

**PHILANTHROPY
FOR IMPACT IN
UTTAR PRADESH**

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Contents

About the Paper.....	02
Uttar Pradesh: A Snapshot	03
Development Trends and Milestones.	03
Social Performance of the State	07
The Story Behind: Gaps Explained.....	09
Investment Landscape in Uttar Pradesh.....	12
Solution Ecosystem	16
Case Study	21
Key Takeaways	28
Bibliography.....	30
Key Abbreviations	34
Appendix	35

Why this research paper series?

In a country of 1.3 billion people where problems are deep-rooted, complex and generally progress faster than solutions can catch up, individual efforts often fall short. Our greatest social problems are systemic — they are entrenched and perpetuated by a labyrinth of socio-economic and cultural issues. In order to achieve the sustainable wellbeing of communities, we have to tackle systemic problems by going together rather than going alone.

This research paper series is intended as a tool, useful aid and dialogue enabler among diverse groups of social entrepreneurs, practitioners, funders, policy makers, support organisations, government and more. Designed to be a compilation of the current landscape of trends, gaps and opportunities, best practices and recommendations around state development profiles, development themes such as gender, livelihoods as well as functional themes such as collective impact, each paper in the series aims to serve as a ready reference to further conversations towards more informed collaborations, funding and implementation.

About the Paper

Designed as a development brief on Uttar Pradesh, this paper provides a comprehensive snapshot of the state's progress on economic, social and environmental parameters. The paper highlights Uttar Pradesh's development performance vis-a-vis other Indian states in the following focus areas: Education, Health, Nutrition, WASH, Livelihood, Environment and Women Empowerment. Apart from examining trends, gaps, assets and intra-state disparities, the paper also provides a glimpse of the solution ecosystem in the state as well as development funding flows from various quarters, including government and CSR.

The paper aims to provide philanthropic funders an overview of Uttar Pradesh's development, most prominent gaps across the state and districts, areas for collaboration, and models that can be emulated.

Key Summary

1

Uttar Pradesh has identified infrastructure, agro and food processing, energy, IT, and manufacturing as priority sectors for development and investment.ⁱ

2

Under our trends and milestones section, we see that the state has the largest number of estimated micro, small and medium enterprises (MSMEs), and a vibrant artisan network, yet casual labour is high and the state continues to struggle with poor nutrition and health outcomes, women empowerment, child labour and communal violence.

3

While the western part of the state is progressive economically and performs better on health and education indicators, the crime rate and status of women in the western region remains poor.

4

The government funding budgeted for 2018-19 was INR 3,215,20.27ⁱⁱ crore, 53.83% of the total revenue expenditure.ⁱⁱⁱ With a CSR inflow of INR 663.685 crores between 2014-2017, the state ranked 9th in CSR funding among all states in the country.^{iv}

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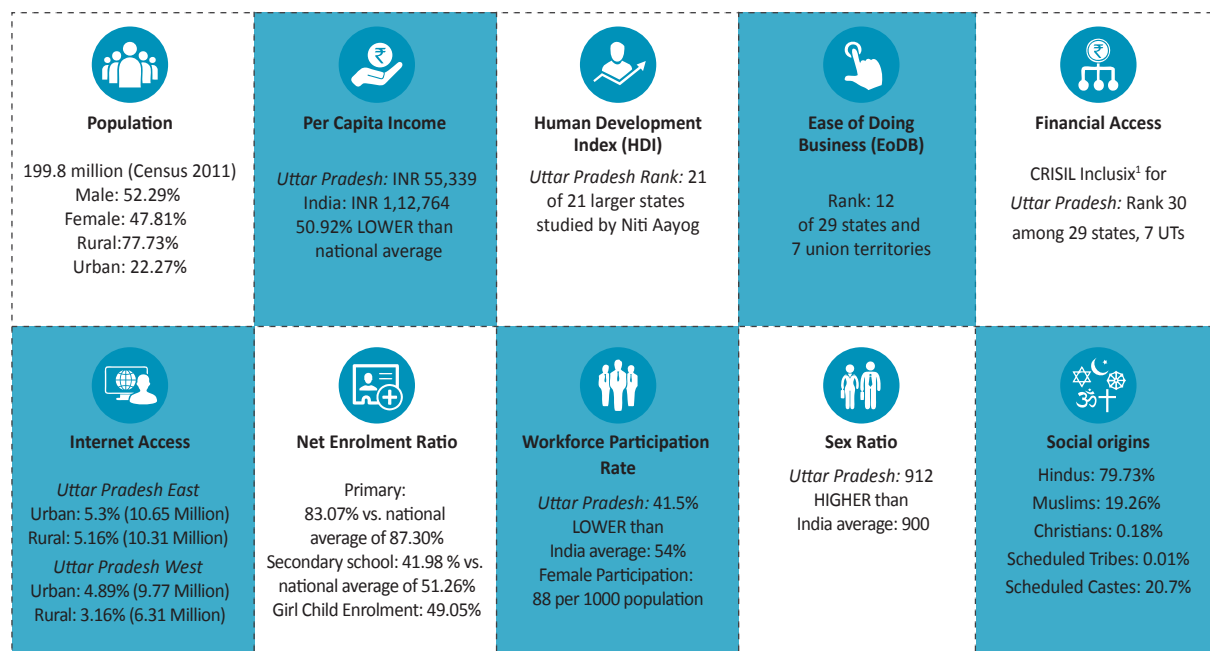
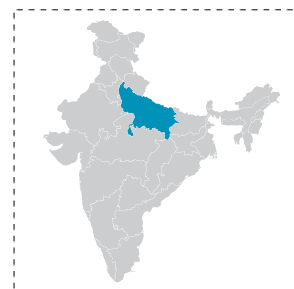
District wise, Gautam Buddha Nagar got the highest CSR funding (105.94 cr), followed by Shahjahanpur (21.53 cr), while 41 out of 70 districts received less than 1 cr.^v

6

The state is leveraging the use of technology to improve health, nutrition and educational outcomes, but close monitoring and accountability is important to ensure success of interventions. Lasting change in the status of women can only be brought about by capacity building of women and behavioural change in communities.

Uttar Pradesh: A snapshot

From population and size point of view, Uttar Pradesh is a very important state of the country. As much as 16.17% of India's population lives in the state. In terms of area, it acquires 5th position after Rajasthan, Madhya Pradesh, Maharashtra and Andhra Pradesh and covers 7.3% land area of India.^{vi}



Source: Census (2011), Socio Economic Outlook (2018), Niti Aayog (2016), Ease of Doing Business, Government (2018), CRISIL (2018), Government Data Portal (2016), Census (2011), Rajya Sabha (2016), World Bank (2013), CRISIL (2015) Government Data Source, Niti Aayog (2015), DIKE 2016, Census (2011)

Development trends and milestones

Uttar Pradesh saw economic growth that compared to and even exceeded the national growth in the late 90s. However, in the recent periods, from 2004, a slowdown in agriculture has reduced the growth of the predominantly agrarian state.^{vii} The state has a wide variety of traditional livelihoods such as carpet making, leather, etc, which have not been leveraged to drive growth as yet. Health, nutrition, and education outcomes remain low, with women's performance lagging far behind in all these sectors, as seen in the section, "Social Performance of the State." It remains to be seen how the developmental initiatives undertaken by the government in infrastructure, manufacturing, healthcare and energy change the dynamics of a relatively poor and underdeveloped state.



Policy and Technology:

The state of Uttar Pradesh has identified infrastructure, agro and food processing, energy, IT and manufacturing as priority sectors for development and investment. To this end, the government has taken up several initiatives, and set up "Udyog Bandhu," to facilitate investment in industrial and service

¹CRISIL Inclusix is an index that measures the extent of financial inclusion in India across its 666 districts.

sectors, besides solving various problems of existing and upcoming industries.^{viii} Uttar Pradesh was one of the first states to kick start ICT initiatives in e-Governance. The state already has a fully automated treasury system; online land records information, fully functional transport system, web-based commercial tax and social welfare portals, online recruitment and transfer processes. 126 DBT schemes^{ix} have been implemented in the state and there are more than 50 large-scale IT projects implemented across the state. These projects include citizen-centric services, recruitment processes, online counselling, net banking, mobile-based applications, online information access to people and government departments, among others.^x

The Uttar Pradesh Electronics Manufacturing Policy-2017, has been launched to attract investment of INR 20,000 crores in Electronics System Design and Manufacturing (ESDM) sector and generate employment for 3,00,000 manpower by the year 2022.^{xi} Keeping in mind the vast potential of solar power, the state has adopted The Uttar Pradesh Solar Power Policy 2017. The aim of the policy is to achieve 8% of total electricity consumption by installation of 10700 megawatt capacity of solar power till 2022.^{xii} In the 2018-19 budget, the allocations for energy, irrigation, and rural development witnessed the highest increase compared to the previous year, whereas allocations for agriculture saw a 59% decrease.^{xiii} Medical and public health saw an increase in allocations with the aim to mobilise mobile medical units and hospitals under the PPP model.^{xiv}



Economy:

The Gross State Domestic Product of Uttar Pradesh for 2018-19 (at current prices) is estimated to be INR 14,88,934. This is 8% higher than the revised estimates for 2017-18.^{xv} The per capita GSDP of Uttar Pradesh in 2016-17 (at current prices) was INR 58,626. This is 12% higher than 2015-16, when the per capita GSDP was INR 52,320.^{xvi}

In the 1970s and 1980s, Uttar Pradesh saw growth that exceeded the national average. This can broadly be understood in terms of a spread of agricultural growth to the agriculturally poor regions, which was supported by public policy. Higher industrial growth also occurred during this period, sustained by higher levels of agricultural development and concentrated in the western regions. In other regions, this growth was propelled by public investment and industrial incentives. However, in later years, the state could not accelerate agricultural growth to higher levels and failed to bring about more dispersed and accelerated non-farm growth despite avowed focus on such growth.^{xvii} Between 2003–04 to 2014–15, UP's economy grew at a good rate of 6.56% annually, but the national economy grew at a higher rate of 7.52%.^{xviii} During this period, while the tertiary sector growth rate was comparable, both agriculture and manufacturing registered lower growth rates in the state. Since 2011–12, Uttar Pradesh has consistently underperformed compared to the national growth performance.^{xix}



Livelihoods:

Uttar Pradesh is uniquely famous for product specific traditional industrial hubs across 75 districts like Varanasi (Banarasi silk sari), Bhadohi (carpet), Lucknow (chikan), Kanpur (leather goods), etc. and the state has the largest number of estimated MSMEs in the country, with a share of 14.20%. In terms of financial inclusion, MFIs are growing fast in states like Punjab, Haryana, Gujarat, Himachal Pradesh and

Uttar Pradesh, which are left uncovered by SHG-BLP.^{xx} A major distinguishing feature of the industrial economy of Uttar Pradesh is a massive presence of skill-intensive traditional industries. These include handloom, zardozi, chikan work, perfume industry, brassware, pottery, glassware, lock-making, leatherwork, wooden toys, furniture carving, etc. Uttar Pradesh is estimated to have about 1.1 lakh handloom worker households and about 2.2 lakh workers, of whom 1 lakh were full time. 42% percent of weaver households were located in urban areas. More than 90% of the workers belong to the Other Backward Classes (OBCs).^{xxi} To further support this industry, the government of Uttar Pradesh has set up the “One District, One Product” policy, which is aimed at promoting the state’s traditional industries.^{xxii} However, there is a lack in the quality of employment that UP’s growth has generated, or failed to generate. Only 10.79% workers in Uttar Pradesh have a regular wage or salaried employment in any sector of the economy, compared to 18.45% workers in the country.^{xxiii} This is a reflection of the agrarian nature of UP’s economy. However, even within manufacturing and services, Uttar Pradesh generates far fewer regular wage/salaried jobs. Only 8.52% workers in Uttar Pradesh are employed in the formal/organised sector, compared to 13.4% workers in the country.^{xxiv} Further, the percentage of formal sector workers is smaller in both manufacturing and services. The state economy is not generating enough jobs and this is reflected in higher levels of unemployment among the youth with higher levels of education.^{xxv} These concerns intensify when looked at from the gender lens. The State of Working India report shows that only 20 women are in paid employment for every 100 men in Uttar Pradesh, in comparison to 50 in Tamil Nadu and 70 in the North-East. The ratio of female to male labour force participation rate varies from less than 0.2 in Uttar Pradesh and Punjab to 0.5 in Tamil Nadu and Andhra Pradesh, to more than 0.7 in Mizoram and Nagaland.^{xxvi}



Education:

In 2014-15, Uttar Pradesh spent INR 13,102 per elementary school student. This is higher than the all-India spending of INR 11,252 per student. State expenditure on primary education has gone up 47% from 2011 to 2015, but learning levels remain among the lowest in India.^{xxvii} In Uttar Pradesh few attend school regularly – on average, only 55% of children enrolled were present in 2014. Further, Uttar Pradesh has the lowest transition rate from primary to upper primary level in the country, at 79.1%.^{xxviii} More children are at work in Uttar Pradesh than any other state, according to this calculation by the National Commission for Protection of Child Rights - 6,24,000 children, or 8.4% of the 5-14 age group.^{xxix} India’s largest state by population has the worst pupil-teacher ratio in India, with a teacher for every 39 students at the primary level. The all-India average is 23:1. At the RTE prescribed standard of 30 students per teacher at the primary level, the state should have 8,40,000 teachers but is short by 21%.^{xxx} Uttar Pradesh also has one of the lowest enrolment rates for economically weaker section and disadvantaged category children under the 25% reservation clause in the RTE Act. The states with top 10 fill rates under the 25% reservation clause included Delhi: 92.08%, Madhya Pradesh: 88.24%, Manipur: 64.77%, Chhattisgarh: 63.1% and Sikkim: 50.26% while Uttar Pradesh was at 3.62%.^{xxxi} Today, 52% of the girls who are not enrolled in secondary education are found in the five states of Bihar, Madhya Pradesh, Maharashtra, Uttar Pradesh and West Bengal. Of these, Bihar and Uttar Pradesh have particularly challenging circumstances, namely the lowest urbanisation rates and levels of per capita GDP of all Indian states.^{xxxii}



Health and Nutrition:

