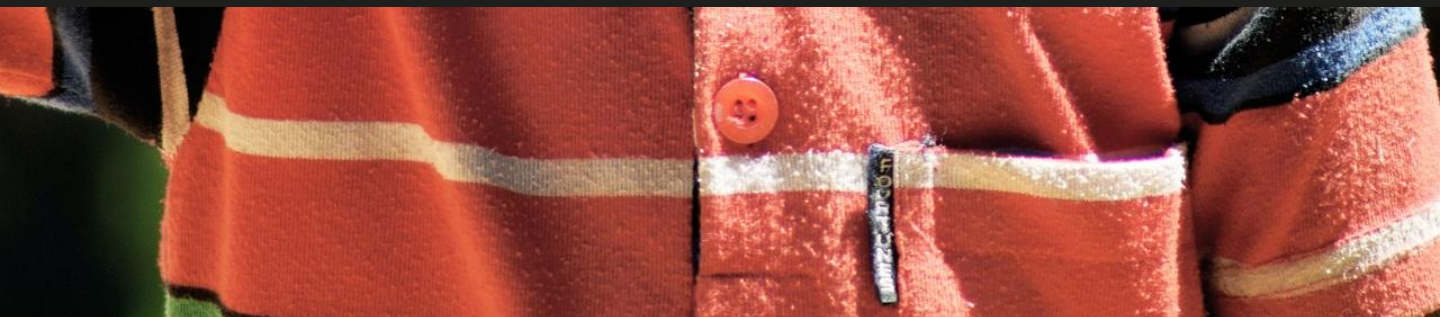




Social Impact Assessment: Program on Cleft Surgeries. Smiles for Life under Colgate Palmolive's CSR Initiative





What was the social impact of intervention on the beneficiaries?



Surgeries Undertaken
275



States Covered
6

Clefts in the orofacial region are prevalent birth defects with a multifaceted etiology that is likely influenced by both genetic and environmental factors. In developing nations, untreated cleft lips and palates are becoming more prevalent, and patients frequently seek surgical intervention much later than the ideal period for correcting the cleft anomalies.

Cleft lip and cleft palate are birth defects that occur when a baby's lip or mouth do not form properly during pregnancy. Together, these birth defects commonly are called "orofacial clefts". - Centres for Disease Control and Prevention

Children who are affected may experience various functional and aesthetic challenges, such as difficulties with feeding shortly after birth due to issues with oral sealing, swallowing, and nasal regurgitation. They may also have hearing difficulties resulting from abnormalities in the palatal musculature, and speech difficulties due to problems with nasal escape and articulation.

Closing a palatal defect in a timely manner is widely acknowledged to result in better speech outcomes, whereas delaying the closure of the palate has been proven to lead to poor outcomes. Moreover, if the repair of a cleft is postponed, it may negatively affect the child's family and social relationships, potentially causing long-term psychological effects. Unfortunately, in developing nations, untreated cleft lips and palates are becoming more prevalent, and patients often seek surgical intervention well beyond the optimal timeframe for correcting the deformity.

Key Findings

- ✓ Low-income families were provided with free-of-cost CLP (Cleft Lip and Palate) care through the Gifting Smile initiative. Without this program, it would have been almost impossible for these families to afford the necessary treatment.
- ✓ The average age of female and male beneficiaries was 5 and 8 years, respectively, which suggests that the program's primary focus was on improving the quality of life at an early age.
- ✓ The success of outreach strategies in reaching out to the most inaccessible areas and individuals with limited education who may have had little or no knowledge about CLP highlights the crucial role of effective outreach initiatives in creating awareness about healthcare issues and facilitating access to essential treatment for marginalized communities.
- ✓ The implementation of efficient post-surgery therapies enabled parents to feed their child adequately, resulting in the development of healthy eating habits and improved overall health.
- ✓ The provision of timely and free-of-cost comprehensive CLP treatment by Gifting Smile served as a significant incentive for parents to prefer this program over government hospitals.



