

Submitted by

**Impact  
Practice**  
by CSRBOX

**ICICI Lombard**

Impact Assessment Report  
**Caring Hands** (2023 - 2024)  
A CSR Initiative of ICICI Lombard



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## List of Abbreviations

Abbreviation	Full Form
ASHA	Accredited Social Health Activist
BRSR	Business Responsibility and Sustainability Reporting
CSR	Corporate Social Responsibility
DPDP	Digital Personal Data Protection
ESG	Environmental, Social, and Governance
ICICI	Industrial Credit and Investment Corporation of India
IDI	In-Depth Interview
IEC	Information, Education, and Communication
INR	Indian Rupee
KII	Key Informant Interview
LASIK	Laser-Assisted In Situ Keratomileusis
MIS	Management Information System
NGO	Non-Governmental Organization
NHM	National Health Mission
NOIDA	New Okhla Industrial Development Authority
OBC	Other Backward Classes
POCSO	Protection of Children from Sexual Offences
PRA	Participatory Rural Appraisal
SC	Scheduled Caste
SDM	Sub-Divisional Magistrate
SEBI	Securities and Exchange Board of India
SROI	Social Return on Investment
ST	Scheduled Tribe
UN	United Nations
UP	Uttar Pradesh

## Disclaimer

- This report has been prepared solely for the purpose set out in the Memorandum of Understanding (MoU) signed between Renalysis Consultants Pvt. Ltd. (CSRBOX) and ICICI Lombard to undertake the Impact Assessment of their project “Caring Hands” implemented in the financial year 2023–2024.
- This impact assessment is conducted under the Companies (Corporate Social Responsibility Policy) Amendment Rules 2021, notification dated 22nd January 2021.
- This report shall be disclosed only in its entirety to authorised individuals without removing the disclaimer. CSRBOX has not performed an audit and does not express an opinion or any other form of assurance. Further, comments in this report are not intended, nor should they be interpreted, as legal advice or opinion.
- This report contains an analysis by CSRBOX based on publications available from secondary sources and inputs gathered through interactions with the leadership team of ICICI Lombard, project beneficiaries, Dr. Agarwal's Eye Hospital, and other knowledge partners. While the information obtained from the public domain has not been verified for authenticity, CSRBOX has taken due care to gather information from sources generally considered reliable.
- In preparing this report, CSRBOX has used and relied on data and material gathered through the internet, research reports, and discussions with personnel within CSRBOX as well as personnel in related industries.

### Specific to the Impact Assessment of the project “Caring Hands”

- CSRBOX has neither conducted an audit nor due diligence, nor has it validated the financial statements and projections provided by ICICI Lombard.
- Wherever information was not available in the public domain, suitable assumptions were made to extrapolate values for the same.
- CSRBOX emphasises that the realisation of the benefits or improvements suggested in this report (based on secondary sources) depends on the continuing validity of the assumptions on which it is based. These assumptions will need to be reviewed and revised as business trends, regulatory requirements, or

organisational direction evolve. CSRBOX accepts no responsibility for the realisation of the projected benefits.

- The premise of an impact assessment is based on the objectives of the project, along with output and outcome indicators pre-set by the program design and implementation team. CSRBOX's impact assessment framework was designed and executed in alignment with these objectives and indicators.



## Executive Summary

### ICICI Lombard's Corporate Social Responsibility (CSR) Initiatives:

ICICI Lombard General Insurance Company Limited integrates CSR into its operations to address societal challenges. Its flagship initiative, Caring Hands, focuses on providing free eye care services to underserved communities, particularly children in government and municipal schools, to combat preventable blindness and visual impairment.

### Overview of the Programme:

Launched in 2011, Caring Hands aims to provide accessible and free eye care services through annual eye check-up camps across 14 states and union territories. The programme targets children and adults from underserved communities, offering free corrective lenses for refractive errors and referrals for advanced medical care. In FY 2023–24, over 250 camps were conducted, benefiting more than 45,000 individuals. Employee volunteers played a key role in organizing and executing the camps.

3000+ Employee Volunteers	200+ Schools	250+ Eye Camps	45000+ Eye Check-ups	4700+ Spectacles Distributed	SROI Generated- ₹ 17.51
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### SDG Alignments:



### National Priority Missions Alignments:



### BRSR Principles:

**Principle 4:** Businesses should respect the interests of and be responsive to all their stakeholders.

**Principle 8:** Businesses should promote inclusive growth and equitable development.

### Key Findings:

Over 4,700 free spectacles distributed, benefiting 57% of camp attendees needing vision correction.

Camps spanned 14 states, focusing on underserved urban and rural areas.

Screenings prioritized children in municipal schools.

Employee volunteers actively participated, fostering inclusivity and community engagement.

Targeted economically disadvantaged families; 75% earned less than INR 20,000 monthly.

Uncorrected refractive errors linked to poor academics; 13% reported better performance post-intervention.

Early diagnosis prevented long-term vision issues; 45% benefited from early detection.

Aligned with India's public health goals by addressing preventable blindness.

Beneficiaries lacked affordable eye care access; 77% didn't wear spectacles before the program.

Raised awareness on regular eye check-ups; 60% fully agreed it taught eye health practices.

High satisfaction among beneficiaries; 66% found camps very beneficial.

Schools reported improved academic engagement post-spectacles distribution.

Parents valued free lenses, easing financial burdens on families.

Volunteers found the initiative rewarding, boosting morale and engagement.

Healthcare partners emphasized scaling up for broader impact and sustainability.

Complemented national health goals by promoting preventive healthcare measures.

Improved corporate visibility; awareness rose from 42% to 62% post-program.

Conducted over 250 camps efficiently across multiple locations within a short timeframe.

Qualified ophthalmologists ensured high-quality screenings at all camps.

Distributed over 4,700 spectacles systematically; 91% wear them regularly.

Advanced medical referrals provided holistic care for complex cases.

Regular monitoring ensured feedback-driven improvements; 63% felt well-informed about eye health.

# Chapter : 1

## Background and Overview



## **1.1 About ICICI Lombard CSR**

ICICI Lombard General Insurance Company Limited is one of India's leading private sector general insurance companies. In addition to its commitment to providing comprehensive insurance solutions, ICICI Lombard has consistently demonstrated its dedication to social responsibility through its Corporate Social Responsibility (CSR) initiatives. Aligned with the principles of sustainable development, the company focuses on addressing social challenges through impactful programs that contribute to community well-being.

## **1.2 CSR interventions of ICICI Lombard**

ICICI Lombard's CSR strategy is guided by the belief that businesses play a pivotal role in creating positive social change. By integrating CSR into its core operations, the company has established a robust framework for delivering inclusive and sustainable growth. The CSR initiatives are designed to align with national priorities, support the United Nations Sustainable Development Goals (SDGs), and comply with the regulatory mandates under the Companies Act, 2013.

The company's CSR focus areas include preventive healthcare, promoting road safety, providing access to clean water, supporting disaster relief efforts, and empowering communities through various health and wellness programs. One of its flagship CSR programs, Caring Hands exemplifies ICICI Lombard's commitment to making quality eye care accessible to underserved populations. Through this initiative, the company conducts free eye check-up camps for school children and adults in marginalized communities, addressing preventable vision impairment and promoting overall eye health.

The key focus areas as per the CSR Policy are:



ICICI Lombard's CSR philosophy also emphasizes employee engagement. Employees actively participate as volunteers in CSR programs, fostering a culture of social responsibility within the organization. This participatory approach not only strengthens the impact of the initiatives but also encourages employees to contribute meaningfully to society.

Through its continued commitment to CSR, ICICI Lombard has touched the lives of thousands across the country. By leveraging its resources, expertise, and partnerships, the company remains steadfast in its mission to create lasting social impact and drive positive change in the communities it serves.

### **1.3 About the Programme**

"Caring Hands" is a flagship CSR initiative by ICICI Lombard, launched with the objective of providing accessible and free eye care to underserved communities, particularly children. Established in 2011, the programme was conceptualized to address the critical issue of preventable blindness and visual impairment in India. By focusing on early diagnosis and timely intervention, Caring Hands aims to mitigate the long-term impact of poor vision on academic performance, social participation, and overall well-being.

Each year, ICICI Lombard organizes free eye check-up camps in collaboration with reputed ophthalmologists and healthcare institutions. These camps are primarily held in government and municipal schools, targeting children who may otherwise lack access to quality eye care services. The programme also extends its services to adult beneficiaries in select locations, thereby broadening its outreach and impact.

A distinctive feature of Caring Hands is its employee volunteerism model. ICICI Lombard employees, known as "Captains", take active leadership roles in organizing and managing the camps. They work closely with school authorities, healthcare professionals, and community organizations to ensure the smooth execution of the programme. Their commitment and hands-on participation reflect the company's inclusive approach to CSR.

Beyond conducting eye screenings, the programme provides free corrective lenses to children diagnosed with refractive errors. For those requiring further medical intervention, referrals to specialized eye care institutions are facilitated. This holistic approach ensures comprehensive support for beneficiaries, promoting sustainable improvements in eye health.

Over the years, Caring Hands has made a significant difference in the lives of thousands of children and adults across India. By restoring and enhancing vision, the programme empowers individuals to pursue their educational and personal aspirations, fostering a healthier and more equitable society. Through continued partnerships and community engagement, ICICI Lombard remains dedicated to expanding the reach and impact of Caring Hands in the years to come.

### **1.3.1 Need for the Programme**

Vision impairment remains a significant public health challenge in India, particularly among children from underserved communities. According to global estimates, approximately 12 million people in India suffer from blindness, with a substantial number of cases being preventable or treatable. Uncorrected refractive errors are one of the leading causes of visual impairment among children, adversely affecting their academic performance, social participation, and overall quality of life.

Children with untreated vision problems often experience difficulties in reading, writing, and concentrating in school, leading to reduced educational attainment. Additionally, the lack of access to affordable and quality eye care services in rural and low-income urban areas exacerbates the issue. In such contexts, initiatives like "Caring Hands" play a crucial role in bridging the gap by providing free eye check-ups, corrective measures, and raising awareness about eye health.

Furthermore, the socioeconomic burden of preventable blindness is considerable, impacting families and communities. By identifying and addressing vision problems at an early stage, the programme not only enhances the well-being of children but also contributes to their long-term educational and economic prospects.

The need for the Caring Hands programme is further reinforced by the following factors:

- **Lack of Awareness:** Many families in underserved areas remain unaware of the importance of regular eye check-ups and the early signs of vision impairment.
- **Limited Access to Eye Care:** Geographical and financial barriers often prevent access to eye care services, especially in remote regions.
- **Preventable Nature of Vision Impairment:** Early diagnosis and timely intervention can effectively address most refractive errors and prevent long-term visual disability.
- **Impact on Education and Development:** Clear vision is fundamental to a child's learning and development. Providing corrective lenses enhances their educational outcomes and confidence.

Through Caring Hands, ICICI Lombard addresses these challenges by offering free, accessible, and quality eye care services. The programme's continued success underscores the company's commitment to promoting preventive healthcare and fostering inclusive growth in the communities it serves.

### **1.3.2 Key Components**

- **Mobilization and Pre-Planning:** Engaging with schools, centres, and shelter homes within a 5 km radius of ICICI Lombard offices to secure approvals and collaborate with ophthalmologists.
- **Eye Screening Camps:** Conducting over 250 eye check-up camps to provide free screenings for children, parents, and adults, with the aim of detecting and diagnosing visual impairments.
- **Spectacle Distribution:** Providing free spectacles to beneficiaries diagnosed with refractive errors, ensuring improved vision and enhanced quality of life.

- **Brand Awareness Initiatives:** Increasing awareness about ICICI Lombard's commitment to preventive healthcare through visible engagement and branding at the camps.

### **1.3.3 Geographical Coverage**

The ICICI Lombard - Caring Hands programme was successfully implemented across 14 states and union territories in India. The geographical reach ensured a broad impact, providing accessible eye care to communities in urban, semi-urban, and rural areas. The states and regions covered under the programme were:

1. Delhi
2. Haryana
3. Punjab
4. Jammu and Kashmir
5. Uttarakhand
6. Madhya Pradesh
7. Maharashtra
8. Uttar Pradesh
9. Karnataka
10. Telangana
11. Tamil Nadu
12. West Bengal
13. Bihar
14. Tripura

The widespread geographical coverage reflects the programme's commitment to equitable healthcare access and inclusivity, especially targeting underserved regions.

### **1.3.4 Implementation Strategy**

The implementation of the Caring Hands Programme was carried out in a structured and coordinated manner, ensuring the effective delivery of eye care services across identified locations. The approach involved collaborative efforts from multiple stakeholders, including ICICI Lombard employees, healthcare professionals, and community partners.



## **1. Identification and Mobilization**

The programme commenced with the identification of municipal and government schools, shelter homes, and community centres located within a 5 km radius of ICICI Lombard offices. Partnerships were established with ophthalmologists and healthcare institutions like Dr. Agarwal's Hospitals to provide professional eye care services. Necessary approvals were obtained from the respective authorities to conduct the camps.

## **2. Volunteer Engagement and Training**

ICICI Lombard employees actively participated as volunteers, reflecting the organization's commitment to community engagement. They underwent orientation and training sessions to ensure they were equipped to assist in various camp operations, including registration management, logistical coordination, and beneficiary support.

## **3. Eye Screening Camps**

Over 250 eye screening camps were conducted across the identified locations. Each camp followed a standardized operational model to ensure efficiency and accessibility. Qualified ophthalmologists performed comprehensive eye examinations for both children and adults, while volunteers facilitated the smooth flow of activities.

## **4. Spectacle Distribution**

Based on the diagnoses, over 4,700 spectacles were distributed to beneficiaries in need. The distribution process was managed systematically to ensure that recipients received spectacles tailored to their specific requirements. In cases requiring further medical attention, appropriate referrals were provided for specialized care.

## **5. Monitoring and Evaluation**

Regular monitoring mechanisms were implemented to track the progress and effectiveness of the programme. Data on the number of screenings, diagnoses, and spectacles distributed were meticulously recorded. Feedback from beneficiaries and

school authorities was collected to assess satisfaction levels and identify areas for improvement.

## **6. Branding and Awareness**

The programme also served as a platform to strengthen ICICI Lombard's presence as a responsible corporate citizen. Banners, posters, and informational materials on eye care were prominently displayed at all camp locations. The active participation of volunteers further enhanced the brand's visibility and goodwill within the community.

## **7. Reporting and Feedback**

Comprehensive reports documenting the programme's impact were prepared and shared with key stakeholders. Insights gathered from beneficiaries, volunteers, and medical partners provided valuable learning for the continuous refinement of future initiatives.

Through this well-executed implementation strategy, the Caring Hands Programme successfully addressed the eye care needs of underserved communities, contributing to improved vision and overall well-being for thousands of beneficiaries.

### **1.3.5 Addressing Implementation Challenges: Risks, Mitigation Strategies, and Best Practices**

The successful implementation of the Caring Hands Programme was a result of careful planning, proactive risk management, and the application of best practices. While the initiative achieved its intended objectives, several challenges were encountered during the execution. Through adaptive strategies and collaborative efforts, these challenges were effectively mitigated.