Being one of the poorest states in the country, with almost 809.1 lakh people (39.8%) below the poverty line (BPL) in 2011–12 (Planning Commission 2014), the state has the poorest health indices in the form of high infant mortality rates (43 per 1,000 live births)^{xxxiii} and maternal mortality ratios (201 per 1,00,000 live births),^{xxxiv} and a high burden of disease. Nearly half the children are stunted and 40% children are underweight.^{xxxv} A UNICEF study pointed out that early marriage hinders educational attainment, which then leads to poor maternal health and higher infant mortality rates^{xxxvi} and Uttar Pradesh has the largest number of girls married between 10-19 years (2.1 million) in India.^{xxxvii} Against benchmarks, government data shows that UP has a shortage of 35% Primary Healthcare Centre (PHCs). The state has a surplus of 190% CHCs. However, these CHCs have a severe shortage of human resources and basic infrastructure. Less than half these CHCs have a functioning X-ray machine. Fundamentally, this suggests a gross misallocation of resources and wastage of public funds. The data from the government's Rural Health Statistics (2016) shows that there is an overall 84% shortage of specialists, 77% shortage of lab technicians and 89% shortage of radiographers in the CHCs of Uttar Pradesh. There are similar shortages in Sub-Centres (SC) and PHCs in the state as well. Almost 91% of PHCs do not have a lady doctor on duty and 60% do not have a functional Operation Theatre.^{xxxviii} The data shows that one of the leading causes of death in Uttar Pradesh is diarrhoeal diseases. This raises concern about the ability of the public health institutions to treat common ailments. Uttar Pradesh has 19,962 patients per doctors, second highest against the 1000 doctors per person recommendation proposed by WHO.^{xxxix} However, the National Sample Survey Office (NSSO) 71st round finds that the average burden of healthcare expenditure on the people in Uttar Pradesh is much higher as compared to that at national level. The average total medical expenditure per hospitalisation case in Uttar Pradesh is INR 22,515 as against INR 18,260 in India. The low health status and high costs of care is not only due to social determinants, but also the lesser utilisation of public health services by the public.^{xl}



Gender:

As reflected from the performance of women in education, health, nutrition and livelihoods, we see that gender equality is a clear area of struggle for Uttar Pradesh. Safety and security of women also continue to remain an area of concern. Uttar Pradesh has the largest number of girls married between 10-19 years (2.1 million) in India, followed by West Bengal (1.3 million) and Bihar (1.25 million). Women in West Bengal marry youngest (19.3 years), followed by Uttar Pradesh.^{xli} Even when it comes to crime, as many as 38,467 crimes against women were registered in UP—one every 15 minutes—followed by West Bengal (38,299) and Rajasthan (31,151). Women in the state also struggle with unequal access to land rights. An estimated 85% of rural women in the state work on farms but traditional practices and social norms have kept them from owning land. A recent survey indicated that only 6.5% of rural women have legal rights to land.^{xlii} Uttar Pradesh has the highest number of women sarpanches at 19,992 but these account for only 34% of total sarpanches, 5th lowest in the country, along with Tamil Nadu.^{xliii} The state is one of the lowest five states in terms of its Femdex score at 0.49. The bottom five states account for some 32% of India's female working-age population, representing a large opportunity to improve India's national position in gender equality.^{xliv}



Migration:

Uttar Pradesh is a major state for out-migration because of the poor economy and surplus labour. Between 2001 and 2011, over 5.8 million between the age of 20 and 29 years migrated from Uttar Pradesh in search of jobs, but low educational attainment resulted in low-paying jobs in the informal sector in other states.^{xlv} In Maharashtra, naka workers and seasonal construction workers are sourced from states such as Bihar and Uttar Pradesh. The source areas of Uttar Pradesh are mainly districts of western Uttar Pradesh such as Moradabad, Muzaffarnagar and Shamli. The highest proportion of migrants in Gujarat is from Uttar Pradesh, Bihar, Odisha, Maharashtra and Rajasthan. Majority of them are employed in textile, construction, diamond and other sectors.^{xlvi}



Communal violence:

Communal incidents in Uttar Pradesh have increased 47% from 133 in 2014 to 195 in 2017. The year 2013 saw the most incidents in Uttar Pradesh—247—also the most by any state over the last decade. Uttar Pradesh also reported the most deaths—321, or 28% of 1,115 deaths—due to communal incidents.^{xlvii} Between 2010 and 2015, communal violence in Muzaffarnagar rose five-fold, according to data sourced from the office of the Director General of police for Uttar Pradesh, reflecting a trend of tension evident across 90% of the state. Western Uttar Pradesh is considered the communal hotbed, divided on religious lines, and is home to Muzaffarnagar that witnessed communal riots in August and September 2013. These riots claimed 60 lives and over 40,000 people were displaced.^{xlviii}






Child labour:

2% of the total working children in the world are from Uttar Pradesh and more than 21% of working children in the country are from Uttar Pradesh.^{xlix} In India, the number of child workers has declined by more than 20% in the 2011 census as compared to the 2001 census. Yet in Uttar Pradesh, there has been an increase of 13% in the number of child labourers in the same period.^l Uttar Pradesh has the highest number of children engaged in labour—2,50,672, followed by Bihar with 1,28,087 children and Maharashtra, where the number stands at 82,847. There are many cases where children are forced to migrate with their parents and help them in their occupations such as working in brick kilns. High levels of poverty and unemployment coupled with a lack of adequate social security net compels parents to allow their children to work.^{li}

Social performance of the state

Compared to the rest of India, Uttar Pradesh ranks in the bottom-5 in density of health personnel, IMR and MMR and women's participation in labour force. Due to long-standing cultural barriers, women also lag in terms of access to resources such as mobile phones and land. The table below gives us a greater look into thematic gaps and strengths of the state.

Under every theme, we have identified five indicators that align with Niti Aayog priority areas and the UN SDGs. We have then mapped the performance of the state comparative to the rest of the country on these indicators, to provide a heat map of the state's development status.

Sector	Indicator 1	Indicator 2	Indicator 3	Indicator 4	Indicator 5	Gender lens	Minority Lens
 Education	83.07% primary enrolment vs. national average of 87.30% ^{lii}	Average annual secondary dropout rate of 10.22% lower than national average 17.06% ^{liii}	50.67% student learning achievement levels vs. 54% national average ^{liv}	With a Pupil-Teacher Ratio of 36 the state more than meets the ideal PTR of 30-35 ^{lv}	Score of 0.7 in school infrastructure (i.e. toilets, classrooms, buildings etc) vs. national average of 0.6 ^{lvi}	59.26% female literacy rate vs. national average 65.46% ^{lvii}	49% illiterates among the Scheduled Caste compared to 22% in general category ^{lviii}
 Health	51.10% children fully immunised, less than national average: 65.62% ^{lix}	134.6 health personnel per 1000 people, 3rd lowest vs. national average of 278 ^{lx}	IMR of 43 per 1000 births, 3rd highest vs. national average of 34 ^{lxi}	2 nd lowest life expectancy of 64.1 years vs. national average 67.9 ^{lxii}	2 nd highest MMR of 201. vs. national average of 130 ^{lxiii}	Institutional births for women doubled over 10 years and stands at 67.8% in 2016, vs. national average - 78.9% ^{lxiv}	89% children of the Musahar community in Kushinagar district are not born in hospital ^{lxv}
 Livelihood	271 of 1000 workers engaged in casual labour, vs. national average of 403 ^{lxvi}	88 women per 1000 people participate in the labour force, 3 rd lowest vs. national average of 217 ^{lxvii}	Per capita income of INR 55339 ^{lxviii} vs. national average of INR 112835 ^{lxix}	Unemployment rate of 74 per 1000 workers slightly more than national average of 50 per 1000 ^{lxx}	94.5% schools implementing vocational education vs. national average of 59%	Female LFPRs declined by 10% 2004-05 and 2011-12 ^{lxxi}	41% Scheduled Caste population below poverty line, 4th highest in country ^{lxxii}
 Nutrition	88.52% schools offer mid-day meals, lowest in country against national average of 96.98% ^{lxxiii}	46.3% children stunted vs. national average of 38.40% ^{lxxiv}	39.50% children underweight vs. national average of 35.70% ^{lxxv}	17.90% wasting among children in country vs. national average of 21% ^{lxxvi}	52.40% women with anaemia vs. national average of 50.69% ^{lxxvii}	Mothers who consumed iron folic acid when pregnant stands at 12.9 vs. national average of 30.3 ^{lxxviii}	25% men and 28% women of predominantly in tribal Kushinagar had below normal BMI in 2015-16 ^{lxxix}
 WASH	966 of 1000 rural households have access to improved water vs. national average of 821 ^{lxxx}	992 of 1000 urban households have improved water source, vs. national average of 943 ^{lxxxi}	17.94% schools with handwash facilities vs. national average of 24.17% ^{lxxxii}	99.89% Villages open defecation-free ^{lxxxiii}	47.01% dependence on ground water vs. 50.1% national average ^{lxxxiv}	In Uttar Pradesh, 81% use cloth as a method of menstrual protection ^{lxxxv}	45% ST households with drinking water on premises vs. national average 27% ^{lxxxvi}
 Gender	Crimes against women stand at 44.4% vs. national average of 48.2% ^{lxxxvii}	However, conviction rate for crimes against women stands at 52.6% vs. national average of 24.63% ^{lxxxviii}	81.7% married women participate in household decisions vs. national average 86.3 ^{lxxxix}	54.6% women have own bank accounts, vs. national average of 56.94% ^{lxxx}	Only 37.1% women have phones that they themselves use vs. national average of 55% ^{lxxxi}	34.2% women own land, vs. national average of 38.11% ^{lxxxii}	952 ^{lxxxiii} sex ratio of Scheduled Caste, Higher than state average of 912 ^{lxxxiv}
 Environment	With 4.84% of land under forest cover, lags behind national average of 36% ^{lxxxv}	7124 MLD sewage generated per day and installed capacity of 2646.84 MLD ^{lxxxvi}	19180 MT/day solid waste generation, 2 nd highest vs. national average of 4210 MT/day ^{lxxxvii}	PM10 annual average at 173 µg/m3 against ideal of 60 µg/m3 ^{lxxxviii}	State-wise Installed Renewable Energy of 6237.8MW, 5th highest in the country. ^{lxxxix}	Women on Wings run a program, to distribute solar lighting systems in 800 rural households in Pilibhit ^c	Uttar Pradesh is the 4th highest climate change hotspot likely to experience a decline in living standards ^{ci} 75% of all tribal workers are cultivators or agricultural labourers ^{cii}



Progress
Challenge

The Story Behind: Gaps Explained

The Western part of Uttar Pradesh is progressing due to advanced agricultural practices and improved infrastructure, while the Eastern and Southern regions lag behind. Niti Aayog has identified aspirational districts – Sonbhadra, Chitrakoot, Fatehpur, Chandauli, Sharashwati, Siddharthnagar, Balrampur, Bahraich, which are concentrated in the Southern and Eastern regions of the state. These districts have seen the least progress among other aspirational districts across states.^{ciii}

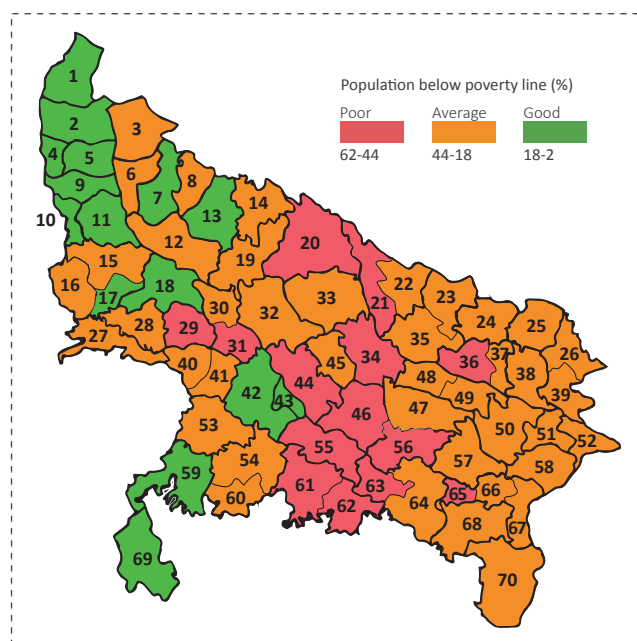


Figure 1: Poverty in Uttar Pradesh (Names of district – Appendix)
Source: World Bank (2012)

Poverty:

Uttar Pradesh is the most populous state in India and is home to 200 million people, with over 40% of the population being multidimensionally poor.^{civ} The Central and Eastern districts in particular have very high levels of poverty. The state is also experiencing widening consumption inequality in urban areas. Growth is slow and driven mainly by services.^{cv}

The Western (WR), Central (CR) and Eastern (ER) regions of Uttar Pradesh come under the areas of Gangetic plains, while the Southern region (SR) is semi-arid. On economic grounds, the Western region has better availability of physical infrastructure and irrigation facilities and is highly developed, especially

in agricultural practices. Studies show that in the four poorest districts of each region, poverty reduction was highest in the WR, whereas CR stands last in this regard. The SR outperforms ER due to the lower extent of downward mobility.^{cvi}

Due to the scarcity of some essential natural resources and exposure to natural calamities, Southern and Eastern parts of the state are chronically backward. The intra-regional variation shows that Bundelkhand and the Eastern region had a higher number and area of medium and large holdings. With landholdings increasing in size, poverty declined except in the Eastern and Bundelkhand regions, where large farmers were also trapped in poverty. These results suggest that policy initiatives are needed to address the crisis in all the regions.^{cvi} Though poverty was found among all categories of farmers because of increasing risk and non-viability of holdings irrespective of size, among the marginal holders, the Eastern region was poorer than the other regions.^{cvi} Across the social groups, research reveals that Scheduled Caste households suffer the highest likelihoods of being poor, followed by OBCs in both rural and urban areas of the state.^{cix}

Education:

Uttar Pradesh has a literacy rate of 67.7%, lower than the all-India average of 74%. In 2014-15, fewer students moved from Class 5 to Class 6 in Uttar Pradesh compared to the rest of the country, with a transition rate of 79.1%.^{cx} Over the years, there has been a fall in inter-district disparity in the availability of educational facilities and attainment. The Western regions of the districts are more developed in comparison to the Eastern and the Bundelkhand regions in terms of many educational indicators, i.e., number of private schools, low teacher-pupil