1 Background of the assessment

Added in Global Burden of Disease list in 2008 by WHO, Cleft Lip and Palate (CLP) are among the most common birth defects in the world, which may adversely impact child’s whole life if left untreated. Approximately 1 in 700 newborns are affected with CLP in the India (Source: *Prevalence of malnutrition among children at primary cleft surgery: A cross-sectional analysis of a global database*)

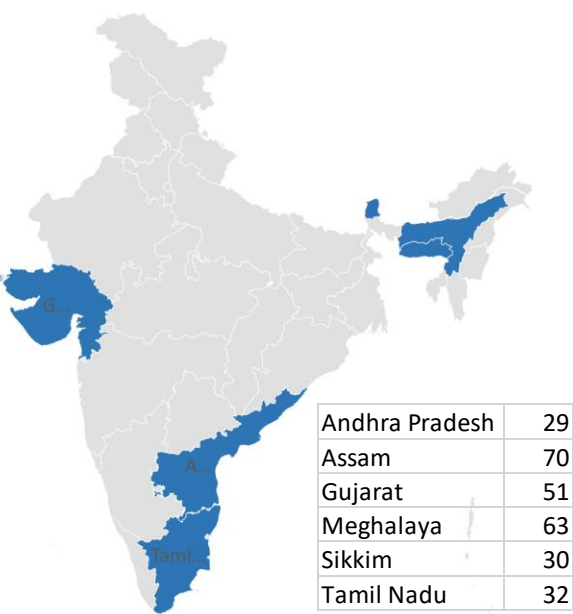
Individuals with Orofacial Clefts (OFC) require multidisciplinary care involving multiple medical disciplines. However, due to the limited availability of specialized care centers, lack of knowledge about OFC which results in myths, and often fragmented and non-standardized care, there are variations in management, costs, and controversies. This not only poses a challenge for medical professionals but also makes it difficult for families belonging to economically backward communities to manage treatment costs.

In 2001, to address these challenges, the Central Government of India launched the "National Cleft Lip and Palate Program" to provide free treatment and care for individuals with cleft lip and palate. Several state governments have also launched schemes to provide adequate help to patients and their families.



Given the scale of the problem, it's crucial to involve different stakeholders, such as corporates as well as the civil society organizations having the ground level understanding of the situation across locations. In line with this, Colgate Palmolive (India) Ltd introduced the "Gifting Smile" intervention through its CSR initiative. This initiative has extended a helping hand to 275 families across six states, providing support amounting to INR 88 lakhs in FY 2021-22 and continues to impact many more lives.

State wise number of beneficiaries



Starting from November 2021, the program was initiated across six states, namely Andhra Pradesh, Assam, Gujarat, Meghalaya, Sikkim, and Tamil Nadu. The program's extensive outreach efforts included organizing awareness cum screening camps in remote areas. The project team collaborated with NHM officials at various block and village levels to compile a list of patients and arrange for their surgery. The program was implemented through three delivery modes: Mission Mode, Outreach Mode, and Guwahati Comprehensive Care Center.

The program provided all 275 beneficiaries with a comprehensive cleft care package, which included surgery as well as pre- and post-surgery care such as Speech Therapy, Dental Treatment, ENT Treatment, Nutrition Counseling, Child life support, and follow-up check-ups. The follow-up check-ups, which were tailored to the specific needs of the beneficiaries, were provided free of cost for a period of six to twelve months. Additionally, the program covered the transportation, accommodation, and food expenses of the patients and their attendants at no cost.

2 Study Rationale and Methodology

The current study assesses the social impact of the project for improving the lives of beneficiaries (children born with cleft lip, cleft palate and other facial deformities) supported by Colgate Palmolive CSR. The intervention supports families from economically marginalized backgrounds.

The study adopts a mixed method research design methodology such that the data collection tools map the relevance, coherence, efficiency, effectiveness, impact, and sustainability of the intervention in line with the Organization for Economic Co-operation and Development Assistance Committee (OECD DAC) framework. Within the methodological framework, stakeholder interaction and field-based validations are undertaken on the sampled beneficiaries across locations.

