



The Hope Foundation

Working with Street and Slum Children



Strategic Plan

2016-2021

Foreword: Maureen Forrest, Honorary Director

On behalf of the staff and board, it is my pleasure to introduce the 2016-2021 HOPE Strategic Plan. Since establishment in 1999, HOPE has grown immensely, now restoring lost childhoods and providing human rights to hundreds of thousands of street and slum dwellers throughout Kolkata, India. HOPE continues to work with 12 local partner organisations throughout Kolkata to ensure the most effective delivery of our work and to tackle the root causes of abject poverty encouraging sustainable futures. It is through HOPE's partnerships with beneficiaries, funders, policy makers, the public and Government officials that HOPE continues to provide for those most vulnerable in Kolkata and West Bengal. HOPE facilitates the implementation of projects in the areas of healthcare, education, protection and life skill training, generating awareness and a call for action among communities living in Ireland, the UK, the USA, Germany and throughout India.

1. When implementing our projects, we ensure to hold the dignity of individuals in the highest regard. We aim to protect individual rights and facilitate the personal development and independence of each individual involved in all HOPE projects.
2. We strive to do all we can to support each other, our colleagues and our volunteers here in Ireland, in our fundraising offices in the UK, the USA, Germany and in Kolkata.
3. We maintain a strong professional relationship with our partner organisations in India and work together with these groups to ensure the effective delivery of our programme work. We work with these partners to maintain a high standard of project delivery, through continuous monitoring and evaluation mechanisms which are in place.
4. We work to present the public face of HOPE, illustrating our work as a dedicated charitable organisation characterised by integrity, enthusiasm and commitment. We invite and welcome the involvement from all sectors of the wider public community.
5. I acknowledge with sincere appreciation the enormous dedication, hard-work and passion of our staff members here and overseas and the commitment of our board members.
6. We work towards the continuous development of HOPE, catering for the immediate needs on the ground in India and develop our projects in line with the root causes of abject poverty. We work in a sustainable manner, in the hope that a number of our programmes will eventually be sustained by local communities.



Maureen Forrest
Honorary Director, The Hope Foundation

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Executive Summary

The Hope Foundation begins from the position that all people are entitled to a certain standard of living, taking the side of the people who suffer injustice and discrimination by acknowledging their equal worth and dignity and emphasising rights and responsibilities. The Hope Foundation ensures they regard poor people not simply as beneficiaries, but as active rights-holders.

Since our last Strategic Plan, HOPE has established a new fundraising office in the USA. Established a pharmacy in conjunction with HOPE hospital in Kolkata, opened 4 new protection homes and is now generating additional funds through our Lifeskills Training Institute, HOPE hospital and new Indian-based fundraising teams.

The work of The Hope Foundation is more than the sum of its parts in terms of its partnership and service-delivery in India. In Ireland, The Hope Foundation plays an important role through the ability to contextually analyse international development issues from a national and international perspective. Facilitating the sharing of learning and knowledge widely through networks, alliances and close relationships with donors. Going forward, the direction of HOPE's work in India will continue to show and highlight HOPE as an organisation that offers cultural and educational exchanges.

An important focus of The Hope Foundation's work is in second and third level education institutes throughout Ireland and the UK. HOPE believes that 'education is the greatest gift you can give a child'. HOPE's Immersion Programme for secondary schools began in 2003, which has given students the opportunity to learn about the reality of poverty and social injustices facing young people their own age around the world. As well as the positive and life-changing effects that come about from fundraising and raising awareness, it gives students the opportunity to engage in experiences not available in the classroom. The programme helps develop students' imaginative skills, encourage greater independence and enhances social and cultural development. It also enhances their understanding of international and domestic development issues and their own individual place within the international sphere.

The Immersion Programme's trip to Kolkata is for approximately one week, where students get the opportunity to visit our projects and other areas of cultural and historical significance in Kolkata. As part of HOPE's Protection and Education programmes students will visit our Protection Homes as well as our Education Centres which are run in cooperation with local government schools. It is a wonderful opportunity for students to witness our work, which we have invested into ensuring the sustainability of the people and communities of Kolkata. The trip is also a life skills project as they have to fundraise and prepare themselves to travel with HOPE to Kolkata. This fundraising goes towards helping to fund the many healthcare, educational and protection projects in Kolkata.

Through these avenues HOPE raises awareness surrounding global issues, with HOPE's Development Education Immersion Trip taking focal point. The aim of this programme is to promote greater understanding of the causes of poverty and inequality and provide students and teachers the opportunity to travel to witness these global concerns first-hand. Third level students also engage in college placements with HOPE in Kolkata.

Through our recent impact assessment and evaluation analysis¹, HOPE continues to offer a better quality of life for those residing on the streets and in the slums of Kolkata. Empowering them to break the cycle of poverty to secure better futures for their families. HOPE has also adopted result-based management processes whereby HOPE can ensure that all of its activities contribute to the achievement of its desired results. Its accountability for results requires systematic monitoring against its goals and strategic objectives, self-assessment and reporting on progress. HOPE's utilisation of results-based management further ensures ownership by its partners, based on how they contribute to national development priorities and strategy.

¹Impact Assessment and Evaluation Analysis was conducted externally by the Association for Stimulating Know How (ASK) in 2014.

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Introduction

India's economy is now the fastest growing in the world. Despite this rapid growth, millions of Indians are forced into a life of severe and often fatal poverty. 42% of the Indian population lives below the international poverty-line. This accounts for almost 500 million individuals, outnumbering the entire population of the USA.

The Hope Foundation has been operating in India since 1999, working closely with partner organisations to improve the conditions, ensure human rights and enhance the long-term prospects of children and communities throughout Kolkata and wider West Bengal.

The majority of HOPE's work is implemented in West Bengal, although the foundation is committed to working throughout India and other developing countries. HOPE also places an emphasis on development education in Ireland, the UK, the USA and Germany, enhancing awareness and promoting action for change among the youth of each country and empowering them to become active global citizens.

HOPE also responded to the earthquake disaster in Garjarat in 2000 and the tsunami in Tamil Nadu in 2004.

Local Partners

HOPE engages with partners in India who have a shared vision and commitment, and work together to bring real and sustainable benefits to poor and marginalised individuals. HOPE's partnership approach harnesses the unique contribution and strengths of each partner, working together to achieve shared objectives in an open, accountable and transparent manner, to bring about community-owned and sustainable change in the lives of people living in poverty. The programmes supported are grounded in a participatory approach in consultation with local communities, authorities and partner organisations.

HOPE believes that a strong civil society can influence long-term and sustainable change and, to this end, adopts the use of a rights-based framework. A central dynamic of HOPE's rights-based approach is about identifying the root causes of poverty, empowering individuals to demand their rights and enabling duty-bearers to meet their obligations. HOPE recognises the complexity of poverty. HOPE perceives poverty within the structures of power and inequality that is embedded in the local, national and global context.

HOPE's implementing organisation in Kolkata is The Hope Kolkata Foundation (HKF). Alongside HKF, HOPE works with 11 local partners, whose ethos and dedication to reduce poverty are in line with

that of The Hope Foundation's and assist HOPE in the delivery of our programmatic approaches.

These organisations are:

1. PaschimbangaKrira O JanakalyanParishad (PBKOJP)
2. HIVE India
3. Society for Indian Children's Welfare (SICW)
4. IswarSankalpa
5. Bhoruka Public Welfare Trust (BPWT)
6. Jayaprakash Institute of Social Change (JPISC)
7. Keertika
8. Mohammad Bazar Backward Class Development Society (MBBCDS)
9. HaldarchawkChetana Welfare Society (HCWS)
10. Butterflies
11. Girl 2 Be

Programmatic Approach

HOPE implements its programmes through a results-based framework, with stringent monitoring and evaluation procedures, to ensure the effective delivery of its services and has moved to a programmatic approach of implementation in line with international best practice and Irish Aid guidelines. HOPE's programmatic areas include healthcare, education, protection and livelihood generation, and also work in the following areas:

- Anti-trafficking
- HIV/AIDS awareness
- Care and support of people living with HIV/AIDS
- Capacity building

Organisational Governance

The Hope Foundation recognises our responsibility to those whom we support and to donors, sponsors and fundraisers who support us. HOPE therefore insists on transparent operations in all activities in Ireland, our international satellite offices and in India.

HOPE's membership with the following organisations ensures we adhere to best practices both in Ireland and internationally:

1. **Dochas**; The Irish association of Non-Governmental Development Organisations.
2. **Comhlamh**; Irish Association of Returned Development Workers, Volunteers and Activists.
3. **The Wheel**; support and representative network for community and voluntary sectors in Ireland.
4. **Consortium for Street Children**; global network promoting the rights of street children.

