

Strategy and Impact Deep Dive

For Hope and Healing International's Fiscal Year 2022 (July 2021–June 2022)

There are story people, and there are numbers people. There are big picture people and nitty gritty detail people. This document is for nitty gritty numbers people who want to go deeper into our Hope and Healing International strategy and impact numbers. The rest of our website is packed with pictures, quotes, stories and top line statistics about the children whose lives we and supporters from across Canada are transforming with hope and healing.

First, our Strategy Framework – *Choose Hope 2023*

Fiscal Year 2022 was the second year of our 3-year strategy called **Choose Hope**. **Choose Hope** was developed in response to the pressures of the pandemic and its continued impact on every aspect of our **work**:

- *the children we serve and their families, who are among the very poorest families on the planet;*
- *our donors and their ability to support the work of Hope and Healing International;*
- *our frontline partners, who are coping with funding shortfalls, more need and more complex health protocols;*
- *and finally, our staff, who had to pivot to hybrid work, new systems and new protocols in a very short time.*

Together, we made a conscious decision to choose hope not fear – to lean into God's faithfulness and to take inspiration and resolve from the courage and grit of the children and families we serve.

Choose Hope Achievements in FY 2022 – the Highlights:

More Impact:

We audaciously set ourselves a goal to drive for more impact on more lives despite the financial uncertainties of COVID-19.

In FY22, we served a total of 1,831,806 children caught in the cycle of poverty and disability – 23% more than our target.

We also responded to the shifting needs of clients and partners, providing increased support through personal protective equipment (PPE) and inclusive food distribution, in addition to our support of health, rehabilitation, education, income and attitude change in and around the child.

Manage the Pandemic:

In FY21, we made the decision to temporarily reduce funding for partners when COVID-19 first hit, bracing ourselves for reduced revenues and managing expectations and budgets with our partners. Thanks to our amazing supporters, who chose hope and generosity in the middle of the pandemic, we were able to take 100% of our strategy-aligned partners back to pre-pandemic levels of funding by FY22.

Our amazing donors continued to give faithfully in FY22, with a spirit of generosity and sacrifice that never ceases to humble us. In FY22, our number of new and active donors were both above strategy targets, and our revenue ended the year 25% above target – a total of \$34.5 million.

We beat our aggressive 99% uptime target for core business processes to support remote work, creating an effective and collaborative hybrid workplace. And we maintained a strong staff confidence score in leadership planning and decision-making throughout FY22.

Get Ready for our Next Strategy:

We completed our baseline first year of our impact study in Malawi, listening carefully and deeply to the voices of the children we serve and their moms/primary caregivers, and we are using the data to improve our program strategy.

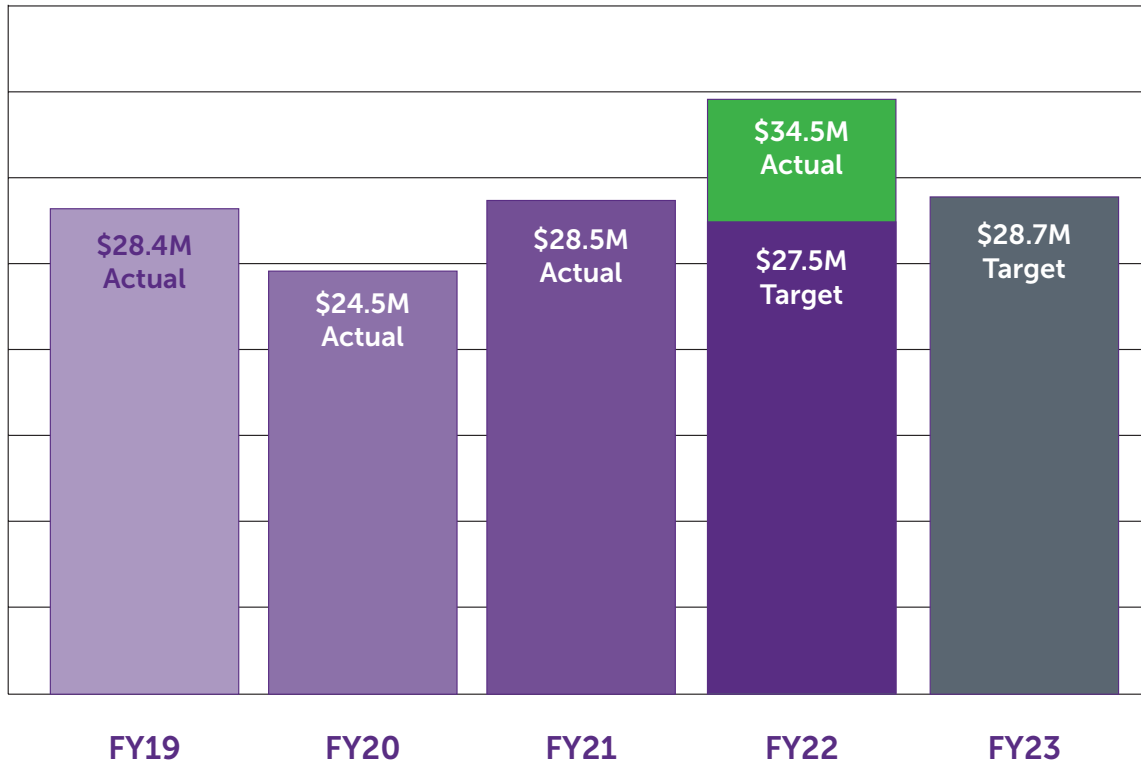
We completed a pilot and evaluation of our resilience skills program, aimed at kids with a disability ages 8 through 17.

We completed the first half of our next strategy build – including a robust external and internal scan and a refreshing of our Mission, Vision, Values and Brand.

Lessons learned:

- Remote work and connections can be very effective in the short term. In the longer term, we need a balance of remote and in-person collaboration with our office team, with clients and with partners.
- The broader the strategy consultation with staff, the deeper the buy-in to the strategic priorities.

5 YEAR REVENUE TRENDING



Our Theory of Change

The PROBLEM that we're trying to solve in the world is:

Too many children with disabilities living in the poorest families and communities are sick, dying, lonely, neglected, uneducated, abused, viewed as a burden and unemployable as adults.

The long-term CHANGE we're trying to drive through everything that we do is:

More children with disabilities in the poorest communities are living healthier, happier, longer lives.

Our THEORY OF CHANGE is essentially the chain of results that will drive this long-term change:

- > Program Activities (e.g. surgery, physiotherapy, distribution of assistive devices like wheelchairs)
 - > Short-term results (e.g. restored sight, improved mobility)
 - > Medium-term results (e.g. access to medical care, access to school, access to play)
 - > Long-term results = Impact (self-reported improved health and happiness)

DESIRED LONG-TERM CHANGE

More children with disabilities in the poorest communities live healthier, happier, longer lives.

