

ETHIOPIAID

\$1 MILLION SENT TO PROJECT PARTNERS

IMPACT REPORT







MESSAGE FROM THE CEO

I have been deeply inspired by the incredible work of our dedicated Ethiopian partners during 2022-2023. This has been a hard time for Ethiopia, with internal unrest, drought, locusts and severe food insecurity affecting millions.

Despite the challenges, our partners continue to provide life-changing and life-saving programs to women, children and communities in Ethiopia.

And throughout it all, I have been humbled by the committed and generous support of our Australian donors. An unprecedented \$1 million was sent to our partners during this financial year, and I cannot thank our donors enough for making this possible. This money has allowed vital programs to continue, and even to be expanded. Countless lives have been saved and improved thanks to you, and this momentum fills me with great hope.

I know our partners in Ethiopia are equally moved by the enduring support from Australia.

Your care assures them that they are not alone in their work and their commitment to helping the most vulnerable, and allows them to rise to the many challenges they encounter with resilience, determination and confidence.

On behalf of our partners, the people of Ethiopia, and all of us at Ethiopiaid Australia – amaseghinalehu (this means 'thank you' in Amharic, Ethiopia's primary language).

Warmest wishes,
Sharon Elliott
CEO Ethiopiaid Australia

If Countless lives have been saved and improved thanks to you, and this momentum fills me with great hope."

MESSAGE FROM THE BOARD

I am pleased to update you on Ethiopiaid Australia's recent work and the critical role your contributions have played in shaping our response to the ongoing challenges faced by the people of Ethiopia.

As a board, our primary focus remains on the governance of Ethiopiaid Australia, ensuring that we are strategically positioned to continue increasing contributions to our invaluable partners on the ground. This year, the Board has been meeting regularly to stay abreast of urgent developments in Ethiopia. Our goal is to provide our partners with the best possible support, given the dynamic and complex landscape they operate in.

The past years have been extremely challenging for Ethiopia. While the official end of the conflict in Tigray in 2022 brought relief, the aftermath continues to reverberate across many parts of the country. Internal unrest in various regions has intensified the difficulties faced by the Ethiopian people.

Skyrocketing inflation has emerged as an immense challenge, pushing the cost of basic goods to unprecedented levels and forcing many into the clutches of poverty. Moreover, the compounding factors of locust infestations, food scarcity, and disease further exacerbate the struggles faced by Ethiopians and our dedicated project partners on the ground.

In the face of these formidable challenges, your continued support has been instrumental. Your generosity has allowed us to adapt swiftly to evolving circumstances, enabling our partners to provide aid where it is needed most. Together, we are making a tangible difference in the lives of those who need it most.

As we navigate these turbulent times, the importance of sustained support cannot be overstated. Your donations empower us to be a beacon of hope for those in dire need. We are committed to maximising the impact of every donation, ensuring it reaches those who need it most, when they need it most.

On behalf of the Board, our partners in Ethiopia, and the countless lives touched by your generosity, I extend my heartfelt gratitude.

Robert Macdonald, Chair

Visit our website to view Board Member profiles.

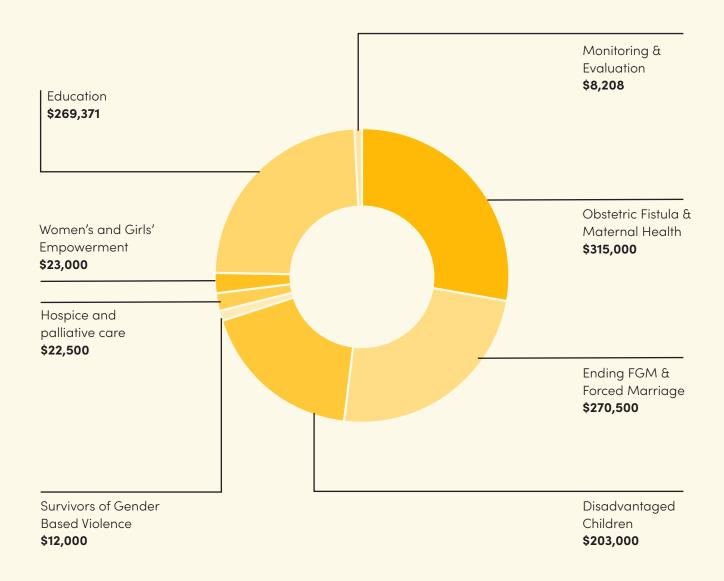


SNAPSHOT

22-23

FUNDING POSITIVE CHANGE

Thanks to your support, we sent a total of \$1,123,579 to our project partners in Ethiopia this financial year.