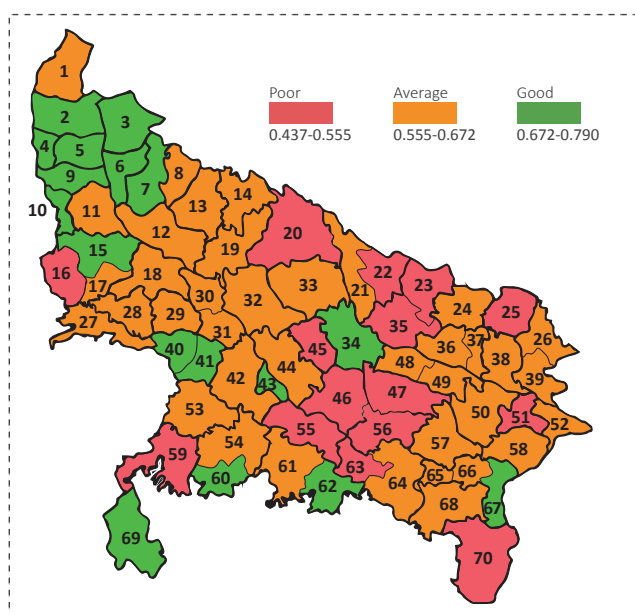


Figure 2: Education in Uttar Pradesh (Names of district – Appendix)
Source: DISE (2016), NAS (2017)

ratio, good infrastructure facility, schools with safe drinking water facility, high literacy rate, etc.^{cxii} Enrolment in private school at primary and upper primary school levels is the highest in the Western region in comparison to the other regions.^{cxiii} As opposed to this progress, the Eastern part of the state continues to struggle with educational outcomes - with Kaushambhi and Fatehpur recording the lowest learning outcomes in the state. Progress in literacy has been higher in the rural sector than urban sector in most districts of the state, which resulted in an impressive improvement in the rural-urban gap in literacy across districts. Yet, there are still ten districts

in the state having more than a 15% gap in rural-urban literacy rate. These districts are Sonbhadra, Lalitpur, Bahraich, Balrampur, Shravasti, Gonda, Mahrajganj, Basti, Banda and Ghaziabad. Among these, seven districts fall in the Eastern region of the state.^{cxiii} Studies show that in the Eastern regions, the illiteracy of guardians makes them unaware about the importance of education. Children are considered as helping hands for income support and sending them to school is a wastage and costly affair. While the Central region shows attainment in terms of high enrolment and literacy rate, the problem of compensating educational cost remains as it is. In recent times, it has become a status symbol to send children to private schools, which makes education more expensive. These are the reasons why education has become less affordable in these regions.^{cxiv}

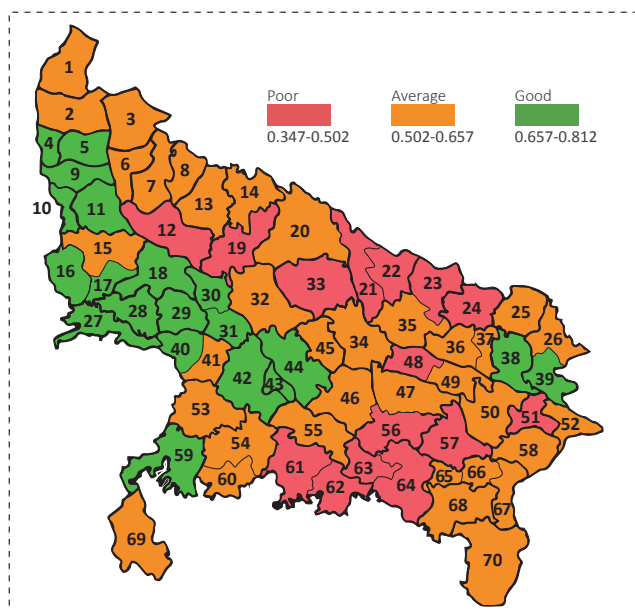


Figure 3: Health and Nutrition in Uttar Pradesh (Names of district – Appendix)
Source: NFHS (2015-2016), Census (2011), DISE (2016), National Health Systems

Health and Nutrition:

A district-level analysis of the AHS data 2012 throws up wide disparities with the IMR in the North-Eastern Shrawasti district at 96, almost three times the IMR of Kanpur Nagar (37) in Western Uttar Pradesh. Kanpur Nagar district has the lowest Neo-natal Mortality Rate (NMR) of 24 per 1,000 live births, whereas Siddharthanagar to the East has the highest NMR of 70 per 1,000 live births. This points to the precarious state of healthcare in the Eastern parts of the state.^{cxv}

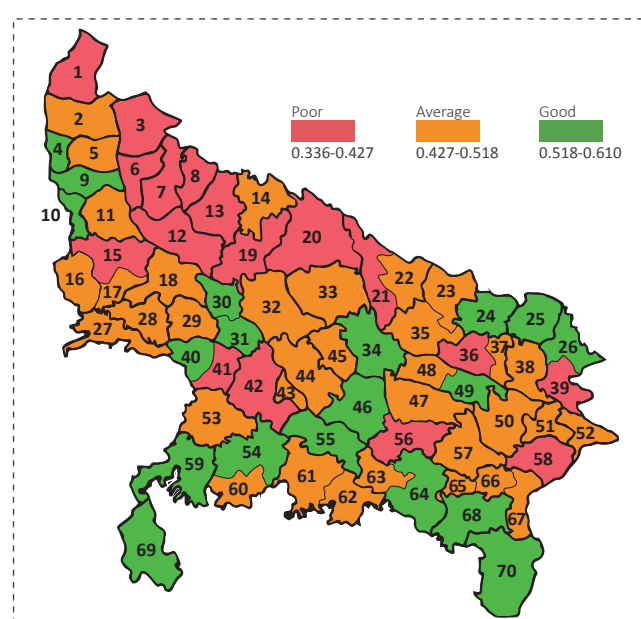
Higher incidence of undernutrition was noted in the waterlogged Eastern and wet Gangetic belt.^{cxvi}

Studies show that this can be attributed to possibly higher occurrence of diarrhoea, infection and worm infestation, which adversely affect the nutritional status of children. Poor hygiene and sanitation services were found to be important contributory factors to stunting in children.^{cxvii}

In Eastern Uttar Pradesh, agriculture is still a principal livelihood for a majority of people. Small farmers own 90% of the land in this region; however, the majority of small farmers are living below the poverty level and

malnutrition is pervasive in the major food producers of the state. Food production has also become cost-intensive. The diversity of food which is available on the plate of a farmer or a person living below poverty line has reduced. Food and water contamination have increased because of fertilizer and pesticide use. These are the major issues affecting the nutrition of a small farmer.^{cxviii}

From a minority lens, the discrimination is so pervasive that Musahars (a Scheduled Caste that sections of Hindu society deem untouchable), derided as rat catchers, are unable to access services at primary health centers, sub-centres and government-run district hospitals).^{cxix} This is also the case for many other SC/ST communities deemed as untouchables. The health indicators of Kushinagar's Musahars are not encouraging. Their infant mortality rate is 82 per 1,000 live births, more than twice the Indian average of 34 deaths. As many as 89% of Musahar children are not born in hospital, and only 19% of the Musahar community in Kushinagar have access to healthcare services, according to AWO-South Asia statistics.^{cxx}



Gender:

With high crime rates, maternal mortality and low rights such as land ownership and phone usage, the state of Uttar Pradesh has been performing poorly in reducing gender disparities. The district map clearly shows that while the Western region in Uttar Pradesh continues to fare better than the rest of the state on economic parameters, it fares poorly in socio-economic empowerment of women. According to Census 2011, women's rate of participation in the Uttar Pradesh workforce is very low, with 88 women per 1000 working.^{cxix} This further varies widely across the districts, with the lowest participati on rate being recorded in

Saharanpur and highest in Jhansi.^{cxii} Women's safety also remains in question. A patriarchal mindset and strong preference for a male child in urban areas, even among the rich, has led to an increase in illegal sex determination of the foetus, and female feticide, often in unsafe conditions.^{cxiii} The Comptroller and Auditor General's report on empowerment of women in Uttar Pradesh shows that women's safety doesn't get better with age. Districts with the highest number of rape cases in 2010-15 were Aligarh (392), Moradabad (377), Allahabad (348), Meerut (346), Agra and Lucknow (328 each).^{cxiv} As per a survey by the All India Democratic Women's Association (AIDWA), 30% of the country's honor killings and 43% of the state's rape cases in 2015 were committed in the Western region—the highest being in Meerut. The girl-child is unwanted—sex ratio in Meerut and Muzaffarnagar is 888/1000 as against UP's state average of 912. While Western Uttar Pradesh has literacy rates better than UP's impoverished East and Bundelkhand regions, a fiercely patriarchal society and the regressive khap panchayats limit the progress of the women in the state.^{cxv}

In Uttar Pradesh, the Western region has the maximum assemblage of Khaps. The subtle patriarchal practices keep the violence and injuries caused to women under wraps, which in turn damage the fight against the patriarchal mindset, inflicting violence on women and misguiding the agencies in making the correct choice of demands against violence.^{cxvi}

Investment landscape in Uttar Pradesh

Government Funding

The government supplies the bulk of funding into Uttar Pradesh, i.e.: INR 3,21,520.27^{cxvii} crore for 2018-19, of which 53.83% of the total revenue expenditure is directed towards development sector.^{cxviii}

In 2016-2017, Government's development expenditure as a percentage of GSDP was 17.1%, which is very close to the national average of 17.85%. The state with the highest spending was Arunachal Pradesh, with 44.1% being invested into development.^{cxix} The government has focused on education, welfare schemes, rural development, energy, industries and minerals, and agriculture, with significantly increased allocation to these sectors. However, government spending (2017-2018) on health, agriculture and rural development is still lower compared to the average of the remaining 19 states studied (of 29 states and 7 union territories) by 0.4%, 5.9% and 0.1% respectively. An increase from the revised 2017-18 budget and budget expense for 2018-2019 has been observed in the field of health (+0.2%) and education (+1%), while a decline was observed in rural development (-0.3%) and agriculture (6.2%).^{cxx}

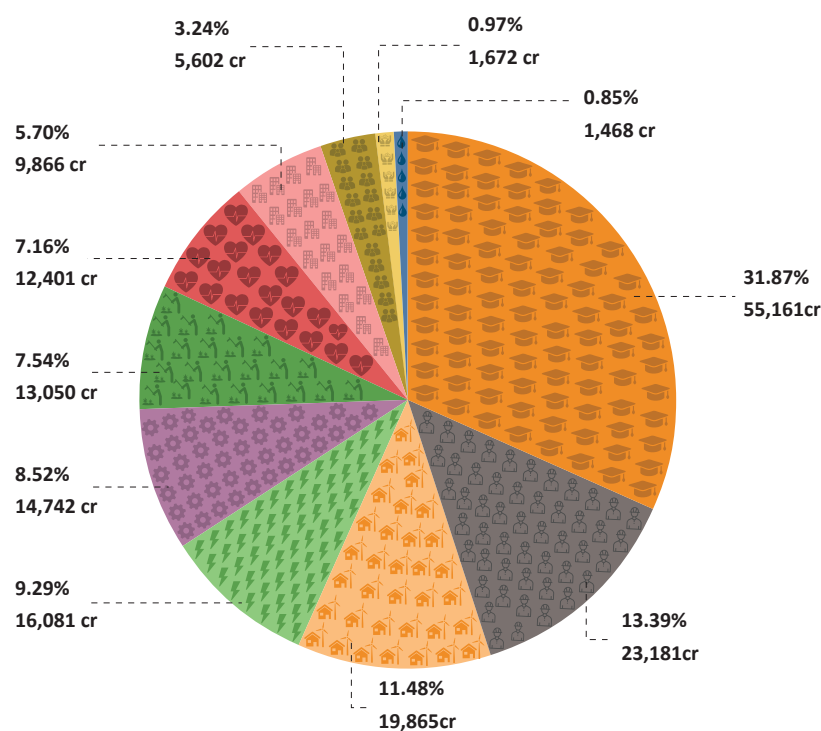


Figure 5: Government Funding across sectors in Uttar Pradesh (2018-2019)

NOTE: As a percentage of total provision in the budget towards development sector, i.e.: 1,73,088.41 cr

*Others includes funding towards irrigation, flood control, science, technology, environment, transport, communications, special area programmes and other general economic services

- Education, Sports, Art and Culture
- Family, Labour and Social security Welfare
- Rural Development
- Energy, Industry and Minerals
- Others*
- Agriculture and Allied Activities
- Health
- Urban Development
- Welfare of SC, ST and OBCs
- Disaster relief
- Water Supply and Sanitation

CSR Funding in Uttar Pradesh

Uttar Pradesh exclusively saw an inflow of INR 663.685 crores of CSR Funding between 2014-2017, which constituted about 2.37% of the total CSR spending in these 3 years. Ranked 9th among all states in India, there was a 193.07% increase in CSR Funding from 2014-15 to 2015-16.

