better for me if my school teacher pays more individual |     | 200000 2000 |    |     |     |
| attention to me  | 11% | 10%         | 7% | 26% | 46% |
| I try to do different things in my spare time                                  | 6%  | 4%          | 8% | 42% | 41% |
| Average  | 6%  | 5%          | 5% | 26% | 59% |
| Maximum  | 14% | 10%         | 8% | 42% | 81% |

Going to the center has also helped the girls become creative and curious. In our study, 41% (strongly agree) and 42% (agree) report that they try to do different things in their spare time, indicating increased curiosity and creativity. 6% of girls (strongly disagree) and 3.5% (disagree) report that they do not try to do different things in their spare time. 7.5% of girls remain unsure.

#### 3.7.2.3 Improved performance in education

Thirdly, we assessed whether the program's activities had led to improvement in the girls' performance in education. Typically, the girls enrolled in the program come from poor and backward families. One clear indicator of the impact is based on the girls' performance in their class at school. In our study, as seen in Table 3, about 41% of the students enrolled at the center reported that they were among the toppers in their class in the school. About 51% rated themselves above average, 5.5% below average, and none considered poor. While our study did not cover other students enrolled in schools (but not part of the Titan program), the program has had a significant and positive impact on the performance in education among the enrolled girls.

Another perspective on the impact on performance in education is whether the girls enrolled in the program improve their performance over time. Hearteningly, about 51% reported that their ranking in their class in the school improved significantly (very much) after they started coming to the center, 45% said that their ranking in their class in the school showed some improvement after they started coming to the center. In comparison, 3% reported no or slight improvement.

Table 3: CARE India - Performance in Education

| Performance in Education               | Not<br>sure | Poor | Below<br>average   | Above average<br>in class  | Among the toppers in class |
|--|-------------|------|--|--|----------------------------|
| I rate my own performance in my school |             | 0%   | 6%   | 51%  | 41%                        |
| class as                               |             |      | and the second s | many was to a man annual commence of the comme | 00100 AV AV A ST           |

| ACTIVITY OF THE PARTY OF THE PA | Not<br>sure | No<br>improvement | Not much improvement       | Some<br>improvement  | Very much improvement |
|--|-------------|-------------------|----------------------------|--|-----------------------|
| My ranking in my school class improved   | 1%          | 0%                | 3%                         | 45%  | 51%                   |
| after I started coming to the center   |             |                   | anus articles and a second | QUEST TO THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER OW |                       |

|                                      | Not<br>sure | 0-30% marks | 31-50%<br>marks | 51-75% marks | More than 75%<br>marks |
|--------------------------------------|-------------|-------------|-----------------|--------------|------------------------|
| In last year's exam in school, I got | 0%          | 0%          | 10%             | 48%          | 42%                    |

In a good indication of the improved performance in education, about 42% of students report that they got more than 75% marks in the last year's exam in school. About 48.5% report getting between 51 to 75% marks in the school they went to last year. Only 9.5% of students did not perform well as they got between 31% and 50% marks in the school examination. Almost none of the students scored in the 0-30% range or were not sure of their performance in the examination.

#### 3.7.2.4 Greater ambition and dreams

Fourth, we evaluated the sense of ambition and dreams of doing well in their lives due to their experience at the center. The premise is that if the activities of the program help develop greater ambitions and dreams among the girl children, they will be motivated to work hard, study further, take up livelihood opportunities, and improve their own and family's wellbeing.

We looked at various reasons why girls might discontinue their formal education to assess the situation. Our assessment revealed that most girls have developed ambition and dreams about their future due to the program's interventions. They are willing to study further and work hard to achieve these dreams. As seen in Table 4, about 10% (strongly agree) and 15% (agree) report that several girls drop out of school because they get married. 3% did not have any particular idea about the significance of the problem, and hence they neither agreed nor disagreed. 56% (strongly disagree) and 15.5% (disagree) report that it is not the case that several girls are dropping out of school because they are getting married.

Often girls in rural areas are expected to help their families with agricultural work instead of studying in school. In our study, about 7.2% (strongly agree) and 13% (agree) report that many girls drop out of school because they have to work on farms. 5% did not have any particular idea about the significance of the problem, and hence they neither agreed nor disagreed. 59% (strongly disagree) and 17% (disagree) report that it is not the case that several girls are dropping out of school because they have to work on the farms.

Table 4: CARE India - Greater ambition and dreams

| Greater ambition and dreams   | 1   | 2   | 3  | 4   | 5   |
|---|-----|-----|----|-----|-----|
| Many girls drop out of school because they are getting married                    | 56% | 16% | 3% | 15% | 10% |
| Many girls drop out of school because they migrate to the city with their parents | 55% | 15% | 5% | 15% | 10% |
| Many girls drop out of school because they have to work on the farms              | 59% | 17% | 4% | 13% | 7%  |
| Many girls drop out of school because they have to take care of younger           |     |     |    |     |     |
| brothers/sisters at home  | 64% | 16% | 3% | 8%  | 8%  |
| Many girls drop out of school because of family problems                          | 56% | 16% | 7% | 12% | 9%  |
| I want to do better in every aspect of life                                       | 0%  | 0%  | 1% | 37% | 62% |
| Average   | 48% | 13% | 4% | 17% | 18% |
| Maximum   | 64% | 17% | 7% | 37% | 62% |

8.5% (strongly agree) and 8.5% (agree) report that many girls drop out of school because they have to care for younger brothers or sisters at home. 3% did not have any particular idea about the significance of the problem, and hence they neither agreed nor disagreed. 64.5% (strongly disagree) and 16% (disagree) report that it is not the case that several girls are dropping out of school because they have to take care of younger brothers or sisters at home.

Family problems, such as health issues in the family, economic issues, loss of job of the bread-earner, etc., also lead to dropping out of school among the girl children. In our study, about 9% (strongly agree) and 12% (agree) report that several girls drop out of school because of family problems. Again, about 3% did not have any particular opinion about the significance of the problem. 56.5% (strongly disagree) and 15.5% (disagree) report that it is not the case that several girls are dropping out of school because they have to take care of younger brothers or sisters at home.

About 61.5% (strongly agree) and 37% (agree) report that they want to do better in every aspect of life. In comparison, almost none (less than 1%) said they do not want to do better in every aspect of life. 1% of girls were not sure.