#### **1. Key Challenges and Risks Faced**

- **Logistical and Operational Constraints:** Coordinating multiple camps across various locations within a limited timeframe posed logistical challenges. Ensuring the availability of medical professionals, equipment, and volunteers simultaneously at different sites required meticulous planning.

- **Beneficiary Mobilization and Participation:** Encouraging participation from schools, shelter homes, and community centres was challenging, particularly in areas with limited awareness about the importance of eye care.
- **Resource Management:** Managing the distribution of spectacles to over 4,700 beneficiaries without errors or delays demanded efficient inventory management and coordination.
- **Data Management and Reporting:** Collecting accurate data on screening outcomes, spectacle distribution, and beneficiary feedback across numerous locations was complex.
- **Brand Awareness and Perception Management:** Communicating the role of ICICI Lombard as a socially responsible organization while maintaining a community-centric focus required a balanced approach.

## 2. Mitigation Strategies Adopted

- **Centralized Planning and Decentralized Execution:** A centralized coordination team oversaw the planning, resource allocation, and real-time monitoring of camps. Simultaneously, localized implementation teams ensured operational flexibility and responsiveness.
- **Community Engagement and Partnerships:** Close collaboration with school authorities, local NGOs, and community leaders helped in mobilizing beneficiaries and building trust. Awareness campaigns emphasizing the importance of eye care were also conducted.
- **Volunteer Training and Support:** ICICI Lombard volunteers were provided with clear guidelines and training to manage camp operations efficiently. This ensured seamless service delivery while reducing operational bottlenecks.
- **Technology Integration for Data Management:** A standardized data collection and reporting format was implemented across all camps. Real-time data tracking facilitated quick resolution of issues and ensured transparency in impact measurement.
- **Proactive Risk Management:** Potential challenges were identified through scenario planning, and contingency plans were put in place. Continuous feedback loops from camp sites enabled adaptive problem-solving.

### 3. Best Practices and Learnings

- **Stakeholder Collaboration:** Engaging key stakeholders, including medical partners, community leaders, and volunteers, fostered a sense of ownership and enhanced the overall impact of the programme.
- **Localized Approach:** Adapting the camp setup and communication materials to suit the local context improved beneficiary participation and satisfaction.
- **Real-time Problem Solving:** Establishing a dedicated coordination team to handle on-ground issues ensured the timely resolution of challenges.
- **Continuous Monitoring and Feedback:** Regular data analysis and beneficiary feedback collection allowed for mid-course corrections and improvements.
- **Brand Integration with Purpose:** ICICI Lombard's presence was highlighted in a subtle yet impactful manner, reinforcing its commitment to social good without overt commercial promotion.

Through these adaptive strategies and best practices, the Caring Hands Programme successfully navigated implementation challenges, ensuring enhanced access to eye care services for underserved communities. The learnings from this experience will serve as a valuable reference for future CSR initiatives.

#### 1.4 Alignment with CSR Policy

The Schedule VII (Section 135) of the Companies Act, 2013 specifies a list of activities that companies can include in their Corporate Social Responsibility (CSR) policies. The table below demonstrates how the Caring Hands Programme aligns with the approved CSR activities outlined by the Ministry of Corporate Affairs.

*Table 1: Alignment of the Programme with CSR Policy*

Sub-Section	Activities as per Schedule VII	Alignment
(i)	Promoting healthcare, including preventive healthcare and sanitation, and making available safe drinking water	Completely
(ii)	Promoting education, including special education and employment-enhancing vocational skills, especially among	Partially

Sub-Section	Activities as per Schedule VII	Alignment
	children, women, elderly, and the differently-abled, and livelihood enhancement projects	

## 1.5 Alignment of the Programme with BRSR Principles

The programme also aligns with ESG (Environmental, Social, and Governance) principles, particularly within the framework of Business Responsibility & Sustainability Reporting (BRSR) introduced by the Securities & Exchange Board of India (SEBI). The following table highlights the key principles to which the programme contributes:

*Table 2: Alignment of the Programme with BRSR Principles*




Principle	Description	Alignment
Principle 4	Businesses should respect the interests of and be responsive to all their stakeholders.	Completely
Principle 8	Businesses should promote inclusive growth and equitable development.	Completely

## 1.6 Alignment with UN Sustainable Development Goals (SDGs)

The Caring Hands Programme also contributes to achieving the United Nations Sustainable Development Goals (SDGs). The table below outlines the relevant SDGs and their corresponding targets aligned with the programme's impact:

*Table 3: Alignment of the Programme with SDGs*

Sustainable Development Goal (SDG)	Target	Alignment
Goal 3: Good Health and Well-Being	Target 3.8: Achieve universal health coverage, including financial risk	The programme facilitated access to eye care services

Sustainable Development Goal (SDG)	Target	Alignment
 <p>3 GOOD HEALTH AND WELL-BEING</p>	protection, access to quality essential healthcare services, and access to safe, effective, quality, and affordable essential medicines and vaccines for all.	for underserved children and adults, contributing to improved health outcomes.
 <p>4 QUALITY EDUCATION</p>	Target 4.1: Ensure that all girls and boys complete free, equitable, and quality primary and secondary education leading to relevant and effective learning outcomes.	By addressing vision impairments, the programme improved children's academic performance and learning experiences.
 <p>10 REDUCED INEQUALITIES</p>	Target 10.2: Empower and promote the social, economic, and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion, or economic or other status.	The programme ensured inclusive access to eye care services, promoting health equity in marginalized communities.

## 1.7 Alignment of the Programme with National Priorities

The Caring Hands Programme complements several national policies and initiatives that aim to improve healthcare access and promote preventive healthcare. Below is a summary of the alignment:

National Policy / Mission	Objective	Alignment
National Health Mission (NHM)	To provide accessible, affordable, and quality healthcare to the rural population.	The programme conducted eye camps in underserved areas, ensuring equitable healthcare access.
Ayushman Bharat - Health and Wellness Centres	Promotes comprehensive primary healthcare, including preventive and curative services.	Preventive eye care was promoted through screenings and awareness sessions.
Beti Bachao Beti Padhao	Promotes education and well-being of the girl child.	By providing spectacles to girls with vision impairments, the programme enhanced their academic performance and participation.

Table 4: Alignment of the Programme with National Priorities

## 1.8 Theory of Change

Key Activities	Output Indicators <sup>1</sup>	Outcome Indicators	Impact Indicators
Mobilization and Pre-Planning	- 14 locations/centres/shelter homes/schools engaged	- Increased equitable access to eye care screening camps for all age groups	- Improved vision among beneficiaries leading to better quality of life
	- Mapping of schools/centres/shelter homes within a 5 km radius of ICICI Lombard offices	- Improved understanding of eye care practices among families	- Enhanced learning and playtime for children due to better vision

<sup>1</sup> Numbers as shared by implementing agency

	- Approvals secured from these centres	- Clear diagnoses of eye problems and available solutions	- Improved cost-saving measures in accessing eye care solutions
	- Identification of ophthalmologist partners and branches	- Enhanced resource optimization by families of beneficiaries	- Increased brand recall and value perception of ICICI Lombard among beneficiaries
Eye Screening Camps	- Conducted over 250 camps	- Increased school attendance post-camp	- Sustained usage of spectacles among beneficiaries
	- Over 45,000 children and parents attended	- Heightened awareness about eye care among beneficiaries	- Decrease in out-of-pocket expenditure (OOPE) for eye care services
Spectacle Distribution	- Over 4,700 spectacles distributed to children, parents, and adults	- Number of beneficiaries continuing to wear spectacles	- Improved vision among beneficiaries
Brand Awareness Initiatives	- Number of beneficiaries relating names with the brand and camp	- Increased awareness about ICICI Lombard among beneficiaries	- Increased Awareness about ICICI Lombard among beneficiaries

*Table 5: Theory of Change*



## Chapter : 2

# Design and Approach of the Need Assessment



This section provides an overview of the objectives of the study, the adopted research methodology, and other details revolving around the study approach.

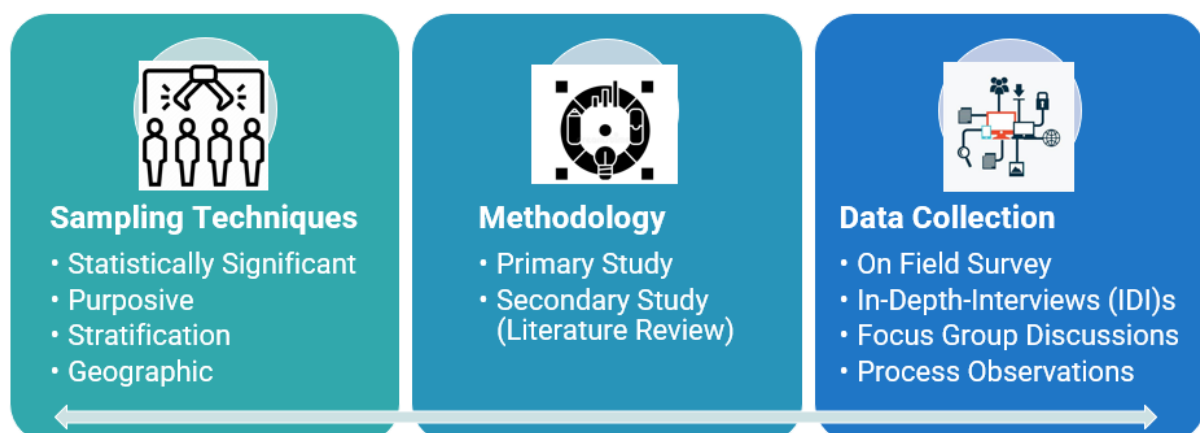
## 2.1 Objectives of the Study

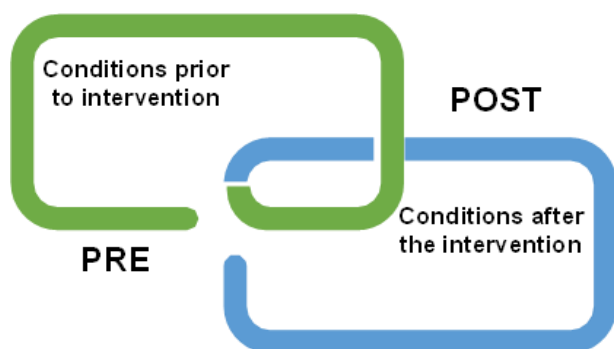
The objectives of the Impact Assessment were as follows:

- Assess the project outcomes based on the IRECS framework parameters of relevance, expectations, inclusiveness, convergence, and service delivery.
- Garner feedback and responses—both qualitative and quantitative—from various stakeholders associated with the project regarding its performance and the processes involved.
- Gather information on experiences and challenges faced, if any, by the partner NGO during the project's implementation and suggest mitigating pathways for the future.
- Document impactful human-interest stories among the end beneficiaries of the project.
- Provide suggestions/recommendations, if any, based on the study-related findings.

## 2.2 Evaluation Framework & Indicators

Given the objectives of the study and the key areas of inquiry, the design of the evaluation focused on learning as the prime objective. The study design components are:





The evaluation used a pre-post-program approach to learn from the program's impact. This framework compared conditions before and after the program to measure its contribution to improving beneficiaries' lives. However, it acknowledges that other external factors

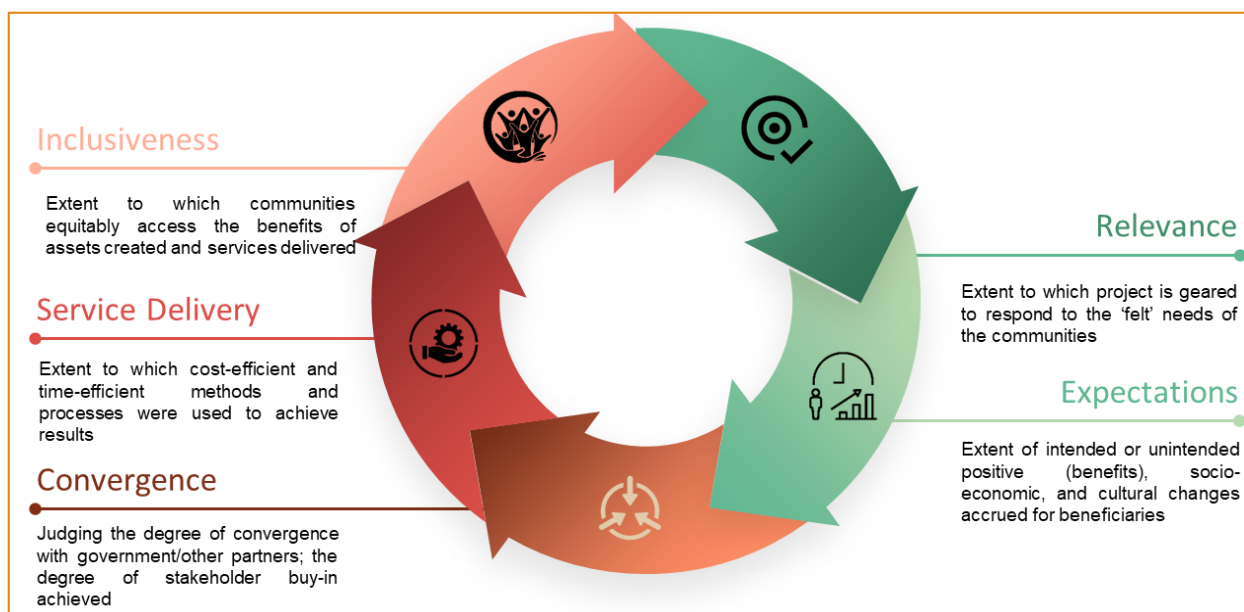
may also influence the outcomes. The detailed approach was finalized with the client and program coordinators.

CSRBOX used both secondary and primary data for program assessment. The secondary study reviewed annual reports, project documents, monitoring reports, and studies from reputable sources. The CSRBOX team also examined documents detailing activities, processes, and beneficiary numbers. The primary study collected and analyze qualitative and quantitative data, including in-depth interviews with key stakeholders. Additionally, the team reviewed project proposals, reports, budgets, and timelines. This approach ensures a comprehensive program evaluation.

The current evaluation is reflective and forward-looking, aiming to inform strategic decision-making and actions that impact achieving planned results. It assesses both the processes and outcomes of the program, providing an evidence-based assessment of its performance and achievements.

## **2.3 Assessment Framework and Key Information Matrix**

To determine the inclusiveness, relevance, convergence, impact potential (expectations), programme, and service delivery of the programme, the evaluation used the IRECS Framework.



The evaluation matrix below maps the evaluation questions with the key information areas, the source of data collection, and the methods used for data collection. These framework pillars are the key information areas that played an instrumental role in the development of data collection tools and data analysis. Based on our analysis of the programme, we had developed a preliminary framework of performance indicators measuring both tangible and intangible outcomes. This indicator framework evolved and expanded to include ongoing programme insights and stakeholder collaborations.

