Internship
at
CINI(Child In Need Institute),
Kolkata

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CINI, often known internationally as the Child in Need India is an international humanitarian organisation aimed at promoting "sustainable development in health, nutrition and education of child, adolescent and woman in need" in India. It is a registered non-profit non-government organisation (NGO) registered under the Societies Registration Act in India. CINI works with over 1500 Indian professionals and are guided by a Governing Body composed of experienced Indian practitioners, academics and administrators. Founded in 1974 by a paediatrician, Dr. Samir Chaudhuri, CINI is located in Kolkata (former Calcutta), West Bengal, India and runs operations in the states of West Bengal, Jharkhand and Chattisgarh assisting about 5 million people. They have been recipient of prestigious awards and recognitions in India and around the world.

HISTORY

CINI emerged in part from the work of its founder, Dr. Samir Chaudhuri, who began his medical career working in the villages and slums of West Bengal in the 1970's. His professional collaboration with Sister Pauline Prince, an Australian Loreto nun and nutritionist, and Rev Fr J. Henrichs S. J., lead to the Child In Need Institute's foundation in 1974. CINI has gone on to become one of the leading humanitarian NGOs of India.

In 1998 CINI was recognised as a National Mother NGO, under the Reproductive and Child Health (RCH) program by the Ministry of Health and Family Welfare, Government of India. That same year it was also recognized as a collaborative training institute by the National Institute of Health and Family Welfare (NIHFW), New Delhi, and now constitututes the largest training facility in West Bengal for training health workers in nutrition, safe motherhood and HIV awareness. This training facility was extended from CINI's own staff training centre to teach workers from other NGOs and government.

Having grown from humble roots, CINI's work has achieved increasing recognition. The organisation has twice been awarded the National Award of Child Welfare by the Government of India. In 2007, Dr. Chaudhuri received the World of Children Health Award for making "a significant lifetime contribution to children in the fields of health, medicine or the sciences."

SERVICES

CINI is involved in several major community development focused projects in India, driving at the underlying social causes of poverty, and collaborates with the Indian government and other local and international NGOs. CINI focuses primarily on the issues of health, nutrition, education and protection of children and mothers. To date its activities have reached around five million people living in the states of West Bengal and Jharkhand.

CINI has around 1300 employees. Its activities are supported by independent national associations in a number of countries, and by Fondazione CINI International in Italy. CINI cooperates with Save the Children, UNICEF, CARE, the UK Department for International Development, the World Bank, the Indian government and private corporations such as KPMG.

CINI's overarching aim is to enable poor people, women and children to take control of their lives and share in sustainable development. We are active in deprived communities, both in villages and low-income urban settlements, and seek to break the vicious cycle of poverty, malnutrition, ill-health, illiteracy, abuse and violence, affecting in particular children and women. Their initial focus on health and nutrition has grown further in the areas of education and child protection. Their method is to converge sectoral interventions at the level of the family and the community. CINI adopts a human rights-based approach in strengthening local governance actors, such as rural Panchayat Institutions and Urban Local Bodies, service providers, such a health personnel and teachers, and adult and child community representatives, to use available resources and identify local solutions. Their programmes span project development and implementation, evaluation, network building, training and capacity development, to serve marginalised communities and contribute to government policy and programmes.

COLLABORATIONS

CINI sees its role as a facilitator in fostering partnerships between people and government. They seek to achieve development and social justice by fostering alliances among key governance actors to increase access to quality basic services, fulfil fundamental rights and involve voiceless communities in decision-making processes. Building partnerships is core to our way of working with women and children. CINI partners with Government of India and state governments, UN and bilateral organisations, international and national donors, grassroots organisations and networks. In particular, they collaborate with community-based organisations, women's self-help groups, local elected representatives, service providers, children and youth groups.

CINI seeks to adapt international and national experience and knowledge to improve the capacity of local stakeholders. The NGO learns from the poor and strive to improve their condition and has fostered the formation of civil society networks and alliances in India and rely on a network of international support groups active in Australia, Holland, Italy, Norway, Uganda, UK and USA.

