Dear Friends,

The year 2015 will stand as a landmark in Myanmar’s history. On Sunday, November 8, the people of Myanmar waited in long queues to cast their votes in the first democratic elections to be held since 1960. This was a breathtaking moment and heralded a tectonic shift in the country’s political landscape.

The new government has a five-year term to lead desperately needed reforms. While five years may seem like a long time in politics, many thousands of children in Myanmar do not live to see their fifth birthday. They are dying of preventable and treatable diseases due to the lack of access to basic health care and health education.

Community Partners International (CPI) is uniquely placed to help transform Myanmar’s health system to serve every child, family and community.

For 18 years, CPI has worked shoulder-to-shoulder with community-based health organizations in conflict-affected, remote rural and urban poor communities that remain largely beyond the reach of the national health system.

Now we are helping to bring our community partners together with the national government for dialogue and cooperation around shared interests in health. Combining their strengths will be the key to achieving universal and equitable health care, and giving all of Myanmar’s children the chance to become tomorrow’s leaders.

CPI continues to focus on the most pressing needs on the front lines of health care in Myanmar, including malaria elimination and maternal, newborn and child health. Your support remains crucial to our work. Together we can make sure that Myanmar’s children have the chance to lead full and fulfilling lives.

Thank you for your belief in us, your generosity and compassion. We honour your commitment each day through our work with communities across Myanmar.

With deep gratitude,

Sandee Pyne, Ph.D.
Chief Executive Officer

A mother and her newborn attend a clinic in Kayin State. Image: Htoo Tay Zar/CPI
**2015 Highlights**

**Malaria Elimination**
- 68,058 people tested for malaria across 769 villages
- 4,520 people received malaria treatment
- 22,249 insecticide-treated bed nets distributed

**Maternal & Child Health**
- 711 babies delivered safely by skilled birth attendants
- 2,156 women received with pre- & post-natal care
- 3,311 parents received family planning support

**Emergency Flood Relief**
- 49,798 people in 47 villages received emergency relief
- 3,350 people offered first aid by mobile medic teams
- 35,063 people received access to safe water

**HIV/AIDS Prevention, Care & Support**
- 893 people living with HIV (PLHIV) given health support
- 200 PLHIV received monthly nutritional support
- 11,800 free condoms distributed to high HIV risk groups

**Health Systems Strengthening**
- 660 health care personnel received targeted training
- Flagship report *The Long Road To Recovery* released
- Supported national dialogue & cooperation around health
The Race Against Resistance

In the last 25 years, astonishing gains have been made against malaria through advances in prevention, diagnosis and treatment. However, in Southeast Asia, the malaria parasite is becoming increasingly resistant to the last line of anti-malaria drugs. This could reverse gains and even trigger a global malaria crisis.

In 2008, researchers identified multi-drug resistant malaria in Western Cambodia. Eastern Myanmar has now also emerged as an epicenter of resistance. The risk is that Myanmar could become the transmission gateway to Bangladesh, India and Africa.

In 2015, CPI continued to combat this threat through a pioneering project in remote regions of Southeast Myanmar. In partnership with the University of Maryland in Baltimore, CPI is using ultra sensitive gene-based testing of blood samples to identify malaria infections and measure levels of parasite drug resistance.

These advanced diagnostic tools enable CPI to deliver targeted treatment and closely monitor patients’ progress.

The combination of high-tech methods in low-resource contexts is a hallmark of CPI’s unique approach. Leveraging community relationships built over almost two decades, we are able to access hard-to-reach areas where trust has been eroded due to years of conflict.

Just four months after the first round of treatment, CPI’s follow-up diagnostic tests showed a 75% reduction in malaria in target communities. These initial results give us great hope that we can eliminate malaria in this region.

In 2015 alone, CPI and our partners tested more than 68,000 people for malaria and treated more than 4,500 confirmed cases. We will continue to work with communities across Myanmar to ensure that the scourge of malaria is eliminated once and for all.

Villagers in Kachin State collect malaria information materials and insecticide-treated bed nets.
Villagers in Tanintharyi Region, southeast Myanmar, wait to be tested for malaria.

Image: Htoo Myo Zey/CPI
Obstetrics on the Move

In 2005, many communities supported by CPI were struggling amidst the devastation wrought by decades of conflict. Moms and newborns bore the brunt of the decimation of health services and protracted displacement.

