



ANNUAL REPORT 2017

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Vera Cordeiro

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### LETTER FROM THE FOUNDER AND PRESIDENT OF THE BOARD OF DIRECTORS

In 2017, despite enormous advances in terms of transparency and equity in the exercise of justice in our country, we face enormous socioeconomic, environmental and public security crises. These crises, widely publicized in national and international media, reached their peak in Rio de Janeiro, a city that lived and lives an undeclared civil war. Unfortunately, this situation has a profound impact on the most vulnerable ones in our society.

Currently in Brazil, approximately 52.2 million people live in poverty (people with a monthly income of R\$ 387.15, according to IBGE), disproportionately affecting children and young people. In families composed of black or mixed-race women, without a spouse, and one or more children, the rate of extreme poverty is 64%, which indicates the accumulation of disadvantages for this segment of the population.

Poverty is a multidimensional phenomenon; it is necessary to analyze other factors that influence the well-being of the people, besides the monetary evaluation. The most vulnerable groups generally have little or no access to basic health services and live in poor housing with precarious or non-existent water and sanitation systems. In addition, unemployment coexists with crime and violence, which further aggravates the vulnerability of these people. This is exactly the focus of Saúde Criança Association (ASC in Portuguese).



The 26 years of tireless work and constant improvement enabled ASC to develop its own pioneer and unique methodology that offers opportunities to address poverty and the precarious health of the most needy communities in our country. We know that isolated actions, even successful welfare programs can help improve health conditions and improve well being, but xxare often insufficient to meet the needs of those living in poverty. We also know that the public security system, and even the military, will not be able to, on their own, improve the reality of extremely vulnerable families.

ASC is known nationally and internationally as an organization with accumulated and proven knowledge for solving broad problems in the area of health and poverty, mobilizing civil society. In 2018 ASC was recognized, for the sixth consecutive year, as the most innovative NGO in Latin America. In addition, we were ranked as the 18th best NGO in the world by the NGO Advisor. This ranking was based on criteria of governance, transparency, innovation and social impact.

We know that the challenges are enormous, but we believe the opportunities for progress are even greater. Our dream? Well-being of the individual be understood in a broader and more integrated way, and that the model developed by ASC to address poverty and health promotion, be disseminated throughout the country and the world so that we can reach the greatest number of people who are in critical situations. This dream will only be possible through a joint effort between international organizations, civil society, governments and the private sector, with the objective of making a deep and sustainable social transformation capable of bringing these actors together in a real social revolution with measurable results.

We are ready and we invite everyone to share and implement this knowledge!

Thank you very much.

Vera Cordeiro

### Mission

Promote the transformation of socially vulnerable families, through the use of a multidisciplinary methodology, dissemination of knowledge to public and private institutions and stimulation of the participation of society.

## Vision

We work for a healthy and sustainable world where everyone has the same opportunities and rights.

### Values

Transparency, Social Justice, Integrity, Entrepreneurship, Efficiency, Respect, Empathy, Solidarity, Human Rights, Social Inclusion, Innovation, Credibility, Perseverance / Affection, Ability to Expansion / Replication.



# Saúde Criança Association

Saúde Criança Association (ASC in Portuguese) is an independent social organization that developed an innovative methodology to support families in social vulnerability, with a child in treatment in a public health unit.

Founded in 1991 by Dr. Vera Cordeiro, ASC is a non-profit organization with no political or religious affiliation.

### SAÚDE CRIANÇA Summarized **timeline**

Foundation of Associação Saúde Criança by Vera Cordeiro and volunteers

Partnership with Hospital da Lagoa

International recognition and credibility

Vera Cordeiro is elected Ashoka fellow

**Creation of the Psychosomatic Area of Hospital da Lagoa** by Vera Cordeiro Foundation of Reviver institution (1st replication of the methodology) Cre Godn by Co

 1979
 1991
 1993
 19

Structuring the methodology Family Action Plan Ashoka and Mckinsey Partnership

ASC growth Expansion of assis

Recognised as a federal public utility Federal Government

ation of the nother Project rdelia Gaensly **Creation of Hook Project** by Horst Gaensly Expansion of assisted families - New administrative and professional structure

