

2016



Annual Report  
Development Partnerships  
Program

Development Team

The Primate's World Relief and  
Development Fund

Period covered: April 2015 to March 2016

## ACRONYMS LIST

AAH – Al Ahli Hospital

ACT Alliance – Action of Churches Together – Alliance

ART – Antiretroviral therapy

CCA – Canadian Church in Action

CCC – Cuban Council of Churches

CCM – Cooperativa de Credito de Microfinanças / Credit Cooperative of Micro-finances

CRA – Canadian Revenue Agency

CD4 – laboratory test that measures the number of CD4 T lymphocytes (CD4 cells) in a sample of your blood

CHW – Community Health Worker

DARE - Drug and Alcohol Recovery and Education

ECC – Episcopal Church of Cuba

ECLOF – Ecumenical Church Loan Fund

ECHCAC – Eastern Cape Health Crisis Action Coalition

FNAHEC – First Nation Adult & Higher Education Consortium

GAC – Global Affairs Canada

GBV – Gender based violence

HIV/AIDS – Human immunodeficiency virus/acquired immunodeficiency syndrome

IDP – Internally Displaced Persons

IMCD – Integrated Management of Childhood Diseases

KORLCC – Kanien'kehaka Onkwawén:na Raotitiohkwa Language and Cultural Centre

LGBTI – Lesbian, Gay, Bisexual, Transgender & Intersex

MNCH – Maternal, Newborn & Child Health

MTCT – Mother to child transmission

MWC – Mining Watch Canada

NEDC – Nuu-chah-nulth Economic Development Corporation

NCCCK – National Council of Churches of Kenya

NGO – Non-Governmental Organization

NLCP – Nuu-chah-nulth (NCN) Language & Culture Program

PAGC – Prince Albert Grand Council

PIH – Partners in Health

PLWA – People Living With AIDS

PMTCT – Prevention of mother to child transmission

PPF – Provincial Planning Forum

PTSD – Post-traumatic stress disorder

PWRDF – The Primate’s World Relief and Development Fund

RDS – Response & Development Services

READ – Rwanda Education and Discovery committee

RH – Reproductive health

TB – Tuberculosis

UNHCR – United Nations High Commission for Refugees

VTC – Vocational Training Center



-- Program funded in partnership with Global Affairs Canada

## Executive Summary

The PWRDF Development Program Annual Report covers the period ranging from April 1, 2015 to March 31, 2016. During the fiscal year, PWRDF implemented development projects in 15 countries including 5 countries in Latin America and Caribbean, 7 countries in Africa, and 3 countries in Asia. PWRDF also provided humanitarian and emergency relief response to 15 countries. PWRDF disbursed a total of \$5,314,707 towards projects' direct costs, including \$1,474,771 for humanitarian emergency response and relief, and \$3,839,936 for development projects. PWRDF implements its projects through partnerships, and most of the humanitarian and emergency relief response is implemented through the ACT Alliance.

Through its development projects and humanitarian and emergency relief response, PWRDF partners have provided direct services to 1,488,801 beneficiaries. Beneficiaries received a range of support in the areas of preventive health, maternal, newborn and child health, reproductive health, family planning, malaria prevention and treatment, food security, agricultural training and inputs, clean water, food parcels, micro-finance loans, TB, and HIV and AIDS education and care.

Two of our projects co-funded by Global Affairs Canada (GAC) and PWRDF -- "Preventive Health and Food Security" in Burundi, Mozambique and Tanzania and "HIV/AIDS and TB Prevention and Care" in South Africa -- have entered their final year of funding. The PWRDF Global Affairs Program team has been busy preparing terms of references for these project evaluations before they close in March and May 2017 respectively. Staff have also carried out monitoring visits to partners. During these visits, special emphasis was given to the preparation of "end of program reports" and project sustainability after funding ends.

Due to political instability, Burundi was unable to open 2 health clinics that were built last year. The Burundian Government had assumed the responsibility to pay for staff salaries for the clinics but was unable to fulfill its commitment. PWRDF is presently working with partners to find solutions to the problem. The fact that the clinics were not opened to the public, might affect few of the indicators that were set to be reached by the end of the project.

In our "Preventive Health and Food Security" project, we are particularly pleased with strong performance on the ground, made possible by the commitment of our local partners, including local government: In Burundi, the percentage of women delivering babies in health facilities in target areas is 97.3% compared to 40% as per the 2012 baseline, with an expected target of 60% by 2017. With the support of local partners, including local government, we have been able to exceed the target percentage. In Mozambique, in 2015/16 a total of 222,121 children under 5 years of age were vaccinated, and 543,179 children were screened for malnutrition and the cases that needed further medical attention were treated for malnutrition. In Tanzania, the number of months per year that farmers reported having food security increased to 11 months from 4-8 months (baseline 2012) and exceeded the target of 10 months set to be reached by March 2017.

The Nepal earthquake response by ACT Alliance members engaged in relief and recovery assistance work provided shelter to 100,000 vulnerable households in 14 affected districts. PWRDF staff worked closely with ACT on the implementation of this response. The implementation of the second phase of the humanitarian and relief response is under way.

Overall, PWRDF staff were very diligent in providing support to partners in the process of implementing projects and ensuring that funds were disbursed and spent as agreed upon and with accountability.

Country	Main Results
<b>Development Program</b>	
<b>Canada</b>	<p>In British Columbia, the <b>Nuu-chah-nulth (NCN) Language &amp; Culture Program (NLCP)</b> supports community initiatives that contribute to the preservation of the NCN language and culture. This is an initiative established by the Nuu-chah-nulth Economic Development Corporation (NEDC) with PWRDF funding support since 2002.</p> <p>A total of 94 resource items have been developed as a direct result of NLCP funding. <b><i>"I want to learn the Nuu-chah-nulth Language"</i></b> Facebook page has 1,300 members. There are 600 active adult learners of the Nuu-chah-nulth language and more than 12,500 indirect learners. The resources developed through the project have been celebrated and showcased by the 14 communities. Most of the previously funded projects have captured and documented the language and culture for future generations to share. Many of the CDs, DVDs and books are preserving the NCN language and enhancing cultural knowledge and retention. 75% of the projects funded to date are built upon previous preservation initiatives.</p>
<b>Canada</b>	<p><b>The First Nation Adult &amp; Higher Education Consortium (FNAHEC)</b> develops courses on Cosmology, Blackfoot Epistemology and other Blackfoot Knowledge for online delivery. These courses contribute to understanding among the Blackfoot people of their origins, culture, and language and developing positive self-concepts. Blackfoot knowledge is not readily available except through local oral histories facilitated by instructors who are called Knowledge Keepers and ceremonial bundle holders.</p> <p>1,100 individuals participated in various training sessions and workshops offered by FNAHEC. Participants shared their knowledge and information with over 2,200 indirect beneficiaries. A cumulative number of 7,800 people have been exposed to the teachings of FNAHEC. The students who took the courses, or are currently enrolled in onsite courses, expressed their gratitude for learning about their history and regained some of the traditional Indigenous knowledge. A reawakening is happening amongst Blackfoot youth. For instance, some are joining cultural and ceremonial groups and ensuring the revival of these ancestral traditions for, by and with their communities. A key activity for FNAHEC was organizing agreements to transfer the credits earned through these courses to mainstream institutions. Thus far, 17 of these courses are transferable to Athabasca University and the University of Calgary. An additional 6 courses are near completion and will be piloted in the 2016-2017 school year and subsequently transfer requests will be submitted. The local community and regional government educational authorities have recognized FNAHEC as a point of reference in terms of Indigenous language, curriculum development, and traditional knowledge.</p>
<b>Canada</b>	<p><b>Kanien'kehaka Onkwawén:na Raotitiohkwa Language and Cultural Centre (KORLCC)</b> works to preserve and strengthen the Kanien'kéha language and increase community access to culturally relevant programs and cultural workshops that promote, reinforce and increase the transmission of cultural knowledge, history and traditions.</p> <p>In 2016, KORLCC produced Season 12 of Tota Tanon Ohkwari, an indigenous children's program (a puppet show broadcasted on the local cable network to a community of 8,000 people) that is comprised of four 25-minute episodes and one 30-minute episode containing multiple cultural teachings. Additionally, a total of 15 live puppet shows were performed for school age children in the Kanien'keha community that focused on healthy eating habits, planting a home garden, and the prevention of bullying. Furthermore, two cultural workshop sessions (each 10 weeks in duration) were held for community members to learn/acquire and/or strengthen their artistic bead working skills and cornhusk moccasin making. Lastly, in addition to class time, homework assignments and school projects, the students and</p>

