



**ANNUAL PROGRAM REPORT - DEVELOPMENT TEAM
PERIOD COVERED: APRIL 2018 - MARCH 2019**

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Executive Summary

The 2018/19 fiscal year was a bridge year for the Development Team. Staff dedicated substantial amounts of time carrying out conversations with partners to wind down PWRDF's projects from the last strategic plan and identifying new partnerships to help PWRDF implement the new institutional priorities for the 2019-2024 PWRDF Strategic Plan. As a result, new partners were added to PWRDF's roster of partners, and few projects have come to a close.

With Year 3 of the All Mothers and Children Count (AMCC) project coming to a close, there have been some significant achievements made to date. Agronomy and livestock training, coupled with reliable rainfall and bumper crops in the target AMCC countries in Year 3 of implementation saw significant improvements in food security among beneficiaries. Statistically significant gains in health provider and community health worker maternal, newborn and child health (MNCH) knowledge levels were also observed. AMCC evaluations show consistent growth in skilled birthing attendance, which shows that community-level referral systems, facilitated by community health workers, are working to encourage more women to attend clinics or hospitals for delivery. This, coupled with improvements in health facility quality and health provider skills, have in turn reduced maternal and infant mortality in the project areas.

The Indigenous Midwifery project has carried out few consultations that culminated with members of the three organizations (Chirapak, Kinal and Ryerson Indigenous Initiatives) participating at the 18th Session of the UNPFII in April in New York. The project helped open the door for issues of Indigenous midwifery to be discussed at the United Nations Permanent Forum on Indigenous Issues (UNPFII). PWRDF facilitated the process for Indigenous midwives to have a voice and presence at the table where issues relevant to their own identity were discussed.

PWRDF continued to respond to humanitarian and emergencies situations by using all networks and connections available to us. PWRDF staff worked with institutions such as the Canadian Foodgrains Bank, Anglican Alliance, ACT Alliance, and other faith-based organizations to respond efficiently to the needs of refugees and displaced populations. PWRDF joined resources with the Anglican Alliance (AA) Secretariat and the Episcopal Relief and Development (ERD) to organize a Disaster Preparedness and Management Workshop for the AA Caribbean forum members. The workshop took place in Grenada on March 11-15 and was attended by representatives of various Anglican dioceses in the Caribbean region.

PWRDF Development staff visited almost every partner and monitored the implementation of projects funded by PWRDF. The staff visits created the opportunity for good discussions about the PWRDF Prevention of Sexual Exploitation and Abused (PSEA) Guidelines and Procedures and encourage all partners to develop their own guidelines and procedures. The Diocese of Masasi is one of the partners that is actively developing and implementing their own PSEA guidelines.

Overall, PWRDF partners provided services, improved knowledge and skills of 3,787,313 people. PWRDF funding helped communities become more aware of gender equality, empowered women economically, improved access to health services and nutrition, improved food security, and helped rural farming communities in target areas to better mitigate climate change disruptions.

On the following pages is a detailed account of the countries, amounts and results achieved by each project.

PROJECTS FUNDED THROUGH 2018-19 FISCAL YEAR

Canadian – Indigenous & Latin America Program		
Country	Amount	Main Results
Canada NUU-CHAH-NULTH ECONOMIC DEVELOPMENT CORPORATION	\$25,000	<p>The Nuu-chah-nulth Language & Culture Program (NLCP) was established by NEDC in 2002 to support community initiatives that contribute to the preservation of the Nuu-chah-nulth (NCN) language and culture for current and future generations.</p> <p>PWRDF funding contributed to the continued preservation of Nuu-chah-nulth language and culture. Approximately 180 resource such as books, videos, CD/USB, online/website resources, and teaching materials were developed by NLCP. The resources have been shared with community members, other organizations, and, in several cases, other communities. The Facebook group called "I want to learn the Nuu-chah-nulth Language" now has 1491 members (up 191 since 2016). There are 3,200 active youth and adult learners of the Nuu-chah-nulth language and more than 12,700 indirect learners. The resources developed through the project have been celebrated and showcased in 14 communities. The project documents the Nuu-chah-nulth language and culture for future generations to share.</p>
Canada NUU-CHAH-NULTH ECONOMIC DEVELOPMENT CORPORATION	\$50,000	<p>NEDC is implementing the Indigenous Youth Business Strategy Program, that provides loans and economic literacy to Indigenous youth, male and female, to start their own business. A poster and a Press Release were developed for the soft launch of the program. The program is set and running. Indigenous (First Nations status and non-status, Métis and Inuit) youth under the age of 25 make up almost half of the Indigenous population in Canada. This group of youth faces some of the most challenging statistics in Canada from low graduation rates, high teen pregnancy, high suicide rates, and increased health challenges. This youth program provides the opportunity for Indigenous youth to break the cycle of poverty and dependency, and empower them on a journey of self-sufficiency.</p> <p>Through the year, NEDC completed an online application process that is more youth friendly. NEDC continued to carry out discussions with financial institutions, such as the Canadian Centre for Aboriginal Entrepreneurship, Business Development Bank of Canada, Aboriginal Youth Entrepreneurship Program, etc. to establish solid partnerships for the Youth Business Strategy Program and have their resources available to the trainees. Nine trainees have fully participated in program; seven new youth are going through the training and mentorship process; and seven more youth are being considered for training/mentorship.</p>

<p>Canada FIRST NATION ADULT AND HIGHER EDUCATION CONSORTIUM (FNAHEC)</p>	<p>\$25,000</p>	<p>FNAHEC is a First Nations non-profit organization from Alberta with the mission to coordinate the revitalization of the Siksika (Blackfoot) language, culture and history. In 2018, FNAHEC continued sharing with academia and NGOs, courses they have developed. They also continued digitizing materials to document, preserve, and transmit knowledge of the Siksika/Blackfoot language and culture. Old Sun College, a FNAHEC member, has successfully negotiated the acquisition of the digital copies of Blackfoot history held by the Government of Alberta Archives. This has great implications for the preservation of Siksika history and language. FNAHEC research, curriculum development, and implementation of language and culture courses and projects will also be strengthened. In addition, the Siksika Board of Education purchased the private holdings of a non-Indigenous writer who recorded many local elders. 8,000 individuals benefited from Siksika courses and programs carried out through FNAHEC throughout 2018/19.</p>
<p>Canada KORLCC</p>	<p>\$25,000</p>	<p>Kanien'kehaka Onkwawén:na Raotitiohkwa Language and Cultural Centre (KORLCC) works to preserve and strengthen the Kanien'kéha language and increase community access to culturally relevant programs and workshops that promote, reinforce and increase the transmission of cultural knowledge, history and traditions.</p> <p>In 2018, 17 students have completed their first year in the Ratiwennahn:i:rats program. Seasons 15 and 16 of Tota Tanon Ohkwari are in various stages of post-production (a total of five 22-minute episodes for each seasons). This puppet shows program reached out 5,600 community members (children, parents and grandparents) through cable broadcast. 600 people have attended cultural workshops -Beadworking, Sewing Classes, a Beadworking Exhibit, and talks on local trees and traditional medicines. The Rotinonhsionni (Mohawk) Language Gathering- and Oherokon youth program hold 8 community gatherings.</p>
<p>Canada OFFICE OF THE NATIONAL INDIGENOUS ANGLICAN BISHOP: 9TH SACRED CIRCLE</p>	<p>\$30,000</p>	<p>Through the office of the National Indigenous Anglican Bishop (NIAB) PWRDF provided funding for the 9th Sacred Circle. The funding was to assist with lodging for participants of the Sacred Circle gathering at the University of Northern British Columbia. The Sacred Circle performs many of the functions of a "Synod" for Indigenous Ministries. It provides an opportunity for delegates from many Indigenous communities to come together to worship, discuss their needs and concerns, and communicate the result of these consultations to the broader church.</p>
<p>Canada PIKANGIKUM FIRST NATION</p>		<p>Due to several circumstances, PWRDF was unable to disburse any funding during the 2018/2019 Fiscal Year period. During the summer 2019, Pikangikum went through two fire evacuations. All these disruptions made decisions around future programing in Pikangikum even more difficult.</p>
<p>Cuba CUBAN COUNCIL OF CHURCHES</p>	<p>\$25,920</p>	<p>In 2016/17, the Cuban Council of Churches (CCC) started a new three-year Sustainable Development Program. The Cuban Communities for Development program 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. 2018 funding benefitted 5,417 people (110 direct and 5,307 indirect beneficiaries), and produced 22 metric quintals of corn, 12 metric quintals of beans that contributed to improve nutritional diet of direct beneficiaries. 36 families identified as the most vulnerable, improved their access to food. The project also contributed to lowering the price of food in targeted rural communities. The community groups/individuals benefiting from the project</p>

