THE ECONOMIC TIMES CSR REPORT

THE ECONOMIC TIMES, NEW DELHI, WEDNESDAY, NOVEMBER 19, 2014

Deconstructing the sanitation model

If experts are to be believed, innovations in the sanitation space have been few and far between

Nitya Jacob

For something so commonplace, yet important, as the toilet, there has been a surprising lack of innovation in its 150 years of existence. What we see are variations of the same flush toilet that use more, less or no water. Over the decades toilets have come to be divided into two broad categories: dry and wet. The first uses no water to transport excreta while the second needs water to do so. The first is usually part of an on-site system where excreta is collected at the user's place. The second can be connected to a sewage network that uses water to carry excreta from the user to a processing system.

There are a few variations on both themes. In the dry system the best is called the ecological sanitation (ecosan) toilet. This separates all liquid from solid material into two chambers. Both can be used for manure after processing. The solids are accumulated in a drum that can be made of any material, plastic, metal or cement. Urine is collected in another container. Wash water is let into a soak pit. A typical ecosan toilet costs about Rs.12,000.

ECOSAN TOILET

In the eco-san toilet, excreta is mixed with a drying agent such as ash, straw or wood shavings that also adds carbon to the mixture and helps in decomposition. The organisms in this break down the solids into humus. Most pathogenic bacteria die out in 3-4 months while virii and protozoa are substantially reduced. Over a year, their levels fall significantly and can be brought within safe limits through UV treatment or high-temperature composting (above 35 degrees) for a year. Urine is decontaminated by storing for a few weeks and can be applied to plants with dilution. The manure is usable straight

away. It is recommended the last application of both take place a month before harvesting to ensure all pathogens are killed. The table below indicates the concentration of nutrients.

	Nitrogen kg/ capita/year	Phosphorous kg/capita/year
Total	2.7	0.4
Urine	2.3	0.3
Faeces	0.3	0.1

SINGLE PIT TOILET

The most common toilet being promoted under the toilet campaign in India is the single pit. In this, a squatting pan is placed on a squatting plate one metre in diameter. A pit 1.6 metres deep and one metre in diameter is dug and lined with either concrete rings with holes in them or a brick honey-combed wall. This allows water to seep out while the solids remain in the pit. The slope of the toilet pan is steep so it needs only a mug of water to flush. The volume is such that a family of 5 can use the toilet for several years before the pit fills. A typical toilet of this type costs about Rs 8,000.

TWIN-PIT OFFSET TOILET

A modification of this basic design is the twinpit offset model. In this, two pits of the same size are dug about a metre apart. Both are connected to the toilet but one connection is sealed. One pit is used at a time. The theory is after one pit fills up, it can be allowed to compost over several years while the second is being used and then the excreta emptied for use as fertilizer. However, organizations working in rural sanitation report the first pit has barely filled to a third of its capacity after about 12 years of use. A typical toilet of this type costs about Rs 10,000.

Both these designs as well as ecosan toilets safely separate human excreta from contact,

decompose it and make it available as manure. The use of water for washing is limited. The big challenges are in ensuring construction is of durable quality and continued use. The pit latrines are hard to make in rocky areas or where the water table is high. They can be modified so the pits are partly above ground. An innovation that is being tried out now is lining the pits with a breathable membrane that allows liquids to seep out of the pit while preventing water from getting in. If field trials prove successful it can be a viable option in high water table and rocky areas.

The fourth option that people making their own toilets seem to prefer is connected to a septic tank. These are much larger than the pits mentioned above, typically about 10 feet to a

OVER THE DECADES TOILETS HAVE COME TO BE DIVIDED INTO TWO BROAD CATEGORIES: DRY AND WET. THE FIRST USES NO WATER TO TRANSPORT EXCRETA WHILE THE SECOND NEEDS WATER TO DO SO

side. The advantage is they can hold much more before filling up or needing cleaning. However, septic tanks are expensive and can cost anywhere from Rs.25,000 to make. These are not included in the government's sanitation programme because of the costs and the difficulties in making a septic tank.