Framework Pillars	Information Indicators
Inclusiveness	<ul style="list-style-type: none"> <li>Extent of participation among all strata of the community, including children and youth (gender, caste, etc.)</li> <li>Outreach of the programme to multiple geographies.</li> </ul>
	<ul style="list-style-type: none"> <li>Perception of the stakeholders towards the activities of the intervention.</li> <li>Problems faced by beneficiaries in the absence of the project such as lack of treatment facilities for eye problems, high cost incurred for the treatment, etc.</li> </ul>

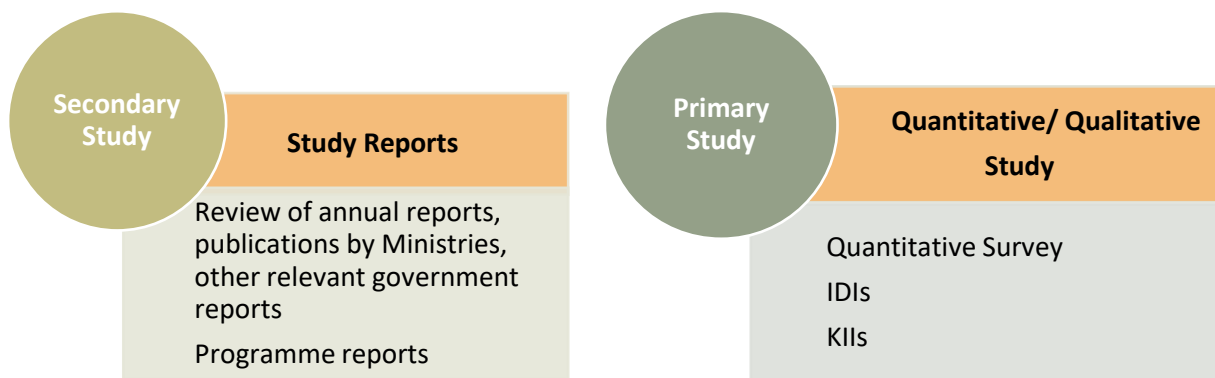
Framework Pillars	Information Indicators
Relevance	<ul style="list-style-type: none"> <li>• The extent to which the objectives of the programme are aligned with the beneficiaries' requirements.</li> <li>• The extent to which the project caters to the eye problems of the students.</li> </ul>
Expectations	<ul style="list-style-type: none"> <li>• Improvement in the learning capacity of children</li> <li>• Extent of awareness in the community regarding eye health care</li> <li>• Reduction in out-of-pocket expenditure by the beneficiaries for an eye care solution</li> </ul>
Convergence	<ul style="list-style-type: none"> <li>• Role and responsibility of various stakeholders to ensure the impactful execution and sustainability of the programme.</li> <li>• Alignment of the programme with UN-SDGs, Government Schemes/Priorities, ESG principles, Schedule VII,</li> <li>• Company CSR policy, etc.</li> <li>• Institutionalisation of the programme within existing government mechanisms.</li> </ul>
Service Delivery	<ul style="list-style-type: none"> <li>• The extent to which programme design is initiating cost-efficient intervention outputs and outcomes.</li> <li>• The extent to which the services received by beneficiaries are feasible and seamless</li> <li>• Level of innovative practices improving service delivery</li> </ul>

Table 6: Framework and Indicators

## 2.4 Methodology

### 2.4.1 Assessment & Methodology

For the assessment of the programme, CSRBOX employed a two-pronged approach to research and data collection.



The secondary study involved a review of annual reports, project documents and monitoring reports, other studies, and research by renowned organisations available in the public domain to draw insights into the situation of the area. The consultants also studied project implementation-related documents, specifying details of activities carried out, processes undertaken, no. of beneficiaries reached, etc.

The primary study comprised quantitative and qualitative approaches to data collection and analysis. The qualitative aspects involved the inclusion of Participatory Rural Appraisal (PRA) tools like in-depth interviews (IDIs) with key stakeholders.

#### **2.4.2 Sampling Approach**

The evaluation of the ICICI Lombard - Caring Hands programme utilised a stratified sampling approach to ensure that the sample was representative of all relevant stakeholders. This method ensured a nuanced understanding of the programme's impact by capturing diverse perspectives across different regions.

#### **2.4.3 Geographic Sampling**

- **Sampling Method:** A stratified sampling approach was used to interact with students and parents, ensuring proportional representation from the key regions where the programme was implemented.
- **Field and Virtual Interactions:** Data collection was primarily conducted through virtual means, while on-field interactions were limited to key informant interviews (KIIs) and in-depth interviews (IDIs) where necessary. This hybrid approach ensured flexibility and broader reach.

- Impact Stories: To provide deeper insights into the programme's impact, 1-2 case studies or impact stories were captured from key beneficiaries.

Data collection was conducted in the following locations:

- Karnataka
- Kerala
- Andhra Pradesh
- Mumbai
- Delhi

#### 2.4.4 Quantitative Sampling

The quantitative sampling was focused on primary stakeholders:

Sl. No.	Stakeholders	Mode of Data Collection	Location	Type of Stakeholder	Rationale	Sample Size
1	Students/Parents	Quantitative Surveys	Karnataka, Kerala, Andhra Pradesh, Mumbai, Delhi	Primary Stakeholder	95% CL and 4% M.O.E	343 <sup>2</sup>

Table 7: Quantitative Sampling

#### 2.4.5 Qualitative Sampling

For qualitative insights, various stakeholders were engaged through in-depth interviews (IDI) and key informant interviews (KII). The following table outlines the interactions:

Sl. No.	Secondary Stakeholder	Mode of Data Collection	No. of Interactions
1	Schools/camps/shelter homes/communities	IDI	2

<sup>2</sup> Due to limitations in beneficiary data, the initial target sample size of 500 was not fully achieved. As a result, only 343 samples were collected for this assessment. Efforts are ongoing to gather the remaining data to meet the original target.

Sl. No.	Secondary Stakeholder	Mode of Data Collection	No. of Interactions
2	Project Implementation Team	KII	1

*Table 8: Qualitative Sampling*

Total Interactions: 3

This comprehensive sampling approach ensures that both quantitative and qualitative data provide valuable insights into the effectiveness of the ICICI Lombard - Caring Hands programme. By engaging diverse stakeholders across different regions, the assessment captured a holistic view of the programme's impact.

## **2.5 Challenges to Conducting the Study and Mitigation Measures Adopted**

During the assessment of the ICICI Lombard - Caring Hands programme, multiple challenges were faced in addition to the restrictions on student data collection. Despite these challenges, strategic measures were adopted to ensure the successful completion of the study.

### **Key Challenges and Mitigation Measures**

#### **1. Limited Access to Student Data**

- Challenge: The implementing partner and ICICI Lombard did not maintain detailed student data to ensure compliance with privacy regulations, such as the Juvenile Justice (Care and Protection of Children) Act, 2015, the Digital Personal Data Protection (DPDP) Act, 2023, and other applicable laws.
- Mitigation: Direct interaction with students was facilitated through schools. Permissions were secured from school authorities, and focus group discussions and interviews were conducted to gather qualitative insights.

#### **2. Geographic and Logistical Challenges**

- Challenge: The programme was implemented across 14 states, including remote and rural areas, making access to schools difficult for data collection.



- Mitigation: Regional representatives and local coordinators supported data collection. Virtual interactions and telephonic interviews were also leveraged where in-person visits were not feasible.

### 3. Inconsistent Availability of Stakeholders

- Challenge: Scheduling interviews with school staff, students, and parents was challenging due to academic calendars, holidays, and unforeseen events.
- Mitigation: Flexibility in scheduling was maintained. Follow-up visits and multiple time slots were offered to ensure stakeholder participation.

### 4. Limited Recall and Response Bias

- Challenge: Participants, especially students and teachers, faced difficulties in recalling programme details due to the passage of time. Response bias was also a concern during feedback collection.
- Mitigation: Carefully designed questionnaires with simplified and memory-aiding prompts were used. Triangulation of data from multiple sources, including teachers and programme staff, helped in validating findings.

### 5. Language and Cultural Barriers

- Challenge: Language differences across the diverse geographical locations posed communication challenges.
- Mitigation: Local surveyors and field investigators proficient in regional languages were engaged. Translations of questionnaires and interview guides were provided to ensure accurate data collection.

### 6. Limited Secondary Data

- Challenge: The absence of extensive secondary data on students' eye health from schools and local health institutions created difficulties in establishing a baseline for comparison.
- Mitigation: Inferences were drawn using available reports and insights from school authorities. Primary data collected during the assessment was further compared with regional or national health indicators to assess impact.

## 7. Time and Resource Constraints

- Challenge: Conducting a large-scale study within a limited timeframe and budget restricted the extent of data collection.
- Mitigation: A focused sampling strategy was adopted. Schools were selected based on geographical representation and programme coverage to ensure the data was both manageable and representative.

## 8. Maintaining Participant Comfort and Ethical Considerations

- Challenge: Ensuring participants' comfort during discussions about their health was a priority, particularly for children.
- Mitigation: All interactions were conducted in a safe and comfortable environment within school premises. Ethical protocols were strictly followed, including obtaining informed consent from participants and school authorities.

## **2.6 Ethical Practices**

The assessment of the ICICI Lombard - Caring Hands programme was conducted in adherence to established ethical standards to ensure the safety, dignity, and privacy of all participants. The following key ethical practices were maintained throughout the study:

### 1. Informed Consent

- Prior to any interaction, informed consent was obtained from school authorities and participants.
- Participants were briefed on the purpose of the assessment, the nature of questions, and their right to withdraw at any time.

### 2. Child Safety and Well-being

- As the study involved interactions with children, strict child protection protocols were followed.
- Interviews and discussions were conducted in the presence of teachers or guardians where required.

### 3. Confidentiality and Privacy

- Personal information and responses were kept confidential. No identifiable data was recorded or reported.
- Data was anonymized and securely stored to prevent unauthorized access.

### 4. Non-coercive Participation

- Participation in the study was voluntary, and participants had the option to decline answering any questions.
- No incentives or undue influence were used to obtain responses.

### 5. Cultural Sensitivity

- Local languages were used during interviews, and culturally appropriate approaches were adopted.
- Field staff were trained to be respectful and mindful of cultural norms and practices.

### 6. Compliance with Legal Guidelines

- The study was conducted in line with relevant laws and regulations, including the Juvenile Justice (Care and Protection of Children) Act, 2015, the Protection of Children from Sexual Offences (POCSO) Act, 2012, and the Digital Personal Data Protection (DPDP) Act, 2023.
- No sensitive personal data of children was collected or stored.

# Chapter : 3

## Impact Findings



### 3.1. Inclusiveness

Balanced gender representation (58% female, 42% male) and outreach across diverse socio-economic backgrounds.

Targeted children aged 8 to 16, with 41% in the 12-14 age group, ensuring timely eye care.

Significant OBC (24%) and SC (21%) participation, with scope to enhance ST outreach (2%).

Strong presence in Kerala (41%) and Uttar Pradesh (48%), with potential for wider state coverage.

Reached low-income families (76% earning below ₹20,000/month), offering free eye care support.

The ICICI Lombard Caring Hands Camp demonstrated a commendable level of inclusiveness, ensuring the participation of children from diverse backgrounds. The camp's design and implementation reflected a deliberate effort to reach children across different regions, socio-economic classes, and social categories. However, opportunities remain to further strengthen inclusivity and maximize impact.

#### Age and Gender Representation

The respondents were children and the parents of children within the 8 to 16 years age group, effectively targeting a demographic most vulnerable to undetected vision issues. The majority of children fell within the 12 to 14 years age range, accounting for 41% respondents. This focus is particularly relevant as vision problems often emerge during adolescence, impacting academic performance.

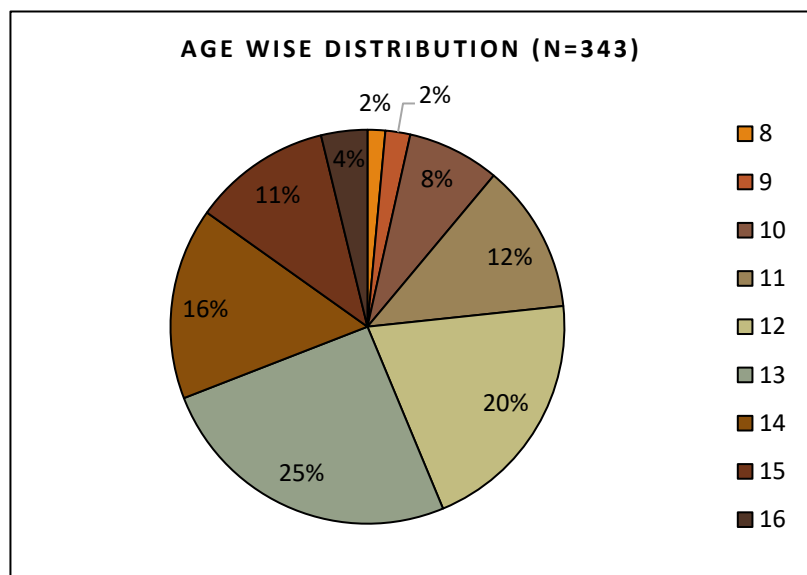


Figure 1: Age Wise Distribution

Gender representation was fairly balanced, with 58% female and 42% male respondents. This near-equal participation suggests that the initiative maintained gender parity in outreach and service delivery. The higher participation of girls is particularly noteworthy, indicating that parents were receptive to availing medical services for their daughters, reflecting a shift towards gender-equitable healthcare access.