		<p>committed themselves to give back to the churches or vulnerable neighbours such as daycares and old age residences, approximately 10% of the food produced with help from the project. Many of the community daycare programs and old age residences rely heavily on these donations.</p>
<p>Cuba EPISCOPAL CHURCH OF CUBA</p>	<p>\$33,181</p>	<p>The Integral Development Program (PDM) of the Episcopal Church of Cuba (ECC) has been implemented with support from PWRDF and the Episcopal Relief and Development (ERD). The project educates and empower rural and poor communities to improve food security and diet, and reduce food dependency. The project is helping changing social behaviours, and has improved community self-sufficiency.</p> <p>In 2018, the PDM worked with local promoters, most of them leaders trained by the program during previous years. They used the ABCD (Asset-Based Community Development) methodology to improve outcomes in nutrition, economic opportunities (Savings with Education), WASH (Water, Sanitation and Hygiene), and Management of Natural Disasters and Resilience. The Program has benefited 4,929 people from which 2,954 are women and 1,975 men. Some key Program results are: 3 people from the PDM became trainers of trainers and are training others to replicate the ABCD and Climate Resilience teaching methodologies. They are educating others about food security, savings groups, WASH and disaster management; 22 facilitators were trained on Savings with Education; 15 new community leaders were identified and trained in micro project management; and, 4 leading clergy, 6 coordinators and 16 promoters trained in ABCD curriculum and climate resilience in 6 new communities. The project registered improved access to good quality clean water. 31 Water Purification Systems have been installed in the country, with UV and ozone technology. These systems directly and daily benefit more than 2,550 people with an average of 10 liters of purified water per consumer.</p>
<p>El Salvador CoCoSI</p>	<p>\$33,117</p>	<p>CoCoSI (Committee Against AIDS) project focus on gender education for the prevention of HIV, bullying & hate crimes. The project educates and raises awareness of community leaders, national NGOs and governmental agencies about Gender Spectrum/Non-Binary Gender issues.</p> <p>In 2018, CoCoSI animated 145 workshops in 13 schools in the Department of Cabañas, El Salvador. The workshops' themes covered the following themes: non-binary gender/gender spectrum and identity, prevention of HIV and adolescent pregnancies, dating and intimate partner violence, bullying prevention, self-care, alcoholism prevention, sexual abuse, puberty and adolescence, suicide prevention, sexual and reproductive health and rights. 1,787 people benefited directly from the project and 13,148 individuals benefited indirectly from the project activities. 6,000 people were listeners of Radio Victoria whom broadcasted 34 educational and informative radio spots and 84 CoCoSI news reports. CoCoSI financed 152 medical appointments for people living with AIDS and carried out 26 home visits to support groups.</p>
<p>El Salvador CRISTOSAL FOUNDATION</p>	<p>\$27,470</p>	<p>Cristosal Foundation (CF) initiated a new program in 2017. The program promotes local development processes with focus on human rights integration of internally displaced persons (IDP) by violence in El Salvador. This is a connections project. The project is funded through donations from St. Mary's Karrisdale Anglican parish in British Columbia.</p> <p>The IDP suffer disproportionate indices of violence. Often the violence is inflicted within the nuclear family circle. Children and adolescents are often affected directly and indirectly by the violence. Cristosal Foundation works</p>

		to improve access of children and adolescents to education services, and helping men and women to access employment and health services. To date, the project has benefitted 17 families, comprising 65 people (23 women, 21 men and 21 children) and 150 indirect beneficiaries.
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<p>Canada RYERSON UNIVERSITY'S ABORIGINAL INITIATIVES</p>	<p>\$39,525</p>	<p>Indigenous Midwifery Project - This is a three-partner project that brings together Indigenous women organizations from Canada, Mexico and Peru. The project objectives are:</p> <ul style="list-style-type: none"> • Research current situation of indigenous midwifery and their role and contribution to improve maternal health outcomes and the welfare of Indigenous communities in Canada, Mexico and Peru; • Training of new indigenous midwives and promote recognition of knowledge and best practices of indigenous and traditional midwives for the benefits of Indigenous communities in Canada, Mexico and Peru; and • c) Promote indigenous midwifery at national and international forums as a viable, available, efficient and legitimate response to the needs of Indigenous women to receive culturally sensitive maternal health services. <p>In 2018, the three partners, KINAL, CHIRAPAQ and RYERSON's Indigenous Initiatives continued implementing their Indigenous maternal health and midwifery best practices project which culminated with their participation at the 18th Session of the UNPFII in April 2019 in New York. In terms of results, RYERSON has coded and analyzed the results of the survey developed collaboratively for midwives and knowledge keepers. A final report on this survey is in progress and will be shared with Indigenous midwives originally interviewed for feedback, editing and final approval prior to publication. NACM (National Aboriginal Council of Midwives) has just completed an Indigenous midwifery core competencies project. RYERSON is in discussions with NACM to obtain consent to be able to share this important resource material with the other 2 project partners, KINAL and CHIRAPAQ and to be able to adapt to their respective practice contexts. Lastly, Ryerson Midwifery Education Program has posted a faculty position in Indigenous Midwifery with a goal to have someone hired by summer 2019. This is a great opportunity to deepen research ties with the PWRDF Indigenous Maternal Health and Midwifery Program among the 3 partners in the 3 countries.</p>
<p>Mexico KINAL ANTZETIK DISTRITO FEDERAL</p>	<p>\$38,523</p>	<p>In 2018, 20 Indigenous midwives apprentices and 10 Indigenous midwives mentors participated in KINAL's Indigenous midwifery training program. KINAL also completed the compilation and systematization of best practices on Indigenous maternal health. The resulting findings of their research on Indigenous midwifery in Mexico would be shared with their other 2 counterparts, CHIRAPAQ and RYERSON. Both, KINAL and CHIRAPAQ continue promoting institutional collaboration with government health agencies and NGOs in their respective countries. KINAL worked with CHIRAPAQ and Ryerson's Indigenous Initiatives, to participate on the 18th Session of the UNPFII in April 2019 in New York.</p>
<p>Peru CHIRAPAQ (Centro de Culturas Indigenas de Peru)</p>	<p>\$38,339</p>	<p>CHIRAPAQ carried out 7 bi-monthly training sessions with 22 Indigenous women, 8 traditional midwives and 14 apprentices. A digital version of a research that analyzes the situation of midwifery in Peru was completed. The research includes cases studies of Indigenous birth practices performed in the Andes region, which are considered as Indigenous midwifery best practices in Peru. Both, KINAL and CHIRAPAQ have continued promoting institutional collaboration with government health agencies and NGOs in their respective countries. Discussions continued between the 3 partners program, CHIRAPAQ participated in the 18th Session of the UNPFII in April in New York.</p>
<p>United Nations Permanent Forum on Indigenous Issues (UNPFII) – 18th Session</p>	<p>\$9,742</p>	<p>PWRDF facilitated the participation of KINAL, CHIRAPAQ and Ryerson's Indigenous Initiatives at the 18th Session of the UN Permanent Forum on Indigenous Issues (UNPFII) in April 2019. The participation was part of the UN Sustainable Development Goals (SDG) strategy to engage grassroots organizations in implementing the 2030 Action Plan. Grassroots engagement is part of the UNPFII consultation process and PWRDF partners shared insights</p>

		of their research, engagement with respective Indigenous communities, academia, and, local health government agencies.
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HEALTH PROGRAM		
Country	Amount	Main Results
Thailand -Thai-Burma Border Area DARE (Drug and Alcohol Recovery and Education Network)	\$34,273	<p>DARE provides addiction prevention and treatment services for Burmese refugees who fled to Thailand-Burma border refugee camps due to conflict and persecution. Many are life-long residents, and spent almost 25 years in the refugee camp. People, particularly youth, face high mental health issues including depression, post-traumatic stress disorder -PTS, and addiction. Substance abuse is prevalent among men but it affects the health of women and children in the family. 2018 activities and results include:</p> <ul style="list-style-type: none"> • Addiction prevention education activities reached out to 20,674 people including school children • 49 new youth volunteers (29 females and 20 males) were recruited and trained as part of Teens for Kids program. The total number of youth trained and recruited are 176. • 202 people -114 female4s and 88 males participated in 13 exchange trainings with DARE staff, CBOs and NGOs staff to refresh their knowledge, adapt new educational approaches and information about addiction and mental health issues. • The rate of addiction recovery was 58%
Egypt REFUGE EGYPT	\$39,228	<p>Refuge Egypt is a ministry of the Episcopal Church, located in Cairo, one of the world largest urban refugee city centers. The project provides services to newly arrived African asylum seekers waiting for UNHCR refugee status determination, repatriation, resettlement or local integration. PWRDF supports education for basic health care prevention and health care for maternal health and malnutrition at Arba Wa Nus - AWN clinic.</p> <p>In 2018, the project provided health services to 6,440 people (40% female, 15% male, and 45% children). Here is the type of services delivered:</p> <ul style="list-style-type: none"> • Primary health care (including malnutrition cases) provided through 5,511 consultations. • 20 education sessions for 286 caregivers conducted at AWN • 270 new antenatal care cases and 1635 follow-up visits • Screened and treated 79 new cases of malnutrition and did follow-ups for 561 • 1,330 food parcels purchased with PWRDF funding and distributed at AWN.