To respond to this crisis, CPI launched the Mobile Obstetric Maternal Health Worker (MOM) Project. The plan was simple - in the absence of hospitals and doctors, train and equip mobile community health workers to provide maternal and child health care, including basic emergency obstetric care.

The emphasis on mobility was crucial. The remote locations of communities meant that services needed to travel to them. Furthermore, for those displaced by conflict, the services could move with them and be sustained.

Over the next ten years, the MOM Project trained and equipped hundreds of mobile maternal health workers who provided pre- and post-natal care, as well as safe deliveries, to tens of thousands of moms and newborns in remote and conflict-affected regions of eastern and western Myanmar.

Emergency obstetric training helps health workers to spot and respond to complications during pregnancy, childbirth, and the crucial neonatal period. These skills have saved the lives of hundreds of moms and newborns over the years.

One of the many innovations launched by the project was the ‘walking blood bank’. Through this initiative, community members volunteered to have their blood pre-screened and their blood group identified. Should a mother hemorrhage during childbirth, community members could provide blood for an emergency transfusion. This was the first time this technique had been applied outside of a combat medicine context.

We are proud to celebrate ten years of extraordinary achievements by the MOM Project health workers.
“Without help, I would have died.”
Ah Mu, Yat Khu village, Kayah State

When Ah Mu suffered a miscarriage in her village in Kayah State, she experienced internal bleeding. Alongside the tragic death of her baby, her own life was in immediate danger.

Fortunately, in a nearby village there was a clinic staffed by maternal health workers trained by CPI in emergency obstetric care. Using their skills and the supplies and equipment on hand, they successfully stopped the bleeding and provided the care Ah Mu needed to make a full recovery.
Emergency Flood Relief

Thanks to your generosity, CPI was able to provide emergency relief to 46,000 people in communities in Myanmar devastated by the August and September 2015 floods.

In early August 2015, Cyclone Komen struck Myanmar unleashing torrential rains across the north and west of the country. Rivers broke their banks and dams were breached, inundating the surrounding regions with floodwaters up to 20 feet high.

Entire villages were washed away, along with livestock and crops. Roads, bridges, and other key infrastructure were destroyed or badly damaged. The floodwaters drained south into the Ayeyarwaddy Delta, leaving widespread devastation in their wake.

In total, 1.6 million people were affected by the floods, with an estimated 385,000 people displaced and 1.4 million acres of crops and farmland destroyed. While the initial death toll remained mercifully low, communities were in desperate need of emergency health care, food, water and other essential supplies.

Using our established partnerships with community organizations, CPI mobilized to support immediate relief and longer term aid efforts. We focused on the hardest hit regions – Sagaing, Chin, Rakhine, Bago and Ayeyarwaddy.

We supported floating medical teams using boats to bring first aid and emergency supplies to stricken villages. We distributed emergency shelter items, food, clean water, cooking equipment, water filters and water purification tablets. In Chin State, supplies were delivered on horseback to remote villages as regular access routes had been submerged or washed away.

We helped construct latrines, restored drinking water wells and ponds, provided furniture to schools to help them get back up and running, and supplied boat-making tools to help communities rebuild their livelihoods.
Boats disembark with medical teams and supplies bound for flood-affected villages in Ayeyarwaddy Region.

Image: Karen Baptist Convention
Hope and Healthy Choices

There are an estimated 220,000 people living with HIV (PLHIV) in Myanmar. In addition to widespread social stigma, a lack of health care access and social support mean that many are condemned to suffer in the shadows. The lack of sexual health information and services makes further infections inevitable.

Much of our work in this area during 2015 focused on PLHIV. We support our partners to provide home-based care services. Their trained staff regularly visit clients to give counsel and support to them and their families.

Counseling is an essential component of clients’ mental and physical health. It helps to build strong family support and reduce isolation and the effects of stigma.

Our partner staff ensure that PLHIV know how to access anti-retroviral treatment (provided free through the National AIDS Program) and follow up to make sure they are taking their medicine. They provide monthly nutritional support to build and maintain their clients’ health.

CPI supports PLHIV to become trained peer counselors who help recently diagnosed clients understand and come to terms with their health status. As non-judgmental peers who can truly empathise, counselors provide their clients with close support to maintain their morale and better manage their health.

We also focus on sexual health education and HIV prevention efforts, particularly for high-risk groups. Our partners are embedded in their local communities and have a unique platform to inform and influence their peers.

