



AMREF HEALTH AFRICA UK

ANNUAL REVIEW 2018

Securing the Right to Health

In Mwanza, Tanzania, Amref Health Africa provides comprehensive support to survivors of obstetric fistula (like Keflene and Neema, pictured here and on the covers). Fistula is an abnormal opening between a woman's vagina and her urinary tract or rectum, resulting in the constant leakage of urine, faeces, or both. It's usually caused by obstructed or prolonged labour, and takes a serious toll on women's physical and psychological wellbeing. Working with local partners, Amref provides fistula repair surgery and ongoing psychosocial support, along with entrepreneurship training and seed funding so that women can start up small businesses, boosting their confidence and helping them achieve financial independence. They also support other women who are living with the condition.

photos © Sam Vox



WELCOME

With women and girls at the heart of health, real and lasting change is possible: in fact, it's already happening.

Between 1990 and 2015, global rates of maternal mortality dropped by 44%. In concrete terms, this means almost twice as many women survived pregnancy and childbirth. This didn't happen by chance: it was the result of determined, coordinated efforts by the whole global health community. It's an example of the far-reaching change that becomes possible when grassroots action and community-led initiatives are bolstered by national and international leadership.

While news like this should be celebrated, it should also inspire us to renewed momentum. Levels of maternal mortality are still shockingly high: 99% of women who die as a result of complications during pregnancy and childbirth are from lower-income countries, and more than half are in sub-Saharan Africa. Most of these complications can be prevented when women have the support of well-trained health workers during pregnancy, childbirth, and beyond. That's why Amref Health Africa is committed to strengthening health systems from the ground up.

The knowledge that lasting change is possible underpins everything we do. And although systemic change can be a slow process, we know that our programmes transform lives every day.

This has been a year of growth and change for Amref Health Africa UK. We've worked to adapt to a complex and ever-changing environment without losing sight of our founding mission. We maintained our focus on health system strengthening and continued to use technology, when appropriate, to bring high-quality healthcare to some of Africa's most remote and vulnerable communities and groups. As part of the wider Amref family, we collaborated on partnerships, proposals, and project delivery, including the development of our new global strategy and the growth of Amref International University. We fed into the vital work being done across the UK NGO sector to improve safeguarding: because, as an organisation, our primary responsibility is our duty of care to the individuals and communities we work with, particularly the most vulnerable.

The following pages reflect the beliefs, values, and ambitions that guide Amref Health Africa UK as we play our part in making Universal Health Coverage a reality. We know you share our vision, and we are grateful for your ongoing support.

With thanks and best wishes,

The Amref Health Africa UK Team

2017/18 ACHIEVEMENTS

What we achieved in 2017/18 - with your support

Amref Health Africa UK exists to support our colleagues in Africa, raising funds to extend the reach and impact of our wider work.

UK-funded projects focus on four thematic areas, all of them vital to achieving Universal Health Coverage:

- **Human Resources for Health (HRH)**, primarily through Health Worker Training
- **Maternal, New-born and Child Health (MNCH)**
- **Sexual and Reproductive Health and Rights (SRHR)**
- **Water, Sanitation and Hygiene (WASH)**