About 33.5% of girls report that they want to become a doctor, 31% of girls want to become a teacher, 27.5% want to take a salaried job. About 4.5% of girls want to start their own business. There is a clear preference for professional salaried jobs among young girls enrolled in the center. None of the girls wants to become a housewife and run her household.

#### 3.7.2.5 Impact on the value system of girl-child

Fifth, we evaluated the value system of girls influenced by their experience at the center. Apart from helping the girls learn various subjects such as math, English, and science, the activities and instructions in the Titan program also help improve the value system of the girls enrolled. This has a very positive impact on society. We assessed the

girls enrolled in the program on various values and found that there has been a significant positive impact in this regard.

For instance, as seen in Table 5Error! Reference source not found., about 75.5% (strongly agree) and 17.5% (agree) report that they have become a more honest person. Less than 1% disagreed, and 6% had no opinion. We assessed whether the girls had become better team players due to the studies, extracurricular activities, and sports they took in the Titan program. We find that around 75% (strongly agree) and 21% (agree) report that they work well with their friends. About 1% disagreed that they work well with their friends. 3% had no opinion.

Table 5: CARE India - Impact on the value system of girl-child

| Impact on the value system of girl-child   |   | 1  | 2  | 3  | 4   | 5   |
|--|---|----|----|----|-----|-----|
|  |   | 0% | 1% | 6% | 18% | 76% |
|  | A 111100-10 1 10 10 10 10 10 10 10 10 10 10 10 10 | 1% | 0% | 3% | 21% | 75% |
|  | 2000 C C C C C C C C C C C C C C C C C C          | 0% | 0% | 3% | 17% | 79% |
| The second secon | A AV OUR MANAGEMENT OF A SAME                     | 1% | 1% | 4% | 30% | 64% |
| I flave become more carera, in following raise   | Average   | 1% | 1% | 4% | 21% | 73% |
| ct on the value system of girl-child become a more honest person well with my friends willing to work hard to succeed become more careful in following rules   | Maximum   | 1% | 1% | 6% | 30% | 79% |

Another key value is that of willingness to work hard to succeed. It shows the inclination of the girls to put in the efforts required to achieve success in their life. We find that about 80% (strongly agree) and 17% (agree) report a willingness to work hard to succeed. Less than 1% disagreed that they are unwilling to work hard to succeed. 3% had no opinion.

Another key ingredient in the value system is to become a good citizen who is disciplined and follows the rules in any context. In our study, we were happy to find that over 64% (strongly agree) and 30.5% (agree) report that they have become more careful in following rules. About 2% disagreed that they have not become more careful in following rules. 3.5% did not have any particular idea about the change in their outlook towards following rules.

#### 3.7.2.6 Positive attitude and habits

Sixth, we evaluated the positive attitude and habits influenced by girls' experiences at the center. Our assessment focused on the girls' good habits by being part of the Titan program. These good habits include being punctual and regular attendance at the center and school. As seen in Table 6, 67.5% (strongly agree) and 24.5% (agree) report that they try their best to reach the center every day. Very few (less than 2.5%) disagreed. 5.5% did not have any particular idea about the change in their outlook towards punctuality.

Also, it was heartening to see that 71% (strongly agree) and 22% (agree) report that they try their best to go to the center regularly. Almost none disagreed, and 6% did not have any particular idea about the change in their outlook towards regularly attending the center.

Table 6: CARE India - Positive attitude and habits

| B. W. attitude and babits  |  | 1  | 2   | 3  | 4   | 5                                       |
|--|--|----|-----|----|-----|---|
| Positive attitude and habits   |  | 0% | 2%  | 6% | 24% | 68%                                     |
| I try my best to reach the center on time every day                    |  | 0% | 1%  | 6% | 22% | 71%                                     |
| I try my best to go to the center regularly                            | In the second se | 2% | 2%  | 0% | 22% | 74%                                     |
| I try my best to reach my school on time every day                     | and the second s | 2% | 0%  | 2% | 18% | 78%                                     |
| I try my best to go to my school regularly                             | JANNA HARMININ O   |    |     | 4% | 25% | 60%                                     |
| I feel that girls and boys should receive equal treatment from parents |  | 7% | 5%  |    |     | 47%                                     |
| I feel more comfortable speaking in public                             |  | 7% | 12% | 6% | 29% | *************************************** |
| I feel more comfortable in expressing my opinion                       |  | 3% | 8%  | 6% | 32% | 51%                                     |
|  | Average  | 3% | 4%  | 4% | 25% | 64%                                     |
|  | Maximum  | 7% | 12% | 6% | 32% | 78%                                     |

74% (strongly agree) and 21.5% (agree) report that they try their best to reach the school on time every day. 4% disagreed that they try their best to reach the school on time every day. This indicates that the Titan program positively and strongly impacts the girls enrolled.

Further, about 78% (strongly agree) and 17.5% (agree) report that they regularly try their best to go to school. Very few (2%) disagreed, and a minuscule 0.4% did not have any particular idea about the change in their outlook towards attending the school regularly.

We also assessed whether there was any change in the girls' orientation and expectations towards how they should be treated by their parents, especially in comparison with their male siblings. About 60% (strongly agree) and 25% (agree) report that they feel that girls and boys should receive equal treatment from parents. 7% (strongly disagree) and 5% (disagree) report that they think that girls and boys should not receive equal treatment from parents. 3.6% did not have any particular idea about the need for equal treatment from parents.

Another positive impact of the Titan program is that the girls enrolled are much more confident, comfortable than before in expressing themselves and speaking in public. About 47% (strongly agree) and 29% (agree) report feeling more comfortable speaking in public. 7% (strongly disagree) and 11.5% (disagree) report that they feel more comfortable speaking in public. 51% (strongly agree) and 23% (agree) report feeling more comfortable expressing their opinions. 10% did not feel any particular comfort or discomfort expressing their opinion. 6.5% were unsure about the impact. Similar views about the beneficial effect of the Titan program on developing positive habits and attitude among the enrolled girls was also expressed by the respondents in our qualitative interviews.