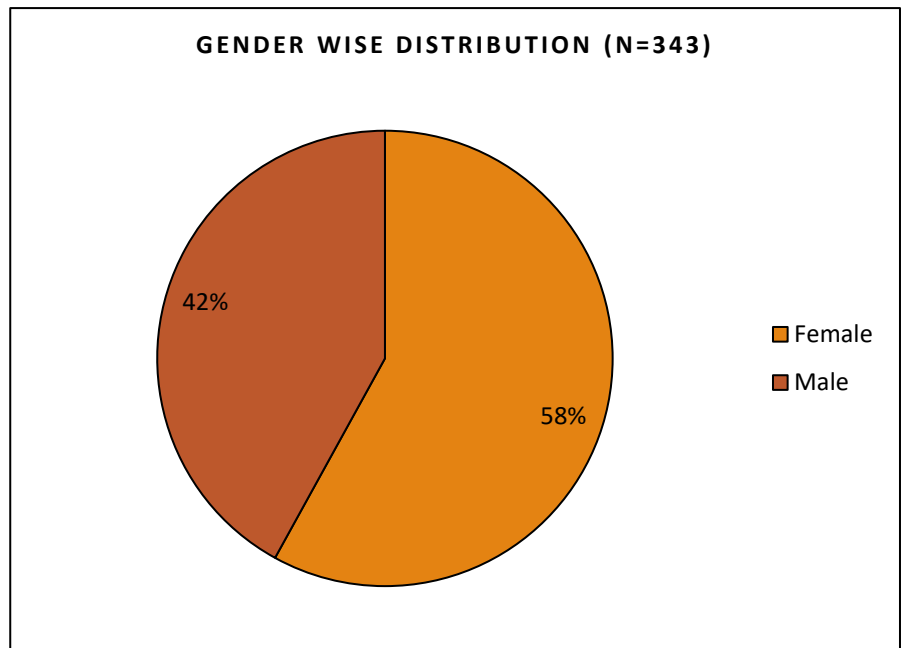


Figure 2: Gender Wise Distribution

### Social Category Representation

A diverse representation across social categories was evident among respondents. The camp reached:

- OBC respondents (24%)
- SC respondents (21%)
- ST respondents (2%)
- General category respondents (42%)
- Respondents who preferred not to disclose their category (11%)

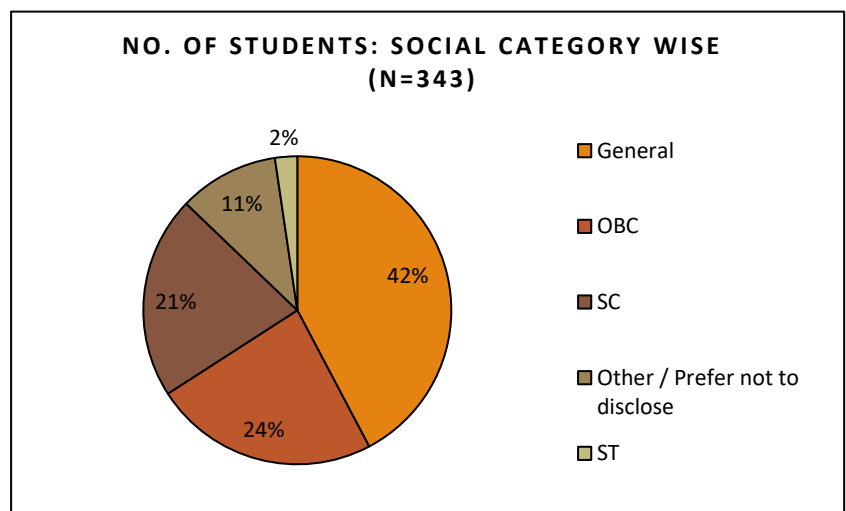


Figure 3: No. of Students: Social Category Wise

While the representation of OBC and SC respondents indicates inclusive outreach, the participation of ST respondents (2%) was relatively low. This suggests a need for targeted efforts to reach children from tribal communities who may face additional

barriers to accessing healthcare. The 11% non-disclosure rate also reflects the sensitivity around caste identification, emphasizing the importance of fostering a non-discriminatory environment during data collection.

## Geographic Representation

The selected sample included respondents from five states —Andhra Pradesh, Karnataka, Kerala, Maharashtra, and Uttar Pradesh. The initiative ensured access to quality eye care in both urban and rural regions. This geographic reach was strategically designed to cover underserved areas, particularly where healthcare infrastructure is inadequate. By providing free eye check-ups and spectacles, the camp addressed the stark disparities in healthcare access between metropolitan centers and remote locations.

## School Representation

The camp reached a range of schools, including Lalacheruvu MPL Corp Primary School (11% respondents), Primary School NOIDA (42% respondents), SDM Mangal Jyothi Integrated School (6% respondents), Sir Sayyad English High School (5% respondents), and VKNM UP School in Kerala (36% respondents). The participation of both

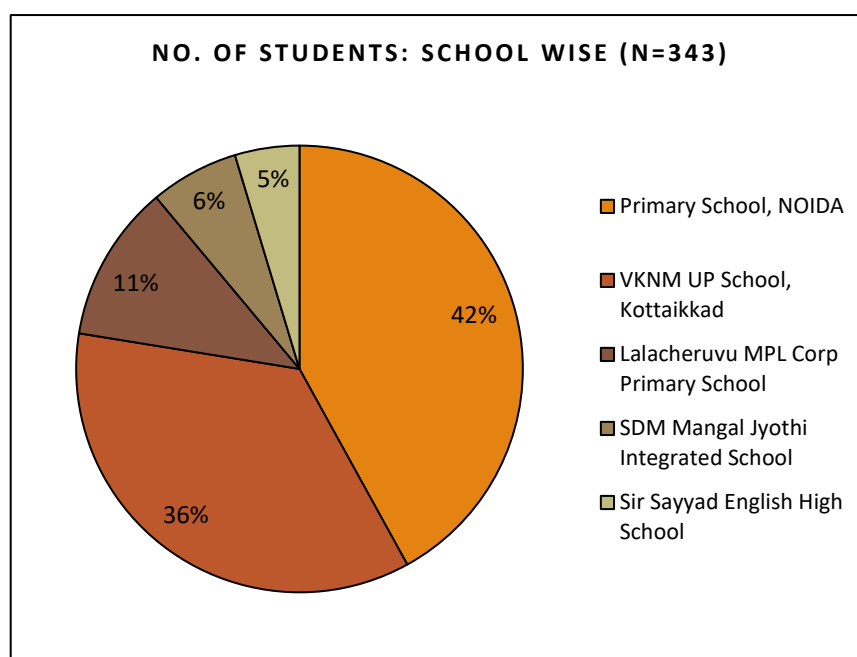


Figure 4: No. of Students: School Wise

urban and rural schools highlights the programme's inclusive approach. While urban schools accounted for 240 respondents, rural schools contributed 103 respondents, ensuring accessibility across both settings.

The logistical convenience of school-based camps played a crucial role in enhancing participation. By eliminating the need for travel and associated costs, the initiative ensured that students could access care without inconvenience. Additionally, 99% of participants were informed about the camp through school announcements, demonstrating the effectiveness of communication strategies. The presence of local healthcare professionals fluent in regional languages further facilitated effective interaction, making students and parents feel comfortable and valued.

### Economic Inclusivity

The camp effectively served children from economically disadvantaged backgrounds. Among respondents, a substantial proportion reported their parents working as daily wage earners or in low-income occupations:

- 26% of fathers and 19% of mothers were daily wage labourers.
- 18% of fathers and 7% of mothers were farmers.
- 13% of fathers and 1% of mothers were self-employed.

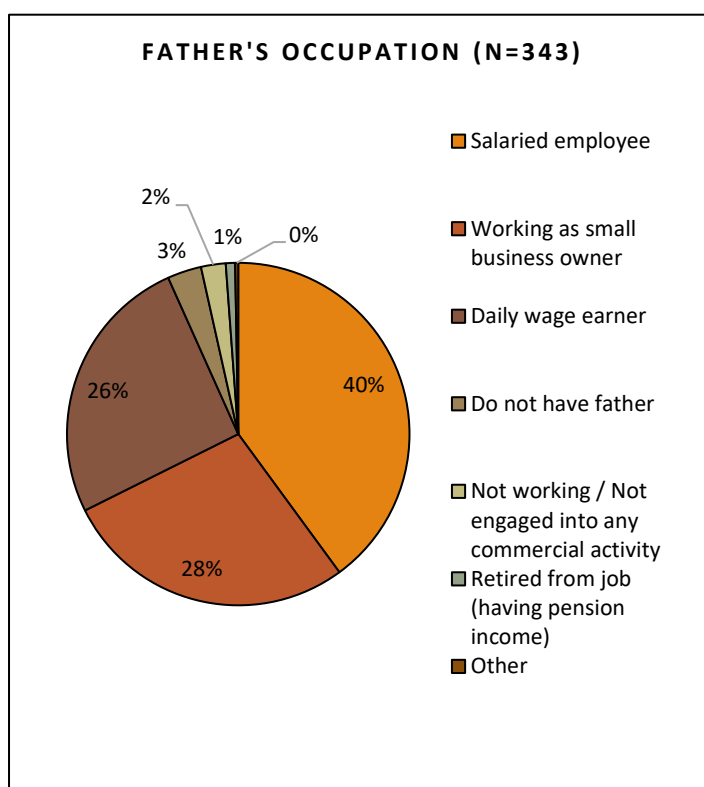


Figure 6: Father's Occupation

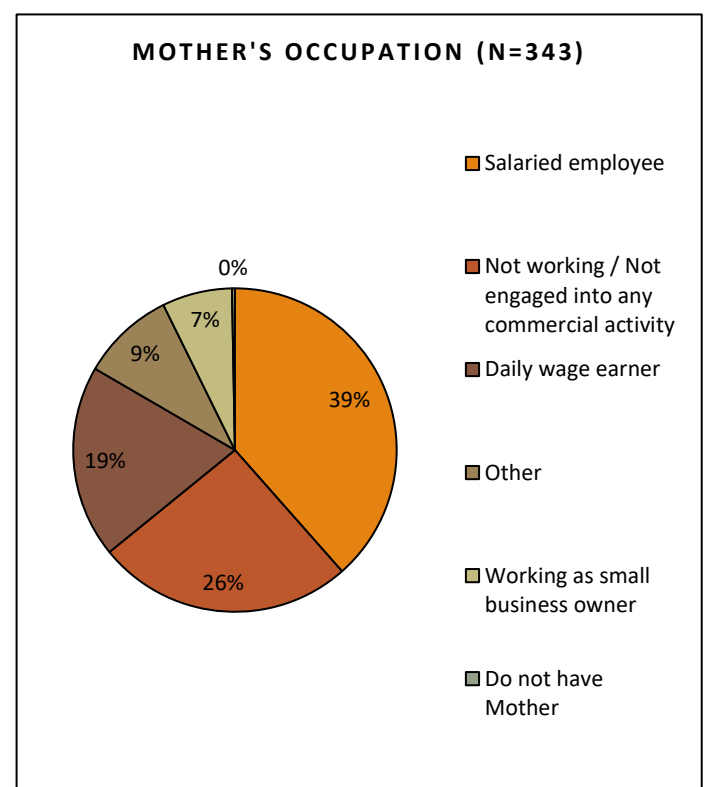


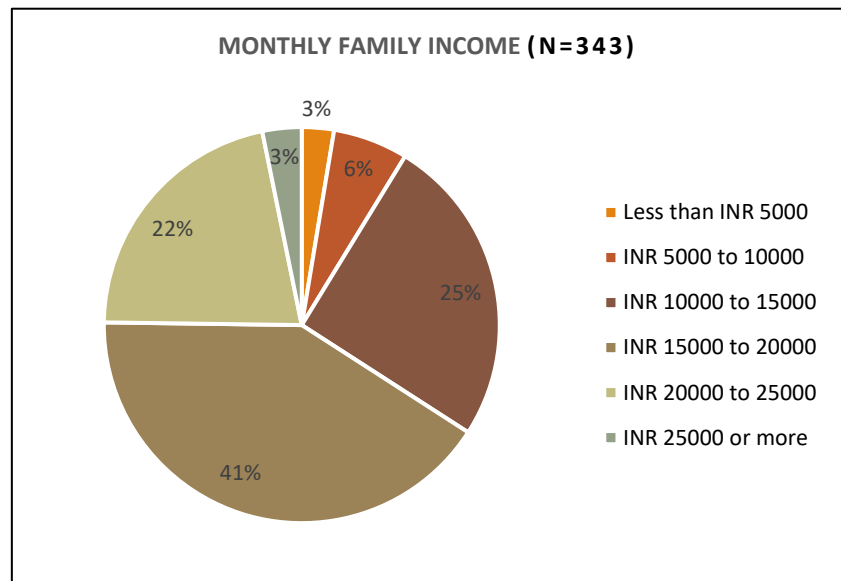
Figure 5: Mother's Occupation



The respondents' family income distribution further reflects the camp's economic inclusivity:

- 47% reported a family income of ₹10,000 to ₹20,000 per month.
- 29% had a family income below ₹10,000 per month.

This data confirms the camp's success in reaching financially constrained families, for whom accessing eye care services would otherwise pose a financial burden. Providing free spectacles and medical consultations ensured that cost was not a barrier to improved vision health.



*Figure 7: Monthly Family Income*

The ICICI Lombard Caring Hands Camp demonstrated a strong commitment to inclusivity, reaching children from diverse social, economic, and regional backgrounds. The balanced gender representation and the participation of children from low-income families underscore its impact in bridging healthcare gaps. However, by strengthening outreach to tribal communities, expanding coverage in underrepresented states, and ensuring cultural sensitivity in data collection, the camp can further enhance its inclusivity in future editions.

## 3.2. Relevance

51% of respondents had never undergone an eye test, highlighting the camp's role in bridging the gap in eye care access.

The camp effectively identified vision issues like blurred vision, excessive tears, and eye strain.

57% children received free spectacles, ensuring immediate corrective support and preventing further vision deterioration.

States like Uttar Pradesh and Kerala saw significant diagnoses, with cases of blurred vision detected.

By offering free services, the camp reduced financial barriers for low-income families, particularly benefiting those with parents in daily wage labor.

The relevance of the ICICI Lombard Caring Hands Camp is evident in its targeted approach to addressing the eye care needs of school-aged children. The programme's focus on early detection of vision issues aligns well with the healthcare requirements of children in their formative years. The analysis, based on responses from a sample of 343 respondents across five states — Andhra Pradesh, Karnataka, Kerala, Maharashtra, and Uttar Pradesh — highlights its pertinence.

### Addressing the Gap in Eye Care Services

A significant proportion of respondents (51%) had never undergone an eye test before attending the camp. Out of 343 respondents, 51% had no prior experience with eye testing, reflecting a clear gap in access to routine eye care. Additionally, 43% respondents indicated that their only prior experience with eye tests was

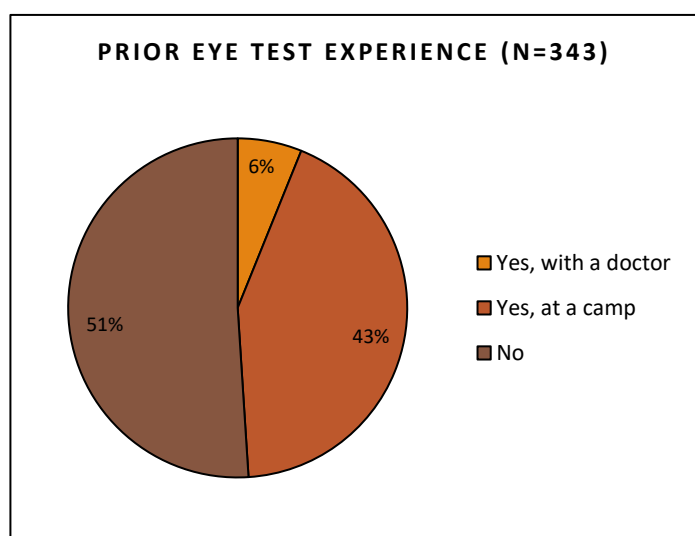


Figure 8: Prior Eye Test Experience

through similar camps. This reliance on temporary health interventions underscores the lack of permanent, accessible eye care facilities in many communities.

Furthermore, 43% of beneficiaries said they wouldn't have opted to go for eye treatment if not for the camp, and 8% were not sure if they would.

