

ANNUAL REPORT 2016

01.10.2015 – 30.09.2016



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Concrete impact in an increasingly difficult environment

As never before we received over the past year reports from our deployment countries on tense security situations. Security in Afghanistan has continuously deteriorated in recent years and reached a new low point last year. There have never been so many victims since 2001. Although one cannot compare Bangladesh and Afghanistan, tensions in Bangladesh have also significantly increased over recent months. The country has been shaken by violence against persons considered to be atheist or secular or else as a threat by the radical religious powers. The hospital grounds of our partner organisation in Bangladesh have been guarded by policemen day and night over the past few months. In Ethiopia as well, a growing conflict has been building under the surface which has recently vented itself repeatedly in violence in the Oromia region. In addition a few regions were afflicted by a severe drought. 9.7 million people are dependent on food aid. In Chad the move of the terrorist group Boko Haram from Nigeria to the vicinity of Lake Chad has severely affected the security situation. Here too, the acute shortage of food aid is a threat for much of the population.

The ominous developments in Afghanistan, Bangladesh, Ethiopia and Chad have partially affected the implementation of our projects. Women and girls, especially those who are pregnant, feel the effects of crises most seriously. Conflict situations, together with poverty and patriarchal structures, deny them adequate protection, access to health services and life prospects.

In these increasingly precarious life situations our work for marginalised and disadvantaged girls and women becomes even more urgent. Consequently we wish to further develop and intensify our activities in future. At the same time we are grateful that despite all the challenges in the past year WHI was able to achieve much. We rejoice for every single woman suffering from an obstetric fistula who has been healed through an operation, for each trained midwife who can now help mothers through safe births, and for each prevention of a forced marriage that protects a girl from violence and serious consequences for her health. Thank you for your support, your donations, your solidarity and your commitment on behalf of strong women and girls, safe births and the healing of women with obstetric fistulas in an increasingly fragile context.



Gerhard Bärtschi
CEO



Dr. med. Martin Leimgruber
Chairman

Who we are

Women's Hope International is a Swiss aid organisation committed to the improvement of reproductive health in Africa and Asia. Women and girls are given expert support during pregnancy and childbirth, and the postpartum period. Preventive measures are taken to avoid birth trauma. Women with obstetric fistula receive treatment. We fight against child marriages and for an end to teenage pregnancies. Based on Christian ethics, we carry out our work in cooperation with our partners in a competent, professional, effective and efficient manner.

Our vision

Our aim is to achieve a situation in which:

- all women and girls afflicted with an obstetric fistula, who suffer physically and are outcast and despised, receive medical, social, psychological and pastoral care.
- no woman is obliged to give birth in inhuman and humiliating circumstances.
- no longer does a mother die every two minutes during childbirth, and in which maternal mortality worldwide is reduced to the low level of developed countries.
- girls are not married off whilst still children or by force.
- sexuality is no longer misused in order to humiliate or oppress.
- girls can go to school and not be prevented from doing so by a teenage pregnancy.
- women can organise their relationships with confidence and on an equal footing.

Our values

- Our actions are based on basic human rights, guided by Christian ethics.
- Our actions are based on respect for life and assistance to the socially disadvantaged.
- We are particularly committed to social justice and equal rights for men and women.
- We are committed to helping all, irrespective of age, origin, language, religion, culture or socio-political convictions.

Our mission

The healing of obstetric fistula

The healing of women suffering from birth-related physical trauma

We are committed to the identification, treatment, rehabilitation and reintegration of women and girls suffering from obstetric fistula.

Safe deliveries

Expert care and maternity clinics

We help to provide expert care for women and girls during their pregnancy, delivery and childbed. To achieve this, we train midwives, build functional maternity clinics and ensure that operative birthing assistance is available in cases of acute emergency.

Strong women

Empowerment of women

We promote and support the social status of women and enable them to achieve independence and self-determination. Advice on matters of reproductive health, including family planning, are part of this. We make every effort to prevent any future child marriages or teenage pregnancies.

What is an obstetric Fistula?

An obstetric fistula is an abnormal connection between the vagina and the bladder or the rectum. The cause of this is very prolonged or obstructed labour, up to dystocia. The child cannot be delivered. Its head presses for hours on the surrounding tissue, which eventually dies. This leads to a breaching of the vaginal, bladder and intestinal walls. As a consequence, urine and stools pass out through the vagina uncontrollably. This incontinence renders it impossible for the person affected to lead a normal life. Such women are frequently shunned, divorced or become social outcasts. As the cause is badly equipped obstetrical care and the young age of the mothers-to-be, this condition only occurs in developing countries. Across the world, two million girls and women suffer from an obstetric fistula. Between 50,000 and 100,000 new cases of obstetric fistula occur each year.



A woman with obstetric fistula gets treated in Asella, Ethiopia.

International

How we work

Through prevention, the combating of causes and a holistic approach to the treatment of women who are already suffering from birth-related physical trauma, WHI combats the problem of obstetric fistula in an integrated manner. We focus on women and girls who for socio-economic and cultural reasons, and because of inadequate access to appropriate health care, are in danger of dying during or after giving birth, or of developing an obstetric fistula.

The long-term goal is to achieve a marked reduction in maternal mortality and eliminate obstetric fistula. The aim is also for women and girls to achieve self-determination and gain respect and esteem in all areas of life.

