

Community Partners International

Summary Report 2010-2011



Photo by John Lyons

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Photo by John Lyons

Partnership for Strong Communities

Dear Friends,

After more than a decade partnering with the people of Burma to improve their health, education and environments, Foundation for the People of Burma and Planet Care/Global Health Access Program have joined forces. We can now tap the enormous potential created by merging our two organizations and uniting our complementary missions, skills, teams and philosophies.

Our new name, Community Partners International, is at the heart of who we are and what we do. We've created a unique platform by training local people to manage their own programs and connecting them with global resources and support. In Burma/Myanmar and its border regions, working through local partners is *the* most effective way (and sometimes the *only*

way) to have a significant impact. It is local people who best understand regional challenges, needs and politics; they are the ones who have earned the trust of their communities; they know how to navigate rugged terrain.

Stepping away from the traditional model of the large international non-governmental organizations is not without challenges. Imagine working in multiple languages, religions and cultures; territory with tenuous security; and spots where transport and communication are complicated by no roads, no Internet and civil conflict.

Yet our local partners remain committed to serving the most vulnerable people in places where there is little to no access to health and education. And we are committed to backing them up, letting our local partners lead while supporting them in assessing, developing and monitoring their own projects. Building leadership in this context often requires going at a slower pace, but it ultimately promotes sustainability, ownership and autonomy. That's what it's about.

Since we became Community Partners International on December 31, 2010, we've bolstered our combined administrative structure with a new accounting system, donor management system and website, and we've begun to focus on our synergies, particularly in the

areas of HIV, reproductive health and malaria control.

Our partners bring a wide range of health services to more than a million people and strengthen thousands of communities in Burma and its border regions through educational initiatives. We continue to be deeply inspired by our local partners' courage, resiliency and collaborative spirit as they create and manage resourceful and far-reaching programs.

As always, your support is key. Our donors are our backbone, and together with our partners, we are deeply appreciative of your generosity. Your contributions make a direct and powerful impact, enhancing community strength through health and education initiatives led by and for the people of Burma.

With wishes for peace and well-being,

Hal Nathan
President



Photo by Ben Brown

Community Partners International: A Local-Global Approach

CPI first met Rose* almost ten years ago, when she was part of a small team doing health outreach in northern Burma/Myanmar and began caring for sick, HIV-positive women in her own home because they had nowhere else to go. A nurse, Rose became head of the project within a year, and started developing plans to meet the region's vast community needs through monastery-based community health centers, children's homes and enhanced teacher training.

We quickly realized the enormous difference Rose could make for the people of Burma. She sees a need, listens to the community and achieves results. In the months after a devastating tsunami hit Southeast Asia in late 2004, we asked Rose to spearhead relief work in Burma's hard-hit southern region; she did the same in 2008 after Cyclone Nargis. She has

proved time and again to be a highly capable, trustworthy and dedicated partner for CPI.

In 2010, we helped Rose form her own community-based organization, and this year she won an international grant for her community development work. She now directs almost \$250,000 in funding in four project areas around the country.

She has become a leader at home and recognized for her efforts globally, traveling in Southeast Asia for a peace-building conference, and to the U.S. recently on a leadership program, where she met some of the donors who, through generous partnership with CPI, have long supported her work.

Everything we do is driven by local communities and leaders like Rose — whether it's tackling malaria for thousands of displaced villagers, building school latrines so girls have culturally acceptable facilities or training a network of local health workers to provide emergency obstetric care in conflict-affected villages.

We focus on long-term partnerships that build the capacity of community leaders and organizations to assess their own needs and resources; manage, monitor and evaluate their own projects; and seek and exchange skills and resources with others.

Using a train-the-trainer approach, our global network shares expertise in health, education, community development, finance and management — providing resources and technical support to more than 100 local organizations in Burma and along its borders. In addition to improving quality of life at home, many of our partners generate scientifically rigorous documentation to inform and influence public health and education policy locally and globally.

**Because of the sensitivities involved in working in Burma, we are not identifying Rose or her projects by name.*



Photo by John Lyons

Dr. Cynthia

In 1989, after fleeing civil strife in Burma, Dr. Cynthia Maung and a small group of students started the Mae Tao Clinic in Mae Sot, Thailand, to serve the thousands of people from Burma streaming across the border. The clinic had no supplies, no money, no one who spoke Thai, and, except for Dr. Cynthia, no staff formally trained in medicine.

Our relationship with Dr. Cynthia and the Mae Tao Clinic goes back more than a dozen years, when CPI — through the founders of Planet Care/Global Health Access Program, and Foundation for the People of Burma — began working with and learning from Dr. Cynthia and her medics. Our partnership with the clinic has included training, financial support, documentation of health statistics and giving voice to the dire need for health and education programs for the people served by the clinic and its community-based partners.