A typical septic tank needs to have at least one partition. The first portion allows solids to settle while the second is where fluids collect and organic matter is digested before being released into the environment. These are 'below the ground' options. The basic toilet structure above ground has not changed significantly in how it collects and transfers excreta to a storage or processing place.

CONSUMER CONNECT INITIATIVE

(The writer is Head of Policy, WaterAid India)

pg 11



PHD Rural Development Foundation (PHDRDF) was established in 1981 and registered under the Indian Trust Act. It is operating under the aegis of PHD Chamber of Commerce & Industry (PHDCCI). PHDRDF is an apex body of PHDCCI for CSR consulting & CSR project implementation. For over three decades PHDRDF has been proactively involved in the upliftment of deprived masses through implementation of CSR activities focussed on socio-economic development.

PHDRDF has been undertaking CSR initiatives in the field of health & sanitation, water management, skill development & vocational training. It has also been undertaking research services through development of CSR policy framework, baseline surveys, impact assessment, CSR & sustainability reporting. PHDRDF has undertaken 2500 health camps & 1500 awareness campaigns, built 170 check dams and 20 skill development initiatives. PHDRDF has been closely associated with Corporates, PSUs, UN agencies & Embassies.

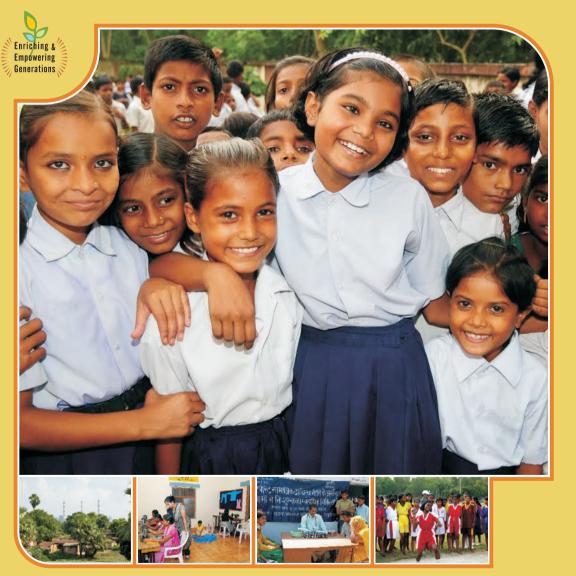


------ KINDLY CONTACT FOR ENQUIRES RELATED TO

CSR PROJECT PLANNING, IMPLEMENTATION & IMPACT ASSESSMENT SUSTAINABILITY REPORTING

Contact Person: Shreeraam D G, Executive Officer Tel.: 011-40586380/81 Mobile: +91-9871071479 E-mail: shreeraam@phdcci.in PHD House, 4/2 Siri Institutional Area, August Kranti Marg, New Delhi-110016 (India)





Mission: Green environment, clean surroundings

Giving them a life of pride and self esteem....

Through its R&R and CSR efforts, NTPC is bringing the deprived villages within the mainstream of progress

As a responsible corporate citizen, NTPC aims to improve the socio-economic conditions of the people. Various activities are taken up in the areas of **basic infrastructure development** like **primary education**, **community health**, **drinking water**, **sanitation**, **roads**, **vocational training**. Women empowerment. Rehabilitation & Resettlement.

NTPC has developed a policy on **Sustainable Development** to allocate 1% of Net Profit every year. It also strongly believes in achieving organisational excellence through **"People First"** approach.



Regd. Office: NTPC Bhawan, SCOPE Complex, 7, Institutional Area, Lodhi Road, New Delhi-110003. Corporate Identification Number: L40101DL1975GOI007966, Tel No: 011-24387333, Fax No: 011-24361018, E- Mail : ntpccc@ntpc.co.in, Website : www.ntpc.co.in

Fostering Sustainable Development



Vision: Greater strides in sanitation

As a leading manufacturer of fertilizers, the role of RCF goes far beyond crop nutrients. Over the years, we have placed equal emphasis on CSR projects that light up lives of the underprivileged.

