

Human Development & the Corporate Sector: The Anonymous Benefactor

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Abstract

The interdependence between the corporate world and the society is evidently visible in the economic, social, ecological and inclusive development of the region where a corporate has evolved. This evolution of the private business houses has laid the foundations of sustainable relationships with the community at large. But yet given the resources, reach and impact of this sector, its imprecise relation with the human development of the population can be referred to as that of the 'Anonymous Benefactor'. There are numerous examples of corporates adopting villages, running hospitals and training centres, conducting awareness workshops, bringing about a positive change at the community level, providing employment to masses. It's time to acknowledge the role of the corporate sector as a change agent in social development and welcome such developmental activities through the creation of win-win partnerships.

Human development is also at the core of the government's development agenda, it is for the government to establish incentives and encourage industry to come up with new developmental models that address issues like manpower shortages, infrastructural deficiencies in hitherto remote areas and civil society concerns relating to costs and quality of services. Uttar Pradesh not only has a large spread of industry but is also the source of captive workforce. This must be seen as an endowment for reaching out to the masses, thus instead of imposing financial contributions on corporates its capacity, reach and expertise should be leveraged through effective partnerships.

There is a need for mechanisms that can streamline the public funds in the social sector through partnerships that align the multi-dimensional impact and social behaviour of the corporates, and together endorse a constructive role in the pursuit of the goals of human development. In order to push the development agenda in a mission mode, it is recommended that realistic and operational models of engagement between the Government and the corporate sector are jointly explored and addressed.

The era of globalization where India transformed itself to 'India Inc', also saw a multi-faceted development in the presence and impact of corporates. Today, the role of corporates doesn't only involve provision of goods and services but has grown to become the source of livelihood, empowerment and community development. This research paper focuses on how the private business houses have established deep rooted relations with the community and how this may be seen as a potential partner for using the public funds in an effective way.

Key Words: Human Development, CSR, Corporate Social Integration

I. Introduction

The interdependence between the corporate world and the society is evidently visible in the economic, social, ecological and inclusive development of the region where a corporate has evolved. This evolution of the private business houses has laid the foundations of sustainable relationships with the community at large. But yet given the resources, reach and impact of this sector, its imprecise relation with the human development of the population can be referred to as that of the 'Anonymous Benefactor'. There are numerous examples of corporates adopting villages, running hospitals and training centres, conducting awareness workshops, bringing about a positive change at the community level, providing employment to masses. It's time to acknowledge the role

of the corporate sector as a change agent in social development and welcome such developmental activities through the creation of win-win partnerships.

A recent study by population council¹ recognised the corporate sector in Uttar Pradesh (U.P.) as a potential partner in complementing a Behaviour Change Communication (BCC) strategy to improve family health outcomes. The study stresses that the industries located in UP have workers that are relatively better educated and can be easily reached under a single umbrella of management with focused messages. Many workers are migrants that continue to have strong links with rural areas; they could be effective channels for disseminating information on desired behaviors in rural areas.

Several large corporate organizations have their own health facilities, medical centres and dedicated teams that work at the grassroot level in catchment areas and provide services to the workers and their family members. This sector needs to be seen as an immediate collaborator to reach out to the community at large.

II. From Corporate Social Responsibility to Corporate Social Integration

A widely quoted definition by the World Business Council for Sustainable Development states that, “Corporate Social Responsibility is the continuing commitment by business to behave ethically and contribute to economic development while improving the quality of life of the workforce and their families as well as of the local community and society at large” (WBCSD, 1999)². Thus, the meaning of CSR is twofold. On one hand, it exhibits the ethical behaviour that an organization exhibits towards its internal and external stakeholders. On the other hand, it denotes the responsibility of an organization towards the environment and society in which it operates. CSR is regarded as vehicle through which companies give something back to the society. It involves providing innovative solutions to societal and environmental challenges. But the challenge for development

professional and business community is to identify CSR priorities and the areas of interventions which are meaningful in the context of health sector. USAID alternatively referred CSR as “corporate citizenship,”³ which essentially means that a company should be a “good neighbour” within its host community.