Total quantum of CSR funds (2014-17) spent exclusively in Uttar Pradesh: INR 663.685 crores	The average project cost in Uttar Pradesh is INR 0.598 crore	Of the total quantum of CSR funds, 42.157% originates from PSUs.	District with highest CSR inflow: Gautam Buddha Nagar (105.94 cr)	Power finance, media and electric power distribution companies constituted top three categories of spenders	Top 3 CSR funders include Rural Electrification Corporation Limited. (110.23 cr) , Bennett Coleman And Company Limited (43.5 cr) and NTPC Limited (34.23 cr) .
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Source: National CSR Portal (2014-17)

Education, health & nutrition and environmental sustainability sectors have been favourites of companies for CSR projects. 41.56% of the CSR projects (2014-17) in Uttar Pradesh were implemented directly, 33.98% through implementation agencies, 5.409% through their corporate foundations, 2.86% through government entities, 1.66% through combined channels, and for the remaining 14.51%, the data is unavailable.^{xxxxi}

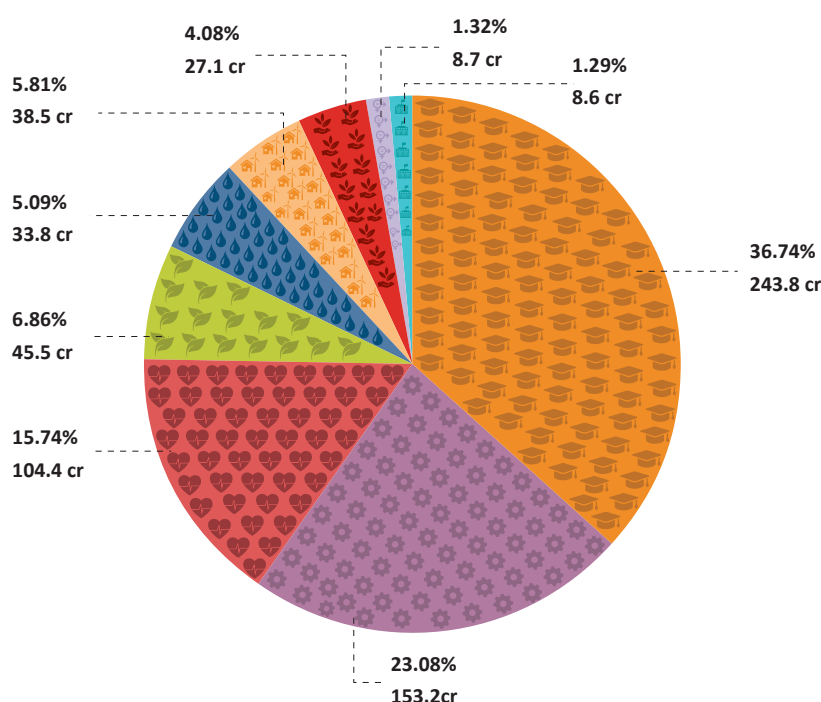


Figure 6: CSR spending across various sectors in Uttar Pradesh (2014-2017)

Source: National CSR Portal

All figures in INR Crore

*Others includes funding towards agro forestry, armed forces, veterans, war widows/ dependants, art and culture, senior citizens welfare, setting up homes and hostels for women, setting up orphanage, slum area development, technology incubators

- Education and Sports
- Others*
- Health, Poverty, Eradicating Hunger and Malnutrition
- Environmental Sustainability, Conservation Of Natural Resources and Animal Welfare
- Safe Drinking Water and Sanitation
- Rural Development
- Livelihood Enhancement Projects
- Gender Equality, Women Empowerment and Socio-Economic Inequalities
- Government Initiatives, Clean Ganga Fund, PM Relief Fund, Swachh Bharat Kosh

From 2014-2017, top 3 funders in education include Bennett Coleman and Company Limited, NTPC Limited and Jaypee Infratech Limited, while in health and nutrition it was Rosa Power Supply Company Limited, Indian Oil Corporation Limited and Jagran Prakashan Limited. Top three funders in environmental sustainability include Kwality Limited, Container Corporation of India Limited and Power Grid Corporation of India Limited.

District-wise CSR Funding in Uttar Pradesh

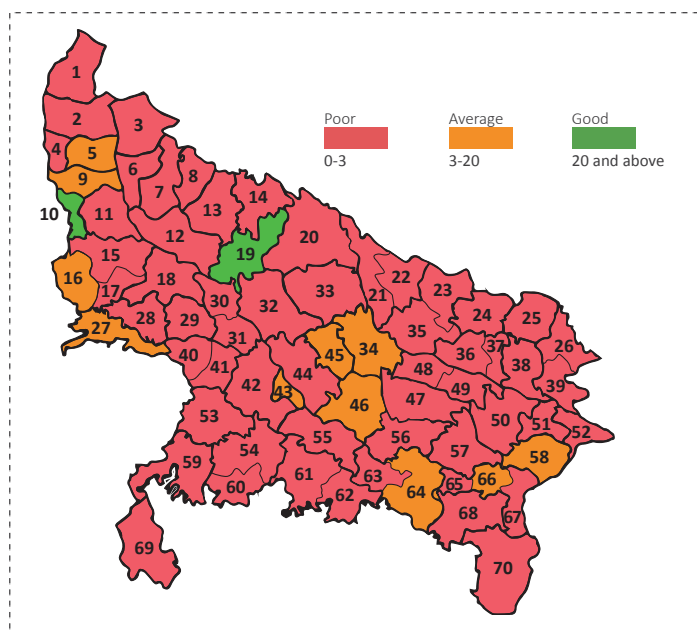


Figure 7: : Distribution of district-wise CSR spending in Uttar Pradesh, (Names of district – Appendix)
Source: National CSR Portal
Note: Total CSR spending analysed is 284.46 cr between FY 2014-17, of companies that specify spending in these districts exclusively.

As can be seen in the map above, there is a clear supply-demand gap with many districts receiving little to no funding from CSR. District-wise, Gautam Buddha Nagar got the highest funding (105.94 cr), followed by Shahjahanpur (21.53 cr), while 41 out of 70 districts received less than 1 cr. ^{cxvii}

Philanthropic Funding in Uttar Pradesh

Domestic philanthropy: Uttar Pradesh has seen considerable interest among several HNWI's such as Azim Premji, Rohini Nilekani, Ashish Dhawan, Bharti Family, Kushal Pal Singh, among others making contributions to development efforts in the state, especially in the field of education, health, nutrition, livelihoods and sanitation.

Azim Premji Philanthropic Initiatives	Made grants to nine partners in Uttar Pradesh across three focus areas- vulnerable groups, governance and nutrition. ^{cxviii}
Arghyam	Set up by Rohini Nilekani, its focus areas include groundwater and sanitation with grants amounting to INR 3.464 crores towards regions of Bundelkhand, Ballia among others ^{cxvix}
Central Square Foundation (CSF)	Founded by Ashish Dhawan, it has given a grant to Bharat Abhyudaya Foundation, which has successfully collaborated with the Uttar Pradesh government to adopt an MIS from 2016's admission cycle. ^{cxv}
Bharti Family	The Bharti family had pledged Rs 7,000 crore in 2017, to support activities of Bharti Foundation. The Satya Bharti School Programme, the initiative of Bharti Foundation, has built 249 primary schools and five senior secondary schools in villages across Uttar Pradesh among other states, that has reached out to over 45,687 underprivileged children and employed over 1,650 teachers so far. ^{cxvi}
DLF Foundation	DLF Foundation, the philanthropic arm of Kushal Pal Singh's DLF Group, works towards empowering communities and creating opportunities for the underprivileged in areas of Education, Training and Health. ^{cxvii} Under its Integrated School Development Project, it upgraded and installed smart classrooms in ten government schools in Uttar. 3096 students have benefited so far and 5000 students are expected to benefit after the completion of this project. ^{cxviii}

International Funding:

World Bank

- USD 40 Million towards the Uttar Pradesh Pro-Poor Tourism Development Project for India aimed at increasing tourism-related benefits for local communities in targeted destinations^{cxix}
- USD 306 Million towards the Uttar Pradesh Water Sector Restructuring Project to strengthen institutional and policy framework for integrated water resources management and increase agricultural and water productivity by supporting farmers in targeted irrigation areas.^{cxl}
- USD 152 Million to improve the efficiency, quality and accountability of health services delivery in Uttar Pradesh through the Uttar Pradesh Health Systems Strengthening Project^{cxli}

Asian Development Bank

- The Asian Development Bank is working with India to upgrade major district roads in Uttar Pradesh. USD 300 Million has been allocated to it.^{cxliv}
- USD 225,000 provided for Agricultural Value Chain Development in Uttar Pradesh to finance consultations with stakeholders, including officials of relevant ministries, the private sector, traders, and local communities to gather information and insights on the market trends and issues affecting value chain development^{cxlvi}

United Nations

- Improvement plans following Effective Vaccine Management (EVM) were developed in Uttar Pradesh, approximately USD 240,000 (16 million Indian rupees) was approved for Uttar Pradesh^{cxlii}
- The National Health Mission Programme Implementation Plan was supported to develop social and behavioural change communication, costing over USD 149 million.^{cxliii}
- In Uttar Pradesh, USD 93 million was allocated under the Gram Panchayat Development Programme to make 100,192 schools and AWCs compliant with WASH child/baby-friendly standards.^{cxliv}

Department for International Development (DFID)

- Neev Fund has invested INR 50 crore (USD 7.7 Million) in the Lucknow-based company Mahendra Educational, which helps job aspirants prepare for competitive examinations at both the central and state levels^{cxlvii}
- SunSource Energy, a solar EPC player in India, is boosting its portfolio with plans to develop a 200-MW solar park in Uttar Pradesh, entailing an investment of INR 900 crore. The company has also received funding from State Bank of India-led Neev Fund^{cxlviii}

Solution Ecosystem

Having reviewed the challenges plaguing Uttar Pradesh, we see that the state struggles greatly in health and nutrition outcomes, ranking in the bottom three states for MMR, IMR, and density of health personnel. The state also faces limitations in women empowerment with the third lowest women's workforce participation.^{cxlix} Livelihoods has seen mixed progress, with high levels of employment as casual labour.^{cl} While the state has recorded progress in education, with reduced drop outs in secondary education, it struggles with sub-par pupil teacher ratio and learning outcomes. (*refer social performance of the state*).

In this section, we will look at solutions that are in play in the state, how they are working and where the challenges still lie for different players - NGOs, Government, Corporates and International Organizations.

Gender:

Uttar Pradesh has the largest number of girls married between 10-19 years,^{cli} and one of the lowest Femdex scores in the country.^{clii} As seen in the previous section, violence against women continues to be an area of concern, especially in the Western part of the state. Civil society research shows that it is often a struggle for women in Uttar Pradesh to access the police system for justice. Breaking down the stigma and secrecy associated with domestic violence and generating supportive communities will enable women to reach out and receive assistance in times of crisis.^{cliii} To this end, Humsafar India is working to provide a wide range of support services, including paralegal, legal, medical, social mediation, counselling, rescue, shelter and rehabilitation to over 7000 women. Humsafar's intervention is meant to increase public awareness and provide a community support mechanism. Through its program, community members organized under Sakhi Samooh provide a supportive and enabling community environment for violence survivors to re-integrate into society.^{cliv}

The government of Uttar Pradesh has introduced the Swadhar Greh scheme to provide temporary accommodation, maintenance and rehabilitation services to women and girls affected by crime and violence. Swadhar Grehs were established in 42 districts as of March 2015. However, the CAG report reflects that not setting up necessary linkages with other programmes such as non-formal education, and skill development has limited the achievement of the economic rehabilitation of inmates of Swadhar Greh.^{clv}

To ensure that the upliftment of women is lasting, and that they don't have to return to the violence of their homes, they need to be empowered with livelihoods and employment opportunities. Fidelity International and Metlife's CSR project, implemented by NGO Setu, has set up a skill centre at Village Nithari, Noida to cater to women and empower them with tailoring skills in order to make them employable/self-employed and create a livelihood for themselves. Here, 960 women undergo training to acquire skills in Basic Computer Operation, Tailoring, Healthcare, Beauty and Wellness along with Hospitality.^{clvi}

UNDP's research shows that collectivization provides support to members and strengthens their determination to act as effective decision-making individuals in the social and political arena. In Uttar Pradesh, women still face a number of challenges to their engagement in political spaces such as inadequate education, lack of financial independence, burden of productive and reproductive roles and opposition stemming from entrenched patriarchal views.^{clvii} A lot of ground work and a mix of interventions such as perspective building, training programmes and informal meetings are required to motivate women to form networks.^{clviii} In certain areas there are additional

constraints of caste and class in the formation of networks, particularly in Eastern Uttar Pradesh.^{clix} UNDP's program for Capacity Building of Elected Women Representatives, allows for the formation of women's forums and networks that act as pressure groups and enable women to raise issues of alcoholism, health and violence. Despite the challenges explained above, the program has managed to empower 30-35 Elected Women Representatives in Ghazipur district, Uttar Pradesh, giving other organizations a model to follow and replicate for women empowerment.


Sector	Player	Intervention Description	Impact	Organization/ Intervention Name	Lens
 Gender	Government	Temporary accommodation, maintenance and rehabilitation for women rendered homeless due to family discord, crime, violence, mental stress, social ostracism	Swadhar Grehs were established in 42 districts	Swadhar Greh scheme	Violence
	NGO	Support Centre for women in crisis for services like paralegal, legal, medical, social mediation, counselling, rescue, shelter and rehabilitation	More than 7000 cases addressed in the last 10 years	Humsafar India	Violence
	CSR	Skill centre to empower women with tailoring skills to make them employable and create livelihood for themselves	Skilling 160 women per annum	Fidelity International and Metlife - Project Saksham	Livelihoods
	DFI	Formation of women's forums and networks that act as pressure groups and enable women to raise issues of alcoholism, health and violence	Between 30-35% of the Elected Women Representatives in Ghazipur, Uttar Pradesh	UNDP	Leadership

Figure 8: Solution Space for Education

Health and Nutrition:

The state has poorest health indices in the form of high infant mortality rates and maternal mortality ratios, a high burden of disease with nearly half the children stunted and 40% children underweight (refer to social performance of the state). Only 51% children in the state are immunised, giving Uttar Pradesh rank 24 among 29 states. Studies show that among the most vulnerable populations, pregnant women and children in resource-poor settings need health systems that are capable of delivering timely and quality care. At the forefront of service delivery are many Frontline Health Workers (FHWs), who are responsible for identifying all eligible beneficiaries within their catchment areas and ensuring that each beneficiary receives the full schedule of services. Robust Health Information Systems (HISs), powered by complete and accurate data, can play a powerful role in facilitating these routine service delivery activities by FHWs.^{clx} To provide this E-health support, the government of Uttar Pradesh has set up the M-Sehat model as an integrated mobile platform to maintain health reports of mother and the child, and ensure proper, timely medication. The project involved providing smartphones to 10,252 ASHA workers, and tablets to 1,719 ANMs.^{clxi} UNDP has also supported the government in setting up the Electronic Vaccine Intelligence Network (eVIN) to facilitate capacity-building of all vaccine store keepers and cold chain handlers in the state allowing for digitised and real-time data for decision-making. The project aims to target a population of 57.1 lakh children and 66.1 lakh pregnant women every year.^{clxii}

Uttar Pradesh has a shortage of 33% SCs, and 35% PHCs and nearly 91% of the PHCs do not have a lady doctor on duty.^{clxiii} HCL Samuday works to reduce IMR and MMR, and make Primary Healthcare services accessible to all in the community. While interventions like Mobile Mentoring Van, Nurse Mentor, Staff Nurse, and Health Resource Centre

help build the capacity of frontline workers, refurbishment of existing health centres and system strengthening help improve the state of infrastructure in the area. Community engagement in existing government/community platforms like Village health Nutrition Day (VHND) and Village Health Sanitation & Nutrition Committee (VHSNC), is qualitatively improved leading to growth in demand from community for better healthcare services. This project is operational in 765 villages impacting around 600,000 people.^{clxiv}