Participation in the State of The World Forum (1st lecture in the USA)

> Resistance in Parque Lage

Expulsion process -Assistance of families in tents and containers

#### Inauguration of the new headquarters in Parque Lage

Partnership with federal government

Foundation of Recriar Institution by mother attended

Foundation of the Friends of Renascer (representation in New York)

Network Award 1st. most innovative NGO Recognized as Social Entrepreneur Schwab Network Award CAIRO - Egypt Participation in the Word Economic Forum

Participation in the Word Economic Forum em Davos Vera Cordeiro

**Global Development** 

Participation in PATH: a Catalyst for Global Health 2005 - 2011 Vera Cordeiro

#### Recognition and strengthening of leadership

Vera Cordeiro is elected AVINA leader Launch of the book "How to Change The World" by David Bornstein, Visibility and recognition

Foudantion

Vera Cordeiro

Inauguration of the new Casa das Oficinas headquarters in Jardim Botânico

Net

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Saud

2000 2001 2003 2005



Rede Saúde Criança with 24 institutions using the methodology

2006 2007 2008 2009

International recognition and credibility

**1st NGO of Latin America and 38th place** in the general ranking of the Global Journal (current NGO Advisor) International recognition and credibility

**1st NGO of Latin America and 45th place** in the general ranking of the Global Journal (current NGO Advisor)

Launch of the Saúde Criança Social Franchise Program

Partnership with Maternidade Maria Amélia Buarque de Holanda

Evidence of Methodological Impact Research Georgetown University (USA)

2010 2012 2013

Most influential NGO in Latin America and 21st place in the general ranking of Global Geneva (atual NGO Advisor)

Most influential NGO in Latin America and 19th place in the general ranking of the NGO Advisor Most influential NGO in Latin America and 19th place in the general ranking of the NGO Advisor

Inauguration of the Center of Excellence New headquarters in Botafogo (RJ)

Methodology inspiring entrepreneurs to implement projects in other continents: Europe, Asia and Africa

2016

In 26 years, Vera made presentations in 15 countries: 121 trips in Brazil, with 98 lectures, 60 international trips with 42 lectures

Partnership with Instituto Nacional de Cardiologia

2017

2015

# How we work



The crisis sets in when the pre-existing challenges of poverty are compounded by a child's need for health care, further threatening the integrity and future of the family. **The Family Action Plan (FAP)** is the innovative methodology: based on the principle that poverty is also one of the causes of diseases. The FAP, composed of integrated actions that address Health, Education, Citizenship, Housing and Income, is built based on the needs of each family.



In addition to overcoming the immediate difficulties of the child's post-hospitalization period, the objective is to guide and develop opportunities for the family to go through a process of social transformation, to have their rights guaranteed and quality of life.

The active participation of the family in the development of their FAP and the objectives and goals to be fulfilled at each stage during the two years program, is a fundamental element of the methodology and one of the conditions for its success. The whole process is carried out with ASC's multidisciplinary team.







The family is selected to be part of program by a group of professionals from the public health unit partners and Saúde Criança Association's multidisciplinary team (social workers, doctors, psychologists, psychiatrists, nutritionists, lawyers and architects, among others).

The initial stage of the Family Action Plan occurs in the first contact between the family and the multidisciplinary team of employees and volunteers, at Saúde Criança's headquarters, through individual interviews. This is when a relationship of trust and responsibility, shared between the parties, begins.

# Health

The health team comprises actions aimed at the child and their family. Saúde Criança offers clarification on the diagnosis and prognosis of the child's disease and his / her relatives, in addition to support to schedule exams and consultations in public and private systems. ASC donates medication, food and special milks, and also medical equipment when not available through the public health system.





Saúde Criança advises and offers guidance to ensure that all children in the family are being treated on time, as well as referral for dental, ophthalmological and other medical specialties. Monthly nutritional monitoring is also done. In addition, it offers psychological and psychiatric support at headquarters or in a place closer to their home.

In the Health Area, there are two special programs:

• Family Support, (Aconchego Família) which promotes meetings and dialogue between the heads of the families. It is composed of Community Therapy, which aims at emotional strengthening and self-esteem. In addition, there is a schedule of lectures on nutrition, breastfeeding, sexually transmitted diseases, among other topics.