# 3.7.2.7 Girl-child's perception of changes in parental attitude

We also assessed whether the Titan program had led to the girls experiencing any changes in the attitude of their parents, especially concerning the support they would provide for the education of the girl-child. We are happy to report that, as seen in Table 7, about 32% (strongly agree) and 15.5% (agree) report that they go to the center because their parents asked them to go to the center. 39% (strongly disagree) and 10.5% (disagree) report that they do not agree with the critical role played by their parents in sending them to the center. 3% offered no conclusive opinion. This indicates that the girls understand that their parents see value in sending the girls to the Titan program learning center.

About 68% (strongly agree) and 26% (agree) report that their parents will pay for my further education. Only about 7% of girls failed to conclude whether their parents would pay or not pay for their education. Very few (3.5%) do not agree with the important role played by their parents in sending them to the center. About 2% of girls remain unsure whether their parents will pay or not pay for their education.

Table 7: CARE India - Girl-child's perception of changes in parental attitude

|     | -                             |  | The second second   | No. of Section   |
|-----|-------------------------------|--|---|--|
| 1   | 2                             | 3  | 4   | 5  |
| 39% | 10%                           | 3%   | 16%   | 32%  |
| 2%  | 2%                            | 2%   | 26%   | 68%  |
| 0%  | 0%                            | 3%   | 28%   | 69%  |
| 14% | 4%                            | 3%   | 23%   | 56%  |
| 39% | 10%                           | 3%   | 28%   | 69%  |
| 29% | 21%                           | 5%   | 20%   | 25%  |
|     |                               |  |   |  |
|     | 39%<br>2%<br>0%<br>14%<br>39% | 39% 10%<br>2% 2%<br>0% 0%<br>14% 4%<br>39% 10% | 39% 10% 3%<br>2% 2% 2%<br>0% 0% 3%<br>14% 4% 3%<br>39% 10% 3% | 39%     10%     3%     16%       2%     2%     26%       0%     0%     3%     28%       14%     4%     3%     23%       39%     10%     3%     28% |

An overwhelming majority of the girls perceive that their parents encourage them to pursue their education. About 69% (strongly agree) and 28% (agree) report that their parents encourage them to pursue their education. Less than 1% do not agree that their parents discourage them from pursuing their education. About 3% of girls remained inconclusive that their parents encouraged them to pursue their education.

Many studies have revealed differences in parental attitudes regarding their treatment of male and female children in the family in India. To assess whether the Titan program had made any change in this regard, we sought to understand from the girls enrolled in the program whether they perceive such gender-based biases. We are happy to report that about 25% (strongly disagree) and 20% (disagree) report that their parents give their brothers better education than them. In contrast, about 29% (strongly agree) and 21% (agree) report that their parents give their brothers better education than them. About 15% of girls failed to conclude that their parents give their brothers better education than them.

The girls also perceive that their parents are encouraging their education because of the parent's interest in day-to-day educational tasks such as completing homework. Our study found that about 26.5% of girls say that their parents always check their homework, 16.5% report that parents regularly check their homework, and 45% say that parents sometimes check their homework. Only about 12% of girls report that their parents never check their homework.

# 3.7.3 Impact of the program on parents of girl-child

The impact of the program interventions on the parents of the girl-child is seen on a variety of different dimensions. These include (1) Parental propensity toward inclusion of girl child in the program; (2) Parental attitude towards education of daughters; (3) Change in parental attitude towards girl-child autonomy; (4) Parental perception of the impact of girl-child education; (5) Parental perception of improvements in girl-child due to program; (6) Changes in parental aspirations for girl-child; and (7) Changes in parental perception of prospects of girl-child. These impacts are described in detail below.

### 3.7.3.1 Parental propensity toward inclusion of girl child in the program

First, we evaluate the motivation of parents to send their daughters to the Titan program. The benefit of enrolling their daughter in the Titan program seems to be very clear to the parents. As seen in Table 8, an overwhelming 79% (strongly agree) and 18% (agree) of parents report sending their daughter to the center because they feel the center provides a better education than her school. A negligible proportion of patents do not agree. 83% (strongly agree) and 16% (agree) of parents report sending their daughter to the center because they feel she learns more at the center. 69.5% (strongly agree) and 26% (agree) of parents report that going to the center has helped their daughter perform better in studies at school.

Table 8: CARE India - Parental propensity toward inclusion of girl child in the program

|  | 4100 | 2  | 3        | 4   | 5   |
|--|------|----|----------|-----|-----|
| Parental propensity toward inclusion of girl child in the program  |      |    | ALC: NOT |     | -   |
| I send my daughter to the center as it provides a better education than her  |      |    |          |     |     |
| school   | 0%   | 3% | 0%       | 18% | 79% |
| I send my daughter to the center as I feel she learns more at the center   | 0%   | 0% | 1%       | 16% | 83% |
| I send my daughter to the center as Fleel she learns more at the center.  I feel that going to the center has helped my daughter perform better in studies |      | 1% | 2%       | 26% | 69% |
| Average  | 1%   | 1% | 1%       | 20% | 77% |
| Maximum  | 2%   | 3% | 2%       | 26% | 83% |

Another positive impact that the Titan program has had on the parents' perception is that about 65% of parents report "very much improvement" in their daughter's ranking in school class after she started going to the center in our study. In comparison, 33% of parents reported "some improvement" in their daughter's ranking in school class

after she started going to the center. 2% of parents are unsure, and almost none of the parents report "no improvement."

### 3.7.3.2 Parental attitude towards education of daughters

Second, we evaluate the change in parental attitude towards daughters' education. We find an overwhelming 76% (strongly agree) and 23% (agree) of parents report sending their daughter to the center because it has helped them understand that their daughter should pursue higher education (see Table 9). A negligible proportion of parents do not agree. We find that an overwhelming 78% (strongly agree) and 21% (agree) of parents report that sending their daughter to the center has made them encourage their daughter to study further. Only a negligible proportion of parents do not agree with this view. 79% (strongly agree) and 19% (agree) of parents report that the center has helped them understand that higher education will help improve their daughter's prospects in life. Only a negligible proportion of parents do not agree with this view.