Over the years, the Mae Tao Clinic has grown into a comprehensive community health center and a hub for regional health training, with an annual caseload of 90,000 patients. The clinic has a significant reach beyond Mae Sot: More than 1,000 MTC graduates serve clinics, schools, villages, factories, camps and slums along both sides of the Thai-Burma border, and in many cases are the only sources of medical care.

Dr. Cynthia shares 7 lessons learned at: www.cpinl.org

Join Our Global Partnership

\$50 supports one child in primary school for a year, including books and fees. Two of three children can't afford to finish elementary school in Burma, leading to child exploitation and labor abuse.

\$150 allows us to conduct a two-week training in data collection and analysis for 10 local health workers. Our partners provide the only accurate health information on Burma's border populations — key to strengthening community health systems and guiding regional and international public health policy.



Photo by Prasit Phasomsap

Healthy Families = Strong Communities

We believe enhancing the skills, knowledge and resources of local health workers and leaders is the foundation for healthy, self-sufficient communities. Through our health branch, the Global Health Access Program (GHAP), Community Partners International has provided training, technical support and resources to help more than 60 local health organizations in Burma/Myanmar and its border regions develop and implement groundbreaking initiatives in reproductive and child health, malaria and infectious disease, trauma care and health systems strengthening.

Together with our partners, CPI facilitates community-led public health and clinical care for more than 1 million children, women, and men. Many of our partners work in conflict zones and with displaced and isolated communities, providing the only access to health services like clean births and emergency obstetric care, childhood immunizations and malaria prevention and treatment. Here are highlights from three of our community-led initiatives in 2010-2011.

Saving Mothers' Lives

A 27-year-old mother of three children had no access to reproductive health care until "AL," one of CPI's partner organizations, brought services to villages in her central Burma region. "I had never heard this kind of information like the importance of prenatal care, or the danger signs of pregnancy," she says. "Since last year, AL started educating the villagers on maternal care, and now I am seeking services from the mobile team regularly."

CPI's health branch, the Global Health Access Program (GHAP) brought expanded community-based maternal care to central Burma by helping our partners replicate the success of the Mobile Obstetrics Medics (MOM) Project. With our support and training, our MOM Project partners in eastern Burma established a network of more than 750 local health workers and traditional birth attendants able to provide basic and emergency obstetric care outside of a clinic setting. Because of the MOM Project, isolated and conflict-affected communities in eastern Burma gained a ten-fold increase in access to life-saving maternal services.

In central Burma more than 60,000 women, children and men in under-served rural and poor urban areas now have access — many for the first time — to iron and vitamin A supplements, key ante-and post-natal interventions, clean safe births and family planning — all provided by local health workers in their communities.

Village Based Health

"One of the mothers in my village asked me to come see her 5-year-old daughter, who had diarrhea four times in one day. I gave her Oral Rehydration Solution and showed the mother how to give ORS. I gave the patient zinc, too. After the diarrhea stopped, the mother came to me and thanked me very much. She went to tell many people in the village about how I helped her, and the villagers now follow the information too."

— Village Health Worker, eastern Burma

One of the top killers of children worldwide, diarrhea is a constant threat in Burma's isolated and conflict-affected border regions. CPI's partner, the Karen Department of Health and Welfare, manages a Village Health Worker initiative that provides in-home education and treatment of key childhood illnesses in even the most remote villages in eastern Burma. Through a train-the-trainers model, the VHW program has expanded, with 222 VHWs currently serving a population of more than 38,000. Chosen by their communities, these VHWs made more than 90,000 home visits last year, teaching about hand washing, latrines and nutrition, as well as testing and treating malaria, delivering babies, administering immunizations and first aid. In much of the region, CPI's Village Health Worker partners are the only source of health care in the community.



Photo by J. Wells

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Malaria Drug Resistance

Malaria is a top killing disease in our village. Previously we just took chloroquine without having access to test malaria. Now the village health worker in our village is open to come and test malaria 24-hours a day."

—52-year-old villager in northern Burma

In addition to having the most malaria deaths in Southeast Asia, Burma is once again — just as with the older generation anti-malarial chloroquine — emerging as an epicenter of malaria drug resistance to gold-standard artemisin-based combination therapy drugs.

When fever hits in areas of Burma that lack quality health services, villagers simply go untreated or they self-medicate, purchasing a few pills from local shops, which often sell counterfeit drugs ubiquitous in the region. Counterfeit drugs or not taking a full treatment course — beyond increasing morbidity and mortality — also threatens to create resistance to one of the last fully effective malaria therapies available.