‘Sphere of Influence’, which is a key concept that relates to all 10 of the UN Global Compact principles ⁴. The Global Compact asks companies to embrace, support and enact, within their sphere of influence, a set of core values in the areas of human rights, labor standards, the environment, and anti-corruption. The components of a company’s sphere of influence as are organized as follows:

- Workplace (employees)
- Supply chain(business partners)
- Marketplace (customers)
- Community (including broader stakeholder relations)
- Government (including public policy dialogue)

Michael Porter, a Harvard business professor, and Mark Kramer, a senior fellow in the CSR Initiative at Harvard's Kennedy School of Government, proposed a framework for shifting CSR from a paradigm pitting business against society to one leveraging their interdependence. “Leaders in both business and civil society have focused too much on the friction between them and not enough on the points of intersection,” they wrote. “The mutual dependence of corporations and society implies that both business decisions and social policies must follow the principle of shared value. That is, choices must benefit both sides,” “To advance CSR, we must root it in a broad understanding of the interrelationship between a corporation and society while at the same time anchoring it in the strategies and activities of specific companies.”⁵ The interdependence between

business and society takes two forms in Porter and Kramer's framework: "inside-out linkages" where company operations impact society and "outside-in linkages" where external societal forces impact companies. CSR Asia's The Future of CSR: 2009 Report emphasizes on a move from philanthropy towards much more strategic community investment. It talks about "the emphasis on investment rather than giving which will result in company's better targeting resources that benefit both communities and the business itself. New partnerships with NGOs and local community groups should target both local and global challenges and be an important part of a company's commitment to sustainable development." ⁶

III. India & CSR

About 72% of India's top 50 companies undertake CSR initiatives supported by well-defined CSR policies⁷. Notable efforts have come from the Tata Group, Infosys, Bharti Enterprises, Aditya Birla Group, ITC Welcome group, Indian Oil Corporation among others. Substantial amount is being done by the private sector to benefit the population, for example, the estimated CSR budget for 2007-08 of the PSU, National Thermal Power Corporation (NTPC), was 140 million (US\$ 3.04 million)⁸ while the CSR budget of Jubilant Organosys Ltd, a large industry located in UP, for the same period was 50 million (US\$ 1.09 million). CSR Rating of the largest 500 Indian Companies in India for the year 2010 shows that these industries are involved in CSR interventions in the field of Community Welfare, Healthcare, Education, Employee Welfare, Environment, Vocational Training, Rural Development and Women Empowerment.⁹

The 2010 list of Forbes Asia's '48 Heroes of Philanthropy' contains four Indians. The 2009 list also featured four Indians. India has been named among the top ten Asian countries paying increasing importance towards corporate social responsibility (CSR)

disclosure norms. India was ranked fourth in the list, according to social enterprise CSR Asian Sustainability Ranking (ASR), released in October 2009.

Further, according to a study by The Economic Times, the donations by listed companies grew by 8 per cent during the fiscal ended March 2009. The study of disclosures made by companies showed that 760 companies donated US\$ 170 million in FY09, up from US\$ 156 million in the year-ago period. As many as 108 companies donated over US\$ 216,199, up 20 per cent over the previous year.¹⁰

Although corporate India is involved in CSR activities, the central government has worked out a framework for quantifying the CSR initiatives of companies to promote them further. Besides the private sector, the government is also ensuring that the public sector companies participate actively in CSR initiatives. The Department of Public Enterprises (DPE) has prepared guidelines for central public sector enterprises to take up important corporate social responsibility projects to be funded by 2-5 per cent of the company's net profits. As per the guidelines, companies with net profit of less than US\$ 22.5 million will earmark 3-5 per cent of profit for CSR, companies with net profit of between US\$ 22.5 million - US\$ 112.5 million, will utilize 2-3 per cent for CSR activities and companies with net profit of over US\$ 112.5 million will spend 0.5-2 per cent of net profits for CSR^{11,12}