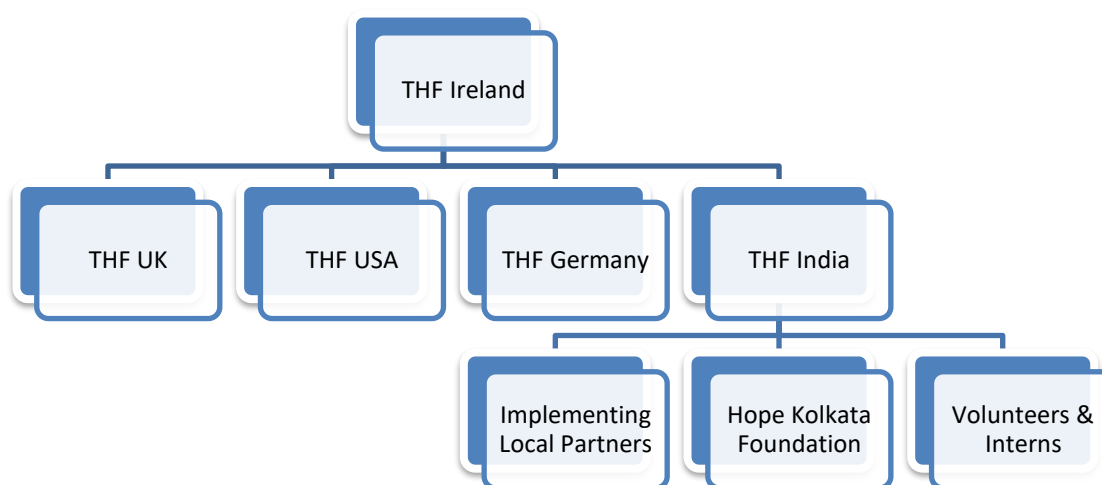
The Hope Foundation is a member of the following organisations, ensuring we are fully compliant and transparent regarding the governance of our charity:

1. **Governance Code**; Voluntary code of governance and implementation guidelines for charities in Ireland.
2. **Charity Regulatory Authority**; Ireland's national statutory regulatory agency for charitable organisations.

3. **Credibility Alliance;** a consortium of Voluntary Organizations committed towards enhancing Accountability and Transparency in the Voluntary Sector
4. **Irish Charities Tax Research (ICTR);** providing leadership and support within the Irish Charity Sector.
5. The Hope Foundation has a **Due Diligence Policy** in place for the effectively delivery of services in a transparent and accountable manner.

Organisational Structure

1. Overall Structure



THF- The Hope Foundation

#	Country	Number
1	Ireland staff	14
2	UK staff	2
3	Germany staff	1
4	Branch Office India	15
5	HKF (HOPE Implementing partner in India)	234
6	Partner Organisations	135
7	Volunteers and Interns (international)	140 (approximately)

Board Members

#	Country	Number
1	Ireland Board	15
2	UK Board	9
3	USA Board	6

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Vision Mission Values

Vision

1. *'A World where it should never hurt to be a child'*. Restoring childhoods to children and sustainability to individuals and communities.

Mission Statement

To improve the quality of life for the most marginalised people, primarily in India. Ensuring their basic rights and enhancing their dignity of life, through protection, health, education and economic development in a sustainable life cycle approach. Achieving this mission through fundraising activities and initiatives.

Values

1. **Accountability & Transparency:** We recognise our responsibility to donors, sponsors and fundraisers who support us and are committed to good governance. We equally recognise our responsibility to those whom we support and take the responsibility of achieving results for effective programme delivery, providing sustainable and positive impacts.
2. **Innovation & Creativity:** We are open to accept and develop new ideas and believe in systematic change for sustainable solutions.
3. **Integrity:** We aspire to the highest standards of honesty and encourage critical thinking for further development. We never compromise on quality and act in the best interests of those with whom we work, with a special focus on child-centred policies and practices.
4. **Collaboration:** With communities at our core, we believe in building and fostering partnerships at different levels, in order to leverage regional and global strength for sustainable development.

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Strategy and Approach

The Hope Foundation's work is guided by our strategic plan 2011-2015, and continues to:

1. Support civil society organisations
2. Develop programmatic approach

Our new strategic approach for 2016-2021 will prioritize issues of social justice and gender equality. We will strengthen our organizational system to accelerate impacts and align our organizational systems and programmes in Result Based Management Framework (RBM). This includes:

1. Situational analysis & identifying core problems
2. Formulating objectives
3. Identifying indicators
4. Setting targets
5. Implementing activities
6. Monitoring results
7. Reviewing & reporting results
8. Integrating evaluation
9. Using performance information

Grant Applications will be assessed on the basis of results-based management selection criterion. Grant performance will be assessed using the analytical RBM framework for the integration of evaluations within a broader performance management system, reform of financial management systems and application of modern management practices.

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Strategic Plan 2016-2021

In 2014, the organisation 'Association for Stimulating Know How' (ASK) conducted an Impact Assessment and Evaluation of the projects implemented by HOPE in Kolkata, under the programmatic areas of healthcare and education. The evaluations focused on assessing the impacts of interventions carried out by HOPE in the lives of street and slum dwellers, focusing on four critical aspects of relevance, efficiency, effectiveness and sustainability of the project interventions. As a result of these evaluations, The Hope Foundation's Strategic Plan 2016-2021 has a new direction to reflect this.

The Hope Foundation's Strategic Plan Goals 2016-2021:

Strategic Goals

1. Improve the healthcare status of underprivileged and/or marginalised communities, with particular attention to maternal health, child mortality and combating RTI/STI and HIV/AIDS.
2. Improve learning outcomes and educational attainment of children and raising the quality of learning environments in formal schools.
3. Provide home-based and family-based care and protection for children to combat child labour, abuse, exploitation and deprivation.
4. Empower marginalised youth and women to increase their skill capacity to secure sustainable livelihoods.

Organisational Goals

5. Be a voice for children through the implementation of an all-encompassing family and community approach to development.
6. Improve management effectiveness and accountability within the organisation.
7. Increase fundraising initiatives in India, Ireland, the UK, Germany and the USA for organisational stability and sustainability.
8. Increase volunteer and stakeholder engagement.

Goal One: Improve the healthcare status of underprivileged and/or marginalised communities, with particular attention to maternal health, child mortality and combating RTI/STI and HIV/AIDS

The Community Based Health Care Intervention of The Hope Foundation has improved the health status of slum dwelling communities in Kolkata and Howrah, West Bengal, India. As previously mentioned, the statistics are based on external impact assessments conducted with a sample population in each slum community.

- 99% of pregnant mothers access ante-natal care. This represents a major success of the Janani Suraksha Yojana (JSY) scheme, a safe-motherhood intervention introduced by the government under the National Rural Health Mission (NHM), implemented to reduce maternal and neonatal mortality, by promoting institutional delivery among poor pregnant women.
- Maternal health and child health: More than 80% of the mothers have chosen institutional delivery for their child birth.
- In the past three years, 98% of pregnant mothers received complete immunization and 81% of children have been immunised
- 87% of lactating mothers exclusively breast-feed babies up to the age of 6 months.
- Before project implementation, water was used to wash hands after defecation often causing the spread of diseases; now 78% of the community use soap and 5% prefer using ash/mud.
- 98% of slum dwellers clean their houses daily and 92% also clean their surroundings daily.
- Currently, just 15% of the slum populations own a toilet for exclusive use by the family and 41% access common toilets. This is a remarkable development, as before project intervention almost all the community defecated in the open.
- Child marriage is still prevalent. According to UNICEF's 2014 report, 47% of girls are married before they reach the age of 18. Encouragingly, 53% of the slum community now believe this practice has no place in today's society.
- 7 years ago, only 28% of the population used to seek treatment if they were unwell, today this has increased to more than 55% who seek treatment.

Three core areas have been identified which need further intervention in the last phase of the programme cycle- accessibility of post-natal care by lactating mothers, better accessibility of ICDS services by children and adolescents and RTI/STI Management.

The Hope Foundation will continue supporting the last phase of our community health care programme and we hope to replicate the model in other states with low human development index in the next 5 years.

Strategic Objectives:

- 1.1 Strengthen post-natal care accessibility by lactating mothers.
- 1.2 Increase children's and adolescent's access to improved health care services, with the assistance of ICDS services and other government health units.
- 1.3 Reduction in RTI/STI prevalence in communities.
- 1.4 Homeless-mentally ill (HMI) individuals will improve their mental health status, and will be resettled, rehabilitated or restored, where appropriate.