More girls and boys have
HEALTHY BODIES

More girls and boys have
LEARNING MINDS

More girls and boys have
RESILIENT SPIRITS

Mid-Term Result 1: Health

More children with disabilities are accessing health services and engaging in activities needed to achieve health

Mid-Term Result 2: Income

More families of children with disabilities are able to support their children's well-being

Mid-Term Result 3: Education

More children with disabilities are progressing in and completing primary school

Mid-Term Result 4: Social Attitudes

More children with disabilities feel valued by their family, peers, teachers, church and community, and have a variety of social identities, roles and responsibilities

Mid-Term Result 5: Self-Value

More children with disabilities believe they are valued and valuable, as created children of God

Context-specific, short-term outcomes developed collaboratively with each partner leading to mid and long-term outcomes.

e.g.
Lowered incidence of trachoma, good surgical outcome, improved mobility

e.g.
Increased income of caregivers to support medical need, school, food

e.g.
Increased attendance in primary school by children with disabilities

e.g.
Improved understanding of disability causes, child's potential and rights

e.g.
Increased resilience score, workshop feedback

PROBLEM

Too many children with disabilities living in the poorest families and communities are sick, dying, lonely, neglected, uneducated, abused, viewed as a burden and unemployable as adults.

Lack of Medical Care

Lack of Rehabilitation

Poverty

Lack of Education

Lack of Info and Gender Equality

Social Attitudes

Poor Self Image

Historically, Hope and Healing has been very good at planning, counting and reporting on the activities and outputs of our programs. We have used stories to demonstrate long-term quality of life improvements in the lives of children.

We are now working to put consistent and validated numbers around the narrative, to measure not only outputs, but short, mid and long-term outcomes; for example:

- Are more babies born with disability surviving to age 5 and how does this compare with the national under 5 mortality rate?
- Are more children self-reporting that they are happy? (using validated satisfaction scores)
- Are more children with disabilities accessing medical and rehabilitative services?
- How does household income where at least one child lives with a disability compare to household income of surrounding households?

We are partnering with the University of Toronto’s International Centre for Disability and Rehabilitation (ICDR) and the University of Malawi to measure health and happiness change driven, at least in part, by our activities in one district in Malawi using our Theory of Change indicators.

Meanwhile, we’re re-structuring our program planning, budgeting, reporting and evaluation templates to align with our Theory of Change.

The evidence we’re gathering tells us that sustained positive change for children requires that we address all five domains of care in our Theory of Change. We are developing a child-centred model of program planning and delivery that we’ll pilot in FY 24–26.

Program Allocation across Domains

PROGRAM INVESTMENT BY DOMAIN FY 2022



Our strength and most proven partnerships are in our Child Health domain. Child Health includes disability prevention efforts, hospital-based curative interventions and home-based rehabilitation, including physiotherapy, occupational therapy and assistive devices.

Our plan is to build more capacity and added value in the Self-Value domain – piloting and rolling out a child-focused Resilience Program and Training Tool that teaches kids the skills and internal protective factors they need to overcome adversity. This is a gap in Disability Inclusive Development. We believe our Christian values, specifically our commitment to valuing all children as Jesus does, requires us to do more than medical care. It asks us to facilitate the healing of bodies *and* hearts.

Hope and Healing will continue to seek out and form strategic partnerships with other organizations, including local churches, hospitals, schools, other non-governmental and governmental organizations, that specialize in Education, Family Livelihood and Social Attitude Change. We see a vital role for us in securing, tracking and, in many cases, subsidizing these services for the children and families we serve. We will leverage the skills and expertise of other partner organizations in these fields.

Our Life-Changing Impact, Together with You

2022 was a year of grappling with the ongoing pandemic as well as the fallout of soaring inflation and food insecurity. Families and children with disabilities are already living on the razor edge of poverty. Paying for medical care, school fees and even food was difficult before the pandemic, but this year, it felt impossible for too many of the families we serve.

Because you chose to put the love of Jesus into action, more than 1.8 million kids have hope and are living healthier, happier lives!

1,831,806
vulnerable children
and their families
given hope and healing

23
local programs
supported

\$34.5M
life-changing
resources
mobilized

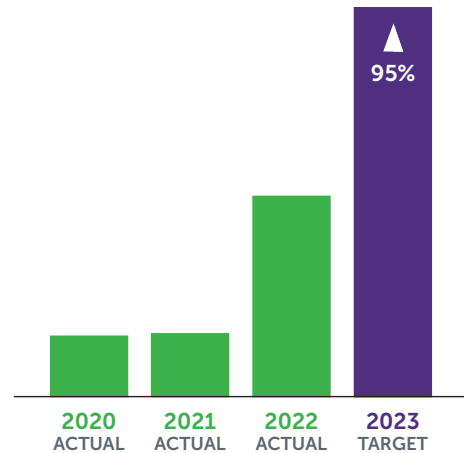
Here's how your donations became hope and healing for 1.8 million children and their families, trapped in poverty and disability.

Child Health



Last year, you gave 973,636 children the gift of health through disability-preventing care, enabling medical treatment and rehabilitation plans.

Because of your support, children won't lose their sight to preventable eye infections, kids received life-changing surgery and healing medical care and even more children received physiotherapy to strengthen muscles and balance. More children can achieve their full potential!



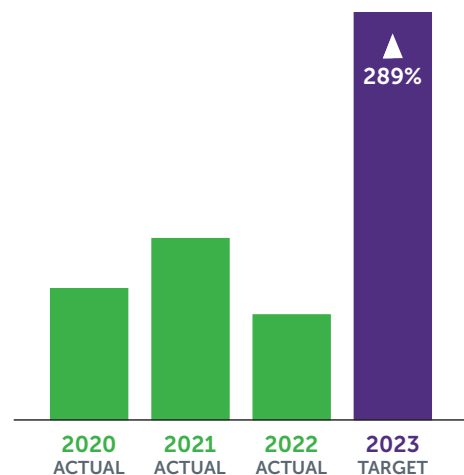
We have program plans to reach 1.9 million children with health care in FY23. The increase is mainly due to nutrition education and disability prevention through a new mass media approach.

Family Livelihood



Last year, you gave 207,515 children a brighter future through the support you gave to their moms, dads, grandparents.

Because of your support, parents received medical care through life-changing surgeries, medical exams and consultations to improve their health so they could better provide for their kids. You made sure they received vocational support and training so they could put food on the table and send their children to school – helping their kids reach their full potential.



We have program plans to provide family support that will benefit 807,267 children with disability and at risk of disability. The increase is mainly due to Caregiver Services around disabilities sensitization and nutrition training being expanded through mass media.

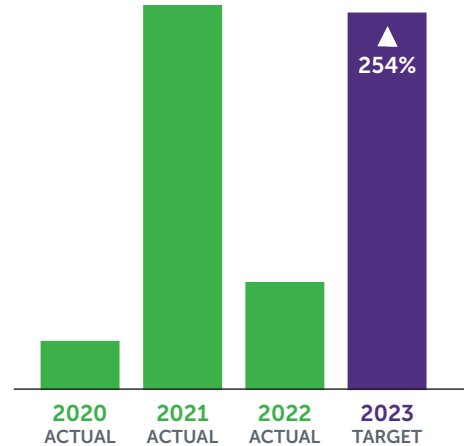
Child Education



Last year, you gave 26,229 children access to education to reach their full potential!

