CATHOLIC RELIEF SERVICES
UNITED STATES CATHOLIC CONFERENCE
INDIA PROGRAM

ANNUAL PUBLIC SUMMARY OF ACTIVITIES
1983
Catholic Relief Services—USCC is an International Non-Governmental Organisation holding Category II accreditation with the U.N.’s Economic Social Council (ECOSOC). The Organisation was first founded in 1917 and reactivated in 1943. It represents the American Catholic Community.

The Organisation’s main purpose is to mobilize resources, both financial and material, and to make these readily available to local social welfare agencies throughout the world for programs designated to aid the people of the developing countries of the world community.

Through Catholic Relief Services (CRS) these resources help support programs whose thrusts are as follows:

- Food and Nutrition
- Social-Economic Development
- Social Welfare
- Emergencies/Disasters
- Refugee Services

CRS conducts programs of assistance in countries throughout Africa, Asia/Pacific, the Middle East/Mediterranean Basin, and Latin America. Its main financial support is received from its annual nationwide fund raising campaigns in the Catholic Churches of the United States. Other financial, material and manpower support is received from Foundations, Churches, Private Groups or Institutions, Inter-governmental organisations, Governments, fund-raising appeals and organisations in Australasia, Europe, North America and local governments/institutions. CRS programs annually serve 14 million needy women, men and children of all races and religions in most needy countries around the globe. The worldwide value of all CRS programs was in excess of U.S. Dollars 325 million last year.
CATHOLIC RELIEF SERVICES – U.S.C.C.

Annual Summary of Activities
1983

Catholic Relief Services has a presence in 70 countries of the developing world, providing disaster relief and development assistance. In 50 of these countries CRS has a Program Director and Staff, while in the remaining countries assistance is provided through local organisations, agencies or individuals known to CRS. CRS has its World Headquarters for these programs in New York, with the global program divided into 3 Regions. The CRS-India Program forms part of CRS Eurasia Region which includes North Africa, Asia and the Pacific, under the supervision of a senior Director in New York.

CATHOLIC RELIEF SERVICES—INDIA PROGRAM

CRS became an official agency in India in 1951 with the signing of the Indo-U.S. Agreement. Under this the two governments provide the following:

The U.S. Government
Food for Peace Program commodities and the ocean freight.

The Government of India
Duty-free entry of the food commodities, medicines and other relief items for the poor and needy in India. It also provides free warehousing at the port of entry and free inland transportation to CRS Consignees in India.

CRS cooperates with the United States Agency for International Development (USAID), the Ministry of Social Welfare and the Department of Food of the Government of India in matters related to the Indo-U.S. Agreement.

The Food Corporation of India (FCI) handles the food and other supplies at the Indian ports of entry. CRS currently uses 4 ports to receive supplies: Cochin and Bombay on the West Coast and Madras and Calcutta on the East Coast.

From the ports, supplies are sent to Consignees throughout India, who in many cases are Diocesan Directors of Social Service Organisations. Consignees in turn channel the supplies to Distributors who have organised the actual programs in which the supplies are used. CRS cooperates with approximately 165 Consignees and 6,500 Distributors located throughout the country.
The Headquarters of the CRS India Program in New Delhi coordinates and supervises the program at the national level. To monitor and assist in developing the various programs, CRS has 5 Zonal Offices in India. The areas administered by each Zonal Office are:

**Bombay**: Gujarat, Madhya Pradesh, Maharashtra, Goa, Daman, Diu and North and West Karnataka.

**Calcutta**: Assam, Arunachal Pradesh, Bihar, Manipur, Mizoram, Meghalaya, Nagaland, Orissa, Sikkim, Tripura and West Bengal.

**Cochin**: Kerala and South West Karnataka.

**Delhi**: Delhi, Haryana, Himachal Pradesh, Jammu & Kashmir, Punjab, Rajasthan and Uttar Pradesh.

**Madras**: Andhra Pradesh, Pondicherry, Tamil Nadu and South & East Karnataka.

In India, CRS has concentrated on programs which attempt to provide the basic human requirements of food and medicines, as well as resources to help people to help themselves. In our program philosophy, we follow four basic principles:

1. To demonstrate Christian concern for the human needs of the poor;
2. To render assistance to alleviate their immediate needs;
3. To support activities of people struggling to overcome the causes of their poverty;
4. To collaborate with groups of good will.

Programs are never imposed on the participants; they are developed in conjunction with local groups, based on the specific needs felt by the community.

The dollar value of the CRS India Program during 1983 was approximately $59 million.

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A child is the only known substance from which a responsible adult can be made.
THE MAJOR PROGRAM ACTIVITIES OF CRS/INDIA

I. Food Assistance
   A. Maternal and Child Health/Nursery Creche (MCH/NC)
   B. School Feeding (SF)
   C. Other Child Feeding (OCF)
   D. Individual Health Cases (IHC)
   E. Food For Work (FFW)
   F. Emergency Assistance

II. Funded Projects
   A. Socio-Economic Development
   B. Help-A-Child (Sponsorships)
   C. Emergency Assistance

III. Medical Supplies
   Distribution of medical supplies received through the Catholic Medical Mission Board (CMMB)

This report is intended to highlight several of the above activities.