• Mothers and Early Childhood Support, which aims to strengthen this fundamental bond for a healthy development and healthy development of children. It also includes parents or other responsible relatives.

# Education





The Education team aims to ensure children's attendance in school and that they take advantage of their education, as well as encourage the direct participation of parents in their children's education.

Saúde Criança's team facilitates access to schooling, tracks the enrollment, achievement and attendance process of the child or adolescent, as well as seeks scholarships in private schools. There are also school reinforcement activities and referral to specific care (ophthalmological, pedagogical, speech therapists and psychologists). Parents' awareness of the importance of education is the foundation of this program.

**The recreation** is guided by a psycho pedagogical approach for children and teens, while mothers or guardians are attending meetings at the headquarters.



**The Teen Support program**, *(Aconchego Adolescente)* for young people between 12 and 17 years old, offers a space for dialogue, listening and support for personal development. The program seeks to clarify the disease of the brother / sister and promote family integration, often troubled by the need for full attention of parents to the sick child. There are also meetings to debate sexuality, health, personal hygiene, pregnancy in adolescence, family relationship, work, among others, in addition to cultural tours.



# Citizenship

**The Citizenship Area** aims to promote access to justice and guide the family about their rights and duties. The area has social workers and lawyers who advise on specific government benefits, as well as on issues related to recognition of paternity, alimony and regularization of property, among others. It also facilitates access to public social benefits and to obtain documentation (birth certificate, ID card, CPF, work permit, school history, etc.).

# Income

#### The Employment Area aims to empower the family in order to generate income, new opportunities for work and entrepreneurship.

The adults in the family receive vocational guidance and referral to vocational workshops at ASC headquarters and vocational training centers in the city.

ASC offers Culinary, Beauty and Sewing courses, which are structured in modules to allow students to develop their skills according to their time and capacity. They can also delve into related areas



when they discover interest or vocation in one of the modules.

Saúde Criança sends the family for professional training in other institutions; many have already graduated in barber courses, caretaker, nursing assistant, among others.

In all courses, the ASC team closely monitors the development of each participant, helping to ensure completion of training and transition to profitable activity. The team seeks employment opportunities, as well as offers guidance on professional interviews, convey concepts of entrepreneurship and promote the donation of equipment to start the activity.

# Housing



The Housing Area makes renovations in the family home, in order to create a healthy and safe environment and make adaptations for children with special needs.

The home check, which evaluates conditions related to the sanitary, water, and/or electrical installations and the existence of leaks, is part of the first assessment of the families' needs. The Housing team has architects and the support of the legal and financial departments.

The team also advises on healthy habits, cleaning and maintenance, to ensure a healthy environment of the residence. They encourage family participation in the housing reform process.

# BEFORE



Family of Daylaine, 15 years old and diagnosed with Lupus, benefited from the construction of a new house because their previous one was made of wood and cardboard.

# AFTER

#### KNOWLEDGE CREATION AND SHARING

The successful experience of the Family Action Plan with families referred from Hospital da Lagoa, Maternity Hospital Maria Amélia Buarque de Holanda and the National Institute of Cardiology - Saúde Criança's partner institutions - has attracted interest from other organizations and institutions in Brazil and abroad.

To disseminate 26 years of experience with the Family Action Plan, Saúde Criança carries out permanent evaluations, records information and data, and maintains a strict control of the process and development of each family served.



The methodology has already been reproduced in 24 organizations that work with hospitals and other public units in several Brazilian states, and adapted to a human development program by the city of Belo Horizonte.

The methodology can also be adapted to other institutional and cultural contexts where poverty is the challenge. It offers training, internships and exchanges for people interested in implementing the Family Action Plan, and for students and professionals from universities in Brazil and abroad.

ASC invests in research and development of better ways of applying the methodology, offers consulting services, holds meetings and seminars with



social entrepreneurs, companies, foundations and governments. In this way, it seeks to broaden and exchange ideas and proposals for innovation in health and social transformation.

Currently, work is under way to transfer the program to organizations in the United States and Portugal. In addition, The Plan has served as an inspiration for the implementation of programs in Africa, Asia, Latin America and Europe.