Baseline	Outcome	Output
83% mothers not having access to Post-Natal Care (PNC) services.	80% of mothers will have accessed complete PNC services.	<ol style="list-style-type: none"> 1. PNC services and information will be disseminated and facilitated by Anganwadi workers for improved maternal health post-delivery, where 80% of mothers will be accessing PNC services in the next three years. 2. Families will possess more knowledge about the importance of seeking PNC services and will be encouraged to avail of the services. 3. The doctors in government hospitals will be promoting the importance of PNC and at the same time, will be making PNC services more accessible 4. 80% of the mothers will be accessing PNC services in the next three years.
Prevalence of Reproductive Tract Infection and Sexually Transmitted Infection (RTI/STI) among adolescents and youth.	70% reduction of STI & RTI prevalence among youths and adolescents.	<ol style="list-style-type: none"> 1. Increased safe sex practices will be adopted by the 70% of the adolescents and youth by the end of three years. 2. 80% of the adolescents and youths will be accessing more STI & RTI testing and treatment by the end of three years. 3. There will be increased STI & RTI counselling services in Anwasha clinics/similar service units and increased referrals to government clinics, leading to a 90% reduction in STI/RTI positive cases in the next three years.
61% children and 99% adolescents are not receiving any benefit from local ICDS centres.	90% children and adolescent girls will access ICDS facilities in 35 slums.	<ol style="list-style-type: none"> 1. 100% of children and adolescents will be enrolled and will be regularly attending the ICDS centres in the next three years of intervention. 2. Existing Aganwadi workers will be functional/performing their role as per the government norms and ICDS mandates. 3. Facilitation in terms of opening new ICDS centres to accommodate beneficiaries in the next three years of the intervention.
20-25% of the homeless population (77,000) are mentally ill.	3-5% of homeless-mentally ill individuals will improve their mental health status, will be resettled, rehabilitated or restored.	<ol style="list-style-type: none"> 1. HMI persons will be identified and cared by community volunteers and other stakeholders. 2. Government hospitals will provide treatment to HMIs. 3. Patients will show gradual improvement in their mental health condition. 4. Patients will become engaged in supportive environments and work placements. 5. Families will be identified and motivated to take care of HMIs.

Strategic Objectives of HOPE Hospital:

- 1.1 Ensure homeless people living in the street and slums have their right to secondary healthcare without undue financial burden.
- 1.2 Provide specialist care for in-patient/out-patients.
- 1.3 Provide surgery for homeless street and slum dwellers free of cost.
- 1.4 Provide rehabilitation to homeless children and elderly after treatment in HOPE Hospital.
- 1.5 Provide medical facilities to Lower Middle Class people through upgrading HOPE Hospital.

Baseline	Outcome	Output
HOPE Hospital presently provides medical treatment to Kolkatan communities, focusing on homeless street and slum people HOPE Hospital has recently upgraded its operation theatre through the introduction of a C-ARM instrument, Laparoscopic instrument and also set up ICU with Life Saving Instrument and Pharmacy	In the future the number of patients will increase. More surgeons & doctors will be involved with HOPE Hospital because more facilities are being provided by up gradation of Operation Theatre, ICU and Pharmacy.	<ol style="list-style-type: none"> 1. Number of surgeries & patients with serious illness will increase. 2. The lower middle class people will come to HOPE Hospital and will get the quality treatment at a subsidized rate. 3. HOPE Hospital will generate its own running costs through its ICU, Operation Theatre and Pharmacy by treating the lower middle class people. 4. HOPE Hospital will continue its free services to the poor street & slum people by this income generation. 5. Financial support will be decreased gradually.

Goal Two: Improve learning outcomes and educational attainment of children and raising the quality of the learning environment in formal schools.

The Holistic Education Programme of The Hope Foundation has improved the educational status of slum dwelling communities in Kolkata and Howrah, West Bengal, India. School dropout has decreased; today there are only 5% of children who are out of school in HOPE operational areas.

HOPE's study revealed that 95% of the children in the age group of 6-14 years are now attending school, 78% of the children in the age group of 3-5 years are attending ICDS Centre and 75% of the children in the age group of 15-17 years are continuing higher level education.

As a result of our continuous awareness events, 91% of the respondents were found to be aware of the basic entitlement for their children. Currently, 92% of the respondents are aware of the Mid-Day Meal Scheme, 91% are aware of school uniform, 86% are aware of free books and notebooks and 44% of the respondents are aware of free scholarships.

The communities are already doing well in terms of accessing government services like ICDS and Government schools. With increased awareness by HOPE and other supplementary interventions, more girls in the age group of 3 to 17 years are now accessing these services.

Core areas identified for further intervention include: Improved learning levels of children (6-14 years), schools following Right to Education mandate and reduction in corporal punishment.

The Hope Foundation will continue working with government and government aided schools for sustainable change, streamline other fringe projects in similar programmatic frameworks and replicate the model in other states with low human development index in the next 5 years.

Strategic Objectives:

- 2.1 Strengthening implementation of RTE mandate in schools.
- 2.2 Improving learning levels of children in Government schools in order to improve their class appropriate learning.
- 2.3 Reduction in corporal punishment by building the capacity of children and parents.
- 2.4 Increase special needs children's access to formal education.
- 2.5 Increase children's (never been to school/dropped out) access to formal school education.

Baseline	Outcome	Output
5% of the children in the communities are drop-outs or have never been to school.	100% school enrolment in communities where HOPE is already working.	<ol style="list-style-type: none"> 1. Drop out children from the communities will be enrolled in school. 2. Children who have never been to school will be enrolled in formal education.
On average 34% of the children are below the standard level in arithmetic and	50% of the target schools will improve in their class appropriate learning as 80%	<ol style="list-style-type: none"> 1. Target government schools in the operational areas implementing CCE. 2. Government Schools in the 14 operational areas will start special training in-school for

<p>reading in the government schools.</p>	<p>children will improve their learning level.</p>	<p>children with learning difficulties.</p> <ol style="list-style-type: none"> 3. Improved learning environment in all the target government schools in terms of reduction on corporal punishment. 4. Improved learning environment in all the target government schools in terms of availability of suitable facilities for all students, including special need children. 5. Improved engagement between teachers and parents on areas of education of children in target schools. 6. SMC is formed and functioning in all the target schools as per their role according to the Right to Education mandate.
<p>76% of schools do not have special educators nor do they have teaching learning aids for special need children.</p>	<p>Schools will have better infrastructure to support special need children resulting in increased access to formal schools.</p>	<ol style="list-style-type: none"> 1. Improved learning environment in all the target government schools in terms of availability of suitable facilities for all students, including special need children.

Goal Three: Provide home-based and family-based care and protection for children to combat labour, abuse, exploitation and deprivation

The Protection Programme of The Hope Foundation provides vulnerable children with a home away from home; a loving, caring and safe environment in which children can learn and grow into independent, successful and happy young adults. It has always been HOPE's priority to restore children to their homes, where possible and appropriate, and we strive to develop families through strengthened interventions to improve the social and economic situation of a child's home, before restoration. Where home environments do not exist or still pose a threat to children, the children remain in HOPE protection homes, afforded the opportunity to receive an education, healthcare, nutrition, protection and love and care to rebuild their once shattered childhoods.

Strategic Objectives:

- 1.1 Strengthen child protection at family and community level and create and promote preventive or rehabilitative measures to protect children from situations of vulnerability, risk, violence and abuse.
- 1.2 Enhanced protection and development of children living on the street by increasing their access to formal education, reducing incidents of domestic violence and abuse, reducing addiction and vulnerability at night.
- 1.3 Increased access to safe shelter and development of children who are in need of care and protection.

Baseline	Outcome	Output
45% of street or platform children are out of school.	85% of children will be attending government formal schools.	<ol style="list-style-type: none"> 1. Parents will be motivated to send their children to school. 2. Interest to attend school will grow among the children. 3. Government schools will encourage the admission of street-living children. 4. Employers will not engage children in work.
High rates of abuse (physical 60.18% and sexual 1.46%) are faced by street and platform children due to domestic violence and for working children by their employers.	75% families are free from domestic violence. 80% employers are not engaging children in work	<ol style="list-style-type: none"> 1. Increase in reporting and prosecution of cases related to domestic violence and child abuse. 2. Women are more confident to stand against domestic violence and fight for their rights 3. Increase reporting of child labour to Labour Commissioner and other stakeholders. 4. Employers are not engaging children in hazardous work
High Level of addiction (tobacco 38.43% and dendrite-5.29%) among the street and platform children.	60% of children will be free from addiction.	<ol style="list-style-type: none"> 1. Vendors will stop the sale of addictive substances to children. 2. Improved accesses to the addiction services and treatments.

No Data	70% of vulnerable children are in protective environments.	1. Improved access to a safe protective refuge for at-risk children, through shelter homes and rescue operations (Child Watch Programme)
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Goal Four: Empower marginalised youth and women to increase their skill capacity to secure sustainable livelihoods.

Strategic Objectives:

4.1 Provide high-quality vocational training to underprivileged individuals, particularly women and youth, for economic growth and entry into the workforce for sustainable futures.