In implementing our projects in Afghanistan, Bangladesh, Ethiopia and Chad we act according to the following principles:

- We carry out our mission in a professionally competent, effective and efficient manner.
- We work together with civil and state partners who implement our programmes.
- We work together as partners in pursuit of the same goals; we give long-term support to our partners and help them to achieve a greater degree of professional competence.
- Our programmes are innovative and sustainable. Where possible, they are coordinated with the state health system.
- In the long term we aim to achieve a situation in which our work in every country where we are active is converted into a national programme approach with thematic and geographical areas of focus and, in each case, appropriate coordination structures.
- We test our projects and programmes according to the following criteria: relevance, efficiency, effectiveness, sustainability and impact.

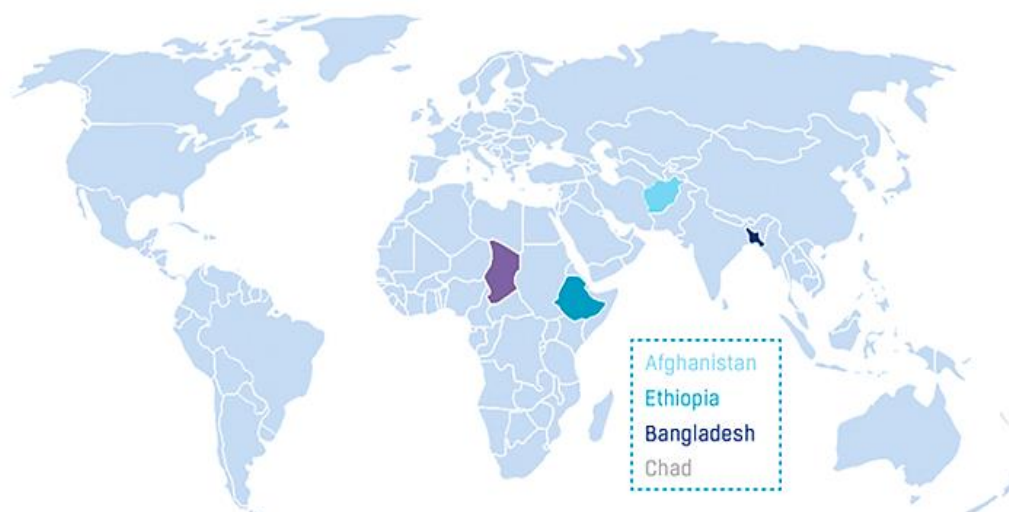
Programme Review Committee

A committee of outside experts meets periodically to give their opinion on new projects for the attention of the Board, either recommending them or turning them down. The exchanges between WHI staff and the experts working on concrete projects also serves the interests of internal knowledge management.

The following persons are members of the committee:

- Dr. Alexander Bischoff, Institute of Nursing Science, Basel University
- Dr. Susanna Hausmann-Muela, Partners for Applied Social Sciences (PASS)
- Dr. Kate Molesworth, Swiss Tropical and Public Health Institute
- Helena Zweifel, former Managing Director of Medicus Mundi

Where we work



Overview of partners

Afghanistan		
<i>Partner</i>	<i>Project</i>	<i>Remitted to partners in CHF</i>
CURE International Hospital	Prevention and treatment of physical birth trauma	111,225.00
Première Urgence Internationale	Basic midwife training	71,673.60

Bangladesh		
<i>Partner</i>	<i>Project</i>	<i>Remitted to partner in CHF</i>
Lutheran Aid Medicine in Bangladesh (LAMB)	Basic reproductive health and holistic treatment of women with obstetric fistula	304,641.55

Ethiopia		
<i>Partner</i>	<i>Project</i>	<i>Remitted to partners in CHF</i>
Attat Catholic Hospital	Observation unit for women with high-risk pregnancies	48,060.45
CUAMM	Health for mother and child	117,998.00
Hamlin Fistula Ethiopia	Midwife training	65,620.00
	Strengthening of maternal health services	20,878.75
St. Luke Catholic Hospital	Midwife training	20,330.00
	Observation unit for women with	25,258.05

	high-risk pregnancies	
Women and Health Alliance (WAHA)	Support for the treatment of obstetric fistula	34,709.30

Chad		
Partner	Project	Remitted to partner in CHF
Projet Souffrance	Projet Souffrance – Treatment of obstetric fistula	16,890.25

Key figures of the year 2015/2016

(October 2015 – September 2016)

Through the cooperation with the various partner organisations WHI was able to achieve much on the spot. The following summary figures show the effect of the cooperation in the key areas of activity during the year under report.

- Number of fistula operations performed: **405**
- Number of midwife students receiving financial support (directly and indirectly): **232**
- Number of professionally assisted women with high-risk pregnancies in observation units: **950**
- Number of health centres/maternity clinics given support in setting-up: **31**



A group of peer educators discussing subjects relating to reproductive health in Bangladesh.

Afghanistan

In Afghanistan WHI has been working with CURE International Hospital since 2007, and with Première Urgence Internationale since 2014.

Project with CURE International: Prevention and treatment of physical birth trauma

Our partner organisation, CURE International Hospital, is a private training hospital with 104 beds. The treatment centre for women with fistula is part of the hospital and has a nation-wide reputation. Women with obstetric fistula come from all corners of the country to undergo an operation here.

Overall objective

The number of women suffering from obstetric fistula is significantly reduced. Fewer women experience birth-related trauma.

Goals:

- Fistula surgeons are trained.
- Gynaecologists complete advanced training.
- Women with obstetric fistula are operated on successfully.
- Health workers in the provinces are made more aware of obstetric fistula.

What was achieved?