You have only failed when you have failed to try.
If a dozen people die in an accident or a few hundreds die in a cyclone or flood it is big news and attracts so wide a notice that the entire administration rushes to the help of the affected and the afflicted. But every day about 40,000 children die silently in their infancy due to malnutrition and preventable diseases and this hardly arouses public conscience.

— Indian Express

Today malnutrition has emerged as the major "health problem" of the country. Deaths of children under five years account for nearly 50% of the total number of deaths in the community, whereas in affluent countries it is 2 to 4% only. Malnutrition is a major underlying factor responsible for the high child and maternal mortality in our country. One out of every fifty women in the reproductive age period dies during pregnancy and 15 to 20% of such maternal deaths are attributable to nutritional anaemia. The dimension of the nutritional problem in India is such that apart from having high maternal, neo-natal and infant mortality rates almost a quarter of the population at any given time is malnourished.

Between 2 to 5% of infants and preschool children are estimated to be suffering from severe protein-energy malnutrition — a
sort of slow starvation. Almost 15% of the children admitted in the hospitals suffer exclusively from nutritional deficiencies, and about 90% of preschool children suffer from growth retardation. The mental retardation caused by severe malnutrition early in life is not so easily visible. Every year 15,000 Indian children become blind before the age of six due to Vitamin A deficiency. The condition of malnutrition is not to be looked at as a disease only but also as a culmination of many factors. Some of the major factors responsible for malnutrition are poverty, low per capita food availability, superstitions, customs, ignorance and lack of education, faulty food habits and cooking methods, poor sanitation and hygiene, inadequate medical facilities, etc.

The Maternal and Child Health Program, a major program of the government, is given top priority by CRS. The program, initiated by CRS as early as 1969, seeks to improve the quality of life of the vulnerable sections of the society (pregnant mothers, nursing mothers and the preschool children) through interrelated services including supplementary food, immunization and basic medical care. To instil an awareness among the participating mothers, CRS organised a pilot Nutrition Education Project in 1977 to teach the mothers of preschool children the basic need for immunization, child care, nutritional value of inexpensive local foods, and the importance of good sanitation and hygiene in preventing diseases.

In 1981 CRS India designed the Targeted Maternal and Child Health Education Project (TMCHEP). This project specifically targets the "at risk" vulnerable groups, promotes community awareness and provides education about the crucial importance of the health development of the child. The "at risk" group includes the expectant mothers, nursing mothers and preschool children up to the age of 36 months and II and III degree malnourished children in the age group of 37 to 60 months. CRS believes that the dispensing of supplementary food is "like treating the disease alone and not the patient". Therefore, the comprehensive targeted maternal and child health education program, which is a major intervention program of CRS, is being organised all over India through 2,500 centres to render the following services:

a) Organising non-formal Nutrition Education classes for the recipient mothers in the field of nutrition, child care, health, hygiene, sanitation, breast feeding promotion and use of local low cost nutritious foods.

b) Conducting day-to-day home visits to the recipient houses to follow-up on their understanding of the imparted knowledge and give guidance.

c) Periodical weighing of the enrolled malnourished children to monitor their growth pattern using growth charts provided by CRS.

d) Organising regular immunization programs to prevent major childhood diseases.

e) Promotion of use of indigenous oral rehydration mixture to combat dehydration during diarrhoea.

f) Conducting regular clinics for the "vulnerable" mothers (ante-natal checkup) and children to give timely preventive medicines and monitor their health status.

Distribution of Iron, Vitamin 'A' solution to prevent nutritional problems, i.e. Anaemia and Night Blindness.
In 1977, a group of 20 young men approached a Nagpur Social Worker, Mrs. Leela Chitale, and confided to her the problems of their community. The community, being very poor and backward, requested Mrs. Chitale to suggest ways to improve their situation.

Mrs. Chitale accepted their invitation and began visiting their slum community every Sunday. She was very much disturbed not only at the appalling condition of the slum, but also by the community's lack of initiative. She then decided to direct her efforts to the mothers and children. Mrs. Chitale approached CRS in

Food Aid as a Catalyst for Community Development
—Nagpur, Maharashtra

The above services rendered at the TMCHEP centres help in the early detection of nutritional deficiencies and arrests maternal malnutrition and thereby helps prevent the newborn from being a victim of malnutrition. The TMCHEP is operated through a net-work of 250 Consignee Nutrition Coordinators who are responsible to train 5,000 local women leaders as aides/health workers to work at the field level to impart simple, specific messages on child care, breast-feeding, use of greens in daily diet, advocating oral rehydration mixture, etc. The extent of understanding of this knowledge by the mothers is monitored and supervised by these local aides/health workers through regular home visits. Community surveys are conducted to identify the "at risk" mothers and children and to assess the mortality and morbidity rates in the community from time to time. It is noteworthy to mention that the participating mothers have shown a willingness to share a nominal sum towards the administration costs of the program, which has made CRS more confident of implementing TMCHEP and conducting trainings at various levels to run the program effectively and efficiently.

