

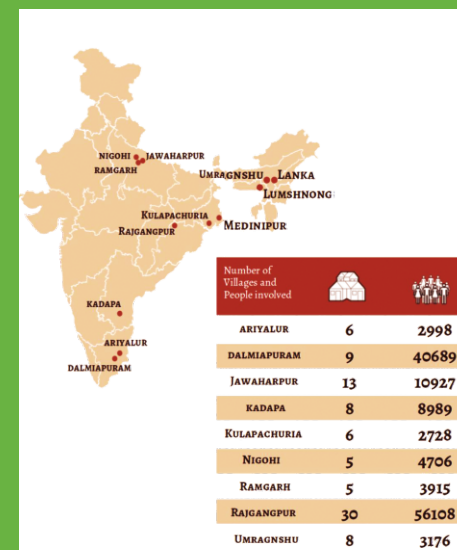


Dalmia Group enjoys a heritage of over 70 years and has been committed to creating exceptional value for the stakeholders. While we strive to streamline our focus in tandem with the UN Millennium Development Goals, in the year 2012-13 we have made significant progress in terms of outreach and scope of our programmes. We are now working in 105 villages (including our associate companies OCL India Limited & Adhunik Cement and Calcom Cement) and are reaching out to over 100,000 people through our development initiatives. Poverty alleviation is the foremost priority in our project villages. Through our livelihood programmes, we continue to equip people from our target villages in both new and indigenous livelihood activities to strengthen their skills and enhance their income. Some of the activities are – dairy development, small business micro credit, palm leaf products making, tailoring, vegetable farming and vermin composting. We have collaborated with various government agencies and financial institutions to ensure financial sustainability of these programmes. Our collaboration with local health departments and hospitals has proved valuable in improving maternal and child health, helping some locations achieve 100% immunisation and reduce mortality rates through focused health services like general and special health camps. With all these efforts being put in to achieve the goal, we did a quick survey in February 2013. The data that we gathered from the locations is extremely encouraging. The Child Mortality Rate (CMR) in the year in all of the 3 locations in Uttar Pradesh was close to 35 (almost half of the national rate), coming down by more than half as compared to the rate in 2009. Dalmiapuram and Ariyalur in Tamil Nadu didn't register a single case of child death during the year. Our effort was lauded at a roundtable conference organised by the Indian Institute of Corporate Affairs (IICA), which was attended by Unicef and USAID amongst others. We continue to make sincere efforts in ensuring compulsory primary education in all our project villages. In Uttar Pradesh, we continue to support the Remedial Centers which have given a much needed impetus in bringing drop outs back to school. Through the enrolment campaigns, we have tried to make parents aware of the Right to Education Act and its provisions. In Tamil Nadu, where universal primary education has already become a reality, we focused on higher and holistic education with as much emphasis on sports and extracurricular activities.

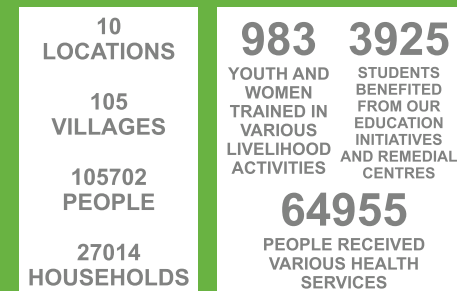
*"we are committed to creating exceptional value for our customers, employees, shareholders, vendors and the communities. we operate in all above all the nation, through core values of Learning, Excellence, Teamwork and Speed."*



#### Our Presence



#### Our Key Interventions : 2012-13



#### Livelihood

Poverty eradication is directly proportional to number of livelihood opportunities a community has access to. Since livestock continues to be the primary and major source of income for the farmers in our country, one of our important livelihood initiatives is a comprehensive end-to-end programme around livestock. The programme components include identification of beneficiaries (poorest of the poor); getting their bank accounts opened; giving them interest free loans (and on interest at some places, where the principal amount and interest go in to the community development fund, which is managed by the community and used for other community development programmes); livestock insurance; animal checkup and health camps; training in best animal husbandry practices; training the community Para-Vets; facilitating establishment of community managed fodder plots; and ensuring of remunerative prices of milk. In some places, we have also run vocational trainings and skill building programmes to enable the youth to enhance their livelihood opportunities. In Ariyalur, for example, a group of young men were trained in professionally running a music band, thereby adding an extra income every month to their households.



#### EDUCATION

Despite a compulsory Right to Education for all the children up to the age of 14 years and a higher literacy rate during the last decade, the number of children who are not in school remains high. Our prime focus is to -bring all the children up to the age of 14 years -school in our project areas. The other area of concern is quality of education. Our approach to education is multipronged. Our intervention starts at the level of Anganwadi centres, where we have helped these centers improve infrastructure and acquire utensils & teaching learning equipment. The next step is to provide remedial support to slow learners (commonly and erroneously referred to as weak students) at primary and secondary levels so that they do not drop out of school. Absence of teachers is another reason why quality education still remains a challenge in the schools. In some case, we have even tried to bridge this gap by providing trained teachers from the community itself. Some of our other efforts include rewarding meritorious students; providing career counseling; organising sports and extracurricular activities; and conducting personality development classes for the students and youth.



#### HEALTHCARE

With the target of 2015 deadline for the Millennium Development Goals, we are diligently working towards reducing Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) in our project villages across all locations. We believe that healthy children need healthy mothers, and the foundation of good health is laid during the pregnancy itself. Therefore, we run intensive healthcare programmes such as ante-natal check-ups for safe deliveries, gynecological & obstetrics counseling and immunisation camps for children under five years of age. Other health services provided by us include health awareness programmes; health camps; counseling and treatment. We facilitate the services provided by the Government round the year and have special health camp on certain special occasions such as Nutrition and Health Day Celebration. We also organise medical clinics and camps which focus on specific diseases like cardiac and ENT. Access to clean water is vital to a healthy life. We have installed RO plants in the villages so that villagers have access to clean and safe drinking water. Similarly, provision of adequate sanitation facilities is equally important. Construction of individual sanitary toilets and providing clean potable water are other important components of our Healthcare programmes.

#### The way forward...

As we get closer to achieving the goals related to MDGs set earlier, we have started to calibrate the focus on issues that are more material to our parent corporation's business operations. One such issue is Water. Some of our project sites are already witnessing the criticality with water table dropping to as low as 500 feet below the ground level, mainly because of unchecked withdrawal for agricultural purposes. Therefore, we would be working both on water harvesting and on water usage with the neighbouring communities beginning FY14. The other critical issue that is relevant to us and that's critically needed in our programme villages is promotion of non-conventional and renewable energy. Therefore, we will concentrate on this issue as well and as a spin-off, would offset communities' carbon foot-prints, though marginally. We will continue to work on MDGs till we achieve the goals in a year or so. We propose to build our focus then on skill development and grow that extensively as the 3rd vertical. The 3 sectors; Water, Renewable Energy and Skill Development, will then constitute the 3 pillars of our programme

#### A step towards a brighter future

Rita, Babali, Soni, Ajay, Ashish, Arvind, Dinesh and Kuldeep – these eight students from Kesvama village had dropped out of school in Class 5th. All these students belonged to the families, with agriculture as their main source of family income. These children were forced to leave school because they were engaged in the household work. Some of these children also had to work in the fields to support their parents. Through the enrolment campaign, dropout students were identified. The team members then motivated parents of these children to put them back in school. These eight students have now been enrolled in the Junior School of Bartal village. The kids are excited and are looking forward to a bright future.