Education, public health and sanitation rank among key focus areas.

Our efforts include:

- Mobile medical vans to reach healthcare to remote villages
- · Periodic conduct of medical camps and vaccination camps
- · Free mid day meal to children in 24 schools in Mumbai
- Running of school at Thal, near Alibagh, with sanitation facilities and other amenities
- · Installation of hand pumps and taps for supply of potable water
- · Provision of bio gas facilities that help convert waste to energy



'Priyadarshini,' Eastern Express Highway, Sion, Mumbai - 400 022. www.rcfltd.com

"Swachh Bharat Abhiyan"

THE ECONOMIC TIMES CSR REPORT

THE ECONOMIC TIMES, NEW DELHI, WEDNESDAY, NOVEMBER 19, 2014

Lessons from Japan

Swacch Bharat Mission corresponds with the Japanese cleanliness model practised in schools



Anuraag Saxena

arlier in the year, Japan's football team faced a disappointing exit from the World Cup. However, fans of the "Samurai Blue" (as the team is lovingly referred to) won the hearts of millions across the globe. Why?

Because after every match their team played, Japanese spectators stayed back to clean up their section of the stadium. It didn't matter if their team won or lost; if it was rain or shine.

They just stayed back and said "We've made this mess, we will clean it up". But why did this happen? Why didn't they just walk out like any every other spectator did? Because they started young!

THE 'GET THEM YOUNG' STRATEGY

The school supplies list in Japan often reads something like this - hasami (scissors), iroenpitsu (pencils) and zokin (cleaning rag). Yes, you heard that right. A cleaning rag! School children in Japan often stay back after school cleaning their own classrooms and even toilets. O-soji (cleaning) is part of the school-culture where children spend 20 minutes after lunch cleaning up behind them.

International travellers will tell you stories of how their Japanese friends and colleagues "leave a table in better shape than they found it".

SO WILL THE MODI APPROACH WORK?

India, for unfortunate historical reasons, has always dealt with toilets and cleanliness as an 'access' issue. Essentially saying that "if you provide the infrastructure, the problem will go away". Well, it doesn't and it hasn't.

Which is why PM Modi's message might just work. It's a conscious choice to drive behaviour (demand side) while working on the infrastructure (supply side).

It's not just about teaching the man to fish, but by driving the campaign in schools, you are teaching him to fish early on in life.

BUILDING A NATION THROUGH BUILDING ITS VALUES

You don't expect to cook clean food in a dirty kitchen; or to have clean-thoughts in a dirty temple /mosque /church. Why then do we expect our children to have a clean and wholesome education in a school environment that is not clean?

If that's not enough, here are five values that our children will learn:

downtrodden castes, who have been cleaning up after them for ages. **RESPONSIBILITY:** Children learn that you are alone responsible for the consequences of your actions. If you make a mess, you clean it up. This is a lesson one can apply to many other aspects of professional and personal life.

COLLECTIVISM: In an increasingly fractured and divisive world, we need more values that encourage group-activity and groupplay. Achieving a goal together, helps take away the focus from a me-me-me mentality. **MENTORSHIP:** Japanese children from the 6th grade start "mentoring" younger children by teaching them how to clean. It is said that this is the first structured opportunity for them to start displaying leadership skills at an early age. **MOST IMPORTANTLY, UPWARDS INFLUENCE:** I envision an India where

children go back home to their parents and talk to them about the satisfaction of having achieved a "clean school"; and wonder why their home, their street and their city shouldn't be as clean.

Unless our minds are clean, the Swacch Bharat campaign will boil down to another million toilets that get built, only to start the journey of quick and guaranteed decay.

Singapore model for a clean India

A first-person account of Singapore's journey from a developing nation with poor sanitation to one of the world's cleanest countries with a strong economy

Jack Sim

was born in 1957 and grew up in the slums of Singapore. I remember when the first flushing toilets were introduced in Singapore's Housing Development Board houses and everyone wanted a proper toilet, it was seen as a real status symbol. Singapore has come a long way since then.