CSR Asia stresses that companies will have to demonstrate that they have positive impacts on the communities where they operate. In the least developed parts of the region businesses will be increasingly involved with pro-poor community investment projects, micro-finance initiatives and programmes to encourage entrepreneurship. Community investment strategies will increasingly involve climate change adaptation and responses to environmental challenges. There will be a new emphasis on community education

initiatives. Contributing to poverty alleviation and community health initiatives will be seen as an important part of the wider agenda for business who will increasingly have to measure their community impacts.

Table 1: Health Facilities Provided by Industry in Uttar Pradesh

Industry	Hospital with indoor bed	Hospital with no beds	Health Centers	Dispensary
Large	5 (17%)	3 (10%)	4 (13%)	17 (57%)
Cluster	-	1 (2.6%)	1 (2.6%)	32 (84.2%)
Total	5	4	5	49

Source: Confederation of Indian Industry (CII)

Uttar Pradesh has 1700 industries across the state, of these, 62 are large-scale, 366 are medium-scale and 1,281 are small-scale industries. As per a survey done by the Confederation of Indian Industry on corporate sector participation in health in UP, out of 68 industries, which responded to the survey, 14 of them had a hospital or a health centre.

IV. Case Study

Jagdishpur is a city and a municipality in Sultanpur district of Uttar Pradesh. It is situated at about 62 km from the city of Sultanpur on the national highway No.56 and 90 km from Lucknow towards east. As of 2001 India census, Jagdishpur had a population of 31,029. Males constitute 52% of the population and females 48%. Jagdishpur has an average literacy rate of 50%, lower than the national average of 59.5%: male literacy is 60%, and female literacy is 40%. Jagdishpur is an industrial area. Four major factories operating here are:

- Indo-Gulf Fertilizers Co. Ltd (is a major producer of urea).

- Bharat Heavy Electricals Limited (B.H.E.L)
- Sail Jagdishpur unit (SAIL INDIA)
- Quality Packagings (a unit of Ganga Bag Udyog Pvt. Ltd.)

Indo Gulf and BHEL is situated between Sithouli, Banbhariya, Kathoura, Kamrouli and Sindurwa.

Indo Gulf Fertilizers

Indo Gulf Fertilizers urea plant costing over Rs. 700 crores with an annual production capacity of 8.64 lakh tonnes of “SHAKTIMAN” Urea is located at Jagdishpur Industrial Area, District Sultanpur, a no-industry backward district of Uttar Pradesh, the largest assisted sector fertilizer plant in the private sector. Situated in the heart of the Indo-Gangetic plain, where the demand for fertilizer is more than the supply, the unit serves the farming community of UP, Bihar, West Bengal and Jharkhand. The company has developed a modern township for the staff, close to the factory with infrastructure which meets all the basic needs of the employees, like education, shopping complex and a big hospital with modern equipments. The plant has an annual budget of Rs. 50 lakhs for CSR interventions and activities which reach to the communities in the vicinity of 50 kms radius.

Indo Gulf Jan Seva Trust

Indo Gulf Jan Seva Trust (IGJST) which is responsible for Community Initiatives and Rural Development was established in 1987 even before the commencement of the production at the plant in 1988. IGJST carries out the community development projects on the basis of the strategic approaches given in Figure 1.

