



Child In Need Institute (CINI)

Child Welfare and Development

October 23, 2006

For the Cause of Malnourished Poor Children and Women

Recommendation: Donate
Rating: 25/30 (Good)
Revenue: Rs.192,204,431 (USD
4,243,392) – FY 2005.

*Sustainable Development in
Health, Nutrition and
Education for the child,
adolescent and woman in
need*

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Child In Need Institute (CINI) works for the sustainable development of severely malnourished children and their education. CINI also serves the causes of poor women and adolescents.

- **Wide Network and Out Reach**

CINI works for the upliftment of malnourished children in India's poor neighborhoods. It has reached more than 800,000 people in urban and rural areas around Kolkata, India.

- **Excellent Management**

We are impressed with the calibre of CINI's management team. The organization's senior managers hold advanced degrees in medicine and social sciences, and also bring the benefit of professional experience to their work for the cause of poor children and people in Kolkata, India.

- **Efficient Resource Allocation**

CINI's system of resource allocation is very good. The organization spends 80% of its funds on its projects and its mission. The remaining 20% is used to maintain overheads.

- **Availability of Financial Information**

CINI provides public access to its financial statements and has a fair system of displaying its financial information, which underscores its commitment to fair and transparent financial dealings.

- **Access of Information to Public**

In many cases, CINI has provided details about the people and children for whom the organization has worked. We believe that this helps keep donors aware of CINI's use of their funds, and hence provides more transparency.

Mission

CINI is committed to the sustainable development and improved health, nutrition and education of children, adolescents and women in need. CINI's programs aim to: attain a good and suitable nutrition status for poor children; involve the community in taking positive steps toward better health, in order to achieve sustainable change; and work as an advocate and intermediary between the local government and the State Government's health system. We believe that CINI is furthering its mission on all fronts, as reflected by its reach to about 800,000 people in rural as well as urban regions in India. To address different problems in various segments, CINI has come up with various thematic divisions at national as well as international levels.

Malnutrition is a multifaceted problem which still exists even after 58 years of independence

Environment

In India, malnutrition or under nutrition has remained a problem despite 58 years of independence. Fortunately, CINI recognized this problem back in 1974. At that time, a high level of malnutrition was prevalent among children in Kolkata. Malnutrition was followed by the incidences of outburst of diarrhea and chest infection in children in the age group of 0 to 2 years. CINI was founded on the premise that the elimination of the malnutrition problem would help in the overall development of children, and consequently bolster the foundation of a strong nation. Several initiatives at the national level have helped address the problem of severe malnutrition and the Infant Mortality Rate (IMR) has come down from 146 in 1951-61 to 67.6 in 1999*. However, there is still much to be done to combat malnutrition in India. CINI is focusing its endeavours on this cause, and we believe that CINI is making significant progress in its mission to build sustainable development and improve the health, nutrition and education of children. CINI's Nutrition Rehabilitation Center (NRC) and Emergency Ward have admitted many malnourished children along with their mothers. A graphical representation shows the root causes for the number of children (in the age group of 0-11 months) admitted in NRC and Emergency Ward during of January–December 2005.

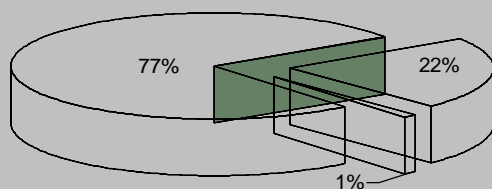
History of Organization

CINI is a leading Mother Non Government Organization (MNGO) of India founded in Kolkata, India in 1974. CINI continues to focus its efforts on the cause of poor women and malnourished children. CINI came into existence as a result of the endeavours of Dr. Samir Chaudhuri, Father John Henrichs, and Sister Pauline Prince. CINI recognized the issue of malnutrition as a multi-faceted problem, and concentrated its initial programs on the elimination of malnutrition in the context of sustainable development. CINI first began addressing this cause in 1974 with a Saturday clinic at the Loreto Convent at Thakurpukur, Kolkata. The clinic gained popularity and became a success in terms of providing health treatment to malnourished children below 5 years. The major focus of the program was to create nutritional awareness among the masses.