The program's direct beneficiaries who underwent surgery range in age from 0 to over 60 years old. Therefore, three classifications were made: based on age group: 0 to 12 years old, 12 to 20 years old, and 20 years and above. The rationale for this classification is that patients in the younger age group may not be able to provide details due to their age, and so their parents will be interviewed instead. Patients in the age group of 20 and above will be interviewed directly.

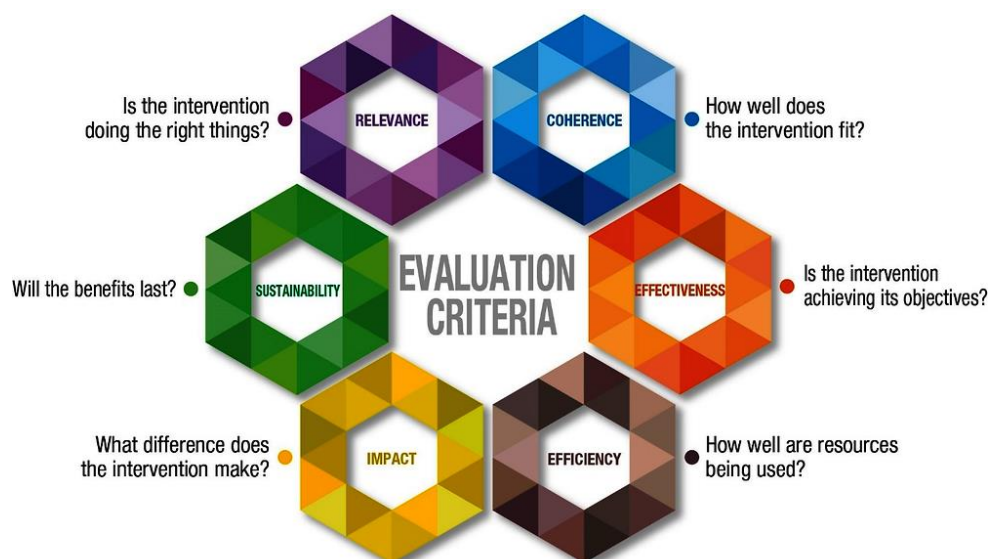
Key Stakeholders were as follows-

- Direct Beneficiaries (0 to 12 years old, 12 to 20 years old & 20 years and above)
- Parents (of direct beneficiaries)
- Doctors
- Implementation partner

The study included stakeholder interaction and field-based validations across locations and also health care institutions where surgeries were undertaken. The study sample was selected with due consideration to ensure that a diverse range of individuals were included. The stratification criteria consisted of age, gender, family backgrounds, and the specific cleft surgeries they underwent. Focus was also laid on ensuring geographical diversity with respect to state and district.

3 Structure for Analysis: OECD-DAC Framework

To evaluate the end-to-end outcome and impact of the financial support for the treatment of OFC deformity by the Colgate Palmolive CSR team, the study has been classified such that, the generalized impact of the overall program is analyzed through the lens of the OECD DAC framework, followed by the specific impact of the program on states.



4 Primary Research Findings

Understanding the demography of families

Out of the 275 individuals who received benefits, approximately 49% were female, while the remaining 51% were male children. The average age for female beneficiaries was 5.5 years, with an age range spanning from 0.6 to 31 years, whereas for male beneficiaries, the average age was 8.2 years, with an age range of 0.5 to 62 years. These findings indicate that there may be a higher likelihood of delayed CLP treatment among male children.

The largest group of beneficiaries, accounting for 48%, are those belonging to the Scheduled Tribes category, followed by the General category with 20%, Other Backward Castes with 18%, Scheduled Castes with 10%, and Minority Groups with 4%.

A significant proportion of the beneficiaries' parents have a low level of education. According to the responses gathered, 51% of parents have completed education below the fifth standard, while 40% of parents have not received any formal education.