Following is a report of such a program in Maharashtra:

Energy Behind Development
i) Standing : Local Aides
ii) Sitting : Centre Personnel
iii) Sitting : Youth representatives.
early 1978 and was sanctioned a program for 25 MCH beneficiaries. In those early days the food distributions were done under a tree as there was no suitable room available. The community, at first suspicious about the Social Worker's intentions, gradually came to realise that their suspicions were ill-founded and after three months, a member of the community offered her verandah free of charge so that the food distribution and mothers' education would move indoors. Six months later the clinic moved into an abandoned building which was then repaired through the community's voluntary labour. This rehabilitated building now serves as the Community Centre.

Since 1978, Mrs. Chitale's work has evolved from a simple nutrition program to a multifaceted integrated community development program. Today the centre provides 12 services: (1) Health checkup for all and an emphasis on area cleanliness and sanitation (2) Food distribution (3) Education for mothers (4) Balwadi (Day Care) (5) Coaching classes for school children (6) Mahila Mandal (Women's Club) (7) Bhajan Mandal (8) Cultural activities for youth (9) Excursions (10) Sending representatives from the community for various outside educational conferences (11) Assistance to individuals for income generating projects and (12) Legal aid.

Since 1978, Mrs. Chitale's MCH Program has increased from 25 to 900 recipients and the slum has been completely transformed.

The community now has access to piped clean drinking water from the Municipality, the streets are clean and public latrines have been built.

The slum residents are aware of their rights and have the confidence to pursue them. The people no longer behave as individuals but as a community. Thus, there have been many positive changes in the slum community since the group of 20 young men first approached Mrs. Chitale in 1978.

What has made all this progress possible? Mrs. Chitale's answer is that the food supplied by CRS has played an effective catalytic role in organising the community.

**FOOD FOR WORK (FFW)**

The objectives of a Food For Work (FFW) Program are to achieve a needed agricultural/economic and community improvement by providing commodities to support unemployed and underemployed workers. The program is an effective way to combat rural poverty. The immediate benefit derived by the worker is the wages he earns in the form of Title II Food Commodities. The immediate benefit derived by the community is the asset created.

In 1981-82 USAID India conducted an evaluation of the CRS FFW Program in India. This evaluation consisted of eleven studies.

The studies revealed that the FFW program is having a positive effect on development in rural India. Activities such as land-levelling and minor irrigation resulted in increased cropped areas (range from 11%—32%), increased areas irrigated (range from 26%—100%), and increased values of agricultural output (range from 40%—131%) per beneficiary. The studies also revealed that the decentralized nature of the program and the sincere dedication of counterpart agencies makes the CRS program effective in reaching the very poor in remote rural areas. It also shows that the program is providing approximately 21% of the recipient household's annual employment. As a phase two component of the evaluation, a built-in monitoring and evaluation system is being developed which will help the project implementors plan FFW projects more effectively.

The following is a brief report of a FFW Project in Maharashtra:
Community Irrigation Well — Maharashtra

A FFW project which emerges in response to the felt need of a community and which is implemented with community participation combined with outside resources can be an effective means for promoting community development. The community irrigation well at PARNER in Maharashtra State is an example of how successful projects can be if they are planned with vision and a mission.

A group of five farmers who have adjoining landholdings up to five acres each collaborated for an irrigation well project. The farmers signed a combined bond stating their interest in a well and in irrigating their crops. The site of the well was selected on the land of a farmer where the probability of finding water was ascertained.

FFW met only the unskilled labour component of the operation. From each participating household, however, one person donated free labour for the project. The program was linked with the Integrated Rural Development Program (IRDP) of the Government of India. Hence the bank loan sanctioned was utilised to meet the cost of skilled labour, pumpset, pipe line, etc.

When the irrigation started, a crop plan was made indicating how many acres each farmer could irrigate and the type of crops to be grown. Each family had to grow at least one fourth acre of green fodder so that the family could keep milk-giving animals. An individual was appointed by the irrigation group to manage the distribution of water, operate and maintain the pumpset and the required records, etc. All these related expenditures are met by the payments from the participating farmers, which are made according to the number of acres irrigated.

This community irrigation project, apart from creating a productive asset and generating direct and indirect employment, has facilitated the promotion of an irrigation "society" which can be a catalyst for further collective development efforts.

Another report from Kerala follows:

Rubber to the Poor — Kerala

One of the most imaginative and innovative projects for the development of poor agricultural workers and marginal land owners has been undertaken by the Malanadu Development Society of the Kaniirapally Diocese in Kerala. This project, aptly named "Rubber to the Poor", aims at doubling or even trebling the annual income of these poor farmers who have been encouraged to...
join the scheme by growing rubber trees (20 in an area of 0.01 acres) on the uncultivated land and harvesting the resultant latex or raw liquid rubber. This will still leave them ample time to cultivate the basic food stuffs needed for their families. The normal beneficiaries of this project are farmers owning land between 0.01 and 0.2 acres. By promoting intensive cultivation on limited areas using scientific principles, the Society aims to obtain maximum results for the beneficiary groups.