I've seen Singapore's economic miracle based on the broad concept of 'clean' that was applied beyond clean toilets to Singapore's national reputation of trust, to excellence in economic growth, and the resulting leaps forward in the quality of life in Singapore.

SINGAPORE'S SANITATION CRISIS

In the years under British rule in the 1960s, Singapore was a filthy, overcrowded city. Open defecation was rampant and at best our sanitation system was the British night-soil bucket communal toilet system. Public health was poor. Diarrhoea was widespread and frequent outbreaks of typhoid fever were caused by poor hygiene. The Singapore River was full of debris and faecal contamination.

With no natural resources and only 640 sq km of land without a sufficient water supply, the prevailing wisdom was that this island state would not be viable after its separation from Malaysia in 1965. Yet, against all odds, its economy grew an average of 8 percent annually over the next 30 years, transforming Singapore from a 'third world country' to the country with the third highest per capita GDP in the world.

THE CLEAN STRATEGY

One of the main components of this economic miracle was the concept of public health based on a 'clean' strategy.

Cleanliness and hygiene reduced our health expenditure from 4.5 percent of GDP in 1965 to 3 percent of GDP consistently over the next three decades. We invested more in the prevention of diseases so that we spent less on cures. By providing clean water and sanitation. we created a healthy, productive workforce that was ready for foreign investors to train and employ. By cleaning up all of our rivers, we prevented the spread of disease. And today with the Marina Barrage, we have turned the

rivers into reservoirs for drinking water which we recycle continuously into NEWater. We also cleaned up the streets and imposed heavy fines on people who litter.

CONSUMER CONNECT INITIATIVE

pg 10

THE GREEN STRATEGY

To attract foreign expatriates, we planted trees and flowers across the whole island, making Singapore a more desirable designation for expatriate workers, and their families, and leading to Singapore being known as the 'garden city'. This strategy was effective and the investment in turn created jobs, livelihood and transfer of know-how to our workforce and contributed to our economic growth. We also launched a nationwide 'clean and green' campaign in the 1990s to address environmental sustainability.

CLEANING UP CORRUPTION

Singapore's tough legal code has created a society in which the rule of law keeps the population in line and society sparkly clean. The result speaks for itself: Singapore has one of the lowest crime and corruption rates in the world. Our principles for cleaning up corruption are: strong political will; an incorruptible anticorruption agency that is independent from the police and political control and minimising corruption by tackling its major sources: low salaries, ample opportunities, and poor policing. Of course, a non-corrupt culture also means everyone pays their taxes promptly and thus increasing government treasury to redistribute wealth.

CLEANING UP ORGANISED CRIME

As the Clean Strategy generated economic growth and strict enforcement for the rule of law, the construction industry became more attractive than crime as a livelihood for triads members and many turned over a new leaf to help build the nation. Today, there is virtually no organised crime in Singapore. Addressing Singapore's sanitation challenge, and taking a 'clean' approach has led to an improved quality of life, better environment, and economic prosperity. Singapore's approach holds some valuable lessons for Modi's clean India strategy of Swachh Bharat. Starting from a clean toilet, and clean streets, the clean mindset will have a widespread positive impact.

This has resulted in a "culture of cleanliness" in Japan, making it one of the most hygienic countries to live in.

> AIL TMT EQR available in

DIGNITY: Children realise that no work is big or small. In fact, they would learn to actually respect people from the

(The writer us Regional Head, South Asia and ASEAN, Singapore Regional Office, World Education Foundation, UK)

For editorial feedback, please write to shailja.katyal@timesgroup.com For CSR initiatives and advertising, contact: navita.myer@timesgroup.com 9810702939

SAIL TMT Rebars

Mazbooti bemisaal...saath nibhaye saalon saal







The PHDFWF has been executing integrated family welfare projects for underpriviledged sections of the society in the field of reproductive & child health, skill building trainings for youth and women living in slum and rural, running health posts, mobile medical care, environment protection, prevention of STD/HIV/AIDS, pulse polio immunisation, self defence training for girls and women, adult education, advocacy on female foeticide, formation of SHGs, providing care to special children and awareness generation on various social issues.