HRH



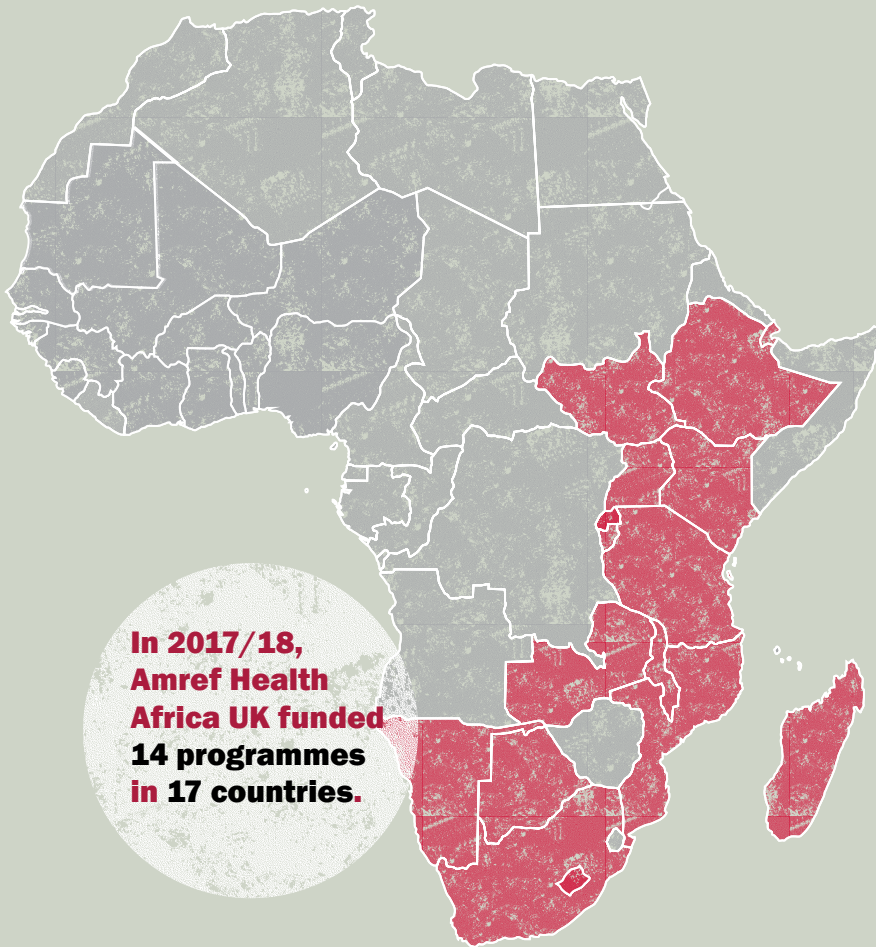
MNCH



SRHR



WASH



We directly supported

270,455

people, of whom

53,993

were women and

176,845

were children.

We trained

11,361

**health workers: nurses, midwives,
community volunteers, and more.**



SPOTLIGHT: ETHIOPIA



In Addis Ababa, Amref builds WASH infrastructure and works with communities to raise awareness of good sanitation practices.

photo © Alexander Aweke

IMPROVING WASH IN THE SLUMS OF ADDIS ABABA

Ethiopia is one of the three countries in the world (along with Chad and Liberia) where access to WASH is most limited: 93% of the population is without access to basic sanitation*.

Since 2015, Amref has been working with Comic Relief to improve water and sanitation - and by extension, health - in the country's capital. Our work has focused on two Sub-Cities (administrative divisions), Akaki-Kality and Yeka.

There are two elements to the project. The first is the design and construction of gender-sensitive and sustainable sanitation facilities (toilets and handwashing stations) in schools and communities. In 2017/18, Amref built four school sanitation facilities and seven communal sanitation facilities. To date, the project has constructed a total of 24 sanitation facilities, reaching 5,064 schoolgirls and 3,077 community members.

The second area of focus is awareness-raising through radio messages and community conversations. The aim is to foster a sense of ownership among residents, ensuring that facilities are used and well-maintained, and to encourage good practice when it comes to handwashing and water storage.

A mid-term evaluation conducted in January 2018 showed that over 70% of households in the two Sub-Cities now have access to an improved latrine facility: a significant increase from 17% when the project started. 96% of households now have access to a safe water source within a 15-minute walk. Crucially, the incidence of diseases associated with poor hygiene and sanitation has fallen: our household survey showed a 12% reduction in the prevalence of diarrheal disease among children under five years of age.

“Before Amref constructed this facility, when we had our period, we used to tell the teacher, ‘I’m sick, shall I go to my home?’ We didn’t mention our period because we weren’t comfortable. Before, we had an old toilet and the door didn’t lock. It didn’t have a tap, and there were no handwashing facilities for us. Now, when we have our period, we can go to the toilet to wash ourselves and change our pad. We have privacy.”

14-year-old student at Ethiopia Andinet Primary School, Yeka Sub-City, Addis Ababa.

*Source: The Joint Monitoring Project, run by UNICEF and WHO: washdata.org

SPOTLIGHT: KENYA



**WOMEN AND DIABETES
OUR RIGHTS
TO A HEALTHY
FUTURE**

An Amref-supported diabetes clinic in Mariakani Hospital, Kilifi County. People living with diabetes come for a monthly check-up and take part in a support group where they share their experiences and encourage each other to adopt good practices.

photo © Corrie Wingate

COMBATING NON-COMMUNICABLE DISEASES

The fight against Non-Communicable Diseases (NCDs) like diabetes, cancer and asthma receives comparatively little attention, and is consistently under-funded by governments and donors.