Because of you, children with disabilities can attend schools, and they received educational services so they can learn and grow alongside their peers. Through school clubs that you made possible, kids also learned more about hygiene and how to prevent infections like blinding trachoma.

Our target in FY23 is to provide education support to 92,960 kids. The increase is driven largely by disability-inclusive programming through “Ubongo Kids” children’s TV.



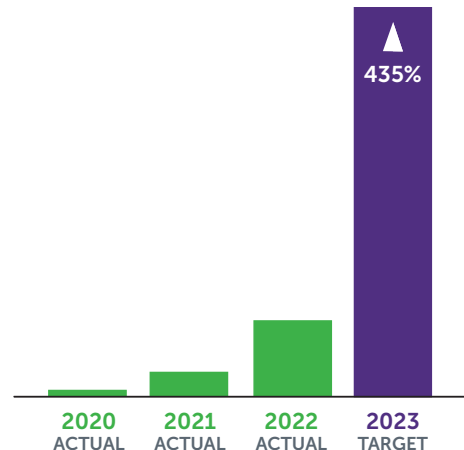
Social Attitudes



Last year, you gave 409,937 children and families knowledge and understanding, to fight the stigma of disability in communities.

Too often, disability is misunderstood, and children with disabilities are shunned and ignored. Because of your support friends, families and communities learned that disability isn’t what defines a child. And they learned how to better advocate for kids with disabilities.

Our programs in FY23 aim to change negative attitudes about disability for 2.2 million kids and families, mainly through family and community training around disability sensitization through mass media.



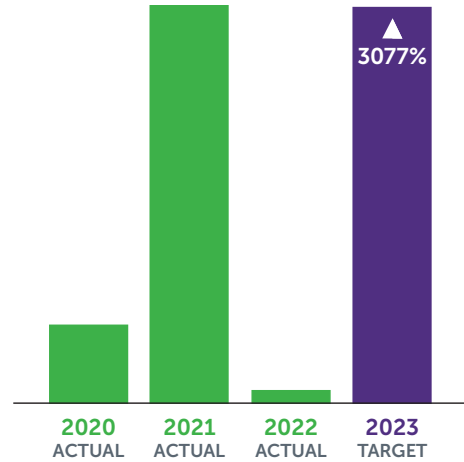
Self-Value



Last year, you gave 2,655 children access to heart-healing play and extracurricular activities.

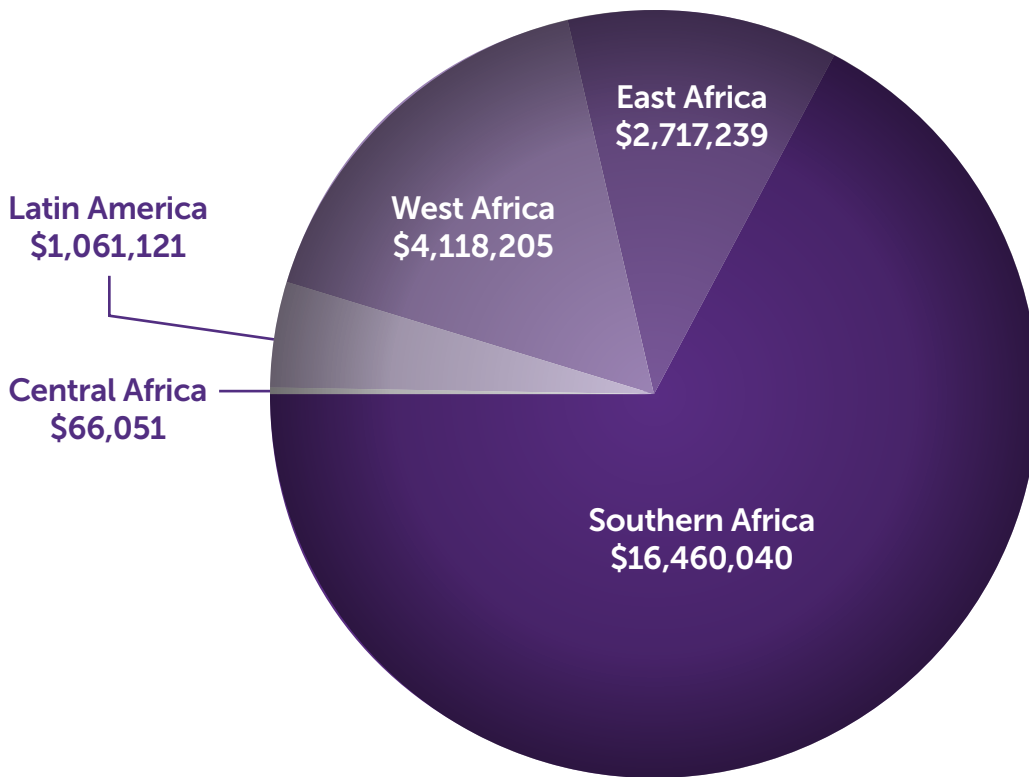
Because of your generosity and support, children with disabilities are gaining confidence, forming friendships and playing with their peers. And thanks to you, we piloted our first resilience program groups to help kids with disabilities realize they are worthy of love and have great potential.

We aim to improve self value in the lives of 84,345 children with disability, largely through "Ubongo Kids" TV programming.



Program Allocation by Region

PROGRAM INVESTMENT BY REGION FY 2022



Hope and Healing International is committed to serving the most vulnerable children in the world – those living with disabilities in the poorest communities of the world. We aim to allocate 80% of our program resources in countries that rank in the lowest third of the Multi-dimensional Poverty Index (MPI). The remaining 20% allows us to support model programs in countries ranking in the middle third of the MPI and/or to support programs that target pockets of deep poverty in communities in mid-ranking countries.

Our geographic focus is sub-Saharan Africa.

Countries

In FY22, Hope and Healing International supported local, community-based programming in 12 countries around the world.

Over the last 5 years, we have narrowed our geographic reach in order to accomplish long-term change in young clients’ lives through more robust and holistic programming.

Last year we had partners in:

- | | | | |
|----------|-----------|------------------|----------|
| Burundi | Cameroon | Dem Rep of Congo | Eswatini |
| Ethiopia | Guatemala | Kenya | Malawi |
| Tanzania | Uganda | Zambia | Zimbabwe |

Cash and Non-cash Resources

Hope and Healing International is committed to driving long-term health, happiness and survival for children with disabilities living in the world's poorest communities. We believe that we accomplish this impact through dedicated, skilled local partners that we equip with both cash and non-cash resources.

Supporters from coast-to-coast support us with cash donations in a variety of ways – through monthly gifts, single gifts, multi-year investments and legacy gifts.