In spite of the aggravated security situation in the country, a lot has been achieved in this project. In the last year CURE, in cooperation with WHI, attained the following objectives:

- In the year under review, 148 fistula operations were performed in the hospital, with a success rate of 88%.
- Five doctors completed their further training as assistant doctors in the areas of fistula surgery, obstetrics and gynaecology.
- Four provinces were visited by the mobilisation team. 954 members of the health staff (doctors, registered nurses, midwives and basic health workers) were made aware of the fistula problem.

Project with Première Urgence Internationale (PUI): Basic midwife training

PUI has been active for many years in the province of Kunar, and is responsible for running 45 health centres that are located throughout the province. Health services for mothers and children are a major need. However as long as no female health staff are available, it is impossible, for cultural reasons, for mothers to visit the health centres. This is why midwives and nurses are being trained in a two-year programme.

Overall objective

Suitable presence of qualified health staff in the health centres of the province of Kunar, especially for mothers and children.

Goals:

- In each of the 45 health centres at least one midwife or nurse is active after the training period.
- At least 80% of the trained midwives or nurses take up health-related work in their district of origin.

- A majority of pregnant women in the province of Kunar give birth in the health centres where the newly trained midwives are active.

What was achieved?

In the year under review PUI achieved, in cooperation with WHI, the following results:

- 30 midwives and 30 nurses successfully completed the two-year training programme.
- 85% of the students achieved a score of 95% of the number of points in the examinations.
- Of the 60 students, 44 were able to find work in a health institution directly after their training. The remaining 16 students are still waiting for a work opening.

Total annual amount of the project: CHF 50,000

WHI contribution to the project in the year under review: CHF 71,673 (incl. previous project)



Mothers with their children in Afghanistan.

Bangladesh

In Bangladesh WHI has been working exclusively with LAMB since 2012.

Project with LAMB: Basic reproductive health and holistic treatment of women with obstetric fistula

The programme's target groups are pregnant girls and women, handicapped children and women with obstetric fistula. The project is being run in ten areas of the Parbatipur subdistrict with about 300,000 inhabitants, in close cooperation with the local government and the state health services. The programme is characterised by a holistic approach.

Overall objective

Improved health and resilience for mothers, girls and children from the poorest section of the population.

Goals:

- Eleven maternity clinics in operation round the clock.
- The eleven maternity clinics are supported and headed by voluntary management teams.
- The majority of the pregnant women give birth in a maternity clinic or, in the event of complications, in the hospital.
- 600 women's groups take over responsibility for their right to health: they demand health services from the state health system and initiate their own actions for the promotion of health.
- 1,100 teenagers are trained as group leaders and take on responsibility for sexual health and against forced and child marriages: they oppose forced marriages themselves and encourage their friends to do the same.
- 600 children who are handicapped as a result of pregnancy or childbirth complications receive medical care and are integrated in schools.
- 300 women with obstetric fistula are operated on and reintegrated.

What was achieved?

In the year under review LAMB achieved the following results in cooperation with WHI:

- 106 women with obstetric fistula were operated on.
- A further five maternity clinics were renovated and equipped with the necessary instruments. Now all eleven maternity clinics are in operation.
- Recruitment of 20 women who completed their 6-month training as Community Skilled Birth -- Attendants and then took up their work in five maternity clinics. A total of 1082 babies were delivered in the eleven clinics.
- In five districts, 300 women's groups of 20 members each were formed, and these now meet regularly.
- 500 teenagers (300 girls and 200 boys) were trained as 'Peer Educators', and then formed a group with their friends to discuss subjects relating to reproductive health.
- A further 300 women's groups were formed, each with 20 members, who now meet on a regular basis. In total 600 women's groups are now active with a total of 12,000 members.
- In 25 schools young people received information on reproductive and sexual health as well as on the dangers and risks of child marriages.

Total annual amount of the project: CHF 304,641

WHI contribution to the project in the year under review: CHF 304,641

Ethiopia

In Ethiopia WHI works with five partner organisations and implements seven projects with them. WHI has been active in Ethiopia since 2004.

Project with Attat Catholic Hospital: Maternity waiting area for women with high-risk pregnancies

The project's main target group is women with high-risk pregnancies and their children. These women are in danger of dying before, during or after giving birth, or of developing birth complications. About 25 health centres, each with five health stations, refer patients to the 65-bed Attat Hospital. In the maternity waiting area on the hospital grounds the high-risk women have access to obstetric care and surgical treatment at all times. Here they can prepare themselves for confinement for two to three weeks before the birth in optimum conditions

Overall objective

Women with higher risks during pregnancy and confinement give birth without complications. Maternal mortality and the mortality rate of new-borns are significantly reduced in the project area.

Goals:

- The birth preparation for women with high-risk pregnancies takes place in optimum conditions.
- Women with high-risk pregnancies have access to professional and surgical obstetrics at all times.
- High-risk pregnancies are detected in timely fashion.

What was achieved?

In the year under review the Attat Hospital achieved the following results together with WHI:

- 765 women with high-risk pregnancies were referred to the maternity waiting area and gave birth to a healthy child. Of these 262 were delivered through caesarean section.

Total amount of the project: CHF 48,060

WHI contribution to the project in the year under review: CHF 48,060
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Project with CUAMM: Health for mothers and children

The project's target groups are on the one hand the health personnel of the 20 health centres including their satellite clinics, and on the other hand mothers and infants as well as pregnant women in the three districts of this mainly rural population.

Overall objective

Significantly reduce maternal and child mortality in three districts.