Table 9: CARE India - Parental attitude towards education of the daughter

| Parental attitude towards education of the daughter   | 1   | 2  | 3  | 4   | 5   |
|---|-----|----|----|-----|-----|
| Parental attitude towards education of the dadgrice.  The center has helped me understand that my daughter should pursue higher education | 1%  | 0% | 0% | 23% | 76% |
| The center has helped me understand that my daughter should pursue maner to study further Sending my daughter to study further            | 1%  | 0% | 0% | 21% | 78% |
| The center has helped me understand that higher education will help improve my daughter's prospects in life                               | 0%  | 0% | 2% | 19% | 79% |
| n general, parents of girls going to the center are more likely to encourage their daughters to study further                             | 0%  | 1% | 0% | 30% | 69% |
| n general, parents of girls going to the center are more likely to encourage their daughters to pursue jobs after education               | 5%  | 0% | 1% | 30% | 64% |
| I try to ensure that my daughter visits the center each day   | 6%  | 5% | 5% | 23% | 61% |
| feel that it would be a problem if my daughter did not learn to read or write   | 20% | 8% | 6% | 22% | 45% |
| feel that daughters and sons should receive equal treatment from parents  | 2%  | 2% | 1% | 18% | 779 |
| Average   | 4%  | 2% | 2% | 23% | 69% |
| Maximum   | 20% | 8% | 6% | 30% | 79% |

1: Strongly Disagree; 2: Disagree; 3: Neither Agree nor Disagree; 4: Agree; 5: Strongly Agree

69% (strongly agree) and 30% (agree) of parents report that other parents are more likely to encourage their daughters to study further. 64.5% (strongly agree) and 30% (agree) of parents report that other parents are more likely to encourage their daughters to pursue jobs after education. However, about 5% of parents disagree.

Another indicator that the Titan program is having a positive impact on the girls is basis the propensity of the parents to encourage the girls to attend the center's activities daily. Our study found that about 61.5% (strongly agree) and 23% (agree) of parents report that they try to ensure that their daughter visits the center each day. 6% (strongly disagree) and 5% (disagree) of parents report that they do not try to ensure that their daughter visits the center each day. About 5% of parents are unsure about their role in sending their daughters to the center each day.

Due to the interventions of the Titan program, the parents are more aware of the importance of literacy, numeracy, and education in the lives of their girl-child. 44.5% (strongly agree) and 22% (agree) of parents report that they feel that it would be a problem if their daughter does not learn to read or write. About 20% (strongly disagree) and 8% (disagree) of parents report that it would not be a problem if their daughter did not learn to read or write. A small 6% of parents are unsure about the benefits of reading or writing.

There also seems to be a shift in the parents' attitude towards providing equal treatment for their male and female children. Our study found that about 77% (strongly agree) and 18% (agree) of parents report that they feel that daughters and sons should receive equal treatment from parents. A small 4% of parents do not agree with this view, and less than 1% remain unsure that daughters and sons should receive equal treatment from parents.

In all of these dimensions, a negligible (less than 1%) of parents report that they disagree. Thus, the Titan program has had a positive impact on the parental attitude toward the education of their girl-child.



Figure 3: Video interviews with parents of beneficiaries of the Titan Kanya Sampurna CARE India program

# 3.7.3.3 Change in parental attitude towards girl-child autonomy

Third, we evaluate the extent to which parents have undergone attitude changes to give autonomy to daughters. This is a very important dimension in the assessment of the Titan program. Unless the girl-child has autonomy, she would not be able to make significant decisions for herself. She would also be constrained from implementing any significant decisions that affect her personally.

In this regard, we probed the parents on their attitude toward key decisions such as the marriage of the girl child, job-related choices, and location of stay-related decisions. As seen in Table 10, 41.5% (strongly agree) and 19% (agree) of parents report that they are okay if their daughter marries someone. In contrast, about 24% (strongly disagree) and 10% (disagree) report that they are not OK if their daughter marries someone of her own choice. About 6% of parents remain unsure that their daughter should marry someone of her choosing.

Table 10: CARE India - Change in parental attitude towards girl-child autonomy

| ubic 10. Critic mans   |  |   |                 |     |     |
|--|--|---|-----------------|-----|-----|
| Change in parental attitude towards girl-child autonomy  | 1  | 2   | 3               | 4   | 5   |
| am okay if my daughter marries someone of her own choice   | 24%  | 10%   | 6%              | 19% | 42% |
| am okay if my daughter marries someone from a different caste  | 44%  | 8%  | 8%              | 17% | 24% |
| am okay if my daughter takes up a job outside my village   | 7%   | 2%  | 4%              | 21% | 66% |
| am okay if my daughter takes up a job outside my mag.<br>I am okay if my daughter has to live away from her family in a city to pursue a | and the same of th | THE COLUMN TWO IS NOT | AND COMMENTS OF |     |     |
|  | 8%   | 1%  | 3%              | 23% | 65% |
| job Average  | 21%  | 5%  | 5%              | 20% | 49% |
| Maximum  | 44%  | 10%   | 8%              | 23% | 66% |

The project activities don't focus on altering parents perception about inter caste marriage. However 41% parents agreeing for allowing their girls to marry outside of their caste itself a great positive social development. As seen in Table 10, about 24% (strongly agree) and 17% (agree) of parents that they are okay if their daughter marries someone from a different caste. Our study found that about 43.5% (strongly disagree) and 8% (disagree) of parents report that they are not okay if their daughter marries someone from a different caste. About 8% of parents remained unsure whether their daughter should marry someone from a different caste.

Equally important is to understand whether the girl-child has the autonomy to decide what work to take up and whether to live away from family to pursue her employment prospects. In this regard, the Titan program seems to have made a significant positive impact. Our study found that approximately 66.5% (strongly agree) and 21% (agree) of parents report that they are okay if their daughter takes up a job outside the village. 7% (strongly disagree) and 21% (agree) of parents report that they are not okay if their daughter takes up a job outside the village. However, a significant 11% remain unsure about the benefits.

Also, about 65.5% (strongly agree) and 23% (agree) of parents report that they are okay if their daughter has to live away from her family in a city to pursue a job. 8% (strongly disagree) and 1% (agree) of parents report that they are not okay if their daughter has to live away from her family in a city to pursue a job. 3% remain unsure about the benefits.

# 3.7.3.4 Parental perception of the impact of girl-child education

Fourth, we evaluate the perceived impact of engaging with the center on parental opinion about the importance of girl education and old social views on early marriage. As seen in Table 11, about 39% (strongly disagree) and 21% (disagree) of parents report that educating their daughter beyond school will not lead to difficulty getting her married. In contrast, about 21% (strongly agree) and 14% (agree) report that educating their daughter beyond school will lead to difficulty getting her married. About 6% of parents remain unsure.