Baseline	Outcome	Output
57% of households with 6-7 members have incomes of Rs.5000 monthly (approximately €68) or less which is low in terms of living wage.	57% of households with 6-7 members will have income of Rs.12000 to Rs.15000 (approximately €165-€205) within 5 slum areas of Kolkata.	<ol style="list-style-type: none"> 80% of women will have started their own enterprise and managing the same effectively. 80% of woman will have access to finance through bank linkages and self-help groups. 80% of women will have completed the skill training that was provided. 80% SHG will be formed and functioning effectively. 60% of employers will give HOPE a commitment that they will provide employment for youth. 80% of youth will be able to complete the employable skill-based training courses. Increased access of both women and youth to government schemes like National Urban Livelihoods Mission and SJSRY (Swarna Jayanti Shahari Rozgar).
	100% of trainees will complete their vocational training, receive a certificate and get job placements to lift the economic stability in their home environments.	<ol style="list-style-type: none"> 8 trainees (100%) will complete the food & beverage course and get relevant jobs annually 40 trainees (100%) will complete garment construction course and gain placement annually 60 trainees (100%) will complete computer course annually and either get job placements or continue their education 2 new courses will be added to the Lifeskills Institute; advanced tailoring and beauty course

Goal Five: Be a voice for children through the implementation of an all-encompassing family and community approach to development

While targeting a particular beneficiary group, such as street and slum children, the necessity to engage community members for overall project sustainability cannot be underestimated. Engaging communities in decision-making builds trust and affords legitimacy and credibility to outcomes. It leads to partnerships between residents and policy-makers through a shared sense of ownership of the issues, raises the quality of policies and enhances the potential for successful implementation.

HOPE rehabilitates children to their families, if the economic and social conditions of families have improved. Extended support such as education and vocational training provide sustainable measures that families can adopt, to become their own drivers of change and development.

Outcome	Output
<p>Increased well-being of children from below poverty-line, street and slum communities, who are often deprived of their most basic rights.</p> <p>Secure the basic human rights of children for their overall sustainable development</p>	<ol style="list-style-type: none"> 1. 70% of children will have increased access to protection and shelter. Through 12 Protection Homes, 320 children will be provided annually with a home environment. 2. Children will have greater access to healthcare 3. Children will be supported during their formal education
<p>A holistic and community-centred approach to development will equip parents and families with the knowledge surrounding the importance of healthcare and education in their children's lives and encourage them to take a more active role in these areas of their children's lives. Parents or family members who face economic constraints will also be provided with tailoring training, enabling them to support their families long-term and into the future</p>	<ol style="list-style-type: none"> 1. Awareness camps and campaigns will be held 2. Individuals will have access to vocational and up-skilling programmes

Goal Six: Improve management effectiveness and accountability within the organisation

HOPE in India

The Hope Foundation has adopted result-based management and the specific PME (Planning, monitoring and evaluation) structures have been developed with the collaboration of ASK². Result Based Management is a means to improve management effectiveness and accountability in HOPE by involving key stakeholders in defining realistic expected results, assessing risks, monitoring progress towards the achievement of expected results, integrating lessons learned into management decisions and reporting on performance. The RBM structures, protocols and guidelines from 2015 will now also be implemented in the everyday functioning of the organization to produce effective results and functioning.

Outcome	Output
Increased team performance and the continued effective delivery of work	<ol style="list-style-type: none"> 1. KRA/KPI Matrix will be implemented. 2. The matrix will assist the organisation to measure the performance of teams and staff members
Increased accountability among managers and increased transparency within the organisation. Increased empowerment of managers to ensure the effective delivery of project activities	<ol style="list-style-type: none"> 1. Introduction of new mechanisms for organisation managers 2. Up-skilling of managers to achieve results within their sphere of control and increased authority given to managers
Increased beneficiary focus of projects for sustainability and to place the responsibility and ownership within the communities	<ol style="list-style-type: none"> 1. Increased consultation with project beneficiaries 2. Beneficiaries suggestions, feedback and criticisms will influence the project implementation
Placement of partners from India ' <i>in the driver's seat,</i> ' through capacity building for the sustainable delivery of projects	<ol style="list-style-type: none"> 1. Inclusion of partner organisations in all aspects of analysing of projects 2. Partner organisations to engage in performance measurement and management processes
Reforming the way donor agencies conducts its business operations	<ol style="list-style-type: none"> 1. Issuing new policies and procedures on RBM & following of these policies
Establishment of supportive mechanisms through the creation and implementation of new databases, guidebooks and best practice guidelines	<ol style="list-style-type: none"> 1. Training and technical assistance for managers 2. Empowering managers to effectively implement performance measurement processes

²Association for Stimulating Know How (ASK) is a capacity building organisation working with Grassroot Communities, NGO

HOPE Internationally

We recognise our responsibility to donors, sponsors and fundraisers who support HOPE. We equally recognise our responsibility to those whom we support and therefore insist on transparent operations in all activities in Ireland, the UK, Germany and the USA and in our offices and projects in Kolkata. Our membership of Dochas (The Irish Association of Non-Governmental Development Organisations), The Consortium for Street Children and Comhlámh (Irish Association of Returned Development Workers, Volunteers and Activists) ensures we are supported in keeping up-to-date on procedures and actions which impact on our work. Committed to safeguarding children, HOPE implements best practice guidelines, including child protection training and staff capacity building for all those who work directly with children and vulnerable adults.

Outcome

Through the continuous membership of credible third party organisations, HOPE's accountability, transparency and public perception will grow and strengthen, building our volunteer, donor and school contributions.

The Hope Foundation is a member of the following bodies, ensuring we are fully compliant and transparent, and adhere to the highest standard of charitable governance. HOPE commits to remaining members of each of these organisations.

Governance Body	Activity
ICTR	Membership of Organisation Signatory to Statement of Guiding Principles for Fundraising
Charities Regulatory Authority	Membership of Organisation On the Irish charity register
Governance Code	Signatory to the Code of Practice for Good Governance of Community, Voluntary and Charitable Organisations in Ireland
Dochas	Membership of organisation Signatory to the Code of Conduct on Images and Messages
The Wheel	Membership of organisation
Credibility Alliance	Membership by HOPE Kolkata Foundation

Goal Seven: Increase fundraising initiatives in India and Europe for organisational stability and sustainability

HOPE in India

HOPE will enhance and expand our fundraising events and initiatives held in India, in order to generate increased revenue from in-country fundraising for long-term sustainability.

Strategic Objectives:

- 7.1 Improved utilisation of donor databases
 - 7.1.1 Expand HOPE’s tele-calling, both in-house and through external agencies
- 7.2 Increase donor partnerships in programmes
- 7.3 Increase number of CSR events
- 7.4 Enhance HOPE’s School Social Responsibility
- 7.5 Strengthen Friends of HOPE and Volunteer base
- 7.6 Increase commercial and internet fundraising (research business and sales activities)
- 7.7 Increased internet profile and increased usage of the internet and social media platforms

Outcome	Output
Strong encouragement provided to current donors on Donor Relationship Management Programmes to participate in fundraising initiatives. Extension of current donor database through in-house tele calls utilising the existing donor tracker database, sourcing new external agencies and utilising visitor books kept at project sites	Expansion of donor database and increased usage
Establishment of a new unit in Kolkata, whose focus is on fundraising. Utilization of the new CSR mandate; in which companies with net worth of INR 500 crore, or turnover of INR 1000 crore of INR 5 crore, have to spend at least 2% of their net profit on CSR	Increased fundraising carried out in India, with particular attention on corporates, trusts, grant foundations, bequests and payroll giving
4 fundraising events and 6 campaigns will be held and 50 donation boxes placed at various places	Increased CSR events and campaigns to generate awareness and raise funds. Increased funds through donation box placements
15 schools will further engage with HOPE	Increased participation of local schools in fundraising activities and support for HOPE
Increased sourcing of new members and reduced subscription to INR 901 for volunteers, including a volunteer kit. 20 new and retained members	Increased member numbers in Friends of HOPE
Increased resource generation and increased percentage of target over the years	Increased tele-calling for additional financial support and enlarged donor database
Two new marketing executives will be appointed who, as part of their job, will harness the internet for fundraising sources.	Increased internet profile and increased usage of the internet and social media platforms for increased revenue

New focus of online work pertaining to third CSR third party avenues, business ventures, social media, third party social ventures, crowd funding, website donations and PR campaigns and branding	
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HOPE Internationally

HOPE Ireland alongside its satellite offices in the UK, Germany and USA will continue to diversify fundraising activities to generate funds for HOPE’s projects in India. HOPE will continue to adhere to best practices for transparency, accountability, monitoring and evaluation

Strategic Objectives:

- 7.8 Grow fundraising activities in Ireland to support the continued work of HOPE in India
- 7.9 Support and grow satellite fundraising offices in the UK, Germany and USA
- 7.10 Increase awareness of HOPE activities throughout communities, to generate funds
- 7.11 Expand corporate and donor support
- 7.12 Strengthen and maintain efficient, effective and transparent financial systems
- 7.13 Ensure excellent standards in governance, complying with all statutory, regulatory and reporting requirements
- 7.14 Continue to build a robust internal and external audit, monitoring and evaluation system