Based on the sample data, it can be observed that 36% of families rely on agriculture as their primary source of income, while 19% depend on daily wage labor. Others are employed as electrician, mason etc.,

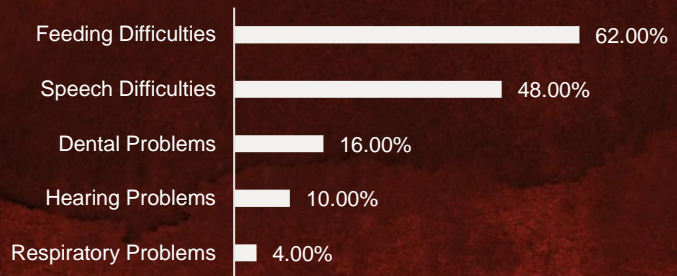
The data underscores the fact that the project beneficiaries are vulnerable and marginalized due to their low income and education levels, with most families having only 1 earning member. This often leads to limited access to critical healthcare services, including cleft lip and palate surgeries. By providing these surgeries free of charge, the project aims to address the healthcare needs of this marginalized population and promote equitable access to healthcare.

Awareness on CLP

Based on the collected data, it appears that only 15% of families have a history of CLP, making it challenging for many families to recognize the condition on their own. This poses a particular challenge for families with limited access to quality healthcare services and little knowledge about the causes of cleft lip and palate, which may result in delays in identifying CLP. The data also reveals that 51% of respondents were not aware of OFC, and among them, 20% were unaware of their child's OFC deformities, leading to a delay of three or more months in detection.

Among the 80% of families who were able to detect OFC deformities at birth, 90% took more than a year to receive treatment after detecting CLP. These findings indicate a significant lack of awareness and timely access to treatment for OFC among the beneficiary population.

Medical Challenges Faced



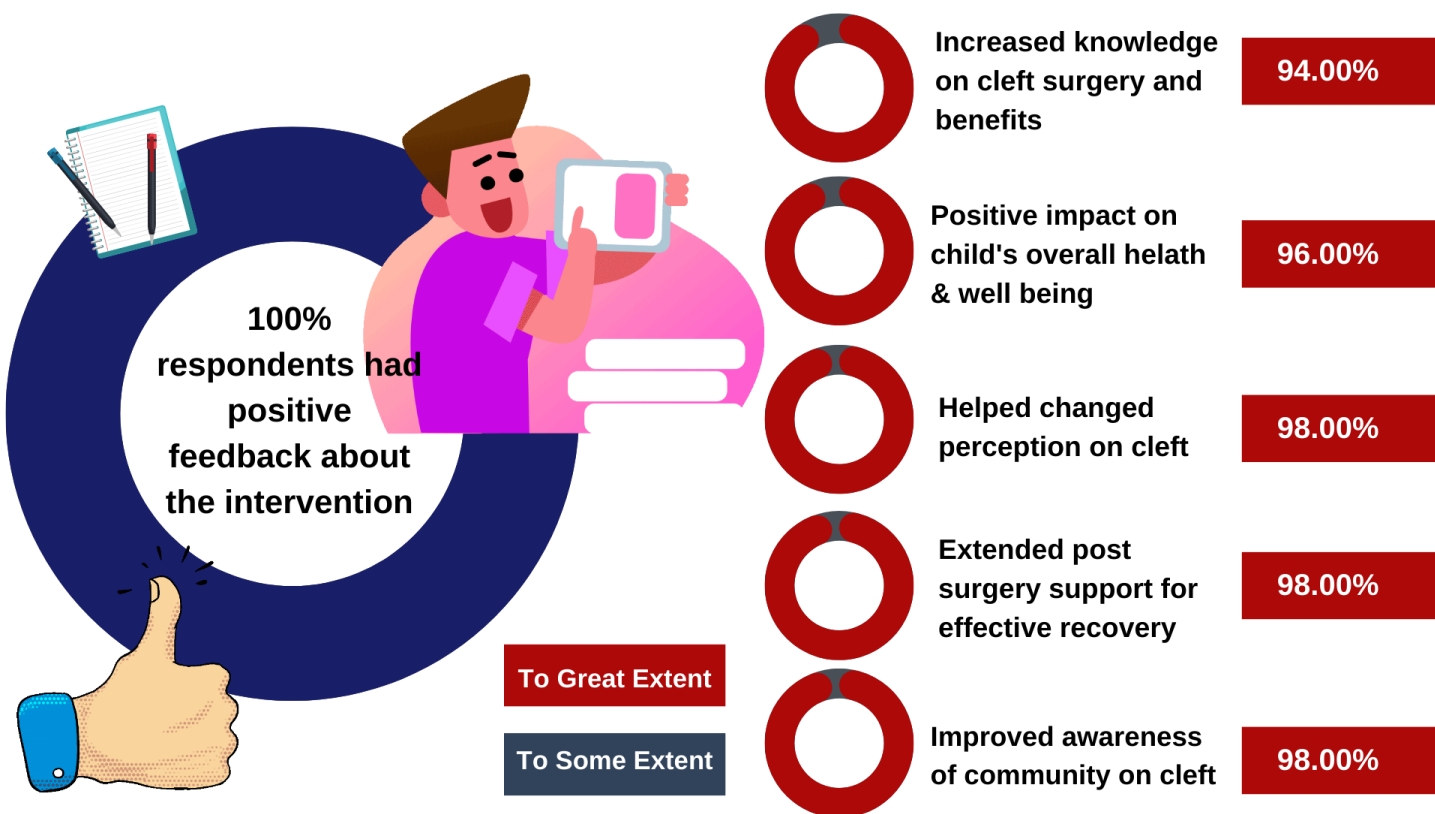
Owing to CLP, the parents mentioned that there were instances of absenteeism in schools, which impacted the academic performances of the students. There were several challenges that the families faced such as financial burden, getting friends, emotional distress, education related, social stigma, communication difficulties etc. Many parents mentioned that the cost of surgery in private hospitals was very high. Which delayed their decision making of getting operated.