Hope and Healing chooses to use the term “Non-cash Resource” rather than “Gift in Kind” because we believe that these donated medical items should be demand-driven (rather than supply-driven). That is to say, we need to source the medical equipment and supplies requested by our front-line partners. These goods need to be used and reported on just as accountably as cash.

In 2022, supporters allowed us to ship a total of \$16.2 million of essential medical equipment and supplies to our trusted medical partners in Eswatini, Cameroon, Malawi, Zambia and Zimbabwe.

We sent over \$3.4 million worth of medication and vitamins; \$7.4 million of medical consumables like PPE, needles/syringes, gloves, gowns, filters; and \$1.3 million worth of hospital beds, bassinets, diagnostic equipment, surgical supplies.

We sent 2,382 orthopaedic, prosthetic and assistive devices like walkers, wheelchairs and crutches. And we provided our eyecare partners with more than 10,351 optical aids, such as eye shields and reading glasses.

87% of the non-cash medical and nutritional goods sourced by our Partnership Development Team and sent to partners in FY22 were **new** and direct from the manufacturer. The majority of these fall into the following categories:

- Medications
- Food
- Medical Consumables (Face Shields, Masks, Isolation Gowns, Vacuum Drainage Bottles, etc.)
- Orthotic Devices and Eyeglasses
- Hospital Beds
- Office Supplies

The 13% of gently used items include specialized equipment like ventilators and surgical equipment. These goods are high value and in great demand by our partners.

RESOURCE GENERATION IN THE PANDEMIC – LESSONS LEARNED:

- Assuming donors can't give, and pulling back on fundraising activities is a self-fulfilling prophecy. Asking respectfully, even in tough times, gives donors a chance to choose hope.

- Having a broad base of donors and a diversified marketing strategy helps to recession-proof revenue. It also appears to be a good strategy to mitigate against the economic uncertainty of a pandemic.
- The opportunistic nature of non-cash donations allows us to respond more nimbly to emerging and urgent crises. We've been able to source and use non-cash resources to directly respond to pandemic challenges. (e.g. PPE and hospital beds, supplementary food)
- We've learned that we tend to be optimistic budgeters. We are making a concerted effort to back out unexpected, unrepeatable outlier donations from our trending and projections.

"I would like to thank Jill, Meagan, Mark and the rest of the Hope and Healing team who helped make this incredible trip to Zambia a reality. It allowed my colleague and I to not only witness first-handedly the heart-breaking medical conditions endured by the people living in remote communities in Africa but also to be inspired by the remarkable efforts and dedication showcased by the local health practitioners and the staff of the partner organization CHAZ. There was no better way to demonstrate the tremendous impact made by your wonderful organization. This trip solidified our desire to continue supporting Hope and Healing International in delivering your mission for years to come."

– Anthony Zhao, President of CANADAMASQ

CANADAMASQ donated more than \$5 million worth of PPE to Hope and Healing frontline partners.

COVID-19 Specific Programming

When COVID-19 became a threat to our work in 2020 and 2021, we and our partners took immediate steps to meet the critical basic health needs of children living in poverty with disability. We know that children with disabilities are at greater risk in any crisis, and the pandemic is no exception.

Early on, one of the most pressing needs we heard from our client families was for food. With workplaces closed in many areas, families who were previously living on the edge of survival had no means to provide for their children.

Through the support of donors, 2,600 vulnerable families received beans, rice, oil, grains and greens in 2020. In 2021, we sent an additional \$1 million worth of nutrition-packed, supplementary dried food to families in need. And in 2022, we sent \$2.3 million of supplementary food.

With governments around the world focussing their healthcare resources on fighting the pandemic, we have struggled with our partners to get the PPE, medicines and equipment to keep our life-saving, pain-stopping surgeries and medical services up and running.

Thanks to supporters, in 2022, we were able to send \$3.4 million of medicines and vitamins to our trusted partners, and \$7.4 million of hospital consumables, including more than 4 million top quality facemasks for staff and patients.

With your support, over the past three years, our partners have educated more than 96,000 children and families in COVID-19 prevention and management.

LESSONS LEARNED IN THE PANDEMIC:

- Our target population has been forced into even deeper poverty as a result of the pandemic and the economic fallout of the pandemic.
- Teamwork and collaboration are essential to the success of emergency plans in pandemic-related situations.
- Around the world, the most vulnerable are not prioritized, including children and parents with disabilities. We need to continue to raise awareness around this need, with governments and other non-governmental organizations.
- Plans need to be in place before a crisis strikes. This includes resource allocation, staff deployment and risk management plans.

Canadian Program, Education, Spiritual Growth, Advocacy

Hope and Healing commits approximately 10% of our program budget to changing hearts and minds here in Canada. We work to change government policy, striving to convince Global Affairs Canada that they need to add disability as a cross-cutting theme to all their funded development programs, whether through Hope and Healing or through other non-governmental organizations. Without disability as a cross-cutting theme, international development programs, including the government's Feminist International Assistance Program, will miss the poorest, most vulnerable and marginalized 20% of the target population.

We also believe that educating Canadians on the dignity, potential and rights of children with disability the world over is essential to changing how Canada and the world talks, behaves, shops and gives.

Changing attitudes towards disability is even more urgent as the pandemic has driven parents and communities to make desperate choices in the face of deepened poverty, as governments have prioritized pandemic health care over the types of surgeries and rehabilitation desperately needed to stop pain and prevent long-term disability.

We believe we are giving Canadians the opportunity to be part of God's miracles of hope and healing in the world through prayer, as well as through advocacy and giving. In FY22, we invited supporters to pray with us and saw a 22% increase in prayer engagements.

Innovations: Real Needs, Real Solutions

Hope and Healing's Resilience Program

Resilience is the ability to successfully cope with adversity. It is the ability to stay strong, keep going and make the best out of whatever life throws at us. Children and teens who are resilient can use their strengths and talents to cope and recover in a positive way from problems and challenges. The good news is... resilience can be learned.

Research shows that resilience strongly relates to positive childhood development outcomes that are critical to flourishing in adulthood.

The problem is, too many children with disabilities living in low- and middle-income countries face adversity every day of their lives. Misunderstanding and wrong assumptions about disability result in these kids being excluded, neglected, teased, abused, bullied... Children with disabilities often internalize these negative attitudes, resulting in a lower self-image, reduced future aspirations, strained social relationships and ultimately a negative self-concept.

In 2018, Hope and Healing International conducted research with children with disabilities living in Tanzania, Ethiopia, Malawi and Guatemala to determine the main areas of adversity they encounter. The research concluded that children with disabilities struggle in particular with:

1. Their physical appearance and maintaining a positive body image
2. Envisioning a bright future
3. Developing meaningful friendships
4. Being able to actively participate in their families and in their communities.

Over the last 2 years, we've taken the best of the research in early childhood development and child psychology, and we've adapted it to address the common heart pains we've heard from children caught in the cycle of poverty and disability. We've developed a 9-module curriculum that has been vetted by local educators and social work practitioners, ensuring culturally appropriate educational materials.