“Historically, NCDs haven’t taken priority because they are chronic and kill more slowly than TB, malaria, or HIV, for example. They can also be difficult to manage. It is only now that the County is realising that we need to put more focus on NCDs. We need to treat this seriously, because the numbers are going up and up. We need to manage NCDs as well as we do HIV.”

Grace Baya, NCD Programme Coordinator, Kilifi County

In May 2018, Amref completed the first phase of our GSK-supported Non-Communicable Diseases (NCDs) project in Kenya. Launched in 2015 in four counties where NCD prevalence is high, the project sought to build the capacity of mid-level health workers (including nurses, laboratory technicians, nutritionists and clinical officers) and volunteer community health workers (CHWs) to detect, manage and control NCDs. With a view to making potentially life-saving skills as widely available as possible, we used both eLearning and face-to-face training, supporting the integration of childhood asthma and diabetes into community health service provision at both health facility and household level.

As a result of the training, health workers operating in both rural and urban settings provided over 3.7 million people with information and services through community

outreach, household visits, community screening and service delivery at health facilities. By project end, the percentage of health workers with improved NCD management skills had increased from just under 40% to over 95%. The proportion of health facilities with appropriate equipment and commodities for managing diabetes increased from 48% to 74%, and the percentage of community members seeking screening for diabetes and asthma rose significantly - a shift in behaviour that suggests the impact of the project will be felt for years to come.

The project is now in its second phase, launched in June 2018. Phase two builds on the success of its predecessor - and broadens its remit to include work on two of the most common and deadly infectious diseases (pneumonia and diarrhoea).



SPOTLIGHT: TANZANIA



Campaigning for change

In 2016, lawyers from Allen & Overy trained Amref staff and peer educators in Meatu on how to use legal advocacy to lobby for investment in sexual and reproductive health education. These advocates went on to secure two significant commitments from the District authorities. In 2018, the Meatu government agreed to an eighteen-fold increase in public spending on SRHR services, and to the inclusion of Comprehensive Sex Education in extra-curricular activities throughout the District: a powerful example of how Amref's work with communities is complemented by high-level policy change.

Zawadi completed Amref's Alternative Rites of Passage ceremony, meaning she was able to avoid the cut and continue with her education.

photo © Sam Vox

EMPOWERING YOUNG PEOPLE IN HANDENI AND MEATU

We work with community advocates in two districts to ensure young people have access to sexual and reproductive health services - and that they can claim their rights.

From 2015 to 2018, Amref Health Africa partnered with international law firm Allen & Overy to ensure that young people in two rural districts, Handeni and Meatu, had access to sexual and reproductive health and rights (SRHR) information and services. Through training, community mobilisation, and peer-to-peer education, more than 150,000 young people were equipped and empowered to make informed choices about their sexual and reproductive health. In turn, this helps to protect them from unwanted pregnancies, early marriage, unsafe abortion, pregnancy-related complications, STIs, and HIV and AIDS.

Maasai communities in Handeni District have committed to transitioning away from FGM/C. Instead, they implement Alternative Rites of Passage (ARP) ceremonies, which celebrate the transition to adulthood without the cut. Because they are less susceptible to early marriage, ARP graduates are able to continue their education, pursue their ambitions, and decide for themselves if and when to marry.

25-year-old Zawadi recently completed a degree in science and ICT at the University of Dodoma. She is one of only four young people from her community to finish university - and she's the only woman to have done so. Before going to university, Zawadi graduated from one of Amref Health Africa's ARP ceremonies. "[At the ARP] we were very many, from different communities," she remembers. *"The problem is that girls here don't have power. You can find 20-year-old girls who are married to men who are 45 or 60. It's a very big challenge. When girls are not educated, they do not have power, and they can be controlled [by their husbands]. But things are changing: nowadays, girls are aware of their rights. They can say no. They can say, 'I want to go to school'. If they have a problem, girls feel confident to report it to the village authorities. And the chair is listening to them."*

So what's next for Zawadi?

"I'll become a teacher. I'll start from this village and then become a teacher of this society!"

SPOTLIGHT: UGANDA



"I wanted to get my diploma before the age of 28, that is my goal. I needed this. I am the head of our family: I am educating my little sister, caring for my mother and my two nieces. I need to increase my salary, my skills and further my career."

Catherine Anyu, newly-qualified midwife.

ELEARNING FOR MID-CAREER MIDWIVES

eLearning is a flexible and effective way of delivering training to health workers in remote areas.