#### **IMPACT AND RESULTS**

The impact of Saúde Criança can be observed by the number of families assisted by the Family Action Program, the change in the lives of those who participated in the Program, the expansion of the methodology and the dissemination of a more comprehensive and multidisciplinary concept in the health approach.

By 2017, 15,500 families (approximately 70,000 people) participated in the Family Action Plan at ASC headquarters and in the centers that implemented the program linked to public health units. Of these, 4,000 families (18,000 people) were attended in Belo Horizonte, from the adoption of the methodology as a public policy for development.

A Long-Term Impact Assessment conducted by Georgetown University in 2013 examined families cared for after three and five years from the date of completion of the Family Action Plan. The study revealed a 92% increase in family income and an increase in the number of families owning house (previously only 26% owned, after which 50% of the families already had their own home after the discharge). There was also a 86% decrease of hospital readmissions in the group evaluated, with significant reduction of costs for the public health system. The family's perception of their well-being went from 9.6% who considered good/ very good to 51.2%.

Since its inception, the Family Action Plan has been implemented by 24 organizations linked to hospitals and public health units in six Brazilian states and by 19 programs in Africa, Asia, Latin America and Europe.

### TRANSPARENCY AND SOCIAL MOBILITY

Saúde Criança Association is an independent social organization that has the financial and professional support of individuals, companies and foundations. The success of the Family Action Plan on the impact and transformation of the families has increased the demand for its application in other organizations.

Saúde Criança mobilizes civil society through volunteer programs, partnerships with individuals, companies and public institutions, in the multiplication of its actions and in the participation of campaigns of public interest.

Since its inception, transparency has been a priority for SaúdeCriança, through annual audits and constant evaluations of processes and programs.



#### PROFESSIONALISM AND HOUSING RENOVATION MADE A DIFFERENCE IN DANIELI'S FAMILY

With the help of Saúde Criança Association and internal forces, Stefania, 34, managed to change her life and fight for the health of her daughter, Danieli, who will turn six in July, 2018. The mother increased the family income by starting to sell sweets and savories, after taking part in the Profession Program course for Cooking. The change from formal employment, in glove packing, to informal work not only improved the financial situation but also allowed Stefania to have more time to care for the girl and increased her self-esteem and independence.

Prior to joining the ASC, Danieli's mother faced severe financial difficulties and had no way of buying the medication and food recommended for her daughter (Danieli is an only child). Inside the institution, she completed the modules of Basic Baking, Easter, and Sweets and Savories for parties. Stefania started to make sweets and savories to sell, receiving, even, orders for weddings and parties. Plus, increased profits as a cleaning professional.

The Support of Saúde Criança had a positive impact on the state of health of the girl and was crucial to improve the life of everyone around her.



The support of Saúde Criança was also essential to stabilize Danieli's health. After the diagnosis of food allergy, unspecified bronchial asthma and allergic rhinitis, she received guidance from ASC nutrition team, which works in partnership with the Hospital da Lagoa, where she receives treatment. The girl decreased hospitalization and respiratory attacks following a lactose-free diet and special milk, and regular use of medication. The treatment was made possible with the financial support of the social organization for medications and food.

The search for improvement in the child's health was also essential for the family to benefit from the Housing Program, since the place where they were living was very humid, was below street level and always flooded with heavy rains. The house is owned and built by Stefania in the yard of the child's paternal grandmother, Rosilene, 46, in the municipality of Magé, Rio de Janeiro (RJ). In the renovations made by the Housing Program, the place was completed with internal and external framing, interior paint, roofing, window placement, sewage system and a kitchen, which

previously did not exist and the family cooked in an improvised room outside the home.

The family was discharged in April 2017 and has since had a quiet and promising live. "It was a wonderful experience! I miss it lots, people ... everyone has always treated me with a lot of love and respect. The biggest transformation was the health of my daughter who is now stabilized. I also have my house, my home. The environment is more pleasant, it brings up my mood. My life has improved 100%. I gained more experience, more stability, more structure to move forward because I learned a lot from conversations and courses," Stefania said.