<p>Rwanda VUNGA VOCATIONAL TRAINING CENTER (VUNGA VTC) DIOCESE OF SHYOGWE</p>	<p>\$44,700 (Designated funds for Connection project)</p>	<p>Vunga Vocational Training Center (VUNGA VTC) Diocese of Shyogwe. The VUNGA VTC is a connections project funded by the Rwanda Education and Discovery Committee (READ) of Saint John’s Anglican Church in Port Rowan. The project offers theoretical and practical courses in hair dressing, tailoring, welding, carpentry and construction, preparing youth at risk to future opportunities to pursue higher education, sustainable employment or entrepreneurship. The project also organizes field training, assist students in seeking and obtaining employment, prepare students to write the national exams and assist the Diocese to develop a proposal for potential partnerships with other organizations and the Rwanda government. Main results achieved in 2018:</p> <ul style="list-style-type: none"> • Delivered training on carpentry, masonry, tailoring, welding and beauty & aesthetics. • 77 students entered the program including 28 males and 49 females • Achieved a contract with the government to prepare 30 students for carpentry certification. • Negotiations with the government to provide support to the project to ensure future sustainability.
<p>Burundi Diocese of Buye</p>	<p>\$80,501 Designated funds for Connection project</p>	<p>Construction of Pediatric Ward – The Diocese of Buyé and the Anglican Diocese of Edmonton have been partners since 2008. The Diocese of Edmonton has provided financial support for development projects in Buye. Funding helped the Diocese of Buye to build two new rooms in the clinic’s pediatric ward, a small room for drugs’ storage, and a resting room for the nurse on duty. The ward was opened on November 3, 2018. The hospital staff, leaders, and the community welcomed the new additions. They make the pediatric ward more functional and contribute to the delivery of better health services for children.</p>
<p>Mozambique CCM PEMBA</p>	<p>\$61,931</p>	<p>CCM Pemba is a financial cooperative for women based in Pemba, Mozambique that provides a safe place for their savings and loans at reasonable interest rates as an alternative to rates of almost 25% offered at private banks. A credit line from PWRDF allowed CCM Pemba to make 527 loans to women a year and 5,400 indirect beneficiaries. The repayment rate on loans with interest was better than 98% this year. Women use the loans to set up and expand a number of small businesses that include convenience shops, restaurants, catering services, hair salons and cake decoration. Ongoing assistance remains greatly appreciated particularly in the light of the trail of death and destruction left behind in Pemba and northern Mozambique in general from Cyclone Kenneth.</p>
<p>Guatemala IXMUCANE (Asociacion Nacional de Mujeres Guatemaltecas)</p>	<p>\$21,804</p>	<p>IXMUCANE is a grassroots women’s association working on women leadership, rights and health program in Petén-- the northernmost region in Guatemala. In 2018, Ixmucane services served 250 women and 1,000 indirect beneficiaries. Through the year, Ixmucane worked to strengthen the Board of Directors’ capacity to provide leadership to the organization. The Board worked with women in 14 local communities to develop businesses proposals to donors. Ixmucane also worked with local authorities to secure a building to setup a training center for women. The negotiations for the training center have yet to be finalized. Ixmucane also worked to update existing internal procedures manuals and policies.</p>

<p>Guatemala</p> <p>MADRE TIERRA (MT)</p>	<p>\$33,504</p>	<p>Madre Tierra is a grassroots women’s association established in Guatemala’s South Pacific Coast region by Indigenous women. During 2018/19 fiscal year Madre Tierra provided services to 453 women. MT run workshops on gender-based violence, agriculture sustainability best practices, and sexual and reproductive health. MT prepared and submitted 3 funding proposals to 3 different donors. Results achieved:</p> <ul style="list-style-type: none"> • 50 women received training and setup vegetable gardens using sustainable agricultural practices and organic composting with worms. • 12 youth received training on data gathering techniques. MT is now setting up the process of documenting and systematizing institutional information and history. • Young women’s membership has increased, as well as their participation in MT working groups, coordination or administrative responsibilities.
<p>Haiti</p> <p>PARTNERS IN HEALTH AND ZANMI LASANTE - PIH/ZL</p>	<p>\$106,000</p> <p>(\$70,000 provided by PWRDF and \$36,000 by other Canadian Churches)</p>	<p>The project improves women’s quality of life by providing comprehensive, community-based health care in Haiti rural areas across six medical facilities 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. Access to care, health and psychosocial and legal remedies is limited. PIH/ZL results during the reporting period include:</p> <ul style="list-style-type: none"> • Medical care provided to 472 female survivors of GBV: 175 cases of physical violence, 287 of sexual violence (51% -146 were girls under the age of 15), and 10 of psychological violence). • 429 of 472 survivors (91%) received psychosocial care, higher than the 80% reached in 2017. • In this period, 413 of 472 victims of GBV (88%) received a transportation stipend; • 302 members of 31 GBV commissions previously established continued to meet regularly to discuss actual cases. • 118 women (25% of the 472) referred to women’s rights organizations for social / legal support • PIH/ZL launched the “youth club” program based in Hinche. 30 participants -9 boys and 21 girls aged 12-19 from local schools learn about GBV, sexuality and consent and human rights. • 90-second radio adverts on GBV-related topics have aired on a continuous basis • Hosted events for International Day of the Elimination of Violence Against women Nov. 25.

<p>Canada</p> <p>MINING WATCH CANADA (MWC)</p>	<p>\$12,000</p>	<p>Mining Watch Canada (MWC) works to change public policy and mining practices to ensure the health of individuals, communities and ecosystems. MWC support communities in Marinduque, Mindanao, and the Cordillera region in Philippines, negatively impacted by the activities of Canadian mining companies, to pressure these companies to be responsible and law abiding. In 2018, the project increased communities’ knowledge on rights and legal options through the following results:</p> <ul style="list-style-type: none"> • Documenting Canadian Embassy support for Canadian mining investment; • Better tracking of the mining situation, and networking with other human rights organizations and locals, • Enhanced preparedness of actors in Marinduque to re-file case in Canada, • Community in control of data on environmental status of affected water sources near the mine. • Enhanced capacity to stop permit renewal through comprehensive research. • OceanaGold permit renewal is delayed due to strong local opposition. The company figured in 10 violations relating to environmental, land, labour, and indigenous people’s rights. • Awareness raised at Manila’s Canadian Embassy about the need to implement the Canada’s “Voices at Risk” guidelines to guarantee protection to human rights defenders.
<p>Kenya</p> <p>THE NATIONAL COUNCIL OF CHURCHES (NCCCK)</p>	<p>\$79,430</p>	<p>The National Council of Churches implements a refugee-focused project in Kakuma Refugee camp that addresses reproductive health, HIV and AIDs prevention project, livelihood initiatives for food production and income generation. Refugee youth and women are the main target group. NCCCK works in collaboration with United Nations High Commissioner for Refugees - UNHCR, and the Kenya’s Ministry of Health, to ensure that the new refugee population is prepared to cope up with life in the refugee camp in a healthy way. With PWRDF support NCCCK contributed to improve the health status of people in Kakuma:</p> <ul style="list-style-type: none"> • NCCCK conducted 37 focused group discussions with both pregnant and lactating mothers on safe motherhood reaching 1,110 adults and children. Women also attended the mandatory four ante-natal care visits and lactating mothers took their children for immunization • Information sessions on HIV/AIDS services available in the camp reached 1,434 people • 94 health education sessions conducted in schools on age-appropriate information on reproductive health prevention of HIV and other sexually transmitted infections, skills on peer counselling and decision making. • 6,076 boys and girls participated in debates on stigma and discrimination in all refugee camp schools. • NCCCK bought a hatchery machine and managed to hatch 2000 chicks and distribute them to refugee farmers. Forty families received forty chicks while the remaining were given to beneficiaries who had provided eggs for incubation. Poultry farming is highly embraced in the refugee camp and the host community as it is a source of income and food. • 20 vulnerable girls successfully completed training at St. Clare of Assisi and graduated in December 2018. They received start-up kits to begin their own businesses.

<p>Philippines</p> <p>CORDILLERA PEOPLE'S ALLIANCE (CPA)</p>	<p>\$45,000</p>	<p>The Empowerment and Socio-Economic Development Project works in collaboration with indigenous people's organizations and communities in the Cordillera region. The project works towards (1) indigenous peoples' defending their human rights and rights to ancestral lands, (2) asserting their rights to free, prior and informed consent for mining, dams and geothermal power projects, (3) disaster risk preparedness for natural and manmade disasters and (4) advocating and educating women, men and youth on indigenous issues in the Cordillera region. Trainers of trainers training was attended by 43 women and 22 women to increase their capacity to orient people's organizations (including youth and women's organizations). Members (143F/137M) of the initial people's organizations established by the project participated in leadership training. 500 women and 800 men participated in rights training to increase their awareness on indigenous people's rights, human rights, rights for farmers and workers, women's rights, children's rights, youth's rights, students' rights, international humanitarian law and preparation for legal cases.</p>
<p>Philippines</p> <p>CENTRAL VISAYAS FARMERS DEVELOPMENT CENTER, INC. (FARDEC)</p>	<p>\$25,500</p>	<p>The objectives of the Integrated Development Program for Peasants in the Central Visayas is to increase access to land, improve food security and enhance resilience to climate change. To achieve these objectives, there are three complementary project components (1) Program on Organizing, Empowerment and Services (POEMS), (2) Sustainable Agriculture Program (SAP) and (3) Advocacy Program. POEMS emphasizes community organizing and provides legal assistance to farmers seeking land titles. SAP improves farm production while building community resilience against disasters and climate change. Farmers participate in training on climate resilient sustainable agriculture, which includes indigenous knowledge with appropriate technologies to help farmers move away from capital intensive and chemical dependent farming. The advocacy component raises awareness on farmers' issues to other sectors locally, nationally and internationally, which is expected to transform into financial, technical and other support resources for farmers.</p>
<p>Kenya</p> <p>ECLOF Kenya</p>	<p>\$46,200</p>	<p>ECLOF Kenya is grassroots mid-tier microfinance institution concentrating on rural and peri-urban areas. It has been serving low-income entrepreneurs and farmers. ECLOF Kenya provides clients with loans, access to micro insurance for health or agricultural purposes, and non-financial services and training. ECLOF currently serves over 40,000 poor and low-income clients, most of them women. The activities accomplished included financial management and group leadership training for clients, weekly group meetings, and a refresher program for the training of trainers, monitoring group savings, periodically assessing client progress in investment, improvement of client business financial records and continuous monitoring and coaching. 7,465 people improved their financial literacy, portfolio quality, structured and targeted expenditure, and improved debt management. The project had a positive impact in the lives of 36,000 people whom improved their livelihoods and reduced poverty levels.</p>