Much of Uttar Pradesh's population depends on agriculture for their livelihood and agricultural shocks (of which droughts are the most prominent example), lead to a decline in household food availability and a worsening of child nutrition and health. Literature shows that school meals can cushion children from these shocks and reduce the seasonal variability in their food intake.^{clxv} Akshaya Patra Foundation is working to address lack of education and hunger through the, 'Food for Education' program which provides freshly-cooked nutritious mid-day meals to 2,11,680 children in 3,021 government and government-aided.^{clxvi}


Sector	Player	Intervention Description	Impact	Organization/ Intervention Name	Lens
 Health And Nutrition	Government	Integrated mobile platform to maintain health reports of mother and the child, and ensure proper, timely medication for them	Smartphones to 10,252 ASHA workers, and tablets to 1,719 ANMs	M-Sehat	Gender
	NGO	To address lack of education and hunger, "Food for Education" provides freshly-cooked nutritious mid-day meals to children	2,11,680 children in 3,021 Government and Government-aided schools.	Akshaya Patra Foundation	NA
	CSR	HCL Samuday works to reduce Infant Mortality Rate and Maternal Mortality Rate, and make Primary Healthcare services accessible to all in the community.	Operational in 765 villages impacting around 600,000 people.	HCL Samuday	Gender
	DFI	The Electronic Vaccine Intelligence Network (eVIN) facilitated capacity-building of all vaccine store keepers and cold chain handlers in the state allowing for digitised and real-time data for decision-making	Targets a population of 57.1 lakh children and 66.1 lakh pregnant women, every year.	UNDP	NA

Figure 9: Solution Space for Livelihoods

Education

India's largest state by population has the worst pupil-teacher ratio in India,^{clxvii} and one of the lowest enrolment rates for economically weaker sections and disadvantaged category children.^{clxviii} Yet, the state has been attempting to leverage technology to achieve improvement in its educational outcomes. To provide equal opportunities, remove discrimination and allow for more children to stay in school, the government initiated the Free Laptop Distribution scheme where 15 lakh laptops were distributed from 2012 to 2015. Studies show that through these laptop distributions, students would receive inspiration towards higher education and interest in studies with easiness of resource materials in soft copies and editing of their notes. This was expected to generate an increase in students' enrolment in higher education.^{clxix} Similarly, Samsung's Smart Class initiative consists of the latest audio-visual tools, like Samsung Tablets, interactive smartboard, printer and other devices to help students learn complicated concepts easily. Samsung Smart Class also enables teachers in retaining the students' attention due to this modern and interactive learning environment. More than 2 lakh students have been introduced to modern learning through this initiative.^{clxx}

E&H Foundation is also working to ensure underprivileged children get a chance to achieve access to education and improved learning outcomes. So far, they have enabled quality education for more than 17000 children, from Classes 1-5, in Farrukhabad, Lucknow, and Kanpur. Financial support from E&H Foundation covers salary of staff (teachers, supervisors and core staff), infrastructure support, teacher training guides, training costs of supervisors and teachers' monitoring cost.^{clxxi}

MHRD states that community participation in education is viewed as an effective means of promoting education both in qualitative and qualitative terms.^{clxxii} Keeping this in mind, UNICEF is supporting the government of Uttar Pradesh to create awareness among the School Management Committees (SMC) on improving environment, enrolment and attendance in government schools, through an edutainment-based radio programme. The Jan Pahal radio programme will reach out to 2.5 million SMCs across 75 districts of Uttar Pradesh to motivate, empower and mobilise them in the state. The episodes talk about the importance of Right to Education (RTE) Act, efforts by teachers to help children, timely distribution of books and mid-day meal. This will help ensure that teachers and students attend school regularly and bridge the critical gap by sharing information and mobilising communities.^{clxxiii}


Sector	Player	Intervention Description	Impact	Organization/ Intervention Name	Lens
 Education	Government	Provide 1,00,000 laptops and tablets to the students in the state who pass the high school and intermediate examinations to encourage them for higher studies	15 lakh laptops distributed between 2012-2015	Free Laptop Distribution scheme	N/A
	NGO	High levels of learning with independent assessment by Education Initiatives with Financial support from E&H Foundation	Quality education for more than 17000 children, 55% of which will be girls.	E&H Foundation	Gender
	CSR	Samsung Smart Class, to bridge the digital gap between rural and urban India and provide equal opportunities for quality education to children from all backgrounds	Smart Classes set up in over 260 schools, benefitting over 1.5 lakh students.	Samsung	N/A
	DFI	'Jan Pahal' radio programme for enhancing school management committees' knowledge, understanding and engagement, for quality education.	52-episode radio series that will reach out to 2.5 million SMCs across 75 districts of UP	UNICEF	N/A

Figure 10: Solution Space for Gender

Livelihoods

Only 10.79% workers in Uttar Pradesh have a regular wage or salaried employment in any sector of the economy, compared to 18.45% workers in the country.^{clxxiv} This is a reflection of the agrarian nature of UP's economy.^{clxxv} To support the farmers in the state, the government in its latest budget, has provided for crop loan waivers of small and marginal farmers subject to a ceiling of INR 1,00,000 under the 'Krishi Rin Mochan Yojna' and 7,500 farmers are to be covered under the scheme. Research shows that targeted action in which waivers are preceded by a case-by-case examination on merits may be an appropriate response to instances of distress in agriculture.^{clxxvi} The effectiveness of government intervention can be improved even more if waivers are part of a comprehensive package, including public investment and investment incentives, to alleviate distress.^{clxxvii}

When looked at from a regional lens, underdevelopment, poor infrastructure and limited natural resources place Eastern Uttar Pradesh low on the development index. The predominantly rural population depends on agriculture

for subsistence, but erratic irrigation due to alternating floods and droughts, and exploitative market systems make agriculture a low-profit venture. Oppressive social systems add to the factors that have stymied development in the region.^{clxxxviii} Tata Trust initiated the Eastern Uttar Pradesh Programme with the institutional collectivisation of rural women. The programme now undertakes developmental work in the region in the focus areas of rural livelihoods, natural resource management, and education and health, with active participation from women. By introducing technological models to aid agricultural production and to disseminate best practices, the Trusts have been instrumental in encouraging small-holder farmers to foray fearlessly into farming, thereby improving their income levels.^{clxxxix}

The State of Working India report shows that only 20 women are in paid employment for every 100 men in Uttar Pradesh.^{clxxx} McKinsey reports that 70% of the potential incremental workers could come from nine states, of which one is Uttar Pradesh. One way to empower women is to equip them with requisite knowledge, skills and networks to challenge discriminatory social norms that are practiced against women and girls.^{clxxxi} Milaan undertakes this through its flagship Girl Icon Fellowship – a leadership journey of girl fellows focused on enabling them with comprehensive life skills including issues such as active citizenship, adolescent health and social inclusion, impacting 2,280 girls in 3 states.^{clxxxii} Similarly, in partnership with the IKEA Foundation, the project Swaayam by UNDP aims to empower women through an integrated approach that enhances the income of women and helps them contribute effectively to decision making in the domestic and public spheres – mobilising 43,000 women into SHGs.^{clxxxiii}


Sector	Player	Intervention Description	Impact	Organization/ Intervention Name	Lens
 Livelihood	Government	Waive crop loan of small and marginal farmers subject to a ceiling of Rs. 1,00,000	Certificates to 7,500 farmers covered under the scheme	'Krishi Rin Mochan Yojna'	N/A
	NGO	Girl Icon Fellowship focuses on enabling women with comprehensive life skills including issues such as active citizenship, adolescent health and social inclusion	500 Girl Icon fellows supported to set up 1,000 social action projects.	Milaan	Gender
	CSR	Developmental work in the focus areas of rural livelihoods, natural resource management, and education and health, with active participation from women	3,00,000 families impacted in Eastern UP	Tata Trust: Eastern Uttar Pradesh Programme	Gender
	DFI	Empower women through an integrated approach that enhances the incomes of women and helps them contribute to decision-making	Over 43,000 women are mobilized into 3,124 SHGs	UNDP - Project Swaayam	Gender

Figure 10: Solution Space for Health and Nutrition

Across sectors, an analysis of the solution space shows us that the participation and impact of the government-led schemes has been limited over the past years. There is a need for greater initiative by the government to bring about sustained change. Studies show that Uttar Pradesh needs to put in place a healthcare system where financial barriers to access are less and financial protection against the costs of healthcare is more.^{clxxxiv} Its ongoing efforts need to be strengthened through sectoral collaborations and building evidence for effective strategies to create sustainable behavioural change for healthy nutrition.^{clxxxv} On generalised debt waivers, the finding is that they create expectations of similar waivers in future and disincentivise farmers from repaying loans. At the same time, anticipating adverse borrower behaviour, lenders tend to reduce the size of their lending operations; the net result is a contraction of credit available to farmers.^{clxxxvi}

To ensure that the progress under women empowerment is lasting, there is a need to bring about behavioural change and empower women through leadership roles and employment opportunities to ensure that they don't return the tragic state of the past.^{clxxxvii} Under education as well, there is a need to involve the community to bring in accountability and improvement in the quality of education. While technology is being leveraged in education and healthcare, there is a need to ensure the monitoring and standardisation of data for the ease of use of field level workers and the effectiveness of the intervention.^{clxxxix}

Case Study

We delve deeper into the sectoral challenges, theories of change, best practices and collaborative outcomes across sectors like education, livelihood, health and gender through an emphasis on organisations that have greatly impacted the ecosystem they are working in. These case studies are meant as a tool to better understand the entrenched issues across thematic areas in the state, and how these organisations have adopted strategies that have seen considerable success. These best practices can then be scaled across regions with effective collaboration from various stakeholders in the ecosystem, aiming for sustainable and holistic solutions.

Case Study 1: MAMTA

Enabling accessibility of resources to vulnerable populations

MAMTA Health Institute for Mother and Child, a public health organization, was started in 1990.^{cxc} The organisation's initial focus area was child health, but they later expanded their focus areas to address maternal health. Eventually, they identified adolescents and youth as a strategic population, and invested in their health and development as a stepping stone to create good human capital and better serve maternal and child health. This was later diversified to cover young people's sexual and reproductive health. Currently, their thematic areas include maternal and child health and nutrition, young people's reproductive and sexual health, communicable diseases and non-communicable diseases.

While the organisation has operated in Uttar Pradesh since 1998, they have a presence not only in 22 Indian states, but also South Asian countries like Indonesia and Cambodia, and African countries like Burundi.^{cxi} They have reached out to more South Asian countries through their international training programme on advocacy on youth-friendly health services and have engaged in capacity building of stakeholders in countries like Afghanistan, Sri Lanka and Laos.

While MAMTA's estimated impact is a population of 10 lakh people in the last three years alone, their biggest achievements include contributing to the development of state-level health policy, as well as the successful development and ongoing implementation of a model of youth friendly health services in two universities- Benares Hindu University (BHU) and King George's Medical University.

Since 1998, their operations in Uttar Pradesh have consisted of implementation, advocacy and research. Through this, they have cultivated a close relationship with the state government and are actively involved in conducting capacity-building programmes for Frontline Health Functionaries. On the ground, they also help the government

with family planning strategies and work with communities to form groups and link vulnerable populations to health services.

In terms of challenges, the sheer variation in health risks across UP's regions is one of the biggest. Although Faiyaz Akhtar, Deputy Director of MAMTA believes that awareness of health and nutrition, and their relationship with gender has increased alongside engagement of civil society organisations and inclusive delivery systems of health services, regional variations persist in the state.

From Akhtar's experience of working in the state, he characterizes the regional variations in Uttar Pradesh. Western Uttar Pradesh is relatively more industrialised with greater connectivity and standard of living. However, the adolescent population is at risk for HIV and STDs due to increased sexual experimentation.

In Central Uttar Pradesh, urban areas are advanced but rural areas are not well connected to resources. Gender concerns are similar as in other regions of the state, which has resulted in a high maternal and child health and nutrition burden.

Eastern Uttar Pradesh and Bundelkhand regions require the most attention. In Eastern Uttar Pradesh, trafficking, insensitivity to gender issues and poor health infrastructure means an increased need for capacity building, to make programmes more inclusive for marginalised communities.

Bundelkhand fares poorly in terms of indicators and resources and faces challenges of migration, drinking water and water for irrigation. According to Akhtar, this region needs attention in terms of human capital and resource development.

In overcoming these challenges, transforming awareness into action is key. To bridge the demand and supply gap of health services, the organisation engages with stakeholders and community members to develop linkages of health services through Accredited Social Health Activists (ASHAs). If the system is unable to deliver services to the most marginalised and vulnerable communities, MAMTA trains them on inclusive strategies, development of an inclusive plan, and allocation of resources. They also conduct inter-departmental convergence meetings, so that community challenges can be overcome.

The organisation's theory of change revolves around the creation of participatory development initiatives to ensure accessibility of resources to marginalized populations, which they achieve through community level strategies, evidence-generation strategies, evidence-based advocacy with government, and sharing their learnings.

MAMTA's close association and extensive collaboration with stakeholders such as the government presents its own challenges. According to Akhtar, one has to "prepare the environment for the exchange of ideas." Since these collaborations happen from Gram Pradhan through Health Ministry levels, an environment that facilitates exchange of ideas is essential for successful collaborative initiatives.

He also provides insight into effective positioning of plans and programmes. For ASHAs that are focused on delivering numerous ongoing programmes by the government, he believes an organization has to build their programme in a way that contributes to achieving the government's targets, rather than existing parallelly.

In Uttar Pradesh particularly, entry into the system is often opposed by some initial resistance and rigidity. However, on-ground efforts are in progress, and have been effective in tackling challenges of health services, according to Akhtar.

Moving forward, MAMTA is keen to partner with funders to ensure inclusive service delivery on the ground and engage with Panchayati Raj Institutions (PRIs), community leaders and beneficiaries to make them understand the relevance of health issues and connect them with the right services.

They are also looking to move into rare thematic areas like mental health and Non-Communicable diseases (NCDs), and are exploring avenues to partner with funding agencies who are interested in developing new strategies in these thematic areas.