Goals:

- Improve the health services for mothers, new-borns and children in 20 health centres. The health centres have adequate administrative and management systems.
- Pregnant women and mothers know about the available health services and use them. Demand for these health services is increasing.

- The regional office of the public health ministry has the capacity to plan, implement, monitor and evaluate the necessary health services on an ongoing basis.

What was achieved?

In the year under review CUAMM achieved the following results together with WHI:

- Thanks to the improvement in health services in the districts 97% of all pregnant women underwent prenatal examinations over the past year.
- 46% of all pregnant women completed all four compulsory pregnancy check-ups.
- 55% of all pregnant women gave birth to their child in one of the newly renovated health centres, in a health station or in the hospital.
- 46% of mothers with an infant went for a postnatal check-up after the delivery.

Total amount of the project: CHF 319,651
 WHI contribution to the project in the year under review: CHF 117,998

Project 1 with Hamlin Fistula Ethiopia: Midwife training

The project's target group is midwife students selected from five of the country's regions. After training they will return to their region to work as midwives in a state health centre in a rural area.

Overall objective

The Hamlin College of Midwives makes a significant contribution to the objective of providing expectant mothers with access to professional obstetrics and of avoiding birth complications.

Goals:

- Each year 23 midwife students successfully complete their 4-year training with a Bachelor's degree.
- They are equipped with the necessary theoretical and practical capacities.
- As a rule the graduates accomplish 100 assisted deliveries during their training.

What was achieved?

In the year under review Hamlin Fistula Ethiopia achieved the following results together with WHI:

- 22 midwife students completed their training with a Bachelor's degree and took up work as a midwife in their home regions.
- A total of 90 midwife students took part in the school's training programme.

Total annual amount of the project: CHF 357,044
 WHI contribution to the project in the year under review: CHF 65,620

Project 2 Hamlin Fistula Ethiopia: Strengthening of maternal health services

The target group is pregnant women and their children in the rural surroundings of the 17 health centres to which the midwives were sent after their training. Furthermore, this is beneficial for the families living in the catchment areas of the centres.

Overall objective

Maternal and infant mortality in the area surrounding 17 rural health centres is significantly reduced.

Goals:

- Obstetric care in 17 state health centres in five regions is significantly improved.
- Every year, newly trained midwives are sent to state health centres where they undertake to work for at least three years.
- The basic equipment and medicine for adequate obstetric care are guaranteed, as are transport possibilities in the event of emergency transfers.

What was achieved?

In the year under review Hamlin Fistula Ethiopia achieved the following results together with WHI:

- 10,665 babies were born in the 17 health centres.
- In the 17 centres the following were performed:
 - 12,587 prenatal examinations.
 - 9,360 postnatal consultations.
 - 42,239 family planning consultations.

Total amount of the project: CHF 225,314

WHI contribution to the project in the year under review: CHF 20,878

Project 1 St. Luke Catholic Hospital: Maternity waiting area for women with high-risk pregnancies

The project's main target group is women with high-risk pregnancies and their children. These women are in danger of dying before or during childbirth, or of developing birth complications.

About 20 health centres, each with five health stations, refer patients to the 200-bed St Luke Hospital.

In the maternity waiting area on the hospital grounds the women with high-risk pregnancies have access to obstetric care and surgical treatment at all times. Here they can prepare themselves for confinement for two to three weeks before the birth in optimum conditions.

Overall objective

Women with higher risks during pregnancy and confinement give birth without complications. Maternal mortality and the mortality rate of new-borns are significantly reduced in the project area.

Goals:

- The birth preparation for women with high-risk pregnancies takes place in optimum conditions.
- Women with high-risk pregnancies have access to professional obstetrics and surgical treatment at all times.

What was achieved?

In the year under review, St. Luke Hospital achieved the following results together with WHI:

- 202 women with high-risk pregnancies were referred to the maternity waiting area and gave birth to a healthy child. Of these 92 were born by caesarean section.

Total annual amount of the project: CHF 25,258

WHI contribution to the project in the year under review: CHF 25,258

Project 2 with St. Luke Catholic Hospital: Midwife training

The project's target group is midwife students selected in the region. After training they work either in the maternity department of St. Luke Hospital or in a rural state or private health centre in the region.

Overall objective

The College of Nursing and Midwifery of St. Luke Hospital contributes significantly to providing expectant mothers in Ethiopia with access to professional care and thus to avoiding birth complications.

Goals:

- Every year an average of 27 students are admitted for training.
- Every year the midwife students successfully complete their 3-year training with a diploma. They are equipped with the necessary theoretical and practical skills.
- As a rule the graduates accomplish 60 assisted deliveries during their training. 25 assisted deliveries are the minimum.

What was achieved?

In the year under review St. Luke Hospital achieved the following result together with WHI:

- 92 midwife students attended the training in the College.
- 40 midwife students completed their three-year training successfully and now work in a health institution in the region.

Total annual amount of the project: CHF 97,122

WHI contribution to the project in the year under review: CHF 20,330

Project with WAHA: Support for the treatment of obstetric fistula

The WAHA specialists have solid and longstanding expertise in the treatment of women with obstetric fistula or uterine prolapse. The WAHA Treatment Centre is attached to the Arsi University Hospital in Asella. The target population is women with obstetric fistula or uterine prolapse in the south-eastern part of the Oromia region.

Overall objective

Reduction of the occurrence of obstetric fistula and uterine prolapse in the south-eastern part of the Oromia region.