Intervention by Colgate Palmolive CSR: Gifting Smiles

The respondents suggested that they majorly got to know about the intervention from outreach camps by NGO, other parents, doctors and other health professionals, especially when they visited the hospital. Majority of the respondents weren't aware of any other institution/ organization undertaking such surgeries. The few respondents who knew that they could get it operated in government hospitals, found the entire process to be time consuming.

The respondents were given a proper understanding on the surgery and post surgery aspects which they found extremely useful. 100% of the respondents have positively responded towards quality of pre-surgery support received. Amongst the post surgery treatments, the respondents received pain management, swelling management, proper nutrition, dental therapy etc.

100% of the respondents were positive about the quality of post surgery support received under the intervention.



Program evaluation under OECD DAC Framework

Criteria	Rationale	Rating
Relevance	Extent to which the intervention responds to the beneficiaries, global, country and partner/institution needs, policies and priorities	● ● ● ● ●
Coherence	Extent of compatibility of the intervention with other interventions in a country, sector, or institution	● ● ● ● ●
Effectiveness and Impact	Extent to which the intervention has achieved, or is expected to achieve, its objectives and its results	● ● ● ● ●
Efficiency	Extent to which the intervention delivers, or is likely to deliver, results in an economic and timely way	● ● ● ●
Sustainability	Ability to generate net benefits that persist beyond the end of the intervention	● ● ● ●

Relevance

The project was initiated to improve the future of children born with cleft lip, cleft palate, and other facial deformities in India. According to reports from the World Health Organization (WHO), an estimated 35,000 children are born with CLP in India every year. Sadly, many of these children suffer from social stigma, difficulty eating and speaking, and a lower quality of life due to lack of awareness and access to proper care.

The relevance of the project is even more prominent as the cost of surgery and pre- and post-care treatments is prohibitively high, and patients in certain regions often struggle to find specialized care due to a lack of facilities and trained professionals. Compounding these challenges, there is a serious lack of understanding about the causes and treatment options for CLP in India, which frequently leads to delayed diagnosis and treatment.

The intervention focuses on providing free surgery and pre- and post-care treatment, while creating awareness in communities and other stakeholders, including medical staff. Through the Colgate Palmolive CSR program, no-cost comprehensive cleft care was provided to 275 individuals.