Case Study 2: Association for Advocacy of Legal Initiatives (AALI)

Empowering Women through Legal Literacy

Association for Advocacy of Legal Initiatives is a women-led organisation formed in 1998 for the advancement and implementation of women's rights.^{cxcii} The organization has expanded over the years to reach 23 districts in Jharkhand and 56 in Uttar Pradesh. Apart from providing free legal aid to women, AALI also runs a resource centre to address advocacy needs where they conduct capacity building training in women's rights and gender-based violence for police officers, judicial officers, and private and government lawyers.^{cxci}

In the last four years, AALI has intervened in 2505 cases and provided legal counselling to 958 women. It has since expanded its capacity building reach by training 3,320 state and non-state stakeholders. The organisation also contributes to research and entrepreneurship of women. In Azamgarh, the organization helps minority women set up their own shops, and provides basic amenities like electricity, etc. for it. AALI has also published 11 reports and contributed to eight national research studies on women's right to choice and their voices.^{cxci} EdelGive supports AALI's programme to promote gender-based justice by empowering marginalised women, especially survivors of human rights violations.

According to Renu Mishra, Executive Director of AALI, the status of women in Uttar Pradesh is a great cause for concern. The data confirms her worries- 38,467 crimes against women were registered in UP—one every 15 minutes.^{cxci} The state is also characterized by low literacy and high population, which further compounds the poor gender outcomes.

The on-ground reality is even more challenging, in Mishra's experience. According to her, the state has high incidence of rapes and molestation, but police often refuse to file FIRs. Instead, they ask the victim inappropriate questions or accuse her of having had a prior relationship with the perpetrator. On the contrary, if a woman has gone with a man of her own accord, they file kidnapping and abduction charges against the man.

Further, young girls who are sexually harassed or molested cannot confide in their parents as it results in them taking the girl out of school or college and getting her married. Women who face domestic violence cannot return to their parental homes, and are often blamed if they do. Working women are often unaware of how much they earn, and all financial decisions are made by the man. Women are unable to pursue legal recourse as they are unaware of their rights, and the police station is not a safe space for them.

To this end, AALI's theory of change aims to empower women by educating them about their rights, and subsequently enabling them to become independent and take their own decisions. Legal literacy can also translate into increased awareness, mobility and confidence in decision-making. They do not charge a fee for the legal aid

they provide, and have not lost a single case till date. They also act as legal mentors for all government helplines in Uttar Pradesh.

In order to address the problems of law enforcement, AALI conducts training workshops for all stakeholders from police officials to judicial and implementation officers. Often, Mishra says, police and judicial officers are unaware of the law themselves, or have prejudices that prevent them from assisting women.

For AALI, collaboration mainly involves sensitivity training for various stakeholders, who may not always be willing to discuss women's rights. Police, judicial officers and even government lawyers are under the impression that women lie simply because they wear certain clothes, use smartphones, or have boyfriends. AALI has been trying to change this patriarchal mindset, and encourage implementation of existing laws to protect women.

In the future, AALI hopes to continue its efforts in creating awareness around women's legal rights, including property rights and marital rights. They also hope to train more officers and reach more government officials, ultimately building better relationships with them. They are also working on creating women-friendly police stations and officers to better serve them.

Case Study 3: MEDHA

Better jobs through better opportunities

Since its inception in 2011, MEDHA's work is centered around training young students, primarily between the ages of 17-22, and providing internship opportunities to increase job preparedness.^{CXCVI} In this period, they have worked with over 13,000 students across 65 educational institutions and 500 leading employers, and built Public-Private Partnerships with various departments within the Governments of Uttar Pradesh, Haryana, Bihar, and Meghalaya.^{CXCVII} With EdelGive's support, MEDHA has been able to train over 2,000 students in the last year.^{CXCVIII}

The organisation partners with the education system, either on an institution basis, or through relationships with the Departments of Higher Education, Technical Education, and Vocational Education to better prepare young people for jobs and livelihood. Their interventions are targeted at students attending public sector education – a degree college, polytechnic or an Industrial Training Institute (ITI).

MEDHA's courses are geared towards building basic life skills, and understanding individual strengths and weaknesses in areas of public speaking and communication, which would enhance their preparation for employment. This involves developing skills on CV writing, preparing for interviews, etc. They also conduct programmes on digital literacy and communication skills. MEDHA's role does not end at training, they also connect students to the job market primarily through internships and eventually, full time opportunities.

MEDHA's biggest challenge is social in nature. The prevailing patriarchal mindset in the state discourages women from entering the workforce, or greatly restricts the kind of jobs they take up. In terms of mobility, boys have more flexibility to migrate for jobs, while girls may have to work closer to home, or only in certain departments. According to Christopher Turillo, Co-founder of MEDHA, many young girls want a job just to delay marriage, and many are passionate about having a career despite family pressure to either apply for a government job or continue studies just until they are married.

In fact, a consistent outcome of MEDHA's work is the large-scale participation of young women. More than 65% of their total alumni, which is about 10,000 students, are young women. According to Turillo, a combination of factors have led to this – when they first approached educational institutions to allow them to conduct their programmes, the women's-only institutions initially agreed because these opportunities were rare. Without being conscious about driving the numbers of female participation, this has continued for the last eight years.

On the employment side, they have had to grapple with matching the aspirations of students with the availability of jobs. UP has a vibrant and fast-growing private sector, which is small scale and informal. Since MEDHA does not greatly focus on government jobs, encouraging students to consider jobs in the private sector when there aren't as many good opportunities in the sector remains a challenge. To resolve, they provide students with internships, which can be a low-risk way for both parties to understand each other's needs, according to Turillo.

MEDHA's theory of change is simplistic, yet effective. Better exposure and opportunities will lead to greater employment and livelihood, and overall increase in agency of students. While the infrastructure for education exists, students don't get the exposure, opportunities and environment to explore what they are passionate about. To create this environment, MEDHA conducts industry talks, where representatives of companies talk about different sectors and opportunities and facilitate internships, which provide opportunities for students to learn and explore. Ultimately, students gain more agency in their homes and communities because they have built confidence.

These strategies have seen great success. While female labour force participation in Uttar Pradesh is one of the lowest in the country (estimates put it between 12-15%), MEDHA's female participation rate is about 40%. On the income growth side, they have seen a 30% increase in income within the first two years on the job. Another success for MEDHA has come in the form of their strong alumni network. They have maintained a strong relationship with their alumni network and continue to set up services to support students well beyond their classroom training.

These successes would not be possible without collaboration, be it with the Education Department or institutions MEDHA works with. From its commencement, MEDHA has wanted to work within the education system to influence it, either through adoption of their curriculum adopted or training of placement officers to deliver their experiential learning. Over the last year, they have made significant progress on this front. They are working with the Department of Technical Education on a state-wide centralised placement cell model which will engage all polytechnics. Here, they will be instrumental in delivering career counselling, capacity building for faculty members, training for placement officers and managing the data of alumni.

Beyond the education system, they have worked with CSRs like Cognizant and Ambuja Cement on skilling and training programmes.

For MEDHA's members, indirect implementation and bureaucracy are their biggest challenges to effective collaboration. At an institutional level, some principals and faculty do not see the value of MEDHA's work.

In the future, MEDHA will continue to work with the education system. They also intend to aggressively pursue state-level partnerships with the Education Department, and government partnerships in order to be a knowledge partner. They plan to stay focused on this region of the country, but are open to collaborating with others in different parts of the country.

Case Study 4: Save the Children

Innovation through Partnerships

Save the Children, a global non-profit organization, has been active in Uttar Pradesh since 2011.^{ccix} Their programmes primarily focus on children under 5 years of age and children within the age of 28 days. Apart from this, they also conduct capacity building of frontline health workers, and rescue children at risk of trafficking.

Through their interventions, 7500 newborn babies were saved from 2013-17. They have also created a pool of 100 doctors and staff nurses trained in managing neonatal resuscitation, which has proven to be a great resource for the government. The organisation has managed to reach out to about 9 lakh children in 4 years.

For children under 28 years, the organisation worked with the National Health Mission and Director General of Family Welfare for over a period of four years to build skills of Frontline Health Workers like nurses and midwives on management of neo-natal resuscitation. In these four years, about 7500 lives were saved by the government health system. They have also worked closely with the government on the Shishu Suraksha Karyakram, a platform used by the government to save new-born lives and build the capacity of medical officers across 35 districts.

Apart from this, they conducted a campaign from 2013 to 2017 supported by Bill and Melinda Gates Foundation on building public awareness around saving new-born lives. Here, they worked with parliamentarians, people's representatives, government officers and civil society. The campaign aimed to convey the message of the government's work in saving new-borns and the way public appreciation could create a positive environment for this.

For children under 5 years of age, they have also worked with the support of the Dalai Lama Foundation through Integrated Child Development Services (ICDS) on ensuring nutritional superiority through a multi-sectoral approach. This approach looks at poor nutrition as relying on other factors like routine immunization, good sanitary practices, community management of acute malnutrition and referral of a child to nutrition rehabilitation healthcare.

In their operations, Save the Children has collaborated extensively with the government. They have worked with ICDS, the Health Department and Sanitation Department in one block of Varanasi district for about 4 years. Here, they identified Severe Acute Malnutrition (SAM) children and built a Standard Operational Procedure with the government on how to involve departments that are directly concerned, do frequent reviews and maintain a checklist to measure progress.

Thereafter, they have been involved in implementing a project to reduce mortality of children under 5 through a 7-point World Health Organisation (WHO) approach which involves preventive measures like immunisation, clean drinking water, sanitation facilities, nutrition, and clinical aspects like providing oral rehydration to children. Save the Children brings to this the creation of a strong community awareness and building sensitivity towards service providers to reach out to the community when these services are required. They successfully achieved this through various innovative ways- they worked with the Education Department to use games to teach children in the age group of 8 to 14 years why clean drinking water is necessary, what the advantages of handwashing and a clean toilet are, etc. so that the children would practice these and take the lessons back home. They also set up a non-emergency helpline where caregivers could seek advice from counsellors on how

to take care of their sick children. The programme is being conducted in four states, of which UP is one, and they have successfully reached out to 9 lakh children through it.

Save the Children's other thematic focus in UP is child protection. They work to identify children on railway platforms who are lost or being trafficked and counsel them with the help of the Child Welfare Committee of the government. In two years, about 1200 girls and boys were rescued and reunited with their parents. In the course of this programme, Save the Children worked closely with the Railway Protection Force, the Government Railway Police, the Child Welfare Committee, etc. to set up a network to counsel children and hold camps for them.

These effective operations are a result of a robust theory of change. According to Surojit Chatterji, General Manager State Programs, their theory of change has four elements- "Be the voice, be the innovator, and work on scale - and in doing these things, partnership is the centre of all objectives." True to this, all their projects are in collaboration with the government. However, the state presents its own challenges. According to Chatterji, UP's size presents an insurmountable issue. Despite this, the government and the National Health Mission have managed to reach almost all health facilities in the state, and do a sufficient amount of training with them.

These collaborations with the government are strategic partnerships where Save the Children approaches the government and offers their skills and specialisation to partner with the government on advocacy, media and on-ground work on its existing programmes.

The other level of their collaborations involve partnerships with civil society organisations. According to Chatterji, to take their interventions to a grassroot level, they have to engage with local organisations who have the skills and belong to a particular area. Through these partnerships, they are able to financially support these civil society organisations as well as reach out to families, sectors, blocks and districts.

Their biggest challenges in collaboration arise due to their interventions in backward districts. According to Chatterji, working with a community that hasn't experienced development but poverty for a long time, and getting them to change their behaviour is one of their biggest challenges. It is also the area where partnerships between the government and civil society are most required.

Moving forward, they have planned to scale up to 14 blocks in UP and reach out to 1 lakh children. Through their health and nutrition, child protection and education programmes, they also plan to work with the Education Dept with a focus on reducing female student dropouts and improving the quality of education.

Key Takeaways

1 **Uttar Pradesh has the highest number of MSMEs in the country and is home to a vibrant cross-section of artisans. However, casual labour continues to remain an area of struggle.**

- Uttar Pradesh is uniquely famous for product-specific traditional industrial hubs across districts like Varanasi (Banarasi silk sari), Bhadohi (carpet), Lucknow (chikan), Kanpur (leather goods), etc. and the state has the largest share of MSMEs in the country at 14.20%.^{cc}
- This is being leveraged by the state to drive the economy. The Government of Uttar Pradesh has set up the “One District, One Product” policy, which is aimed at promoting the state’s traditional industries.^{cci}
- However, there is a lack of quality in employment with 10.79% workers in Uttar Pradesh having a regular wage or salaried employment. This must be addressed on an urgent basis to limit out-migration from the state.^{ccii}

2 **Health and nutrition, and women empowerment continue to remain an area of struggle for the state.**

- **Health and Nutrition:** Compared to the rest of the nation, the state has poorest health indices in the form of high infant mortality rates (43 per 1,000 live births)^{cciii} and maternal mortality ratios (201 per 1,00,000 live births),^{cciv} a high burden of disease with nearly half the children stunted, and 40% children underweight.^{ccv} Only 51% children in the state are immunised, giving Uttar Pradesh rank 24 among 29 states.^{ccvi} Moving forward, there is a need for increased focus on the last-mile delivery of health service, especially in the Eastern part of the state.
- **Women empowerment:** Uttar Pradesh has the largest number of girls married between 10-19 years (2.1 million)^{ccvii} in India, and highest number of registered crimes against women.^{ccviii} Women in the state also struggle with unequal access to land rights. Traditional practices and social norms have kept them from owning land. The situation is particularly worse in the Western part of the state where Khap Panchayats and patriarchal mindsets limit the progress of women. There is a need to address this in a behavioural and community-oriented capacity to bring about lasting change.

3 **Progress has only been limited to the Western pockets of the state.** Historically, the Western region of the state has been highly developed, especially in respect of agricultural practices, as it has better availability of physical infrastructure and irrigation facilities. As such, the state of health, nutrition and education is also much better in the Western part of the state. Due to the scarcity of some essential natural resources and exposure to natural calamities, Southern and Eastern parts of the state are chronically backward. (Refer “The Story Behind: Gaps Explained”)

4 **Majority of the funding in the state is by the government with 53.83% of the total government funding directed towards development sector.** CSR funds supplement the government funding, but is limited and focused in western Uttar Pradesh with the poorer Eastern and Southern remaining ignored. Given the poor performance of the aspirational districts (Sonbhadra, Chitrakoot, Fatehpur, Chandauli, Sharashwati, Siddharthnagar, Balrampur, Bahraich) as compared to the rest of the country, there is a need to redirect and target funds to these districts.