Kenya SPRING MINISTRIES	\$15,000	<p>This connection project is a designated donation of the Flecks Foundation. The funds are a contribution to an orphanage and assist HIV and AIDS orphans and widows. The support contributes to carry out business training for HIV widows; educational support and shelter to orphans and vulnerable children in primary and high schools. With 2018 funding, Spring Ministries provided school fees for 15 high school and 32 primary school orphaned children. Children’s shelter, food, school and basic and medical needs were also covered. The project conducted 15 seminars for widows to empower them to set up small businesses.</p>
Zambia DIOCESE OF LUSAKA	\$ 10,000	<p>The construction of an incinerator at Kasenga Rural Health Centre, 51 kilometres east of Lusaka in Chongwe was completed and approved by the Ministry of Health. It was thought to be the remaining requirement needed to open a maternal clinic built by the Diocese to serve the catchment area’s 16,000 people. The clinic is already comprised of one delivery room, one maternity ward, one pre and post-natal consultation room, one patient screening and treatment room, one waiting room, one dispensary, two staff houses, one shelter for a large generator to provide electricity and one functioning borehole to provide potable water. After the incinerator was built, the Ministry of Health moved the goal posts to insist that the clinic could now only open once flush toilets are established in the washrooms. Consequently PWRDF agreed that the Diocese of Lusaka to use what few remaining funds that remain from the construction of the incinerator to contribute to the costs of installing flush toilets. Once the clinic is open to the general public, the distance to a clinic will be reduced to 5 kilometres from the current 14 kilometres for the local population. Thereafter the project will contribute to a reduction in malaria, other non-communicable diseases and maternal mortality.</p>
Zimbabwe	\$ 30,000	<p>TSURO (Towards Sustainable Use of Resources) - The purpose of the “Chimanimani Farmer Action Learning for Nutrition Security” project is to reduce the number of people affected by acute malnutrition by 10% within the targeted 12,000 direct and 15,000 indirect beneficiaries in Chimanimani district over one year through practical approaches in nutrition security that are replicable elsewhere. The project began in March but was disrupted by the destruction and death wrought by Cyclone Idai that struck Chimanimani district two weeks later. Despite the fact that targets are being revised going forward after this natural disaster, the need for nutrition security has never been greater. Consequently PWRDF is exploring options to supplement this initiative with an agricultural recovery project in concert with CFGB.</p>
Kenya	\$ 30,338	<p>UDO (Utooni Development Organization) - The purpose of the “ Shallow Water Wells” project “is to reduce the vulnerability of women and girls to the impact of climate change through the construction 9 shallow water wells near sand dams built by local communities in association with UDO in Makueni County. Shallow wells with an average of 4 metres depth have been dug by community members near sand dams under the guidance of UDO water technicians. The wells have been fitted with a manual, stainless steel hand pump and the top sealed with a concrete slab to prevent contamination from the surface, while the perforated culverts sunk in the well dug and the gravel strategically placed filter the water that enters the well through the subsurface area. Consumers of the water have already stated that the construction of the shallow water wells has reduced the danger and time to fetch potable water. It is expected that the number of households having access to potable water will</p>

		increase and result in a reduction in the prevalence of water borne diseases over time since the alternative is to scoop contaminated water through exposed holes dug in riverbeds.
Democratic Republic of Congo (DRC) PANZI FOUNDATION- MAISON DORCAS/DORCAS HOUSE	\$ 30,400	<p>The goal of the project is to re-integrate survivors of gender and sexual violence back in to their communities and to make women living in the area surrounding PANZI Hospital in Bukavu less vulnerable to gender and sexual violence. The PANZI Foundation set up the Maison Dorcas which serves as a transit and safe house for victims of violence and those receiving medium or long term care for fistula and incontinence. Women that stay at Maison Dorcas continue their healing journey.</p> <p>Maison Dorcas provides training in literacy, numeracy, small business management and specific income generation skills aimed at improving livelihoods and re-integrating women back into their communities. This year 54 survivors of sexual and gender violence were trained in such income generating skills as embroidery, tailoring, hairdressing and manicure. A dozen solidarity groups were set up for 299 survivors comprised of 277 women and 22 men. The solidarity groups saved money worth approximately \$ 1,932 in local currency by the end of March in order to make revolving loans available to members. In addition, 43 women received re-integration kits and resumed life in their communities. 31 benefitted from 4 houses rented by the project where they could produce and sell their products in Ibanda commune and Bukavu city.</p>
Uganda ST. JUDE FAMILY PROJECTS	\$31,300	<p>The “Strengthening Resilient Farming Practices and Livelihood Management Improvement for Women and Children” project builds the capacity of small scale farmers to engage in sustainable food production and agricultural enterprises to guarantee food security and dependable income for their families. Of the project’s 1,378 direct beneficiaries, there are 208 women, 106 men, 606 girls and 458 boys. By the end of March: 24 community based facilitators were trained in agricultural extension, 208 rainwater harvesting tanks were built, 185 energy efficient stoves were established, 6 demonstration tree seedling nurseries were established, 6,000 tree seedlings were planted out in beneficiaries’ compounds and fields using an agro-forestry approach and 6 formal cooperative associations were formed and registered with the district authorities. Other encouraging signs are that food production has increased such that more than 80% of the project beneficiaries now enjoy at least 3 meals a day with a better diversity of food groups that includes vegetables, fruit, beans and peanuts among other crops. In addition, the income of project beneficiaries has improved from the equivalent of \$ 55 per month prior to the start of the project to \$ 80 per month at the project mid way point for 75% of the beneficiaries, thanks in large part to the establishment of 6 cooperatives that assist in marketing of members’ produce to commercial buyers.</p>
Uganda ARUWE	\$44,339	<p>The goal of the “Girls Emerge – My Life, My Power” project is to empower adolescent girls and young women in Sembabule District to access sexual and reproductive health (SRH) services and to prevent sexual and gender based violence (SGBV) by addressing the causes of it. The main achievement in the first half of the project was the completion of a comprehensive baseline survey that ascertained the current situation of SRHR and SGBV in Sembabule district through interviews with mainly</p>

		<p>adolescent girls both in and out of school, but also including parents, teachers, SRH service providers, entrepreneurial & livelihood trainees, government and village leaders. 114 female adolescents were trained in SRHR and formed groups with leaders who to report rape, defilement and sexual harassment to authorities. 191 women were trained in cash flow and strategies to turn negative into positive cash flows in their small businesses. All have made financial management plans and 77 made investment plans. 41 female adolescents set up a grievance mechanism to report abusive reporting that involves edutainment and the Community Development Officer to speak to parents on such unlawful practices as depriving youth of education and forcing female teenagers into early marriages. Commitments were won from such authorities as the Police Officer in charge of the Child and Family Unit, the medical staff on VHTs and HUMCs and the teachers at schools have made commitments to uphold the SRHR of adolescents in future.</p>
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HUMANITARIAN AND EMERGENCY RESPONSE

Country	Amount	Main Results
<p>Bangladesh</p> <p>WORLD RENEW AND ICCO COOPERATION</p>	<p>\$440,432</p>	<p>PWRDF, in partnership with World Renew and ICCO Cooperation, provided support to Rohingya refugees in Bangladesh. The food assistance project is providing over 2,000 Rohingya families with cash vouchers for five months. The vouchers are valued at CAD \$13.40 for families up to seven people, and CAD \$18.89 for families larger than seven people. Families receive a new voucher each month and are able to purchase from local markets up to 14 different items, which were chosen based on availability, beneficiary preference, and nutritional benefits. The food items include sugar, iodized salt, milk, onions, garlic, dried fish, eggs, fresh spinach, eggplant, potato, turmeric powder, chili powder, dry red chili, and green chili. Families are free to choose whichever items they want and the quantity of each within the value of their food voucher.</p>
<p>Haiti</p> <p>PRESBYTERIAN WORLD SERVICE & DEVELOPMENT AND PARTNERS IN HEALTH HAITI</p>	<p>\$20,000</p>	<p>The Life Saving Targeted Malnutrition Treatment Program for Saint-Marc Children is a three year nutrition project. The project objectives are to (1) cure children with acute malnutrition, (2) reduce the rate at which children with malnutrition drop out of treatment prior to reaching full nutritional recovery, (3) reduce the number of children suffering from acute malnutrition who require hospital care and (4) increase breastfeeding for infants aged 0-6 months. All children who attend the health facilities in Saint-Marc for any reason are routinely screened for malnutrition. During the reporting period, 7,553 children attended health facilities in Saint-Marc, of which 867 (11%) were malnourished and were referred to malnutrition programs. An additional 5,279 children were screened by mobile clinics, of which 1,200 (23%) children were malnourished and were immediately enrolled in a malnutrition program. It is important to note 1,615 children were cured of malnutrition during the reporting period. Project staff facilitated 63 sessions with mothers in health facilities and communities to discuss the advantages to exclusive breastfeeding including the nutritional quality of breastmilk, protection for new immune systems, the protections afforded to womens' health and the advantages related to mother-child bonding.</p>
<p>South Sudan</p> <p>ADVENTIST DEVELOPMENT AND RELIEF AGENCY (ADRA) SOUTH SUDAN</p>	<p>\$567,394</p>	<p>Since 2016, Kapoeta state in South Sudan has experienced consecutive and prolonged droughts resulting in crop failure, diminished yields, limited production, inadequate pasture for grazing animals and high unstable food prices. Consequently, people living in Kapoeta state have experienced recurring food insecurity and health related issues including malnutrition. The Food Assistance for the Famine Affected Population of Kapoeta State provided six months of food rations to 1,700 households equivalent to approximately 8,500 women, men, girls and boys. Households headed by children, households with malnourished children, malnourished pregnant and breastfeeding women, physically disabled persons, widows and elderly members with no income sources. Each household received a voucher for 35 kg of cereal, 4 kg of pulses, 3 L of cooking oil and 0.5 kg of salt.</p>