As traditional norms can make specific discussions about sexual health challenging, we support our partners to integrate sexual health messaging into more neutral gatherings. We supply them with contraceptives to distribute within their communities to help prevent sexually transmitted infections.

A peer counselor (left) makes a home counseling visit to a client in a suburb of Yangon. Image: HLHS
While conducting a routine blood grouping session in a village in Sagaing Region, health workers offer HIV/AIDS education and prevention advice.

Image: SSSG
As Myanmar enters a new era, the country has an unprecedented opportunity to transform a healthcare system decimated by decades of under-investment and conflict.

CPI is committed to strengthening the Myanmar health system at all levels, from training and equipping community-based health workers in remote villages to supporting dialogue and cooperation between national stakeholders in health.

In 2015, we supported the production of a key report, ‘The Long Road to Recovery’, detailing community health systems in eastern Myanmar and the health status and challenges of communities in that region.

The report, which drew from surveys of 456,786 people in 64 townships, represents the most extensive community-led health research carried out in Myanmar.

Building on our strong relationships with stakeholders across the Myanmar health sector, CPI supported cooperation around health between the Government of Myanmar and community-based health organizations. As broader peace negotiations continue, there is a genuine possibility for gradual convergence between these parallel health systems centered around the shared goal of achieving universal health coverage.

In July, CPI attended the first ever Myanmar Health Forum in Naypyitaw and presented our pioneering work with our partners.

In September, CPI organized a forum in Yangon, ‘Obstetrics On The Move’, attended by both community and government representatives to jointly discuss innovative, low-resource maternal and child health services in remote settings.

CPI provided extensive training opportunities, technical, financial and logistical support to strengthen our partners as they continued to deliver lifesaving health services to underserved communities.
2015 Financial Summary (Pre-Audit)

**Revenues**
- Governments: $4,288,836 (71.73%)
- Public Charities: $532,206 (8.9%)
- Private Foundations: $541,858 (9.06%)
- Individual Contributions: $239,512 (4.01%)
- In Kind Contributions: $376,276 (6.29%)
- Investments/Other: $305 (0.01%)

**Total Revenues:** $5,978,994

**Expenditure**
- Administration: $246,282 (7.02%)
- Fundraising: $230,179 (6.56%)
- Programs: $3,030,745 (86.41%)
- Other Sub-grants: $127,551 (4.21%)

**Total Expenditure:** $3,507,206

**Change in net assets:** $2,471,788

**Net assets at beginning of year:** $3,419,054

**Total net assets at end of year:** $5,890,842

**About CPI**

Founded by U.S. doctors in 1998, Community Partners International (CPI) is a registered U.S. nonprofit that supports lifesaving health care for communities throughout Myanmar (Burma). We focus on underserved populations - those affected by conflict and violence, those in remote rural and hard-to-reach contexts, and those marginalized through poverty and social exclusion - to ensure that they can access the care they need to survive and thrive. We support community-led solutions, driven by local needs and priorities, designed for the context, and sustainable for the long term. Our vision is for every person in Myanmar to have equitable and affordable access to quality health care.

**Offices/Staff Locations**
- U.S. - Berkeley / Myanmar - Yangon, Dawei, Hpa-an, Mandalay, Myawaddy, Myitkyina / Thailand - Mae Sot

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Community Partners International is a registered 501(c)(3) nonprofit organization in the United States.
Tax ID/EIN #94-3375666
Thank You

We would like to express our heartfelt thanks to all who supported us in 2015. In particular, we would like to acknowledge:

VISIONARIES
Global Fund to Fight AIDS, TB & Malaria
International Rescue Committee
B. K. Kee Foundation
Jill & Joel Lervold
Kim & Harold Louie Family Foundation
John D. & Catherine T. MacArthur Foundation
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In Memoriam:
Dr. Thomas D. Schmitz (1936 - 2016), distinguished friend of Community Partners International.

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Ani Brochin
Burmese Christian Community Church, San Jose, CA
Ron & Colleen Carter
Dorothy & James Currie
Kelley & Peter Currie
Edward Dayton Family Fund
ExxonMobil Foundation

This image: View of mountains and valleys around CPI project areas in Kachin State.
Image: Htoo Tay Zar/CPI

Cover Image: A young girl in Pyar Thar Chaung village, Tanintharyi Region, receives malaria treatment.
Image: Htoo Tay Zar/CPI

BENEFACTORS
Rita Allen Foundation
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Joe Edmonds Family Fund
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CPI receives Charity Navigator’s highest rating for transparency and accountability

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