5

Moving forward, there is a need to improve the implementation of policy. Our primary interviews with AALI and Medha show that the law needs to be more accessible to the community and the implementation of these laws need to be made stricter. There is also a great deal of bureaucracy involved in working with the government which needs to be addressed to enable effective collaborations and far-reaching changes.

Bibliography

- i. <http://udyogbandhu.com/topics.aspx?mid=About%20Udyog%20Bandhu>
- ii. https://rbidocs.rbi.org.in/rdocs/Publications/PDFs/OSF201718_FULL6EE17CFBD8004287A0CD4FDB0632AFE8.PDF
- iii. https://rbidocs.rbi.org.in/rdocs/Publications/PDFs/OSF201718_FULL6EE17CFBD8004287A0CD4FDB0632AFE8.PDF
- iv. National CSR Portal 2014-2017
- v. <https://csr.gov.in/CSR/pivot.php>
- vi. <http://up.gov.in/Social-Demography.pdf>
- vii. http://icrier.org/pdf/Working_Paper_335.pdf
- viii. <http://udyogbandhu.com/topics.aspx?mid=About%20Udyog%20Bandhu>
- ix. <https://dbtbbharat.gov.in/stateut?sid=OQ==>
- x. <http://up.nic.in/award/informatics-UP-january2015.pdf>
- xi. [http://www.udyogbandhu.com/DataFiles/CMS/file/Draft%20English%20version%20-%20Final%20\(11%20Dec_%202017\).pdf](http://www.udyogbandhu.com/DataFiles/CMS/file/Draft%20English%20version%20-%20Final%20(11%20Dec_%202017).pdf)
- xii. http://www.udyogbandhu.com/DataFiles/CMS/file/Uttar_Pradesh_Solar_Energy_Policy-2017_English_.pdf
- xiii. <https://www.prsindia.org/parliamenttrack/budgets/uttar-pradesh-budget-analysis-2018-19>
- xiv. <https://www.prsindia.org/parliamenttrack/budgets/uttar-pradesh-budget-analysis-2018-19>
- xv. <http://www.prsindia.org/parliamenttrack/budgets/uttar-pradesh-budget-analysis-2018-19>
- xvi. <http://www.prsindia.org/parliamenttrack/budgets/uttar-pradesh-budget-analysis-2018-19>
- xvii. https://www.epw.in/system/files/pdf/2016_51/53/SA_LI_53_311216_UP_Spl_Ravi%20Srivastava%2C%20Rahul%20Ranjan.pdf
- xviii. https://www.epw.in/system/files/pdf/2016_51/53/SA_LI_53_311216_UP_Spl_Ravi%20Srivastava%2C%20Rahul%20Ranjan.pdf
- xix. https://www.epw.in/system/files/pdf/2016_51/53/SA_LI_53_311216_UP_Spl_Ravi%20Srivastava%2C%20Rahul%20Ranjan.pdf
- xx. <https://msme.gov.in/sites/default/files/MSME-AR-2017-18-Eng.pdf>
- xxi. https://www.epw.in/system/files/pdf/2016_51/53/SA_LI_53_311216_UP_Spl_Ravi%20Srivastava%2C%20Rahul%20Ranjan.pdf
- xxii. http://odopup.in/pdf/20180305_ODOP-English.pdf?cd=MQAxADYA
- xxiii. https://www.epw.in/system/files/pdf/2016_51/53/SA_LI_53_311216_UP_Spl_Ravi%20Srivastava%2C%20Rahul%20Ranjan.pdf
- xxiv. https://www.epw.in/system/files/pdf/2016_51/53/SA_LI_53_311216_UP_Spl_Ravi%20Srivastava%2C%20Rahul%20Ranjan.pdf
- xxv. https://www.ilo.org/wcmsp5/groups/public/---asia/---ro-bangkok/---sro-new_delhi/documents/publication/wcms_614693.pdf
- xxvi. https://cse.azimpremjiuniversity.edu.in/wp-content/uploads/2018/12/State_of_Working_India_2018.pdf
- xxvii. <http://archive.indiaspend.com/cover-story/uttar-pradesh-more-children-than-people-in-spain-but-fewest-teachers-low-outcomes-81246>
- xxviii. <http://archive.indiaspend.com/cover-story/uttar-pradesh-more-children-than-people-in-spain-but-fewest-teachers-low-outcomes-81246>
- xxix. <https://scroll.in/article/825966/uttar-pradesh-has-indias-largest-population-of-children-but-least-teachers-per-student>
- xxx. <https://scroll.in/article/825966/uttar-pradesh-has-indias-largest-population-of-children-but-least-teachers-per-student>
- xxxi. <https://www.epw.in/node/146728/pdf>
- xxxii. https://www.mckinsey.com/~/media/McKinsey/Featured%20Insights/Employment%20and%20Growth/The%20power%20of%20parity%20Advancing%20womens%20equality%20in%20India/MGI%20India%20parity_Full%20report_November%202015.ashx
- xxxiii. <http://niti.gov.in/content/infant-mortality-rate-imr-1000-live-births>
- xxxiv. <http://niti.gov.in/content/maternal-mortality-ratio-mmr-100000-live-births>
- xxxv. NFHS4
- xxxvi. <http://archive.indiaspend.com/cover-story/indias-13-million-child-brides-their-6-million-children-71955>
- xxxvii. <http://archive.indiaspend.com/cover-story/indias-13-million-child-brides-their-6-million-children-71955>
- xxxviii. <https://www.livemint.com/Opinion/5S922WhXIWAkdQOYFb84CK/What-UP-tells-us-about-health-infrastructure.html>
- xxxix. https://www.downtoearth.org.in/dte-infographics/61322-not_enough_doctors.html
- xl. https://www.epw.in/system/files/pdf/2018_53/45/SA_LI_45_171118_C%20S%20Verma_Shivani%20Singh_Alok%20Ranjan_T%20Sundararaman.pdf
- xli. <http://archive.indiaspend.com/cover-story/uttar-pradesh-bihar-rajasthan-worst-states-for-women-jk-catching-up-46668>
- xlii. <https://www.landesia.org/what-we-do/india/landesa-in-uttar-pradesh/>
- xliii. <https://factly.in/representation-to-participation-women-in-panchayat-raj-institutions-state-assemblies/>
- xliv. https://www.mckinsey.com/~/media/McKinsey/Featured%20Insights/Employment%20and%20Growth/The%20power%20of%20parity%20Advancing%20womens%20equality%20in%20India/MGI%20India%20parity_Full%20report_November%202015.ashx
- xlv. <https://archive.indiaspend.com/cover-story/education-failure-leading-reason-for-up-job-woes-isnt-an-election-issue-97010>
- xlvi. <http://www.ncpcr.gov.in/showfile.php?lid=998>
- xlvii. <https://www.indiaspend.com/28-rise-in-communal-incidents-under-nda-short-of-up-a-high-58126/>
- xlviii. <https://www.indiaspend.com/28-rise-in-communal-incidents-under-nda-short-of-up-a-high-58126/>
- xliv. <https://pencil.gov.in/uploads/ppt/PPT%20for%2026th%20Sept%202017.pdf>
- i. <https://pencil.gov.in/uploads/ppt/PPT%20for%2026th%20Sept%202017.pdf>
- li. <https://www.cry.org/resources/pdf/CRY-CARE-report-on-Child-Labour-2014.pdf>
- lii. <http://udise.in/src.htm>
- liiii. <http://udise.in/Downloads/Publications/Documents/U-DISE-SchoolEducationInIndia-2015-16.pdf>
- liv. <http://mhrd.gov.in/NAS/>
- lv. <http://udise.in/src.htm>
- lvi. <http://udise.in/src.htm>
- lvii. <http://indiafacts.in/india-census-2011/literacy-rate-india-2011/>
- lviii. <http://documents.worldbank.org/curated/en/802311468194960712/pdf/105883-BRI-P157572-ADD-SERIES-India-state-briefs-PUBLIC-UttarPradesh-Social.pdf>
- lix. <http://niti.gov.in/content/immunisation>

- lx. http://www.who.int/hrh/resources/16058health_workforce_India.pdf
- lxi. <http://niti.gov.in/content/infant-mortality-rate-imr-1000-live-births>
- lxii. <http://niti.gov.in/content/life-expectancy>
- lxiii. <http://niti.gov.in/content/maternal-mortality-ratio-mmr-100000-live-births>
- lxiv. NFHS4
- lxv. <https://www.indiaspend.com/in-a-up-district-death-from-hunger-as-governance-social-security-collapse/>
- lxvi. http://labourbureaunew.gov.in/UserContent/EUS_5th_1.pdf
- lxvii. <https://www.indiastat.com/table/labourandworkforce/380987/workparticipation/299/1093383/data.aspx>
- lxviii. <http://www.esopb.gov.in/Static/PDF/GSDP/Statewise-Data/StateWiseData.pdf>
- lxix. <http://www.esopb.gov.in/Static/PDF/GSDP/Statewise-Data/StateWiseData.pdf>
- lxx. http://labourbureaunew.gov.in/UserContent/EUS_5th_1.pdf
- lxxi. https://www.ilo.org/wcmsp5/groups/public/---asia/---ro-bangkok/---sro-new_delhi/documents/publication/wcms_614693.pdf
- lxxii. <http://documents.worldbank.org/curated/en/802311468194960712/pdf/105883-BRI-P157572-ADD-SERIES-India-state-briefs-PUBLIC-UttarPradesh-Social.pdf>
- lxxiii. <http://www.niti.gov.in/content/nutrition-charts>
- lxxiv. <http://www.niti.gov.in/content/nutrition-charts>
- lxxv. <http://www.niti.gov.in/content/nutrition-charts>
- lxxvi. <http://www.niti.gov.in/content/nutrition-charts>
- lxxvii. <http://www.niti.gov.in/content/nutrition-charts>
- lxxviii. NFHS4
- lxxix. <https://www.indiaspend.com/in-a-up-district-death-from-hunger-as-governance-social-security-collapse/>
- lxxx. http://mospi.nic.in/sites/default/files/publication_reports/nss_rep_556_14aug14.pdf
- lxxxi. http://mospi.nic.in/sites/default/files/publication_reports/nss_rep_556_14aug14.pdf
- lxxxii. <https://data.gov.in/catalog/state-wise-percentage-schools-having-hand-wash-facility-dise-flash-statistics>
- lxxxiii. <http://sbm.gov.in/sbmdashboard/ODF.aspx>
- lxxxiv. Census 2011
- lxxxv. NFHS4
- lxxxvi. <http://documents.worldbank.org/curated/en/802311468194960712/pdf/105883-BRI-P157572-ADD-SERIES-India-state-briefs-PUBLIC-UttarPradesh-Social.pdf>
- lxxxvii. <http://ncrb.gov.in/StatPublications/CII/CII2016/pdfs/Crime%20Statistics%20-%202016.pdf>
- lxxxviii. <http://ncrb.gov.in/StatPublications/CII/CII2016/pdfs/Crime%20Statistics%20-%202016.pdf>
- lxxxix. NFHS 4
- xc. NFHS 4
- xc. NFHS4
- xcii. NFHS 4
- xciii. <https://www.census2011.co.in/scheduled-castes.php>
- xciv. <https://www.census2011.co.in/census/state/uttar-pradesh.html>
- xcv. <http://fsi.nic.in/isfr2017/isfr-forest-cover-2017.pdf>
- xcvi. http://www.indiaenvironmentportal.org.in/files/file/Capacity%20of%20Sewage%20Treatment%20Plants_0.pdf
- xcvii. http://mospi.nic.in/sites/default/files/publication_reports/Swachhta_Status_Report%202016_17apr17.pdf
- xcviii. <https://data.gov.in/catalog/city-and-location-wise-ambient-air-quality>
- xcix. http://www.mospi.gov.in/sites/default/files/publication_reports/Energy_Statistics_2018.pdf
- c. <http://www.womenonwings.com/partner/philips-lighting-india/>
- ci. <https://www.worldbank.org/en/news/pressrelease/2018/06/28/climate-change-depress-living-standards-india-says-new-world-bank-report>
- cii. http://censusindia.gov.in/Tables_Published/SCST/dh_st_up.pdf
- ciiii. <http://niti.gov.in/writereaddata/files/FirstDeltaRanking-May2018-AspirationalRanking.pdf>
- civ. <https://www.livemint.com/Politics/2mYGqXDSb37bediFmGUvL/Indias-BIMARU-states-developing-but-not-catching-up.html>
- cv. <http://documents.worldbank.org/curated/en/187721467995647501/pdf/105884-BRI-P157572-ADD-SERIES-India-state-briefs-PUBLIC-UttarPradesh-Proverty.pdf>
- cv. <https://www.emeraldinsight.com/doi/abs/10.1108/IJSE-05-2016-0135>
- cvii. https://www.epw.in/system/files/pdf/2009_44/26-
- cviii. https://www.epw.in/system/files/pdf/2009_44/26-
- cix. <https://www.emeraldinsight.com/doi/abs/10.1108/IJSE-05-2016-0135>
- cx. <https://scroll.in/article/825780/bihar-uttar-pradesh-rajasthan-and-madhya-pradesh-have-worst-literacy-rates-school-outcomes>
- cx. https://www.academia.edu/14730680/Growing_Regional_Disparity_in_Uttar_Pradesh_Inter-District_Analysis
- cxii. https://www.academia.edu/14730680/Growing_Regional_Disparity_in_Uttar_Pradesh_Inter-District_Analysis
- cxiii. https://www.researchgate.net/publication/305300866_Literacy_Progress_in_Uttar_Pradesh_A_Districts_Level_Analysis
- cxiv. <https://files.eric.ed.gov/fulltext/EJ1081223.pdf>
- cxv. <https://www.bloombergquint.com/politics/ups-health-variations-from-worse-than-haiti-to-better-than-india>
- cxvi. https://www.business-standard.com/article/current-affairs/health-data-variations-show-why-up-s-health-programme-needs-overhaul-117020900173_1.html
- cxvii. http://www.nutritionfoundationofindia.org/pdfs/BulletinArticle/Pages_from_nfi_01_01_2.pdf
- cxviii. http://www.nutritionfoundationofindia.org/pdfs/BulletinArticle/Pages_from_nfi_01_01_2.pdf
- cxix. <https://www.jnu.ac.in/sites/default/files/thmfnsl.pdf>
- cx. <https://scroll.in/article/884644/ups-musahars-face-such-intense-discrimination-that-even-healthcare-is-denied-to-them>
- cx. <https://www.indiaspend.com/in-a-up-district-death-from-hunger-as-governance-social-security-collapse/>

