



Over the 34 years since our inception, the world has changed, and CPAR has undergone many shifts along with it. This year we launched our new mission and vision!

#### **New Mission**

CPAR works in partnership with health professionals, vulnerable communities and governments to build health systems capacity in Sub-Saharan Africa.

### **New Vision**

Stronger health systems in Sub-Saharan Africa.

### **About our programming**

CPAR supports the achievement of the Global Goals for Sustainable Development through programming that:

- · Improves health systems capacity
- Addresses the determinants of health that may also impact the health of the communities in which we are working (food security and nutrition, clean water, sanitation and hygiene, sustainable livelihoods).



We believe it is the interconnection among the health systems and social determinants of health which together define the health of individuals and communities.

# **Board of Directors**

#### Chair:

Dr. Steve Ferracuti

#### Vice-Chair:

Ms. Judith Dyck

#### **Treasurer:**

Susan Williams

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Mr. Andrew Williamson

## Letter from the Board Chair and Executive Director

Dear Friends,

It has been an exciting year at CPAR, one that has come with challenges of course but one in which we have also challenged ourselves.

CPAR has been many things to many people, particularly the people in the communities in which we have worked and in which we continue to work in east Africa. We have been a medical relief organisation in the famine of 1983 and the years that followed. We have been an organisation which has helped communities learn about health, have helped them learn about skills which can improve their agricultural methods which connects to nutritional security and income security and hence to health and have been a source of safe water and hence to health.

In 2018 we have brought the circle back around to health systems and will focus on improving health systems in a very tangible way that relates both to our own experiences in our Canadian health system but also in our experience of connecting all of our previous work including the connection to our community work.

We currently are working within the Ethiopian health care system to improve the quality of acute care in the same communities that we have taught improved farming methods and built health centres. We will extend this work down to those same health centres and up to our higher level partners in the system. It is our belief that all people deserve the same quality of health care, regardless of resources, that we enjoy here in Canada. This is our philosophy in working in health systems and in connecting this to our community work.

We have been very excited about the response that we have seen.

We are very excited about our partners in this work. This includes international NGOs such as the Paris based Women and Health Alliance and Selale University in Fitche, Ethiopia. We are excited to have signed the very first memorandum of understanding that Selale University has signed with an international NGO. We will work together on a number of initiatives that will benefit the local communities. This will be a unique and exciting relationship and a great example of how CPAR truly connects with the communities in which we work.

There is more to come! Thanks for supporting everything that we do so far and please stay with us for this important new phase.





Dr. Steve Ferracuti



Dusonky Parlies

Dusanka Pavlica

Executive Director





# Country profiles

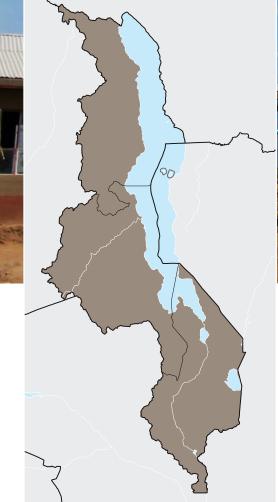
# Ethiopia

### **Poverty and Health: The Challenges**

- **>> 40%-60%** of the country's population is food insecure, while 45% live below poverty line
- » 28% of all child mortality in Ethiopia is associated with undernutrition
- Child mortality associated with undernutrition has reduced Ethiopia's workforce by 8%
- 74% of all deaths are due to disease, this is the highest in all of Sub-Saharan Africa
- » 67% of child deaths take place before a child's first birthday

### **CPAR's key project activities**

- Training health workers and medical personnel on improved emergency room systems in a regional hospital (Fitche Hospital)
- Procuring medical equipment, medicines, and other necessary supplies for a regional hospital (Fitche Hospital)
- > Improving crop productivity and production for subsistence farmers
- Improving dietary diversity and quality, with a special focus on malnourished children and their caregivers
- » Establishing cooperatives to help increase livelihoods for substance farmers