Country	Main Results
	<p>instructors take part in monthly community activities and ceremonies, Confederacy Sings, live talk shows, Elder visits, socials, workshops and presentations on traditional teachings. At the end of Year 1, Oral Proficiency Interviews indicated that many students advanced from a novice to an intermediate level in oral comprehension; 16 students graduated. Almost 500 people (adults and youth) benefitted directly from the KORLCC programs and another 2,500 were estimated to be indirect beneficiaries.</p>
<b>Canada</b>	<p>In 2014, Phase 1 of the <b>Pikangikum First Nation Water Project - Pimatisiwin Nipi (Living Water)</b> was accomplished successfully by ensuring that 10 families have access to clean and safe water, as well as a wastewater system. Donations for Phase 2 of this water project has surpassed the amount of \$340,000 in August 2016. The Pikangikum Working Group (PWG) works in coordination and collaboration with the Pikangikum First Nation Community and it is responsible to identify the implementing organization for the water project.</p> <p>In May 2016, an agreement was made with Habitat For Humanity Manitoba to implement Phase 2 of the project, so as to benefit another 10 families in the community. In October 2016, a delegation from the PWG, Habitat For Humanity and PWRDF visited Pikangikum First Nations community to finalize the needs assessment and submission of final budget proposal. The implementation of Phase 2 is expected to start in November 2016.</p>
<b>Cuba</b>	<p><b>The Sustainable Development Program of the Cuban Council of Churches (CCC)</b> aims to raise agricultural yield, reduce rural poverty, improve nutrition, improve resilience to climate change, foster gender empowerment, and break dependency on imported food and inputs.</p> <p>The program improved the food security and nutrition for 290 people. Previously, unproductive plots were farmed and small backyards were utilized to produce grains, vegetables and breed small animals (chicken, rabbits, pigs, sheep and goats). Four additional water wells were built and 13 families have access to clean potable water and water to irrigate their small gardens.</p>
<b>Cuba</b>	<p>This project is funded through <b>the Episcopal Church of Cuba (ECC)</b>. It is an integrated development project. To date, 21 new community leaders (11 women and 10 men) have completed their training in project design successfully. This is in addition to 42 women and 58 men lay leaders who participated in workshops to increase their knowledge and improve skills in food production and artisanal activities such as growing vegetables, raising small animals organically/ecologically and making clothes. Community vegetable gardens contributed to the improvement of community members' diets and health. The project also provided technical support and seed funding to 18 community based community initiatives. 620 people benefitted from the program; 370 were direct beneficiaries, 54% of them were women.</p>
<b>El Salvador</b>	<p><b>CoCoSI (Committee Against AIDS)</b> is made up of professionals in HIV/STIs and Gender Based Violence who develop workshops for women, children, adolescents and teens, people living with HIV, prison populations, and the public at large. CoCoSI focuses on HIV prevention, community education against bullying, hate crimes, and reduction in violence against women and LGBTI people. It also aims to reduce adolescent pregnancies in the Department of Cabañas by carrying out reproductive and sexual health education.</p> <p>The CoCoSI radio program broadcasts messages addressing issues of HIV, adolescent reproductive and sexual health, violence against women and has reached 6,000 listeners. 800 youth attended workshops on gender identity and gender based violence, HIV prevention, adolescent reproductive and sexual health education, and dating violence in the schools. 60 women participated in workshops focused on the prevention of HIV/STIs, anti-discrimination laws, family planning and processes to denounce abuse and domestic violence. In addition, 58 people from the two local self support groups and the Sensuntepeque Prison attended workshops on sex education, individual and oral hygiene.</p>

Country	Main Results
<p data-bbox="183 226 324 262"><b>El Salvador</b></p>	<p data-bbox="357 226 1367 331"><b>The Fundacion Cristosal's Human Rights and Community Development Program</b> aims to strengthen the capacity of five community organizations to run integrated development projects.</p> <p data-bbox="357 363 1367 730">The program promoted awareness and carried out training on human rights for local community members; almost 2,000 benefitted from the program. Cristosal also provided legal advice to community members and carried out negotiations on behalf of a community group with a local power company to connect individual homes to the power and water grids. Cristosal was successful in finding a positive and peaceful resolution for existing individual debts of community members. Cristosal carried out advocacy and negotiations with the Ministry of Public Works and one municipality regarding the completion of the construction of phase one of a road project. The communities have setup a network that carries out discussions with governmental and non-governmental institutions for cooperation on development initiatives. It is expected that through the network, community members will have their voices heard in the discussions about the relocation of affected communities.</p>
<p data-bbox="183 762 284 798"><b>Burundi</b></p> 	<p data-bbox="357 762 1367 1066"><b>Diocese of Bujumbura</b> During the reporting period, the project benefitted 269,751 individuals. The infant mortality rate was 0.18% since there were only 5 deaths out of 1,056 births this reporting period, which is in stark contrast to the 12% infant mortality rate that prevailed at the time the baseline survey was conducted in 2012. The goal to reduce the infant mortality rate by 5% by the end of the project in March 2017 was greatly exceeded for the last 3 consecutive years. In 2014, the infant mortality rate was 0.53% since there were 6 newborn deaths out of 1,117 births. In terms of food security, farmers reported 8 months of food security compared to 7 months noted during the baseline survey in 2012. 8 months is just one month short of the target of 9 months set to be achieved by the end of the project in March 2017.</p> <p data-bbox="357 1098 1367 1266">The percentage of women delivering babies in health facilities was 97.3% (1,027/1,056) this reporting period compared to 40% when the baseline study was administered in 2012 and the current percentage greatly exceeds the target to increase it to 60% by the end of the project. The current percentage also constitutes a 1.3% increase from 2014 when the percentage was 96% (1,072/1,117).</p> <p data-bbox="357 1297 1367 1434">Of the 39,818 women that have increased their awareness on HIV/AIDS over the last four years of the project, 80% can cite two ways to prevent being infected with HIV/AIDS in contrast to 35% in 2012 when the baseline survey was conducted. This result exceeds the target of 75% set for end of the project.</p> <p data-bbox="357 1465 1367 1833">The peer farmer system has proved productive and results are multiplying. One model farmer, Monsieur Ndayisaba Bechmas from Rusororo, stated that more than 30 other farmers replicated the SRI method of planting rice in 2015, whereby one plant sends out 50 tillers compared to the more conventional method of planting where 3-5 plants produce only 10 tillers. Farmers implementing the SRI technique experienced yields of 6-7 thousand tons of rice per hectare for the previous harvest. Grains, such as rice, are a staple in the plains of Burundi and are very important for food security. 21,764 farmers participated in nutrition education sessions and 15,132 farmers participated in food security educational sessions. Through nutrition and food security education sessions, farmers improved their knowledge about the nutritional needs of their families and are more willing to grow vegetables and other food stuffs than the usual cash crops.</p> <p data-bbox="357 1864 1367 1896">The awareness raising conducted by 713 project health workers is a testament to the</p>