In FY22, we piloted our program in two locations in Uganda. And we've conducted an initial evaluation (pre, mid and post). Initial results are extremely encouraging and promising.

Question	Baseline % Yes	Endpoint % Yes	% Change
I feel positively about my body.	34%	94%	60%
I am proud of who I am.	44%	95%	51%
I feel comfortable asking for help whenever I need it.	34%	85%	51%
I recognize that I have many talents and abilities.	45%	95%	51%
I know what to do if someone is bullying or teasing me because of my disability.	37%	80%	43%
I feel comfortable spending time with others.	51%	89%	38%
When life is hard, I remain hopeful that things will get better.	54%	91%	37%
I do not find it difficult to make friends.	44%	79%	35%
I do not believe that my disability makes me cursed.	50%	85%	35%
I believe that my disability does not make me any less capable than people without disabilities.	53%	86%	34%
I know that my ideas and opinions are important.	61%	92%	31%
I know that I have a lot to contribute to my family and my community.	59%	89%	30%
I know that I am valuable and special.	57%	85%	28%
I am hopeful and excited to see what the future holds.	58%	85%	26%
I know what I want to be when I grow up.	65%	89%	24%
I know that I can do anything if I try hard enough.	70%	88%	18%
I want to give back and help my family and my community.	74%	90%	16%

In FY23, we will conduct a 6-month evaluation of our first pilot. We will also conduct a small follow-up program, again coupling it with the already amazing medical work our supporters are funding in Uganda – healing bodies and hearts.

WHAT WE'RE LEARNING:

1. The mental health damage done by years of stigma and exclusion leaves too many kids unable to advocate for themselves at home, in the community, at school, at church.
2. A 2-month program is difficult to fit into existing systems. We need to balance a highly effective course with the cost and system constraints of partners.

Ubongo

Ubongo is Africa's leading edutainment company. They create fun, localized and multi-platform educational media that reaches millions of families through accessible technologies. Their programs significantly improve school readiness and learning outcomes for kids and also promote social and behavioural change for kids, caregivers and educators. Ubongo is reaching 24.6 million households in 41 countries on the continent of Africa.

Hope and Healing is partnering with Ubongo to develop a series of four shows for children aged 7-14 (Ubongo Kids). These shows will feature storylines and characters that foster a better understanding of disability and inclusive resilience skills, as well as the rights and potential of children with different kinds of disability.

The first show aired on July 17, 2021. Throughout FY22, the pandemic delayed production on 3 more scheduled shows, bumping their release into Fiscal Year 2023.

3D Printing of Prosthetics and Orthotics

Approximately 30 million people living in resource-poor countries require mobility devices, but on average only 1 in 10 get access to them. The World Health Organization (WHO) estimates that there is a shortage of 40,000 trained orthopaedic clinicians in resource-poor countries and that it will take 50+ years to train additional clinicians at the current rate.

Traditional manual methods of producing prosthetics and orthotics in orthopaedic workshops in low-income countries are time-consuming, taking a week or more for production and fitting a patient. Travel costs and lost income during the 1-2 weeks' clinic stay is a significant barrier to parents bringing their children for prosthetics. Children requiring a prosthetic will need a new prosthetic socket every year or more often as they grow. Having to replace the prosthetic socket every year is beyond the reach of many families.

Our solution is to make the existing and up-and-coming orthopaedic technicians more efficient and able to produce high quality prosthetics and orthotics. We're working with a number of partners in both the highly custom prosthetic space, and in the mass production of less customized orthotics.

CHALLENGES:

1. Despite wonderful donor support to fund proof of concept and clinical trials, we have not been able to land funding for our next early adopter phase, though we made it to the MacArthur 100&Change top 12 applicants.
2. Despite positive trials and pilots of the 3D Technology, we've observed a resistance to change in most orthopaedic workshops, especially those serving the poorest populations.
3. The resource drain and travel restriction of the pandemic have delayed adoption and implementation of 3D PrintAbility solution.

NEXT STEPS:

1. We are currently in negotiations with a Canadian healthcare partner to form a for-profit company that will attract profit-minded investors. We believe this model will better fund the expensive Research & Development required to take the software to the next level. Our partner agreement will ensure the rights to use the software improvements in our programs.
2. We have initiated a test with a Kenya-based 3D printing hub, to take the burden of manufacturing from the shoulders and budgets of our partners. Through this approach, we're able to produce orthotics at about half the cost of traditional methods.

Impact Numbers – Children whose lives were improved in FY 2022

* Result was significantly impacted by COVID-19
 ** Formula adjusted for more accurate client counting
 *** Not included in Direct Client Count

		2020	2021	2022	2023 TARGET
TOTAL CLIENTS		679,260	1,087,022	1,831,806	5,075,120
CHILD HEALTH	Children whose quality of life improved through health care	277,878	277,882	973,636	1,897,768
Prevention for Children	Children receiving blindness- and disability-preventing services	132,492	114,844	904,319	
**	Children able to wash eyes, hands & faces with clean water	8,481	3,960	32,968	

☼ / **	Kids using safe, clean, accessible, school-based latrines	1,725	663	6,400	
☼	Kids learning about sight-saving, trachoma-fighting Eye Health	330	6,617	14,800	
☼	Children experiencing better health, nutrition and community participation due to parents receiving training	4,730	49,369	746,126	
	Children receiving other disability prevention services	50,396	0	16,471	
☼	Children receiving sight-saving SAFE strategy (Subset of total population receiving trachoma-fighting SAFE)	66,830	54,235	87,554	
Medical care for Children	Children whose lives were improved through medical & surgical treatment	131,691	139,809	64,754	
☼	Children receiving life-improving medical treatment, in-patient care	42,849	23,494	4,636	
	Children with life-changing, ability-restoring positive surgical outcomes	3,003	2,367	2,338	
☼	Children receiving disability-preventing treatment, out-patient care	85,839	113,948	57,780	

Rehabilitation for Children	Children whose lives were improved through rehabilitative services	13,695	23,229	4,563	
☼ / **	Children with increased functionality as a result of Physiotherapy, Occupational Therapy and other Rehabilitation services	12,266	20,063	3,026	
	Children with increased functionality & mobility due to assistive devices	1,265	3,000	1,089	
	Children with improved vision due to eyeglasses and other optical assistive devices	164	166	448	
CHILD EDUCATION	Children whose quality of life improved through education supports	11,670	94,799	26,229	92,960
Accessible Infrastructure	Children whose education improved through access to school buildings and facilities	3,233	4,877	6,400	
**	Children who were able to access school because of accessibility improvements	1,508	4,214	0	
**	Children able to attend school because they were able to access safe, clean, accessible school latrines	1,725	663	6,400	

