

whi Annual report 2005

A Life in Dignity

The Dream

We dream of the day ...

...when no woman must give birth to her child in humiliating, inhuman conditions.

...when no woman suffers childbirth injuries,

- because girls are not married off when they are children.
- because poverty and malnutrition have been successfully eliminated.
- because every woman has access to competent obstetric care.
- because female circumcision is regarded as an outrage and is a thing of the past.

...when all women and girls who suffer physically from childbirth injuries and their consequences (divorce, abandonment, contempt) can find medical, social and emotional help.

...when there is no sexual exploitation, no trade with women and no forced prostitution anymore,

- because parents don't have to sell their daughters due to poverty and debts.
- because equal rights are respected and women take part in social relationships with self-confidence.
- because sexuality is not misused as an act of humiliation and a demonstration of power.

The goals of our work are

- to offer medical help to women with childbirth injuries.
- to support these women in the process of rehabilitation and reintegration into society with a new feeling of self-confidence and self-respect.
- to reduce the amount of childbirth injuries, aiming at the complete elimination of vesicovaginal and rectovaginal fistulas.
- to offer physical, social and emotional help to victims of sexual abuse, exploitation and trade.
- to fight for equal rights and opportunities for men and women.

Return to Dignity and Self-Esteem

Dear readers,

Every minute a woman dies from the consequences of pregnancy or childbirth, which is more than half a million deaths per year. In addition, for each woman who dies during childbirth, a further 20 suffer from obstetric injuries, infections or illnesses, amounting to approx. 10 million women each year.

women's hope international (whi) is committed to fighting against violence towards women and to improving reproductive health, meaning the improvement of medical care for mothers during pregnancy and childbirth. Being a very new organization, we are concentrating our activities on helping girls and women with obstetric injuries, namely obstetric fistula. As the organization grows and develops, we will also be supporting projects which combat violence against women.

Women with obstetric fistula are survivors of a difficult childbirth which has cost other women their lives. They are left alone with their grief over their lost child and are excluded from society. The urine which flows permanently down their legs and uncontrollable bowel movements make social interaction virtually impossible.

There is hardly a greater pleasure and professional satisfaction for a surgeon than the smile and new hope of a young woman whose obstetric fistula has been healed by an operation and who thus has been given a new life. Your commitment in the past year has helped many girls and women back into a life of dignity and self-esteem, and will continue to do so in the future.

Thank you very much!

Martin Leimgruber

President women's hope international

Projects

The Addis Ababa Fistula Hospital in Ethiopia is an internationally recognized competence centre for obstetric injuries. During the last 30 years, over 25,000 women with fistula were operated and many doctors from different countries were trained in operating techniques. A close friendship has sprung up between *women's hope international* and the Addis Ababa Fistula Hospital through a joint project in northeast Chad initiated by the *whi* founders and the Fistula Hospital.

Financing of fistula operations

Girls and women with fistulas generally come from rural communities and have never been to school. They are very poor and do not have the money to pay for an operation. For this reason, all of the fistula patients at the Addis Ababa Fistula Hospital are treated for free.

women's hope international sent the Fistula Hospital CHF 10 000 last year to cover the costs of operations. This amount made operations possible for more than 20 women.

New Operating Table for the Addis Ababa Fistula Hospital

In the Fistula Hospital, operations take place four days a week on four operating tables at the same time. Some of these tables are now old and rusty and urgently require replacement.

Thanks to the generosity of the Trumpf company in Germany, *women's hope international* was able to donate one new operating table to the hospital.

Fistula Clinic in Yirga Alem

In Ethiopia, over 8000 young women a year are stricken with fistula, a number which greatly exceeds the operating capacity of the Fistula Hospital. In 2002, a decentralization of medical aid for girls and women with obstetric trauma was undertaken in direct cooperation with public hospitals. Five fistula clinics were planned which would be connected to five existing hospitals. The goals of this expansion into rural areas are:

- to give the afflicted women a voice
- to raise public awareness for the problems that women with fistula have
- prevention by informing the population
- providing competent obstetric support for women with risk pregnancies
- providing operations to heal women suffering from fistula.