<p>South Sudan</p> <p>EPISCOPAL CHURCH OF SOUTH SUDAN - SOUTH SUDANESE DEVELOPMENT & RELIEF AGENCY (ECSS-SSUDRA)</p>	<p>\$25,000</p>	<p>The project supported 1,096 households (7,672 beneficiaries) with food assistance for two months during a period when there was dire need by the conflict affected people in Rubkona, Bentiu and Pariang counties. There was a significant demand for emergency food assistance from huge populations of internally displaced people in Unity state among other states in the country amidst limited resources.. Beneficiaries included internally displaced persons, women (widows, pregnant and breastfeeding women), the elderly, child headed households, people living with HIV/AIDS, people with disabilities and other vulnerable individuals in Rubkona, Bentiu and Pariang counties. The food rations comprised of sorghum, beans, cooking oil and salt, which stabilized consumption, saved lives and protected the nutritional status of conflict affected people in Unity state. The food items were considered culturally acceptable by the beneficiaries.</p>
<p>Sudan</p> <p>ADVENTIST DEVELOPMENT & RELIEF AGENCY (ADRA SUDAN)</p>	<p>\$70,000</p>	<p>For nine months, the project provided cooked meals to 5,536 children (school children: 1,369F/1,544M; out of school children: 1,573F/1,050M) between the ages of 7 and 18 years. Meals consisted of cereal, pulses, vegetable oil and iodine salt. Ten schools located in villages in Geissan and El Kurmuk localities in Blue Nile State participated in the project. The community based targeting management system led by village leaders including women leaders, Ministry of Education officials at the state and locality levels and parent teacher associations assisted with selecting vulnerable children who were not attending school to participate in the project. The identified vulnerable children ate their meals at the participating schools.</p>
<p>Yemen</p> <p>ADVENTIST DEVELOPMENT & RELIEF AGENCY (ADRA YEMEN)</p>	<p>\$50,000</p>	<p>An estimated 22.2 million people in Yemen require humanitarian assistance, 17.4 million people require food assistance and 8.4 million people are severely food insecure and risk starvation. Approximately 2.9 million people require treatment against acute malnutrition and 238,000 people are facing famine like conditions. 1,100 households (6,198 individuals) in Harib Al Qaramish district, Marib Governorate are participating in a six month food assistance project. Harib Al Qaramish is strategically located in an area that is highly disputed by the Houthis and Arab Coalition. There are frequent airstrikes and bombardments thus making accessibility very difficult and preventing families from leaving or seeking refuge elsewhere. To protect beneficiaries and reduce safety risks, there are six voucher distribution sites and six vendor sites where beneficiaries redeem their vouchers with a monthly value of \$71 USD for food. This modality minimizes the risks associated with having many people congregated in one area and from women and children traveling long distances considering the topography of the district, wherein villages are dispersed and spread out from one another.</p>

GLOBAL AFFAIRS FUNDED PROGRAM

Global Affairs Canada Funded Project: All Mothers and Children Count (AMCC)

PWRDF had the opportunity to increase awareness of the All Mothers and Children Count (AMCC) Project in Year 3 with Global Affairs Canada. Events and visits were organized that strengthened the relationship between the AMCC team and Global Affairs Canada. On October 4 and 5, 2018, Global Affairs Canada Senior International Development Officer Ms. Ina Lukac-Orange visited the AMCC Project in South Kayonza and Kirehe districts in Rwanda. On November 1, 2018, PWRDF hosted Harkiran Rajsavansi at PWRDF's office in Toronto for a meeting with the staff members responsible for implementing the AMCC Project. On December 3, 2018, the AMCC Project Manager for PWRDF and the Program Coordinator for the Diocese of Masasi visited the Canadian High Commission in Dar es Salaam to provide an update on progress achieved to date for the AMCC Project in Tanzania. Together they gave a presentation to the Minister Counsellor-Development and Head of Cooperation, Ms. Gwen Walmsley.

On February 13, 2019, PWRDF and Village Health Works (VHW) were pleased to welcome Ms. Julie Crowley, Head of Office of the High Commission of Canada in Rwanda to inaugurate the expectant mothers houses (EMHs). VHW staff toured Ms. Crowley and other guests around the VHW campus and explained how the project investments in nurse's quarters, a nutrition centre and EMHs will contribute to the smooth running of the women's health pavilion hospital once it is complete in 2020. During the week of February 18, Lino Jamisse, Senior International Development Officer/Partnerships and Civil Society Liaison Officer, Canadian High Commission to Mozambique, accompanied PWRDF's Planning, Monitoring and Evaluation Coordinator to EHALE. They held meetings with project staff, visited project communities and observed the year 3 annual data collection.

PIH Rwanda and VHW were invited to participate in the Global Affairs Canada Forum in Kigali, Rwanda on March 13 and 14 hosted by the Head of the High Commission of Canada in Nairobi, Ms. Lisa Stadelbauer. On March 15, a Canadian Parliamentary Delegation visited PIH Rwanda in Burera District. The delegation was led by Rob Oliphant (MP Don Valley West) and included Pam Damoff (MP Oakville North-Burlington), Ramez Ayoub (MP Thérèse-De Blainville), Emmanuel Dubourg (MP Bourassa), Senator René Cormier (New Brunswick), Senator Jim Munson (Ontario) and Senator Raynell Andreychuk (Saskatchewan). The delegation visited health facilities and spoke with health providers and patients. Global Affairs Canada officials who accompanied the Parliamentarians were Elisha Ogonji, International Development Officer, Tamer Mansy, First Secretary (Cooperation) at the High Commission of Canada in Kenya and Rick Foreign, Service Officer at the High Commission of Canada in Kenya.

All four AMCC partners saw improvements in:

- The % of live births attended by skilled personnel
- The % of pregnant women that attend at least the 4 WHO recommended antenatal visits
- The % of mothers and newborns receiving postnatal care within 2 days of delivery
- The application of proper infant thermal care practices
- Exclusive breastfeeding application
- Community health worker satisfaction
- Knowledge of modern contraceptive options
- Preference for modern contraception options
- Food security