Learning Support	Children whose lives were improved through inclusive learning support	1,337	81,000	18,219	
☼	Children receiving individual learning plans & home-based educational programming	1,337	81,000	18,219	
Teacher Training	Children whose lives were improved through more supportive teachers	7,100	8,922	1,610	
**	Children receiving disability inclusive education through trained teachers	7,100	8,922	1,610	
FAMILY LIVELIHOOD	Children whose lives were improved through increased household income	260,875	360,128	207,515	807,267
Family Medical Services	Kids who benefitted from a caregivers medical treatment	204,264	275,620	124,385	
☼	Children whose parents received full trachoma-preventing SAFE strategy	66,830	57,757	29,185	
☼	Children whose parents received disability-preventing screening	30,439	19,206	20,874	
	Children whose parents were given access to clean water	16,800	5,500	10,722	
	Children whose parents received sight-restoring surgery	3,711	2,089	2,210	
	Children whose parents received mobility & function-restoring surgery	1,558	3,051	20	

	Children whose parents received non-surgical medical care	85,525	186,013	59,165	
	Children whose parents received assistive devices to improve functionality & mobility	959	2,004	2,209	
Caregiver Services	Kids who were surrounded by life improving supports at home	14,789	56,384	47,900	
⚙️ / **	Children experiencing better health and happiness as a result of parents receiving nutrition, health and disability rights training	14,751	56,384	47,820	
	Children of families receiving a safe, dry, disaster-resistant house	38	167	80	
Vocational Support	Children whose parents can better provide food, medical care and education	41,822	28,124	35,230	
	Children whose household income increased through agriculture support, training, inputs	4,281	3,074	609	
	Children whose household income increased through livestock – sheep, goats, poultry – and training	308	1,026	1,644	
	Children whose household income increased by vocational training & equipping for tailoring, bricklaying, retail, as well as financial literacy	2,091	5,342	805	

	Children whose household income increased through small business loans	2,285	2,377	1,880	
	Children whose household income increased by support to access government safety net programs	30,202	10,716	11,299	
	Children whose families participated in Village Economic and Social Associations (VESA)	2,655	5,589	18,993	
SOCIAL ATTITUDES	Children whose quality of life improved through community understanding & inclusion	1,397	93,773	409,937	2,192,780
	Children with disabilities experiencing more community inclusion due to disability sensitization for their parents	1,198	263	98,579	
	Children who better understand disability because of stigma reduction education	199	93,510	311,358	
⚙️ / ***	Children who better understand disability and are more willing to play with children with disabilities due to "Ubongo kids" disability inclusive educational programming	N/A	16,200,000	Not reported	

SELF-VALUE	Children who better understand their intrinsic value and potential	29,118	84,675	2,655	84,345
	Children reporting inclusion in play, sports, cultural and spiritual activities	11,188	3,113	2,514	
	Children with disabilities who see good role and relatable role models through "Ubongo Kids"	8,244	81,000	0	
⚙️ / **	Kids inclusive education programming	9,686	562	141	
INCLUSIVE HUMANITARIAN ASSISTANCE	Children and caregivers who received life-saving, disability-preventing aid	98,322	175,765	211,834	TBD - FY23 crisis specific response
⚙️	Children whose families received life-saving emergency support	98,322	175,765		
⚙️	Children and caregivers protected from COVID-19 through training, equipment & supplies from Hope and Healing			211,834	

Program Outputs

– Leading to short, mid and long-term impact

☼ Result was significantly impacted by COVID-19

		2020	2021	2022
CHILD HEALTH	Children whose quality of life improved through health care	277,878	277,882	973,636
Prevention for Children	Children receiving blindness- and disability-preventing services	132,492	114,844	904,319
	Wells constructed	16	8	15
	Springs capped	12	1	6
	Rural Pipeline System	0	0	1
☼	Latrines built	6	1	16
☼	School Clubs established	3	25	37
☼	Primary Health and Nutrition Training Sessions for Parents and Community Members	118	210	9,326
☼	Communities (Kebeles) receiving SAFE (Surgery, Antibiotics, Face-washing, Environmental Change) strategy from Hope and Healing & referral network	15	15	15
Medical care for Children	Children whose lives were improved through medical & surgical treatment	131,691	139,809	64,754
	Paediatric Surgeries Orthopaedic, Plastic (burns, clefts), Eye	3,003	2,367	2,338
	Number of paediatric consultations	128,374	116,644	93,613
	Doctors and medical professionals trained	314	414	268
Rehabilitation for Children	Children whose lives were improved through rehabilitative services	14,482	23,229	4,563
☼	# of Physio sessions/clinics	9,326	24,414	9,078
	Assistive devices – mobility	1,283	817	1,089
	Assistive devices – eyeglasses for kids	734	68	448

CHILD EDUCATION	Children whose quality of life improved through education supports	11,670	13,799	26,229
Accessible Infrastructure	Children whose education improved through access to school buildings and facilities	3,233	4,877	6,400
	Ramps/other improvements to schools	2	6	0
	Safe, clean, accessible school latrines	6	1	16
Learning Support	Children whose lives were improved through inclusive learning support	1,337	143,688	18,219
	Custom education plans and grants for tuition/material support	1,337	2,344	1,055
⚙️	"Ubongo Kids" broadcasts of disability inclusive episodes	N/A	1	N/A
Teacher Training	Children whose lives were improved through more supportive teachers	7,100	8,922	1,610
	Teachers trained in inclusive education - students served	71	315	161
FAMILY LIVELIHOOD	Children whose lives were improved through increased household income	260,875	360,128	207,515
Family Medical Services	Kids who benefitted from a caregivers medical treatment	204,264	275,620	124,385
⚙️	Communities (kebeles) receiving SAFE strategy and access to clean water	15	15	15
	Adult surgeries	5,269	5,140	2,230
	Eye	3,711	2,089	2,210
	Orthopaedics & Plastics	1,558	3,051	20
	Adult assistive devices distributed	959	2,004	2,209
⚙️	Adult medical consultations	45,650	162,620	80,039
	Number of containers of medical goods shipped to partners	37	32	39
Caregiver Services	Kids who were surrounded by life improving supports at home	14,789	56,384	47,900
⚙️	Home-based health & nutrition trainings conducted	118	783	1,540
	New houses built/refurbished	38	36	17
⚙️	Training sessions in disability rights, inclusive development conducted	72	545	68

Vocational Support	Children whose parents can better provide food, medical care and education	41,822	28,124	35,230
	Agriculture Training sessions + equipment distributions	4,281	3,074	609
	Livestock – sheep, goats, poultry – distributed	924	3,618	4,935
	Training/equipping sessions – tailoring, bricklaying, retail, financial literacy, other	2,091	5,342	805
	Small business loans granted	2,285	2,377	100
	# of government safety net program applications	30,202	10,716	2,404
	Village Economic and Social Associations (VESA) established	159	159	299
SOCIAL ATTITUDES	Children whose quality of life improved through community understanding & inclusion	12,585	96,886	409,937
	Community leaders trained in disability sensitization	1,198	263	636
	# of children attending inclusive play, sports, cultural and spiritual activities	Not reported	3,113	50,280
	Disability sensitization and child safeguarding training sessions	322	577	299
☼	“Ubongo Kids” show viewership per aired program: child inclusive edutainment programming	N/A	Pre and post production only	16.2M
SELF VALUE	Children who better understand their intrinsic value and potential	29,118	146,675	2,655
☼	Number of “Ubongo Kids” show in broadcast circulation	N/A	Pre and post production only	1
	Number of Resilience workshops for kids with disabilities	N/A	115	48
	Other psycho social support workshops for children with disabilities	72	Not reported	Not reported