### Malawi

# **Poverty and Health: The Challenges**

- » Half of the population (9.6 million) is living without an adequate toilet
- » 73% of Health Facilities don't have access to a sanitation facility
- Over 3,100 children under 5 die each year because of poor sanitation and use of dirty water
- >> **75%** of schools don't have adequate sanitation facilities

## **CPAR's key project activities**

- >> Improving community hygiene behavior to support communities in their achievement of open defecation free status
- Constructing sanitation facilities (latrines and toilets) in communities and schools, including gender-specific latrines for female students and teachers
- Promoting knowledge and education on safe hygiene practices
- » Training Health Extension Workers to help villages gain open defecation free status





### Tanzania

## **Poverty and Health: The Challenges**

- Close to 8,000 women die every year during pregnancy and child birth as a result of conditions that could have been prevented or treated
- Girls are three times more likely to be living with HIV than boys of the same age
- >> 68% of the population lives below the poverty line.
- » Over 66,000 students dropped out of primary schools every year
- Deforestation and overgrazing are causing riverbanks to erode and soil to become less productive

## **CPAR's key project activities**

- » Increasing knowledge of HIV modes of transmission and prevention
- >> Teaching rural students improved agricultural practices
- Rehabilitating lands and riverbanks, and regenerated vegetation through community run agroforestry
- >> Training on modern environmentally friendly farming techniques
- » Training community health workers on safe birthing practices
- Supporting the construction of rain water harvesting dams and irrigation scheme









# Working with local leaders to help village reach Open Defecation Free (WASH MLW)

In Malawi, one of Africa's most densely populated and least developed countries, half of the population is living without an adequate toilet. This means that excreta freely leaches into the ground water or is discharged directly into surrounding rivers and lakes, causing major negative health impacts in communities. Last year, as part of CPAR's WASH for Life project we worked with village leaders to help over 100 villages in three districts attain open-defecation free status through the use of Community - Led Total Sanitation.

This is an integrated approach that mobilizes communities to undertake their own appraisal and analysis of their sanitation profile, their practices of defecation, and to take their own actions to become open defecation free. It stresses community empowerment and collective behavioural change, including safe sanitation and hygiene through handwashing.





# Delivering healthy babies in Tanzania

Tanzania has one of the world's highest maternal and child mortality rates. Every hour, a mother in Tanzania loses her life due to pregnancy or childbirth complications. Most of these deaths occur in a context where births take place at home, without a skilled birth attendant, and are preventable through cost-effective measures. In response to this alarming reality, CPAR implemented the Saving Mothers project. With your support, we worked with mothers, expectant mothers, and health workers to reduce maternal, newborn and under-five mortality rates in Mara Region, Tanzania. This project has:

- Supported over 3,000 women access antenatal and post-natal care.
- Distributed 1,800 Safe-Birth kits.
- Trained 118 community health workers on safe birthing practices, identifying high-risk pregnancies and labour, and th importance of post-natal care.
- Helped safely deliver over 2,500 babies.
- Provided 160 mobile phones to community health workers and nurses. This has allowed them to alert local health clinics and hospitals about pregnant women, their expected delivery date and any risks associated with the pregnancy, ensuring that these women are provided with the care.







# Establishing Safe Spaces for Girls in Tanzania

Girls are often subject to double discrimination as both children and women, especially when dealing with their sexual and reproductive rights. Through our Building the Future project CPAR has helped both girls and boys understand issues around their sexual and reproductive rights and health in student-centered groups that meet in safe, child friendly spaces. In partnership with the UNIFOR Social Justice Fund CPAR established such groups in 50 primary schools in rural Tanzania. All CPAR established students groups are gender balanced; ensuring girls and boys have equal access to the services provided. As a result, 750 vulnerable girls and 750 vulnerable boys were given the opportunity, and ability, to voice their concerns in informal decision-making processes inside a child-friendly, safe space. This has led to greater self-confidence and the development of positive values regarding gender equality, human rights, and interacting with the opposite sex among both girls and boys with 96% of participants reporting that both boys and girls should have the same opportunities and should be treated equally.