<p>Burundi</p> <p>BURUNDI VILLAGE HEALTH WORKS (VHW)</p>	<p>\$847,635.91</p>	<p>Expectant mothers houses construction was completed in February 2019 and pregnant women with low risk pregnancies nearing their due dates were welcomed to stay in the expectant mothers houses beginning in March. Before the expectant mothers houses were constructed, women participated in focus group discussions to share their design needs. To balance privacy with social interaction with other patients, the bedrooms host a maximum of four women. There are 12 washrooms, six showers, two lounge/eating areas, a kitchen, laundry area and the walkways are covered. A nurse and other support staff also have a room within the premises in the event women go into labour earlier than expected or women experience complications. It is expected the occupancy rate will increase when women share their experiences staying in the expectant mothers houses and the care they received.</p> <p>The 36 (18F/18M) nutrition promoters participated in monthly training sessions to strengthen their nutrition knowledge, which enable them to continue educating community members to reduce and ultimately eradicate malnutrition and gender-based violence by addressing nutrition security. During the reporting period, all 36 nutrition promoters facilitated education sessions for 17,021 (11,709F/5,312M) community members on nutrition, cooking demonstrations and gender equality as gender inequality is one of the root causes of malnutrition. Nutrition promoters have reduced knowledge gaps for community members in terms of nutrition, balanced diet and early detection of malnutrition. Nutrition promoters played a critical role alongside community health workers and model farmers to reduce malnutrition in the project operational area by raising awareness on malnutrition and providing practical solutions to eating balanced diets. Community health workers screen children under 5 for malnutrition while model farmers use their farmer field schools to demonstrate to their neighbours how to grow vegetables, food crops and cash crops.</p> <p>Model farmers are one of the most effective community based worker groups to reduce malnutrition in in the project operational area by teaching their neighbours how to grow various vegetables, food crops and cash crops. Model farmers told project staff they are able to invest more of their profits into inputs, increase their yields and sell surpluses. Based on the successes model farmers have demonstrated in their farmer field schools, there is increased demand from their neighbours for technical advice and skills to apply these techniques to their own gardens and fields. Between April 2018 and March 2019, model farmers interacted with 4,314 (2,324F/1,990M) community members on implementing sustainable agricultural and horticultural practices. According to the annual survey, 76.03% (888/1,168) of farmers reported increased food production, 77.65% (907/1,168) of farmers reported increased household consumption and 67.81% (792/1,168) of farmers reported increased income generation.</p>
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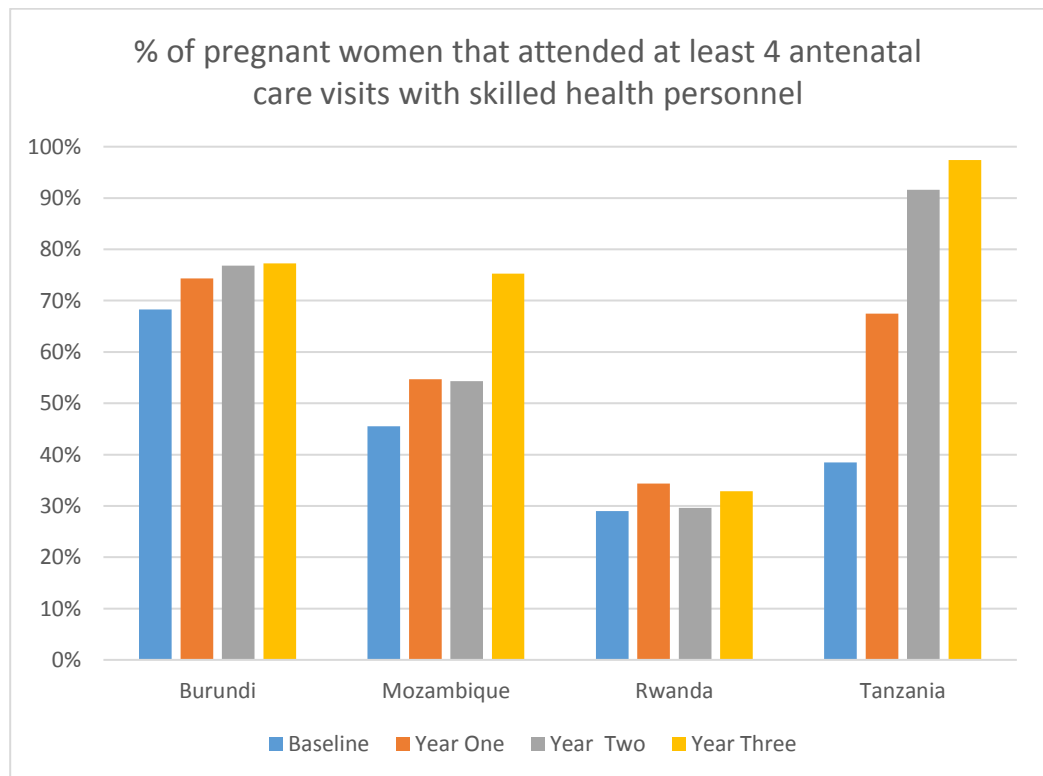
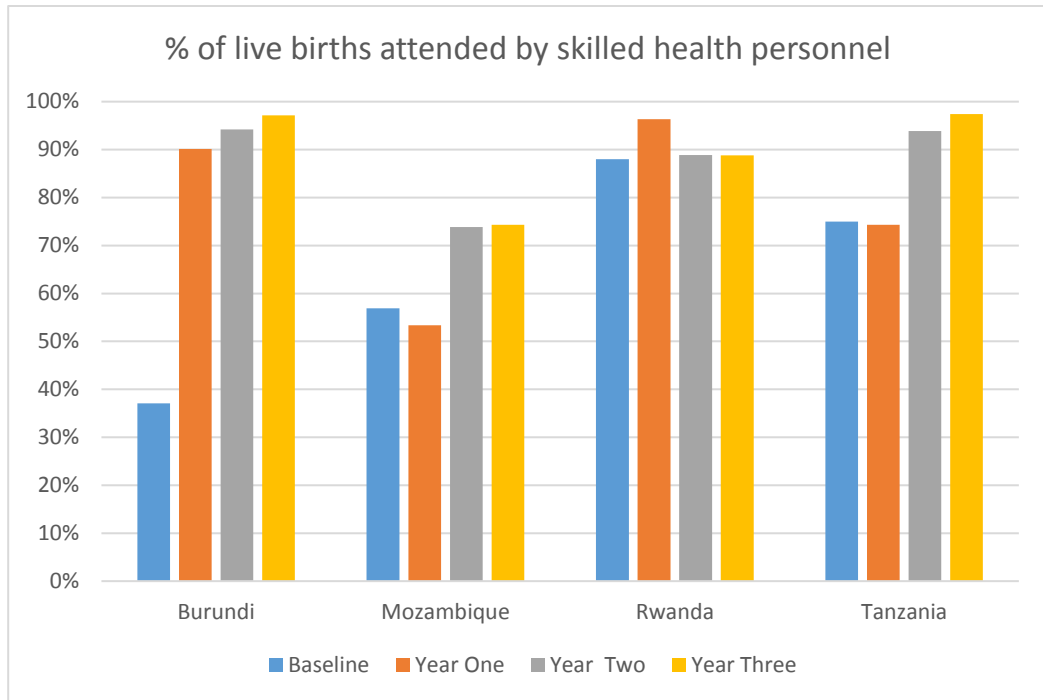
<p>Mozambique EHALE</p>	<p>\$940,234.90</p>	<p>The first integrated maternal, newborn and child health (MNCH) dispensary opened in December 2018 in Liúpo, which provides services to pregnant women, children under 5 and women who have children under 5. The initial feedback from women who are accessing the dispensary is very positive because they appreciate the privacy provided during their health appointments and all MNCH services are located under one roof. Services provided at the dispensary include vaccinations, child growth and development monitoring, antenatal care, postnatal care, malnutrition treatment for women and children, treatment for all diseases associated with children under 5, family planning, testing infants born to HIV positive women, HIV treatment for women and children, cancer screening, and counselling for pregnant women experiencing complications and high risk pregnancies. The only service not available in the dispensary is the actual delivery of newborns.</p> <p>Women and children who live as far away as 50 km travel to the MNCH dispensary at Liúpo health centre because there are no other health centres in the vicinity. More people are visiting the health centre since the integrated MNCH dispensary opened. There is more trust between patients and health providers because they used to have to wait under trees for their appointments and they felt ashamed to wait outside. Now there is a waiting area for them to stay inside the dispensary prior to their appointments. Health providers and trained volunteers provide health education sessions while people wait for their appointments in comfort. Women and children are now in a separate area from all other patients who are not seeking MNCH services. There is more privacy in the dispensary because there are private consultation rooms. More men are accompanying their partners and children to the dispensary.</p> <p>Safe motherhood promoters (SMPs) are making a significant contribution to improving the health and wellbeing for families, especially pregnant and breastfeeding women, infants and children. They have a significant role in supporting and mentoring pregnant women as they prepare to give birth and providing follow up care after women have delivered. Previously, there were no trained individuals in their communities to help pregnant women. SMPs visit pregnant women at their homes to follow up on their pregnancies and are available to pregnant women throughout their pregnancies. During home visits, they educate pregnant women and their partners on nutritional requirements for women, accessing health services for any issues during pregnancies, attending antenatal care, personal hygiene, delivering in a health centre with a skilled birth attendant and accessing expectant mothers' houses as women approach their due dates. Pregnant women and their partners are encouraged to prepare in advance of their due dates to ensure they have enough money for transportation to the health centres. SMPs look for danger signs and refer pregnant women to health centres if anything is detected. In the lead up to the due date and following birth, they remind women to attend postnatal care and recommend family planning methods. SMPs educate women and their partners how to care for their infants, cover their infants with a clean cloth after their birth and how to bathe their children. SMPs advise on breastfeeding techniques, promote exclusive breastfeeding and recommend women to breastfeed their children for their first two years. SMPs teach families how to prepare enriched porridge and tell women and men to forget the food and nutrition taboos specific to pregnant women they were told by their parents, community leaders and other influencers.</p>
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<p>Rwanda</p> <p>PARTNERS IN HEALTH (PIH)</p>	<p>\$799,517.77</p>	<p>The helping mothers survive training facilitated in September 2018 provided high quality simulation-based training to build health providers skills and confidence in managing two of the most common obstetric emergencies of post-partum hemorrhage and pre-eclampsia/eclampsia. The training targeted mentors working in the MCH program and doctors and SMPs working in the maternity. Two modules were facilitated for helping mothers survive: (1) bleeding after birth completed and (2) pre-eclampsia/eclampsia. Bleeding after birth built skills around team communication, active management of the third stage of labour and early detection and basic management to reduce maternal deaths caused by post-partum hemorrhage. Pre-eclampsia and eclampsia training covered correct assessment and classification of pregnancy hypertensive disorders, administering the correct volume and maintaining doses of magnesium sulfate and antihypertensive medications, and managing convulsions.</p> <p>Essential newborn care and helping babies breathe training was facilitated for 90 (59F/31M) nurses and safe motherhood providers in the maternity units to enhance their skills on the core, lifesaving support newborns need in their first hours and days of life. Essential newborn care focuses on preventive measures at the time of birth, including eye ointment and vitamin K, to prevent potential complications for the newborn as well as the importance of immediate skin-to-skin contact for warming and bonding and breastfeeding within one hour after the infant is born. Kangaroo mother care for low birthweight newborns was taught including when transferring newborns less than 2 kg to neonatal units. Essential newborn care was complemented by helping babies breathe training, which focused on critical resuscitation skills for newborns who are unable to breathe well soon after being born. Neonatal resuscitation skills are essential for saving newborn lives and preventing asphyxia, which is one of the leading causes of neonatal deaths and can result in lifelong disability and complications.</p> <p>Hospital neonatology and maternity nurses, nutritionists and pediatric development clinic staff participated in training on infants with feeding difficulties, which was identified as an area needing improvement to enhance care provided and health outcomes for infants. The training was facilitated by two speech and language therapists taught health workers techniques for improving breastfeeding among infants born premature, low birthweight infants and other birth complications such as birth asphyxia. Infants born preterm are at a higher risk for having difficulties breastfeeding due to the potential for an immature suck pattern, difficulties coordinating breathing, vomiting during or after feeding and have reduced milk intake, thus requiring strategies to improve suck and reduce vomiting.</p> <p>During the training, participants learned critical skills to assess breastfeeding practices (before, during and after feeding) in terms of readiness, tone, latch, sucking, swallowing and after feeding. They also learned different positions for breastfeeding, particularly those that are beneficial for infants born preterm/underweight or other birth complications, which require different positions for more effective feeding. They learned other intervention strategies to handle different challenges, including infant alertness, tone, latch, and improving suck and swallow. Other feeding methods including cup feeding, spoon feeding and feeding through a naso-gastric tube were discussed and practiced. The practical training component included assessing infants in the neonatology units who were premature, hypoxic ischemic encephalopathy, trisomy 21 and/or had a cleft lip and palate.</p>
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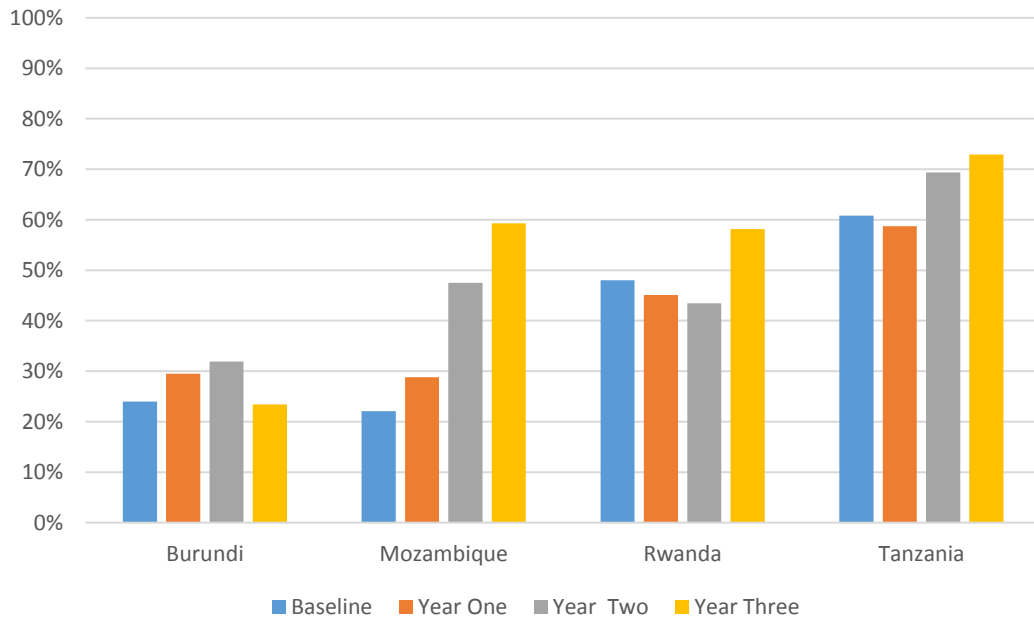
<p>Tanzania</p> <p>DIOCESE OF MASASI</p>	<p>\$1,241,949</p>	<p>Prior to project implementation, health facilities were poorly resourced and frequently had drug and medical supply stock outs. As a result, people were not inclined to visit health facilities for treatment. The delivery beds, solar panels, drugs and medical supplies provided by the project have enhanced health service delivery. More community members are visiting the health facilities for treatment based on the health awareness sessions they have attended and because the health facilities are better resourced. They are beginning to trust and expect that they will be well looked after by the health providers. Before the project, pregnant women had anemia and they were advised to take honey as treatment. Now they go to the health facilities for iron folate supplements and eat iron rich foods. There is increased attendance of pregnant women at antenatal care sessions, they are going during their first trimester and they feel better prepared for their births. Previously, there was a traditional belief that women could not give the initial breastmilk, colostrum, to their infants. Now women are applying better breastfeeding practices. Although breastfeeding practices are not perfect, they are improving. Before the project, many children under 5 died from malaria and families did not know how to treat them, they previously used traditional methods. Now parents know to take their children to health facilities when they are ill.</p> <p>Between April 2018 and March 2019, 31,931 (25,371F/6,560M) community members participated in 543 education sessions at health facilities and in their communities. Topics included maternal, newborn and child health (MNCH) services and care, family planning, preventing high-risk pregnancies, obstetric complications, cancer within the reproductive system and communicable and preventable diseases. Some women and men did not consider antenatal care necessary during a healthy pregnancy due to their limited knowledge. After participating in the education sessions, they have a better understanding that antenatal care and accessing health services is important for all pregnant women throughout their pregnancies. During health sessions facilitated at health facilities on family planning, 10,623 women and their partners were educated on proper use, advantages and side effects of modern contraception methods. They were sensitized on the importance of prioritizing their preferences for family planning methods including injections, intrauterine devices, implants, pills and condoms.</p> <p>Health providers, community health workers and safe motherhood promoters facilitated 72 educational sessions to 1,470 pregnant women on HIV, sexually transmitted diseases and prevention of mother to child transmission. Topics included antenatal care, unprotected sex risks, HIV testing during pregnancy, the importance of using antiretroviral treatment by pregnant women who are HIV positive, safe childbirth practices, appropriate infant feeding, infant HIV testing, postnatal care and other healthcare services. HIV and sexually transmitted diseases screening services were organized for pregnant women whereby 278 women had HIV positive test results. They were registered in the prevention of mother to child transmission program, which provides pregnant women with antiretroviral treatment to prevent vertical transmission. Community health workers and safe motherhood promoters, project staff and health providers facilitated education sessions in communities that were attended by 23,328 (13,578F/9,750M) pregnant women and their partners. Topics included the importance of visiting health facilities to access services, antenatal care, postnatal care, supplements, malaria management, immunization and pregnancy related danger signs. For example, vaginal bleeding, severe headaches, blurred vision, severe abdominal pain, swollen</p>
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		<p>hands and face, fever, reduced movement by the baby, excessive tiredness and breathlessness.</p> <p>Women and men are sensitized and educated on maternal, newborn and child health by community health workers, safe motherhood promoters, gender promoters, nutrition promoters and their community leaders. When women detect they are pregnant, they know it is important to visit a health facility as soon as possible to minimize complications during their pregnancies, to register for antenatal care and receive the recommended vaccinations. Prior to the project, women did not know they were supposed to attend at least four antenatal care sessions and to go to the health facilities for their deliveries. Instead, they were assisted by traditional birth attendants and they would only deliver at health facilities if they experienced excessive pain. Health providers, community health workers and safe motherhood promoters educate pregnant women and their partners to recognize danger signs such as stomach pains, cramps and/or bleeding. They are advised on how to prepare for their pregnancies and pregnant women are making conscientious efforts to eat sufficient nutritious food five times a day (breakfast, lunch, dinner and two snacks). Health providers, community health workers and safe motherhood promoters counsel women on potential complications during labour, limiting intercourse during their pregnancies and recommend they begin family planning within 40 days of giving birth. Partners have started accompanying pregnant women to the health facilities for their appointments and when they go into labour, although they are not usually in the delivery room. They are also assisting with domestic tasks such as collecting water and firewood.</p>
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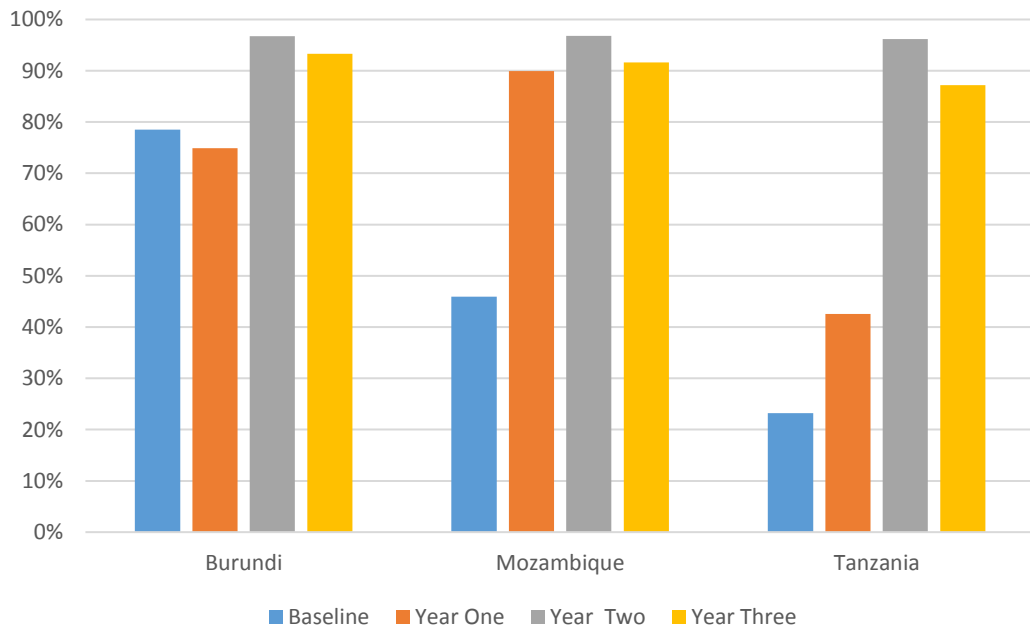
The following graphs offer a snapshot of improvements over the three-year course of the AMCC project:

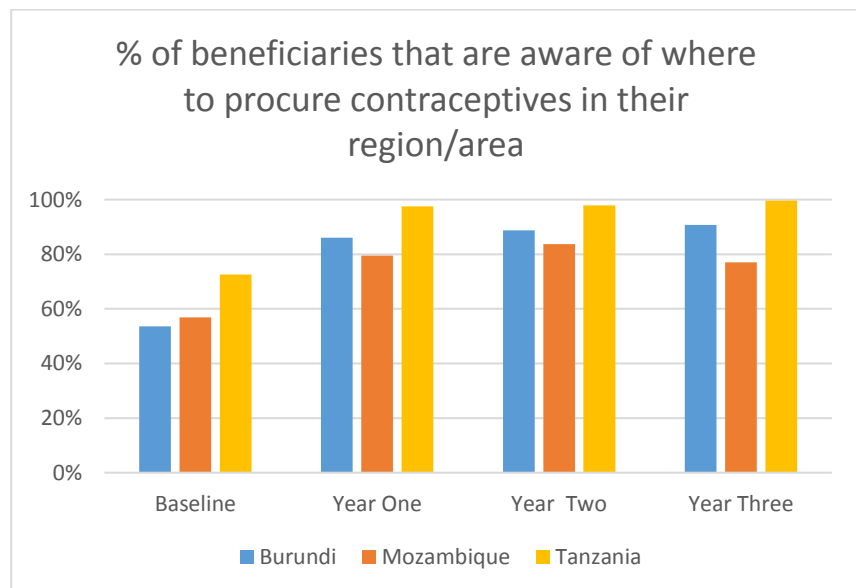
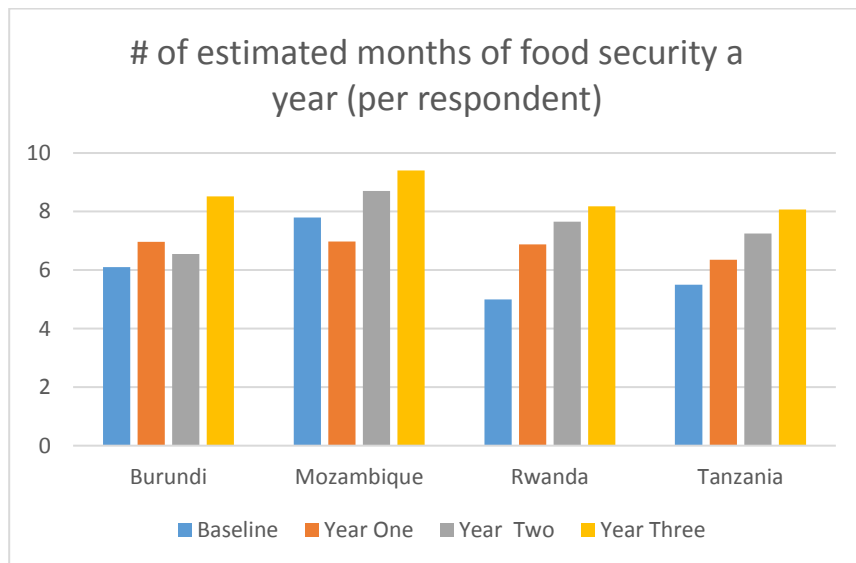
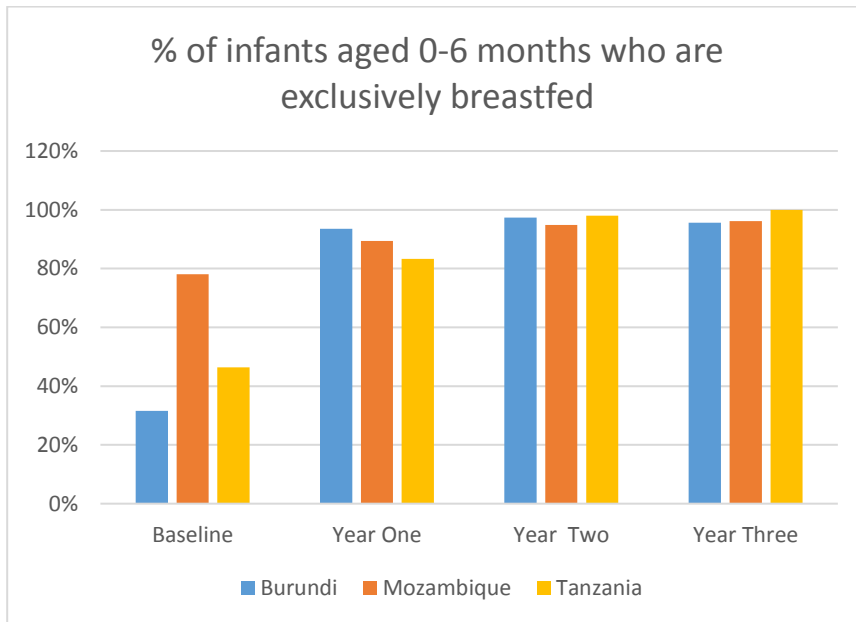