Coherence

Health is a core dimension of the Sustainable Development Goals (SDGs), with goal 3 aiming to “ensure healthy lives and promote wellbeing for all at all ages.” Additionally, health is casually linked with 10 of the 16 goals. In congruence with SDGs, the Government of India adopted the National Health Policy (NHP) in 2017 to strengthen the Indian healthcare sector.



The program provides essential support to the National Program for Prevention and Control of Congenital Anomalies of Ministry of Health and Family Welfare, India and many State programs to provide quality and free comprehensive CLP care. The programme is planned and implemented strategically to support multiple SDGs such as SDG 3 for Good Health and Well-being, SDG 1 which aims to eradicate poverty and ensure economic growth and SDG 4 for quality education among others.

Efficiency

Efficiency analysis of a comprehensive cleft care program necessitates a thorough understanding of various essential factors. These factors include the provision of treatment from experts at no cost, regular follow-ups, and reaching remote areas to ensure the long-term success and sustainability of the program. To this end, the Colgate Palmolive CSR collaborated with Mission Smile, which boasts an in-house team of experts, ensuring that timely and quality treatment is accessible to all beneficiaries throughout the year. Moreover, the partnership between Mission Smile and the government ensures the efficient mobilization of resources, thereby enabling the program to achieve its objectives in the most efficient way possible.

Effectiveness & Impact

The effectiveness of the program can be measured against the program goals and objectives of bringing smile to children born with cleft lip, cleft palate and other facial deformities by providing free life changing cleft care and surgeries at no cost. The study revealed that all the beneficiaries received comprehensive cleft care at free of cost. The required knowledge was shared with parents to empower them to take care of their child after the treatment. Feedback from parents indicates that the project has positively impacted the overall health and well-being of children, with nearly 94% of parents giving it the highest rating of 5 on a scale of 1 to 5 and the remaining 6% giving it a rating of 4. The project has also improved the self-esteem and confidence of around 92% of children, as reported by their parents. Financial support for surgery and necessary post-surgery care have been critical in ensuring effective treatment and recovery, with more than 96% of parents giving a 5 rating for the necessary post-surgery support received by their children. Overall, the project's success is commendable, making a significant difference in the lives of children and their families

Sustainability

A sustainable intervention provides long-term benefits to beneficiaries even after the intervention ends. A project offers no-cost comprehensive care surgeries, post-surgery therapies, follow-ups for 6-12 months, and empower parents to care for their child. The success of the program depends on accessibility, skilled medical teams, partnerships with hospitals and governments, and most important is post-surgery care & therapies patient access to treatment. The project reduces financial burden on parents by providing all treatments and surgeries at no cost, regardless of the number of surgeries required. The program also focuses on creating awareness and providing training to government officials to increase reference for the project. Therapies after surgeries helps children to eat & drink properly-resulting in adequate consumption of food, improve their communication that leads to boost in their confidence. Collectively all these gives lifelong benefits to beneficiaries to get involved in the society and live life confidently. Ensuring comprehensive cleft care remains accessible and free is crucial for securing the program's success over the long term.



Stakeholders Speak:

When my child turned one, I took him to the nearest government hospital for recommended vaccinations suggested by an ASHA worker. While there, the administering nurse informed us that our child had a cleft palate. This was a condition we were previously unaware of. Through the ASHA worker, we were able to visit Mission Smile center where their team explained the treatment process and other services, including pre- and post-surgery care. We were impressed with their thorough explanation and the fact that all their services were offered at no cost. Therefore, we made the decision to seek treatment from Mission Smile instead of the government hospital: Kailash Gautam, father of Anuj Gautam

"I joined Mission Smile in 2011 and have conducted over 10,000 surgeries to date. Cleft lip and palate (CLP) is not only a medical issue but also a social one, as many families believe it is a punishment from God. After treating patients, I address the social issue as well. Parents express gratitude by bringing gifts such as gamusa and fruits. The happiness on their faces gives me satisfaction. Young practitioners from across the world come to me to learn about CLP surgery and provide service in their own areas. The knowledge I have gained over the years is reaching new geographical areas, which motivates me to work even harder." : Dr Hiteswar Sarma, Plastic Surgeon