Goals:

- High quality treatment of women with obstetric fistula or uterine prolapse is guaranteed.
- Gynaecologists, medical students and nursing staff are well trained in the treatment of obstetric fistula.
- Obstacles for the treatment of the women concerned are removed through payment of transport costs.
- Stigmas and misunderstandings in the population with respect to obstetric fistula and uterine prolapse are overcome to a large extent.

What was achieved?

In the year under review WAHA achieved the following together with WHI:

- 97 operations were performed. 79 women with obstetric fistula and 18 women with uterine prolapse were operated on and received psychological care.

Total amount of the project: CHF 107,857

WHI contribution to the project in the year under review: CHF 34,709



A mother with her new-born baby in Ethiopia.

Chad

In Chad WHI has been working with Projet Souffrance since 2015.

Project with Project Souffrance

The project focuses on women with obstetric fistula. They come from the whole north-eastern region of the country in order to be operated on in the government hospital of Abéché. The fistula surgeon responsible has longstanding experience. The women are accommodated in a building located just next to the regional hospital where they are taken care of by the nursing staff.

Overall objective

Reduction of the occurrence of obstetric fistula and uterine prolapse in the north-eastern region of Chad.

Goals:

- Women with obstetric fistula are prepared for the fistula operation through healthy nourishment.
- Women with obstetric fistula are operated on successfully.
- Pre- and post-operative care and support of the women concerned is assured.

What was achieved?

In the year under review Projet Souffrance achieved the following results together with WHI:

- 72 women with obstetric fistula were operated on and received pre- and post-operative care.
- From 13 February to 5 March 2016 Dr. Geert Morren conducted a comprehensive evaluation of the project.

Total annual amount of the project: CHF 16,890 WHI contribution to the project in the year under review: CHF 16,890
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National

Awareness-raising work

Many women throughout the world still have no access to quality healthcare services during pregnancy, birth and the postnatal period. They continue to be denied equal treatment in society. Women's Hope International strives to raise public awareness of the life and health situation of girls and women, and to set things in motion for them in Switzerland as well. To this end WHI provides regular information on the people involved in the projects, arranges presentations and organises events.

Presentations

Last year presentations took place on the concerns of WHI in the parish of Wohlen (AG) and in Langenthal. Both events were well attended and met with keen interest. In Langenthal Dr. Beatrice Ambauen reported on her work as fistula surgeon and head of the gynaecology department at the LAMB Hospital in Bangladesh.

Film evening 'Myanmar Midwife'

Together with Medicus Mundi Switzerland WHI organised a film evening with podium discussion for midwives and other interested parties. With 150 visitors the cinema hall was filled to bursting point. The film showed graphically the everyday work of a midwife who alone is responsible for several remote villages in Myanmar. It illustrated the circumstances in which women give birth on the spot and the risks to which they are exposed.

Obstetric fistula action days

In March there were two action days on the theme of obstetric fistula, organised in collaboration with the Berne University of Applied Sciences, Health Faculty. On the first day Claudia Leimgruber, a midwife and the founder WHI, gave a specialised presentation for the university students and other listeners. On the following day the film 'A Walk to Beautiful' was shown, featuring five women from Ethiopia suffering from obstetric fistula.

Frauenlauf (Women's run)

For the third consecutive year committed girls and women ran in the Frauenlauf in Berne in support of WHI projects. The run is reputed to be the largest women's sporting event in Switzerland. The 50 participants combined sport with commitment and ran for 'strong girls and women, safe births and the healing of obstetric fistula'. Despite the drizzling rain the atmosphere was fantastic. The next Frauenlauf is planned for 11 June 2017. More runners are very welcome.

Bachelor thesis on obstetric fistula

Two midwife students of the Berne University of Applied Sciences wrote their Bachelor's thesis, on behalf of Women's Hope International, on the subject of 'Knowledge and emotional involvement of midwives and gynaecological professionals with respect to obstetric fistula'. To this end the two midwives carried out a survey of male and female gynaecologists in German-speaking Switzerland. Their work shows that those interviewed are generally aware of the issue of obstetric fistulas. On the other hand there is very little knowledge about the possibilities of active engagement. The work helps WHI to develop new awareness-building measures.

New member of staff for the awareness arena

In September 2016 Madeleine Herzog joined the WHI team. As new staff member in the awareness area she is involved in reporting on maternal health in developing countries and creating awareness around the issue of fistulas. She supports our volunteers and is available as a specialist for presentations on the people and projects in the countries where WHI is active in.

Membership

WHI is constituted as an association. Its members help to carry WHI's vision and highlight WHI's concerns in the public sphere. In the 2016 financial year 61 people were members of Women's Hope International. We greeted many people as new members, and more are most welcome. Further information can be found under <https://www.womenshope.ch/en/take-action/become-a-member>.

Communication

Women's Hope International regularly informs donors and interested parties on the progress of projects, and provides background knowledge on sexual and reproductive health. In this year the website (<https://www.womenshope.ch/en>) was completely revised and now has a new look. In the 2016 financial year WHI published four editions of the magazine 'WHI News', sent out six e-mail newsletters and provided regular information through Facebook and Twitter. Subscriptions to the magazine and the e-mail newsletter can be obtained via the secretariat. WHI also welcomes new fans on Facebook as well as new followers on Twitter and Instagram.



In Langenthal, Dr. Beatrice Ambauen reports on her work as a fistula surgeon in Bangladesh.