lief Work in 1 & K Disaster

Registration Details:- No. 5566, Place- New Delhi, Year of registration – 1986 Act-Indian Trust Act, 1882 FCRA-No.231650503, Year- 1988

Chairperson: Ms Anuradha Goel

Contact Person: Ms. Teevra Sharma, Sr. Executive officer Tel: 26561443, 49545454 1-04 E-mail: phdfwf86@gmail.com, fwf@phdcci.in

Sulphur and Phosphorous controlled for pure steel

> स्टील अथॉरिटी ऑफ इण्डिया लिमिटेड **STEEL AUTHORITY OF INDIA LIMITED** There's a little bit of SAIL in everybody's life

Contact your nearest dealer today!

www.sail.co.in

THE ECONOMIC TIMES CSR REPORT

THE ECONOMIC TIMES, NEW DELHI, WEDNESDAY, NOVEMBER 19, 2014

CONSUMER CONNECT INITIATIVE

pg9

Driving demand for toilets

We need to drive demand for toilets as an aspirational lifestyle product, while simultaneously addressing supply, in order to see India's Swachh Bharat Abhiyan succeed, and new toilets and sanitation infrastructure being fully utilised



Jack Sim

n 2010, the UN released statistics that were shocking - more people had access to a mobile phone in India than a toilet. Now in 2014, estimates put mobile phone penetration at about 74 percent of the Indian population, while almost 600 million people in India - or nearly half of the Indian population - still practice open defecation.

India's massive drive to address toilet infrastructure, and Indian Prime Minister Narendra Modi's commitment to ending the practice of open defecation is admirable. However addressing supply alone will not solve the sanitation challenge in India. We need to change minds and drive behaviour change by repositioning the toilet.

Mobile phones have a number of measurable benefits: including improvements to health access and improved livelihoods. And the attendant benefits of latrine use include improvements to health, reducing the spread of diseases, education, impacts on gender equality, productivity and economic prosperity.

But toilets are still not able to compete on use as aspirational, associated with

desirability with lifestyle products like mobile phones, and Indian people do not prioritise toilet ownership. The Indian government has committed to building 11 million toilets by 2019. But until we drive demand for toilets, we will not see toilets prioritised or fully utilised, or an end to open defecation.

Toilets built by NGOs and government initiatives in the past have ended up as grain storage, lumber storage, or a space to store live chickens. A recent study by SQUAT of rural households in several Indian states, found that more than 40 percent of households with a working latrine still have at least one member who defecates in the open. The provision of toilets has not been enough to address the behaviour of open defecation.

Driving demand for toilets is key to increasing toilet use. Rational messages used by educational campaigns in the past have not gotten through. Toilets need to compete for priority on an emotional level, rather than a rational level.

We need to motivate people by appealing to their pride and dignity, and position toilet

improved social status. By making the toilet an aspirational product, we will be able to realise the full potential and benefits of the current sanitation drive in India.

That is why World Toilet Organization is calling on the private sector, the government, corporations, individuals, celebrities, and the media to work together to end open defecation in India. Instead of greeting each other by saying 'Aap Kush Hei', we want people in India to ask each other if they've visited the 'happy' room today. We want toilets to become desirable, and eventually the norm in India.

We can enlist the expertise of the private sector to conduct research, gain insight into people's motivations, and position the toilet as a status symbol, and drive demand through a compelling behaviour change campaign.

And we can collaborate with the government, village leaders, local sanitation champions, Bollywood stars, cricket players and the media to disseminate a message and drive a change in behaviour to end open defecation.