% of women of reproductive age who are using (or whose partner is using) a modern contraceptive method at a particular point in time



% of children 0-59 months sleeping under an insecticide-treated bed net





STAFF TRAVEL

- Richard Librock traveled to Zimbabwe, Malawi, Sri Lanka and Kenya in October 2018. He met with community based organizations implementing food security and sustainable livelihoods projects. As a result, PWRDF is now funding TSURO in Zimbabwe and UDO in Kenya. PWRDF funding in Kenya has already had an impact. See the link: <https://www.afrik21.africa/en/kenya-canadian-pwrdf-and-local-association-udo-bring-water-to-villages/> In Sri-Lanka, Richard participated in the climate change resilience workshop organized by Episcopal Relief and Development (ERD) for several Anglican agencies. The focus of the workshop was soil, food and healthy communities. PWRDF sponsored the participation of two Diocese of Masasi staff.
- In November 2018, Naba Gurung traveled to Bangladesh to visit Rohingya refugee camps. This was an ACT organized visit.
- Richard Librock traveled to Tanzania in November 17 – December 7. Shyamol Shakar from PWRDF Finance team accompanied him. He also visited Milecita – Anglican Nuns from the Diocese of Masasi, Diocese of Masasi, Twende and UMATI.
- In January to February 2019 Jeanine Cudmore, Bart Dickson and Richard Librock visited all AMCC partners. They all had specific tasks to accomplish within the framework of monitoring and developing partners' capacity. In addition to GAC-specific tasks, Jeanine Cudmore joined a Canadian Foodgrains Bank Gender delegation to Uganda and Bangladesh to visit food assistance and food security projects funded by the organization. Participants in the delegation included one representative from CFGB, a gender consultant from Canada, a representative from Mennonite Central Committee (MCC), Canadian Lutheran World Relief (CLWR) and PWRDF. Richard Librock also visited Uganda partners to monitor climate resilience and food security projects funded by PWRDF.
- In January 2019, Naba Gurung traveled to Somalia and Kenya to collect information and guide Finn Church Aid through the process of applying for the GAC proposal.
- In January 2019, Zaida traveled to Berkeley to participate in the ACT North America meeting. The meeting focused on how ACT members should use their synergies to have a greater impact/visibility in a changing international aid landscape.

MEETINGS AND NETWORKING

- On November 1, 2018, Harkiran Rajsavansi from Global Affairs Canada visited PWRDF's office for a one hour meeting with the Development Team members implementing the AMCC Project. The meeting focused on updates from Global Affairs Canada, potential funding opportunities and decision making processes for proposals submitted by PWRDF.
- On November 2018, PWRDF hosted ERD and the PDM-ECC for their inter-institutional strategic meeting in Toronto. The workshop had as objective to improve community knowledge and response to disaster management.
- On October 23 and 24, Jeanine, Zaida and Naba attended a workshop on Preventing Sexual Exploitation and Abuse (PSEA) organized by the Canadian Foodgrains Bank (CFGB) for member program staff. The workshop provided a historical overview of sexual exploitation and abuse in the humanitarian and development sectors. Other workshop topics included a survivor centred approach and reporting mechanisms. Participants reviewed CFGB's draft PSEA policy and provided feedback to CFGB staff.
- As part of the International Development Week Naba Gurung and Mike Ziemerink made presentations on PWRDF's work to students at Centennial College Toronto. Zaida Bastos also made a presentation about PWRDF's gender and health work at Humber College.
- PWRDF's M&E Coordinator is part of the Metrics Working Group of the Canadian Partnership for Women and Children's Health (CanWaCH). The working group is playing an important role in advising the federal government and Global Affairs Canada on effective evaluation practices for their new Feminist International Assistance Policy, and advising on key performance indicators for future programming under the Thrive Agenda. PWRDF's M&E Coordinator was on the editorial committee for CanWaCH's 2019 Global Health Impact Report released earlier this year. Here is the link for the report: <https://globalhealthimpact.canwach.ca/>