Apart from its curative tasks, the clinic also places great emphasis on preventive measures.

women's hope international helped to finance the clinic in Yirga Alem, and provided CHF 135 000 to equip the operating theatre. The clinic opened in May 2006 and the official inauguration will take place in November.

Yirga Alem Clinic
Final phase of construction

Development of the Organization

women's hope international (whi) was founded in December 2003 as an independent charitable organization with headquarters in Switzerland, with a starting capital of CHF 37,000.

The five-member board started out speaking to friends and acquaintances about the needs of women with obstetric injuries, accompanied by increasing efforts to raise public awareness. To be able to ease the burden of tasks and also to fulfill the ZEWO Foundation (Swiss Certification Association for NPOs) criteria for a possible admission to membership later on, the board took on two additional members in 2005. Thanks to our faithful benefactors, the donations almost doubled compared to last year. We are grateful that we were thus able to finance our projects.

We discussed the future of *women's hope international* in several planning and strategy meetings. Our goal for the next few years remains to raise wider public awareness for the plight of women with obstetric fistula. Because of the great hardship in developing countries in the area of reproductive health matters (pregnancy and childbirth), as well as in combating violence against women, *whi* would like to expand and develop.

We will only be able to make a significant contribution to the situation of the girls and women concerned if our organization grows and we can set up *women's hope international* affiliates in other countries.

These principles led us to take a step forward and hire someone on a part-time basis to handle fundraising and communications. We are happy to have **Annette von Lerber** on our team, an experienced professional who is committed to her work for *whi*.

Annette von Lerber started work as *whi's* Communication Manager on 1 April 2006 in a 40% capacity. She replies to four questions about her background and her new activities in the following interview.

A Brave Step into the Future

How did you end up working for whi?

I spent some time in India, Sri Lanka and Ethiopia and know how well-off we are in Switzerland. Women and girls in developing countries are particularly affected by poverty and injustice. To be able to support them through this job is a dream come true for me!

What did you do before you started at whi?

I worked for international companies selling surgical implants and traveled quite a bit. Now my task is to raise awareness about *whi's* activities and organize funding. I will also be traveling around in Switzerland to build networks and publicize *whi*.

What is your background and how does this qualify you for your new activities and tasks?

I studied economics at the HFW (Higher College of Commerce) in Bern. For the last ten years, I have been involved with several charitable aid organizations professionally as well as privately. I also donate to charities myself, so I know from my own experience how important it is to have personal and transparent communication with donors and the general public.

What about the common criticism that aid organizations spend too much money on administration, with the result that only a fraction of the donations are actually received by the persons in need?

That's a risk that exists for all charitable organizations. At *whi*, the basic principle is that most of the work is carried out on a volunteer basis by the administrative committee and members. *whi* is based on this "commitment from the heart". The reason why I was employed at a 40% paid basis is because *whi* would like to move forward quickly in order to be able help women with obstetric fistula more efficiently. Whoever makes a donation to *whi* can rest assured that their contributions will be put to use even more effectively because of this volunteer commitment.

women's hope international depends on the volunteer work of committed friends who identify with our goals and values. Active cooperation creates links to our organization and the women concerned, and also helps the organization to grow.

You are also a friend! Thank you very much for your commitment!

Balance Sheet

Item	Business year 31.03.2006	Previous year 31.03.2005
Petty cash	-	-
Postal account	194.00	-
Bank account BEKB 42 4.018.071.11	51 053.00	80 804.35
Liquid assets	51 247.00	80 804.35
Withholding tax	216.80	186.35
Accounts receivable	216.80	186.35
Total current assets	51 463.80	80 990.70
Furnishings / IT	1 849.20	-
Total Income	53 313.00	80 990.70
Deferred Income	-	200.00
Reserves Project Metu/Operations	45 326.60	79 085.00
Total debt capital	45 326.60	79 285.00
Status previous year 04-05	1 705.70	-
Allocation to reserves 05-06	6 280.70	1 705.70
Reserves	7 986.40	1 705.70
Total Assets	-	-
Total Liabilities	53 313.00	80 990.70