In Uganda, 74% of births are attended by a skilled health professional*. The difficult conditions in which many health workers operate - a shortage of medicines and lack of basic amenities like clean water and lighting - coupled with limited opportunities for professional development, mean that the retention of skilled nurses and midwives is a struggle. The eLearning training courses that Amref runs, with support from GSK, are designed to address these challenges. 26-year-old Catherine Aanyu from Katakwi, a small town in Eastern Uganda, is a newly-qualified midwife currently studying for her diploma (the next qualification up) through Amref's eLearning programme.

The flexible nature of online learning means health workers don't have to give up their jobs and can fit their studies around work and family lives. One-to-one support is provided by a dedicated eLearning tutor who visits students at work - including those stationed at remote and hard-to-reach facilities. Plus, they can put their much-needed new skills into practice immediately. Since we launched eLearning in Uganda in 2012, nearly 400 nurses and midwives have graduated from the course.

“My mother was a Traditional Birth Attendant (TBA) and when I was young I would see women coming to my home to deliver. I remember my elder sister shouting because there was a mother almost dying: ‘Can’t you let this mother go and deliver in a hospital? Because the midwives there, they are trained!’. I understood very early on that it’s the midwives who should be helping these mothers to deliver.

My mother is so proud of me. She stopped [being a TBA] around 2002. She could see that when a mother goes to the hospital - where the midwives are - she comes back with a baby that is alive.”

*Source: UNICEF and the World Health Organization. For comparison, the equivalent figure for the UK is 99%.



THIRTY YEARS

gsk

amref
health africa

This Skill-Lab is Constructed by Amref Health
Africa, with Financial Support from GSK,
to Support Midwifery Training at Gambella
Health Science College.

January, 2019

Gambella

Second-year midwifery students at Gambela's Health Science College, a facility built by Amref with support from GSK. Pictured from left to right: Ayachuol, Nigist, Nyabuay (obscured) and Mulu.

photos © Girma Berta

A LASTING PARTNERSHIP

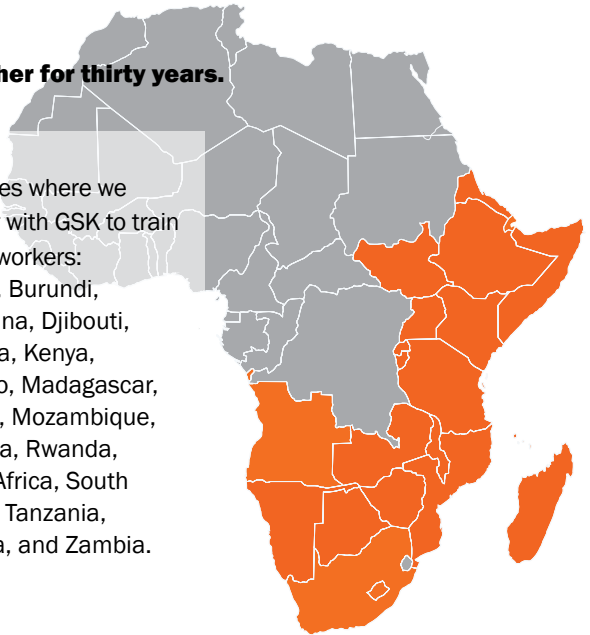
Amref Health Africa and GSK have been improving health provision together for thirty years.

In 2018, we celebrated the thirtieth anniversary of our unique partnership with GSK. Throughout 2017/18, GSK continued to support our health system strengthening interventions through the training of frontline health workers in 17 countries. The trained health workers address an array of health challenges including infectious diseases, non-communicable diseases, sexual and reproductive health, and maternal and child health. GSK also supported the development and roll-out of the mVacciNation app in Tanzania.

At the end of 2018, Amref and GSK partnered to develop an advocacy-based programme to scale up the use of chlorhexidine in Kenya. Chlorhexidine is a WHO-approved antiseptic gel which can be used to stop umbilical cord infections in new-born babies, thereby reducing neonatal sepsis and death.

Countries where we partner with GSK to train health workers:

Angola, Burundi, Botswana, Djibouti, Ethiopia, Kenya, Lesotho, Madagascar, Malawi, Mozambique, Namibia, Rwanda, South Africa, South Sudan, Tanzania, Uganda, and Zambia.



Ayachuol explains how she discovered she wanted to become a midwife:

"As I was just walking on the roadside I saw a woman giving birth: traditionally, with no-one to help her. I was scared. We all [passers-by] tried to assist her by taking her home, but there was still no medication to give her. But she survived, and the baby survived. I stayed with her as she was giving birth. And I still visit her at home today! That day, something came into my mind. I said to myself, I wish I would be a midwife one day."