Business Model

CINI's average revenue growth during the period from 2003 to 2005 was 39.46%. The main sources of revenue were: grants from foreign contributions and non-foreign contributions; donations from foreign contributions as well as non-foreign contributions, and other Incomes (income from interest etc.) from foreign contributions and non-foreign contributions. Foreign contributions were CINI's major source of revenue, as seen in the chart below. Interestingly in 2005, donations and other income constituted 100% foreign contribution.

With a sustainable revenue income CINI can carry on its mission of helping malnourished and poor children of slums



- International Contributions
- Indian Contributions
- Fund Raising

	March 31, 2005	March 31, 2004	March 31, 2003
Revenue (INR)	192,204,000	104,231,000	97,999,000
Revenue Growth	0.844%	0.064%	--

Our Rating

Our rating gives CINI an overall score of 25 on a scale of 30. The highest score is in the category of Resource Allocation. It allocates 80% of funds for projects and 20% for its own management and expenditure.

Criteria	Score	Range
Disclosure of Information/Transparency	5	1-5
Clear Strategy	4	1-5
Execution Against Strategy	3	1-5
Resource Allocation	5	1-5
Management Quality (Experience & Qualification)	5	1-5
Ethics	3	1-5

Operational Assessment

Disclosure/Transparency

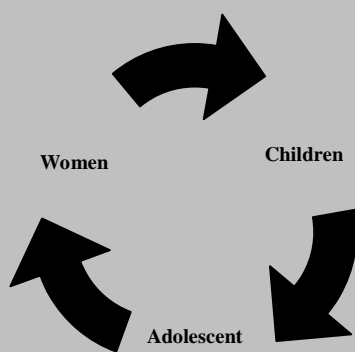
CINI evaluates its internal work and projects on an ongoing basis, in order to keep them rectified through mid-course reviews. It also provides the relevant information to donors about the progress of the project in order to keep its dealings fair in all terms.

Clear Strategy

CINI promotes the spirit of learning through the process of decentralization, which allowed the smaller units of CINI to participate in the decision making process. We believe that CINI's decentralized management philosophy encourages lateral coordination and relationships, which in turn helps to maintain better coordination among the various units of the organization.

Execution on Strategy

CINI closely examines its projects and programs, and ensures the involvement of all stake holders. The layout of a program is first prepared and then tested at ground levels with the community, field teams and professionals. CINI works to accomplish its objective through the Life Cycle Approach (LCA) strategy whereby the health, nutrition and education services are made certain or sure during the critical period of the human life cycle such as pregnancy, the first two years of childhood and adolescence. LCA can be summarized by the diagram on the left-hand side:



The LCA intervention aims to crack the intergenerational cycle of poverty, malnutrition and ill health. Specific goals include reducing the incidence of underweight infant births and improving awareness of nutrition and sexual health issues among adolescents. HIV/AIDS intervention, which is a burning issue at the present time, is also being addressed in the LCA. The concept of LCA has received a boost with its involvement in several innovative initiatives supported by international bodies such as the Centers for Disease Control and Prevention (CDC) Atlanta, USA, and Department for International Development (DFID), UK.

Resource Allocation

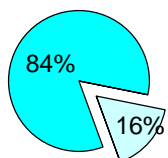
CINI generated total revenue of Rs. 229,121,074 (USD 5,041,932) in 2005, of which 83.65% was contributed through donations and grants and rest 16.34% was from other receipts such as interest and dividend, service charges and other miscellaneous receipts. Foreign donations constitute a major share of revenue for CINI. This not only shows that CINI is able to raise funds and grants from foreign sources, but that it can also generate a sustained revenue stream to support the execution of its programs.

CINI had a total expenditure of Rs. 211,978,775 (USD 4,670,865), of which 80% was spent on program costs and the remaining 20% covered administrative costs. Both program costs and administrative costs are comprised of revenue expenses and capital expenses. The difference of revenue and expenditure generated a surplus of Rs. 17,142,298.58 (USD 377,724). The expenditure structure shows that CINI spends a large amount toward the cause it is working for, with enough surplus remaining to meet any emergency funding. The surplus amount can also be used to start a new program without waiting unnecessarily for a grant.

Quality of Management

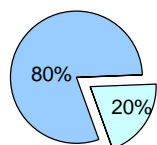
The quality of management at CINI is reflected by the background of the people in the governing body. The governing body consists of highly qualified people. Their professional background helps them to prepare better plans and programs. This is in fact reflected in the initiatives taken by CINI. CINI has been entering into the second phase of its operation as it has started to address the adolescent problems like HIV/AIDS.