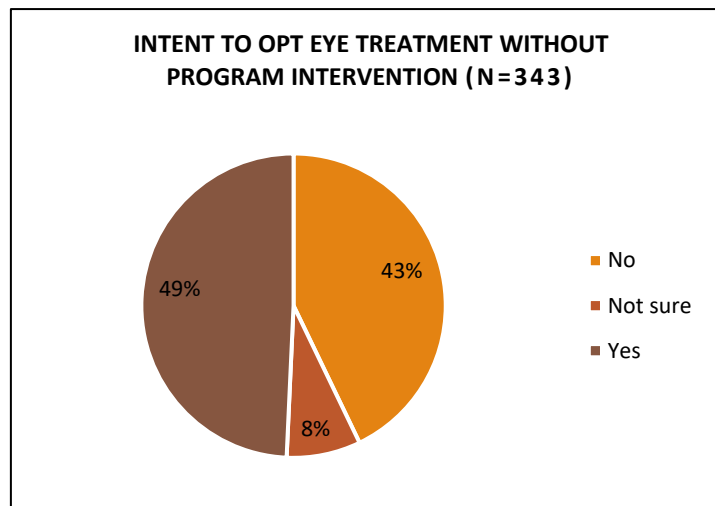


Figure 9: Intent to Opt Eye Treatment Without Program Intervention

The programme has been impactful. The students who require eye check-ups are receiving them. It is especially helpful for children who may not receive such care otherwise. On the days of the programme, attendance also significantly increases. This is a clear indication that the initiative is appreciated. Overall, the feedback has been positive.

- Ms. Laxmi Rane, Principal, Primary School- NOIDA

### Diagnosis and Early Detection of Vision Issues

The programme effectively identified and addressed various eye-related issues. Among the respondents, blurred vision was the most commonly reported problem, affecting 38% children. Additionally, 19% respondents reported experiencing excessive tears, 10% had dry eyes, and 5% suffered from eye strain. Early detection of these issues is critical in preventing long-term vision impairment and ensuring academic success.

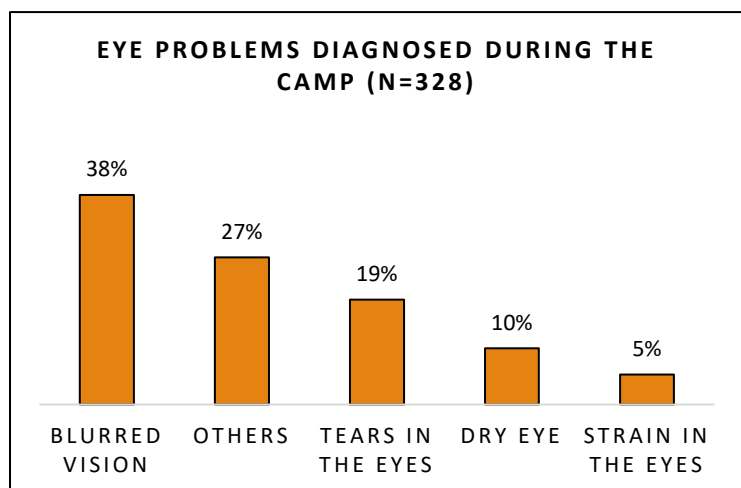


Figure 10: Eye Problems Diagnosed During The Camp

## Spectacle Provision and Impact

A significant outcome of the camp was the provision of spectacles to children in need. Of the total respondents, 77% were not wearing spectacles despite experiencing vision problems. Post-camp, the availability of free spectacles ensured that these children could benefit from immediate corrective measures.

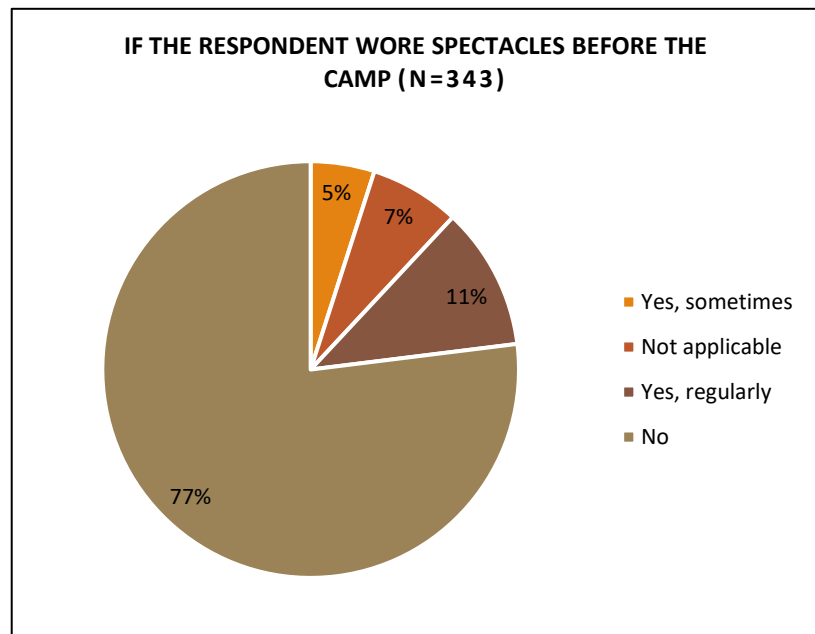


Figure 11: If the Respondent Wore Spectacles Before the Camp

## Enhancing Academic Performance

Vision plays a crucial role in academic success. Post-camp data indicated that 13% of participants experienced improved academic performance due to better vision, while 32% reported enhanced focus on studies. With reduced eye strain and fewer headaches for 29% of participants, the camp positively impacted learning outcomes and classroom participation. This aligns with global research that correlates clear

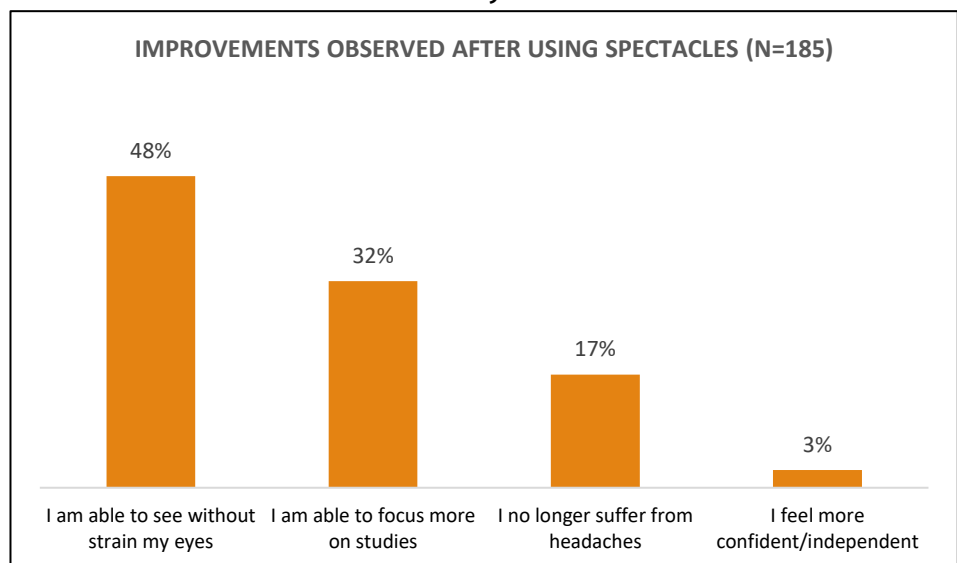
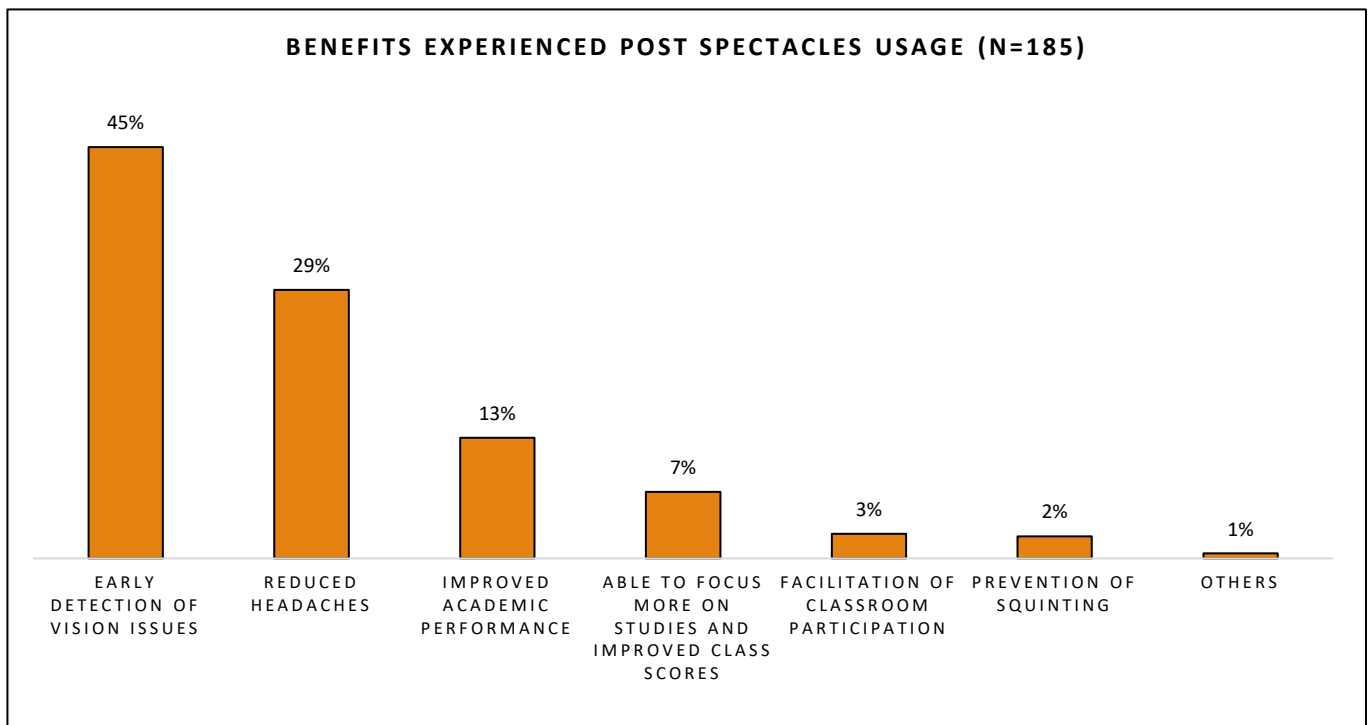


Figure 12: Improvements Observed After Using Spectacles

vision with improved literacy and cognitive development in children.



*Figure 13: Benefits Experienced Post Spectacles Usage*

In conclusion, the Caring Hands Camp's relevance is well-demonstrated through its strategic focus on addressing the eye care needs of underserved children. By providing free and accessible vision screening and corrective solutions, the programme played a vital role in preventing long-term visual impairments and enhancing the quality of life for its beneficiaries. Future initiatives could build on this impact by establishing regular follow-up mechanisms and integrating eye care services into school health programmes.

### 3.3. Expectations

51% of respondents had their first-ever eye test at the camp, fulfilling a critical unmet need in underserved regions.

Free corrective lenses were a key expectation, with 57% children receiving spectacles, particularly benefiting low-income families.

Children and parents anticipated enhanced academic performance, with 168 respondents reporting vision issues that hindered learning.

The camp eased financial strain for families earning ₹10,000-₹20,000 per month, providing free eye care instead of costly alternatives.

States like Uttar Pradesh, Kerala, and Maharashtra saw significant participation, with high expectations for improved vision and well-being.

The expectations from the ICICI Lombard Caring Hands Camp were shaped by the critical need for accessible eye care services, particularly among school-aged children from underserved communities. Insights gathered from the sample of 343 respondents reveal the beneficiaries' perspectives and how well the programme aligned with their anticipated outcomes.

#### Initial Expectations of Beneficiaries

For a majority of respondents, the primary expectation from the camp was to receive free and quality eye check-ups. Many children and their parents viewed the camp as an opportunity to address vision issues that had previously gone undetected or untreated.

#### Expectations Around Spectacle Provision

Given the financial constraints faced by many families, free spectacle provision emerged as a key expectation. Among respondents, 77% of those who needed spectacles were not wearing spectacles despite experiencing vision issues. The opportunity to receive corrective lenses without incurring costs was particularly valued by low-income families.

## Promoting Preventive Healthcare Awareness

The camp's educational efforts created a notable shift in awareness and behaviour regarding eye health. With 60% of participants acknowledging sufficient information on eye care, and 38% adopting eye exercises, the initiative fostered preventive healthcare habits. The emphasis on regular check-ups and responsible screen time usage also aligns with sustainable health management goals.

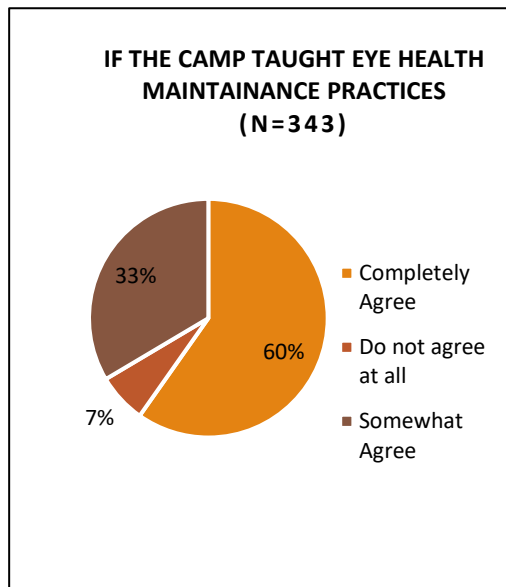


Figure 15: If the Camp Taught Eye Health Maintenance Practices

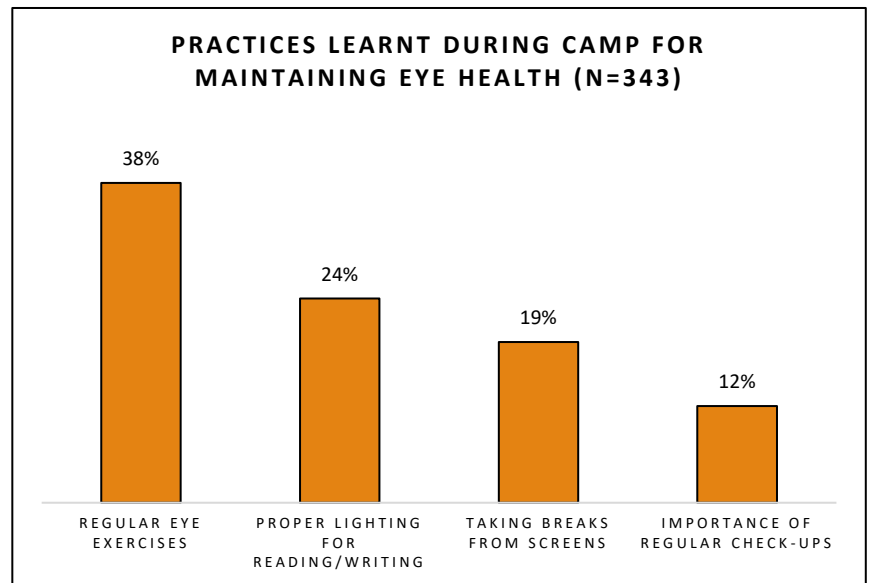


Figure 14: Practices Learnt During Camp for Maintaining Eye Health

Overall, the ICICI Lombard Caring Hands Camp effectively addressed the expectations of beneficiaries by providing accessible, free-of-cost eye care. The provision of spectacles, early diagnosis of vision issues, and immediate access to healthcare were well-aligned with the respondents' needs.