"Since I completed eLearning myself, I have recommended that so many midwives go and do it - and today, they are thanking me. It has helped me, why can't it help someone else? Look at where I am today! I cannot keep quiet."

Marion Tumuhimbise, midwife and graduate of Amref's eLearning programme in Uganda (not pictured). Currently, Marion manages a team of midwives at Bidibidi, the world's second-largest refugee settlement.



FINANCIAL HIGHLIGHTS

For every £1 spent...

90p

goes on charitable activities



10p

goes on fundraising

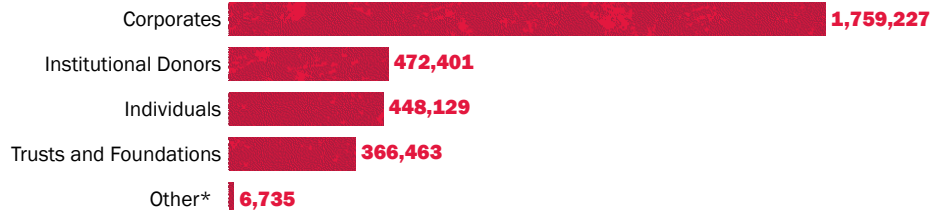


£7.18

For every £1 we spend on fundraising, we raise

Total income generated for the year:

£3,052,955



*gifts in kind, Christmas cards, investments

Total sent* to projects in sub-Saharan Africa:

£3,059,356

*£1.9 million in restricted funds were held in the UK at the end of the reporting period on behalf of donors awaiting distribution to Amref HQ in line with agreed milestones.

These financial highlights are taken from our Annual Accounts 2017/18, which can be found in full at www.amrefuk.org

Note: In 2018, Amref Health Africa UK changed its financial year end to better align with project activities and the business cycle. The 2017/18 accounts you will find on our website therefore cover a 15-month period from 1st October 2017 to 31st December 2018. For clarity, the figures included here have been pro-rated to cover a 12-month period.

STAR SUPPORTERS

In 2017/18, Amref UK's Fundraising team continued to focus on diversifying our income streams and worked to strengthen our relationships with both existing and new supporters.

Trusts and Foundations

2017/18 saw an increase in support from trusts and foundations.

£458,079

Secured in support of Amref UK's projects across sub-Saharan Africa.

£695,000

Pledged for future years*

* Some of this will appear in next year's accounts.



We are excited about new partnerships with **the James Percy Foundation, the Allan & Nesta Ferguson Charitable Trust, Medicor Foundation and the People's Postcode Lottery.**



The City of London School

The City of London School for Boys selected Amref UK as their charity partner for the 2017/18 school year. Through busking, baking, mufti days, a performance of Mozart's The Magic Flute, and a 48-hour row-a-thon, staff and students raised **£84,062** - making it the school's most successful charity partnership yet.

The James Percy Foundation,
supporting maternal health in Tanzania.

The Allan & Nesta Ferguson Charitable Trust, supporting education for young women in Malawi.

The People's Postcode Lottery, who join with us to end FGM/C across sub-Saharan Africa.

Medicor Foundation, who will contribute to reducing maternal mortality in Uganda.



🎁 **The Big Give**

For the second year running, we took part in The Big Give Christmas Challenge, the UK's biggest online match-funding campaign. Supporters rallied round and enabled us to raise more than **£26,000** in just one week!



🎁 **Katine: Ten Years On**

Our supporters responded in their hundreds to an appeal celebrating the tenth anniversary of the Katine project, raising vital funds to support our work to strengthen health systems in Uganda and beyond.

TELLING OUR STORY

Our commitment to principled communications.

Amref Health Africa firmly believes that sharing the stories of the individuals and communities we work with is part of our mission here in the UK. We have a responsibility to represent these stories in as accurate and nuanced a way as possible: in fact, we should be providing a platform so that people can tell their own stories, rather than speaking for them.

There's a real shift happening in the humanitarian and global development sector in terms of the way we portray the places we work and the people we partner with. There is broad agreement that we should all be questioning long-held assumptions about representation, perspective and power. Amref Health Africa is proud to be part of this process - but we know we have a lot to learn. We're making a concerted effort to improve our communications by listening to and learning from the people we work with - just as we do in our projects and programmes.



photo © Sam Vox

HEALTH in HER HANDS

In 2018, we were working towards the launch of our first ever UK Aid Match campaign on International Women's Day 2019. We secured pro bono support from Mumsnet, Positive News magazine, Colourful Radio and more. The One Show's Alex Jones kindly agreed to present our BBC Radio 4 appeal.