Activity	Outcome	Output
Increased number of fundraisers	Increased revenue and awareness of HOPE throughout communities	4 annual lunch fundraisers 2 annual golf classics 5 annual themed fundraising trips to Kolkata 55 annual community based events
Increased number of staff and fundraising initiatives in satellite offices	2.5% increase on fundraising initiatives every year, annually raising the public profile surrounding the work of HOPE	15 staff members 66 fundraisers & community events annually 77 Kolkata-based volunteers annually 43 schools & colleges annually 17 donors annually
Increased presence of HOPE nationally and locally in schools and communities, with increased school trips, volunteers & child sponsorships	2.5% increase annually, with a greater focus on school communities and volunteers who will travel to Kolkata to bear witness to the poverty and become enabled to highlight the work of HOPE upon arrival home	2 national campaigns annually 250 students visiting Kolkata annually 38 schools engaged in Immersion Trip annually 77 volunteers in Kolkata annually 328 children sponsored
Retention of current corporates	Continued and sustainable	13 continued donor support

and donors	generation of funds through consistent donor grants	
Increased number of corporates and donors	Increased funds to assist in the running of HOPE projects	4 new donors
Strengthen and maintain efficient, effective and transparent financial systems	Greater organisational transparency, further building public and corporate trust for the organisation, and generating additional revenue as a result	Implementation of financial and risks control in HOPE. Implementation of control system to executive management, including financial controls. Financial statements conducted by external accounts and issued for public viewing annually
Maintain membership with charity regulatory organisations in Ireland	Increased accountability and transparency for the organisation and building a positive rapport with the public and private spheres of economy	Continued membership of The Wheel, Dochas, ICTR, Charities Regulatory Authority and the Governance Code
Ensure high-quality reports are sent to donors in a time-efficient manner	Retention of current donors due to high-quality reporting system, which will be further utilised as an incentive to gain extra support	Bi-annual and annual reports are analysed in Head Office. Creation of donor tracking system
Continue the facilitation of annual audits	Strengthened financial processes within the organisation and greater public transparency	Independent audits are conducted annually and made public
Annual staff performance reviews	Retaining high-quality staff members for the effective and efficient delivery of work	All staff members are subject to performance reviews annually

Goal 8: Increase volunteer and stakeholder engagement

It is important for any NGO to communicate and engage in dialogue with their stakeholders; the people who can affect the organisations operations and those who are affected by it. The feedback HOPE receives from external stakeholders informs our judgement about sustainability priorities and feeds into our sustainability strategy as a priority. HOPE stakeholders include community members, children and families, local Government, police, councillors etc. We tailor our engagement processes to suit each different stakeholder group in which we engage with, through our work on the ground in Kolkata.

Outcome	Output
Increase ownership, alongside accountability of the stakeholders in each programmatic area of HOPE’s work. Depending on the interests and power of the identified stakeholders, the same can be tapped for effective implementation of the programmes and to achieve desirable results.	Improve stakeholder engagement by identifying their potential and involving them in every level of programme planning and implementation

5

SWOT Analysis

Strengths (Internal)

1. Specialised and experienced staff members for better performance and assistance, with a fair distribution in terms of gender and age.
2. Presence of systems and protocols in departments like Finance, Programme.
3. Organising various trainings for capacity building and skill development of the staffs.
4. Transparency in transactions and fund utilization.
5. Presence of proper and effective monitoring and evaluation formats.
6. Methodologies like Froebel technique of teaching, usage of IEC materials.
7. Strong management information system in place that helps in tracking the progress of the project as well as the failures.
8. Presence of exhaustive reporting formats.
9. Child Protection Policy has been reviewed, which empowers the children to raise their voice and question any practice that goes against the policy.
10. Coordination among staff.
11. Good standards of quality care and support in regards to protection home.
12. Good grass root level networking with stakeholders.
13. Proper record keeping and documentation of all programme related activities.
14. Target oriented approach enhances result based management of the programmes.
15. A good support system exists to provide professional and moral support among the staff.
16. Open to new ideas for raising funds.
17. Increased numbers of individual donor network.

Weaknesses (Internal)

1. Staff turnover in the organization.
2. Coordination between the existing departments and programme sectors
3. Induction and orientation of new staff.
4. Networking with the middle or top level stakeholders.
5. Need for a systematic hand-over protocol during an employee exit process.
6. A structured sustainability plan.
7. Communication and language problems leading to not meeting deadlines
8. A working fundraising policy not fully formulated.

Opportunities (External)

1. Proportion of wealthy Indian population is increasing thus giving us more scope for tapping Indian donation sources.
2. Availability of more Indian volunteers and interns.
3. Scope of innovative intervention model.

4. Scope of exchange of knowledge and ideas among school going children.
5. Utilization of social media for disseminating information regarding THF's work.
6. Existence of laws like Juvenile Justice Act, POCSO, RTI, Child Marriage Prevention act, prohibition of selling of addictive substances to minor gives us more scope of work.
7. Establishment of 24x7 shelter homes in urban settings to arrest vagrancy among women and children is a source of opportunity for the organization to work for.
8. Increasing CSR opportunities can help tap more resources.
9. Growth of Indian economy can help us get more donations to continue our work.

Threats

1. Extreme weather conditions delays programme interventions.
2. Political and legislative effects can affect programme strategies.
3. Corruption and Government bureaucracy can affect programme intervention.
4. Development sector has become very competitive.
5. Recession and financial gaps.

6	Risk Matrix
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The Hope Foundation Ireland’s risk matrix for operations is detailed below:

Risk	Likelihood (1-5)	Impact (1-5)	Total
Financial Risks & Funding Instability	3	3	9
Operational Risks, Staff Recruitment & Retention	3	3	9
Strategic & Governance Risks	1	4	4
Fraud, Corruption & Inappropriate Behaviour	1	4	4
Compliance and Reputational Issues	1	5	5
Health, Safety & Security Risks	2	4	8
Child Protection Risks	1	5	5
School Immersion Programme Risks	3	3	9
Volunteer Programme Risks	3	3	9
IT & Systems Risks	2	3	6
Data Protection Risks	3	2	6

Likelihood Scale

1. Rare
2. Unlikely
3. Possible
4. Likely
5. Almost certain

Impact Scale

1. Insignificant
2. Minor
3. Moderate
4. Major
5. Catastrophic

Impact	Likelihood				
	Rare (1)	Unlikely (2)	Possible (3)	Likely (4)	Almost Certain (5)
Catastrophic (5)	5	10	15	20	25
Major (4)	4	8	12	16	20
Moderate (3)	3	6	9	12	15
Minor (2)	2	4	6	8	10
Insignificant (1)	1	2	3	4	5

7	Annexure 1
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Strategic Achievements 2011-2015

The Hope Foundation’s strategic goals for 2011-2015 included:

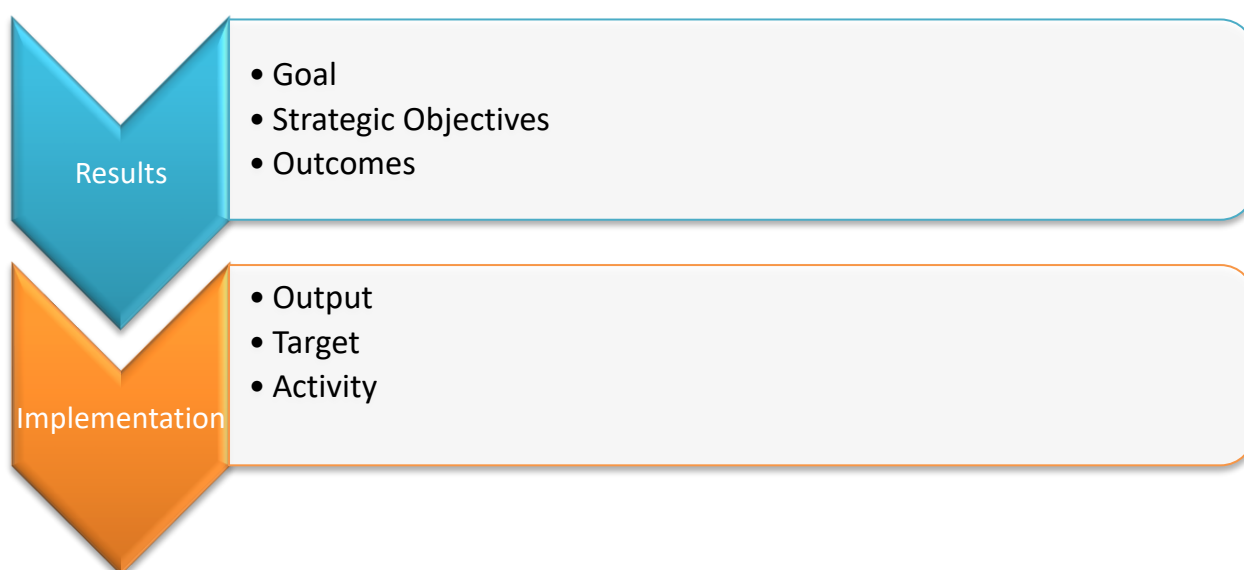
Four Strategic Goals- The Rights

1. The right to survive with dignity- Child Protection Programme
2. The right to education- Education Programme
3. The right to good health- JSS, Healthcare and HIV/AIDS Programmes
4. The right to equal opportunities- Gender Equality, Vocational Training and Empowerment Programmes

Three Strategic Organisational Goals- The Responsibilities

5. Being a champion for children, both in fundraising in Europe and elsewhere, and with the Indian Government
6. Building the capacity of local communities through empowering local partners
7. To raise funds and manage resources to ensure a sustainable and stable organisation

HOPE’s Strategic Plan 2011-2015 was tailored around the Casual Logic Framework, which is explained below.