Involvement of volunteers

Without the assistance of many people who make a commitment on the operational or strategic level, WHI would not be able to act on the scale it does today. Volunteers devote their know-how and energy to helping out in a variety of areas. These include:

- Finance, accounting, recording of donation data.
- Assistance with publications, writing, layout, despatch.
- Lectures and assistance in street campaigns.
- Programming work and help in the web area.
- Organisation of events.
- Work on the Board.

Over 1390 hours were spent by 21 people on volunteer work - the equivalent of about 164 workdays. Other people carried out their own campaigns and spread information on WHI on occasions such as birthdays, wedding anniversaries or the birth of their children, soliciting donations for the projects.

WHI sincerely thanks all who have invested their time to improve the lot of girls and women in the developing countries of the South on a sustainable basis.



A young mother with her son in Chad.

Financial statement

BALANCE SHEET PER 30 SEPTEMBER 2016

	30.09.2016		30.09.2015	
	CHF	%	CHF	%
ASSETS				
Accounts in CHF	270'541.61	82.7%	321'133.70	78.0%
Accounts in EUR	42'955.71	13.1%	39'626.88	9.6%
Accounts in USD	10'051.12	3.1%	10'086.35	2.5%
Total liquid funds	323'548.47	98.9%	370'846.93	90.1%
Receivables	90.08	0.0%	90.08	0.0%
Prepaid expenses	500.00	0.2%	27'173.60	6.6%
WORKING CAPITAL	324'138.55	99.1%	398'110.61	96.7%
Movable assets	3'000.00	0.9%	13'534.00	3.3%
FIXED ASSETS	3'000.00	3.5%	13'534.00	3.3%
TOTAL ASSETS	327'138.55	100.0%	411'644.61	100.0%
LIABILITIES				
Accounts payable from supplies/services	1'535.30	0.5%	3'384.10	2.3%
Accrued expenses	250.00	0.1%	7'952.10	1.9%
CURRENT LIABILITIES	3'373.40	1.0%	11'336.20	2.8%
Fund Ethiopia	209'007.15	63.9%	116'103.90	28.2%
Fund Chad	-	0.0%	-	0.0%
Fund Afghanistan	228.60	0.1%	-	0.0%
Fund Bangladesh	58'341.65	17.8%	215'359.40	52.3%
Thematic funds	300.00	0.1%	250.00	0.1%
TIED FUND CAPITAL	267'877.75	81.9%	331'713.30	80.6%
Acquired free capital	68'595.11	21.0%	118'760.82	28.9%
Annual result	-12'707.36	-3.9%	-50'165.71	-12.2%
TOTAL ORGANISATION CAPITAL	55'887.75	17.1%	68'595.11	16.7%
LIABILITIES	327'138.55	100%	411'644.61	100.0%

Profit and Loss Account 01.10.2015 – 30.09.2016

	1.10.2015 – 30.09.2016		1.10.2014 – 30.09.2015	
	CHF	%	CHF	%
REVENUE				
Donations from natural persons	322,896.65	30.0%	302.446.03	78.0%
Donations from legal persons	361,175.14	33.5%	349.190.00	9.6%
Contributions from church funds	57,362.15	5.3%	76.217.69	7.5%
Contributions from public funds	307,549.85	28.5%	271.366.00	26.8%
Total donations	1.048.983.79	97.3%	999.219.72	98.6%
<i>thereof earmarked donations</i>	650.736.51	60.4%	571.749.35	56.4%
Other revenues	28.726.67	2.7%	14.188.16	1.4%
TOTAL REVENUES	1.077.710.46	100%	1.013.407.88	100%
EXPENDITURE				
Projects abroad	860.941.41	79.9%	734.701.65	72.5%
Staff and material expenditure abroad	78.634.43	7.3%	71.832.58	7.1%
Total abroad	939.575.84	87.2%	806.534.23	79.6%
Communication & awareness-raising	33.173.45	3.1%	24.706.32	2.4%
Staff and material expenditure C & A	50.510.45	4.7%	34.817.83	3.4%
Total C & A	83.638.90	7.8%	59.524.15	5.9%
Events & campaigns	12.427.68	1.2%	3.170.33	0.3%
Staff and material expenditure fundraising	67.577.28	6.3%	41.772.63	4.1%
Total fundraising	80.004.96	7.4%	44.942.96	4.4%
Sales & miscellaneous	-	0.0%	57.34	0.0%
Staff and material expenditure admin	50.747.19	4.7%	64.759.73	6.4%
Total administrative expenditure	50.747.19	4.7%	64.817.07	6.4%
Interim result 1	-76.301.43	100.0%	37.589.47	
Financial income	328.60	0.0%	345.85	0.0%
Financial expenditure	-570.43	-0.1%	-4'413.18	-0.4%
Annual result before fund result	-76.543.26		33.522.14	
Allocation of earmarked funds	-650.736.51	-60.4%	-571.749.35	-56.4%
Withdrawal of earmarked funds	860.941.41	79.9%	734.701.65	72.5%
Internal transfer of earmarked funds	-146.369.00	-13.6%	-246.640.15	-24.3%
Funds result	63.835.90	5.9%	-83.687.85	-8.3%
Annual result before change in organisation capital	-12.707.36		-50.165.71	
Withdrawal of organisation capital	12.707.36		50.165.71	
Total change in organisation capital	12.707.36	1.2%	50.165.71	5.0%
Annual result after allocations	0.00		0.00	