> (The writer is Founder, World Toilet Organization)

INDIA INC'S CLEANLINESS QUOTIENT

REINVENT THE TOILET CHALLENGE

In October 2013, the Department of Biotechnology (DBT) under the Ministry of Science and Technology of the Government of India and the Bill & Melinda Gates Foundation, in collaboration with India's Biotechnology Industry Research Assistance Council (BIRAC), launched the Reinvent the Toilet Challenge: India. This partnership supports sanitation research and development projects conducted by Indian individuals and organizations to extend affordable sanitation services to poor communities.

TAJ GROUP'S SUSTAINABILITY INITIATIVES

The Gateway Hotel Ganges Varanasi (Taj Group of Hotels) is involved in sanitation activities. Varanasi, one of India's leading tourist spots, has borne the brunt of modern civilization, growing urbanization and rising population and pollution. The Ganga has been severely degraded and dangerously polluted. To this end, The Gateway Hotel Ganges Varanasi sponsors the cleanliness and maintenance of the Dashashwamedh Ghat, Rajendra Prasad Ghat and Prayag Ghat has been associated with the NGO, Ganga Seva Nidhi since inception.

AMBUJA CEMENTS FOUNDATION WORKS FOR RURAL SANITATION

ACF plays a pivotal role in improving sanitation quality by providing support to communities and families to build toilets, and soak pits. ACF also provides monetary support for constructing toilets and hand washing sessions are also conducted at village schools. ACF has further developed close to 11500 toilets and 3737 soak pits, to enhance rural sanitation.

JINDAL ARCHITECTURE'S STAINLESS STEEL TOILETS

JSL Architecture Ltd is the biggest supplier of stainless steel toilets to Indian Railways. In fact they are the pioneers in launching 100 per cent stainless steel modular toilets with a water tank and a bio-degradable tank.

3S INDIA'S WASTE MANAGEMENT SOLUTIONS

Established in 1999, 3S India, a Saraplast enterprise, is an eco-friendly waste management solutions company. A unique manufacturing and service oriented company, to promote better health and hygiene, 3S India, pri-

marily works to provide portable restrooms and allied products along with to labour camps at construction sites, large public gatherings and religious fairs, events and concerts, un-served settlements, slums and communities as well as for disaster management. 3s India is addressing the lack of access to sanitary facilities through the installations of portable toilets. Better sanitary conditions could eliminate around half of all the cases of illness in our country and provide the basic dignity to women in the country.

To provide sanitation facility in every household and every school, 50,000 people need to be trained as voluntary workers and with that 1.5 lakh masons need to be employed for the construction of these toilets.

DR. BINDESHWAR PATHAK, SOCIOLOGIST AND FOUNDER OF **SULABH SANITATION MOVEMENT**

CII'S MISSION SOS

CII launched Mission SoS (Sanitation of Schools) under the Swachh Bharat, Swachh Vidyalaya Abhiyaan, recently. CII has set a target of mobilizing construction of 10,000 toilets in government schools in the First Phase (FY 2015-16). Towards accomplishing this goal, CII and CII Foundation will work together for converging the CSR endeavours of member companies for sanitation, especially construction of toilets in government schools.

DLF FOUNDATION'S WASTE MANAGEMENT PROGRAMME

DLF Foundation implemented the waste management programme called 'Kachra Se Kamai' (income from waste) in the Village Hassanpur, Sohna tehsil, Gurgaon, to address the issue of sanitation and also linked it to income generation. The programme comprises intensive mobilization and sensitization activities to make people aware about the issue.

supports the Movement for a Clean India



ADVERTORIAL nnovatior









Rural Electrification Corporation Limited

(A Government of India Enterprise) Core-4, SCOPE Complex, 7 Lodhi Road, New Delhi-110 003 Tel. : 24365161, Fax: 24360644, E-mail: reccorp@recl.nic.in. Website: www.recindia.nic.in CIN: L40101DL1969GOI005095





- Supporting creation of infrastructure for Water, Sanitation and Hygiene (WASH) facilities in select Government Schools in Tripura
- Participation in 'Swachh Vidyalaya Abhiyaan' for building toilets in **Government Schools in various districts** in the country with a budget allocation of approx.₹103 Crore.
- Launch of Cleanliness Drive across all its offices pan India on 2nd October, 2014