### 3.4. Convergence



The success of the ICICI Lombard Caring Hands Camp was significantly enhanced through effective convergence with schools, healthcare professionals, and community stakeholders. This collaborative approach ensured comprehensive service delivery, widened outreach, and streamlined implementation across the five states — Andhra Pradesh, Karnataka, Kerala, Maharashtra, and Uttar Pradesh — where beneficiary data was available for this assessment.

#### School Partnerships and Outreach

Schools played a pivotal role in mobilizing students and ensuring maximum participation. Among the 343 respondents, the highest participation was seen in Uttar Pradesh with 42% respondents, followed by Kerala (36% respondents), Andhra Pradesh (11% respondents), Karnataka (6% respondents), and Maharashtra (5% respondents). The substantial turnout in these states is indicative of strong partnerships and effective communication channels established with schools.

Additionally, schools facilitated logistical support by providing space for conducting eye tests and ensuring timely coordination with parents. The seamless execution of camps within school premises reflects the positive collaboration between ICICI Lombard and



educational institutions. In states like Kerala and Uttar Pradesh, where participation was particularly high, the role of schools in ensuring inclusivity and smooth facilitation was evident.

### **Healthcare Collaboration**

The programme's reliance on professional eye care service providers was a key aspect of convergence. Qualified ophthalmologists and optometrists conducted eye tests and diagnoses, ensuring accuracy and quality care. With 38% respondents diagnosed with blurred vision and 34% experiencing tears or irritation, the expertise of healthcare professionals was essential for early detection and appropriate corrective measures.

Further, respondents who were not wearing spectacles despite experiencing vision-related issues were identified during the camp. The provision of free spectacles through this collaboration effectively addressed a critical healthcare gap.

### **Operational Efficiency and Resource Sharing**

Efficient resource allocation and management were achieved through convergence. The camp's ability to provide free eye tests and spectacles to those in need, while keeping operational costs minimal, is a testament to the effective pooling of resources between ICICI Lombard and its partners. The geographical diversity of respondents highlights the programme's capacity to adapt to varied regional contexts through collaborative efforts.

Moreover, convergence with local healthcare providers ensured the availability of necessary equipment and trained personnel. This localized approach also facilitated culturally sensitive service delivery, promoting higher participation and satisfaction among beneficiaries.

Through effective convergence, the ICICI Lombard Caring Hands Camp successfully brought together multiple stakeholders to deliver comprehensive and inclusive eye care services. Strengthening these partnerships further, especially by enhancing follow-up care and expanding outreach to underserved regions, could significantly amplify the long-term impact of the initiative.

### 3.5. Service Delivery

Conducting camps in schools improved access, with 51% experiencing their first eye test. While 74% reported a positive experience, overcrowding in states like Uttar Pradesh caused delays.

99% were satisfied with the eye tests, but further consultation for 49% with blurred vision was limited.

76% needed spectacles, and 64% received them. However, 14% reported discomfort, suggesting a need for better frame quality.

91% received clear instructions, but 7% faced language barriers, emphasizing the need for multilingual support.

78% were unaware of follow-up care options, highlighting a gap in continuity of care.

The effectiveness of the ICICI Lombard Caring Hands Camp is deeply connected to the quality of its service delivery. Based on feedback from the respondents, it is evident that the camp successfully provided a much-needed intervention in vision care. However, a closer analysis reveals several strengths, challenges, and areas for improvement that could enhance the service delivery model. This section provides a comprehensive analysis of the service delivery mechanism, examining aspects such as logistical efficiency, healthcare personnel, beneficiary experience, and follow-up support, while incorporating relevant data points from the responses.

#### Accessibility and Logistics

The eye camps were organized within school premises, ensuring familiarity and comfort for the students. Conducting the camps in schools minimized logistical challenges for both students and parents, promoting greater participation. The facilities included designated screening areas, eye examination stations, and spectacle distribution counters, all arranged to maintain smooth participant flow.

The use of standardized equipment ensured accurate eye check-ups, with experienced ophthalmologists and healthcare professionals leading the screening process. Proper

lighting and seating arrangements further enhanced the quality of eye examinations. Among the students, 91% expressed satisfaction with the camp's facilities, indicating a well-organized and professional setup. 74% of respondents reported a positive experience with the camp's management, citing minimal wait times and clear instructions.

### Satisfaction with Camp Facilities

Feedback from participants highlighted a high level of satisfaction with the camp facilities. Around 91% of students and parents expressed positive opinions regarding the cleanliness, organization, and comfort of the designated screening areas. The availability of drinking water, adequate seating, and clear signage contributed to an overall pleasant experience.

Many parents appreciated the choice of school premises, as it minimized travel time and expenses.

The average waiting time across camps was reported to be approximately 15-20 minutes, which was well-received by participants. This efficient management reduced congestion and ensured a smooth flow of students across different stations. Participants particularly appreciated the streamlined processes and the quick yet thorough eye examinations.

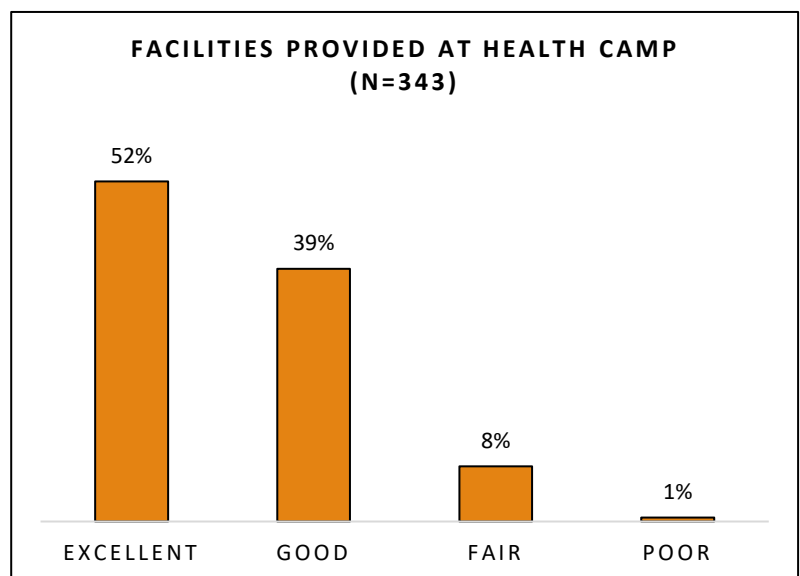


Figure 16: Facilities provided at Health Camp

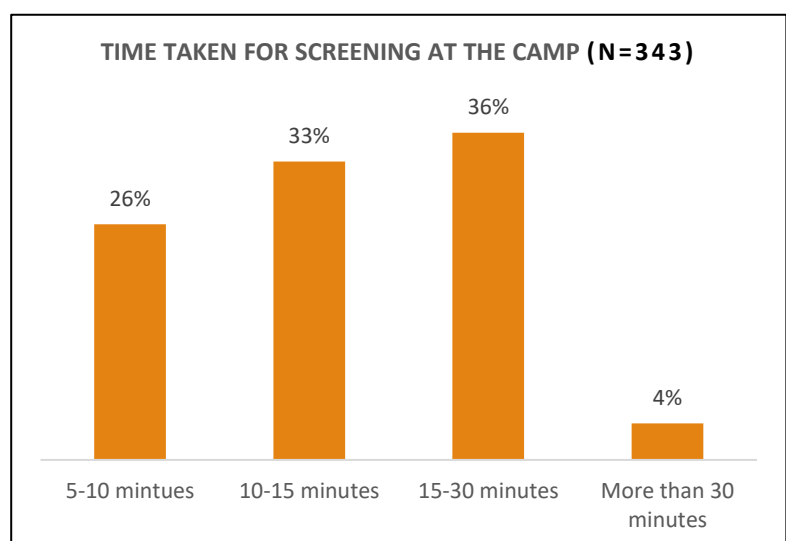


Figure 17: Time Taken for Screening at the Camp

Students also valued the friendly and supportive environment created by the camp staff, which significantly reduced their anxiety during the eye examinations.

Additionally, the systematic arrangement of the stations ensured minimal waiting time, further enhancing the

overall satisfaction with the facilities. 92% of the children said they would want to visit the camp again.

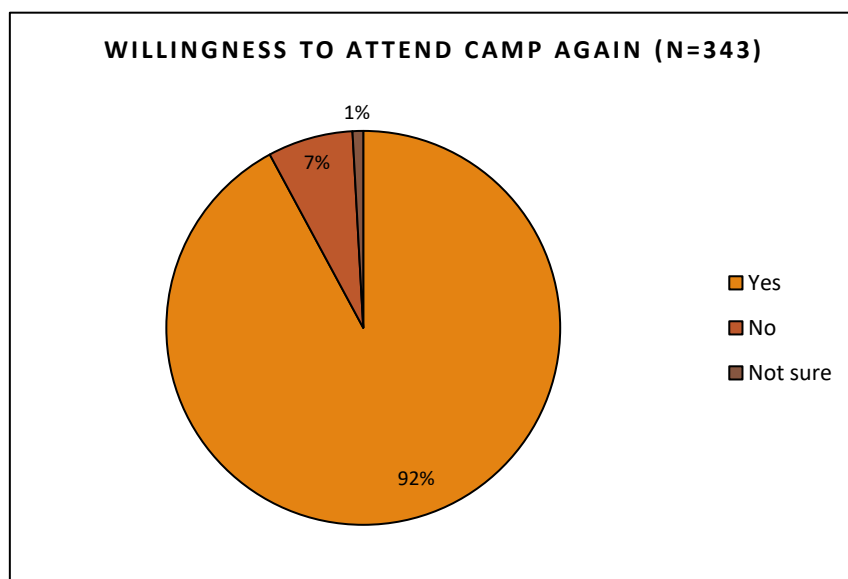


Figure 18: Willingness to Attend Camp Again

### Healthcare Personnel and Communication

The competence and conduct of the healthcare professionals were pivotal to the camp's success. Qualified ophthalmologists, optometrists, and support staff were engaged to ensure accurate diagnosis and timely distribution of spectacles. Their professional demeanour, clear communication, and patience while interacting

with children played a crucial role in reducing anxiety and ensuring a positive experience. Among the participants, 95% rated the behaviour and professionalism of the medical staff as excellent or good.

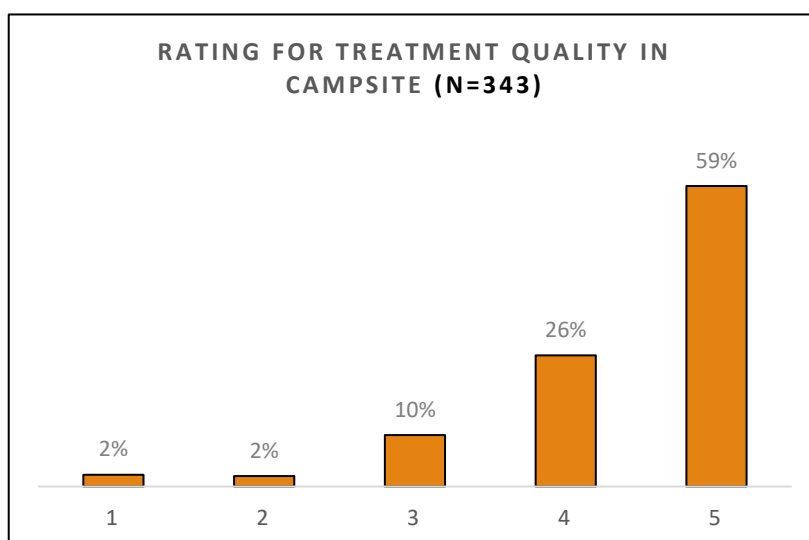


Figure 19: Rating for Treatment Quality in Campsite

Additionally, school staff and volunteers provided vital logistical support, assisting in managing student flow and maintaining orderly conduct. The collaboration between healthcare providers and school authorities fostered a conducive environment for effective service delivery.

### Participant Experience and Satisfaction

The participants' feedback reflects high levels of satisfaction with the overall camp experience. A significant majority of students and their parents appreciated the seamless process, short waiting times, and the compassionate approach of the medical staff. Notably, 91% of students who received spectacles reported using them regularly, indicating both the necessity of the intervention and their trust in the quality of service.

Furthermore, students undergoing their first-ever eye check-up expressed a sense of reassurance upon receiving timely diagnosis and corrective measures.

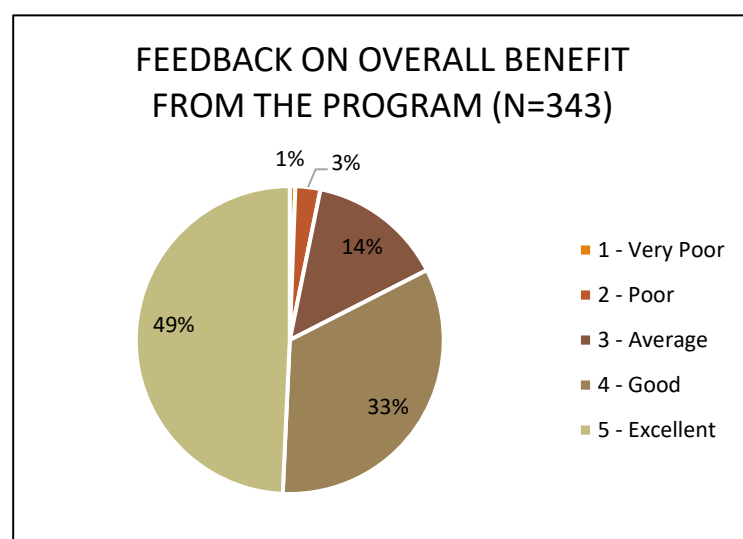


Figure 20: Feedback on Overall Benefit from the Program

### Post-Camp Support and Continuity of Care

A significant gap in service delivery was identified in terms of follow-up care. While respondents appreciated the immediate diagnosis and provision of spectacles, there was a lack of structured post-camp support to ensure the sustained management of eye health. Among the respondents diagnosed with eye issues, 78% were unaware of where to seek further care if required.