Table 11: CARE India - Parental perception of the impact of girl-child education

| Parental perception of the impact of girl-child education  | 1   | 2   | 3 // | 4   | 5   |
|--|-----|-----|------|-----|-----|
| Educating my daughter beyond school will lead to difficulty in getting her married                         | 39% | 21% | 6%   | 14% | 21% |
| Educating my daughter beyond school will make it more likely that she will marry someone of her own choice | 25% | 19% | 8%   | 20% | 29% |
| Educating my daughter beyond school will cause unnecessary expenses for me                                 | 38% | 15% | 5%   | 23% | 20% |
| Educating my daughter beyond school will make her disinterested in domestic work chores                    | 34% | 19% | 9%   | 17% | 22% |
| My community/caste feels that there is no benefit to educating girls                                       | 33% | 12% | 8%   | 23% | 25% |
| Educating my daughter beyond school will put more social pressure on my family                             | 43% | 17% | 6%   | 21% | 14% |
| Most of my relatives and friends approve of me sending my daughter to the center                           | 25% | 9%  | 0%   | 26% | 41% |
| My caste / community supports education of the girl child  | 7%  | 2%  | 7%   | 19% | 65% |
| Average  | 30% | 14% | 6%   | 20% | 29% |
| Maximum  | 43% | 21% | 9%   | 26% | 65% |

Another impact of the Titan program is whether the parents believe that educating the girl will lead to a loss of parental control over who she chooses as a life partner. About 25% (strongly disagree) and 19% (disagree) of parents report that educating their daughter beyond school will not make it more likely that she will marry someone of her own choice. In contrast, about 29% (strongly agree) and 20% (agree) report that educating their daughter beyond school will make her more likely to marry someone of her own choice. About 8% of parents remain unsure. Thus, the program has had some social impact in this regard, but more work is needed.

If education is seen as an unnecessary financial burden, many parents will not allow their girl-child to study further. However, our study found that about 38% (strongly disagree) and 15% (disagree) of parents report that educating their daughter beyond school will not cause unnecessary expenses. In contrast, about 20% (strongly agree) and 23% (agree) report that educating their daughter beyond school will cause unnecessary expenses. About 5% of parents remain unsure. Thus, nearly half of the parents surveyed seem to understand the benefits of education for the girl child and do not see it as an unnecessary expense. This is a positive impact of the Titan program.

It is a reality of our society, especially in rural India, that girls are required to do most of the domestic chores. Through its focus on education and livelihood, the Titan program hopes to have change parental and societal attitudes in this regard. Our study found that about 34% (strongly disagree) and 19% (disagree) of parents report that educating their daughter beyond school will not make her disinterested in domestic work chores. In contrast, about 22% (strongly agree) and 17% (agree) report that educating their daughter beyond school will disinterest her in domestic work chores. About 9% of parents remain unsure of the benefits. Thus, the impact of the Titan program has been mixed in this regard, and more work is required in the future.

The role of the caste and community in allowing/ encouraging girl-child education is very important. Our study found that about 33% (strongly disagree) and 12% (disagree) of parents report that their community or caste generally do not feel there is no benefit to educating girls. In contrast, about 25% (strongly agree) and 23% (agree) report that their community or caste generally feel that there is no benefit to educating girls. About 8% of parents remain unsure of the benefits.

About 43% (strongly disagree) and 17% (disagree) of parents report that educating their daughter beyond school will not put more social pressure on the family. In contrast, about 14% (strongly agree) and 21% (agree) report that educating their daughter beyond school will put more social pressure on the family. About 6% of parents remain unsure of the benefits.

Relatives and family members play an important role in affecting the parents' perception of the impact of educating the girl-child. Our study found that about 42% (strongly disagree) and 17% (disagree) of parents report that most of their relatives and friends disapprove of sending their daughter to the center. In contrast, about 14% (strongly agree) and 21% (agree) report that most relatives and friends approve of sending their daughter to the center. Thus, the Titan program seems to have made a significant positive impact.

About 7% (strongly disagree) and 2% (disagree) of parents report that their caste or community does not support the education of the girl child. In contrast, 65.5% (strongly agree) and 19% (agree) of parents report that their caste or community supports the education of the girl child. 7% of parents remain unsure of benefits.

### 3.7.3.5 Parental perception of improvements in girl-child due to program

Fifth, we evaluate the change in parental opinion about their girl child's performance in education, health, and value system. For the Titan program to have a positive and sustained impact, the parents need to perceive that the girl-child has seen improvements in many dimensions.

Among these dimensions, the ability to speak, read and write in English is a key dimension. As seen in Table 12, about 42% (strongly agree) and 41% (agree) of parents report that going to the center has helped their daughter

improve her ability to read & write in English. About 10% of all disagree that going to the center has helped their daughter strengthen her ability to read & write in English. 7% of parents remain unsure of benefits.

Table 12: CARE India - Parental perception of improvements in girl-child due to program

| Parental perception of improvements in girl-child due to program                           | 1   | 2  | 3 1. 2 | 4   | 5   |
|--|-----|----|--------|-----|-----|
| The center has helped my daughter improve her ability to read & write in English           | 4%  | 7% | 7%     | 41% | 42% |
| The center has helped my daughter improve her ability to read & write in her mother tongue | 1%  | 0% | 2%     | 25% | 72% |
| The center has helped my daughter improve her ability in basic mathematics problems        | 5%  | 0% | 15%    | 42% | 39% |
| She has become a more honest person  | 1%  | 0% | 4%     | 7%  | 88% |
| She is better aware of various livelihood opportunities                                    | 1%  | 4% | 7%     | 25% | 63% |
| She is confident of pursuing work / business   | 10% | 2% | 4%     | 29% | 55% |
| Her life has improved  | 1%  | 2% | 2%     | 25% | 70% |
| My daughter has become more aware of a healthy diet  | 2%  | 0% | 4%     | 25% | 69% |
| My daughter has become more aware of heath related practices                               | 0%  | 1% | 3%     | 30% | 66% |
| My daughter has become more aware about importance of hygiene                              | 0%  | 0% | 1%     | 28% | 71% |
| Average  | 2%  | 2% | 5%     | 27% | 64% |
| Maximum  | 10% | 7% | 15%    | 42% | 88% |

For girl children from underprivileged sections of society, the ability to speak, read, and write in their mother tongue is also an essential dimension of progress. Our study saw that about 72% (strongly agree) and 25% (agree) of parents report that going to the center has helped their daughter improve her ability to read & write in her mother tongue. Almost none of the parents say that going to the center has helped their daughter strengthen her ability to read & write in her mother tongue. 2% of parents remain unsure of benefits.