Goal 1: The Right to Survive with Dignity

UNICEF considers street children the most vulnerable group of children with unique vulnerabilities because of the time they spend on the streets, their livelihood dependence on the streets and their lack of adult protection and care. The Hope Foundation conducted a situational analysis of its operational areas in 2014, and it was revealed that 58% of street children are aged between 12-18 years. The study also revealed that although twice as many boys live on the streets as girls, many girls engage in domestic work and are therefore less visible on the streets, and are less likely therefore to receive assistance.

The Hope Foundation operates in the metropolitan city of Kolkata, India. An astonishing 100,000 children from this city are forced to call the streets their home, lacking the most basic and essential services of clean running water, sanitation, shelter and security. This, combined with the number of children whose only shelter is makeshift shacks, raises the number to an inconceivable 250,000 children. These children are left exposed and vulnerable with little or no protection. While many children are born into street and slum living, thousands are pushed into destitution by abject poverty, overcrowding, lack of access to services, ill-health, family unemployment, abuse and neglect.

Strategic Objectives:

- 1.1 To develop our child watch programme as a model of good practice
 - 1.1.1 Develop protection homes as a refuge for street children and to ensure that each home operates a '*child first*' policy
- 1.2 To link with relevant stakeholders and partners in the areas in which we work to maximize child protection, rescue, rehabilitation and community integration
- 1.3 To ensure all child centred services operate to the highest quality standards
- 1.4 Enhance the transparency and accountability of the organisation in India

Strategic Objective 1.1 & Strategic Objective 1.1.1

Activity	Target	Output	Outcome
Run Protection homes to highest standard	320 children living in protection home environments	1,259 children in protection homes	Children have been provided with a safe and loving environment, with full access to healthcare, education, nutrition, counselling and support, empowering them to become independent and confident young men and women.
Protection Homes engaged in best practice standards	8 Protection Homes guided by best practice	Safe Guarding Committees trained on Child Protection Policy which is implemented in all 12 Protection Homes	Highest standard of quality and protection is provided to all children under HOPE's care
Operating 'child watch' rescue in partnership with local NGOs	3 partnerships through child watch	1 local NGO partnership to deliver Child Watch Programme	Partnership with local NGO has enabled the Child Watch project to reach a wider beneficiary network and ensure the needs of the most disadvantaged are met

Rescuing and rehabilitating at-risk children	362 children rescued	211 children rescued	Improved safety for children, free from dangerous home and work environments
Vulnerable and abandoned women and children rescued from the streets	30 women and children rescued	39 children and 30 mothers rescued	Increased sustainable livelihoods, leading to reduction in poverty among women and children
Children in crisis accessing appropriate supportive services	29 girls and 32 boys rescued	HOPE has rescued 111 girls and 85 boys rescued	The children's childhoods have been restored and they are now living protected and safe from abuses and violations. Coordination between police departments such as Lalbazar, the Community Police Wing, Missing Persons, Women's Grievance Cell and Immoral Trafficking Cell have enabled HOPE to work in collaboration to rescue vulnerable children in crisis

Strategic Objective 1.2

Activity	Target	Output	Outcome
Partnerships with local NGOs	14 local partners	12 partners	Improved capacity of local NGO's
Certificate course on counselling for caregivers in Government Homes	24 participants	22 participants in 2011-2013, project completed	Improved skill levels of counsellors
Counselling provided for children living in Government Homes	1,120 individual counselling sessions 623 group counselling sessions	2,096 individual counselling sessions delivered 1,192 group counselling sessions delivered	Children have been equipped with the tools to better deal with past trauma, improving their mental and social health statuses.
Government homes supported to increase their capacity	3 Government homes supported	3 Government homes supported, with an average of 350 children annually.	Delivery of counselling support and extra tuition to children in Government-run homes for their overall and holistic development

Strategic Objective 1.3

Activity	Target	Output	Outcome
HOPE Child Protection Policy reviewed	4 reviews annually	A review meeting of the Child Protection Policy was conducted every year	Enhanced and improved child protection throughout the organisation
HOPE Best Practice Manual reviewed	4 reviews annually	Best Practice Manual was reviewed once, and an external impact assessment was conducted	The external impact assessment of HOPE's health and education programmes has shaped the programme's new directions, focusing on the organisations strengths and poverty-related issues within HOPE's operational areas. This was conducted by external evaluator ASK.

Strategic Objective 1.4

Activity	Target	Output	Outcome
Membership of Credibility Alliance (India) umbrella (audit) group	Membership of Credibility Alliance	Membership achieved	HOPE's reputation publically and within the international development spheres has been heightened for their transparency and accountability

Goal 2: The Right to Education

Education is seen as one of the most crucial elements in escaping the poverty cycle. With a good education, people can go on to be employable and earn an income that is well paid. Primary education is paramount to ensuring that everybody has basic literacy and numeracy, vital for any job.

With over 40% of India's children dropping out of school before completing Grade 8, despite a recent law in India designed to provide free and compulsory education for all, it is evident that the underlying barriers to access education are not being addressed. Access to education throughout India is unequally distributed throughout socio-economic communities, regions and genders. The economic burden, lack of knowledge surrounding the importance of education and need for children to work to support families, heavily contribute to the high drop-out rates within the country. Furthermore, many of the children residing in the slum communities or on the streets on Kolkata are first-generation learners, children who are the first in their families to attend formal education.

HOPE has seen a reduction in dropout rates from 75% to 25% in its operational areas since programme establishment.

Strategic Objectives:

- 2.1 To improve children's developmental readiness to start primary school
- 2.2 To support children in the operational areas to complete primary school
- 2.3 To support all of the children living in child protection homes to complete secondary education, and third level education where possible
- 2.4 To increase school retention, completion and achievement rates among target children
- 2.5 Instil the importance of education within communities and families, especially those of first generation learners

Strategic Objective 2.1

Activity	Target	Output	Outcome
Early intervention centres/ crèches	10 crèches with 389 children enrolled	34 crèches have been established catering for the needs of 1185 children	Children have improved readiness to start primary-school
Special needs supported education	73 children enrolled	36 special needs children supported	Children with special needs have been provided with educational and holistic support improving their educational level and social skills

Strategic Objective 2.2

Baseline: In 2010, over 66% of children dropped out of primary school before completing Class 10			
Activity	Target	Output	Outcome
Coaching centres supporting children through primary education	40 coaching centres catering for 2158 children	5971 children received extra educational support	Extra tuition has enabled students to remain in school and receive higher grades, preventing drop-out.
Community peer groups to increase understanding on the need of education	24 peer groups in operational areas	331 peer educators have been trained, with 20 peer-educator groups formed	Increased number of children completing primary education and increased awareness of its importance

Strategic Objective 2.3

Activity	Target	Output	Outcome
Enrolment of children in mainstream schools	320 children enrolled	896 children have been enrolled	95% of underprivileged children from slum communities are now enrolled in formal schools. Increased number of children progressing through secondary schools and into third level
Educational sponsorship programme	5 educational sponsorship programmes	5 educational sponsorship programmes in operation	Increased number of children have received educational sponsorship, providing them the opportunity to attend school and build their educational level for a brighter and more prosperous future

Strategic Objective 2.4

Activity	Target	Output	Outcome
Education centres for street children	4 Nabadisha centres, with 220 children	712 street children's education supported. An average of 50% of children in the Nabadisha centres have been enrolled in formal education	Increased numbers of children staying in school and progressing to the next class, building on their educational levels.

Strategic Objective 2.5

Activity	Target	Output	Outcome
Community-wise stakeholder meetings	16 meetings with 450 participants	40 meetings have been held with 790 participants	Increased community participation
Mothers groups established for stakeholder meetings	24 mothers groups in operational areas	20 mothers groups in operational areas	Mothers have increased decision-making powers in their communities and families, tackling gender bias in communities

Goal 3: The Right to Good Health

Difficult living and working conditions make street and slum dwellers particularly vulnerable to ill-health. These conditions, coupled with poor access to the most basic of amenities such as healthcare, nutrition, water and sanitation and limited knowledge of their entitlements to government services, heightens their vulnerability.