INCLUSIVE HUMANITARIAN ASSISTANCE	Children and caregivers who received life-saving, disability-preventing aid	98,322	175,765	211,834
☼	Life-saving emergency food/hygiene packages distributed	1,220	562	4,020,840
☼	Equipment and supplies to manage COVID-19 within medical partners	N/A	91,926	4,255,831
	Hospital Beds		466	681
	Ventilators		2	10
	Face masks		86,458	4,254,300
	Curve respirators/filters		5,000	840
	Community leaders trained in COVID-19 Prevention & management	N/A	187	N/A

Partners Funded in FY 2022

Hope and Healing chooses to work through local hospitals, schools and community programs. This collaboration makes our work better – bringing with it local expertise, cultural appropriateness and sustainability. Many of our partnerships are tried and tested for more than 10 years.

Harvest Initiative – Burundi

Harvest Initiatives is an indigenous Burundian, legally-registered Christian non-governmental organization, founded by a team of 7 students in 2001 at the University of Burundi. What started with a small team of students is now a thriving organization with a large team planted across the country involved in church ministry and social justice issues, which include housing, food security, health, and education for every child.

Cameroon Baptist Convention Health Services (CBCHS) – Cameroon

The Cameroon Baptist Convention Health Services is a non-profit, faith-based healthcare organization that offers holistic care to all as an expression of Christian love. Their team of close to 5,000 employees – specialists, doctors, nurses, administrators, social workers and other support staff – respond to the health needs of people in both urban and rural underserved communities daily. Their services cover the entire country, with facilities in 8 of the 10 regions of Cameroon, open 24/7 to provide holistic care to all. They maintain partnerships with national and international organizations in providing care.

Programme National de Réadaptation à Base Communautaire (PNRBC) – Dem Rep of Congo

A community-based inclusive development (CBID) program in the Democratic Republic of Congo, with a focus on clubfoot identification and treatment, provision of assistive devices and early identification and intervention for childhood disability, specifically physical impairments.

Good Shepherd Hospital (GSH) – Eswatini

Located near the eastern border of Eswatini in Siteki, Good Shepherd Hospital is a 201-bed rural hospital run by the Catholic Diocese in partnership with the government. Founded in 1949, GSH is the sole hospital responsible for the health care of the Lubombo Region, making up around 1/4 of the land area of Eswatini. This catchment area is comprised of 250,000 people, predominantly from rural communities. The hospital also oversees the running of 20 rural clinics.

Services include:

Eye Clinic/Theatre, Adult and Paediatric, Laboratory, X-ray, Pharmacy, Nursing, Dietary, Community Services, Home Base Care/Palliative Care, TB treatment, College of Nursing

The Luke Commission (TLC) – Eswatini

TLC provides 40 medical services at mobile hospital outreaches as part of a comprehensive healthcare platform. This patient-centred model seeks to destigmatize delivery of HIV/AIDS care. In addition to prevention and treatment of HIV/AIDS, other services include TB treatment, cancer screening, vision care and eyeglasses, hearing screening, voluntary medical male circumcision and other services. At the fixed site Miracle Campus, TLC provides all outreach services plus emergency care.

ORDA Ethiopia – Ethiopia

ORDA is a non-profit and non-governmental organization working to empower communities and Ethiopian institutions to achieve food security, livelihoods and environmental security in Ethiopia, through integrated development programs.

1. Environment and Forest: the major sub-sectors are plantation forestry, integrated watershed, biodiversity conservation and protection, and promotion of alternative energy technologies
2. WASH and Irrigation: water supply, hygiene and sanitation (trachoma control is under this component), irrigation construction and construction of other infrastructures like bridges, culverts, health post, vet post, schools, warehouses for stocking food commodity, etc.
3. Agriculture and Disaster Risk Management: introduction and scaling up of improved technologies and inputs, livestock development, value chain, income-generating activities – which all of these focused to improved livelihoods and income of poor and vulnerable populations – nutrition and disaster risk management like early warning capacity building
4. Youth enterprise and private sector development: Youth employment creation

Association of Parents and Friends of People with Disabilities (ADISA) – Guatemala

ADISA is a non-profit, nongovernmental organization working to assist, defend and further the rights of people with disabilities in Guatemala. Their programs include:

Health care: Engaged especially in clubfoot surgical training and treatment. ADISA Ponseti Project works most closely with the orthopaedic surgery service at the national hospital in the covered departments and are supported by physical therapists.

Livelihood: Creates opportunities for families of people with disabilities living in rural communities with limited access to employment to earn a living wage and cover basic needs.

Education: Inclusive Education in regular schools and alternative educational settings at the pre-primary, primary and secondary levels.

Empowerment and Advocacy: ADISA participates in different decision-making spaces, advocating for the transversalization of the topic of disability.

Habitat for Humanity – Guatemala

Hope and Healing partners with Habitat for Humanity Canada and Guatemala to deliver safe, disaster-resistant, accessible homes to families of children with disabilities in one of the poorest regions of Guatemala. Families receive homes and livelihood support, as well as medical and rehabilitation services through this partnership.

CURE Kenya – Kenya

CURE Kenya is a 30-bed hospital, located in the Rift Valley, providing care for children suffering from a wide range of orthopaedic conditions, such as clubfoot, burn contractures, osteomyelitis, and congenital abnormalities. The hospital conducts mobile clinics to identify children in remote areas who can be treated at the hospital, and to provide follow-up care for those who have received surgery. Through the training of surgeons, nurses and healthcare professionals, CURE Kenya aims to improve the country's overall capacity to treat children born and living with disabling conditions. Their programs include:

Pediatric Orthopaedic Surgery; Surgeons' Training Program; Assistive Devices (Wheelchairs, Prosthetics and Orthotics); Physio and Occupational Therapy; Medical and Spiritual Community Outreach Programs; Disability Awareness and Advocacy.

Malawi Council for the Handicapped (MACOHA) – Malawi

MACOHA was established to ensure the inclusion of persons with disabilities in society. Their goal is that persons with disabilities understand and claim their rights to equal opportunities.

MACOHA operates in the five components of Community Based Inclusive Development, which include health, education, livelihood, social inclusion and empowerment.

Nkhoma Mission Hospital – Malawi

Nkhoma Hospital functions as a District Hospital with responsibilities for the preventive and curative health care of a defined catchment population. The 250-bed hospital provides broad outpatient and inpatient services in surgery, obstetrics, pediatrics and adult medicine. The hospital gets referrals from 9 health centres within the catchment area. Nkhoma Hospital also oversees 11 health centres beyond the catchment area.