SERVICES PROVIDED

a) Preventing Malnutrition to Promote Child Survival

CINI sought to improve mother and child health by tackling the vicious cycle of malnutrition and infection to address its root causes, such as poverty, powerlessness, low status of women, illiteracy, inadequate health and sanitation practices. In a historical climate leading to the development of the Primary Health Care Movement, the NGO mobilised women to improve the health conditions of their communities. Locally trained child health workers reached out to unserved communities to promote immunisation, exclusive breastfeeding, early care of illnesses, and raise awareness on appropriate feeding and care practices, including growth monitoring and promotion. Training and capacity building, especially of community mobilisers and frontline workers, grew into a prime focus of CINI, which set up its training facility for health and development workers, CINI Chetana Training Centre, in the late '70s. Prevention of malnutrition and promotion of community health, also through the progressive creation of mahila mandals (women's groups) as a vehicle for local development, has remained a major thrust of our programme activities throughout their history till the present day.

b) Beyond Survival, Educating and Protecting Children

In the late 80s, CINI's mission was re-stated toward moving beyond the realms of nutrition and health alone to embrace the child protection and education spheres as well with the objective of providing a comprehensive package of child-centred services. CINI set up drop-in centres and halfway houses for run-away, trafficked and missing children and, later on, expanded their work to slum and red-light areas where child labour and abuse was widespread. CINI ASHA was established in 1989 to develop and implement programmes in urban areas where safety nets for children were weaker. In low-income urban communities, remedial education centres sought to mainstream and retain children in school. Networking with local NGOs, the police and the government, CINI ASHA has provided day and night shelter, sick bay facilities, education and all round services, while seeking family reunification, especially through a dedicated toll-free telephone line, the national Childline programme, which helps track, rescue, counsel and restore missing and run away children.

CINI strengthened their education programmes starting from the early '90s, with the aim of contributing to universal enrolment and retention by involving out-of-school children by working with the teachers, parents and communities. The idea was promoted that child protection could be best achieved in the family, school and community where children live, by weaving safety nets, such as child-friendly schools and spaces, removing abuse and violence from families, preventing child labour, creating mechanisms for stopping child trafficking. Later on, the scope of education expanded to the young child as well to include early childhood care and stimulation and pre-primary education in the programmes. Recently, the CINI Education Resource Centre has been established to support CINI and its partners in the government and the community to make India's Right to Education Act (2009) a reality for all, especially for those who have been unable to access school so far.

c) Impacting on the Critical Phases of the Human Life Cycle

CINI has focussed their efforts on the critical periods of the life cycle, i.e., women's pregnancy and life in the womb, the first two years of life and adolescence, by adopting a Life Cycle Approach (LCA). Specifically, on the nutrition front, the NGO realised the immense potential of concentrating our energies on the vital period spanning from pregnancy to the first two years of life, when up to 80 per cent of brain growth of a human being takes place, to achieve pregnancy weight gain, prevent low birth weight and ensure safe delivery. Services continued to support the new-born with exclusive breast feeding, immunisation, solid food supplements after 6 months of age and timely seeking of health care during childhood ailments. To fulfil such urgent goals, CINI initiated the 'Adopt a Mother and Save Her Child' programme in 1992, seeking individual sponsorships to support needy pregnant mothers during the vital period of intrauterine growth, and the physical and mental growth during the first two years of life of the child. A long standing focus on the first 1,000 days of a child's life has made CINI a pioneer in what has been recently recognised as an undisputed development priority worldwide.

To move beyond the scope of our direct interventions, we forged strong partnerships with large child nutrition and development government programmes, such as the Integrated Child Development Services (ICDS), playing a training and support role for anganwadi workers and supervisors. To address issues relating to the adolescent child, CINI Adolescent Resource Centre (Yuva) was initiated in 2000, soon followed by the creation of CINI HIV/AIDS resource centre, Bandhan, to address critical health needs of women and children affected by the disease within the family and the community where they live.

d) Sustaining Child-Friendly Governance Processes

Realising that vertical sectoral approaches tend to be costly and ineffective, CINI has made all attempts to converge efforts in the realms of health, nutrition, education and child protection at the level of the community. An ideal point of convergence has been found in primary caregivers – women. Women organised in self-help groups, strengthened in their capacity to act as agents of change, have been engaging as primary movers in community development action. Convergent and sustainable development processes are being carried forward with the joint participation of the principal governance stakeholders active at the local level – the community, led by female leaders organised in self-help groups, service providers from a variety of sectors, and people representatives of rural Panchayat Institutions and Urban Local Bodies. Children's groups are active in representing their interests in local decision-making. Available resources are leveraged to ensure fulfilment of human rights at the local level, mobilising communities to claim entitlements from the government, recognising that the government holds the statutory power and duty to care for citizens, especially the most disadvantaged. In such processes aimed to influence local governance agendas to serve children's needs, CINI acts as a facilitator, rather than a mere implementer. Strengthening governance mechanisms to build Child and Woman Friendly Communities is CINI's core approach to ensure that the Child in Need's fundamental rights are fully respected, protected and fulfilled within the family and community where the child grows up. CINI employs over 1,300 staff. Additionally, it relies on trained community-based workers, contributing on the basis of a honorarium or as volunteers.