Country	Main Results
	<p>increased access that the community has to such basic health needs as clean water and health services. Project staff have noted changes in behaviour at community level, particularly with regard to personal hygiene and sanitation. Access to medical facilities has improved by 21% according to project staff compared to the 50% who stated that they did not have good access to medical facilities during the baseline study of 2012. The fact that 71% stated they had good access means the target of 70% was achieved one year in advance. Access is expected to significantly increase once the two completed clinics are opened to community members.</p>
<p><b>Mozambique</b></p> 	<p><b>EHALE</b> In Mozambique, the average children under five mortality rate per 1,000 live births in the project area in 2012 was 40/1,000, compared to the 6/1,000 achieved by March 2016, which already far exceeds the target of a 10% improvement from the baseline. With respect to the average percentage of births delivered by a trained Mozambican health professional in a medical facility, in 2012 it was 37% compared to 90% by March 2016, which far exceeds the target to improve attended deliveries by 25%.</p> <p>96 traditional birth attendants were trained in Integrated Management of Childhood Diseases (IMCD) and MNCH in the reporting period instead of 60 nurses as originally planned due to the fact that the health authorities transferred the first 22 nurses out of the operational area as soon as they were trained by the project. Since traditional birth attendants live and work in their communities, unlike nurses who are often from other parts of the country, the training of traditional birth attendants in IMCD and MNCH has proved to be just as effective and will certainly have a much more enduring impact long after the project ends in March 2017. Furthermore, the number of project health workers (CHWs, IMCD Educators and traditional birth attendants) confident in their capacity to provide health services and provide education in health matters increased cumulatively to 474 this reporting period, which exceeds the target of 360 set to be attained by the end of the project.</p> <p>222,121 children under the age of 5 were vaccinated. 543,179 children were screened for malnutrition and cases that needed further medical attention were treated for malnutrition. 1,115 women received training on how to prepare nutritious meals by using local produce. 593 rural pregnant women used expectant mothers' houses prior to delivering their babies. Two new motorbike ambulances provided transportation to 369 patients to health clinics. A shelter that was built during the year enabled 18,425 mothers of children under 5 to access services such as vaccinations, child growth monitoring, and other pediatric services. Before the construction of the shelter, the services were provided under a tree and many women did not attend child health monitoring appointments because of the conditions. The percentage of pregnant women who were tested for HIV/AIDS was 86% at the end of this reporting period compared to 30% documented during the baseline study of 2012. This achievement exceeds the target of 60% set to be achieved by the end of the project.</p> <p>97% of the population was able to identify two sanitation best practices by the end of this reporting period compared to 15% documented during the baseline study in 2012, which also exceeded the target of 60% set to be achieved by the end of the project. The project team reported that many families built their own latrines and are now burying their garbage.</p> <p>Concerning the quality of radio programs broadcast on sexual and reproductive health, pregnancy, child health, sanitation and HIV/AIDS, the project team reported 89% of listeners consider the radio programs a good initiative which helps them better understand these health themes, gender equality and the reproductive rights of women. This exceeds the target of 70% set to be achieved by the end of the project. The project's establishment of the community</p>

Country	Main Results
	<p>radio station in Nacala Velha was an enormous success in the mobilization of communities to date. The community radio is used by EHALE for the transmission of health messages as well as by individuals and local government authorities interested to broadcast messages on governmental programs. While it is still premature to estimate the number of families that changed their health practices because of messages broadcast over the radio, impressionistic evidence suggests that it continues to stimulate debate, not only in the listening groups, but also in households that can pick up the radio transmission.</p> <p>It was unexpected that the establishment of a community radio station by the project would be such a success for the intended audience and beyond the operational area of the project. Governmental authorities in Nacala Velha are particularly keen to use the radio station to broadcast a variety of messages of a social nature that simply did not exist prior to the project. It was also unexpected that another partnership for EHALE would emerge because of the establishment of the radio station. EHALE now works in partnership with an American NGO known as IREX, that strengthens local institutions in media.</p>
<p><b>South Africa</b></p> 	<p><b>Keiskamma Trust</b> The HIV/AIDS and TB Prevention and Care Project is improving the health outcomes of persons living with AIDS (PLWA) and TB positive clients in Ngqushwa district, Eastern Cape, as well as, reducing illness from preventable diseases for women, men, girls and boys. This is primarily achieved through community health workers (CHWs) who are based in the 47 villages participating in the project and the provision of care to PLWA and TB positive clients in their respective villages. The project is in partnership with Keiskamma Trust.</p> <p>The project reached at least 11,102 community members during the reporting period. Women, men and children benefited from the following services: 1,110 patients received home based care served by CHWs; 5,651 community members attended community awareness events; 301 men, women and students participated in gender awareness sessions; 550 clients received psychosocial service; 187 orphans, vulnerable children and youth attended camps; 411 clients participated in support groups; 645 direct beneficiaries and 1,295 indirect beneficiaries benefitted from the nutritional support program; 436 young children benefited from nutritional support provided by early development centres; and 516 patients received transport assistance.</p> <p>During community awareness sessions facilitated by CHWs and awareness sessions facilitated by clinic nurses, women and men learned what HIV is, the HIV life cycle, how the virus is spread and how to prevent it, treatment and care, and prevention of mother to child transmission (PMTCT). Women and men participants also learned about TB including how TB is spread, how people may protect themselves from getting TB, preventative measures and encouraging people to be screened/tested for TB. CHWs emphasized if people test positive for TB, they must adhere to the treatment once it is initiated; the importance of adhering to the treatment regimen and completing the treatment; the dangers of not adhering to or completing the treatment; and how to prevent infecting family and community members. 93% of people who tested positive for TB at the project clinics started treatment.</p> <p>The project extended its prevention program to include Youth Camps. In February, the first camp took place for children in the age group 10 to 13 years. The aim of the camp was to empower and encourage the children that they can do anything they put their minds to. This was done through the following topics: identity/knowing yourself and self confidence; choices/decision making; and goals for the future – my vision, my future (vision for collage/story board). In March, a second camp took place which focused on enriching and educating the youth of three high schools with students from six villages. The event took place</p>