Among the respondents, 91% reported wearing their spectacles regularly, indicating a high level of compliance and acceptance of the corrective eyewear provided. However, 9% of the respondents stated that they do not wear their spectacles. Among those who refrained from

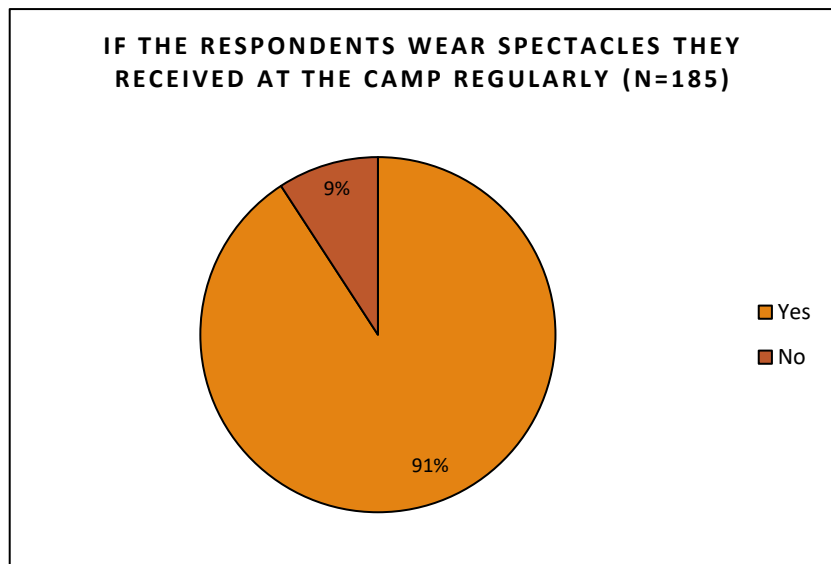


Figure 22: If the Respondents Wear Spectacles, they Received at the Camp Regularly

using them, the most common reason cited was that the spectacles did not suit their face, with 43% respondents expressing concerns about appearance and aesthetics. Additionally, 29% respondents reported a lack of perceived improvement in their vision, suggesting a need for reassessment of their prescriptions or further eye examinations. Three respondents mentioned other unspecified reasons for not wearing their spectacles, while one respondent

pointed to poor quality as a contributing factor. Notably, no respondents reported issues related to improper fit, indicating that the fitting process was generally effective.

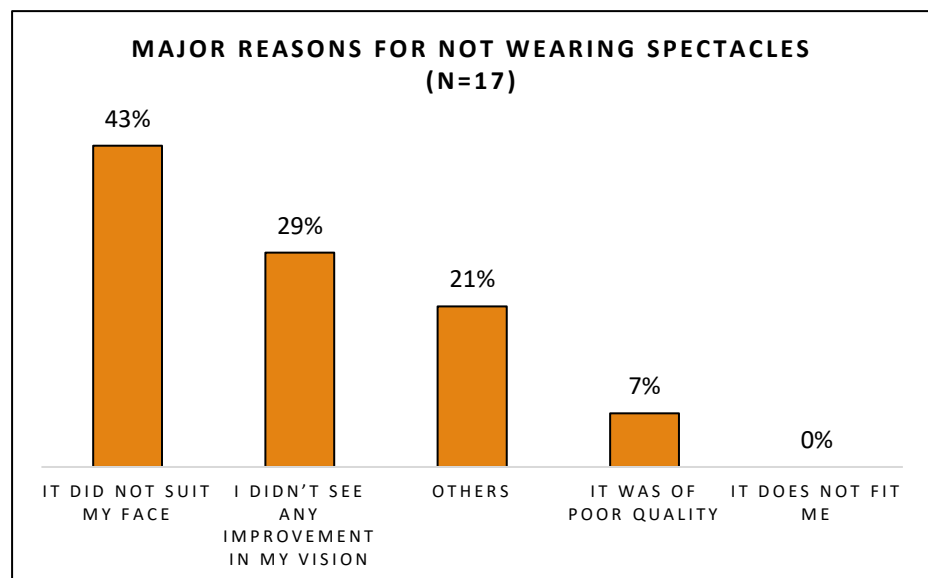


Figure 21: Major reasons for not wearing spectacles

These findings emphasize the

importance of providing aesthetically appealing options, conducting follow-up consultations to ensure prescription accuracy, and maintaining quality standards in future eye care initiatives to further improve compliance rates.

The ICICI Lombard Caring Hands Camp successfully delivered essential eye care services to respondents who otherwise had limited access. The strengths in logistical management, service accessibility, and quality of medical care significantly contributed to its impact.

### 3.6. Brand Equity of ICICI Lombard

Post-camp, awareness rose to 60%, but 36% remained unaware of ICICI Lombard's involvement, highlighting a need for stronger brand visibility.

Familiarity improved, with 59% recognizing the brand, though 41% still had limited exposure, indicating potential for further engagement.

66% of respondents had a positive perception post-camp, though 13% saw no change, suggesting room for deeper brand association.

Efficiency perceptions improved, while reliability perceptions declined, pointing to a need for stronger follow-up support.

92% of respondents would recommend the camp, demonstrating strong goodwill and advocacy potential.

Brand equity encompasses the value a brand holds in the perceptions of its stakeholders, influenced by brand recognition, loyalty, perceived quality, and the emotional connections it fosters. For ICICI Lombard, brand equity is shaped not only by its insurance offerings but also by its impactful CSR initiatives, such as the Caring Hands Camp. By providing free eye check-ups and corrective glasses to children, the initiative serves as a testament to ICICI Lombard's commitment to social good.

## 1. Brand Awareness

The Caring Hands Camp played a significant role in enhancing brand visibility. Before the project's implementation, a considerable 58% respondents were unaware of ICICI Lombard. Following the initiative, the awareness improved, with 62% respondents recognizing ICICI Lombard as the company behind the camp.

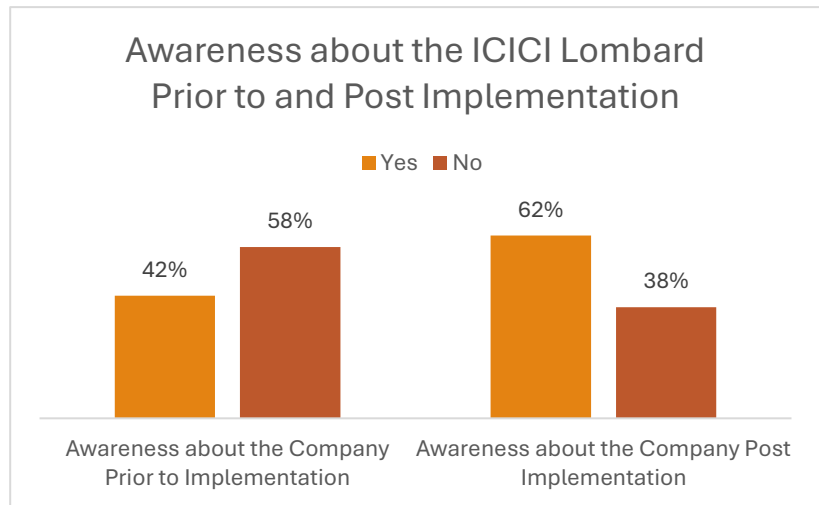


Figure 23: Awareness About the Company Prior To And Post Implementation

While this increased brand visibility is a positive outcome, 38% still remained unaware of the company's involvement, indicating an opportunity for ICICI Lombard to strengthen its brand communication during CSR activities.

## 2. Brand Familiarity

Familiarity with the brand improved post-implementation. Among the respondents:

- 59% respondents were familiar with ICICI Lombard.
- 19% respondents were not so familiar.
- 22% respondents remained not at all familiar.

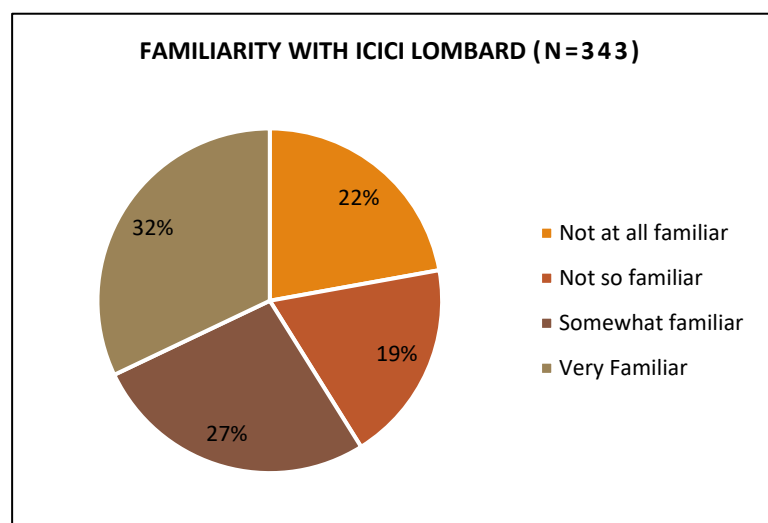


Figure 24: Familiarity with ICICI Lombard



Although a positive shift is evident, there remains a significant portion with limited brand familiarity. The Caring Hands Camp has the potential to address this by consistently reinforcing the ICICI Lombard brand name through community engagement and local media coverage.

### 3. Brand Perception

The initiative has largely contributed to favourable perceptions. After participating in the camp:

- 66% respondents reported a positive perception of ICICI Lombard.

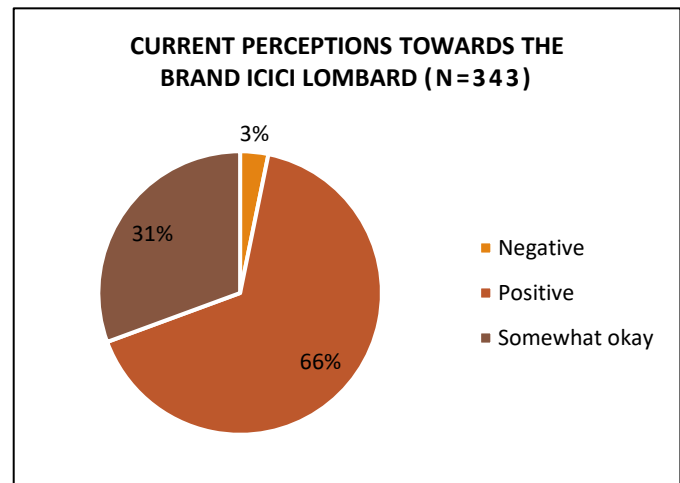


Figure 25: Current Perceptions Towards the Brand ICICI Lombard

### 4. Brand Attributes Perception

Respondents were also asked to assess ICICI Lombard based on specific brand attributes.

In terms of brand perception, beneficiaries recognized the company as reliable, efficient, and unique.

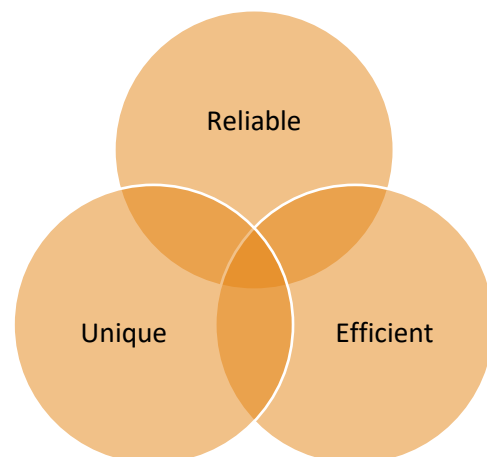


Figure 26: Perception of ICICI Lombard as a Brand

## 5. Recommendations and Brand Advocacy

The initiative has proven highly effective in encouraging brand advocacy. After their experience:

- 92% respondents stated that they would recommend the ICICI Lombard Caring Hands Camp to others.
- Only 8% respondents indicated they would not recommend it.

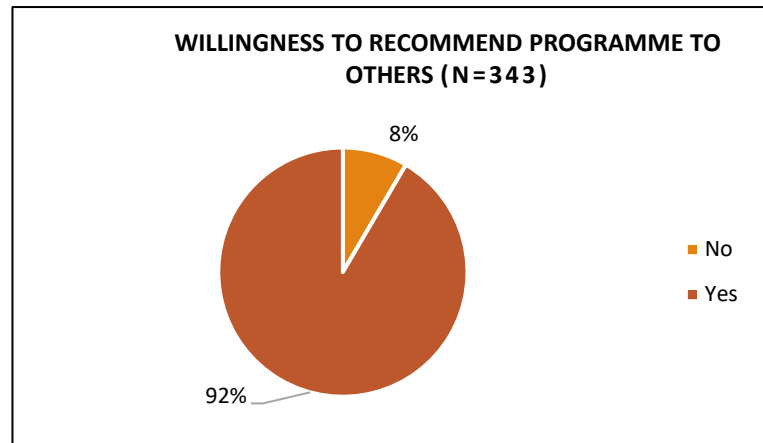


Figure 27: Willingness to Recommend Programme to Others

This strong recommendation rate is a clear indicator of the camp's success in building goodwill and enhancing brand equity. Positive word-of-mouth from parents, teachers, and students serves as a powerful brand endorsement, further solidifying ICICI Lombard's reputation as a socially responsible company.

The Caring Hands Camp has made a significant impact on ICICI Lombard's brand equity by enhancing brand awareness, fostering positive perceptions, and driving brand advocacy. However, there remain opportunities for deeper brand familiarization and trust-building, particularly among respondents who remain unaware or indifferent towards the brand.

As the initiative continues to touch lives across more states, it will further strengthen the brand's reputation as a socially responsible leader in the insurance sector.

# Chapter : 4

## Social Return on Investment (SROI)



## Social Return on Investment (SROI)

The process and methodology of Social Return on Investment (SROI) entails the quantification of the social impact generated by projects, programmes, and policies. This assists funders in determining the monetary value of the social and environmental benefits resulting from the initiative. SROI goes beyond conventional financial metrics to encompass social and financial value. In this study, we have evaluated the value of the programme's actual outcomes using data obtained from primary surveys, Management Information Systems (MIS), and industry benchmarks.

INR 17.51/- social value generated from the programme on every investment of INR 1

For the Caring Hands project by ICICI Lombard, we have computed the value based on the actual outcomes of the programme. The data has been sourced from the primary survey, MIS, and standard industry benchmarks. The beneficiary ratio and responses significantly rose from last year, since input costs remained the same as last year, but the outreach numbers got almost tripled.