- cxix. <https://www.indiastat.com/table/labourandworkforce/380987/workparticipation/299/1093383/data.aspx>
- cxix. https://www.indiastat.com/SOCIO_PDF/118/fulltext.pdf
- cxix. <https://www.thequint.com/voices/opinion/maternity-rights-in-up-2>
- cxix. https://cag.gov.in/sites/default/files/audit_report_files/Uttar_Pradesh_Performance_Audit_on_Empowerment_of_Women_Report_3_2016.pdf.pdf
- cxix. <https://www.hindustantimes.com/india-news/ht-spotlight-how-new-money-patriarchy-is-pushing-up-rapes-in-wild-west-of-up/story-Uuz6SpNgJXH83PYqrnNzWM.html>
- cxix. <http://www.publishingindia.com/GetBrochure.aspx?query=UERGQnJvY2h1cmVzfC8yMzUyLnBkZnVwMjM1Mi5wZGY=>
- cxix. https://rbidocs.rbi.org.in/rdocs/Publications/PDFs/0SF201718_FULL6EE17CFBD8004287A0CD4FDB0632AFE8.PDF
- cxix. https://rbidocs.rbi.org.in/rdocs/Publications/PDFs/0SF201718_FULL6EE17CFBD8004287A0CD4FDB0632AFE8.PDF
- cxix. https://rbidocs.rbi.org.in/rdocs/Publications/PDFs/0SF2016_12051728F3E926CFFB4520A027AC753ACF469A.PDF
- cxix. <https://www.prsindia.org/parliamenttrack/budgets/uttar-pradesh-budget-analysis-2018-19>
- cxix. <https://csr.gov.in/CSR/pivot.php>
- cxix. <https://csr.gov.in/CSR/pivot.php>
- cxix. <http://www.azimpremjiphilanthropicinitiatives.org/who-we-work-with>
- cxix. <http://arghyam.org/focus-areas/>
- cxix. <http://centralsquarefoundation.org/letter/2016-year-education/>
- cxix. <https://www.vccircle.com/bharti-family-pledges-1-bn-for-philanthropy/>
- cxix. <http://www.dlf.in/foundation-overview.aspx>
- cxix. <https://www.csvision.in/dlf-foundation-installed-digital-classrooms-in-government-schools-in-noida/>
- cxix. <http://projects.worldbank.org/P146936?lang=en>
- cxix. <http://projects.worldbank.org/P122770/uttar-pradesh-water-sector-restructuring-project-phase-2?lang=en&tab=overview>
- cxix. <http://projects.worldbank.org/P100304/second-uttar-pradesh-health-systems-strengthening-project-uphssp?lang=en&tab=overview>
- cxix. https://www.unicef.org/about/annualreport/files/India_2016_COAR.pdf
- cxix. https://www.unicef.org/about/annualreport/files/India_2016_COAR.pdf
- cxix. https://www.unicef.org/about/annualreport/files/India_2017_COAR.pdf
- cxix. <https://www.adb.org/projects/43574-025/main#project-pds>
- cxix. <https://www.adb.org/projects/52116-001/main#project-pds>
- cxix. https://elplaw.in/wp-content/uploads/2019/02/Neev-Fund-backs-Lucknow-based-Mahendra-Educational_-VCCircle.pdf
- cxix. <http://www.sustainabilityoutlook.in/news/sunsource-energy-plans-build-200-mw-solar-park-762289>
- cl. <https://thpindia.org/2011/03/08/rajasthan-brief-profile/>
- cli. http://labourbureau.gov.in/UserContent/EUS_5th_1.pdf
- cli. <http://archive.indiaspend.com/cover-story/uttar-pradesh-bihar-rajasthan-worst-states-for-women-jk-catching-up-46668>
- cli. https://www.mckinsey.com/~media/McKinsey/Featured%20Insights/Employment%20and%20Growth/The%20power%20of%20parity%20Advancing%20womens%20equality%20in%20India/MGI%20India%20parity_Full%20report_November%202015.ashx
- cliv. <http://humsafarindia.org/our-work-2/engaging-communities-to-challenge-vaw/>
- clv. <http://humsafarindia.org/our-work-2/engaging-communities-to-challenge-vaw/>
- clvi. https://cag.gov.in/sites/default/files/audit_report_files/Uttar_Pradesh_Performance_Audit_on_Empowerment_of_Women_Report_3_2016.pdf.pdf
- clvii. <http://mysetu.org/project/tailoring-skills-to-empower-women-project-uday/>
- clviii. http://www.undp.org/content/dam/india/docs/from_reservation_to_participation.pdf
- clix. http://www.undp.org/content/dam/india/docs/national_workshop_capacity_building_of_elected_women_representatives_and_functionaries_of_pris%20_report.pdf
- clx. Ibid
- clxi. Gera, R., Muthusamy, N., Bahulekar, A., Sharma, A., Singh, P., Sekhar, A., & Singh, V. (2015). An in-depth assessment of India's Mother and Child Tracking System (MCTS) in Rajasthan and Uttar Pradesh. BMC Health Services Research, 15(1).doi:10.1186/s12913-015-0920-2
- clxii. <https://gadgets.ndtv.com/apps/news/mobile-health-solution-msehat-launched-in-uttar-pradesh-751890>
- clxiii. <http://www.in.undp.org/content/dam/india/docs/poverty/Uttar%20Pradesh%20State%20Immuneization%20Factsheet.pdf>
- clxiv. <https://www.livemint.com/Opinion/5S922WhXIWAkdQOYFb84CK/What-UP-tells-us-about-health-infrastructure.html>
- clxv. <https://www.hcl.com/project-samuday>
- clxvi. Singh, A., Park, A., & Dercon, S. (2014). School Meals as a Safety Net: An Evaluation of the Midday Meal Scheme in India. Economic Development and Cultural Change, 62(2), 275–306.doi:10.1086/674097
- clxvii. <https://uttarpradesh.akshayapatra.org/our-work>
- clxviii. <https://scroll.in/article/825966/uttar-pradesh-has-indias-largest-population-of-children-but-least-teachers-per-student>
- clxix. <https://www.epw.in/node/146728/pdf>
- clxx. <https://countercurrents.org/2018/11/19/educational-innovations-through-effective-governance-would-be-key-to-sustainable-development-goals/>
- clxxi. ore than 2 lakh students have been introduced to modern learning through this initiative.
- clxxii. <http://enhfoundation.in/our-current-activities/>
- clxxiii. http://mhrd.gov.in/sites/upload_files/mhrd/files/upload_document/Concept%20note%20on%20Community%20Participation.pdf
- clxxiv. http://seshagun.nic.in/docs/ToI_22_08.pdf
- clxxv. https://www.epw.in/system/files/pdf/2016_51/53/SA_LI_53_311216_UP_Spl_Ravi%20Srivastava%2C%20Rahul%20Ranjan.pdf
- clxxvi. http://icrier.org/pdf/Working_Paper_335.pdf
- clxxvii. <http://agritech.tnau.ac.in/ta/pdf/recent%20updates,banking.pdf>
- clxxviii. <http://agritech.tnau.ac.in/ta/pdf/recent%20updates,banking.pdf>
- clxxix. <http://www.tatatrusts.org/section/inside/Eastern-Uttar-Pradesh-Programme>

- clxxx. <http://www.tatatrusts.org/section/inside/Eastern-Uttar-Pradesh-Programme>
- clxxxi. https://cse.azimpremjiuniversity.edu.in/wp-content/uploads/2018/12/State_of_Working_India_2018.pdf
- clxxxii. <https://milaanfoundation.org/purpose/>
- clxxxiii. <https://milaanfoundation.org/purpose/>
- clxxxiv. <http://www.in.undp.org/content/india/en/home/operations/projects/closed/strengthening-women-s-social--economic-and-political-empowerment.html>
- clxxxv. https://www.researchgate.net/profile/Alok_Ranjan4/publication/314237868_Healthcare_Consumption_in_Uttar_Pradesh_Iniquitous_Growth_and_the_Social_Factors_Contributing_to_Impoverishment/links/5a22c9574585155dd41c86d4/Healthcare-Consumption-in-Uttar-Pradesh-Iniquitous-Growth-and-the-Social-Factors-Contributing-to-Impoverishment.pdf
- clxxxvi. <https://www.oxfamindia.org/blog/lesson-education-uttar-pradesh>
- clxxxvii. <http://agritech.tnau.ac.in/ta/pdf/recent%20updates,banking.pdf>
- clxxxviii. https://cag.gov.in/sites/default/files/audit_report_files/Uttar_Pradesh_Performance_Audit_on_Empowerment_of_Women__Report_3_2016.pdf.pdf
- clxxxix. http://mhrd.gov.in/sites/upload_files/mhrd/files/upload_document/Concept%20note%20on%20Community%20Participation.pdf
- cxc. Gera, R., Muthusamy, N., Bahulekar, A., Sharma, A., Singh, P., Sekhar, A., & Singh, V. (2015). An in-depth assessment of India's Mother and Child Tracking System (MCTS) in Rajasthan and Uttar Pradesh. BMC Health Services Research, 15(1). doi:10.1186/s12913-015-0920-2
- cxc. http://mamta-himc.org/index.php/our_journey
- cxcii. http://mamta-himc.org/index.php/our_reach
- cxciii. <http://aalilegal.org/about/history/>
- cxciv. <http://aalilegal.org/what-we-do/resource-center/>
- cxcv. <http://aalilegal.org/aalis-publications/>
- cxcvi. <https://archive.indiaspend.com/cover-story/uttar-pradesh-bihar-rajasthan-worst-states-for-women-jk-catching-up-46668>
- cxcvii. <http://medha.org.in/about/>
- cxcviii. <http://medha.org.in/about/>
- cxcix. <https://edelgive.org/documents/251134/268218/NGO+Diary+2017-18.pdf>
- cc. <https://www.savethechildren.in/what-we-do/health-and-nutrition>
- cci. <https://msme.gov.in/sites/default/files/MSME-AR-2017-18-Eng.pdf>
- ccii. http://odopup.in/pdf/20180305_ODOP-English.pdf?cd=MQAxADYA
- cciii. https://www.epw.in/system/files/pdf/2016_51/53/SA_LI_53_311216_UP_Spl_Ravi%20Srivastava%2C%20Rahul%20Ranjan.pdf
- cciv. <http://niti.gov.in/content/infant-mortalityncr-rate-imr-1000-live-births>
- ccv. <http://niti.gov.in/content/maternal-mortality-ratio-mmr-100000-live-births>
- ccvi. NFHS4
- ccvii. NFHS4
- ccviii. <http://archive.indiaspend.com/cover-story/uttar-pradesh-bihar-rajasthan-worst-states-for-women-jk-catching-up-46668>
- ccix. <http://ncrb.gov.in/StatPublications/CII/CII2016/pdfs/Crime%20Statistics%20-%202016.pdf>

Key Abbreviations

ANMs	Auxiliary Nurse Midwifery
BMI	Body Mass Index
CHC	Community Health Centre
CSR	Corporate Social Responsibility
DBT	Direct Benefit Transfer
EoDB	Ease of Doing Business
ESDM	Electronics System Design and Manufacturing
FHWs	Frontline Health Workers
GSDP	Gross State Domestic Product
HIS	Health Information Systems
ICT	Information and Communications Technology
IMR	Infant Mortality Rate
INR	Indian National Rupee
IT	Information Technology
PTR	Pupil Teacher Ratio
MMR	Maternal Mortality Rate
MT/day	Metric Tonne per Day
MLD	Millions Of Liter Per Day
MSME	Micro, Small and Medium Enterprises
MW	Mega Watt
NMR	Neonatal Mortality Rate
OBC	Other Backward Classes
PHC	Primary Healthcare Centre
RTE	Right to Education
SC	Scheduled Caste
ST	Scheduled Tribe
WASH	Water, Sanitation and Hygiene
UNDP	United Nations Development Programme
UNICEF	United Nations International Children's, Emergency Fund.
UP	Uttar Pradesh
USD	US Dollar

Appendix

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| 1. | Sharanpur | 36. | Basti |
| 2. | Muzaffernagar | 37. | Santkabir Nagar |
| 3. | Bijnor | 38. | Gorakhpur |
| 4. | Baghpat | 39. | Deoria |
| 5. | Meerut | 40. | Etawah |
| 6. | Jyotibha Phule Nagar | 41. | Auraiya |
| 7. | Moradabad | 42. | Kanpur Rural |
| 8. | Rampur | 43. | Kanpur Urban |
| 9. | Ghaziabad | 44. | Unnao |
| 10. | Gautam Budh Nagar | 45. | Lucknow |
| 11. | Bulandshahar | 46. | Raibareilly |
| 12. | Budaun | 47. | Sultanpur |
| 13. | Bareilly | 48. | Faziabad |
| 14. | Pilibhit | 49. | Ambedkar Nagar |
| 15. | Aligarh | 50. | Azamgarh |
| 16. | Mathura | 51. | Mau |
| 17. | Mahamaya Nagar | 52. | Ballia |
| 18. | Etah | 53. | Jalaun |
| 19. | Shajahanpur | 54. | Hamirpur |
| 20. | Lakhimpur | 55. | Fatehpur |
| 21. | Bahraich | 56. | Pratapgarh |
| 22. | Shravasti | 57. | Jaunpur |
| 23. | Balrampur | 58. | Ghazipur |
| 24. | Siddhartnagar | 59. | Jhansi |
| 25. | Maharajganj | 60. | Mahoba |
| 26. | Kushinagar | 61. | Bandi |
| 27. | Agra | 62. | Chitrakoot |
| 28. | Firozabad | 63. | Kaushambhi |
| 29. | Mainpuri | 64. | Allahabad |
| 30. | Farrukhabad | 65. | Sant Ravidas Nagar |
| 31. | Kannauj | 66. | Varanasi |
| 32. | Hardoi | 67. | Chandauli |
| 33. | Sitapur | 68. | Mirzapur |
| 34. | Barabanki | 69. | Lalitpur |
| 35. | Gonda | 70. | Sonbhadra |

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More at:

<https://www.gatesfoundation.org/Where-We-Work/India-Office>

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