HIGHLIGHT REEL

- A total of 54,348 activities were performed by women extension workers in Afar to educate communities about the dangers of harmful practices such as female genital mutilation and early marriage.
- 3,991 pregnant women assisted to deliver their babies safely, and provided with pre- and postnatal care.
- **2 maternity waiting homes** renovated and equipped in Amhara Region.
- 80 traditional birth attendants trained in the Afar region.
- 424 Interns, 545 medical students, midwifery and clinical nurse students trained in management and prevention of obstetric fistula.
- A total of 2,490 students (1,367 males and 1,123 females) were provided with exercise books, pens, and pencils at the beginning of the year in Amhara region.
- 42 trafficked/runaway children reunified with families.
- 50 disadvantaged girls have been sponsored through the Fassiledes high school girls Sponsorship program to continue their education at a higher level.
- **2 girls' toilets** were built at Basso and Zanjira primary schools.
- Palliative care was delivered to **120 patients**.

THE TEAM

- 9850 wonderful supporters across Australia
- 7 project partners working in Ethiopia
- 3 full-time staff and 2 part-time staff at Ethiopiaid Australia
- 7 board members volunteering with Ethiopiaid Australia

We would like to thank the Bayside Group for providing Ethiopiaid Australia's office space and facilities, along with IT support.





YOUR IMPACT 22-23



FORCED MUTILATION & MARRIAGE

Female genital mutilation (FGM) and child marriage violate the most basic human rights and put girls' lives in danger across rural Ethiopia. Half of all girls in Ethiopia undergo female genital mutilation before their first birthday, and face the risk of bleeding to death initially and a range of serious health complications throughout their lives.

Girls in Ethiopia also face a very high risk of being married too young, which increases their chances of suffering childbirth complications, sexual and physical violence, and lack of access to education

In many parts of Ethiopia, great progress has been made in reducing the number of girls subjected to early marriage and FGM, however in rural areas, such as Afar, the risks are still extremely high. That is why our focus is on regional and rural areas, where we aim is to teach about the dangers of FGM and child marriage and put an end to these harmful traditions for good.

PROJECT PARTNERS:

Afar Pastoralist Development Association (APDA)

KEY CONTACTS:

Valerie Browning, Co-Founder and Program Director APDA



REGION:

Afar (north-east Ethiopia)





FEMALE RIGHTS: Protecting women's fundamental rights and preventing their communities from reverting to harmful customs and working with clan and religious leaders by holding discussions with relevant stakeholders, promoting awareness of gender equality and advocating for women's empowerment.

STOPPING HARMFUL PRACTICES:

Educating women, families, and communities about the dangers of harmful cultural practices, with a specific focus on female genital mutilation, and promoting awareness about its lack of religious significance.

Working towards a community where stopping FGM and early marriage will fall under clan responsibility.

YOUTH TRAINING: Enabling the younger perspectives through community gatherings and dialogues with influential figures.

MATERNAL HEALTH: Training local women as Extension Workers and Traditional Birth Attendants to improve health outcomes for rural women and empower them to enhance

YOUR IMPACT THE STATS

12,888

awareness raising activities and counselling sessions, with a focus on women's and girls' rights 54,348

total activities performed by women extension workers 2

youth (one male and one female) worked alongside each of the women extension workers assisting her to better identify the threats of harmful practices

10

literacy teachers: 2 in Kori; 2 in northern Awra and six in Dagaba are currently teaching a total of 710 students of which 41.95% are females **37**

project youth were trained to work alongside women extension workers in Gawwaani and Kori 80

traditional birth attendants were trained for 7 days

20

project women extension workers had 15 days training

5

communities where clan leadership are working with APDA to establish that any form of female genital mutilation (FGM) is against clan law as well as Islam and punishable under clan law. This is now being followed up through 100 of the most senior clan leaders in Afar Region

698

mothers were assisted to have safe deliveries

EDUCATING AWAY FROM FGM

Eysa Hagos is 54 years old and comes from Malka'l kebele, a very remote area where one traditional well supplies over 3,000 households.

