Annual Summary Report 2012



January - December 2012 **Summarized Statement** of Activities

Revenue

\$2,158,962 Grants Donations \$400,590 Investment \$5,687 Total \$2,565,239

Expenses* Health Education

\$1,663,110 \$830,501 Administration \$246,676 Fundraising \$98,136 Total \$2,838,423

*Does not include asset transfer to form Partners Asia. For audited financials: www.cpintl.org/financials

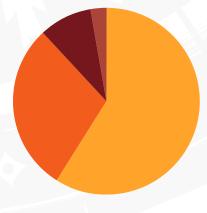
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2012 Expenses by Area



- **Health** (59%) \$1,663,100
- Education (29%) \$830,501
- Administration (9%) \$246,676
- Fundraising (3%) \$98,136

2012 Donor Honor Roll

Thanks to ALL of our supporters! Your gifts make a world of difference.

Special acknowledgments to our top level Donors:

\$25,000 +

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Community Partners International

CPI's local-global network: Building a healthy Burma / Myanmar

farming village; a health clinic in the cyclone prone Delta; a maternal health trainer in Mandalay; a backpack medic in Karen State; a doctor in Yangon; a malaria control coordinator in Kachin State; a community health director on the Thailand border; donors, family foundations, international relief organizations all committed to strengthening communities and saving lives in Burma. Together we have a direct impact, improving the health of mothers, children

Community Partners International is: a traditional birth attendant in a rice

and families. With field offices in Burma and Thailand, and 15 years' experience partnering with community organizations, CPI is uniquely positioned to increase access to essential health services — now and into the future. Through in-depth public health training, one-on-one mentoring and organi-

zational support, we build the capacity of our local partners, whose medics,

immunizations, trauma care and much more in Burma's underserved towns and remote villages. 2012 was an extraordinary year for Burma and for CPI, with success measured in

midwives and leaders provide safe births, infectious disease control, childhood

centimeters — the growing arm circumference of a toddler recovering from severe malnutrition — and in kilometers as we connected our partners from the central and ethnic minority border regions with one another, with the Myanmar Ministry of Health and with international resources. This unprecedented convergence continues to gather momentum in 2013, laying the foundation for a stronger national health system in Burma.

Help us build a healthy Burma! Donate online at www.cpintl.org



local partners providing essential health services to remote and underserved communities. Impact: Access to care for 700,000 women, men and

In 2012, CPI supported 23

children who — because of poverty or distance — would have gone without. \$500 supplies polio, measles, diphtheria and TB vaccina-

tions for 70 children.



Coordinator, Yangon "If I practiced in a hospital, I could treat a few people. By working in the public health field — developing health

curriculum, training health workers and doing prevention measures — I can affect an entire community."



Los Angeles "One of the lessons we learned from Cyclone Nargis is that the most effective organizations are small and community

based, with access to the neediest are CPI is one of the few international organizations that has invested the time and resources to develop strong local relationships."

Diagnostic Tests (RDTs) administered. Impact: Malaria causes 30% of deaths among children

29,493 Malaria Rapid

under age five in eastern Burma. The key to saving lives? Early diagnosis, treatment and prevention. **\$225** trains 15 health workers in data collection and analysis

— vital for tracking and combating infectious disease.



"With my first two children I didn't

no idea how to care for myself, or my

have any pre-delivery treatment. I had

Pyin Oo Lwin

baby. Now I do."



Ayeyarwaddy/Delta "Before the CPI trainings, I didn't know

that it's important to wear gloves when as-

sisting childbirth, and we didn't have any

gloves. Now I can provide deworming,

iron and folic acid supplements, health

education, and I deliver the baby with a

cord clamp, plastic sheet, gloves and scis-

sors. I'm more confident doing my job."



Daw Oo Monastery, Mandalay "The people are very poor and do not get health education. They easily get diar-

rhea, and there is dengue fever. They can

come here and get free treatment. In the

hills, forest, farms, there is no doctor, so

we have mobile health workers to take

health care to the villages. The tea shop

becomes the temporary clinic."

trained assistance during delivery.

90,164 home visits by village health workers.

Impact: Most death and dis-

4,396 women with

ease in Burma is preventable and treatable. Free community based care for malaria, reproductive health, diarrhea, malnutrition and more allows mothers and fathers to stay home and support their families, rather than walk hours or days to the nearest clinic — if there is one at all.

\$70 provides training and equipment for 1 traditional birth attendant.

Photos: Khun Minn Ohn, J. Wells, Thu Zar Wynn