



VILLAGE HEALTH PARTNERSHIP

*safer motherhood in rural Ethiopia*

**2016 COMMUNITY REPORT**



## ABOUT THE VILLAGE HEALTH PARTNERSHIP

In the rural parts of Ethiopia, where we work,



as many as **1 in 10 women die** and  
**4 in 10 women suffer debilitating**  
**injuries** due to complications of  
pregnancy and childbirth.

***TOGETHER, WE ARE CHANGING THAT.***

### ***MISSION***

The Village Health Partnership (VHP) is a 501(c)(3) nonprofit organization whose mission is to prevent maternal and neonatal death in childbirth, and to treat and prevent gynecologic complications of childbirth in rural Ethiopia.

### ***VALUES***

*Human Rights:* Safer motherhood is every woman's right.

*Partnership:* All projects and programs in Ethiopia are community-based and community-driven.

*Collaboration:* Resources are scarce. VHP is open to working with organizations in the United States and Ethiopia who are committed to safer motherhood.

### ***LEADERSHIP***

Margaret "Migs" Muldrow, MD, Founder & Chair

Ruth Harada, MD, Secretary

Cindy Nicol, MA, MPP, Treasurer

Laury Bowman, JD, Assistant Secretary

Tefera Endalew Yayeh, MA, Ethiopia In-Country Director

Rachel Buck, MNM, U.S. Development Coordinator

## A MESSAGE FROM OUR FOUNDER

Dear Friends,

Partnership is one of the key values of the Village Health Partnership (VHP), after all, it is right there in our name.

To begin with, all VHP programs are community based and community driven. Working with local stakeholders we have now begun to **successfully implement programs for safer motherhood** in some of the most remote and isolated parts of Ethiopia. Word of our approach and what has been achieved has spread.

You can imagine our excitement this spring when more rural communities stepped forward requesting that we partner with them to help women in need. U.S. based organizations have also begun to reach out to us, offering to share their expertise and to collaborate with VHP and local communities to implement programs. Finally, ***because of you and your partnership with us***, VHP has had the resources to expand our reach and to continue the work that we are doing.

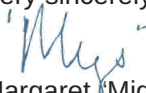
Because of your generous support, in 2015 VHP laid the ground work for future efforts, building relationships with government officials, medical providers, village leaders and women. Now in 2016 and 2017 VHP is working in partnership with local communities and other U.S. based organizations to roll out programs that involve **capacity building** and **healthcare**, including the **education** and **training** of rural healthcare providers and **treatment** and **prevention** efforts.

*Together*, we are working to ensure that as women come into health centers and hospitals for delivery, these facilities have the infrastructure and skilled medical staff to provide them with the care that they need.

As VHP rolls out programs in rural Ethiopia, the need to procure more funding to support efforts for safer motherhood only increases. This reality led the Board of Directors to hire VHP's first ever employee, Rachel Buck. Rachel is an experienced non-profit professional with a passion for international work and women's rights. Her addition to the VHP team will help us reach our fundraising goals and **continue life-saving and life-changing programs**.

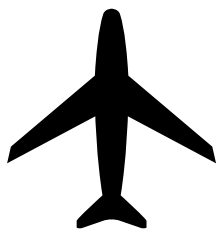
***Thank you for your ongoing support and partnership. It is only with your help that we can continue to work for safer motherhood, ultimately helping women but also preserving families and strengthening communities.***

Very sincerely,



Margaret "Migs" Muldrow, MD

## 2016 ACCOMPLISHMENTS

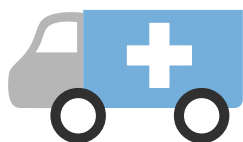


Members of the board of directors traveled to Ethiopia to work with local communities to **evaluate 13 medical facilities and programs** and to **work with local partners** to **strategize future efforts**

Expanded VHP programs to **two new regions** in Ethiopia: the Finota Selam Zone and Gamma Gofa Zone.