# 2 ZERO HUNGER





# Improving harvests in Ethiopia

Seed shortages force farmers to use low yielding seed varieties, which result in limited crop productivity.

To increase seed variety and availability CPAR has:

- Organized 99 seed multiplier farmer groups.
- Distributed 2,103 kg of basic seeds (peanuts, sesame, finger millet, and beans) to seed multiplier farmer groups.
- Provided training on how to maintain seed quality during production, improved post-harvest techniques (storing, transporting and marketing), and an overview of the requirements to achieve certification.

The various agricultural related training programs organized by CPAR's Fighting Hunger project have increased knowledge and skills of community farmers on improved agronomic techniques and increased crop production and productivity. Notably, the amount of seeds available increased from the original 2,103 kg distributed to 49,200 kg, nearly 70% of which became market certified. Average crop productivity for major crops cultivated in Dibate and Guba districts has increased by up to 27%. These increases in crop productivity have a direct effect on health and nutrition.

# Stories of Change



# Maru's Story

The Benishangul-Gumuz region of Ethiopia is amongst the hottest places in the country. It is also among the poorest, where Maru and his neighbouring farmers depend only what they can produce on their own land to meet the nutritional needs of their families. For Maru the fight to feed his family year round was a fight he was losing. Through CPAR's **Fighting Hunger** project Maru won the battle last year and will continue to win for many years to come.

Maru participated in one of CPAR's Seed Multiplier Groups, where he received draught resistant seeds and learned how maintain seed quality during production and improved post-harvest techniques (storing, transporting and marketing). Once Maru was able to meet the nutritional needs of his

family he still had seeds left over, which CPAR helped him get certified by the Pawe Research Center – meaning the seeds were of a high enough grade to fetch a better price at market.

From the 30kg of peanut seeds he received from CPAR he was able to harvest 500kg of certified seeds and earn over CA\$500 from their sale. With this new income he was able to feed his family for the whole year, send his children to school, and buy household necessities, including clothing.

Keeping to CPAR's pay it forward principle, Maru has become a resource person in his community. He is sharing knowledge and certified seeds with his neighbours and they too are seeing similar benefits.

"CPAR gave me the skills and support I needed to become a seed multiplying farmer! This helped me earn income from selling certified seeds but also to increase the harvest from my land. Today I harvest almost double what I used to! I am so happy because now I can feed, clothe and educate my children without worrying."



# Lilian's Story

Lilian is 14 years old and a student at Muranda Primary School. Her school sits on the banks of Lake Victoria, one of the most beautiful rivers in the world. Lake Victoria is located in Tanzania, where nearly half the youth are living with HIV-AIDS. Teenage girls, like Lilian, are made particularly vulnerable to contracting this disease because knowledge around preventing HIV-AIDS and other sexually transmitted infections is unavailable.

As part of CPAR's Building the Future project we have introduced Junior Farmer Field and Life Skills groups with

a special Sexual Reproductive Health and Rights module. The Junior Farmer Field and Life Skill groups are ways rural students receive hands-on agricultural and life skills training. CPAR's Sexual Reproductive Health and Rights module is one of the life skills that attracted Lillian. Here she has a safe place to ask questions about HIV-AIDs, early marriage and female genital cutting.

Lilian is now working with CPAR to help raise awareness and introduce preventative measures, such as condom usage into vulnerable schools and communities.

"I represent a huge number of students who were afraid to talk about HIV-AIDS. Our families don't talk about it, even though people in our villages are dying of HIV-AIDS. My parents used to tell us it was a curse on evil people," Lilian explains.