1 Previous year Yirga Alem/operations

Profit and Loss Account

Item	Normal year 1.4.2005-31.3.2006	Long year (15 mos.) 1.1.2004-31.3.2005
Donations general	115 561.20	85 422.30
Donations for operations	7 604.60	4 085.00
Total donations	123 165.80	89 507.30
Membership fees	450.00	300.00
	123 615.80	89 807.30
Project Chad	-	420.90
Project Yirga Alem	136 388.65	2 710.30
Project Metu	350.00	-
Project Operations via Fist. Hospital	10 363.00	-
Project reserves increase	45 326.60	79 085.00
Withdrawal from project reserves	(79 085.00)	-
	113 343.25	82 216.20
	10 272.55	7 591.10
General office material	-	740.65
Postage, expenses	112.30	85.00
Communication (consultations /	2 594.55	3 809.25
Homepage	403.80	1 338.20
Circular letter (printing / postage)	563.65	171.20
Taxes, duties, authorizations	-	200.00
Total other expenses	3 674.30	6 344.30
	6 598.25	1 246.80
Bank and postal account fees	144.50	73.50
Interest	(619.45)	(532.40)
Depreciation Furnishings/IT	792.50	-
Total other income / expenses	317.55	(458.90)
	6 280.70	1 705.70
Transfer to reserve fund	6 280.70	1 705.70

1 Reserves set aside for Metu: CHF 45,000.00, CHF 326.60 for operations

2 Withdrawal for Yirga Alem CHF 75,000.00, for operations CHF 4085.00

3 Depreciation 30% per annum

Auditor's Report

To the General Meeting of
women's hope international
Stapfenackerstrasse 35
CH-3018 Bern, Switzerland

AUDITOR'S REPORT

Dear Madam
Dear Sir

As the auditors for your organization, we have examined the accounts and the financial statement for the business year ending on 31 March 2006.

Whereas the Committee is responsible for the financial statement, our task consists of auditing and evaluating the accounts, formulating an independent opinion. We hereby confirm that we fulfill the requirements of professional competency and autonomy.

The audit process was carried out following the standard practice of our profession, whereby such an audit is to be planned and carried out in a manner by which incorrect or erroneous declarations can be recognized with due certainty. We checked the items and expenditures in the financial statement with analyses and samplings. In addition, we assessed the presentation of the financial statement as a whole. We are of the opinion that our examination provided an adequate basis for our findings.

According to our evaluation, we can state that the accounts and the financial statement comply with the law and the statutes.

We therefore recommend that the present financial statement, with a profit of CHF 6280.70 and assets amounting to CHF 7986.40, be approved.

Bern, 3 June 2006

Denk GmbH

Head Auditor
(signed)
Hjalmar Thoma

whi would like to thank Denk GmbH for carrying out the audit of the 2005 financial statement free of charge, and doing it so carefully and competently.

The Committee

The Committee held eight meetings last year. Individual members met to discuss projects or further topics and then submitted their proposals to the assembled Committee. All Committee members carry out their work as unpaid volunteers.

Martin Leimgruber ¹

President
Dr. med., surgeon
Bern, Switzerland

Claudia Leimgruber-Neukom ²

Vice president
Midwife, nurse
Bern, Switzerland

Werner Weiss ³

Treasurer, Lebensgemeinschaft Don Camillo
Host and Administrator in Montmirail
Thielle, Switzerland

Matthias Lüscher ⁴

Business manager, lic. phil. hist.
Head of Public Relations
Bern, Switzerland

Laurence Hersche-Crelier ⁵

Member of the Committee, nurse
Münchenbuchsee; Switzerland

Monika Kauke-Urech ⁶

Member of the Committee, worked
as a midwife in Africa for many years
Burgdorf, Switzerland

Marianne Bräker-Kobel ⁷

Directory, Donations
nurse
Bern, Switzerland

*Marianne Bräker-Kobel will be stepping down from
the Committee in June 2006.
whi would like to extend its heartfelt thanks
to her for her excellent work!*

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Account for donations

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Chairmanship whi

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