The Food For Work assistance, provided by CRS helps compensate the farmers while they work on their own small plots of land. These workers have accomplished the digging of 250 thousand rubber pits each 2' - 2' x 3' (total work 30 lakh cu. ft.) and a number of platforms each 1' 5' x 100' (total work 1,250 lakhs cu. ft.). In return, they received 124.5 M'Ts of food grains and 4.3 M'Ts of Salad Oil as FFW assistance, valued at US $52,300 (Rs. 523,000 -). A further commitment of 80 M'Ts grain and 2.8 M'Ts Salad Oil has been made for 1984. This assistance is a very important component in the project.

Misereor of Germany has provided funds to purchase planting materials and fertilizers and to meet the administrative and organizational expenses of the project. The Government of India organization, known as “Rubber Board of India” is involved in financing the project through subsidies to the smallest farmers who qualify for their assistance. All other assistance relating to submission of applications, scrutinization, field verification, etc., for scientific rubber cultivation and implementation of the CRS-FFW projects is given by the Malanadu Development Society.

Some 2,782 farmers are participating in the project. They are organised into 22 local units for administrative purposes with a trained supervisor at each unit, giving full time guidance, help to control plant disease, and technical assistance in the proper use of farm inputs. The entire project is supervised and administered by a team of four Malanadu technicians.

The need of raw rubber for several industries such as manufacturing tyres, making of foam rubber, rubber goods, medical equipment and chemicals, assures a bright market as India’s production of rubber is insufficient for its own domestic needs. After a period of six years a participating farmer will be able to tap his trees for latex producing a daily average of 2 Kgs. of dry rubber content from 20 trees and earning Rs. 30/- a day for 140 days or US $420 (Rs. 4,200/-) per year according to the present domestic price of rubber. After allowing for an annual maintenance expenditure, the smallest farmer of the group can still earn an additional annual income of US $350 (Rs. 3,500 -).

It is hoped that this project will be a great success in raising the socio-economic standards of the poor farmer and will encourage other farmers to undertake similar activities.

Life's greatest thrill is tomorrow.
EMERGENCY ASSISTANCE

As in the past, CRS has been prompt in responding to appeals to assist disaster victims adversely affected by natural or manmade calamities in the different states of the country.

During F.Y. '83 CRS has provided 430 M/Ts. of Title-II food valued at U.S. $ 183,945 (Rs. 1,839,450) towards the relief of 137,185 beneficiaries. Of these, 47,237 were flood affected victims in the states of Gujarat (2,200), Bihar (3,200), Orissa (19,000), Meghalaya (1,452), Andhra Pradesh (6,000) Uttar Pradesh (13,385) and Rajasthan.

Food Packets with ready to eat local foods purchased by CRS/LWS/MCC & OX FAM.

Cyclone Relief - CRS Temporary Shelter.
affected by hailstorm in Assam, 5,500 by cyclone in Andhra Pradesh, 44,920 by drought in Bihar (44,000) and Orissa (920); 19,596 by riots in Assam and 18,235 by fires in Orissa (2,000), Andhra Pradesh (14,579) and Tamil Nadu (1,656).

CRS has also provided 23 M/Ts of EEC Milk valued at US $35,235 (Rs. 352,350) towards the relief of 88,804 beneficiaries. Of these 49,580 were affected by drought in Bihar, 5,500 by cyclone in Andhra Pradesh, 11,000 by riots in Assam, 22,724 by fires in Andhra Pradesh (21,868) and Tamil Nadu (856).
SOCIO-ECONOMIC DEVELOPMENT

During 1983 CRS India continued to provide financial assistance to various types of project activities aimed at helping the disadvantaged groups to become self-reliant. A total of 69 projects were assisted during the year with grants totalling U.S. $486,572 (Rs. 4,865,720). Of these 34 were micro projects, representing grants up to U.S. $500 (Rs. 5,000). Assistance to the remaining projects ranged from U.S. $2,500 (Rs. 25,000) to U.S. $25,000 (Rs. 250,000). The activities supported under these projects include Mother and Child Health Education, training to improve food storage techniques, construction of better storage structures, enhancing food production through the provision of seeds and fertilizers, establishment of kitchen gardens and back-yard poultries, women's development program, training of handicapped persons and assistance to self-employment programs, etc.

HELP - A - CHILD

Under the Help-A-Child Program 726 children were assisted in getting sponsorship assistance amounting to U.S. $6 (Rs. 60/-) per child per month. Through the National Council of Catholic Women (N.C.C.W.) and the Holy Land Christian Mission (H.L.C.M.) CRS had found individual sponsors in the U.S. for these children. In addition to sending the regular contributions through CRS, the sponsors also correspond with the children, send greetings and gifts for their birthdays and other festive occasions. The N.C.C.W. assisted 455 children through sponsorships valued at U.S. $42,352.45 (Rs. 423,524.50), while the H.L.C.M. helped 271 children to the extent of U.S. $18,553.60 (Rs. 185,536).

Funds were also provided by the German Aid and the Swiss Aid to Tibetans specifically for the education of Tibetan children and other Tibetan projects. These respective contributions were U.S. $77,074.96 (Rs. 770,749.60) and U.S. $57,154.12 (Rs. 571,541.20).

