

The logo for Community Partners International is set against a dark red background with a subtle sunburst pattern. The text is arranged in three lines: "Community" in a large, white, serif font; "Partners" in a smaller, white, serif font; and "International" in a smaller, white, serif font.

Community  
Partners  
International

# 2013 Summary Annual Report



How **your** support is changing lives in Myanmar

## Myanmar in transition: Prioritizing health care for all

As I write, monsoon rains are gathering over Southeast Asia. Myanmar's reform efforts continue, but positive, lasting change remains fragile. Economic reforms outpace improvements in health and education. Health facilities are often difficult to reach and lack well-trained staff, equipment and medicines. Despite cease-fires and peace negotiations, communities remain shattered by decades of war and eroded trust.

Alongside these challenges, a remarkable convergence of purpose is happening in Myanmar: The beginnings of a unified health system that can strengthen national reconciliation through shared health goals.

This is where Community Partners International (CPI) shines, and the reason multi-national donors like the Three Millennium Development Goal (3MDG) Fund and the Global Fund turn to us. The depth of our relationships with local Myanmar organizations gives us a unique platform to support this convergence.

We help our partners work together and share information through standardized systems in skills training, program monitoring and health data management.

The Memorandum of Understanding (MOU) we received in 2013 with the Myanmar Ministry of Health allows us to foster collaboration between community health leaders and government counterparts—something unimaginable a few years ago.

CPI has a single focus on Myanmar, and a proven approach that cultivates community health practices nested in a national system responsive to the needs of all people. We are recognized for responsible and smart use of resources, and knowledge of the national context to ensure enduring results.

There is so much more we can—and need to—accomplish for the health of Myanmar's families and communities. Our biggest barrier isn't politics or geography, it's the flexible funding that allows CPI to help our partners in the way they need it most. You supported Myanmar before it was in the news, and by doing so, you directly supported communities that were otherwise without the means to thrive. Your support remains vital today. Your confidence in our work is our backbone, and your contributions continue to make a direct and powerful impact.

Thank you,



Sandee Pyne, PhD  
Chief Executive Officer  
Community Partners International

## SAFE BIRTHS:

CPI partner the Sympathetic Doctors Group serves a poor community of about 30,000 in South Dagon, providing free bi-weekly clinics so women can access essential reproductive care: prenatal vitamins and examinations, Hepatitis B testing, health education, safe birth kits, family planning and postnatal checkups.

## HEALTHY MOMS:

After Cyclone Nargis, CPI partner Bay Thisa Darna opened a clinic on its damaged monastery grounds. CPI trains local Traditional Birth Attendants (TBAs), and supports pre and postnatal services, clean births and family planning for a population of 20,500. Says Daw That, a TBA for more than 20 years and a 5-year veteran of CPI trainings: "I now know pre-eclampsia symptoms, the value of nutrition, how and what pregnant women should eat or not, and I can help my community more."

## MALARIA:

The Three Millennium Development Goal (3MDG) Fund granted CPI \$1.5 million for our Community Leaders Eliminating Artemisinin Resistance (CLEAR) Malaria Project. This groundbreaking multi-ethnic partnership will improve access to prevention resources, early diagnosis and quality treatment for 225,000 villagers in the highest risk areas in Kachin, Kayin and Mon States.

## RURAL HEALTH:

Fifteen CPI-trained Village Health Workers (VHWs) are the front line for more than 5,000 in the hills north of Mandalay. "Women here know that if they are pregnant to come to the VHW, and they will be referred to our free clinic," says Daw Tin Tin Aye, project coordinator with CPI partner Asia Light. "VHWs also provide education on immunizations, handwashing and malaria for healthier behavior."

## EDUCATION:

The Public Health Institute (PHI) is a two-year refugee camp-based program on the Thailand-Myanmar border for young adults—many of whom have spent their entire lives in the camps, and have very limited higher education opportunities. PHI's graduates achieve double success: career skills and strengthening community health in a region with an acute shortage of services.



## EMERGENCY CARE:

CPI provides training, support and essential supplies to 20 teams of mobile, community-based medics who deliver life-saving care to 65,000 people in remote eastern Myanmar. This region remains in the grip of a protracted health crisis after decades of civil war and chronic under-investment. In many cases, these medics provide the only access to health services.



Ma Thinzar (left), Ma Zarni (right) with their Traditional Birth Attendant, Daw San (center)

## From the field: Healthy moms, healthy babies

In Myanmar, having a baby is risky. Public health services are limited and too expensive for the millions living in poverty. So mothers like Ma Thinzar and Ma Zarni rely on Traditional Birth Attendants (TBAs). For 18 years Daw San has been volunteering her time to take care of mothers and deliver babies in poor communities in Yangon.

“I trust her,” says Ma Thinzar, eight months pregnant and ready to deliver her second child with Daw San. “Because my first experience was so good, I really trust her.”

Community Partners International (CPI) trains Daw San and hundreds of other birth attendants across Myanmar to provide better care before, during and after delivery, and spot warning signs early to refer mothers to the hospital. “We practice clean delivery of the baby so TBAs are really skilled in delivery, as well as ante and post-natal care, and family planning,” says Dr. Pyae Mon Thaw, Reproductive Health Program Manager for CPI.

Maternal mortality rates are exceedingly high in Myanmar, especially in remote and conflict-affected regions, where CPI and our local partners often provide the only reproductive health care available. Prenatal services give women a far better chance of a healthy pregnancy free of complications. Access to clean delivery with trained health workers means fewer women at risk for potentially fatal post-partum hemorrhage, sepsis and infection.

CPI's support also ensures that TBAs have the supplies they need to keep mothers and babies healthy. A Clean Birthing Kit—costing just \$1.55—provides items that can be scarce in remote and resource-poor locations: Soap, plastic sheet, examining gloves, apron, gauze, cord clamps or sterile threads and string, razor blade and cotton cloth.