Country	Main Results
	<p>at the outdoor campsite where teenagers had the opportunity to take part in group activities, team building exercises, and discussions. Topics included self-awareness; self confidence and journaling; HIV/AIDS education; career guidance; gender talk/gender equality; life coaching and life skills; and education and self confidence.</p> <p>The project has adopted the updated and revised national Department of Health PMTCT guidelines and is supporting the 12 clinics participating in the project to implement them. One important update is that all HIV positive pregnant and breastfeeding women and children under 5 are now given lifelong antiretroviral therapy (ART) regardless of their CD4 count.</p> <p>Pregnant women are advised to sign up to “Mom Connect”, which is an initiative set up and run by the Department of Health. It is a free cell phone messaging system that sends reminders of antenatal clinic checkups and sends information about the fetus’ development during pregnancy and after birth. The efforts at national and district level to track pregnant women, HIV infected mothers and infants continues to improve and is very encouraging. During the reporting period, 79.7% of pregnant women under the care of CHWs received a third trimester HIV test, which is on track to achieving the end of project target of 80%.</p> <p>There is increased awareness and improved knowledge about the availability of HIV/AIDS and TB health services. This is demonstrated by the number of patients attending medical appointments and the decreased mother to child transmission (MTCT) rates (MTCT rate is measured as the HIV-PCR + test rate). The MTCT rate decreased to 2.4% compared to 6.4% at the baseline. PMTCT awareness campaigns are contributing to changes in practices and behaviours. Pregnant women are seeking medical attention during pregnancy and getting tested for HIV/AIDS. Local clinics are all performing PMTCT tests. Health staff and CHWs continue to address the need for PMTCT and other HIV prevention approaches and practices in campaigns and at community meetings. Patients are now very comfortable going to the clinics. There were no complaints on the availability of health services or the stock out of drugs.</p>
<p><b>Tanzania</b></p> 	<p><b>Diocese of Masasi</b> The under five mortality rate per 1,000 live births in the project area decreased to 71/1,000 from 112/1,000 (baseline 2012) by March 2016 and exceeded the target of 100/1,000 set to be achieved by the end of the project in March 2017. The cumulative result is due to a persistent focus on education sessions with project communities of the most common childhood diseases, vaccination campaigns, treatment of disease and prevention of HIV/AIDS from mother to child. The number of months per year farmers reported having food security increased to 11 months from 4-8 months (baseline 2012) and exceeds the target of 10 months set to be reached by the end of the project, due to sufficient rainfall, improved seeds, proper spacing, sowing, intercropping, mulching and contouring.</p> <p>The percentage of pregnant women assisted by a trained health professional during delivery increased to 92% (2,155/2,351) by March 2016 from 40% (baseline 2012) exceeding the end of project target of 60%. The number of children under five that attended clinics monthly for monitoring purposes increased dramatically from an average of 123 children (baseline 2012) to a cumulative total of 28,959 children (13,336m/15,623f), which greatly exceeds the target of 1,025 children on average participating in monthly monitoring visits.</p> <p>The percentage of farmers who increased their production and crop diversity increased to 65% by March 2016 from 0% (baseline 2012) exceeding the end of project target of 60%. The percentage of severe underweight and stunted under five children decreased to 1.2% by March 2016 from 17.5% (baseline 2012) exceeding the end of project target of 5%.</p>

Country	Main Results
	<p>The percentage of people using health services increased to 75% by March 2016 from 16% (baseline 2012) and exceeded the target of 25% set to be reached by the end of the project. The percentage of people having access to clean, drinkable water increased to 64% by March 2016 from 25% (baseline 2012) and almost met the target of 65% set to be achieved by the end of the project. 46,783 people (64%) have access to clean and potable water.</p> <p>The number of nurses knowledgeable about the management of integrated child illnesses increased to 20 by March 2016 from 0 (baseline 2012) exceeding the end of project target of 12. The number of community health workers who are confident in their capacity to carry out education and provide services increased to 398 by March 2016 from 31 (baseline 2012), exceeding the end of project target of 175.</p> <p>The percentage of women able to cite two reasons for HIV/AIDS prevention increased to 80% by March 2016 from 45% (baseline 2012) and exceeded the target of 75% set to be achieved by the end of the project. The percentage of people knowing how to use treated mosquito nets increased to 77% by March 2016 from 32% (baseline 2012), exceeding the end of project target of 75%.</p> <p>The percentage of women participating in development activities increased to 88% by March 2016 from 5% (baseline 2012) exceeding the end of project target of 50%. The number of leadership positions occupied by women increased to 68 by March 2016 from 16 (baseline 2012), which is slightly lower than the target of 72 to be achieved by the end of the project. 60% of women now play a role in raising awareness on gender equality, better farming techniques, business, food security and nutrition. 90% of community members are now aware of the workload of women and the options to lessen it. In addition to improving women's access to quality, health services, more than 80% of female beneficiaries have received agricultural inputs through the project.</p> <p>The percentage of farmers adopting new agricultural techniques increased to 64% by March 2016 from 12% (baseline 2012), slightly less than the target of 65% to be achieved by the end of the project. The percentage of farmers who can explain the impact of 2 new techniques they have learned increased to 68% by March 2016 from 12% (baseline 2012) exceeding the end of project target of 65%. 79% of households in the project villages reported they can now afford 3 meals a day and still have surplus available for sale which rarely occurred prior to the beginning of this project.</p> <p>The percentage of female and male farmers that access extension services increased to 68% by March 2016 from 0% (baseline 2012) exceeding the end of project target of 65%. The number of participatory extension and farmer training fields increased to 785 by March 2016 from 0 (baseline 2012) exceeding the end of project target of 100.</p> <p>The actual percentage increase in the use of project dispensaries and clinics increased to 83% from 40% (baseline 2012) exceeding the end of project target of 40%. Satisfaction of community members on the availability of health services increased to 79% by March 2016 from 38% (baseline 2012) exceeding the end of project target of 60%.</p>
<b>Bangladesh</b>	<p><b>UBINIG Maternal and Child Health Care: Daighors Sustainability</b> This project served pregnant women, women of reproductive age, children under 5 and adolescent boys and girls in 130 villages in 15 districts through a variety of activities to improve maternal, newborn and child health access.</p>

Country	Main Results
	<p>Project activities included providing maternal and child health related advice through 35 Daighors (DaiCenter for Maternal and Child Health) and domicile (house to house) visit by Dais, advice on food and nutrition, awareness building, social and right-based activities. The project also emphasized the need for sustainability so that the Daighors could still operate with reduced external funding.</p> <p>During the reporting period, 35 Daighors operated under the management of trained Dais who were supervised by project staff. 65,807 visits were made by pregnant women, women of reproductive age, children under 5 and adolescent girls. Out of these visits, 1,613 women were referred to government hospitals and community clinics for further service. In general, 80% of pregnant women in the selected villages visited DaiGhors or were visited by Dai Mas.</p> <p>Other project activities included: exchange and exposure visit by 53 Dais and Daighors Associates, refresher training for 87 Dais, training of 15 Dais, mothers meeting on safe food and nutrition for 2,603 mothers, training of 76 participants on Dai collective operations, male members meeting for 236 participants, community meetings on the sustainability of DaiGhors with 618 participants, Dai meetings with 1,234 participants and meetings with different levels of government.</p>
<b>Bolivia</b>	<p><b>CBM Ecumenical Chagas Prevention Action (CCA)</b> members, PWRDF supported a two-year health project initiative in Bolivia implemented by OBADES (a Bolivian NGO) aiming to prevent the spread of a parasitic disease known as Chagas - a potentially life threatening illness found mainly in 21 Latin American countries. Chagas is a tropical disease that causes significant damage to the heart, stomach and central nervous system. It is transmitted by an insect (Vinchuca) that lives in the cracks of poorly constructed houses. The beneficiaries were rural Quechua farmers in three municipalities who were educated on prevention, detection and treatment of Chagas, thus improving their health. One area of prevention was to improve family dwellings to avoid infestation by the Chagas vector.</p> <p>Although unable to reach the goal of diagnostics for reasons outside of its control, OBADES was able to use the saved funds from this activity to repair 118 houses in addition to the planned 200. As a result, the project exceeded the target and helped repair 318 houses and treated 70 people who were infected with Chagas. The project also carried out outreach education sessions on Chagas prevention and 589 people benefited from this activity.</p>
<b>Canada</b>	<p><b>Mining Watch Canada (MWC)</b> works to change public policy and mining practices to ensure the health of individuals, communities and ecosystems. MWC supports communities in Marinduque, Mindanao and the Cordillera region in the Philippines, negatively impacted by the activities of Canadian mining companies, to pressure these companies to be responsible and law abiding.</p> <p>The 2015 grant contributed to informing communities about their rights and legal options. Working closely with Philippine partners, MWC secured pro-bono legal services for Marinduquenos, should they decide to refile their lawsuit in Canada, and accompanied lawyers to meet community members and provincial authorities. MWC engaged in awareness raising activities on human rights abuses associated with exploration activities in the Cordillera through participating in the Stop the Killings Network, as well as visiting communities to better channel community support. One of the main obstacles is the level of risk and danger for environmental and human rights advocates.</p>