Focus Areas of the Trust

- Education

- Sustainable Development
- Infrastructure Development
- Social Causes
- Health & Family Welfare
- Value Added Services to Farmers

Health & Family Welfare

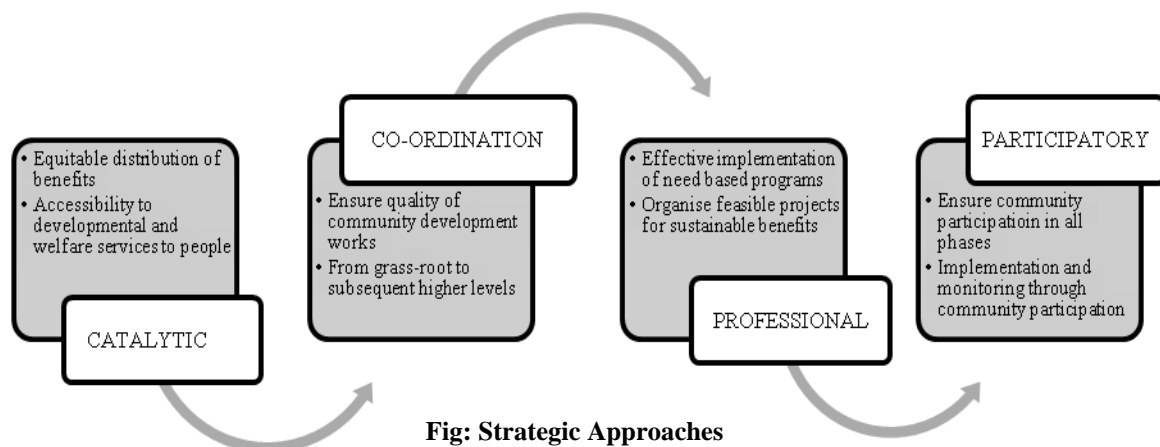
The major intervention of the trust includes provision of affordable medical services to the population through a well-equipped 50 bedded hospital which was established in 1986 even before the start of operations and production at the plant. The hospital caters about 1 lac patients per annum out of which only 7-8 thousand are employees of Indo-Gulf Fertilizers Ltd. It is also worth mentioning that there is no other hospital till date in 50 km radius of the region.

Catchment Areas

The regions coming in vicinity of hospital covers a population of approx. 6 lakhs. People including the areas of Jagdishpur, Jamau, Shuklabazar, these regions do have CHCs and PHCs, but the state of which is reported to be appealable.

Model

The hospital runs on the self-sustainable model, wherein a nominal fee of Rs. 20 is charged from the patient for consultancy to cover the cost of consumables, rest the capital expenditure is fully funded by the plant as a part of CSR. The hospital also has 24 hrs emergency dealing. The hospital has a staff of total 70 people, which includes 8 permanent doctors, 3 EMOs, 17 nurses and technicians. The salary component of the annual budget hospital totals to approx. Rs. 1.7 crore.



Given that large numbers of people come from distant places too, the hospital also has stay facility for the attendants of patients with cooking and laundry provision, at a charge of Rs. 100 per day for a room.

Charges at Hospital

Digital X-ray:	Rs. 150
Ultrasound:	Rs. 300
Blood Test:	Rs. 20
Delivery:	Rs. 2000
Gall bladder surgery:	Rs. 8000
DLC / TLC:	Rs. 20
Other major surgery:	Rs. 10000

As per the hospital administration, charges of the hospital are 10 times less than that of any private health facility, and the quality of service can be itself judged from the fact that super speciality health facility of Lucknow i.e. SGPGI also accepts the referred cases and the test reports of the hospital at Indo-Gulf Plant. Hospital at the plant is a self-sustainable model meeting out the cost of consumables and is yet affordable and accessible to a large section of the population. It is an ideal example for public health facilities to follow, if public funds may

be channeled and monitored the same way or even if an existing primary or community health centre may be run by similar approach with a private business house, the present inefficiencies of the public health facilities can be ruled out.

Fig. 2: Snapshots of the Indo-Gulf Hospital



Women's ward at Hospital



Patients at the Waiting Area



Pathology at the Hospital



Ambulance Service run by Hospital

Employee Social Security

The plant is exempted from Employee State Insurance (ESI) because of already existing hospital. The plant has 750 permanent employees and 700 contractual employees. Both the permanent and contractual staff is provided with insurance coverage (accidental and life) through Birla Sun Life, and fully on company's account. The managerial cadre staff is entitled to some additional benefits and insurance schemes.