GOVERNING BODY

CINI is guided by a Governing Body enlisting the membership of competent and committed individuals,who contribute expertise from a variety of professional fields. The Governing Body leads CINI in adopting strategic decisions relating to institutional governance, reviewing progress in programme implementation and distilling learning from field experience. It holds overall responsibility for transparent financial control, and equal and inclusive institutional management.

Prof. Sunit Mukherjee, President

With forty years of professional and research experience, Professor Sunit Mukherjee is regarded as one of India's leading scientists and food technologists. He was Professor and Head of the Department, Food and Biotechnology, at Jadavpur University, Kolkata. Professor Mukherjee was awarded a Doctor of Science degree by Prof. Bimal K. Roy, Director, Indian Statistical Institute, Kolkata, for being associated with the team credited for delivering the first test tube baby in India.

Dr. Samir Narayan Chaudhuri, Secretary and Founder Director

Since 1970, when he trained as a paediatrician at the All India Institute of Medical Sciences (AIIMS), New Delhi, Dr. Samir Chaudhuri has been committed to treating and preventing malnutrition in children, an effort that in 1974 led him to founding Child in Need Institute - CINI together with a multidisciplinary team of Indian professionals. He has served as a consultant, researcher and advisor to various national and international agencies in India and other countries of Asia and Africa. His work has been recognised by a number of awards, including the ABP's *Sera Bangali Award* (Kolkata, 2013), the *Ellis Island Medal of Honor, Global Humanitarian Award* (Ellis Island, New York, 2008), the *World of Children Awards*, UNICEF (New York, 2007), the *Italian Parliament Commission for Infants Award* (Rome, 2005), the *Ross Award, Institute of Post Graduate Medical Education & Research* (Calcutta, 1995), the *Catherine Freyman Prize in Social Pediatrics*, AIIMS (New Delhi, 1970).

DIVISIONS AND UNITS

1) *Adolescent Resource Centre*

Area coverage: West Bengal and Jharkhand
Population coverage: 410,400
Name of person in charge: Dr. Indrani Bhattacharyya, Assistant Director

Overall objectives: The Adolescent Resource Centre seeks to promote and protect reproductive and sexual health, education and protection rights of young people (in the age group 10-24).

Its objectives are

- To increase knowledge and understanding of issues pertaining to youth reproductive and sexual health, education and protection in order to contribute to programme development and advocacy
- To develop innovative youth-friendly programme models in order to address specific issues relating to youth reproductive and sexual health, education and protection rights according to a life-cycle approach
- To network, partner and develop the capacity of agencies committed to developing, promoting and scaling up models on priority issues pertaining to youth reproductive and sexual health, education and protection rights

Significant achievements include

- Contributing to promote youth reproductive and sexual health through

- Community-based comprehensive interventions in the states of West Bengal and Jharkhand
- Demonstration of programme models and scaling up through government systems and structures
- Centre-based services, in particular TEENLINE, a dedicated telephone number offering face-to-face counselling support to adolescents and young people
- Capacity building, and knowledge and resource development, linked to the preparation of toolkits, training manuals, ICE materials, and evidence-base through research studies

Reaching the unreached

- Approximately 500,000 rural and urban adolescents and young people reached in West Bengal and Jharkhand
- 360 youth-friendly spaces (Drop-in -Centres) created
- 600 service providers trained in youth-friendly services
- 6,000 peer educators trained and functional at village level
- 474 youth advocates working as change agents
- 1,500 marginalised young people provided with vocational training

CINI Adolescent Resource Centre extends technical support on sexual reproductive health and life skills education to government departments and other organisations, networks and alliances, such as the Department of Women Development and Social Welfare, Department of Health and Family Welfare, Rajib Gandhi National Institute for Youth Development, Miracle Foundation, Sexual Reproductive Health and Rights Alliance. It has developed resource materials on sexual reproductive health, adolescent nutrition, peer education and other relevant issues pertaining to adolescents and youth.