Eysa says she was seen as a champion of female genital cutting and performed the procedure more times than she could ever count. As she grew older and heard what APDA was teaching, she understood that what she was doing was harming girls in many ways – some found it difficult to pass urine, some had difficultly in child-birth, and many suffered pain and poor health.

"When I thought about all the girls and women in pain because I had reduced the size of their vagina and sewn up the entry, I saw that I was actually doing a very bad and dangerous thing," Eysa said. "There was a woman from APDA who sat with me one day, she explained that FGM is really against God since it hurts and damages the body He created."

"I then decided to stop as I understood that what I had been doing was so wrong."

Now Eysa says she is educating her family and community about how FGM is endangering girls and women.

Eysa said that there are more than 50 babies and girls who have not been subjected to FGM because she convinced their families to take a stand against it.

CLAN LEADERS JOINING AGAINST FGM

Habib Guhule 'Araba is a 70-year-old senior clan leader in Dagaba, Dubte woreda. Habib explained in his community, women who performed genital cutting were highly respected. In particular, many women earned an excellent reputation by doing such a tight female genital mutilation that the husband on the marriage day could not penetrate his wife. Habib said that if the husband succeeded at penetrating his wife, it was believed that the person doing the FGM was useless. He says he remembers his wife all those years ago. She had such a strong FGM that he was unable to penetrate her. He also

remembers she was never free of urinary problems: firstly, she found it so hard to pass urine, and after childbirth, she had urinary incontinence. He said his wife had extremely poor health, and she was very hurt and frightened by their marriage.

Habib said that in that time, there was no awareness about the dangers of FGM and no treatment, so she had no choice but to suffer. Habib now thinks she had a fistula from the terrible time she had in childbirth. Habib said that people in his community believed that Islam demanded female genital cutting, and that the suffering of women was part of life.

After receiving education and training from project partner Afar Pastoralist Development Association (APDA), Habib now understands how wrong this was, and how dangerous and unnecessary any form of female cutting is. He says that now the clan leaders are discussing FGM and have come to an agreement that any person who performs FGM will be punished, in the same way that any person who injures or harms another person is punished. Habib says that he and the other clan members all swore to follow this up before God.



OBSTETRIC FISTULA

More than 9,000 women develop obstetric fistula in Ethiopia each year – an internal childbirth tear from a prolonged and obstructed labour. Fistula results in stillbirth in up to 95% of cases, leaving a woman incontinent, shunned by her community and living alone in pain and fear. It is more prevalent in rural areas where there are simply not enough maternal health services for pregnant women.

The likelihood of an obstructed birth in Ethiopia increases significantly due to FGM, child mothers and malnourishment.

Our aim is to increase access to and awareness of maternal health in order to make childbirth safer and eliminate fistula in Ethiopia.

PROJECT PARTNERS:

Healing Hands of Joy (HHOJ)

Hope of Light

Simien Mountains Mobile Medical Service (SMMMS)

KEY CONTACTS:

Meselech Seyoum, Country Director HHOJ

Dr Ambaye Michael, General Manager & Senior Fistula Surgeon, Hope of Light

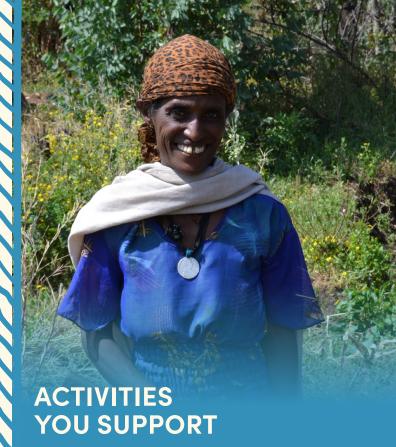
Brian Lovatt, Co-Founder SMMMS



REGION:

Gondar, Simien Mountains, Hawassa





AWARENESS, IDENTIFICATION & TREATMENT:

Identifying women living with fistula and providing free and high-quality treatment, along with transportation and complete preand post-operative care

AMBASSADORS:

Educating communities about maternal health, and breaking down the stigma surrounding fistula by training former fistula patients as Safe Motherhood Ambassadors.