Another essential dimension of education is numeracy. The impact of the Titan program has been that the girl children have improved their abilities to carry out basic mathematics problems. The study revealed that about 38.5% (strongly agree) and 41.5% (agree) of parents report that going to the center has helped their daughter improve her ability to solve basic math problems. A very small percentage of the parents (5%) reports that going to the center has not helped their daughter improve her ability to solve basic math problems. A significant 15% of parents remain unsure of the benefits.

Another critical dimension of the impact of the Titan program has been to improve the value system of the girl children. Our study saw that the parents perceive good improvement in this regard. About 88% (strongly agree) and 7% (agree) of parents report that their daughter has become a more honest person. About 1% of the parents report that their daughter has become a more honest person. About 4% of parents remain unsure of the benefits.

The parents' perception that the daughters are more aware of livelihood opportunities is also a beneficial impact of the Titan program. Our study revealed that about 63.5% (strongly agree) and 25% (agree) of parents report that

she is better aware of various livelihood opportunities. About 5% of parents report that she is not better aware of multiple livelihood opportunities. About 7% of parents remain unsure of the impact.

About 55.5% (strongly agree) and 29% (agree) of parents report that their daughter is confident in pursuing work or business. However, 10% (strongly agree) and 2% (agree) of parents report that their daughter is not confident in pursuing work or business. 4% of parents remain unsure.

About 70% (strongly agree) and 25% (agree) of parents report that their daughter's life has improved. About 1% of parents report that their daughter is confident in pursuing work or business. 2% of parents remain unsure of the benefits.

About 70% (strongly agree) and 25% (agree) of parents report that their daughter has become more aware of a healthy diet. Less than 3% of parents report that their daughter has not become more aware of a healthy diet. 4% of parents remain unsure of the benefits.

About 66.5% (strongly agree) and 30% (agree) of parents report their daughter has become more aware of health-related practices. Almost none of the parents report that their daughter has become more aware of health-related practices. About 3% of parents remain unsure of the benefits.

About 71.5% (strongly agree) and 22% (agree) of parents report their daughter has become more aware of the importance of hygiene. Almost none reports that their daughter has become more aware of a healthy diet. About 1% of parents remain unsure of the benefits.

### 3.7.3.6 Changes in parental aspirations for girl-child

Sixth, we evaluate the change in parents' opinion about what their gild child should aspire to become. We find that about 87% (strongly agree) and 6% (agree) of parents report that they would be happy if their daughter became a doctor/teacher/government officer (see Table 13). Strangely, 5% disagree. Also, 2% of parents remain unsure.

Table 13: CARE India - Change in parental aspirations for girl-child

| Change in parental aspirations for girl-child  | 1                   | 2         | 3   | 4   | 5           |
|--|---------------------|-----------|-----|-----|-------------|
| I would be happy if my daughter becomes a doctor / teacher / government  | 0%                  | 5%        | 2%  | 6%  | 87%         |
| officer I would be happy if my daughter started her own business   | 27%                 | 9% 1      | 5%  | 16% | 44%         |
| I would be happy if my daughter becomes a housewife  | 51%                 | 16%       | 10% | 11% | 12%         |
| Average  | 26% =               | 110%p     |     | 11% | 48%         |
| Maximum  | 51%                 | 16%       | 10% | 16% | 87%         |
| 1: Strongly Disagree; 2: Disagree; 3: Neither Agree nor Disagree; 4: Agree; 5: Strongly Agree  | manage and a second | WI *      | TH  | 100 | On a Oc. 10 |
| and the state of t |                     | - Charles | 1 4 |     |             |

About 43.5% (strongly agree) and 16% (agree) of parents report that they would be happy if their daughter started their own business. However, 27% (strongly agree) and 9% (agree) of parents report that they would not be happy if their daughter started their own business. About 5% of parents remain unsure of their ambition.

Only about 12% (strongly agree) and 11% (agree) of parents report that they would be happy if their daughter became a housewife. On the other hand, about 51.5% (strongly disagree) and 16% (disagree) of parents report that they would not be happy if their daughter only became a housewife. A significant 10% of parents remain unsure.

### 3.7.3.7 Changes in parental perception of future prospects of girl-child

Seventh, we evaluate the change in parental perception about the future prospects of their girls' financial condition and social status. As seen in Table 14, we find that about 63% (strongly agree) and 25% (agree) of parents report that their family's financial condition will improve in the future due to their daughter joining the center. About 8% of the parents report that their family's financial condition will not improve in the future due to their daughter joining the center. 4% were unsure.

Table 14: CARE India - Change in parental perception of future prospects of girl-child

| Change in parental perception of future prospects of girl-child  | autholite in the le  | 1   | 2   | 3   | 4   | 5   |
|--|--|-----|-----|-----|-----|-----|
| The financial condition of our family will improve in the future |  | 2%  | 6%  | 4%  | 25% | 63% |
| We will have more respect in the society                         |  | 2%  | 0%  | 1%  | 16% | 81% |
| I would be happy if my daughter becomes a housewife              | VI SCAMORANIA CONTRACTOR OF THE SCANOR OF TH | 51% | 16% | 10% | 11% | 12% |
| would be happy if my daughter becomes a housewife  Average       | 2%   | 3%  | 2%  | 20% | 72% |     |
|  | Maximum  | 2%  | 6%  | 4%  | 25% | 81% |

About 81% (strongly agree) and 16% (agree) of parents report that they will have more respect in society due to their daughter joining the center. Almost none of the parents report that they will have more respect in society due to their daughter joining the center. Only 1% of parents remain unsure.

Only about 12% (strongly agree) and 11% (agree) of parents report that they would be happy if their daughter became a housewife. On the other hand, about 51.5% (strongly disagree) and 16% (disagree) of parents report that they would not be happy if their daughter only became a housewife. A significant 10% of parents remain unsure.

### 3.7.4 Impact on young women and mothers

The program has a variety of interventions focused on the health, nutrition, wellness, and livelihood dimensions aimed at pre-natal and post-natal mothers and young women. The impact of the program interventions on young women and mothers is described below.