Health Interventions in Partnership with other Organizations

Indo gulf fertilizers has done some successful projects in the health sector, one of which was in partnership with SIFPSA, the project spread over 8 years (1998-2006) started with 25 village panchayats but later spread over to 131 village panchayats. The project focused on reproductive and child health through a community based model wherein the community health worker visited the people as per the assigned block. The success of the project can be guessed from the spread of the project in a span of 8 years. Another significant project taken up by the plant was in partnership with CARE India from 2000 – 2010. The project involves a budget of Rs. 1.8 crores which focused on health and nutrition, and began with 20 village panchayats in Raebareli district and later spread to entire district.

Other Interventions

- Pulse Polio immunization camps
- Outreach clinics
- Surgical help to poor patients for gallbladder, urinary bladder, tumour and hernia
- TB and Leprosy treatment
- General health check-up camps
- Handicap camp for artificial amputees.
- Family welfare programmes
- RTI/STD awareness
- Veterinary camps
- Hand pump installations
- Mahila Mandal meetings, nutrition & health days, fold media activities for awareness building

Key Success Drivers

- Reach of the plant in 5 block areas in the region
- Trust of the people on the name – Aditya Birla Group
- Social mobilization through a systematic approach
- Well managed resources and constructive engagement of private funds
- Strong community support
- Well established inter-relationship between industry and the community
- Complete transparency in the handling of financial resources.
- Capacity and expertise at different level in designing and managing projects

Fig. 3: Public Health Related Activities at Indo-Gulf Fertilizers Ltd.



Infant Weight Monitoring



Cataract Eye Operation Camp



Health Mela in Progress



Bio Gas Chulah



Patients at Leprosy Hospital



Lady Doctor at Out Reach Clinic

Challenges

- Lack of government support
- Occasional political interference creates hurdles in the spread of activities.
- Rising expectations of the people in the region
- No trauma centre is there on NH – 56, which is approx. a 130 km long highway and accidental cases on the same are a regular element.

Findings of Field Visit to Community Health Center (CHC) Jagdishpur Staff

Doctors	6	(It was reported that at a time only 1-2 doctors are available)
Lab technicians	5	
Clerks	5	
Class IV employees	6	
Other	4	

Table 2: Facilities and Equipments

X-Ray	Not working since last 1 year
Ultrasound	Facility not available at the CHC
Blood test	Facility not available, patients being referred to the nearby diagnostic centre
Child birth	Free of cost
Minor surgery	Rs. 50 being charged
TLC /DLC	The equipments not working
Ambulance	4, out of which 2 are not in working condition

Other Findings

- It was reported that doctors and other staff are sent gifts occasionally by the nearby medical stores and diagnostic stores.
- It was also found that doctors refer the patients to the diagnostic centres and medical stores where they have their contacts.
- Medicines at the CHC were informed to be only available for fever, cough and pain.
- As per the patients in case of emergency they have to go to private health service providers as during emergency no service is available at CHC.
- It was also reported that, at CHC, the visitor's slip is made only up till 1-2pm, any patient coming after 1-2 pm is unable to seek consultation and treatment.
- Doctors were also reported to be absent many times, also during the second visit the same doctor is rarely available for consultation.
- In event of major illness doctors were even reported to call patients at their residence for treatment.
- Relatives of the staff and influential people were also reported to receive special treatment.
- Patients informed that getting admitted to the CHC is also an uphill task
- CHC was found to be very unhygienic and unclean, it was also informed that any kind of cleaning is done only during the visits of CMO.