Country	Main Results
	<p>Other capacity building activities included a keynote address to Philippine networks developing campaign strategies; sharing expertise and information on resource extraction and policy debates, mining and international norms, Canadian regulations, guidelines and policies, and best practices; organizing workshops for the Montreal World Social Forum with Philippine partner organizations to share knowledge and campaign strategies; sharing expertise on the Didipio project, onsite visits with an international network of organizations and securing access for community messages at a meeting against OceanaGold in Toronto. Research conducted on ownership structures of the Canatua, Didipio and B2Gold projects is helping to develop awareness among community leaders for more effective collective campaigns. This research identified who to address for the closure of the depleted deposit. The research will be vital for a Canadian project of mapping and conducting corporate research on Canadian mining projects in the Philippines. The project directly benefitted 14 local grassroots / community organizations, national/international networks and Marinduque residents. It indirectly benefitted thousands of local citizens residing in the major mining affected regions in the Philippines.</p>
<b>Egypt</b>	<p><b>Refuge Egypt</b>, a ministry of the Episcopal Church in Cairo, provides several services to newly arrived asylum seekers waiting for UNHCR refugee status determination, repatriation, resettlement or local integration into Egyptian society. Cairo is one of the largest urban refugee centres in the world. The situations in Sudan, South Sudan and Syria generated a large influx of refugees increasing the number of arrivals. PWRDF supports Refuge Egypt's Well Baby and Well Child clinics, which provide basic health care for refugee children under five and delivers education session to caregivers and health promoters on health and nutrition.</p> <p>The project benefitted 2,804 direct and 6,380 indirect beneficiaries. The funds enabled 1,276 children (731 ages 0–2; 545 ages 3–5) to be checked for immunizations, have their weight and height measured against developmental benchmarks, be screened for chronic health issues (malnutrition, rickets), and to receive individual education on early child health issues across 4,952 consultations. Of the 1,276 children, 597 were female and 679 were male; 71 cases were Syrian, while 1,207 were Sudanese, South Sudanese, or Iraqi.</p> <p>The project also provided food packages to Syrian refugees and 1,276 families received 3,387 food parcels, surpassing the target of 2,500 food parcels. 1,528 participants attended 123 group education sessions enabling them to better tend to their children, and 3 health workers participated in 24 sessions of ongoing training in early childhood health. The impact of the education was demonstrated by 90% of mothers exclusively breastfeeding their babies under six months.</p>
<b>Guatemala</b>	<p><b>Asociacion Nacional de Mujeres Guatemaltecas (IXMUCANE)</b> is a women's association that runs Women's Rights and Health Program for women living in Petén, the northernmost region in Guatemala. It has 528 members and was set up by women who fled the conflict in the 1980s and returned to Guatemala in the mid 1990s. The majority of the beneficiaries are also returnees. IXMUCANE Women's Association focuses on improving women and youth knowledge about sexual and reproductive health; educating and empowering women on their rights; and preventing discrimination, exclusion, and violence against women.</p> <p>With funds provided by PWRDF, IXMUCANE carried out a members' consultation to improve their capacity to develop and implement a health education campaign. As a result of the consultation, a team of 4 women were selected and trained on HIV pre and post counselling and testing. For the first time, in collaboration with local health officials, the women led an information session and HIV/AIDS testing. 341 women attended the workshop and 143</p>

Country	Main Results
	<p>women and 10 men took the test for first time and 82 for the second time. Fortunately, no one tested positive.</p> <p>547 youth from 9 schools attended 9 reproductive health workshops. IXMUCANE produced an educational radio spot on women's health. The messages were broadcasted 6 times a day for a period of 30 days on 2 different radio stations reaching close to 70% of the audience of several communities in the Peten and Alta Verapaz departments. IXMUCANE also carried out a "Family Relationship Day" workshop for couples. The workshop focused on the prevention of violence against women. IXMUCANE members improved their knowledge on reproductive health and access to health services. They also increased their participation in the local and regional governmental health structures.</p>
<b>Guatemala</b>	<p><b>Madre Tierra (MT)</b> is a women's association established in Guatemala's South Pacific Coast region. The association is comprised of women who returned to Guatemala in the 1990s after being in exile for a decade due to the conflict in the 1980s. Madre Tierra's Women's Health, Economic Productivity and Sustainability programs aim to improve the quality of life of its members and their families – around 365 people across 7 rural communities. As a grassroots organization, Madre Tierra works to promote, foster and increase members' leadership skills, gain access to the land and its benefits, the wellbeing of women and their families and to improve people's local capacity to engage in activities that will make their communities food secure. Not only are the communities located in a risk zone vulnerable to both rainy and dry seasons, but the community water supplies are usurped by sugar cane and banana agribusinesses, leading wells to run dry in the summer and crops to underperform or fail because due to lack of water. The 2015 plan concentrated on further developing capacity with more education and follow up on sustainable agriculture, installing mini irrigation systems to address water scarcity while reducing water waste and by making the results of the agricultural work visible.</p> <p>In 2015, Madre Tierra's project reached 131 people directly (117 women and 14 men). Among the women, 97 were farmers with home gardens, and the remaining were sustainable agriculture promoters and educators. 45 women's households had a drip irrigation system installed and families produced food for self-consumption. 25% of these women produced a surplus for the market, and supplemented their household income to address other needs within the family. Moreover, women had more time for other community, family or income generation activities. 50 more families joined the agriculture program and are participating in training on food production and preservation, soil revitalization/recovery, organic fertilizers, and food and nutritional healthy habits. Eight women with larger plots of land diversified their agricultural work and produced not only food but also small animals, fruit and agro-forestry.</p> <p>Madre Tierra produced a Development Methodological Guide addressing issues of prejudices against women, of interest to members and available for education. At least 80% of the women in the agriculture project have decision making power and decide how and what to produce. They have experienced changes in the traditional gender roles in the family. In alliance with other sectors and as part of the South Coast Network for Food Sovereignty, a document was submitted to authorities including the Ministry of Agriculture, Environment and Natural Resources, and to Congress exposing the issues generated by monoculture plantations and water scarcity. A United Nations reporter who visited one of the communities heard about the problems including the water usurpation issue.</p>
<b>Haiti</b>	For more than 25 years, Partners In Health (PIH/ZL) has worked to improve women's quality

Country	Main Results
	<p>of life by providing comprehensive, community-based health care in rural Haiti where, in most cases, medical services were not previously available. Gender based violence (GBV) against girls and women in Haiti is a serious health and human rights issue. Although women are known as the central pillars of the family and community, they are the most at-risk members. Access to care, health, psychosocial and legal remedies is limited by lack of resources, political will, economic insecurity, and gender power imbalances.</p> <p>Working closely with its psychosocial support team, community health workers and educators, PIH engages local women's health groups, and a broad institutional network to provide services to reduce the risk and impact of GBV. Compared to the situation prior to program implementation where only 46 sexual assaults were registered across the PIH project area, with no systematic follow up or support, the PWRDF grant helped to directly support 599 patients seen and treated for GBV (308 sexual assault, 100% victims were women and girls; 284 physical; 85% female, 15% male); 7 psychological. 79% of GBV victims received transportation support to access services so that poverty was not a barrier to care; 267 cases (44.6%) were referred to the justice system for legal follow up, and medical certificates were provided in all cases.</p> <p>During the last year, collection and reporting tools were standardized and now standard information is collected at each project site and compiled in reports. 36 GBV surveillance commission meetings were held with representatives of the health sector and women's organizations, with judicial and police presence.</p> <p>Awareness strategies and education sessions were completed for 23 new medical staff, for women group leaders involved in capacity building and for the public at large. 5,864 women's associations' members attended 99 short training sessions on the impacts of GBV; a radio spot was broadcasted in the 6 communes year round, and banners, posters and flyers were produced for International Women's Day.</p>
<b>Kenya</b>	<p><b>The National Council of Churches of Kenya (NCCCK)</b> has operated in the Kakuma refugee camp in Kenya's northern semi-arid region since 1994. NCCCK delivers services including reproductive health care and HIV/AIDS prevention, and livelihood initiatives for food production and income generation for youth and women from refugee and host communities. According to the United Nations High Commissioner for Refugees (UNHCR), by March 2015 the camp (established in 1992 to accommodate 70,000 refugees) had a population of 181,821 refugees, substantially more than the 140,000 sheltered last year, a number still increasing due to regional conflicts.</p> <p>During this reporting period, 28,295 females and 29,895 males benefited from the overall project. Participants gained understanding about reproductive health and HIV/AIDS. The number of youth seeking counseling and HIV testing services increased, as well as, the number of pregnant women attending safe motherhood sessions. NCCCK exceeded targets, as sustained preventive health and promotion of healthy behaviour change is paramount to the increased and fluctuating camp population. A remarkable improvement in the school retention rate of girls was noticed; of 2,935 pupils registered for the primary school national examination 613 were girls, an increase compared to 423 girls in 2014. Out of the 613 girls registered, 567 completed the examination and three girls from the refugee camp emerged as the top candidates. The impact of this is a decrease in teenage pregnancy and school dropouts.</p> <p>Ten vulnerable girls from the host community were identified through the local administration to participate in income generation training and activities. After learning the importance of</p>