Iumber of beneficiaries year eads of families benefited by ASC (percent of women /men) verage number of family members verage number of children per family verage age of mothers attended ercent of mothers attended under 21 years old mong those benefited, percentage under 18 years old mong those benefited, percentage in early childhood mong children benefited, percentage in early childhood EALTH PROFILE OF CHILDREN ATTENDED Nost frequent cases onvulsions leuro Psychomotor Delay ncephalopathy astrostomy erebral Palsy llergic Rhinitis pilepsy remature birth ronchial Asthma, unspecified IOST FREOUENT DIAGNOSTIC GROUPS onditions originating in the perinatal period lervous System Diseases lore congenital formations, deformities and chromosomal abnormalities espiratory system diseases UTRITIONAL PROFILE OF ASSISTED CHILDREN	1528         820 women   708 men         4,4         2,4         31         10%         53% (804)         28% (424)         53%         23         27         28         29         34         37         39         50
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INTRITIONAL PROFILE OF ASSISTED CHILDREN	91 - 12%
	181 - 61%
	35 - 12%
nderweight	20 - 7%
verweight	37 - 12%
besity	25 - 8%
otal	298 - 100%
NCOME PROFILE OF ASSISTED FAMILIES	n° of families
amilies receiving less than minimum wage per month (R\$ 937,00)	111 - 32%
amilies with formal employment	212 - 62%
amilies receiving BolsaFamília	51 - 15%
	89 - 26%
amilies receiving BPC	20 - 6%
amilies earning an income based on learning from professionalization courses	
amily members completing professionalization courses	42
umber of courses completed	81
DUCATION PROFILE OF FAMILIES ATTENDED	
hildren benefited	000
hildren attended that do not study due to health restrictions (%)	802
hildren past school age hildren without a restrictive illness, studying	802 4 239 - 30%

CHILDREN IN SCHOOL	
Special Class(One of the 8 is an assisted mother, she is 15 years old)	8 - 2%
Pre-school	36 - 7%
Young Childhood Education	154 - 29%
Grade School I	188 - 35%
Grade School II	115 - 22%
Secondary School	30 - 6%
HOUSING PROFILE OF ASSISTED FAMILIES (TYPE OF HOUSING)	
Own their home	182 - 53%
Rent their home	115 - 33%
Borrowed home (divided between temporary shelters and structure invasions)	34 - 10%
WHERE THE FAMILIES LIVE (% BY NEIGHBORHOOD)	
Belford Roxo	3%
São João de Meriti	3%
Magé	3%
Queimados 💦 💦 👘	3%
São Gonçalo	3%
Nova Iguaçu	3%
Duque de Caxias	8%
Rio de Janeiro	58%
DONATIONS MADE TO ASSISTED FAMILIES BY SAÚDECRIANÇA	(units   value)
Cans of milk	6224 - R\$57.493,00
Cans of special milk	9971 - R\$190.179,00
Supplements	2732 - R\$87.193,65
Diapers	2180 - R\$30.477,36
Medication 🥠	10775 - R\$218.333,9
Food card (R\$80,00 Each costs)	2027 - R\$162.160,00
Medical equipment;	96 - R\$26.222,15
Water filters	59 - R\$3.941,87
Transportation support to attend ASC meetings	2252 - R\$18.730,18
Transportation support to attend appointments and exams	1114 - R\$19.611,96
Transportation support to attend Teen Support program	119 - R\$6.789,80
Transportation support to attend courses	688 - R\$10.535,43
Work toolkits	239 - R\$14.103,00
NEW ADMISSIONS	
Total families assisted	344
Novas famílias aceitas nesse ano	114
Families referred by Hospital da Lagoa (%)	62%
Families referred by AméliaBuarque de HolandaMaternity Hospital (%)	35%
Families referred by the National Cardiology Institute (%)	3%
FAMILY ACTION PLAN	
Planned Activities	4115
Completed Activities	3265
Activities with Positive Results	2608