HEALTH in HER HANDS is an example of Amref UK's approach to communications and fundraising: it showcases examples of community-led change, without shying away from the challenges our work seeks to address. And it puts the voices and stories of the women we support front and centre.

SAFEGUARDING

The global development sector's primary responsibility is our duty of care towards the people we work with. Amref Health Africa commits to putting their safety, wellbeing, rights and dignity before anything else.

In 2017/18, we continued to work with colleagues from across the NGO sector and beyond to ensure that all those who come into contact with Amref - above all, the people we serve - are protected from abuse, harassment, and exploitation of all kinds.

Senior staff from Amref UK worked closely with colleagues from across the Amref family to review our global policies and procedures relating to safeguarding. Together, we have set the highest possible standards. Our approach recognises the vital importance of having a culture of respect and accountability. With this in mind, all Amref UK staff have signed a new Code of Conduct that sets clear expectations of behaviour and conduct. A similar Code exists for all associated personnel, including Trustees and other volunteers.

Within the UK, our Chief Executive, Frances Longley, co-chaired one of four working groups set up by Bond to drive a radical review of safeguarding. She spoke on behalf of UK NGOs at the Safeguarding Summit convened by DFID in October 2018, which brought together 600 senior delegates from the humanitarian and global development sphere who committed to far-reaching and lasting change.



A Community Health Worker in Kenya accessing eLearning on her mobile phone.

photo © Corrie Wingate



"So few girls from my community finish their high school, go to college and find a good job afterwards. I am that role model that tells them to work hard and shows that it is then possible to make their dreams come true."

Mercy Paundi, Head Nurse at the District Hospital in Mangochi, Malawi.

THANK YOU FOR YOUR SUPPORT

Patron

HRH The Prince of Wales

Board

Mr Mark Chambers

(Chair to 12th November 2018)

Ms Amanda Caine (Treasurer)

Ms Sue Hunt

Dr Nigel Lightfoot, CBE

(Appointed on 13th March 2018;
Chair from 12th November 2018)

Ms Jennifer Mbaluto

(Appointed on 5th October 2018)

Mr Craig Pollard

(Resigned on 24th January 2018)

Mr Alistair Smith

Corporate Partners

GSK

Institutions

Big Lottery Fund

Comic Relief

Human Development

Innovation Fund / Department
for International Development

The Government of the
Faroe Islands

Jersey Overseas
Aid Commission

Trusts & Foundations

A&E Education Trust

AF Bartleet Trust

The Alchemy Foundation

The Allan & Nesta Ferguson
Charitable Trust

The Bower Trust

The Bridgewater
Charitable Trust

The Bryan Guinness
Charitable Trust

The Chalk Cliff Trust

The Dulverton Trust

The Father O'Mahoney
Charitable Trust

The Gilander Foundation

The Golden Bottle Trust

Good Gifts

The Haremead Trust

James Percy Foundation

The Leswyn Charitable Trust

The Lord Deedes of Aldington
Charitable Trust

The Lorimer Trust

Medicor Foundation

The Michael and Anna Wix
Charitable Trust

Miss K. M. Harbison's
Charitable Trust

Pennycress Trust

Peter Storrs Trust

The Rainford Trust

Reed Foundation

Roger Stirk Harbour and
Partners Charitable Trust

Somerset Local Medical
Benevolent Fund

The St Mary's Charity

Stella Symons Charitable Trust

Veta Bailey Charitable Trust

Community Partners & Supporters

City of London School

Lady Sally Poltimore -
Hungerford Christmas Fair

People for People

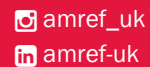
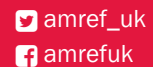
Wolfson College Amref
Supporter Group

We are grateful for gifts,
donations and support of all
sizes, which have contributed to
our work in sub-Saharan Africa.



Amref Health Africa UK
15-18 White Lion Street,
London N1 9PD

www.amrefuk.org
info@amrefuk.org
020 7269 5520



Amref Health Africa is the African continent's leading health charity,
working with women and girls to secure the right to health and break the cycle of poverty.

Amref Health Africa UK is a company limited by guarantee registered in England | Charity Number: 261488 | Company Registration Number: 00982544