TRAINING:

Providing surgical treatment and training medical professionals to manage and prevent obstetric fistula and pelvic floor disorder.

Create awareness through outreach programs and supply new dresses for treated fistula patients upon discharge.

REINTEGRATION:

Former patients are taught various skills that can help them secure employment and achieve financial independence upon reentering their community.

YOUR IMPACT THE STATS

266

patients cured from urinary and/or fecal incontinence 114

patients left the hospital wearing a new dress, symbolic of a new start to life 40

partners/intimate male family members of the trained women attended a one-day male family members' workshop

2

maternity waiting homes renovated and equipped in Amhara Region 424

interns, 545 medical students, midwifery and clinical nurse students trained in conservative management and prevention of obstetric fistula 14,387

women (15-49) provided with education in family planning

3,293

expectant Mothers had 4 antenatal care visits.

2,150

new mothers had postnatal checks within 48 hours Up to 40 Million

people received the fistulaawareness message transmitted through the mass radio transmissions

40

women received rehabilitation support and Safe Motherhood Ambassador training, which enables them to identify and help others suffering obstetric fistula in their communities 48

fistula patients attended a handcraft training program and basic reading and writing lessons during their stay at the Gondar Fistula Centre

WORKE'S STORY

Twenty-four-year-old Worke Lealina came from Telemt Woreda, Gondar. Worke never attended school and cannot read or write. From a very young age, her role was to help her mother in the house. When she reached 16, her family arranged marriage, and she married a man she had never seen before. Her husband is a farmer and is also not educated.

Worke became pregnant for the first time at age 21. During her pregnancy, she did not receive any antenatal check-ups. She was in labour at home for two long days without any progression before her family decided to take her to the hospital. By the time she reached the hospital, the baby was not moving. Tragically, it was too late to save the life of her baby and she gave birth to a stillborn child.

Two years later Worke became pregnant again. This time her labour lasted for 3 days at home. On her 4th day, her family members took her to the nearest hospital. When she reached there, the baby was not alive. She gave birth to a stillborn baby for the second time.

After her delivery, Worke noticed that she was unable to control her urine. There was no one who could support her or reassure her that she would be okay and that her condition could be treated. With this grief in her heart, she went back home.

Worke hid away at her house, isolated from the rest of her family members and living in shame because of her condition. She says that she and her family could not stand the smell of her urine, which leaked constantly. Her husband visited her regularly, but did not stay with her. One day, Worke's husband decided to take her to Debark Hospital to find out what her problem was and why she couldn't control her urine. The nurse at the Hospital explained to Worke and her husband about her obstetric fistula and reassured them that the hole in the bladder could be closed with surgery. The nurse referred them to Gondar Fistula Centre.

After six months of suffering from continuous leakage of urine day and night, Worke arrived at Gondar Fistula Centre. She was so surprised to see other women with the same kind of problem, and at the same time, she felt happy to see the cured patients waiting for their family members to go back home. She thought that she was the only person with such a problem and never believed that her pain could be treated until she met others in her situation.

Worke's surgery was uncomplicated, when the catheter was removed, she was able to control and void her urine normally. Workie was thrilled, and her husband cried with happiness.

"I was afraid that for the rest of her life, she would live dribbling her urine," says Worke's husband. "Now, she is completely changed, and she is happy. Last night, we talked about what to do when we return home."

After the fistula surgery, Worke and her husband were given information and education on what they should do during a subsequent pregnancy in order to avoid problems, and to ensure the delivery of a healthy baby.



Image: This is Worke Lealina. After removing the catheter, she sat on the chair and checked that she was cured.