Indicator	Rationale	Proxy Estimation	Source
Savings on spectacles provided through camps	Financial savings for families who received spectacles at no cost during the eye camps, reflecting the economic impact of the intervention.	Cost of the spectacles distributed.	Quantitative Survey
Savings on eye check-up which was provided at the camp	Reduction in healthcare costs for families who would otherwise have to pay for eye check-ups, highlighting the accessibility of eye care services.	Average cost of eye check-ups in local clinics.	Secondary study
Savings on potential eye treatments in the future	Long-term financial benefits by preventing future eye-related treatments, thus	Based on historical data of treatment costs for untreated	Secondary study

	showcasing the preventive aspect of the intervention.	eye conditions in similar populations.	
Deadweight 1: Children who used to wear spectacles before the intervention	Children who would have purchased spectacles regardless of the intervention, ensuring that only additional impacts are measured.	Percentage of children already wearing spectacles prior to intervention.	Quantitative Survey
Deadweight 2: Children who used to get eye check-ups from other sources	Children who would continue receiving eye check-ups from other providers, ensuring accurate attribution of outcomes to the intervention.	Percentage of children already accessing check-ups from other sources.	Quantitative Survey

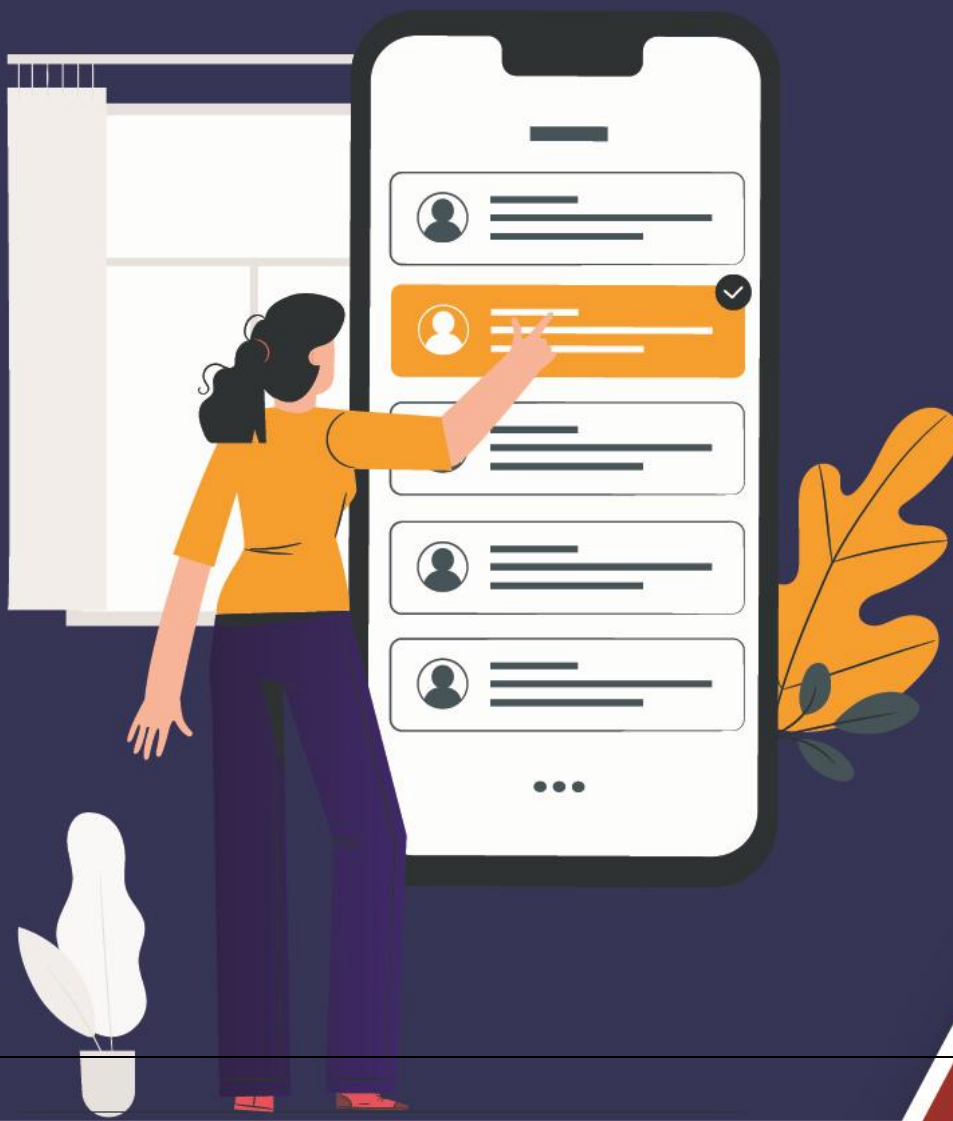
Table 9: Indicators for SROI

Social Return on Investment		
Year	FY 2024-2025	FY 2025-2026
India Inflation Rate (Source IMF)	4.10%	4.10%
Discounted Rate Considered	4.10%	
Total Input Cost	14500000	
Total Net Impact	264367800	
Net Present Value (NPV)	₹ 25,39,55,619.60	
SROI	₹ 17.51	

Table 10: SROI Calculations

# Chapter : 5

## Recommendations for the Programme



## **Recommendations for Enhancing the Impact of the ICICI Lombard Caring Hands Camp**

The ICICI Lombard Caring Hands Camp has made a commendable impact by addressing critical gaps in paediatric eye care. However, to ensure the initiative's long-term success and expanded reach, it is crucial to refine certain aspects of the program. The recommendations below offer a comprehensive approach to improving service delivery, accessibility, and sustainability, while also considering the socio-economic and political landscape of India.

### **1. Strengthening Awareness and Preventive Care**

A lack of awareness regarding eye health is one of the most significant challenges to preventive care, particularly in underserved regions. While the Caring Hands Camp successfully reached many students, fostering sustained behavioural change requires continuous awareness campaigns.

#### **1.1 Community and School-Based Awareness Campaigns**

- Schools can act as primary channels for disseminating information on eye health. Collaborating with teachers, school management committees (SMCs), and parent-teacher associations (PTAs) to conduct periodic awareness sessions will encourage parents to prioritize vision care for their children.
- Partnering with community health workers such as ASHA workers and Anganwadi centres can further promote eye health awareness in rural areas. These workers can act as community champions, identifying children who may have undiagnosed vision issues.
- Implementing community health fairs that include interactive eye care workshops, vision screenings, and eye health quizzes can foster deeper engagement.
- Distributing Information, Education, and Communication (IEC) materials in regional languages, with illustrations for low-literacy populations, would make key messages more accessible.

#### **1.2 Digital and Mass Media Engagement**

- Leverage social media platforms and local media channels for digital storytelling. Sharing real-life stories of beneficiaries who have benefited from the camp can drive awareness and participation.
- Localized radio campaigns and television segments on regional news networks can further amplify outreach. Community radio stations, particularly in rural areas, are effective platforms for public health messaging.
- Develop a WhatsApp-based information service to provide updates on upcoming camps, tips on eye care, and reminders for follow-up check-ups.

## **2. Expanding Accessibility and Reach**

While the current assessment covered five states, the program's implementation in 14 states highlights its extensive potential. Expanding the geographical footprint will ensure that underserved populations, particularly those in remote and tribal areas, benefit from the initiative.

### **2.1 Geographic Expansion and Partnerships**

- ICICI Lombard can establish strategic partnerships with state health departments and local NGOs to facilitate smoother implementation in inaccessible regions. State governments under Ayushman Bharat and National Health Mission (NHM) could offer valuable support.
- Special focus should be given to regions such as Tripura, West Bengal, and Bihar, where healthcare infrastructure may be limited. Implementing mobile eye care units equipped with basic diagnostic equipment would be effective in these areas.
- Collaboration with corporate foundations and PSUs working on rural healthcare projects can help reduce logistical challenges.

### **2.2 Targeting Vulnerable Populations**

- Inclusive targeting strategies should be introduced to ensure marginalized groups, including children from Scheduled Castes (SC), Scheduled Tribes (ST), and other economically disadvantaged communities, have equitable access.
- Partnerships with minority welfare departments and social justice organizations can help address cultural or systemic barriers to accessing healthcare.



### **3. Ensuring Continuity of Care**

The absence of a structured follow-up mechanism emerged as a key gap in the program. Without ongoing monitoring, children diagnosed with vision impairments may not receive timely treatment, limiting the program's long-term impact.

#### **3.1 Referral and Follow-Up Mechanism**

- Establishing a formal referral system will ensure children needing further medical interventions are connected to appropriate healthcare providers. Collaborations with government hospitals, private clinics, or charitable eye hospitals will be essential.
- Providing beneficiaries with a referral slip containing detailed diagnostic information, clinic addresses, and contact numbers in regional languages will improve the likelihood of follow-up care.
- Creating a digital follow-up database to track beneficiaries' progress and monitor whether they have accessed additional care will enhance accountability.

#### **3.2 Involving Schools in Follow-Up**

- Schools can play a pivotal role in monitoring children's progress. Periodic re-screenings organized in collaboration with local eye clinics can ensure timely follow-ups for children who have received spectacles.
- Appointing school health coordinators to maintain communication with parents and track symptoms or improvements would provide an additional layer of support.

### **4. Enhancing Operational Efficiency**

While the camps generally ran smoothly, operational challenges in larger schools caused longer waiting times and logistical bottlenecks. Optimizing processes can significantly enhance participant satisfaction.

#### **4.1 Structured Appointment System**

- Introducing a digital or manual token system with pre-assigned time slots will reduce waiting times and manage crowds effectively. Schools with higher footfalls could implement staggered time slots to ease the flow.
- Having additional on-ground volunteers, preferably trained in child-friendly communication, will further expedite the screening process.

#### **4.2 Capacity Building**

- Continuous capacity-building sessions for volunteers and healthcare professionals will ensure better service delivery. Training modules can cover areas like effective communication, emergency management, and record-keeping.

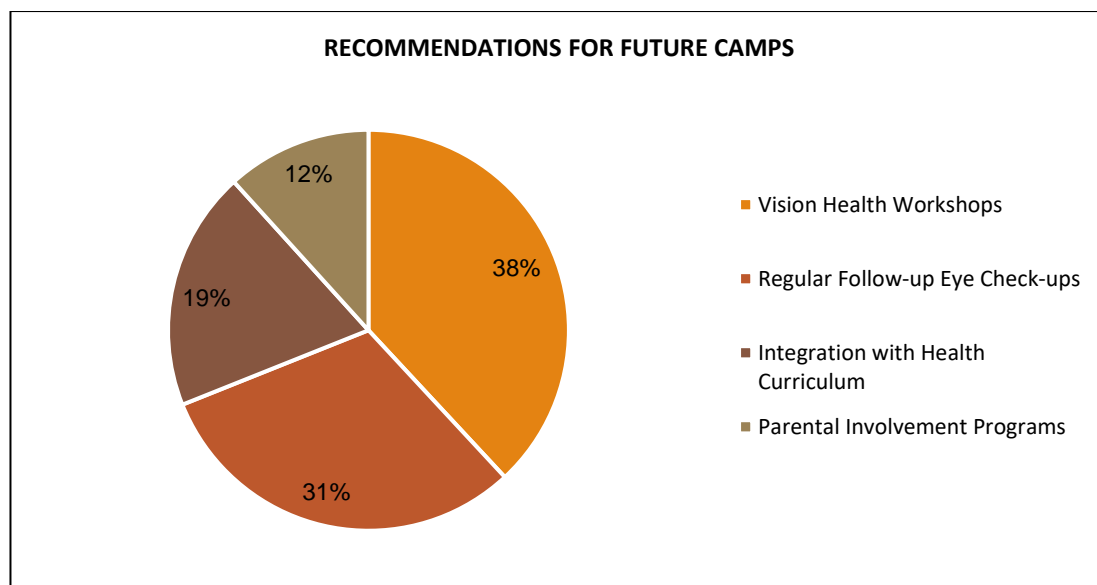
### **5. Improving Service Quality**

#### **5.1 Spectacle Quality and Customization**

- Beneficiaries often reported dissatisfaction with the limited frame options. Providing a broader range of frames in different sizes, colours, and durable materials would increase acceptance and use.
- Customization options for children requiring specialized lenses, such as those with high prescriptions, should also be considered.
- Establishing repair kiosks within schools in partnership with local opticians will ensure easy access to affordable repairs.

#### **5.2 Communication and Multilingual Support**

- Deploying bilingual support staff and interpreters, particularly in linguistically diverse regions, will improve communication.
- Creating visual guides with illustrated explanations on eye care, proper spectacle use, and the importance of follow-ups will further enhance comprehension.



*Figure 28: Recommendations for Future Camps*

## **6. Monitoring and Evaluation**

A robust Monitoring and Evaluation (M&E) system is essential to measure the program's long-term impact.

### **6.1 Data-Driven Decision-Making**

- Implementing a real-time digital dashboard to capture beneficiary data, diagnosis outcomes, and referral follow-ups will allow for ongoing assessment and prompt intervention.
- Collecting disaggregated data on gender, disability status, and socio-economic background will help identify gaps and ensure equitable outreach.

### **6.2 Impact Evaluation**

- Conduct periodic longitudinal studies to assess the impact of improved vision on academic performance, participation in extracurricular activities, and overall well-being.

The ICICI Lombard Caring Hands Camp has established itself as a valuable initiative in bridging the gap in paediatric eye care. By implementing these recommendations, the program can amplify its impact, enhance brand equity, and contribute to the broader goal of achieving universal eye health for children across India. Through sustained

awareness, inclusive access, operational excellence, and continuous monitoring, ICICI Lombard can set a benchmark in corporate social responsibility in the healthcare sector.

# Chapter : 6

## Impact Stories



**1. A Brighter Future for Dhriti:** Thirteen-year-old Dhriti, a student at SDM Mangal Jyothi Integrated School in Mangalore, was struggling in her studies due to constant eye strain. She often had headaches and found it difficult to concentrate in class. When the ICICI Lombard Caring Hands Camp came to her school, she was diagnosed with vision issues and provided with spectacles. After using them regularly, Dhriti no longer suffers from headaches and has shown remarkable improvement in her studies. She now feels more confident and actively participates in class discussions.

**2. From Blurred Vision to Clear Goals:** Harshita, a 14-year-old from Karnataka, had difficulty seeing the blackboard clearly, which impacted her ability to keep up with lessons. She had never had an eye check-up before and didn't realize how much her vision was affecting her learning. After receiving free spectacles from the Caring Hands Camp, she has experienced a significant improvement in her academic performance. "I can finally read from the board without straining my eyes!" she exclaims. Her parents are grateful for the initiative, which has given their daughter a better chance at excelling in school.

**3. Amina's Renewed Confidence:** Despite her vision problems, Amina, a 13-year-old student, had never received an eye check-up before. Although she didn't require spectacles, the camp helped her understand the importance of eye care and regular check-ups. She learned valuable eye health practices like taking breaks from screens and ensuring proper lighting while studying.

**4. Suraj's Path to a Better Learning Experience:** Fifteen-year-old Suraj had always struggled with frequent headaches and eye strain, which affected his ability to focus on studies. When the Caring Hands Camp visited his school, he underwent an eye test and realized he needed spectacles. Although he was hesitant initially, he soon noticed how much easier reading and studying became. "Now, I don't feel tired after reading for long hours," he shares. Suraj is now more engaged in his studies and has seen an improvement in his grades.

**5. Transforming Classrooms, One Vision at a Time:** Many students who attended the ICICI Lombard Caring Hands Camp reported improved academic performance and confidence after receiving spectacles. Teachers have noticed that students who previously struggled with vision issues are now more engaged and participative in class.

The initiative not only provided eye care but also empowered young minds to pursue their education without limitations. With regular follow-ups and increased awareness about eye health, the impact of this initiative will continue to grow, ensuring brighter futures for many more students.



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