STATEMENT OF CHANGES IN CAPITAL AND FUNDS

PER 30 SEPTEMBER 2016

Contributions in CHF	Opening balance	Allocation (external)	Utilisation (external)	Internal fund transfers	Closing balance
National coordination office	-	-	-270.00	270.00	-
Ethiopia overall	-	-	-4.876.98	4.876.98	-0.00
Obstetric fistula care	-	31.799.25	--34.709.30	2.910.05	-0.00
Midwifery School Hamlin	-	204.750.00	-65.620.00	-20.878.75	118.251.25
Midwifery School St. Luke	-	540.00	-20.330.00	19.790.00	-
Maternity Waiting Area St. Luke	-	-	-25.258.05	25.258.05	-
Maternity Waiting Area Attat	-	40.050.00	-49.050.45	9.000.45	0.00
Maternal health service	-	-	-20.878.75	20.878.75	-
Mother and child health	116.103.90	112.320.00	-117.998.00	-19.670.00	90.755.90
Funds Ethiopia	116.103.90	389.459.25	-338.991.53	42.435.53	209.007.15
Chad overall	-	-	-440.00	440.00	-
National coordination office	-	-	-2.064.05	2.064.05	-
Projet Souffrance	-	450.00	-26.612.47	26.162.47	0.00
Funds Chad	-	450.00	-29.116.52	28.666.52	0.00
Afghanistan overall	-	228.60	-	-	228.60
Obstetric fistula care	-	33.336.00	-111.225.00	77.889.00	-
Midwifery school	-	60.884.86	-71.673.60	10.788.74	-0.00
Funds Afghanistan	-	94.449.46	-182.898.60	88.677.74	228.60
Bangladesh overall	-	-	-2.633.21	2.633.21	-
Funds strong girls and women	215.359.40	150.283.80	-370.301.55	-	58.341.65
Funds Bangladesh	215.359.40	150.283.80	-309.934.76	2.633.21	58.341.65
Funds operations	-	15.924.00	-	-15.924.00	-
Funds midwife training	-	120.00	-	-120.00	-
Funds strong girls and women	250.00	50.00	-	-	300.00
Thematic funds	250.00-	16.094.00	-	-16.044.00	300.00
Fund capital earmarked	331.713.30	650.736.51	-860.941.41	146.369.00	267.877.40
Acquired free capital	68.595.11	-	-	-12.707.36	55.887.75
Annual result	-	-12.707.36	-	12.707.36	-
Organisation capital	68,595.11	-12,707.36			55,887.75

Appendix to the financial statement

Accounting principles

The present financial statements were established in compliance with the accounting recommendations Swiss GAAP FER (Kern-FER and FER 21), and respect the Swiss Code of Obligations and the provisions in the statutes.

The financial statements provide a picture of the financial and earnings situation of Women's Hope International that corresponds to the actual circumstances.

Materiality and valuation base as well as explanatory details on the balance sheet

The accounts are reported in Swiss francs. Assets in foreign currencies are converted at the exchange rate valid on the balance sheet reporting date, transactions generally at the respective daily exchange rate. The principle of individual evaluation of assets and liabilities applies.

Liquid assets

This position contains post and bank accounts, and is evaluated at nominal value; foreign currencies at the period-end exchange rate per:

Currency	30.09.2016	30.09.2015
EURO	1.10	1.09
USD	0.97	0.97

Receivables

This position contains the credit from withholding tax. The evaluation of this position is made at nominal value.

Fixed assets

This position covers office equipment such as IT hardware and software. The valuation is made on the basis of acquisition costs less depreciation. The equipment is depreciated in linear fashion, within 3 years. The minimum capitalisation level is CHF 1,000.00.

	Opening balance	Inflows	Outflows	Reclassification	Closing balance
Acquisition values					
Movable assets	31,596.70	0.00	0.00	0.00	31,596.70
Total	31,596.70	0.00	0.00	0.00	31,596.70
Provision for depreciation					
Movable assets	18,062.70	10,534.00	0.00	0.00	28,596.70
Total	18,062.70	10,534.00	0.00	0.00	28,596.70
Net book values	13,534.00	0.00	0.00	0.00	3,000.00

Liabilities from supplies/service

This balance sheet position covers current payables for supplies and services. The accounting is at nominal value.

Deferred income

This position contains the accruals of material and social security expenditures.

Fund capital

This position covers funds from donations in which the intended purpose is limited by the donors and the public authorities. The modifications can be seen under Change in Fund Capital in the Operating Statement as well as in the Statement on the Change in Capital. Internal transfers for underfinanced projects were made from thematic funds with a similar purpose, as well as through a reasonable withdrawal from donations.

Organisation capital

This position covers exclusively acquired free capital. See also the Statement on the Change in Capital.

Details on the Profit and Loss Account

Contribution from public funds

This position contains: Swiss Development and Cooperation (SDC) CHF 15,149.85 (previous year CHF 49,416.00), Cantons CHF 258,000.00 (previous year CHF 217,000.00) and local communities CHF 34,400.00 (previous year CHF 4,950.00).

Cost split per category

	Direct Costs	Staff expenditure	Material expenditure	Depreciation	Total
Projects abroad	860,758.00	65,779.00	9,605.00	3,434.00	939,576
Communication & awareness-raising	32,713	41,096	6,831	3,045	83,684
Fundraising	30,768	39,465	7,188	2,584	80,005
Administration	10,017	28,070	11,188	1,472	50,747
Total	934,257	174,410	34,811	10,534	1,154,012

Voluntary work performed

A total over 1'390 hours were spent in volunteer work by 21 people. This corresponds to 164 working days.

Management bodies

All members of the Board work on a voluntary basis and receive no attendant fees.