SERVICES CARRIED OUT (TOTAL NUMBER PER PROGRAM)	
Family monitoring	2340
Health	763
Psychology and Psychiatry	917
Social Service	1390
Legal	782
Housing	152
Nutrition	1691
Profession	570
REFERENCES	340
HOME VISITS	
Initial home visits	75
Monitoring home visits	11
Technical home visits	119
PROFESSION PROGRAM	
INTERNAL WORKSHOPS	5
Hair dresser–Beauty as a Profession	3
Hair dresser - Coloring	3
Hair dresser - Cuts	3
Hair dresser –Straightening treatment	6
Hair dresser –Basic skills	7
Hair dresser - Transformation	2
Culinary–cakes from forms	6
Culinary–decorated cakes	1
Culinary-additional courses	13
Culinary–Easter Workshop	8
Culinary–Party Savories	7
Salon - Manicure and Pedicure	9
Salon-Make-up	6
EXTERNAL WORKSHOPS	2
Workshops and Events	2
Toolkits donated	239- R\$14.103,00
Transportation support to attend courses	688 - R\$10.535,43
HOUSING PROGRAM	
Renovations	28
SUPPORT PROGRAM	
FAMILY	
Presences	1818
Lectures	130
TEENS	
Presences	25
Lectures	417
MOTHERS AND EARLY CHILDHOOD	
Presences	35
Lectures	110
Number of Infants and Children	157

#### **CLINICAL STATUS**

128 families discharged from between Jan/2017 and Dez/2017



Assessment

HOSPITALIZATION

Jan/2017 and Dez/2017

entry and exit: fall of 42%

128 families discharged from between

Percentage of comparison between

Assessment

128 families discharged from between Jan/2017 and Dez/2017 Percentage of comparison between entry and exit: increase of 42%



#### INCOME

# Awards

• In 2017, Saúde Criança Association was elected, for the fifth consecutive time, the most influential non-governmental organization in Latin America and remained in 19th place among the 500 best NGOs in the world. The ranking organized by the Swiss entity NGO Advisor considers three essential criteria: impact, innovation and sustainability.

• Saúde Criança Association is among the top 100 NGOs in Brazil, according to the selection done in 2017 by the magazine Época, in partnership with Instituto Doar.







# **Accountability and Audit**

Saúde Criança Association is audited annually and is currently audited by Ernst & Young.

SAUDE CRIANÇA	REALIZADO 2017
Revenues	
Individual Donations	644.211,18
Corporate Donations	2.456.142,26
Events	224.254,57
Financial Income	118.364,27
Total	3.442.972,28
Expenses	
Assistance to families	-2.002.239,88
Administrative costs	-816.942,14
Awareness and fund raising	-512.779,06
Franchising Support	-540.036,36
Total	-3.871.997,44
<b>Resultado</b> (revenue-expenses)	-429.025,16
SAÚDE CRIANÇA PRODUCTS	
Revenue	616.266,83
Expenses*	-631.248,17
Financial Income	-14.981,34

\* Includes the expenses of design, regularization and construction of new kiosk in new mall for sale of products.

# **Sponsors and Partners**

Throughout the years, our faithful sponsors and partners have made possible the implementation, realization, maintenance and improvement of the work of Saúde Criança Association. We certainly would not have been able to do it without your support. Once more, we sincerely appreciate your confidence in ASC today and always!



























## **Partners**













ASSOCIAÇÃO BRASILEIRA DE AUTOMAÇÃO

# Donors

We thank all who donated and made a difference in the lives of our assisted families!

Sponsors, partners, donors of Transform a Reality and contributors of eventual campaigns are fundamental to guarantee the accomplishment of the mission of Saúde Criança Association.

In spite of this difficult moment in Brazil, the work of ASC is possible thanks to its support. We have a very committed group in the struggle for social inclusion.

Thank you for believing in Saúde Criança!



### **How to Donate**



Make a difference at site: **DOE.SAUDECRIANCA.ORG.BR** 

Banco do Brasil Agency: 3519-X Checking account: 29905-7

Shop and collaborate with ASC: LOJA.SAUDECRIANCA.ORG.BR



Our vision for the future:

Invest i



Improve ASC's quality of work Increase the number of Assisted Families Strengthen the and Increase Fundraising Modernize and perfect Institutional Communication n the pillars of Knowledge Dissemination and Social Mobilization Inspire new institutions to work with the methodology

### Associação Saúde Criança

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