CHILD EXPLOITATION AND HOMELESSNESS

Ethiopia has one of the highest orphan rates in the world. Right now, one in eight Ethiopian children have lost one or both of their parents, one-third live in poverty and about one in 17 children dies before the age of 5. Without guardians or stable homes, children and youth lack the means to stay in school. Many have nowhere to turn but the streets where they fall prey to sexual exploitation and child labour.

Girls face further threat of child trafficking; sometimes sold by their parents for money or snatched off the street for sex work.

Our aim is to equip vulnerable and orphaned children in Ethiopia for a safer, brighter future free from hunger, poverty and exploitation.

PROJECT PARTNERS:

Yenege Tesfa (Hope for Tomorrow)

Jerusalem Children & Community Development Organisation (JeCCDO)

KEY CONTACTS:

Nigisti Gebreslassie, Founder & Manager Yenege Tesfa

Mulugeta Gebru, Executive Director JeCCDO



REGION:

Gondar (north Ethiopia), Debre Berhan (east Ethiopia)





EDUCATION:

A one-month-long 'Summer Camp' program for group-home children and the Gondar street children from mid-July to mid-August 2022.

Supporting outstanding but economically weak students through sponsorship programmes and encouraging street children to learn and continue their education through mobile school and mobile library services.

HEALTH:

Supporting preschool and street children through school feeding and education programs.

Supplying vulnerable and homeless children with essential living needs, such as sanitary items, food and clothing.

Adolescent girls in the target schools are trained in menstrual hygiene management and provided with re-useable hygienic napkins.

SHELTER:

Providing orphaned and vulnerable children with a place to live in a caring and supportive group home

PEER-HELPING:

The 'Youth Dialogue' project was set up to create favourable conditions to strengthen and build up a sense of self-confidence and self-esteem, especially for 'Street Young Adults' who feel neglected, isolated, worthless, and voiceless. The Youth Dialogue project also enhances capacity building through volunteerism, and provides life skills and psychosocial training.

YOUR IMPACT THE STATS

9

former group home residents who continue to be supported by Yenege Tesfa, completed their university studies successfully 2,490

A total of 2,490 students (1,367 males and 1,123 females) were provided with exercise books, pens and pencils at the beginning of the year within the two project areas 34

group-home children (23 male & 11 female) and 65 street children (29 male & 36 female) attended the program at Fasiledes high school and Atsie Bekafa elementary school respectively

41

children attend the Day Care Centre, playing different games, singing songs, dancing and learning Kindergarten lessons **150**

pre-school children given daily school meals through the Kebele 02 School Feeding Project 130

total street children (76 male and 54 female), provided with meals five days per week through the Gondar Street Children Feeding Project and the Debark Street Children Feeding Project

161

young children (71 boys and 90 girls) supplied with daily school meals through the Azezo Kebero Meda IDP Satellite School Feeding.

300

150

fortnightly shower services provided to a total of 300 street children

trainees participated in 'Psychosocial' and 'Life skills' trainings in Gondar and

30

vulnerable female students supported with a monthly payment and a pack of sanitary napkins each through the Azezo High School Girls' Sponsorship Project

70

street children were treated to a special meal for the Ethiopian New Year celebration

84

Debark

holistic care provided to a total of 84 children (56 boys and 28 girls) who lived in 6 group-homes in Gondar 25

street children from Gondar and Debark who joined a public school due to mobile school team initiatives completed the school year with outstanding results

5,726

children benefited from the mobile library service in Gondar and 3312 in Debark

100

unaccompanied children attended training to protect themselves from abuse and exploitation

42

trafficked/runaway children reunified with families

59

total students provided with financial sponsorship, including 18 university students, 32 high school students and 9 elementary school students

YENEGE TESFA'S 'DAY CARE' PROGRAM FOR VULNERABLE CHILDREN

The Yenege Tesfa Day Care service is run for vulnerable children between 3 to 6 years old.

The children spend their days receiving care and a balanced-diet of food and clean water, uniforms, clothes shoes, and shelter. They have access to playing materials, mattresses for resting, learning and teaching materials for their 'Kindergarten Education', which develops their listening, speaking, reading and understanding skills.