Country	Main Results
	<p>training and vocational programs, 6 girls were trained as hair dressers and given start up kits, while the other 4 will graduate at a later date. 90% of the graduates developed business plans to guide their business implementation thanks to training on business operation, record keeping and marketing.</p> <p>23 women produced 113 jars of peanut butter and 10 kg of roasted groundnuts which were sold locally as project livelihood activities. Some profit was shared among group members, the remaining was set aside for raw materials and equipment. The income obtained was used in supplementing family food rations, especially to buy sugar, meat and vegetables. The market envisaged with a local organization was delayed. The women resolved to use other avenues, although these still have minimal economic viability. With NCKK guidance, a new market for the consumption of peanut butter by children with cerebral palsy in the camp and by groups during safe motherhood and HIV/RH sessions for adolescents in schools instead of providing soft drinks, is an option. It is a deliberate move to market this product in the camp, as well as, to address nutrition. NCKK also procured 800 chicks. Of these, 91 died during the rearing period and 650 were distributed to 71 of the most vulnerable families, and the rest remained at the centre for training purposes. The households are doing well in production. The families now have an extra source of protein and income from the sale of the eggs. No cases of malnutrition were found among the beneficiaries.</p> <p>NCKK activities are environmentally friendly. Waste products from poultry and fish farming are used to add manure to the vegetable farm while the husks from groundnuts are used for mulching. The plastic bottles from soda and peanut butter are recycled by the beneficiaries. The negative impact is minimal especially where the use of fossil fuels to run the generator pollutes the air. However, the environment at the production site has several trees that consume the carbon dioxide.</p>
<b>Kenya</b>	<p><b>Springs Ministries</b> This is a connections project funded by the Fleck family. The project runs an orphanage and provides assistance to HIV/AIDS orphans and HIV/AIDS widows. The funding has allowed the organization to pay high school fees, books and other living expenses for 10 students. It also provided life skills workshops for 78 widows.</p>
<b>Rwanda</b>	<p><b>Vunga Vocational Training Center (VUNGA VTC) Diocese of Shyogwe (school)</b> Vunga is an isolated, impoverished, extremely rural village with a population of 9,521 people. The majority (99%) of people make a living from traditional agricultural practices. While some of the younger generation practices subsistence agriculture with their parents, the majority are unemployed due to the lack of affordable education and jobs. Many youth get involved in alcohol abuse, drug trafficking, and petty crime becoming “youth at risk”. The social conditions of the population prompted the Shyogwe Diocese to inaugurate a vocational school in 2007 with financial support from the Rwanda Education and Discovery Committee (READ) of Saint John’s Anglican Church in Port Rowan, Ontario. The school provides vocational training on hair dressing, tailoring, welding, carpentry and construction. Since the inception of the centre, 95% of graduates were able to obtain employment. Six students have progressed into the next level of technical secondary school, and one young lady is presently studying first year civil engineering at the university level.</p> <p>This is the first year of three years of a joint connections project between PWRDF and READ. PWRDF is providing all the administrative support to READ and ensuring that it meets all the CRA stipulations and advice on how to strengthen Vunga’s VTC production units to secure market and self sufficiency. In 2015, the centre registered 65 students and 48 graduated. Students were also trained on agriculture, literacy, religion, and HIV/AIDS prevention.</p>

Country	Main Results
	<p>30 of the 48 students had limited financial resources to pay for education and their tuition and fees were paid by the program. Also, all students received a daily lunch to supplement their nutritional needs and enhanced their learning capability.</p>
<p><b>Rwanda</b></p>	<p><b>Vunga Vocational Training Center (VUNGA VTC) Diocese of Shyogwe (dormitory)</b> The VTC is located in an extremely rural, isolated area without infrastructure and paved roads. There is no public transportation either. Students must walk 3 hours or more daily, which prevents students from attending on a regular basis or forces them to drop out of school altogether. There were also requests for enrolment of students from far away, who could pay for student lodging and fees. The Rwandan government showed interest in enrolling students and paying their fees for accommodation. This would strengthen the school self sufficiency and government relations and the possibility of government grants. As a result, the Diocese built a student residence on land given on lease for 99 years by the government to the Diocese. READ designated funds for the construction of 56 double stacked bunk beds for the dormitory.</p> <p>The school now has a modern dormitory with 112 beds, 56 for girls and 56 for boys, with furniture and sanitation available for students. In January 2016, the dormitory received 11 students, 6 boys and 5 girls whose expenses are covered by charity organizations. The project encouraged the Rwandan government to give the school a significant grant for expanding a carpentry facility and for sponsoring the training of youth. READ designated some funds to complement the work to be done. The carpentry shop was expanded to twice its original size. The machinery hall was doubled and cemented, a material storeroom was added, and a sample of finished goods is on exhibit; the shop now has 7 machines. The school trained 30 youth (all of whom graduated) in modern carpentry for a period of three months. There are now 9 students in carpentry using the place daily. The workshop also services the surrounding community. Community members can come to clean, cut, and design their own projects and pay for the service. The expansion of the school and the shop had a significant impact in the village and is greatly appreciated by the community and authorities. Some adults started approaching the centre asking for the opportunity to study because they recognize the quality of teaching and the furniture students make. Teachers from other schools have also requested training.</p> <p>Nehemia Bucyana, a 54 year old man, enrolled in the carpentry program and successfully finished the training. Following that, he won a contract with other colleagues to make furniture for a company. He says that there is no need to import furniture from Dubai anymore, as they are now able to make it locally. The income obtained helps families to improve their houses.</p>
<p><b>South Africa</b></p>	<p><b>Temba Community Development Services</b> is a faith based organization founded in 1999 working to prevent and mitigate the effects of HIV/AIDS, sexually transmitted diseases, and Gender Based Violence (GBV). The main strategy is awareness raising and education via Circles of Support for Youth, Women, Men and people living with HIV/AIDS, and lobbying and advocacy targeting rural areas in the eastern part of Eastern Cape, and the northwestern part of Gauteng.</p> <p>Temba services benefitted 45,156 adult females, 31,134 adult males and 16,406 youth. As part of the community awareness raising, the project introduced community education sessions on sexual and reproductive health (SRH) rights. Via radio UCR FM, 4 monthly radio talk shows were broadcast and live interaction with trainers took place reaching 60% to 65% of potential listeners of 1,999,656 people living in the area. In light of several deaths that occurred due to unhealthy cultural behaviours regarding youth and circumcision, two three-day pre-initiation camps were held. At the camps, gender practices and concepts of sexuality and</p>