2). Division of Woman and Child Health Development

Area coverage**:** Select areas in South 24 Parganas, Kolkata, Jalapaiguri and North Dinajpur Districts in West Bengal
Population coverage**:** 1,450,000
Name of person in charge**:** Dr. Aditi Roychowdhury, Divisional Head

Overall objectives**:** Woman and child health has been a focus of CINI's work from its inception. Since 2011, interventions in this area have been managed through a Woman and Child Health Division to provide technical support and promote replicable, cost-effective and sustainable strategies in the spheres of woman and child health, nutrition and development. Our work adopts a life-cycle approach and fosters innovative methodologies, such as positive deviance models in early childhood development and the management of a Nutrition Rehabilitation Centre.

On the basis of our innovations, we have been able to influence the Government of West Bengal to adopt the Nutrition Rehabilitation Centre model in its health system. Our Division, first started five government-funded Nutrition Rehabilitation Centres in as many districts of the state. The success of the experimentation has led the Government of West Bengal to adopt the model in other districts as well.

3). Education Resource Centre (ERC)

Area coverage**:** Diamond Harbour Sub-Division in South 24 Parganas District, West Bengal,One Block of Jalpaiguri District, West Bengal,Jangipur Sub-Division in Murshidabad District, West Bengal,5 Wards of Kolkata Municipal Corporation,3 Wards of Siliguri Municipal Corporation,3 Districts in the State of Jharkhand
Population coverage**:**12,000 children in the 6-14 year age group
Name of person in charge**:** Manoj Kumar Sircar

Overall objectives**:** Education Resource Centre (ERC) has been established to guide programme development. CINI Units in Jharkhand, Diamond Harbour, Kolkata, Siliguri and Murshidabad are engaged in a variety of interventions in the area of education. ERC supports field operations with respect to planning, capacity building, implementation, monitoring and liaising with the government and other implementing and donor agencies. It provides technical assistance and supportive supervision. It further guides in MIS management and programme reporting.

It also aims to strengthen capacities and facilitating networking among project partners. It finally acts as a clearing house for information and knowledge on issues pertaining to the right to education and prevention of child labour.

CINI's community-based Early Childhood Stimulation (ECS) and Early Childhood Care and Education (ECCE) approaches have been commended by the National Council for Education Research and Training (NCERT). They have contributed to framing the National ECCE policy and curriculum with the Woman and Child Development Ministry of the West Bengal Government.CINI's efforts to help schools adopt a Child Friendly School approach have been acknowledged as an effective model.CINI has been identified as a resource agency for capacity building on RTE in Kolkata and Murshidabad.

4). HIV/AIDS Division

Area coverage**:** 12 districts of West Bengal and Sikkim
Population coverage**:** 928,000
Name of person in charge**:** Dr. Rumeli Das, Assistant Director

Overall objectives**:** Partnering with communities and the government, CINI has sought to integrate health and nutrition components to provide integrated services, converging also more broadly with education and protection interventions. Similarly, their HIV and AIDS programmes, which they have implemented through a specialised organisational harm, the HIV/AIDS Division, are designed in a way to integrate with their multi-sectorial approach at the community level.

The HIV/AIDS Division manages projects and provides technical assistance in several districts of West Bengal and in a number of neighbouring states, such as Jharkhand and Sikkim.CINI was the first NGO to establish, in 2003, a community-based ICTC, which is now acting as a stand-alone ICTC at CINI main campus with financial support from West Bengal State AIDS Prevention & Control Society (WBSAP&CS) and supervision by HIV/AIDS Division.

The HIV/AIDS Division has been involved in leadership development programmes among people living with HIV (PLHA). Progressively, it has become responsible for capacity building of all TI (Targeted Intervention) partners in the states of West Bengal and Sikkim as State Training and Resource Centre (STRC), a role which gives CINI a key platform both at state and national levels.

CINI has also been working with migrant people to prevent HIV infection at source among potential migrants, inbound migrants and wives/sexual partners of the migrant population by mainstreaming HIV/AIDS programming at Panchayat level (with financial support from ICCO). The Division is implementing a Link Worker Scheme in a number of districts to reach out to HRGs and vulnerable men and women in rural areas with information, knowledge, skills on STI/HIV prevention and risk reduction. Since 2010, CINI has been acting as the Lead Agency for 11 districts of West Bengal.