Together with our local partners, CPI's Malaria Control Program provides access to internationally recommended prevention and treatment protocols for more than 400,000 people in Burma's under-served border and central regions — and includes coordinated efforts to address drug procurement barriers and burgeoning drug resistance, which are key to stemming death and illness from malaria worldwide.

You Can Make a Difference

\$40 treats one severely malnourished child in a therapeutic feeding program. In villages in eastern Burma, one-third of all children are malnourished.

\$115 purchases 15 family-sized long-lasting insecticide treated bed nets. Burma suffers the largest number of malaria-related deaths in Southeast Asia — even though malaria is preventable and treatable.

\$250 trains 5 birth attendants in a five-day course in Burma, equipping them with skills and resources to help save mothers' lives. Severe bleeding after giving birth is the top cause of maternal death worldwide.

\$700 supplies polio, tuberculosis, diphtheria and measles vaccinations for 100 children. Our local partners administer essential immunizations each year to 6,000 children displaced by war.

Building Community Through Education

Two-thirds of children in our project areas are forced to drop out of primary and middle school because they can't afford books and fees. Teenagers in places like remote Shan State have few options for their future because their villages don't have high schools. Yet, improving education in Burma/Myanmar goes deeper than supplying textbooks or teachers. It's about strengthening communities at their core, one student, one family at a time.

Education means a chance to find jobs, feed families, avoid abuse and build communities. That's why we partner with more than 40 local organizations to support 115,600 students, 1,200 schools and 5,200 teachers. Together with our local partners, CPI offers increased access to primary and secondary education, vocational schools and adult math and language literacy programs; technical training for teachers and school-based health workers; and support for community development leadership and projects. Here are highlights from three of our community-led initiatives* in 2010-11.



Photo by John Lyons

You Can Make a Difference

\$350 builds 5 brick latrines and an adjacent water tank. School toilets keep girls safe and comfortable, and help prevent the spread of diarrheal diseases — a top killer of children.

\$550 provides one month's salary for 20 primary school teachers. Teachers across Burma are severely underpaid and often abandon classrooms in order to feed their families.

\$2,000 builds a boarding hostel so the best and brightest can continue their education in a small regional city. Hill tribe teens — especially girls — in remote Shan State have few safe options for their future because their villages don't have high schools.

Youth Leadership

This year CPI provided intensive training and support to a new organization whose bright and energetic youth leaders focus on serving very poor children in some of the most under-served communities in central Burma. With our help, our partner organization built a strong management structure, and began working with thousands of children in ten slum-area schools, providing: training on improved teaching methods to teachers and parents; infrastructure at the schools to improve water and sanitation systems, as well as instruction for the kids in basic health and hygiene care; access for the children to books and library resources; and music and extracurricular activities to enrich students' classroom and learning experience. We started working with these dedicated young leaders during Cyclone Nargis, and we're proud of their growing impact; it demonstrates how local leadership strengthens communities from within, allowing the people of Burma to work to improve their own lives.

**Because of the sensitivities involved in working in Burma, we are not identifying specific organizations or locations.*

Changing Attitudes Changes Lives

Many parents in Burma's poorest and most remote communities assume that their kids' only future is to follow in their footsteps working in the fields, making it hard to justify using scarce income to support schooling. Boosting awareness of the value of education is the first step. For or a decade, one of CPI's local partners has trekked into isolated, conflict-affected communities in eastern Burma to host workshops and discussions to help families recognize that education leads to job opportunities, healthier lives, and skills to help avoid exploitation. CPI-supported schools are now an integral part of these communities. Families support the teachers by offering what they can — rice, chili, and other foods — and together with our local partner, we subsidize teacher salaries and provide basic schooling materials. Before the start of the 2010-11 academic year, our local partner distributed more than 150 tons of materials to hundreds of remote communities — by foot. As a result of changing community attitudes, tens of thousands of children have received a primary school education, and a path to a brighter future.



Photo by John Lyons

A Safe Education

Boarding hostels and children's homes supported by CPI and our local partners do more than give children access to schooling: They provide a safe environment to learn and grow. Many villagers in remote areas want to send their children to school in larger towns because there are no appropriate village schools nearby. When these girls and boys have no family available to care for them away from home, the dangers are myriad: forced conscription, sex trafficking, and labor exploitation are tragic realities in Burma and its border regions.

This year we were thrilled to see another group of teenagers living at CPI-supported hostels in northern Burma graduate from high school and dream of attending university. In an area of Burma where two-thirds of adults are illiterate and only 10% have attended school beyond grade four, this is a true achievement — and one that will echo beyond these bright young women and men, benefitting their families and communities.

Photo by John Lyons



www.cpintl.org

The John P. Hussman Foundation: Embracing a Larger World

“Some might ask: Why are you helping these people who are an ocean away and you don’t even know them and you’ve never met them and maybe never will?”