Country	Main Results
	<p>traditional values were addressed by Temba Men Circles of Support. Through these camps 3,131 young men opted for Voluntary Medical Male Circumcision (VMMC). In this period, 22 Circles of Support for women, men, youth and grannies were held, with 280 females and 269 males participating. Participants were informed about SRH Rights, TB, STIs, HIV/AIDS, ARV, TB treatment, sexuality, advancing the rights of LGBTI people, unhealthy behaviours, how to access relevant services, identify structural barriers, and advocacy strategies.</p> <p>Temba House was selected by Aids Foundation South Africa to work on education to change harmful cultural practices, with special emphasis on traditional male practices such as initiation rites to adulthood and circumcision. This partnership has enabled Temba to work more closely with Section 27 NGO, an organization that assists in lobbying and advocacy, including litigation. Due to its effectiveness and recognized quality of work, Temba House became an effective organization in advocating for quality of health services. Temba House is part of the Eastern Cape Health Crisis Action Coalition (EHCAC) which is working with Eastern Cape Department of Health to provide a framework to improve health services delivery in line with the national core standards, and to fulfill the constitutional right of access to healthcare services. EHCAC is a broad coalition of civil society organizations and individuals including patients, health care workers, nurses, doctors, and health professional allies dedicated to ensure the recognition of the right of access to health care. A collective of 3 civil society organizations, including Temba House, was contracted by the AIDS Consortium for EHCAC to address stigma and discrimination which was identified in the stigma index.</p>
<b>South Africa</b>	<p><b>John Wesley Community Centre (JWCC)</b> cares for individuals infected and affected by HIV/AIDS, especially children. JWCC's main goal is to support adult caregivers, families, children and child development programs to give orphans and vulnerable children resources to reach their full potential and lead responsible lives.</p> <p>The high success of the JWCC afterschool program earned the organization the epithet of a centre of excellence by the local municipality. The children's gymnastic team and the marimba groups continue to represent the municipality and the region in national and international competitions. The gymnasts have been busy. The team recently won 52 medals over 5 competitions; 10 children and a teacher were selected to represent Education Africa and South Africa in Marimbas in London in 2015. Other children had the opportunity in 2013 to do a similar tour representing the country and their community; 14 children went to an art camp in preparation for the theme of Share Peace.</p> <p>Grade 8 and 9 students participating in the Mentors@School program have seen substantial improvement in their grades. Some students participated in several competitions. Children are the direct beneficiaries, but the benefit is also felt by parents as they can work while children are being looked after and families are being impacted positively by development of children's values, self worth and potential. 80 students participated in the Spell-It competition; the three top spellers from grade 6 will compete with children from other schools.</p> <p>Twelve new tutors at the mentors@school program are guiding and teaching 256 children in 2016-2017.</p> <p>JWCC had a successful Work4aLiving training program so far this year with 209 people trained, 98 interviews facilitated and 42 people employed. A number of candidates also completed the phase 2 courses including basic computer literacy and general office management.</p>
<b>Thailand - Thai-Burma</b>	<p><b>Drug and Alcohol Recovery and Education (DARE) Network</b> provides addiction prevention and treatment services for Burmese refugees who fled conflict and persecution and settled in</p>

Country	Main Results
<b>Border Area</b>	<p>refugee camps in the Thailand-Burma border. Many are lifelong residents of the refugee camps which have existed for more than 25 years. The camp population, particularly youth, face a high prevalence of mental health issues including depression, post-traumatic stress disorder (PTSD), and addiction. In the communities in which DARE operates, substance abuse is more prevalent among men while the effects are felt across the community, particularly by women and children. In light of the political situation, there is hope that stability and peace will be established in the next 2 to 3 years, which will enable repatriation and delivery of services to Karen State to support the eventual return.</p> <p>DARE Network seeks to address both the cause and the effects of substance abuse within displaced communities through community based, culturally appropriate, gender education and addiction treatment in 6 settlements. DARE staff delivered 471 educational activities at schools and with the public at large across 6 communities reaching 9,155 males and 11,292 females. Each of the communities also conducted narcotics anonymous sessions for a total of 318 sessions reaching 1,722 people, the majority of them males (1,514). Furthermore, the training for volunteers engaged 43 males for the men’s program and 279 teenagers for the youth program (214 boys and 122 young girls). Volunteers conducted 6,637 home visits where they were able to discuss addiction issues with 20,079 people. Of 66 clients treated in a residence center for recovery, 54.55% recovered. Of 205 clients treated in a non-residential setting, DARE reports 62.58% recovery.</p> <p>DARE increased its activities in Burma by designating 20 villages suitable for DARE activities. The new initiatives in Burma were possible due to the relative stable situation the country recently experienced. A new treatment centre was built in T’ree Hpoh Kwee, in order to support the activities in the 20 villages. 50 new addiction workers were trained in Mae La camp, to meet the needs across the 20 villages and new treatment centre. Over time, the project has seen reductions in domestic violence, increased treatment of women and youth, and growing ownership by the communities of their roles in substance abuse prevention and recovery. DARE Network’s Teens for Kids Program has become the most useful and recognizable method of prevention education in the refugee camps.</p>
<b>Kenya</b>	<p><b>ECLOF Kenya</b> is an expanding, locally rooted, mid-tier microfinance institution concentrating on rural and peri-urban areas in Kenya. Founded in 1994, it has served poor and low income entrepreneurs and farmers in Kenya for over 20 years. Besides loans, ECLOF Kenya provides its clients with access to micro insurance for health or agricultural purposes and non-financial services and training. Its board includes representatives of churches, independent professionals and a client representative. It currently serves over 40,000 poor and low income clients, mostly women.</p> <p>2015 was the first year PWRDF granted funds to ECLOF. The funds were used to carry out 30 intensive trainings across Kenya about improving family budgets, decreasing risk of debt, and enhancing financial capabilities. The benefits are for clients, their families and ECLOF itself. With the “training of trainers” model, 3,944 microfinance solidarity group leaders (2,169 were females), were trained and are now trainers on financial literacy. They started training an average of 8 members per group. The plan is to train all 40,138 clients.</p> <p>Trainees increased their knowledge on savings, debt management, investment and budgeting. They learned about better debt management through adequate loan amounts and well planned loan repayments. Clients learned about more structured and logical expenditure in their farms or businesses through well budgeted purchases. If clients increase their ability to make smart financial decisions based on a clear understanding and comparison of the</p>

