

FACT SHEET (as of February 2018):



- ❖ IRS approved nonprofit in January 2014
- ❖ Fundraised in the USA until January 2015 for 1 year for startup capital
- ❖ Launched with staff in India March 2015. Worked with Indian partners and government to get established in India. While in that process we hosted awareness programs (5,000 reached in various awareness programs).
- ❖ Established a volunteer base from those awareness programs. Recruited 15 volunteers who work 3 times a week in the government home in the city, helping care for the needs of 250 abandoned children (mostly girls). The government home was entirely too understaffed and not meeting needs of the baby girls.
- ❖ Opened first rural center (M-Center) October 2015
- ❖ Opened second rural center (O-Center) September 2016
- ❖ Opened third rural center (K-Center) May 2017
- ❖ Opened fourth rural center (R-Center) in August 2017

CENTER REACH:

1

Daily After School Program for Girls - 156 girls (approx. 39 at each center - includes providing supplemental nutrition to them, making sure they stay in school, adequate healthcare, teaching them English – the language of their government and workforce and higher education – and building self-esteem and life skills to make sure they succeed in life). In India 1 in 4 girls don't live past puberty, either they are killed at birth or die a slow death from inadequate healthcare and nutrition. We fight to change that by offering this to the most vulnerable of girls in the communities where we work.

2

96 lactating and pregnant women (approx. 25 at each center) in a program that offers them education and supplemental nutrition to make sure their baby girls are healthy (this is similar to WIC program in USA). This also helps us build trust with the women as they are pregnant and/or with infants, so we can have a voice to offer alternatives to infanticide.

3

114 women (approx. 30 at each center per round) in a Women's Entrepreneurship Program (WEP). Infanticide is a result of extreme poverty – they can't afford their girls and dowries. Killing them at birth or as infants is viewed as kindness, rescuing them from a slow death of malnutrition and inadequate healthcare, or a doomed life with no education or employment opportunities. We offer this alternative to the mothers: A business training program including startup micro-loans for their businesses, and a minimum of a year-long mentorship. This program also brings community to the mothers – something they've never had before. Women are required to save for their daughters and pay back the loan plus interest in one year.

- We ran 22 women through the first year in a pilot program. Each woman more than doubled their household income, all saved, and all paid back their loans at 100%. These women have 39 girls that now have savings accounts set up in their names that these moms are contributing to for education and marriage.
- When loans are repaid, we launch another round of training with more women. This is ongoing.

4

Five physicians donate their time to host free quarterly medical camps at our centers for those who cannot afford to take care of their girls medically. Our camps have provided care for over 1,400 people every year. These camps help meet immediate needs but also build trust within the communities, to give us a voice in continuing to enable families to help rescue their own girls.

5

We also help create awareness in the villages. We find that much of India has become desensitized to the long-term effects of the decision they make today. We reach over 2,500 a year in awareness campaigns on multiple levels.