# 125



women served through the VHP  
Screen, Transport, and Treat (STT) program



Helping Babies Breathe, an educational curriculum authored by the **American Academy of Pediatrics**, was translated into Amharic and delivered to our in-country partners

# 78

**rural health care  
workers trained\***

\*meaning an **exponential impact** for the potential number of women served



## FUTURE PLANS

### CAPACITY BUILDING

- Partner with Waterlines, Inc. and Engineers Without Borders to insure that targeted healthcare facilities have access to clean water.
- Work to improve sanitation and hygiene at all health centers.
- Insure that rural health centers have solar lighting for labor and delivery rooms.
- Purchase and deliver needed medical equipment and supplies.
- Construct maternity waiting areas (MWAs) and rooms for labor and delivery and women's health services at key medical facilities.

### HEALTHCARE

#### *education and training*

- Translate educational material into native languages to improve the learning experience.
- Continue to train rural health care providers, building their proficiency in neonatal resuscitation and infant care, emergency obstetric care and women's health.
- Establish and run three week intensive skill building sessions for midwives already practicing in the field.
- Provide scholarships to women in the community who wish to become nurse midwives.

#### *treatment*

- Continue to screen, transport, and treat women with gynecologic complications of childbirth.

### PREVENTION

- Ultimately build capacity in health facilities, train healthcare providers and establish medical systems of care that will allow the prevention of maternal and neonatal death in childbirth and the development of gynecologic complications.





# THIS PROGRESS MADE POSSIBLE BY OUR INCREDIBLE DONORS AND PARTNERS

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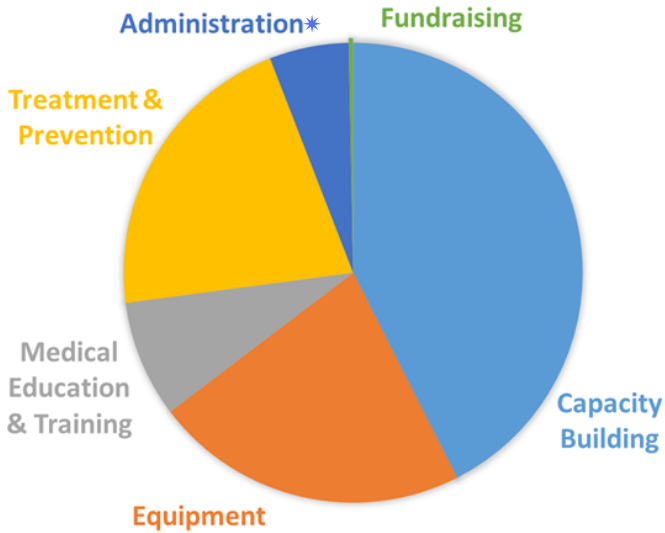
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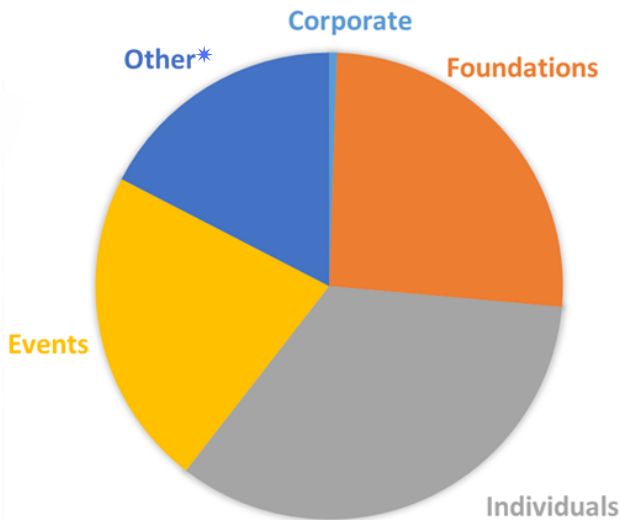


# FINANCIALS

## 2014-2016 EXPENSES TO-DATE



## 2014-2016 INCOME SOURCES TO-DATE



## CONNECT WITH US

[www.villagehealthpartnership.org](http://www.villagehealthpartnership.org)

1601 East 19th Avenue, Suite 4450  
Denver, Colorado 80218

[info@villagehealthpartnership.org](mailto:info@villagehealthpartnership.org)



\*Administration costs were provided in-kind and have been counted both as income (in "other") and expense