A report by Save the Children in 2010 namely *'Inequalities in Child Survival: Looking at Wealth and other Socio-Economic Disparities in Developing Countries'*, confirms that India has the highest number of under-five child deaths in the world. The most common and direct causes of death include diarrhoea, measles and pneumonia, with malnutrition cited as the underlying cause in many cases.

There are a number of individual and structural challenges to improving the health and nutritional status of slum dwellers, including:

- Low literacy levels among slum dwellers (standing at 28.5% in Kolkata slums) act as a barrier to accessing health-related knowledge, prevention methods, health entitlements and accessing healthcare facilities. The NFHS also revealed that one in every five slum households is headed by women, of whom 77% have little or no education.
- Low income levels often mean that basic healthcare and medication are unaffordable. Between 2009-2011, HOPE recorded 2,360 adult and 804 child patients who attended government healthcare facilities for diagnosis but returned to our clinics for treatment as they could not afford it Government medical services.
- Every day the slum dwellers struggle with harsh living conditions in overcrowded slums. Each household has to struggle with overcrowding in their tiny homes. Poor sewerage and unhygienic living conditions make these people susceptible to a wide range of preventable and treatable diseases.
- In terms of structural barriers to healthcare for slum dwellers, issues such as identification, inability to pay, distance from healthcare resources and risk of infection as a consequence of poor living conditions, prevent government resources from reaching out to them.

Strategic Objectives:

- 3.1 To improve family and community care practices to improve survival, growth and development of young children living in the slums and on the streets
- 3.2 Empower slum dwellers to avail of mainstream services and to engage with the statutory agencies with whom HOPE is networked
- 3.3 Reduce number of paediatric HIV infections
- 3.4 Support HIV/AIDS infected children to receive quality family, community and government support
- 3.5 Support basic service maintenance in the slums to ensure the continuation of basic levels of sanitation
- 3.6 Reduce infant mortality rates
- 3.7 Reduce adolescent risks and vulnerabilities by increasing access to and use of gender-sensitive prevention information, skills and services

3.8 Provide hospital services and health care to people denied access to mainstream services

3.9 Support self-advocacy in the areas of health awareness and uptake of services

Strategic Objective 3.1

Activity	Target	Output	Outcome
Improved community sensitisation operations to ensure health care practices aid in the improvement of family survival and growth, and cater for the development of street and slum children	Establishment of awareness camps to cater for 14,463 people and introduction of awareness events like community meetings reaching 27,169 people	2455 awareness camps held with 193,992 participants, 842 video screenings held and 645 campaigns implemented	Knowledge surrounding personal, community and environment healthcare issues has improved due to the awareness camps, campaigns and videos. 80% of mothers in HOPE operational areas now have institutional deliveries and 87% of lactating mothers exclusively breastfed for the recommended time

Strategic Objective 3.2

Activity	Target	Output	Outcome
Community Health Volunteers and Sub-Community Health Groups established	1 meeting per quarter	56 Community Health Groups formed with 6427 health volunteers	Increased level of responsibility within operational areas of communities own health and environment needs and increased collaboration among communities to solve such issues. 6,876 individuals have now engaged with ICDS services for their children

Strategic Objective 3.3

Activity	Target	Output	Outcome
Comprehensive care and support programme initiated for children infected and affected by HIV	In-patient department catering for 103 children with severe illness related to HIV/AIDS	From 2011-2014 461 children and mothers supported. This project is now linked to HOPE Hospital	Reduced number of paediatric HIV cases
Anti-Retroviral Therapy (ART) supplied to children and individuals	56 patients receiving ART	From 2011-2014 93 individuals received ART. This project is now linked to HOPE Hospital	Nearly double the target beneficiary coverage received ART treatment, improving their overall health

Strategic Objective 3.4

Activity	Target	Output	Outcome
Home visits conducted to raise awareness and encourage families to support	50 home visits	362 visits conducted	Family perceptions on HIV/ AIDS has improved

infected children			
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Strategic Objective 3.5

Activity	Target	Output	Outcome
Development of Clean and Green Committees in slum areas	64 community members trained	106 Community Environment groups established with 1246 training sessions undertaken	Improved hygiene and sanitation in HOPE supported slums
Ongoing maintenance of water and sanitation services	18 sites maintained	173 public utilities constructed (such as toilets, drainage systems and water supply units)	Improved health due to improved water and sanitation within slums
Establishment of community-based Water and Sanitation Committees	23 WATSAN communities established to ensure community based management of facilities	100 WATSAN Committees formed	Improved health and sanitation practices within slum communities

Strategic Objective 3.6

Activity	Target	Output	Outcome
Early identification camps to support childhood diseases most prevalent in underprivileged populations	10 early identification camps attended by 404 people, 96 of which were identified	From 2011-2013 12 camps organised, with 412 participants, in which 130 patients were identified. Project completed.	More than the target beneficiary numbers received support, advice and medical treatment, improving the healthcare statuses of children in the slum communities. 99% of women in the slum communities have received full ante-natal check-ups
Immunisation camps and coverage focused on young people	47 camps conducted with 2014 children receiving immunisation	37 camps organised with 1277 children immunized in 2011-2013. The Government now provides immunization services	98% of the children in HOPE operational areas are fully immunized. The importance and need on the ground for the project was also captured and therefore now implemented, by local Government.
Surgical corrective procedures	150 children to undergo surgery	268 children underwent corrective procedures between 2011-2013. Project discontinued	Children have had their childhoods restored and abilities to walk, read and write restored through corrective surgeries.

Strategic Objective 3.7

Activity	Target	Output	Outcome
Video magazines produced and screened on preventative information and services by Community Video	2 video magazines on safe drinking water and ICDS services with prevention methods	42 video magazines produced, with 842 screenings held	67.5% of the slum population in which the videos were screened felt they had a greater understanding of relevant healthcare issues over the timeframe

Unit			
In-house sexual health awareness	4 sexual health information sessions provided in protection homes and open dialogue with 400 children	22 sexual health information sessions conducted	Adolescents had an increased level of awareness surrounding sexual health awareness

Strategic Objective 3.8

Activity	Target	Output	Outcome
Medical rehabilitation of orthopedically disabled children	1150 patients treated in 98 clinics	2124 patients treated in 178 clinics. Project discontinued	Children have been empowered to walk through healthcare clinics
Provision of services for mentally ill individuals living on the streets	183 homeless mentally ill patients identified and 216 receiving treatment	360 new patients identified and 475 patients receiving care	Patients have been provided with counselling and support services improving their mental health status. This project has expanded into 141 wards throughout Kolkata and 51% of patients have been placed and continue to maintain employment
Child focused hospital service provision	400 accessing in-patient care and 7100 patients accessing OPD services	19957 patients treated in OPD 9234 pathological tests, 1111 ECG, 831 USG, 200 Echocardiography, 15 Collar Doppler Test, 30 EEG, 3209 X-Rays, 912 children immunized, 2148 IPD and 168 surgeries conducted	Improved healthcare statuses of children and individuals throughout Kolkata, increased access to medical support, advice and medication due to the hospital
Mobile clinics in slum communities		Mobile clinics referred 12,633 patients to government hospitals and 5259 patients referred to Kolkata Municipal Corporation health centres	Collaboration with Government-run healthcare facilities has provided patients with sustainable healthcare services

Strategic Objective 3.9

Activity	Target	Output	Outcome
Advocacy meetings held within communities	3 advocacy meetings to be held with 85 participants	175 advocacy meetings held	Greater awareness among communities, businesses, local police, councillors and Government officials to the need and struggles of those disadvantaged within their communities. In the past 5 years, these meetings have helped bring improved drinking water to communities, greater access to ICDS services, improved

			drainage and introduced garbage disposal
Establishment of awareness camps	Outreach of awareness camps to 14,463 participants	1,690 awareness camps conducted with 155,908 individuals participating	Due to the awareness camps, community members have increased knowledge surrounding healthcare-related to Government schemes they can avail of. In HOPE operational areas, 20% of the population now have below poverty-line cards, 69% have ration cards and 49% now have birth certificates

Goal 4: The Right to Equal Opportunities

The speed of a nation's development is directly related to both the quantity and quality of the vocational skills attained by its workforce. The wider the range and the higher the quality of vocational skills, the faster an economy can grow, in turn creating greater prosperity within a nation. In the coming decade, a further 8 million people will enter India's labour force every year, making the competition to secure employment opportunities more difficult, in particular for those stemming from below poverty-line families and communities, with little educational background. This will force millions into informal and underpaid work as daily labourers and domestic cleaners, leaving thousands more forced to beg to secure a meagre meal a day for survival. Currently, 42% of the Indian population are forced to live below the international poverty-line.

The Planning Commission of India is also promoting vocational training and skill development in order to provide greater quality employment for Indian youth, stating that this will counter the challenges of poverty and unemployment across the country. In fact, in the run up to the publication of the 12th Five Year Plan, the Planning Commission of India has proposed setting up of a separate Ministry of Vocation, Education and Training of Skills at state level. The agenda also includes establishing skill development centres at block levels of every district in the country, setting up institutions for the training of trainers, promoting vocational training at school level and further exploring public-private-partnership models for the infrastructure needed.