The following report cites the activities of Hayden Hall, Darjeeling:

Hayden Hall Institute - Darjeeling, West Bengal

Surrounded by the lofty Himalayas, Hayden Hall aspires to meet the needs of the poor and deprived families in these remote mountain areas, and give them a helping hand to survive and develop.

Hayden Hall Institute, Darjeeling was started in 1972 as a Social Service Centre by the North Point Alumni Association. Fondly named after Rev. Fr. Edward John Hayden, S.J., who worked there from 1936 to 1971, Hayden Hall members still seek to live by his inspiring vision—"The only practical proof that we have accepted God and His love in our lives, is our outgoing response to our neighbours in automatic deeds of service..."

Under the able guidance of the present Director, Rev. Fr. E.P. Burns, S.J., Hayden Hall's activities have increasingly embraced the lives of the poor, disabled, rejected and homeless. It is now a registered society with a Governing Body. At present there are 45 full-time staff of lay people including senior doctors, para-medics, laboratory technicians and health workers. Hayden Hall has always taken pride in its

Medical Relief Supplies & Equipment

CRS continues to give priority for providing assistance to public health improvements in the developing countries. Therefore, CRS has been supporting medical institutions, dispensaries, clinics and hospitals in India by donations of medicines and medical equipment. The major donor is the Catholic Medical Mission Board (CMMB) of the United States of America. The Catholic Hospital Association of India (CHAI) has been rendering valuable services in coordinating this program through its member institutions. The total value of the medicines and equipment received during CY 1983 was US $1,044,595 (Rs. 10,445,960).
involvement with and dependence on the lay people to manage the entire program. Individuals must come forth to help their own people—this has always been their developmental philosophy.

The ethnic groups of the area are Nepali, Lepcha and Bhutia, people who depend mostly on agriculture for their living. About 20% of the people are landless, 75% are very small farmers working on hilly, rocky land and 5% are employed as labor on tea plantations. For the majority of the people, the annual income is less than U.S. $180 (Rs. 1,800).

A large percentage of the population suffer from chronic infections or deficiency diseases—especially tuberculosis, goitre, eye cataracts, protein-calorie malnutrition, etc. Almost all the ailments are preventable through adequate nutrition and simple preventive health measures.

Hayden Hall operates multiple development activities, including CRS Title II Food Programs under Maternal and Child Health, School Lunch and Individual Health Cases categories which cover both urban and rural areas of three hill subdivisions in Darjeeling District.

CRS food programs have benefited the people greatly and directly. Fr. Burns says, "This to me is one of the most important programs, as there is no substitute for food." These programs have served as launching pads for other long term development programs, whose capital inputs are provided by various funding agencies.

In the CRS Regular Program, Hayden Hall serves: Maternal and Child Health 1,500; School Feeding 650; and Individual Health Cases 500 beneficiaries. The annual flow of food commodities exceeds 125 M/Ts valued at U.S. $38,163.90 (Rs. 381,639). The beneficiaries belong to the most disadvantaged category. Health workers and para-medics are being constantly trained to locate the neediest among the poor families, and to select the target individuals most eligible for these programs.

In an area where poverty is acute and malnutrition is endemic, Hayden Hall has developed an ambitious plan to provide at least one square meal daily to 10,000 needy children and pregnant mothers. Hayden Hall started towards this goal in 1982, with financial assistance from CRS. The project is named "Nutrition to Prevent Disablement".

The population of the project area is 500,000. The average family, with 4-5 children below 16 years of age, lives in abject poverty. The vulnerable group—pregnant and nursing mothers and pre-school children—were found to be victims of seriously low calorie intake, leading to physical and mental disablement. During the initial phase, the purpose of the project was to provide nutritious food—rice, pulses and vegetables—to 1970 selected beneficiaries for a period of one year, at an average cost of U.S. $0.05 (Rs. 0.52) per meal. While the amount requested from CRS was 26% of the total cost, other resources were met from local contributions and private donors. CRS/New York provided U.S. $13,351.50 (Rs. 133,515) and subsequently secured a grant from NORAD of an additional U.S. $14,000 (Rs. 140,000). This will increase the project's coverage substantially.

Inspired by the MCH programs, although not a part of the CRS/MCH Regular Program, in all other respects it runs parallel to it, thus providing a powerful thrust for improving health care for under-five children and pregnant nursing mothers.

Vegetables and pulses are purchased for the beneficiaries and distributed to them twice or thrice a week. These are cooked at home by the beneficiaries, and consumed along with their staple food. Health Workers regularly
visit the beneficiaries' homes. To complement this project, maternity clinics are conducted for pre- and post-natal care. During these check-ups, mothers are taught the basics of good health and adequate nutrition. Thus by the time they leave the program they will know how to ensure good health for their families on their own. Coverage of immunization is extended to under-five children and pregnant mothers. Four mobile clinics provide alternative medical care to areas where it is minimal or non-existent.