- 1. Kuthondo tilikuleka we stopped defecating in the bush
- 2. Muchimbuzi tijalepo put drop-hole cover
- 3. Tigeze mumawoko na sopo wash hands with soap

# Boston's Story

Boston Nguluwe is the chief of Chananga Village located in Mzimba District. His village is home to over 135 adults and children all of whom shared eight open pit latrines. After beginning his training sessions with CPAR and learning about the connection between open defecation and deadly-but preventable diseases Boston committed to change.

Boston explained the importance of latrines to his people and all able-bodied villagers were set to constructing latrines with covers.

Today, Chananga Village has received ODF status and has 22 latrines with tight fitting drop-hole covers and hand washing facilities, all of which are equipped with soap and sanitation messages on the walls.

# Canadian Highlights



# Sharing our Strength



CPAR's focus on strengthening health systems in Sub- Saharan Africa is supported by Canadian medical professionals. Last year, CPAR sent five Canadian physicians and nurses to Ethiopia as part of our Physicians Partnering project. Upon their return to Canada these volunteers joined CPAR's Physicians Advisory Council (PAC) where they helped to strengthen the project and provide expert advice on the clinical areas that may require additional support.

# A trip through our projects in Tanzania and Ethiopia

In 2017, CPAR was featured by the Ontario Council for International Cooperation (OCIC) as part of their **Transformations: Stories of Partnership, Resilience and Positive**Change photojournalism project. This project documented CPAR's work in Tanzania and allowed our donors the opportunity to see our work in pictures through the eyes of Canadian photographer Allan Lissner.

In October, a small group of Canadian donors joined CPAR staff on a self- funded trip to Ethiopia. Here participants were able to witness first-hand the impact of CPAR's work and speak directly to the beneficiaries of our projects.

# Supporting the Pegasus conference in Toronto

CPAR Board Chair, Dr. Steve Ferracuti and Executive Director, Dusanka Pavlica, were part of the Central Planning Committee of The Pegasus Conference. PEGASUS is an acronym built from the first letters of the main themes: Peace, Global Health and Sustainability. The aim of the conference is to advance awareness and knowledge of Global Health issues, locally and abroad framed through a lens of peace and sustainability. The conference brings together physicians, health professionals, students, health-related organizations and community members to share their innovative ideas and concepts on the dynamics of Global Health and the socio-ecological determinants that impact health worldwide.

# List of Donors

# Thank You to Our Donors

CPAR would like to thank all of our donors whose support in this last 2017-2018 year enabled CPAR to improve the health of thousands of people living in poverty in Ethiopia, Malawi and Tanzania.

And thank you to our dedicated regular givers, and to our individual donors and supporters who wish to remain anonymous.



### **Institutional Funders**

The United Nations International Children's Emergency Fund (UNICEF) The World Food Programme (WFP) Management Sciences for Health (MSH)

### **Foundations**

Barber Family Foundation Benevity Canadian Online **Giving Foundation** F.K. Morrow Foundation Fleming Foundation Gay Lea Foundation Howick Foundation K.M. Hunter Charitable Foundation N.A. Taylor Foundation Sadikali Foundation Steven Lewis Foundation Strategic Charitable Giving Foundation The Blossom Foundation The Fitzhenry Family Foundation The Harweg Foundation The John Brouwer Foundation The MacArthur Foundation The McLean Foundation The Tom and Gail Kaneb

# **Corporations/Organizations**

All Charities Campaign
Basic Spirit
Brights Roberts Inc.
Giftfunds Canada
IBM Canada Employee Giving
Imaginus Canada Ltd
Manitoba Council for International
Cooperation (MCIC)
Providence Health Care
St. Paul's Hospital
Shirati Hospital, Tanzania
UNIFOR, the Union
United Way Centraide - Ottawa

United Way of Thunder Bay

Worldwide Quest

TD Wealth Private Giving Foundation

Vancity Community Foundation

Family Foundation

Vancouver Foundation

# Featured Donor

# Irene Kelley's Legacy of Hope (1925-2015)



Irene began donating to CPAR in 1990. She demonstrated her trust in CPAR by dedicating her gifts to the areas of greatest need, which are identified by our expert staff based on unpredictable changes that may happen to our projects. Her final gift was just such a gift.