TEOR

The impact of the program interventions is seen on various dimensions (see Table 15). These include (1) Impact on nutrition-related practices; (2) Impact on health and hygiene-related practices; (3) Impact on livelihood opportunities; (4) Impact on future outlook; and (5) Impact on attitude towards girl-child education. These impacts are described in detail below.

According to Priyanka, a homemaker, and a young mother, who has 2 daughters,

"I am keen that my daughters study further and pursue higher education. I also want them to take up jobs in the future. I believe that education comes first for everyone. During the lockdown, my daughter's education continued as the CARE India volunteers continued to hold sessions for them."

Table 15: Impact on young women and mothers in the Titan CARE India program

| Impact on young women and mothers in the program  | 1     | 2    | 3                 | 4   | 5   |
|---|-------|------|-------------------|-----|-----|
| I have become more aware of a healthy diet  | 0%    | 1%   | 13%               | 32% | 54% |
| I have become more aware of health-related practices  | 1%    | 2%   | 18%               | 29% | 51% |
| I have become more aware of nutrition and medicine  | 0%    | 2%   | 14%               | 30% | 54% |
| I am regularly getting my health checkup done   | 0%    | 3%   | 16%               | 29% | 52% |
| I have fewer problems during my pregnancy   | 2%    | 7%   | 15%               | 29% | 48% |
| My health indicators (hemoglobin, sugar, etc.) are better than before                         | 0%    | 2%   | 16%               | 32% | 50% |
| I understand the importance of hygiene  | 0%    | 2%   | 9%                | 29% | 60% |
| I understand the importance of breast feeding   | 0%    | 0%   | 10%               | 26% | 64% |
| I understand the importance of vaccinations for my baby                                       | 0%    | 1%   | 8%                | 27% | 64% |
| I understand the importance of a good healthy diet for my child                               | 0%    | 0%   | 9%                | 30% | 61% |
| I am more aware of various livelihood opportunities   | 0%    | 1%   | 9%                | 39% | 50% |
| I feel confident about pursuing work / business   | 0%    | 1%   | 10%               | 49% | 39% |
| My life has improved  | 0%    | 2%   | 7%                | 45% | 46% |
| The income of my family has improved  | 0%    | 1%   | 13%               | 41% | 45% |
| My family's future prospects appear better  | 0%    | 2%   | 14%               | 44% | 40% |
| I have more respect in society, and my family   | 0%    | 2%   | 14%               | 40% | 43% |
| I have better access to loans for business  | 0%    | 1%   | 15%               | 47% | 36% |
| I am more likely to send my children to school  | 1%    | 2%   | 7%                | 20% | 70% |
| I am more likely to educate my daughters  | 2%    | 1%   | 8%                | 19% | 70% |
| I want to do better in every aspect of life   | 0%    | 0%   | <sup>0</sup> /15% | 39% | 46% |
| I am willing to work hard to succeed  | 0% // | 1%   | 10%               | 37% | 53% |
| I feel more comfortable in expressing my opinion  | 0%    | 2%GI | 14%               | 35% | 49% |
| 1: Strongly Disagree; 2: Disagree; 3: Neither Agree nor Disagree; 4: Agree; 5: Strongly Agree |       | 3    | 13/1              |     |     |

#### 3.7.4.1 Impact on nutrition-related practices

As seen in Table 15, we find that 54% (strongly agree) and 32.5% (agree) of mothers report that they have become more aware of a healthy diet. Only 13% of women remained unsure, and less than 1% disagreed that they have become more aware of a healthy diet. 54% (strongly agree) and 30% (agree) of mothers report that they have become more aware of nutrition and medicine. Only 14% of women remained unsure, and less than 2% disagreed that they have become more aware of nutrition and medicine. 60.5% (strongly agree) and 30.5% (agree) of mothers report understanding the importance of a good healthy diet for their child. Only 8% of women remained unsure, and less than 1% disagreed. According to Priyanka, a homemaker, and a young mother, who has 2 daughters,

"I came to know about the five developmental stages of a child through the CARE India volunteers. Before this, I was not aware of the nutrition-related information."

#### 3.7.4.2 Impact on health and hygiene-related practices

52% (strongly agree) and 29% (agree) of mothers report that they have become more aware of health-related practices. Only 18% of women remained unsure, and less than 1% disagreed that they have become more aware of health-related practices. 52% (strongly agree) and 29% (agree) of mothers report that they are regularly getting their health checkups done. Only 15.5% of women remained unsure, and 3.5% disagreed that they regularly get their health checkups done. 48% (strongly agree) and 29% (agree) of mothers report that they have fewer problems during pregnancy. 15.5% of women remained unsure and 2% strongly, and 6.5% moderately disagreed that they had fewer pregnancy problems.

50% (strongly agree) and 32% (agree) of mothers report that their health indicators (hemoglobin, sugar, etc.) are better than before. 15.5% of women remained unsure, and only less than 2% disagreed. 60% (strongly agree) and 29.5% (agree) of mothers report that they understand the importance of hygiene. 9% of women remained unsure, and only 2% disagreed. 64% (strongly agree) and 26% (agree) of mothers report that they understand the importance of breastfeeding. Only 10% of women remained unsure, and less than 1% disagreed.

64.5% (strongly agree) and 27% (agree) of mothers report understanding the importance of vaccinations for their baby. Only 8% of women remained unsure, and less than 1% disagreed.

#### 3.7.4.3 Impact on livelihood opportunities

50.5% (strongly agree) and 39.5% (agree) of mothers report that they are more aware of various livelihood opportunities. Only 8.5% of women remained unsure, and less than 2% disagreed.

39% (strongly agree) and 49% (agree) of mothers report feeling confident about pursuing work or business. Only 10% of women remained unsure, and less than 2% disagreed. 36.5% (strongly agree) and 47.5% (agree) of mothers report that they have better access to loans for business. 15% of women remained unsure, and 2% disagreed.

#### 3.7.4.4 Impact on future outlook

46% (strongly agree) and 45% (agree) of mothers report that their life has improved. 10% of women remained unsure, and less than 2% disagreed.

44.5% (strongly agree) and 41.5% (agree) of mothers report that their family's income has improved. 10% of women remained unsure, and less than 2% disagreed.