So says John Hussman, a philanthropist, economist and financier who has saved and changed thousands of lives along Burma/Myanmar’s borders through his generous long-term support of education and health programs run by Community Partners International’s local partners.

Through the John P. Hussman Foundation, John and his wife, Terri Hussman, last year contributed more than half a million dollars to community programs led by and for the people of Burma. They support schools that give migrant children and vulnerable youth a chance at escaping poverty, and they fund critical pilot health programs in malaria control, reproductive health, tuberculosis and lymphatic filariasis.

“For us, we go back to the idea that we’re part of a much larger world,” Hussman says. “If you put yourself in the place of any of the

children we’re helping, then it’s not so hard to help somebody you’ve never met. It takes that extra step of compassion to imagine what their life is like.”

The Hussmans’ philanthropy aims to make a dramatic difference in survival and quality of life at low per person cost. “In the U.S., you can spend a great deal of money to make someone who is relatively well-off even better-off,” Hussman says. “In developing countries, you can make a life-changing impact at a small cost.”

The Hussmans choose to work in Burma because their efforts aren’t likely to be duplicated by larger organizations or governments; because they support the vision of CPI’s Executive Director, Therese Caouette; and because they believe in CPI’s model of international aid which trains local partners to care for their own communities, share skills, and build support networks — “knowledge that doesn’t go away.”

“That goes to the core of sustainability,” Hussman says. “If you drop ex-pats in by helicopter and set up systems dependent on foreign individuals and external money to maintain them, they can vanish at the drop of a hat. . . . We’re pretty proud that we’ve helped all these schools and they’ve started talking and organizing among themselves and expanded services far beyond what we would have been able to provide.”

Growing up, Hussman says, “I just knew that serving others is the point.” Hussman earned a PhD in economics from Stanford, initially planning to advise developing countries, but becoming disillusioned because many “political systems don’t allow the freedoms and various rights that are necessary for their own citizens to prosper.”

He turned to finance as a way to serve the less fortunate. As the President of Hussman Funds, he believes his \$8 billion mutual fund company is successful *because* he uses his management income to help others.

“We’re not meant to be just vessels that accumulate the gifts we get in life,” Hussman says. “We’re meant to be channels of those gifts. My favorite prayer is the Prayer of St.

Francis: Make me a channel of your peace.”

Hussman is also deeply influenced by Buddhist leader and peace activist Thich Nhat Hanh who teaches about compassion, love and “inter-being,” the concept that “you and I aren’t separate individuals, but rather, connected by much deeper commonality.”

Terri adds, “Justice and fairness are very important to us. These kids come into a world in a time and place where none of that has been given to them. When somebody comes along side of them to help create opportunities to live safely, gain an education, and find a purpose, it prepares them to go out and make a difference with their own lives too.”

Caring for a son with special needs keeps Hussman close to home, so he may never visit Burma. But it’s not hard for him to imagine the challenges children there face, be it disease or exploitation. “What I envision in my head is a child or young person having two courses. One is that they have the ability to get an education and be self-sustaining and make choices about their own lives well into adulthood.”

The other? “They weren’t fortunate to have resources and protection placed around them when they were vulnerable,” Hussman says. “I have a hard time talking about the vulnerabilities of children and sometimes terrible outcomes... If there’s no one there to give them a hand — what happens?”



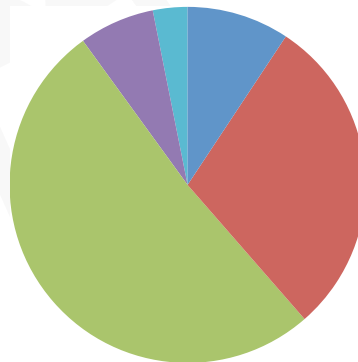
Photo courtesy of the Hussman Family

January – December 2010 Summarized Statement of Activities

Revenue

Foundation Contributions & Grants	\$2,444,707
Individual Contributions	\$800,597
Non Cash In-kind	\$25,869
Investment	\$4,499
Total	\$3,275,654

2010 Expenses by Area



Expenses

Community Development	\$329,335
Education	\$1,035,910
Health	\$1,819,310
Administration	\$242,652
Fundraising	\$111,088
Total	\$3,538,294

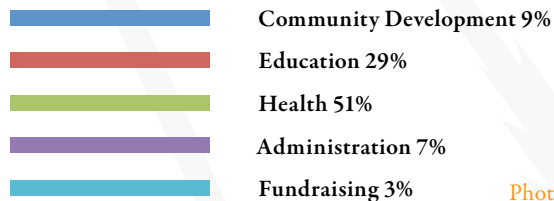


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