Revenue/Receipts for 2005



Grants/Donations Others

Disbursements/Expenditure for 2005



Programme Costs Administrative Costs

A brief introduction of the governing body of CINI:

Dr. Samir N. Chaudhuri, M.D. Paediatrics from the All India Institute of Medical Sciences (AIIMS), New Delhi, is the founder Director of CINI. Dr. Chaudhuri could have a lucrative medical career but he opted to serve the cause of malnourished children of slums.

Dr. Kaliprasad Pappu is the Additional Director in CINI. He is a bachelor of Medicine & Surgery (M.B.B.S.) from Calcutta University which is the oldest University of India. He also holds a Masters in Community Health from Liverpool School of Tropical Medicine, UK, and was a Gates Post Doctoral Research Fellow in Johns Hopkins Bloomberg School of Public Health.

Dr. Nupur Basu Das is the Assistant Director in CINI. He is a Ph. D. in Social Anthropology from Calcutta University. With such a meritorious academic career, he is working with an organization that works for underprivileged and malnourished children of slums.

Ethics

CINI takes care in projecting and maintaining its image as a transparent organization. We believe that the conduct of moral and business ethics are the fundamental principles of CINI due to which it is still going strong in terms of making its mission possible and shaping the lives of many poor and malnourished children of slums.

Milestones

During the course of its mission transformation CINI has reached many milestones and has already stepped into a new phase where as a Mother NGO it has been providing financial and social network to other NGOs working for the same mission of sustainable development of poor and malnourished children.

A brief of CINI's success during the past many years:

- 1983—CINI initiated child sponsorship and school welfare programs to ensure primary education of poor and financially weak children. The program helped 299 promising poor children from 294 families to pursue and continue their education.
- 1989—"Adopt a Mother and Save Her Child" project started with the help of Amici di CINI, Italy. The program provides a mother from a disadvantaged family with nutritional and healthcare support during her pregnancy and the child's first two year's of life. The program gives a start to a child to lead a healthy life. Under this program a total of 666 pregnant mothers were sponsored out of 1162 women.
- 1998— CINI started a 24 hour Childline telephone service in order to provide emergency services to children. The Helpline has reached out to around 355 children.
- 2000— CINI set up Adolescent Resource Center (ARC) to address the issue of Sexual Health and Rights of the youth of disadvantaged section of the society. ARC coordinates with 20 NGOs in 18 districts of West Bengal. The step was taken keeping into mind the vulnerability of poor children to HIV/AIDS. 43 youth groups were formed under the intervention with 233 male and 355 female members.

Projects for which CINI Intends to Raise Funds

- "Adopt a Mother and Save her Child"—The project aims to curb the problem of chronic malnutrition in India. The project provides a woman from a disadvantaged family with nutritional and healthcare support during her pregnancy and the child's first two year's of life. \$325 (USD) is enough to support such poor mothers and their malnourished children for the first two

years of life. Sponsoring such programs is a good investment in terms of economic and human costs because reduction in the levels of malnutrition can raise the productivity and reduce health care expenditure. This gives a chance to poor families to shuttle out of poverty.

- CINI is working to raise awareness about the importance of education among the parents of underprivileged children. Under this program the institute organizes education camps in order to equip children with the academic support so that they can attend mainstream schools. \$9,416 (USD) is required to sponsor a single education camp for one academic year and such a camp will serve the purpose for 50 children between the age groups of 9 to 14 years. Such an effort is helpful in changing the attitudes of parents of these children and it would eliminate the problem of child labour.
- CINI is working on HIV/AIDS intervention and is raising awareness on the prevention and cure of this disease. The focus of the intervention is the health issues of rural women in the district of South 24 Parganas, West Bengal. The institute is also fighting the issue of prejudice against HIV people and trying to bring a social equality among HIV patients and the public.
- CINI is coming up with two new projects "Primary & Upper Primary Education for vulnerable children in urban areas" and "Maternal and Child Health Intervention to achieve the millennium development goals" for which it is seeking prospective donors.

Conclusion

CINI has been working relentlessly and is living by its mission of sustainable development of poor and malnourished children in India. CINI is entering a new phase in its evolution as it takes on the challenge of addressing the problems of HIV/AIDS among youth in India. CINI is transparent in its dealings and projects and it publishes its annual financial reports on regular basis to ensure its commitment to information disclosure and accountability.