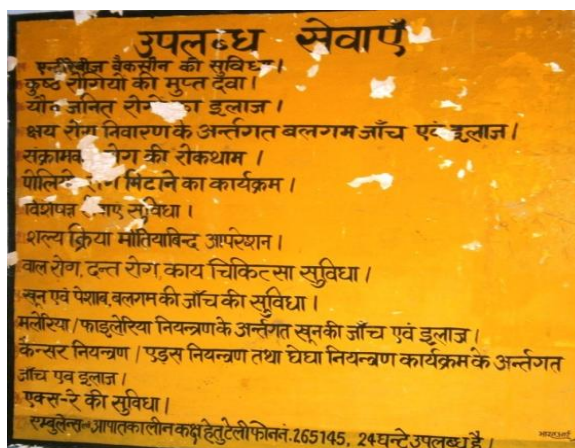


Fig. 4: List of Facilities Proclaimed to be Present at CHC



Fig 5: New building of CHC, Jagdishpur

Table 3: Interviews of Patients

S. No.	Indo-Gulf Fertilizers Ltd. , Jagdishpur		CHC, Jagdishpur	
1	Name:	Md. Yunus	Name:	Shiv
	Age:	19	Age:	12
	Ailment:	Fracture	Ailment	Severe pain
	Expenditure:	Rs. 400	Expenditure	Rs. 1 for consultation + medicines from outside
	Distance travelled to reach the health facility	13 Kms	Distance travelled to reach the health facility	15 kms
	Reason for taking treatment from Indo-Gulf	All facilities are available here under one roof and the hospital is clean and well kept	Reason for taking treatment from CHC	The medicines referred by the doctor are cheap and affordable
	Why not taking treatment from Government health facility	Generally the doctors at the CHC are not available; they come just 2-3 days in a week. Also during emergency no one is available at the CHC	Why not taking treatment from private health facility	Private health facilities are expensive
2	Name:	Kamlesh Kumar	Name:	Amarnath
	Age:	40	Age:	30
	Ailment	Boil in the nose	Ailment	Pain in leg
	Expenditure	Rs. 165	Expenditure	Rs. 1 for consultation + Rs. 120 for medicines from outside
	Distance travelled to reach the health facility	4 kms	Distance travelled to reach the health facility	14 kms
	Reason for taking treatment from Indo-Gulf	The hospital is clean and is nearby.	Reason for taking treatment from CHC	CHC is affordable and the medicines are effective
	Why not taking treatment from Government health facility	The CHC is extremely unhygienic; the OT is so dirty that one cannot sit there. The staff at CHC spit in the OT	Why not taking treatment from private health facility	Private health facilities are expensive
3	Name:	Ramesh	Name:	Mohd. Moin
	Age:	25	Age:	28

	Ailment	Stomach pain (chances of stone)		Ailment	Jaundice
	Expenditure	Rs. 450		Expenditure	Rs. 1
	Distance travelled to reach the health facility	10 kms		Distance travelled to reach the health facility	18 kms
	Reason for taking treatment from Indo-Gulf	The treatment done at Indo-gulf is much better than government health facilities		Reason for taking treatment from CHC	Affordable and condition is improving
	Why not taking treatment from Government health facility	CHC is far from our place and the doctors are very unfriendly and rude		Why not taking treatment from private health facility	Private Practitioners charge Rs. 20-30 and sometimes call at home for check-up
4	Name:	Aasma		Name:	Peer Ali
	Age:	50		Age:	60
	Ailment	Asthma		Ailment	Cough and cold
	Expenditure	Rs.220 per month		Expenditure	Rs. 1 + medicines free
	Distance travelled to reach the health facility	15 kms		Distance travelled to reach the health facility	5 kms
	Reason for taking treatment from Indo-Gulf	The doctors at Indo-Gulf are very cooperative and are very good at diagnosing the problem and suggesting appropriate medicines		Reason for taking treatment from CHC	The treatment is free of cost
	Why not taking treatment from Government health facility	If we go to the CHC after 1-2 pm then the slip is not provided for check-up and every time we go there the doctor we had shown earlier is not there, and in this way each time a different doctor is to be consulted		Why not taking treatment from private health facility	No private facility provides treatment for free
5	Name:	Rukhsana		Name:	Krishna Kumar
	Age:	42		Age:	45
	Ailment	Complications in pregnancy		Ailment	Shivering of the feet
	Expenditure	Rs. 150		Expenditure	Rs. 50
	Distance travelled	15 kms		Distance travelled	1 km