Regular monitoring of the project is done, including weighing the target children every month, regular individual health check-ups, and periodic community surveys. These have indicated the following achievements through the program:

1. Increase in the birth weight of new born infants;
2. Improved growth rate of under-five children;
3. Cognitive and behavioural changes among mothers;
4. Decrease in the incidence of diseases;
5. Growing awareness regarding preventive health care and
6. Increased demand for availing of Maternal and Child Health Services.

With assistance from other Agencies, such as the West Bengal State Government, Canadian International Development Agency (C.I.D.A.), Misereor/IGSSS, GOAL (Ireland) and Sleeping Children Around the World (S.C.A.W.), Hayden Hall is able to undertake other development activities such as:

a) Low Cost Housing for natural disaster victims of land slides or fire and the rehabilitation of refugees.
b) Adult Education.

c) Vocational Training in sewing, weaving, carpet-making.
d) In-service Teachers' Training.
e) Paramedic Training for rural and urban women.
f) Prevention and control of T.B., and
g) Providing clothing, blankets, medicines and funds to thousands of deserving poor in the vicinity.

Hayden Hall is but one example among hundreds of India's indigenous, developmentally oriented social services centres that are supported by CRS and other donor organisations. But Hayden Hall is an outstanding example.

The following is a report on assistance to the Centre for the Handicapped in Goa:

Training the Handicapped — Goa

The St. Francis Xavier Training-cum-Production Centre for the Handicapped in Old Goa was inaugurated in 1978. The Centre, the first of its kind in the Union Territory of Goa, was created to help address the needs of the physically and mentally handicapped. A survey conducted prior to the inauguration estimated that there are approximately 15,000 handicapped people in Goa. About 90% of these live in rural areas and have heretofore received little attention.
The primary aim of the Centre is to assist and train the disabled to enable them to be usefully rehabilitated in the home and also to gain employment outside of the home thus becoming productive members of society.

To assist CARITAS/Goa in achieving the objectives of the Centre, CRS has made available grants totalling U.S. $71,140 (Rs. 711,400) which have been utilized to establish poultry, piggery and dairy units as well as a horticultural plantation where mango, lemon, cashew and coconut trees are being cultivated and a ten hectare agricultural plantation where maize, ground-nut, fodder and jowar are being grown. Apart from training facilities in agriculture the Centre has also established other training units, such as baking, printing, welding, tailoring and jute and bamboo craft work. Thus, the handicapped are both learning trades useful for securing employment in an urban setting and also gaining valuable knowledge in scientific methods of agriculture, horticulture and animal husbandry. In this way, the handicapped will be able to make significant contributions when they return to the rural areas. Furthermore, thanks to the revenues generated by the Centre’s various production units, the St. Francis Xavier Training-cum-Production Centre is expected to soon become financially self-sufficient. This will ensure the continuity of the institution and the future success of the project.

ASSISTANCE FROM E.E.C.

In addition to food aid received from the United States of America, CRS also receives and distributes vitamin enriched Milk from the European Economic Community (EEC). This commodity is highly appreciated because of its scarcity and cost. It is distributed through institutional programs such as Nursery and Creche Centres, School Feeding, Other Child Feeding, Individual Health Cases and Emergency Feeding categories, which benefit the underprivileged, chronically sick patients and the elderly. The milk is served reconstituted as well as in the form of curds and buttermilk. During FY 1983, CRS/India distributed 1579 M/T of EEC Milk valued at U.S. $2,418,996 (Rs. 24,189,960).
## CRS INDIA PROGRAM

### Areas of Concern

**1983**

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<th>Area of Concern</th>
<th>$ Value</th>
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<td>Promotion of Community Health and Nutrition (MCH, OCF, CMMB &amp; Funded Projects)</td>
<td>26,130,977</td>
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<tr>
<td>Creation of Employment Opportunities (FFW &amp; Funded Projects)</td>
<td>10,003,499</td>
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<tr>
<td>Improvement in Food production and Food storage (FFW &amp; Funded Projects)</td>
<td>15,450,520</td>
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<td>Assistance to the Handicapped and the Helpless (IHC, Emergencies &amp; Funded Projects)</td>
<td>3,668,023</td>
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<td>Development Promotion (Funded Projects)</td>
<td>761,063</td>
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**GRAND TOTAL** : 59,224,044

**RUPEES** : 592,240,440

**Conversion Rate** : $ 1 = Rs. 10/-
## STATEMENT OF PROGRAM

### Support and Inputs

#### 1983

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<tr>
<th>Description</th>
<th>$ Value</th>
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<td>Administrative Cost</td>
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<td>Title II Food</td>
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<td>Ocean Freight</td>
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<td>Ocean Freight</td>
<td>128,341</td>
</tr>
<tr>
<td>CMMB Medicine</td>
<td>1,024,474</td>
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<tr>
<td>Ocean Freight</td>
<td>20,122</td>
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<tr>
<td>Project support</td>
<td>486,573</td>
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</table>

**Sub Total** 48,374,124

Estimated Inland Transportation and Warehousing (GOI Contribution) 4,182,000

Estimated Monetized value of counterpart services to program (Consignees, Distributors and local communities) 6,667,920