5). Training Unit

Area coverage**:** 19 districts in West Bengal, Jharkhand, and Andaman and Nicober Islands
Population served**:** We have trained over 10,000 professionals over the past one year
Name of person in charge**:** Dr. Nupur Basu Das, Assistant Director

Overall objectives**:** The Training Unit specialises in a variety of capacity development-related themes, such as training need assessment, curriculum development, training design, training courses and evaluation of training programmes. It serves as a nodal training agency for the Integrated Child Development Services Scheme (ICDS), developing the capacity of Anganwadi Workers and Helpers in its Anganwadi Training Centre (AWTC) and ICDS Supervisors. It also provides Training of Trainers (TOT) to District Trainers of ASHA programme, and specialised training in Behaviour Change Communication to partner NGOs in West Bengal and other states of India.

6). Urban Unit

Area coverage**:** Slum pockets in eleven wards in Central Kolkata, and fringes of East Kolkata-Borough VII and two wards of Borough VI
Population served**:** 400,000 population with integrated interventions in child protection, education, health and nutrition
Name of person in charge**:** Ms. Manidipa Ghosh, Assistant Director.

Overall objectives**:** The Urban Unit initiated its activities in 1989 to serve urban deprived children and help them fulfil their rights to health, nutrition, education and protection. Services include Shelter Homes, Transit Homes for boys and girls linked to the 1098 Childline Programme (a national toll free telephone number for children in distress), Udaan and Uttaran Drop-in Centres, Night Shelters at Sealdah Railway Station, a Shelter for Urban Homeless for girls and women, Sick Bay and Open Shelter. Through 100 Coaching Centres located in slum areas across 11 municipal wards of Kolkata as well as in government schools, we provide accelerated learning and back-up support for newly enrolled children towards school retention.

CINI Urban Unit strives to raise awareness among families and communities on issues relating to child protection. It works to develop safety nets in the community to prevent all forms of violence against children. As much as possible, protective measures are matched with education support, especially in slum and squatter colonies where families may find it difficult to adequately assist their children when they go to school. CINI Urban Unit refrains from running schools of its own. It rather seeks to partner government's efforts to achieve universal quality education in the framework of the Right to Education Bill 2009. It teams with government schools active in the community to strengthen enrolment and retention, by offering bridge courses and remedial education support to retain first generation learners and other deprived children in the formal school system and prevent child labour. Only to serve extremely deprived children lacking family and community support, CINI are running a residential school in collaboration with Sarva Shiksha Mission (SSM) Kolkata, presently catering to 100 children.

7). Diamond Harbour Field Unit

Area coverage**:** Diamond Harbour Field Unit is involved in the direct implementation of projects in the following blocks of South 24 Parganas District of West Bengal:

- Diamond Harbour-II
- Diamond Harbour-I
- Kulpi
- Mandirbazar
- Mathurapur-I
- Mathurapur-II
- Magrahat-I
- Magrahat-II
- Falta

Population coverage**:** 192, 260
Name of person in charge**:** Ashutosh Mallick

Overall objectives**:** The Diamond Harbour Field Unit is committed to serving deprived women and children living in marginal communities of South 24 Parganas District, West Bengal. It works in partnership with Panchayati Raj Institutions, the local administration, service providers, community members and civil society organisations, through programme implementation, capacity building and advocacy initiatives, with the ultimate goal of creating Child and Woman Friendly Communities.

8). Murshidabad Field Unit

Population coverage**:** 5,400,000
Name of person in charge**:** Jayanta Choudhury

Overall objectives**:** The aim of Murshidabad Field Unit is to serve women and children living in deprived communities of Murshidabad and neighbouring districts through effective monitoring of social programmes and collaborating with main development partners, especially the government and the Panchayati Raj Institutions.

The strong relationship established with district authorities, government departments and communities has helped CINI mobilise a large number of women's self-help groups and engage them in promoting local development. Participation by women and children in local governance processes stand at the core of our programming. CINI has also striven to foster the creation of a vibrant NGO forum to further promote visibility of women and children in district-level programme and financial planning.

Action research has been carried out with the district administration to orient programme and policy development.CINI Murshidabad is regarded as a resource agency for the district in the areas of child protection and education, by both institutional and community partners.