"I'm certainly glad that she [made] that gift because seeing the work and projects that she was able to support profoundly touched [me]. – Mary Ann Kelly, Irene's niece

Despite its rich, natural resource base the Benishangul-Gumuz (BSG) region experiences chronic food insecurity and is one of Ethiopia's poorest and most inaccessible regions. From 2010-2015 CPAR was part of a consortium funded by the Government of Canada to implement the Benishangul Gumuz (BSG) Food Security and Economic Growth Project. The project brought transformational change to the lives of women, men, girls and boys in the targeted woredas of the BSG region. Project results included the increase of agricultural productivity by 134% across five key crops, and the number of underweight children under five dramatically declining from 45% to 10%. However, when the project funding ended, much work remained to be done. With Irene Kelley's Legacy Gift we were able to continue the project for another two years, until 2018. In October 2017, some of Irene Kelley's family were able to visit the project to see first hand the impact of her legacy.



# Imagine making a gift that will build healthy communities in Africa – for generations to come.

That's what happens when you leave a gift in your will to CPAR.

- It's achievable A bequest is a future gift that doesn't cost you anything during your lifetime.
- It's easy You don't have to rewrite your existing will you can make a simple addition.
- It's advantageous A gift to CPAR in your will can provide you with a tax benefit.

Leave a lasting legacy of health for families in Africa.

If you have remembered CPAR in your will, we thank you and ask that you please notify us.

Knowledge of your generous intention will allow us to plan for future programs.

To find out more, please call Dee Ucci at 1-800-263-2727 ext. 31

# Financials 2017 - 2018

SUMMARIZED STATEMENT OF OPERATIONS For the Year Ended March 31, 2018

	2017/18	2016/17
REVENUES		
Project Grants	459,753	798,689
Private Donations and Other Income	1,221,010	1,175,970
Total Revenues	1,680,763	1,974,659
EXPENSES		
Development Projects	1,175,453	1,492,540
Fundraising, Communication & Dev Education	440,910	459,299
Administration	181,677	168,581
Total Expenses	1,798,040	2,120,420
EXCESS OF REVENUE OVER EXPENSES	-117,277	-145,761

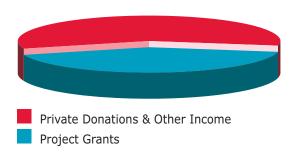
SUMMARIZED STATEMENT OF FINANCIAL POSITION As at March 31, 2018

### **ASSETS**

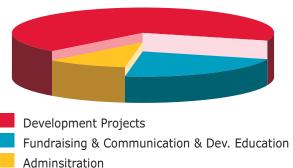
Current Assets	488,823	326,002
Long-term investments	0	234,378
Restricted Cash	342,258	445,380
Capital Assets	503,821	524,156
Total Assets	1,334,902	1,529,916
LIABILITIES AND FUND BALANCE		
Current Liabilities	521,292	599,029
Net Assets	813,610	930,887
Total Liabilities and Fund Balance	1,334,902	1,529,916



### **REVENUES**



### **EXPENSES**







Canadian Physicians for Aid and Relief Suite 200, 284 Richmond St. E Toronto, ON M5A 1P4 Telephone: 416.369.0865 or Toll Free at 1.800-263.2727

Email: info@cpar.ca or visit us online at www.cpar.ca Charitable Registration # 11883 5230 RR0001

CPAR works in partnership with health professionals, vulnerable communities and governments to build health systems capacity in Sub-Saharan Africa.

Learn more and get involved at cpar.ca











Selected photography courtesy of Allan Lissner and OCIC