**GRAND TOTAL**: $59,224,044

**RUPEES**: 592,240,440

Conversion Rate: $ 1 = Rs. 10/-
# Annual Summary of Activities

## 1983

<table>
<thead>
<tr>
<th>Program Breakdown</th>
<th>Beneficiaries</th>
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<tbody>
<tr>
<td>MCH</td>
<td>$16,475,228</td>
</tr>
<tr>
<td>SF</td>
<td>$1,853,749</td>
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<tr>
<td>OCF</td>
<td>$3,015,021</td>
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<tr>
<td>IHC</td>
<td>$2,061,852</td>
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<tr>
<td>FFW</td>
<td>$20,408,355</td>
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<tr>
<td>Emergency</td>
<td>$183,945</td>
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<tr>
<td>TOTAL</td>
<td>$43,998,150</td>
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</table>
CRS INDIA PROGRAM AT A GLANCE
RECIPIENT LEVELS IN FISCAL YEAR 1983

MATERNAL AND CHILD HEALTH
AVERAGE RECIPIENTS PER ZONE PER MONTH

<table>
<thead>
<tr>
<th>Zone</th>
<th>Recipients</th>
</tr>
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<tbody>
<tr>
<td>BOMBAY</td>
<td>65,450</td>
</tr>
<tr>
<td>CALCUTTA</td>
<td>74,090</td>
</tr>
<tr>
<td>COCHIN</td>
<td>218,885</td>
</tr>
<tr>
<td>DELHI</td>
<td>18,460</td>
</tr>
<tr>
<td>MADRAS</td>
<td>231,730</td>
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<tr>
<td>TOTAL</td>
<td>608,645</td>
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</table>

OTHER CHILD FEEDING
AVERAGE RECIPIENTS PER ZONE PER MONTH

<table>
<thead>
<tr>
<th>Zone</th>
<th>Recipients</th>
</tr>
</thead>
<tbody>
<tr>
<td>BOMBAY</td>
<td>23,440</td>
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<tr>
<td>CALCUTTA</td>
<td>10,080</td>
</tr>
<tr>
<td>COCHIN</td>
<td>17,735</td>
</tr>
<tr>
<td>DELHI</td>
<td>2,015</td>
</tr>
<tr>
<td>MADRAS</td>
<td>34,710</td>
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<tr>
<td>TOTAL</td>
<td>88,880</td>
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</table>

INDIVIDUAL HEALTH CASES
AVERAGE RECIPIENTS PER ZONE PER MONTH

<table>
<thead>
<tr>
<th>Zone</th>
<th>Recipients</th>
</tr>
</thead>
<tbody>
<tr>
<td>BOMBAY</td>
<td>5,015</td>
</tr>
<tr>
<td>CALCUTTA</td>
<td>58,090</td>
</tr>
<tr>
<td>COCHIN</td>
<td>7,975</td>
</tr>
<tr>
<td>DELHI</td>
<td>2,370</td>
</tr>
<tr>
<td>MADRAS</td>
<td>8,045</td>
</tr>
<tr>
<td>TOTAL</td>
<td>82,885</td>
</tr>
</tbody>
</table>

INDIA AVERAGE RECEIPTS
FED IN ALL PROGRAMS PER ZONE PER MONTH

<table>
<thead>
<tr>
<th>Zone</th>
<th>Consignees</th>
<th>Distributors</th>
</tr>
</thead>
<tbody>
<tr>
<td>BOMBAY</td>
<td>45</td>
<td>900</td>
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<tr>
<td>CALCUTTA</td>
<td>25</td>
<td>1,295</td>
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<tr>
<td>COCHIN</td>
<td>26</td>
<td>7,352</td>
</tr>
<tr>
<td>DELHI</td>
<td>30</td>
<td>188</td>
</tr>
<tr>
<td>MADRAS</td>
<td>39</td>
<td>1,745</td>
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<tr>
<td>TOTAL</td>
<td>167</td>
<td>6,533</td>
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</table>

PROGRAM GRAND TOTAL FY'83
RECIPIENTS

<table>
<thead>
<tr>
<th>Program</th>
<th>Recipients</th>
</tr>
</thead>
<tbody>
<tr>
<td>MCH</td>
<td>608,645</td>
</tr>
<tr>
<td>SF &amp; CORPN.</td>
<td>173,080</td>
</tr>
<tr>
<td>OCF</td>
<td>68,880</td>
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<tr>
<td>IHC</td>
<td>82,355</td>
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<tr>
<td>FFW</td>
<td>331,340</td>
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<tr>
<td>EMER. FEEDING</td>
<td>137,185</td>
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<tr>
<td>TOTAL</td>
<td>1,422,105</td>
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### Food for Work Accomplishments and Estimated Value of Activities