Country	Main Results
	characteristics and conditions of financial products, their businesses improve. Another result was an improved ECLOF Kenya performance due to increased ability by the clients to make smart financial decisions hence the number of loans and outstanding loan balance, both grew by 10%.
<b>Mozambique</b>	<b>CCM Pemba</b> is a microfinance cooperative for low income women in the city of Pemba in the province of Cabo Delgado, Mozambique. The cooperative has 360 members. During the reporting period, the cooperative experienced a 70% increase in its membership, growing from 250 to 360 members. The combined member savings accounts at the cooperative totaled 479,550.90 meticaais. The loan portfolio was 99,500 meticaais, with a delinquency rate of only 1.15%. The first line of credit that PWRDF loaned to CCM Pemba was fully repaid and is now being reinvested into new loans. The cooperative is regulated by the Bank of Mozambique. Consequently, the cooperative staff need to be trained on how to prepare and fill in the required 11 monthly prudential risk and ratio reports. The accountant has attended trainings with the Bank of Mozambique in Maputo. It should be noted that the monthly interest rate now paid on loans from private sector banks is 25% compared to 4% paid at the cooperative. That is why members appreciate banking services at the cooperative.
<b>India</b>	<b>Organisation for Eelam Refugees Rehabilitation (OfERR)</b> The refugee situation in Tamil Nadu state of India is protracted. With the ongoing support and advocacy of OfERR, over 10,000 Sri Lankan Tamil refugees have returned to their homeland since the war ended in 2009. OfERR continued to mobilize and support 450 Women's Self Help Groups that reached out to 7,280 women living in refugee camps. It also mobilized and supported over 100 Women Inclusive Networks (WINs) to raise awareness and act against gender based violence in the camps.
<b>Philippines</b>	<b>Cordillera Cluster - Cordillera People's Alliance</b> This cluster of partners worked on indigenous peoples' rights and good governance in Benguet and Mt. Provinces. 2,359 individuals were reached through education and trainings activities through 66 People's Organizations and People's Alliances with whom the cluster works. The cluster organized peoples' forums, cultural events, community meetings, solidarity gatherings, and roundtable discussions to create awareness and promote the rights of the indigenous peoples.
<b>Philippines</b>	<b>Cordillera Disaster Response &amp; Development Services (CorDis RDS)</b> 265 households affected by Typhoon Goni were provided with food assistance (rice, mung bean, cooking oil and salt) for a month, including hygiene kits (laundry soap, bath soap, toothpaste and toothbrushes). They were also provided with plastic sheets for emergency shelter and education materials to help children resume school.
<b>Sri Lanka</b>	<b>Movement for Land and Agricultural Reform (MONLAR)</b> mobilized 6 provincial planning forums (PPF) and accompanied them to refine their constitutions, guidelines and plans. Each PPF brought together an average of 20 community based organizations that worked around issues of ecological agriculture, food and water sovereignty, exchange of seeds and advocating against land grabs. Six ecological agriculture model and resource model farms were established in collaboration with the Department of Agriculture with the aim of providing farmers opportunities to experiment innovate and disseminate the benefits of ecological agriculture.
<b>Relief Work</b>	
<b>Bangladesh</b>	<b>UBINIG</b> 950 flood affected households were supported with a basic stable food ration for a month. Four flood affected Daighors (local advisory centres where trained traditional midwives offer advice and support previously built with PWRDF support) were rehabilitated and became operational again. Two community seed wealth centres affected by flood were rehabilitated. 40 dai (midwives) who were affected by flood were provided with tool kits, such as umbrellas and rain boots, to help them travel during the rainy season.

Country	Main Results
<b>Canada</b>	The <b>Prince Albert Grand Council (PAGC)</b> , which is a tribal council representing 12 sovereign First Nations with a total of 30,000 members, was provided with a solidarity emergency grant as recommended by the Bishop of the Diocese of Saskatchewan. PAGC provided meals, clothing and some shelter to supplement the Red Cross response as the need was overwhelming. PAGC also provided evacuation transportation for their members and paid for feeding firefighters.
<b>Central African Republic</b>	<b>ACT Alliance</b> Over 8,000 students (half male, half female) benefited from the rehabilitation of classrooms, provision of school furniture and construction of toilets and water points.
<b>Greece, Serbia and Hungary</b>	<b>ACT Alliance</b> Over 7,000 food kits and adult hygiene kits, and 1,000 baby hygiene kits were distributed to Syrians and other refugees in Greece, Serbia and Hungary. Over 2,000 sleeping bags and more than 1,000 tents were distributed to help refugees cope with winter.
<b>Iraq</b>	<b>ACT Alliance</b> Lutheran World Federation Iraq office provided basic food rations to over 12,000 internally displaced persons (IDPs) for 3 months; and basic water and sanitation facilities to 4,000 IDPs.
<b>Nepal</b>	<b>ACT Alliance/Lutheran World Federation Nepal Program</b> The ACT appeal response reached over 100,000 vulnerable households in 14 districts affected by 2 powerful earthquakes in Nepal. ACT Alliance members engaged in relief and recovery assistance work through life saving and life sustaining activities such as distribution of ready to eat food, food rations, emergency and transitional shelter provision, learning centre provision, restoration of drinking water and supply schemes, sanitation and hygiene support activities, latrine construction, distribution of kitchen utensils and other essential non food items, psychosocial support, livelihood restoration and shelter winterization. The second phase of the appeal is currently ongoing.
<b>Palestinian Territories</b>	<b>Al Ahli Hospital (AAH) through ACT Alliance</b> PWRDF supported this project through donations received from Necef Sabeel Canada. The AAH medical team provided health service to over 3,000 patients, including treating children with burns and surgeries. Over 300 malnourished children benefited from a nutrition program and over 900 women and children received psychosocial support.
<b>Syria, Lebanon and Jordan</b>	<b>ACT Alliance</b> Four ACT members (Department of Service to Palestinian Refugees, International Orthodox Christian Charities, Lutheran World Federation, and Middle East Council of Churches) responded to the needs of Syrians displaced inside Syria, as well as in Lebanon and Jordan. This contribution was made to ACT appeal SYR161 and its implementation is still ongoing. The appeal covers food, water, health, education, non-food items, and livelihoods to provide shelter, psychosocial support and protection.

## STORIES FROM THE FIELD



**CCM Pemba** – Microfinance plays a critical role in empowering women and helps to enhance their overall socio-economic status. Maria Luisa Monterio, a mother of four, is a beneficiary of the microfinance project that PWRDF funds in Cabo Delgado, Mozambique. Maria runs a small food stand in Pemba, and also offers catering services to major events like weddings and corporate events. Her business is thriving. She aims to expand her business and would like to buy a van. Currently she spends a lot of money on transportation and sometimes has to decline business opportunities because of the cost of transportation. She is very happy with the income that she is earning from the business. She says that her

family, above all her children, have more opportunities because she is investing in their education. Due to the increased volume of her business, she has become a local employer. She employs one person regularly to help her with the cooking and occasionally hires more when she has a high volume of orders. She considers CCM Pemba a great opportunity for women like her to have a small business. Without the loan from CCM Pemba, she would have no other option but to seek a loan from a private bank that charges 25% interest on a monthly basis. In contrast, CCM Pemba only charges 4%. Little wonder that the repayment rate of loans is 98% at the cooperative.

**EHALE Radio Program** – Nowadays, Jumito Zeferino, the Radio Coordinator for the EHALE Radio Program has his hands full. Whenever there are changes in the broadcasting schedule, people from all over the province call him to ask why their preferred radio program has not been broadcast at the usual time. Government officers send him health messages to broadcast; teachers call him with ideas for future programs, and most of all women from EHALE's radio listening clubs have a sizable list of topics they want to be addressed in future radio programs. The radio program, which was setup during the PWRDF Preventive Health and Food Security Project, is now being effectively used in the implementation of the MNCH Project All Mothers and Children Count. EHALE broadcasts health advice to mothers and families. The radio programs discuss maternal and newborn health, the importance of prenatal and postnatal care, children's vaccinations, nutrition, family planning, malaria prevention, etc. is stressed. One of the topics that women from the radio listening clubs want Jumito to address is early marriage and family planning. Women want these issues addressed because they want to have conversations with their husbands and families on



the impact of early marriages on the reproductive health of girls and young women. Because of the radio broadcasts, women and couples are beginning to consider family planning as a way to protect women's health. The Administrator of Nacala Velha District attributes to Radio EHALE the fact that the district did not register any cholera cases during the rainy season because the radio station carried out an aggressive education radio campaign that taught people how to improve their sanitation and to prevent cholera. The district registered an increased number of women, men and children participating in the "Family Health Campaign Week" because the campaign was widely advertised through Radio EHALE. During the "Family Health Campaign Week," people were encouraged to visit health centres and to bring children for vaccinations, and child growth and development monitoring.

End.