40% (strongly agree) and 44% (agree) of mothers report that their family's prospects appear better. 14% of women remained unsure, and 2% disagreed.

43.5% (strongly agree) and 40% (agree) of mothers report that they now have more respect in society and their family. 15% of women remained unsure, and 2% disagreed.

46% (strongly agree) and 39% (agree) of mothers report that they want to do better in every aspect of life. 15% of women remained unsure, and less than 1% disagreed.

53% (strongly agree) and 37% (agree) of mothers report that they are willing to work hard to succeed. 9.8% of women remained unsure, and less than 1% disagreed.

49% (strongly agree) and 35% (agree) of mothers report feeling more comfortable expressing their opinions. 9.8% of women remained unsure, and less than 2% disagreed.

#### 3.7.4.5 Impact on attitude towards girl-child education

70% (strongly agree) and 20.5% (agree) of mothers report that I am more likely to send their children to school. 7% of women remained unsure, and less than 3% disagreed.

70.5% (strongly agree) and 19% (agree) of mothers report that they are more likely to educate daughters. 8% of women remained unsure, and less than 3% disagreed.

79% (strongly agree) and 18% (agree) of mothers report sending their daughter to the center because they feel that the center provides a better education than the school. Less than 3% disagreed.

83% (strongly agree) and 16% (agree) of mothers report sending their daughter to the center because they feel their daughter learns more at the center. None of the women disagreed, and only 1% remained unsure of the benefits.

69.3% (strongly agree) and 26% (agree) of mothers report that they feel that going to the center has helped their daughter perform better in studies at school. Less than 3% of the women disagreed that going to the center has not helped their daughter perform better in studies at school. A further 2% were unsure of the benefits provided by the center in this regard.



#### 4 Conclusion

The objective of this study was to carry out an impact assessment of the Titan Kanya Sampoorna CSR initiative carried out by Titan Company Ltd. in the year FY2020-21. The Titan Kanya Sampoorna program is a multiple-thematic, holistic education program in the Cuddalore district of Tamil Nadu, for which Titan has an association with CARE India.

This CSR initiative aligns well with the UN Sustainable Development Goals and India's strategic developmental objectives (Bansal et al., 2018; Dhanesh, 2015). Titan's laudable objective in this CSR initiative is to improve the lives of the chosen beneficiaries. Many stakeholders are interested in the outcomes and social impact created by organizations involved in socially responsible initiatives (Bala & Verma, 2019; Camilleri, 2020). The study's objective was to understand the impact of this CSR project.

The objective of the impact assessment study is to identify and measure the impacts, delineate the positive outcomes, and create a listing of replicable practices, processes, approaches, etc., for other initiatives/ organizations to benefit from. The study is also helpful in holding a mirror to the organization carrying out the CSR initiative and highlighting ways the impact can be further enhanced and strengthened.

The CSR project was evaluated using a case-study-based approach and analyzing primary data and company-provided documentary records. The researchers formed an opinion that the program is highly successful in creating the desired impact on society in general and the lives of the beneficiaries, as per the overall perceptual assessment carried out by the researchers on a scale of 1 to 5 (with 1 being poor and 5 being excellent), the program received an impact assessment rating of 4.3 out of 5, which indicates excellent overall impact.

The CSR impact assessment study for Titan was carried out in a brief timeframe under a tight time deadline. In addition, the travel-related restrictions and the widespread lockdowns due to the Covid-19 pandemic created further hurdles in the data collection efforts. Despite these constraints, the study of the Titan Kanya CSR initiative was completed successfully due to the cooperation received from the Titan CSR team and the CARE India implementation partners.

Given the broad scope, large scale, and wide geographical diversity of the ongoing CSR initiatives of Titan in India, this study has significant potential and importance. While this study is limited to only the Titan Kanya Sampoorna CSR initiatives being implemented by CARE India, the methodology followed, the structure of the study, the approach taken, and the learning from this study will provide multiple opportunities for replication in broader and more profound impact assessment studies in the future.

Given the limited scope of this study, for Titan to understand the true significance and breadth of its CSR initiatives, a more in-depth study with a broader scope would be helpful. Ideally, this should be planned in the near future.

The key recommendations from this CSR impact assessment study are:

- 1. A future study covering a more comprehensive range of CSR projects and using a mixed methods analysis would give a richer understanding of the impacts of Titan's CSR initiatives. This study can also identify best practices from Titan's CSR initiatives.
- 2. After such a detailed study has been carried out, Titan may consider publishing the report widely (Aggarwal & Singh, 2019) so that other organizations in India replicate similar CSR initiatives. The widespread publication of the report would provide information to a broad audience about the significant impact of Titan's CSR initiatives.
- 3. The detailed impact assessment study would potentially be utilized to develop a series of cases and caselets, which may be taught in MBA courses in business schools to create awareness about CSR and used in training and development programs to propagate best practices about CSR.



#### References

- Aggarwal, P., & Singh, A. K. (2019). CSR and sustainability reporting practices in India: An in-depth content analysis of top-listed companies. *Social Responsibility Journal*, *15*(8), 1033–1053. https://doi.org/10.1108/SRJ-03-2018-0078
- Bala, M., & Verma, D. (2019). *An Empirical Investigation of Managerial Perceptions in Indian Organisations*\*Regarding CSR After Legislation of CSR in India (SSRN Scholarly Paper ID 3554597). Social Science Research

  Network. https://papers.ssrn.com/abstract=3554597
- Bansal, S., Khanna, M., & Jain, S. (2018). Corporate social responsibility rules in India: An assessment. *Economic and Political Weekly*, *53*(14), 44–51.
- Camilleri, M. A. (2020). The market for socially responsible investing: A review of the developments. *Social Responsibility Journal*, *17*(3), 412–428. https://doi.org/10.1108/SRJ-06-2019-0194
- CSR initiative | Titan Corporate. (n.d.). Retrieved March 29, 2022, from https://www.titancompany.in/corporate-social-responsibility-initiative
- Dhanesh, G. S. (2015). Why Corporate Social Responsibility? An Analysis of Drivers of CSR in India. *Management Communication Quarterly*, *29*(1), 114–129. https://doi.org/10.1177/0893318914545496
- Titan Company Ltd. (n.d.). *Business Standard India*. Retrieved March 29, 2022, from https://www.business-standard.com/company/titan-company-1016/information/company-history