Daw San is so busy, she recently delivered two babies in one day—one at 12:30 p.m., one at 3 p.m. But she wants to do more. Her request? A scale and blood pressure cuff to make sure babies are gaining weight and mothers don't have hypertension.

“She is very popular, because of the way she treats the women in her community,” Dr. Pyae Mon Thaw says. “They're like her own sisters.”

Click [here](#) to see CPI's short video about Daw San and the special role of Traditional Birth Attendants in Myanmar.

## Health care for the generations

Local partnerships. Leveraging resources. That's how CPI invests in health for current and future generations in Myanmar. For just \$2.37 per person per year, CPI provides access to essential health services for more than 930,000 people in remote, under-served and conflict-affected communities throughout Myanmar. Your support has a direct and lasting impact.

## Impact 2013: A snapshot



### Maternal, Neonatal & Child Health

**663**

maternal health workers and  
Traditional Birth Attendants  
trained

**5,107**

children immunized (polio,  
measles, diphtheria, TB)

**13,813**

pregnant women received  
prenatal care

**21,834**

people received reproductive  
health services, including  
family planning

**51,599**

children received Vitamin  
A to prevent blindness and  
malnutrition

**\$25** supplies 13 doses of  
medication to prevent post-  
partum hemorrhage

**\$50** provides 30 Traditional  
Birth Attendants with clean  
birthing kits



### Infectious Disease

**606**

Village Health Workers trained  
and equipped to conduct  
malaria control activities

**4,380**

malaria cases treated

**7,000**

insecticide-treated mosquito  
nets distributed

**13,653**

malaria Rapid Diagnostic Tests  
administered

**13,910**

mosquito net retreatment  
tablets distributed

**\$250** trains and equips 5  
Village Health Workers to  
diagnose and treat malaria

**\$500** purchases 130 family-  
sized bed nets to prevent  
malaria



### Primary & Emergency Care

**21**

Public Health Institute graduates

**38**

emergency response medics  
trained in advanced trauma  
skills

**100**

village-based health education  
sessions conducted

**197**

major traumas—including  
landmine injuries—treated by  
emergency medics, with a 94%  
survival rate

**87,712**

home visits by Village Health  
Workers

**\$2,500** provides key  
medications for 20 trauma  
medic teams for 5 months

**\$5,000** supports 20  
emergency medics to receive  
advanced skills training

## Financials 2013

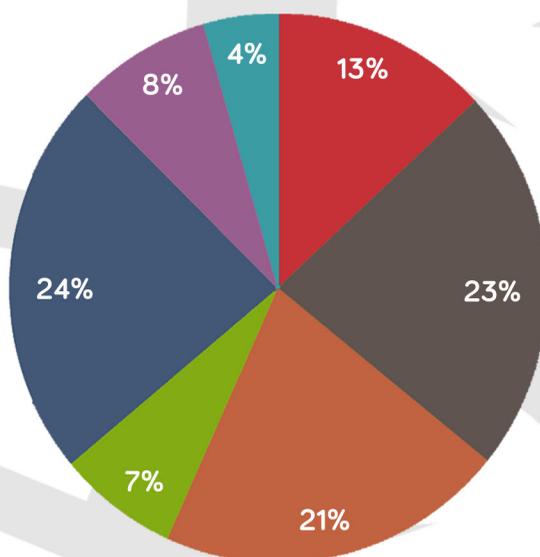
### Summarized Statement of Activities, January to December (pre-audit)

Revenues			
	Unrestricted	Restricted	Total
Individual contributions	\$ 311,779	\$ 47,997	\$ 359,776
Government, public charity and private foundation support	248,130	2,744,860	2,992,990
Investment	4,146	0	4,146
Net assets released from restrictions	2,011,750	-2,011,750	0
<b>Total Revenue</b>	<b>2,575,805</b>	<b>781,107</b>	<b>3,356,912</b>

Expenses	
Programs	\$2,339,398
Administration	217,414
Fundraising	119,050
<b>Total Expenses</b>	<b>2,675,862</b>

### Expenses by Area

- General Health
- Infectious Disease
- Health Systems Strengthening
- Maternal, Neonatal & Child Health
- Administration
- Education
- Fundraising



## 2013 Donor Honor Roll

Thank you to all who have supported us. We would particularly like to acknowledge the following:

### \$25,000+

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ADM Capital Foundation	Open Society Foundations
B. K. Kee Foundation	Orr Family Foundation
Child's Dream	Tides Foundation
Christian Aid	Three Millennium Development Goal (3MDG) Fund
GreaterGood.org	Eric Wepsic
International Rescue Committee	Whetstone Mountain Foundation
Kim & Harold Louie Family Foundation	Anonymous Donors
John D. & Catherine T. MacArthur Foundation	

### \$10,000 - \$24,999

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Rita Allen Foundation	John & Sandra McGonigle
Bob Condon & Debbie Van Dusen	Richard Merkin
Rick Hayman	Abby & Larry Pratt
Tom Lee & Grace Baek	Mary & Thomas Schmitz
Scott McDonald & Tiffany Schauer	

### \$2,500 - \$9,999

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Takayuki Abe	Dorothy Hernandez
Jim Baker	Invest In Others Charitable Foundation
Brooks Family Foundation	Paula Bock & Taosheng Kwangett
Commonwealth Cares Fund	John Mackay
Cultures of Resistance Network Foundation	Trisha Miller
Giles Family Foundation	Nammy Patel
H. & R. Block	Allison & Matt Richard
Harvard Humanitarian Initiative	Steben & Company, Inc.
	Janie & Stan Sze

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