Strategic Objectives:

- 4.1 To reduce gender disparities in relation to increased access, participation and completion of quality education
- 4.2 To ensure that severely disadvantaged children and women have equal opportunities and access to services

Strategic Objective 4.1

Activity	Target	Output	Outcome
Pre-primary education access for girls	201 girls and 188 boys supported through crèches	52% of children supported in early intervention/ crèches are girls	Increased levels of education among girls has strengthened their position within communities and further highlighted the importance of equal education among both girls and boys
Supported education coaching of girls	1,166 girls and 992 boys accessing coaching support	55% of adolescents supported in coaching centres are girls	Increased educational opportunities for girls, keeping them in the formal school system and providing them with increased opportunities after completion of education. An average of 53% of children accessing coaching centres in HOPE are female

Strategic Objective 4.2

Activity	Target	Output	Outcome
Substance-misusers supported to access education and counselling support	88 accessing services	296 individuals accessing services	Individuals have accessed counselling and other supports, steering them into educational opportunities and away from substance abuse
HIV/AIDS infected and affected children supported through Protection Homes	22 children supported	102 children supported.	HIV/AIDS infected and affected children have restored childhoods and access to healthcare and education, which they otherwise would have went without
Children engaged in substance abuse misuse supported to access detoxification and rehabilitation services	50 adolescents accessing rehabilitative care and counselling	140 children and adolescents accessing supportive services	Children have accessed detoxification centres and received rehabilitation to halt addictions and provided with a fresh start to education
Women engaged in vocational training and skill development	66 trainees	349 women trained	5 times the targeted number of women have been provided with the skills and knowledge to gain employment or establish their own business, increasing the economic status of their families. Approximately one quarter of the women gain employment immediately after course completion. Exhibitions are also held to demonstrate the work of the women to gain an income. The waiting list for HOPE's vocational training is at an all-time high, so HOPE has introduced two new units to cater for the demand
Trafficked women and children engaged in support services	13 rescued	55 women and children rescued	Rescued from trafficking, 55 women and children have been restored home and provided with support to improve their economic and social situation, to prevent other trafficking incidences
Income generation support provided	20 people	92 individuals supported	Almost 5 times the targeted amount of individuals have used their new skills to establish their own businesses, increasing their income and enabling them to better provide for their families. 181 individuals have directly benefitted from self-help groups
Access to specialised non-verbal counselling therapies	84 children accessing dance therapies	106 children accessed dance therapy	Improved social and behavioural status of children through specialised therapies, providing children with the tools and space to cope with their past traumas and support them to become strong and independent adolescents

Goal 5: Being a Champion for Children

Over 60 million children have sacrificed their childhood to enter India's workplace, often working long hours in dangerous conditions just to meet their family's survival needs. India has the highest number of child labourers throughout the world. Without education, these families are stuck in abject poverty, working as daily labourers as young as 3 years old.

Children's development is as important as the development of a country's resources, as the children of today will become the future drivers of a country tomorrow. India currently holds the largest child population in the world, yet it falters in terms of child welfare, with over 250,000 children forced to reside on the streets or in ill-fitting semi-permanent shacks in Kolkata alone. India has renewed its commitment to children time and time again, however much remains to be done. Children are the most vulnerable and at-risk to exploitation, abuse and neglect. The importance of collaboration among communities, NGO's, Government offices and police departments cannot be underestimated, as here lies the key to sustainable and future development.

Strategic Objectives:

- 5.1 To increase Government awareness of child rights and child protection
- 5.2 To work towards effective legislative protection and enforcement in this area
- 5.3 To facilitate children and families to access education, health and employment, for a successful future
 - 5.3.1 To support the participation of families, especially children, to become self-advocates and enable their participation in their own development

Strategic Objective 5.1

Activity	Target	Output	Outcome
Participation in Child Begging Committee	4 meetings annually	4 meetings held	HOPE has become an active member in the Right to Education and Child Protection Forum to further spread awareness and highlight issues and solutions surrounding child begging
Community based awareness programmes	Engage with 3 awareness campaigns	Implemented the following global annual awareness programmes: Solas Campaign, International Day for Street Children, Anti-Drugs/ Trafficking Day, SHEis Campaign, World Literacy Day	Utilising knowledge from the ground, HOPE has participated in campaigns which have heavily impacted on our operational areas, increasing knowledge of the issues and creating a forum to create preventative solutions among community members

Strategic Objective 5.2

Activity	Target	Output	Outcome
Networking and capacity building with local and national	5 networking meetings annually	10 meetings held, with 47 participants involved	Networking with local, national and other stakeholders has increased awareness of HOPE's work throughout Kolkata. For example our Nabadisha programmes

Government, stakeholders and the police			have been established in partnership with the Kolkata police
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Strategic Objective 5.3 & Strategic Objective 5.3.1

Activity	Target	Output	Outcome
Community based awareness initiatives, community meetings and camps	20 awareness camps with 657 participants and 16 stakeholder meetings with 458 individuals	180 awareness camps held with 9531 individuals participating in the camps	Post-evaluation surveys revealed that individuals had an increased knowledge and understanding of healthcare, educational and Government entitlement services after the camps

Goal 6: Building the Capacity of Local Communities

Strategic Objectives:

- 6.1 To maximise the capacity of HOPE's local NGO partners, through training, development and up-skilling
- 6.2 To ensure each of the local partners supported by HOPE implements stringent management, governance and delivery practices in line with the HOPE ethos
- 6.3 To work at all times through local groups, organisations and partners to maximise participation by local people in devising, developing and implementing development interventions
- 6.4 To recognise the value of staff and volunteers through capacity building, training and celebrating achievements

Strategic Objective 6.1

Activity	Target	Output	Outcome
Training and up-skilling sessions	1000 partner members/ community stakeholders trained	2,740 partner members and stakeholders underwent training	Staff and community members have an increased skill-level to ensure the continued and increased effectiveness of their work

Strategic Objective 6.2

Activity	Target	Output	Outcome
Auditing membership of Credibility Alliance and financial monitoring	Annual external audit and placement of a finance officer in each project	Annual external audit completed and finance officer designated to each project	Successful external audits have been completed yearly and increased staff have been appointment to manage the financial aspects of each project for greater organisational accountability and transparency

Strategic Objective 6.3

Activity	Target	Output	Outcome
Quarterly meetings	Quarterly meetings with each partner	Quarterly meetings held every year, with a research project conducted in 2012	Quarterly meetings have enabled HOPE to assess projects against projected targets and objectives and alter projects where necessary if they outcomes are not being achieved

Strategic Objective 6.4

Activity	Target	Output	Outcome
Training of volunteers and staff	Pre and post training	Pre and post departure training conducted with every individual	Training of staff and volunteers has ensured individuals enter the organisation with a good level of knowledge surrounding HOPE's work. Staff and volunteers undergo continuous training and up-skilling throughout the year to ensure their work remains at a high standard and objectives are delivered

Goal 7: To Raise Funds and Manage Resources to ensure a Sustainable and Stable Organisation

Strategic Objectives:

- 7.1 Grow fundraising activities in Ireland to support the continued work of HOPE in India
- 7.2 Support and grow satellite fundraising offices in the UK, Germany and the USA
- 7.3 Increase awareness of HOPE activities throughout school communities to generate greater funds
- 7.4 Expand corporate and donor support
- 7.5 Strengthen and maintain efficient and transparent financial systems
- 7.6 Ensure excellent standards in governance, complying with all statutory and reporting requirements
- 7.7 Continue to build a robust internal and external audit, monitoring and evaluation system

Strategic Objective 7.1

Activity	Output	Outcome
Increased number of fundraising events annually	2 Golf Events, 2 annual lunches, 1 annual ball, 4 overseas trips (1 walk, 1 yoga trip, 1 HOPE U Can Paint trip, 1 photography trip) and 52 community based events	Increased financial support, awareness generation and networking opportunities in Ireland and internationally

Strategic Objective 7.2

Activity	Output	Outcome
German Office Growth	Recruitment of 1 fulltime member of staff	Resource mobilisation and increased access to European funding.
UK Office Growth	Recruitment of fundraising specialist	Increased brand growth in UK and increased access to funding opportunities

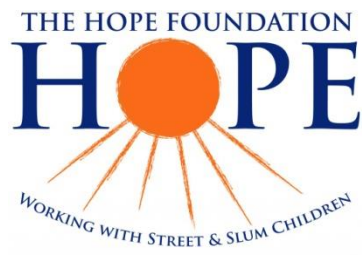
Strategic Objective 7.3

Activity	Output	Outcome
Increased school groups participating in overseas immersion programme	10% participation growth annually	Increased partnership development with educational institutions, fundraising and awareness generation

Strategic Objective 7.4

Activity	Output	Outcome
Donor Group Growth	5 new corporate donor groups	Long-term stability improved

End of Document



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