Nkhoma Hospital Departments: Surgery (Including Endoscopy and Cystoscopy), Obstetrics & Gynaecology (including Paediatrics and Neonatal Intensive care – MNCH), Eye, Medical Education, Nursing, Community Health, Cervical Cancer Screening and Treatment, Tuberculosis and HIV care, Mental Health, Palliative Care.

Habitat for Humanity – Malawi

Hope and Healing partners with Habitat for Humanity Canada and Malawi to deliver safe, disaster-resistant, accessible homes to families of children with disabilities in two of the poorest regions of Malawi. Families receive homes and livelihood support, as well as medical and rehabilitation services through this partnership.

Christian Health Association of Malawi – CHAM

The Christian Health Association of Malawi (CHAM) is the largest non-governmental healthcare provider and the largest trainer of healthcare practitioners in Malawi. CHAM provides 37% of Malawi's healthcare services and trains up to 80% of Malawi's healthcare providers.

CHAM is a network of church-owned health facilities, hospitals and training colleges. Through its network of over 184 healthcare facilities and 11 training hospitals, CHAM has a substantial impact on the health of individuals and communities in Malawi.

Kamuzu Central Hospital (KCH) – Malawi

Kamuzu Central Hospital in Lilongwe, the capital city of Malawi, is the leading public health service referral and tertiary care facility for the central region, home to 43% of the Malawian population. It also receives referral patients from the entire country including cancer and dialysis patients. KCH conducts more than 300,000 consultations with patients annually – 45,000 of these on an in-patient basis. KCH also performs a major function in the in-service training of medical and nursing professionals. While it is designed to serve as a tertiary institution, KCH also provides primary and secondary level patient care because there is no district hospital in Lilongwe.

Comprehensive Community-Based Rehabilitation in Tanzania (CCBRT)

From its roots in small-scale community-based rehabilitation for people with disabilities, CCBRT has grown to become Tanzania's largest provider of disability and rehabilitation services. Through advocacy, training and clinical service, CCBRT strives to empower people with disabilities and their families, improve their quality of life and ensure access to medical and rehabilitative treatment. CCBRT is divided into four primary clinical service areas: 1. Ophthalmology 2. Orthopaedics & Physical Rehabilitation 3. Plastics & Reconstruction 4. Maternal & Child Health (including obstetric fistula).

In addition to these in-house clinical services, CCBRT also specialises in community-based rehabilitation and outreach and operates the CCBRT Training Academy to contribute to the capacity building of medical professionals in the country.

Ubongo – Tanzania

As Africa's leading edutainment company, Ubongo creates fun, localized and multi-platform educational media that reaches millions of families through accessible technologies. Ubongo's programs significantly improve school readiness and learning outcomes for kids, and also promote social and behavioural change for kids, caregivers and educators. Through partnership with Hope and Healing, Ubongo is producing programming that encourages disability understanding and rights, and the value of including kids with disabilities in learning and play.

Adina Foundation – Uganda

Located in Lira, Adina joined with Hope and Healing in FY22 to pilot our Resilience Program, alongside our long-time partner, CoRSU Hospital. Capitalizing on the existing referral system between these two organizations, children with disabilities benefitted from both the medical and ‘resilience’ care that they need. Aside from providing rehabilitation services and catch-up classes, Adina Foundation also provides disability advocacy works, including the creation of parent support groups.

Comprehensive Rehabilitation Services for People with Disability in Uganda (CoRSU) – Uganda

CoRSU is a private local non-governmental organization founded in 2006 and officially opened in 2009, with a mandate to prevent disability and to restore ability.

CoRSU’s services include: Orthopaedic surgery; Plastic and reconstructive surgery; Medical rehabilitation services (such as physiotherapy, speech and language therapy, occupational therapy, cerebral palsy clinics, sport medicine, play therapy); Prosthesis and orthosis services for the production of assistive devices; Clubfoot clinic; Nutrition therapy; Vesico- Vaginal Fistula (VVF) Clinic; Psychosocial services; Psychosocial support and counselling.

Chipata Central Hospital – Zambia

Chipata Central Hospital is a 120-bed facility providing medical care to 1.5 million people in Zambia.

This general hospital has a diverse combination of disciplines, including: Ophthalmology; Dental; Physiotherapy; Public Health; Surgery; Biomedical/Laboratory; Obstetrics and Gynecology; Radiology imaging; Paediatrics and child health; Mental Health Unit; Gender-Based Violence; HIV services (Diagnostic, treatment, care and support); Renal Dialysis/ Replacement Services; Outreach services (Cervical cancer screening, Gender-Based Violence, Community Rehabilitation, Dental, Eye and Mental Health).

Churches Health Association of Zambia (CHAZ) – Zambia

CHAZ is the largest non-government health provider in Zambia, with 151 member health institutions from both Catholic and Protestant denominations. The majority of these health institutions are based in rural areas. Together, these members account for over 50% of formal healthcare in rural areas and roughly 35% of healthcare nationally.

CHAZ member health facilities consist of 36 hospitals (11 of which have training schools), 89 Rural Health Centres and 32 Community-based organizations (CBO’s). Health facilities offer a range of services from general to specialized health services.

These include MCH, ART clinics, Orthopaedic services, Physiotherapy, Dentistry, Eye care services, Surgery, ENT services, Rehabilitation services, Inpatient and Out-patient, Malaria, and TB services.

Community-Based organizations offer Public Health Interventions.

St. Francis Mission Hospital – Zambia

St. Francis Mission Hospital is a 350-bed hospital located in the eastern rural part of Zambia 490km from Lusaka; the capital city of Zambia. The Hospital acts as a referral hospital for much of the Eastern Province with a population of 1,592,661 which is half of the province.

The hospital has four main departments namely Obstetrics and Gynecology, Internal Medicine, Surgery and Pediatrics.

The hospital also offers a full range of services like Laboratory, Dental, Radiology, Physiotherapy, Eye, and Cervical Cancer screening, Gender Based Violence Support Services and HIV/AIDS and ART services.

The hospital attends to over 100,000 out-patients and 20,000 in-patients per year. It also conducts over 3,500 deliveries and 7,000 operations per year.

Jairos Jiri Association (JJA) – Zimbabwe

Jairos Jiri Association is a registered local non-governmental organization (NGO) for people with disabilities. JJA rehabilitates, educates, trains and empowers more than 10,000 girls, boys, women and men with disabilities annually through its 16 centres, inclusive schools, inclusive vocational training centres and the Community Based Inclusive Development programs nationwide.

Its interventions include inclusive primary schools for students with hearing, visual, and physical impairments; hostels and homes for rehabilitation; inclusive vocational training centres for tradeable skills development; enterprise business units for entrepreneurial development; clinics; and orthopaedic workshops for improved access to health facilities.

The Jairos Jiri Association is the largest service provider to people with disabilities in Zimbabwe and in the Southern Africa Region.



forever
Christian