	to reach the health facility			to reach the health facility	
		stone)			
	Reason for taking treatment from Indo-Gulf	There is lady doctor and nurse at Indo-Gulf and they give very good treatment		Reason for taking treatment from CHC	The doctors at CHC are qualified and the medicines are effective
	Why not taking treatment from Government health facility	Once had gone to the CHC for treatment they trouble a lot and most of the facilities are not available there		Why not taking treatment from private health facility	Had taken homeopathic treatment and had spent Rs. 100 also, but did not receive any comfort

It may be seen from the interviews of the patients that services of CHC are being taken for minor ailments like fever and cold only, many of the services which are claimed to be available at the CHC are not found, also the absenteeism amongst doctors is vast. It is found that CHCs are approached mostly because of affordability. While the hospital at the Indo-Gulf plant is being widely used for major surgeries and also reports presence of lady doctor and all required facilities, though in terms of expenditure incurred the charges at the hospital are higher than the CHC but quality of services being provided is clearly evident.

Table 4: Comparative Analysis of the CHC and Indo-Gulf Hospital

Criteria	CHC	Info-Gulf Hospital
Affordability	Yes, but many services referred to private diagnostic and service providers	No, but all services available at one place, saving time and money and lesser than other private players
All facilities claimed available	No	Yes
Cleanliness	No, very poor	Yes

Doctor's availability at all hours	No	Yes
Free medicines	Yes, but for limited ailments	No, have to purchase from outside
Emergency services	No	Yes

It is evident that despite lack of affordability when compared with the CHC, the CSR intervention of the Aditya Birla group has been able to provide for reasonably economical services without compromising the quality aspect of it. It is recommended that such interventions may not only be recognized but also provided with resources and support. Also, alternatives can be looked at to improve the provision of health services in Jagdishpur district, as it has some large scale PSUs like BHEL and SAIL India whose vast resources and presence could be leveraged for developing models like being run by Indo-Gulf Fertilizers Ltd. Even the existing government health facilities can be strengthened by the support of industries in the area.

V. Conclusion

‘Most of the globe’s financial resources lie in the private, not in the public sector. In addition to these financial resources, the products and expertise controlled by private sector must be tapped to contribute to health and well-being of public’¹³. The examples of interventions done by corporate sector bring to light the positive contributions of this sector in holistically improving the lives of communities they flourish in. The case of Indo- Gulf Fertilizers is a fine paradigm of corporate citizenship and has set an illustration of not only bringing economic development to a backward region but also brought basic facilities to an unreached population.

Human Development is also at the core of the government's development agenda, it is for the government to establish incentives and encourage industry to come up with new developmental models that address issues like manpower shortages, infrastructural deficiencies in hitherto remote areas and civil society concerns relating to costs and quality of services.

Uttar Pradesh not only has a large spread of industry but is also the source of captive workforce. This must be seen as an endowment for reaching out to the masses, thus instead of imposing financial contributions on corporates its capacity, reach and expertise should be leveraged through effective partnerships. There is a need for mechanisms that can streamline the public funds in social sector through partnerships that align multi-dimensional impact and social behavior of the corporates, and together endorse a constructive role in the pursuit of the goals of human development.

The role and efforts of corporate sector in taking development agenda forward with focus on health that has been visible and effective. In order to push the development agenda in a mission mode, it is recommended that realistic and operational models of engagement between the Government and the corporate sector are jointly explored and addressed.

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