Staff pension arrangements

Employees of Women's Hope International are insured in the framework on an affiliation agreement with the Gemeinschaftsstiftung (joint foundation) 12 Plus, Basel, covering the economic consequences of old age, disability and death. This is a contributory plan whereby both employer and employee pay fixed contributions. At the balance sheet closing date no additional benefit or obligations accrue to Women's Hope International as a result of this affiliation agreement.

Details on cash flow analysis

As per Swiss GAAP FER a cash flow statement or analysis is not required for small¹ non-profit organisations (FER 21/27).

¹ If two of the following criteria are not met at two consecutive balance sheet closing dates: balance sheet amount of CHF 2 million, free gifts and contributions from public funds CHF 1 million, an average of 10 fulltime paid positions over the year.

Performance Report 2016

For the organisation's effectiveness, we refer readers to the comprehensive information in the first section of the annual report.

Women's Hope International

Legal form: Association

Founded: 4 December 2003, Berne

Purpose of the Association (our mission according to the association's statutes)

Women's Hope International is an aid organisation working for the improvement of sexual and reproductive health in Africa and Asia.

The Association is active in the identification, treatment, rehabilitation and reintegration of women and girls with obstetric injuries.

The Association supports competent accompaniment of women and girls during pregnancy, childbirth and childbed.

In addition, the Association encourages and strengthens women and girls in their social status, enables their independence and self-determination, especially regarding their sexual and reproductive health.

Help is provided irrespective of age, origin, language, religion, culture or political conviction.

The Association carries out its activity on a non-profit basis. No economic purpose or financial gain is pursued.

Assembly of members

The Assembly of Members has supervisory authority over the Association's operations. It is responsible for the election and discharge of the Board as well as for acceptance of the organisation's activity report, financial statements and auditor's report

Auditors

Auditing the financial statements has been entrusted to the company KPB Treuhand AG.

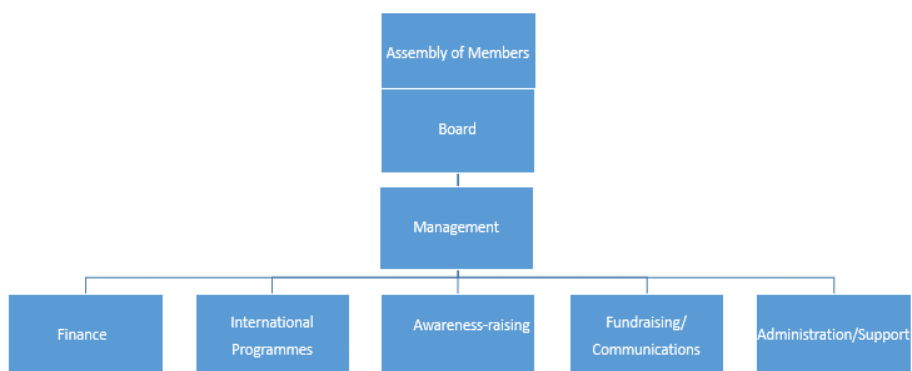
Board

The Board of WHI consisted of five persons in the year under report. The Board is responsible for the strategic management of the organisation and has supervision over the management. In the last year the Board met for four sessions as well as for a whole-day Board retreat to discuss the orientation of the organisation. The members of the WHI Board work on a voluntary basis. They receive no compensation or attendance fees.

- **Dr. Martin Leimgruber**, Chairman, FMH Consultant for Surgery and General Medicine, Bellach
- **Dr. Dorothea Hefti-Fliegenschnee**, Vice-Chairman, FMH Consultant in Gynaecology and Obstetrics, Langenthal
- **Matthias Lüscher**, Secretary, Public Relations Manager, lic. phil. hist., Berne
- **Madeleine Bolliger**, Ethnologist, Basel
- **Manuela Bracale**, responsible for Finance and Business Development, Wilen

Secretariat

Gerhard Bärtschi has been CEO of Women's Hope International since 1 January 2013. Within the Board, the CEO has the right to consultation and petition, but not the right to vote. In this way, the distinction between the strategic and operational level is preserved. In addition to his general management function, Gerhard Bärtschi as Head of Programmes is responsible for managing the area of International Programmes. Léonie Reichenecker also works in the secretariat as Manager for the Fundraising and Communications area. Since September 2016, Madeleine Herzog works in the secretariat for the Awareness-Raising area. Three volunteers are responsible for Finance and Accounting. Paid staff working at the secretariat part-time add up to a total of 200 per cent (as at 30 September 2016). In addition, during the year under review a trainee worked in the secretariat at 80%.



Memberships

WHI is a member of the following networks and organisations:

- Medicus Mundi Schweiz
- Campaign to End Fistula, UNFPA
- International Obstetric Fistula Working Group (IOFWG)

Sincere thanks!

Under the motto “Strong women – Safe births – Healing fistula” Women's Hope International is dedicated to improving the health situation of women and girls in developing countries and strengthening their position in society. We are very happy that so many different people and institutions have joined us in our commitment to reach these goals.

WHI sincerely thanks all those who have contributed over the past year to implementing the projects in favour of women, children and families in Afghanistan, Bangladesh, Ethiopia and Chad. In particular, our thanks go to:

- our donors, for their commitment.
- all foundations, parishes and companies for their generous support.
- the Swiss cantons and political communities for their project contributions.
- our volunteer helpers for their sterling work and great dedication.
- all who have helped make others aware of the challenges we face .



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Sparkasse Bodensee



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