Transforming healthcare

India will need nothing short of a healthcare revolution to offer a guaranteed health package to its 1.25 billion people, a sixth of the world's population. It is beyond debate that the existing healthcare infrastructure is woefully inadequate to meet the staggering requirements of making free drugs, diagnostics and insurance accessible to such a large population whose vast majority is so poor that it does not even seek out such benefits. The Indian government pegs the size of its universal health plan at \$ 26 billion over the next four years. Prime Minister Narendra Modi's National Health Assurance Mission, expected to be launched in April 2015, envisages distribution of free drugs, diagnostic treatment and insurance cover for serious ailments.

The targets are stiff and the scope is vast. To climb the mountain of challenges, the need of the hour is innovations that can be scaled up to the extent that they don't remain confined to narrow networks of affluence

It is here that the role of premier institutions like Wadhwani Initiative for Sustainable Healthcare (WISH Foundation) comes into prominence. Instituted by philanthropist Sunil Wadhwani, co-founder and chairman of IGATE, a leading multi-national IT services company, WISH is the hallmark of innovative health care for the



services at the doorsteps of every poor household. By 2020, WISH intends to reach 10 million underserved people in India, district by district, block by block with innovative healthcare solutions tailored to their needs. They would do this through the SCALE -State Consortium for Accelerating, Leveraging and Economizing innovations programmes

Sunil, the man behind WISH, carries with him a vast experience as co-founder and chairman of IGATE corporation, a US-based publicly traded global technology firm with over 33,000 employees.Sunil's aim is to make WISH the link between innovators and healthcare providers from across the country and help them become agents of change. The purpose is to connect, share ideas, collaborate and create a vibrant ecosystem with the goal to take quality healthcare to the poor, most of whom are unable to bear the burden of costs.

WISH believes in scaling up innovations through four simple steps: building a repository of promising healthcare innovations, nurturing them with funding, helping in implementing them on ground and replicating successful models.

There is enormous scope for improving government's existing facilities. WISH will reach out to people living at the bottom of Transforming healthcare

the growth ladder in states like Rajasthan, Odisha and Madhya Pradesh

Work is underway on introducing some path-breaking ideas like setting up health ATMs, an automatic diagnostic center, a kiosk designed to holistically address primary healthcare requirements of an individual. The health vending machine will have an attached cabin to provide diagnostic services like testing body vitals.

Bringing down the cost of basic diagnosis through glucometer, non-invasive anemia screener and portable urine analyser to Rs 3-6/- per test would be another focus area along with developing affordable primary healthcare delivery models.

WISH has already taken a major stride of tying up with the government of Rajasthan for improving access to quality and affordable healthcare over next five years. It will soon launch a number of healthcare innovations for strengthening primary and preventive delivery in Rajasthan.

WISH Foundation would also assist the state government in demonstrating the value of Health ATMs in different locations.

Another major WISH initiative is its partnership with International Finance Corporation (IFC), which maps Inclusive Business Models in healthcare in India. This mapping is the key for identifying high impact enterprises as well as spreading awareness. The foundation has established innovation ties with Millenium Alliance, Sankalp Forum and several other leading development partners. WISH also provides a collaborative platform for partnerships through CSR and impact investment.

Through its web of partnerships with other key organizations like Naryana Health and Hewlett Packard, WISH is working on a primary healthcare delivery model. Similarly, WISH has come together with Karuna Trust, Naryana Health and SRL Diagnostics, to convert ailing public health facilities into smart clinics.

WISH is organising the SCALE Healthcare Innovation Summit on the 19th November 2014 in New Delhi, which will bring over 300 national, state, community and international leaders from government, private sector, social enterprises, healthcare innovators, academia, funders and

development partners to address the challenges of scaling up promising innovations in healthcare.

It is a known fact that health is a fundamental right of the citizens and it is the obligation of the government to safeguard the provision But the governments can't realize such gigantic tasks on its own Himani Seth