Cleft lip and palate (CLP) being a social issue, with a lot of stigmas attached to it, have always acted as a barrier while accessing health services. But, with Mission Smile, I strongly believe, that these small gaps are being filled and people are being treated. Being, a patient of the same condition, I was offered a seamless experience with respect to my treatment and the doctors have been very conducive in adding special layers of treatment, specific to me. This has given me confidence and ensured me right to accessible health - Manita Chamlagai

When I encountered this problem, it seemed end of this world to me. I was snatched the ability to eat and speak properly. Everyday seemed like one step closer to death. But, with Mission Smile, I felt somebody is always moving shoulder to shoulder with me, providing a chance to excel in life. I completely understand the inherent fears involved in the process, but trust and optimistic attitude has always given me the strength to bounce back again with Mission Smile- Chetan Chauhan

During a field visit, I witnessed a distressing scene of a two-month-old baby crying in pain due to cleft lip and palate (CLP). The baby weighed less than two kilograms and was lying in a corner. The family was living in a hut, and they were extremely impoverished. The baby's mother expressed helplessness, stating that they could not afford any treatment, and were resigned to watching their child die. Moved by the situation, I personally provided financial assistance to the family and urged them to visit our GC4 center. Thanks to our comprehensive care model, which includes pre- and post-surgery treatments, as well as surgery itself, provided free of cost, the baby is now living a healthy life. This success story is just one of many that we have been able to achieve. Our ability to provide such care is due to our collaborative approach, working in partnership with the government, medical experts and CSR donors. The commendable support we receive from the government and CSR donors is a direct result of the transparency with which we operate, and the positive feedback we receive from beneficiaries on our comprehensive model.

Dipul Malakar, Assistant General Manager, Mission Smile. Working with Mission Smile from 2011

4 Conclusion

The OFC deformity results in a lifelong health issues if not treated well. It impacts patients' physical, mental and social well being. In addition to requiring support for the individual suffering from OFC, their family may also need assistance with financial resources and knowledge about the necessary care. To address these challenges, Colgate Palmolive's "Gifting Smile" CSR program provides free access to high-quality treatment for OFC through surgery and pre- and post-care. The program aims to support patients and their families by offering them surgery and related care without any cost.

The Colgate Palmolive CSR team's assistance during the pandemic was highly appreciated by stakeholders due to the pressing demands in the public health sector. Their support was particularly instrumental in strengthening the capacities of primary healthcare centers in rural villages by providing essential diagnostic test machines and beds. Another critical intervention was through vaccine vans, which facilitated complete vaccination in record time with the help of state machinery. The program achieved several successes, including increased capacity of medical institutions to serve more patients with the availability of new equipment. Notably, there was significant improvement in several healthcare institutions selected by the Colgate Palmolive CSR team, particularly in terms of meeting patient needs, overall equipment usage, and ultimately, patient care.

Some of the key areas for consideration include the following:

- Mission Smile utilizes a key strategy of deploying its volunteers to reach out to beneficiaries at specific locations, where they conduct medical evaluations and surgeries over the course of seven days. This approach is deemed the most convenient for beneficiaries to receive the services, but it can cost Mission Smile anywhere from 20%-80% of their resources due to mobilization and other expenses. However, the limited timeframe of seven days for the medical mission can act as a hindrance to providing longer post-surgery follow-up and therapies. Strategies could be formulated around leveraging the power of telemedicine for ensuring regular check-ups and follow up discussions with relevant doctors and counsellors.
- Cleft Palate deeply affects the way communities treat the individuals. Therefore, better efforts on reaching out to larger audience and creating awareness through advertisement and advocacy will help in detecting a larger audience who can be treated.
- The most optimum way of reaching out to a larger audience is through partnerships with doctors (specially dentist) and local hospitals, who in turn can guide the impacted ones to the outreach centres or in case of larger population, will help in setting medical mission in the region.