9). North Bengal Field Unit

Area coverage**:** All blocks of Darjeeling, Jalpaiguri and Coochbehar Districts of West Bengal
Population coverage**:** 400,000- 450,000 approximately
Name of person in charge**:** Shekhar Saha

Overall objectives**:** The North Bengal Field unit's focus is primarily on ensuring services in the realms of education, protection, health and nutrition to women and children living in urban slums of Siliguri. The city, a gateway to both national and international borders and a major commercial hub of North-Eastern India, is also a centre for unsafe migration and trafficking in human beings, in particular women and children. Addressing the problems affecting trafficked children, as well as preventing the root causes of human trafficking is a core programme area for CINI North Bengal, which works both in urban recipient areas and rural districts from where children and young people are lured into trafficking. Education, health, nutrition interventions are supported in vulnerable areas of North Bengal with the aim of creating child and woman friendly communities.

10). Uttar Dinajpur Field Unit

Area coverage**:** 9 blocks of Uttar Dinajpur District; 2 blocks of Dakshin Dinajpur District; 7 gram panchayats and 47 wards in Maldah District
Population coverage**:** Over 3 million population in the Districts of Uttar Dinajpur, Dakhshin Dinajpur and Maldah
Name of person in charge**:** Saurya Sekhar Pal

Overall Obbjectives**:** The Uttar Dinajpur Field Unit focuses on improving the conditions of deprived women and children in the realms of education, protection, health and nutrition. Special attention is paid to the first 1000 days of life, when maternal and child health interventions are given emphasis to address high MMR and IMR status, low immunisation rates, malnutrition, anaemia and soaring HIV/AIDS prevalence. In the area of education, interventions focus on contributing to the implementation of the Right to Education Bill, by addressing low female literacy rates, gender disparity and high drop-out levels. In the sphere of child protection, priority is given to early marriage, child labour and cross-border trafficking.

11). Chhattisgarh Field Unit

Area coverage**:** 27 districts and 146 blocks
Population coverage**:** 25,540,196
Name of person in charge**:** Mr. Nikhil Naskar, Assistant Director (Administration)

Overall objectives**:** CINI partners with the Micronutrient Initiative (MI) to strengthen the Chhattisgarh State Government in implementing bi-annual rounds of Vitamin A programme in an appropriate and affordable way. CINI further collaborates with the National Rural Health Mission to extend technical assistance in developing Nutrition Rehabilitation Centres (NRC) in the state as per GOI recommended protocols, to manage severe acute malnutrition (SAM) through facility-based care units and enhance monitoring and implementation. UNICEF has also partnered with CINI and provided additional resources.

12). Jharkhand State Unit

Area coverage**:** CINI Jharkhand State Unit extends technical support to the Government of Jharkhand. It is involved in the direct implementation in the Districts of Khunti, Ramgarh, Hazaribagh, Gumla, Giridih, Bokaro, Ranchi, East Singhbhum, Dhanbad, Simdega.
Population coverage**:** CINI serves over three and a half million persons through direct interventions, while they remain engaged with the entire state by providing technical assistance to the Government of Jharkhand.
Name of person in charge**:** Ranjan Kanti Panda

Overall objectives**:** The Jharkhand State Unit aims to support relevant State Government Departments in delivering basic services according to the felt needs and entitlements of the community. In doing so, it strives to strengthen the local civil society through capacity development and advocacy initiatives with the ultimate objective of creating child and woman friendly communities throughout the state.

CINI's Method & Programme Areas

❖ CINI's Rights-Based Approach to Development: Creating Child and Woman Friendly Communities

Over the recent past, CINI has undergone a methodological shift in its policy and action by adopting a human rights-based approach in the development work that it carries out among poor Indian communities. While the Child in Need does not have her fundamental needs met yet, the Child with Rights is being supported in having a voice and fulfilling her fundamental entitlements as a matter of right. CINI's rights-based approach aims at creating Child and Woman Friendly Communities, where families, schools, police stations, social and physical settings are committed to respect, protect and fulfil children's rights in the spheres of health, nutrition, education and protection from all forms of abuse, exploitation and violence. As key rights-holders, children and women are encouraged to participate in making decisions that affect their lives. Primary duty-bearers are supported in fulfilling their rights, in particular,