**Fiscal Year 1983**

<table>
<thead>
<tr>
<th>Activities</th>
<th>Accomplishment</th>
<th>Value</th>
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</thead>
<tbody>
<tr>
<td>New Irrigation Wells</td>
<td>(Nos.) 2,156</td>
<td>Rs. 12,936,000</td>
</tr>
<tr>
<td>Irrigation Wells/Deepening/Clearing</td>
<td>(Nos.) 3,671</td>
<td>$ 1,293,600</td>
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<tr>
<td>Tanks/Dams/Reservoirs</td>
<td>(Nos.) 905</td>
<td>Rs. 8,810,400</td>
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<tr>
<td>Irrigation Canals</td>
<td>(Kms.) 317</td>
<td>$ 881,040</td>
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<tr>
<td>Bund Construction/Repairs</td>
<td>(Kms.) 1,147</td>
<td>Rs. 10,860,000</td>
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<tr>
<td>Land Clearing/Levelling</td>
<td>(Acres.) 19,138</td>
<td>$ 1,086,000</td>
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<tr>
<td>Bench Terracing/Slope Land Reclamation</td>
<td>(Acres.) 1,160</td>
<td>Rs. 380,400</td>
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<tr>
<td>Reforestation</td>
<td>(Acres.) 1,084</td>
<td>$ 688,410</td>
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<tr>
<td>Pasture/Forage Development</td>
<td>(Nos.) 27</td>
<td>Rs. 1,160</td>
</tr>
<tr>
<td>Fisheries Development</td>
<td>(Kms.) 1,594</td>
<td>$ 1,160</td>
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<tr>
<td>Road Construction/Repairs</td>
<td>(Kms.) 19,128</td>
<td>Rs. 1,148,280</td>
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<tr>
<td>Bridge Construction</td>
<td>(Nos.) 5</td>
<td>$ 1,128,000</td>
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<tr>
<td>Drinking Water Wells</td>
<td>(Nos.) 1,161</td>
<td>Rs. 1,086,000</td>
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<tr>
<td>Community Centre/Schools/Health Centre/GC</td>
<td>(Nos.) 198</td>
<td>$ 1,086,000</td>
</tr>
<tr>
<td>Low Cost Houses</td>
<td>(Nos.) 19,103</td>
<td>Rs. 11,880,000</td>
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<tr>
<td>Bricks made</td>
<td>(Nos.) 2,546</td>
<td>$ 1,148,800</td>
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<tr>
<td>Vocational training/Adult Literacy Classes</td>
<td>(Nos.) 480</td>
<td>Rs. 6,110,400</td>
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<tr>
<td>Construction of Drains/Ditches, etc.</td>
<td>(Nos.) 1,536</td>
<td>$ 4,800</td>
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<tr>
<td>Public Latrines</td>
<td>(Nos.) 62</td>
<td>Rs. 148,800</td>
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<tr>
<td>Construction of Cattle Sheds</td>
<td>(Nos.) 26</td>
<td>$ 156</td>
</tr>
<tr>
<td>Construction of Playgrounds</td>
<td>(Nos.) 2,156</td>
<td>Rs. 1,560</td>
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<tr>
<td>Miscellaneous Trainees</td>
<td>(Nos.)</td>
<td>$ 1,560</td>
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</table>

<table>
<thead>
<tr>
<th>Totals:</th>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Nos.</td>
<td>Rs. 151,497,870</td>
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<tr>
<td></td>
<td></td>
<td>$ 15,149,787</td>
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</tbody>
</table>

20
CRS ADMINISTRATION

WORLD HEADQUARTERS
1011 First Avenue
New York, NY 10022, U. S. A.
Chairman, Board of Directors : Most Rev. Daniel P. Reilly, DD
Executive Director : Mr. Lawrence A. Pezzullo
Senior Director : Rev. Fr. Robert Charlebois

INTERNATIONAL OFFICE
11, Rue De Cornavin
CH—1201 GENEVA, SWITZERLAND
Director : Mr. Robert T. Quinlan

INDIA HEADQUARTERS
2, Community Centre
East of Kailash, New Delhi - 110 065
Program Director : Mr. Terrence M. Kirch
Deputy Director : Mr. Joseph Gerstle
Chief Administrator : Brig. R. Tims, VSM, (Rtd.)
Program Officer : Mr. A.S. Jandu
Projects Coordinator : Mr. George Kuttickal
Logistics Coordinator : Mr. V.C. Rallan
Finance Officer : Mr. D.P. Mittal
Chief Nutritionist : Mrs. Mangalam Balasubramanian
Internal Reviewers : M/s. P.D’ Rozario & B.S. Chayapathi

C.R.S. BOMBAY
Eucharistic Congress Bldg. III
1st Floor, 5, Convent Street
Bombay - 400 039
Zonal Director : Mr. Michael E. McDonald
Administrator : Mr. Edwin L. D’Souza

C.R.S. CALCUTTA
50, Circus Avenue, Calcutta - 700 017
Zonal Director : Ms. Vivian N. Marin
Administrator : Mr. K.N. Ganguly

C.R.S. COCHIN
Shanmugham Road, Ernakulam, Cochin - 682 011
Administrator : Mr. F.M. Paynter

C.R.S. DELHI
2, Community Centre, East of Kailash
New Delhi-110065
Administrator (Acting) : Mr. P. Balakrishnan

C.R.S. MADRAS
6, Armenian Street, Madras - 600 001
Zonal Director : Mr. James R. Murray
Administrator : Mr. G.J.M. D’Silva