- **Communities** are mobilised by self-help women's and children's groups to ensure that parents, families, schools, ICDS centres, health sub-centres, police stations engage in keeping children in good health, well nourished, educated and protected from all practices that may be harmful to their full growth and development
- **Service providers** are supported and monitored to ensure that teachers, health personnel, social workers extend quality health, nutrition, education and protection services equitably and inclusively to all children living in the community
- **Local elected representatives** (Panchayati Raj Institutions in rural areas and Urban Local Bodies in municipal areas) are encouraged to ensure access to basic services, and implementation of policies and budgets in the best interests of children and women

CINI acts as a facilitator in engaging local development actors – the community, service providers and elected representatives – in a process aimed to strengthen good governance with and for children and women. Local governance partners are involved in participatory processes leading to increasing awareness on problems affecting the community, identifying issues through social mapping, planning interventions to address shared priorities, and monitoring the progressive fulfilment of human rights by all, especially the socially excluded. Children and women are leaders in transforming their communities to make them inclusive to the most marginalised and poor sections.

CINI has involved its staff at all levels in developing the Child and Woman Friendly Communities approach as a way to implement all of its programmes in the areas of health, nutrition, education and protection in a holistic and child-centred manner. In the process, CINI has been progressively shifting from an emphasis on direct service provision to a focus on facilitating governance processes aimed to enhance access to services, programmes and budgets that are increasingly being made available in India, especially by government. CINI's goal is to empower the community and engage duty-bearers in fulfilling the fundamental entitlements of rights-holders, especially deprived children and women.

Child and Woman Friendly Communities are being piloted in rural as well as urban settings, in Kolkata Municipal Corporation and in the Districts of Diamond Harbour, Murshidabad, South 24 Parganas, Jalpaiguri, Uttar Dinajpur in the State of West Bengal, and in Khunti District in the State of Jharkhand.In such settings, tripartite partnerships of community, service providers and local elected representatives work to institutionalise participatory governance processes with the involvement of women and children's groups, drafting child and woman-focused multi-sectoral development plans on the basis of data collected through social mapping, and developing participatory children's budgets. They also monitor compliance by duty-bearers in ensuring access by all children to equitable social services and opportunities for participation.

People's empowerment helps internalise fundamental rights and demand services as entitled citizens. Women's self-help groups have become members of several government forums, such as the Gram Unnayan Samity, the Village Education Committee, the Village-level Child Protection Committee, the Village Health Nutrition Day, the Ward Committee. Young people have organised themselves in Bal Panchayat, which provides a platform to engage local decision-makers in issues affecting children.

Community-driven monitoring systems have been established to allow the community to analyse gaps and identify solutions in accessing services, together with service providers and local government representatives. Over the past 5 years, in Murshidabad, participatory implementation and stringent monitoring have resulted in increasing school enrolment from 59 to 90%, while rising institutional delivery from 31 to 61%. In parallel, the social and physical environment in which communities live has been made more fitting to children with the creation of child-friendly corners, child-friendly schools, child-friendly police stations and community-wide safety nets.

➢ Nutrition

From its inception, CINI's nutrition projects focus on educating women, especially pregnant and lactating mothers, to make the best of what is available. This process is usually entrusted to health workers, local women who are trained by CINI and can approach women in their homes in villages and slums. Their ultimate aim is to ensure full physical and mental growth and development in children by ensuring appropriate nutrition throughout the critical periods of the life cycle. Their interventions seek to address a variety of determinants of malnutrition in children, adolescents and pregnant women, as they relate to healthcare, hygiene and sanitation, child care, appropriate feeding practices (including breastfeeding), growth monitoring and promotion, adoption of low-cost home available foods, promotion of gender equality.

In the early '70s, CINI developed Nutrimix, a low cost nutritious food made from locally-available cereals (rice/wheat) and legumes (dal – lentils), which has have been promoted at the home and community level, as well as in Government health and nutrition programmes. With the help of a World Bank grant, Nutrimix has been commercialised as a social business venture by women's Self-Help Groups to offer a socially-appropriate alternative to industrially-produced weaning foods.

➢ Health

CINI trains health service providers, such as government frontline community health ASHA workers, to act as effective healthcare agents as mandated by the National Health Mission, which has entrusted CINI to function as the West Bengal State Nodal Agency (SNA). Trained and motivated local women, organised in Self-Help Groups or acting as community-level workers, interact with families to facilitate access to primary health care services for women and children residing in villages and slum areas. With the help of community mapping and Mother and Child Protection (MCP) Cards, CINI makes sure that no one is left unserved.

CINI educates communities in issues relating to child health, reproductive and sexual health, including HIV/AIDS, and appropriate hygienic practices to prevent common illnesses at home and also motivates families to seek full immunisation coverage, periodic ante-natal check-ups and diagnostic tests during pregnancy, and early treatment in case of illness. The NGO pays special attention to adolescent health, addressing reproductive and sexual health to prevent sexually transmitted diseases, early and unwanted pregnancy, and Reproductive Tract Infections (RTI). CINI mainly seeks to empower young people with knowledge on the physical, psychological and emotional changes that take place during puberty and adolescence.

➢ Education

CINI supports the Right to Education Bill, 2009, with the aim of achieving universal enrolment, increasing school retention and improving the quality of education. In particular, CINI is concerned with deprived children, those who are denied access to education as a result of traditional or social barriers, such as caste, poverty, gender or ability. Evidence shows that children who are in school not only are empowered with education, but also tend to be more protected from abuse and exploitation. To strengthen their efforts in the education sector, they have recently established an Education Resource Centre (ERC) with the mandate of distilling innovation, guiding policy development and contributing to the unprecedented education reform underway in the country.

CINI strives to identify children who have dropped out of school, or at risk of leaving it and partner with school authorities and teachers, school committees, families, children's groups and local elected representatives – rural Panchayat Institutions and Urban Local Bodies – to map out-of-school children, motivate the school system and families to get them back to school, and prevent dropping out. They promote the creation of Child Friendly Schools – where school authorities are willing to participate in this transition – by upgrading the school environment, building separate toilets for girls and introducing education methodologies that are child-centred. Through social auditing, adult and child education service users can claim their entitlements and suggest ways to improve the school system. CINI is working to foster the establishment of Child Friendly Schools to stand as primary institutions for education and child protection at the core of Child and Woman Friendly Communities.

➢ Protection

Since the late ’80s, CINI has worked with children living on the streets, run-away, missing, sexually and physically abused, at risk of early marriage, out of school, or victims of other forms of violence. CINI Child Protection Resource Centre coordinates programme activities and fosters innovation in both institutional and community-based child protection work. CINI extends protection interventions to over 5,000 children through institution-based services and 21,500 children through community-based services. They offer education and protection services to children who are most vulnerable to abuse, exploitation and trafficking in the metro areas of Kolkata through CINI Urban Unit and Siliguri through CINI North Bengal Unit, and in the districts of Murshidabad through CINI Murshidabad Unit, North Dinajpur and Jalpaiguri through CINI North Dinajpur Unit, in South 24 Parganas through CINI Diamond Harbour Unit and in Khunti District through CINI Jharkhand State Unit.

Several programmes are implemented along the borders of India with Bangladesh and Nepal, where child trafficking is a serious as much as an elusive problem. Services and facilities are concentrated in red-light areas, around bus and train stations, and in deprived slum and village areas. Several partners are involved to address the multiple forms of violence on children: the police and the judiciary, local NGOs and community-based organisations, children, youth and women’s groups, families and schools. In at-risk locations, they offer temporary shelters, both in the form of drop-in centres and shelter homes, for children in need of special protection. All efforts are made to reintegrate children with their families and communities when possible, including providing the necessary support to parents who may have difficulties in accepting their children back. In partnership with the government and the police, CINI manages Childline services with five units deployed across the state of West Bengal offering a 24-hour toll free telephone helpline to extend assistance to children in distress. Children, adults and the police report on the hot line instances of child abuse, child labour and child trafficking. We also operate a helpline for teens and persons affected by HIV/AIDS, offering counselling and assistance.

➢ Training

CINI has laid focus on contributing in fillin the gap existing between professional health personnel and poor communities, by spreading knowledge on health and nutrition with the help of trained health workers. Over the years, their training capacity has expanded beyond health and nutrition and today we offer capacity building services in all areas pertaining to children and women.

Capacity development activities have been carried out as part of project implementation in the field, as well as institutionally. Institutional training of professionals from both government and non-government organisations is carried out through CINI Chetana Resource Centre, which operated in collaboration with other institutions, such as Indira Gandhi National Open University (IGNOU), Kolkata University, Jadavpur University, government and private Nursing Colleges. The government has entrusted CINI Chetana with the training of ICDS, HIV-AIDS and ASHA workers in West Bengal, Bihar, Jharkhand, Orissa and the North Eastern States. It has developed a variety of training materials that are used both in institutional training and in field-level capacity development processes.