The program also creates opportunities for the children's mothers to spend their day times working different activities to earn incomes for their family's better lives being apart from their children. The following activities were done within the period.

The children who 'graduate' from Day Care are assisted in enrolling into public schools. Their school supplies are provided, and they also received health checks and HIV/AIDS tests.

HOLISTIC GROUP-HOME CHILDREN'S SUPPORT

Project partner Yenege Tesfa provides a home to 84 vulnerable children across six group homes in Gondar.

Children at the group homes are provided with safe housing, food and water, clothing, health care and education. The children also receive clothing and school uniforms, school materials, text books, new bedding materials, hair cuts, and cleaning and sanitary products.

To ensure the children are given the best opportunities possible, the children are also taught home management lessons, life skills training, and psychosocial training. Extra training, such as conflict resolution were provided, so that children are better equipped to manage disagreements and misunderstandings in their personal relationships.

In order to strengthen their education, lots of different reference books and educational materials were supplied, and a system was set up where they could borrow and return the books. Students of grade 7 and above were given opportunities to attend extension classes, and study programs in each group-home were scheduled. There is also a 'big brother' or 'big sister' program in each group-home, and high performing students were assigned to help their peers on a regular basis.

The group-home staff noted clear improvements in the all-rounded development of children, and in each child's health status, body weight, height, educational standard, behaviour, attitude and social life.

During this year, all children graduated into their next class level following final examinations.

30 group-home students had scored excellent results and ranked from 1st to 10th during the first semester examinations.





WOMEN AND GIRLS' EMPOWERMENT

Women and girls face a high risk of poverty in Ethiopia due to significant barriers in the form of child marriage, gender-based violence, lack of female sanitary options in schools, and scarce maternal healthcare. Two in five girls miss out on school because they have no way to manage their menstrual hygiene and 41% of adolescent girls often miss classes during menstruation. Many women then lose the chance to earn an independent income and contribute to their community's development.

When a woman lives in poverty, her family and the next generation are far more likely to live in poverty too.

Women also bear the greatest burden of poverty in families and communities. They miss out on opportunities for education and training because of lack of access, less emphasis on female education in the traditional community and more attention on marriage and household responsibilities. All these factors combine to create a vicious cycle of poverty for millions in Ethiopia.

Our aim is to open equal education and earning opportunities so women and girls can reach their full potential and rise above gender inequality in Ethiopia.



PROJECT PARTNERS:

Yenege Tesfa (Hope for Tomorrow)

Jerusalem Children & Community Development Organisation (JeCCDO)

KEY CONTACTS:

Nigisti Gebreslassie, Founder & Manager Yenege Tesfa

Mulugeta Gebru, Executive Director JeCCDO

REGION:

Gondar, Debark, Debre Berhan





ECONOMIC EMPOWERMENT & LIVELIHOOD OPPORTUNITIES:

Fostering income-generating activities and societal development through agricultural training, vegetable seedlings, and seed distribution.

Creating agricultural demonstration sites including the Gondar Animal Farm, the Teda Bee Farm and the Debark Livestock Animals and Bee Farm Project.

SHELTER:

"Homes for Tomorrow", providing vulnerable girls with a secure and nurturing household within a traditional family setting.

SEXUAL HEALTH SERVICES:

Providing medical and reproductive support to vulnerable women and girls affected by conflict, including training on informed decision-making.

SELF-HELP GROUPS:

Providing education and resources to empower single mothers facing financial challenges to develop their savings skills and become self-sufficient in managing their finances.

DIGNITY:

Distributing reusable sanitary packs, informative booklets on puberty, and conducting workshops in schools to eliminate the stigma surrounding menstruation and ensure that all girls can continue their education without any hindrance.

YOUR IMPACT THE STATS

60

single mothers in farming areas were given 'crop production' training for three days 80

single farming mother from Debark and Gondar were given vegetable seedlings cultivated by Yenege Tesfa 12,203.5

total litres of milk produced out of five milk cows

145.5

litres of milk provided to 5 malnourished and medically prescribed children and one sick woman 97

litres of milk provided to group-home children

20

sheep (15 female and 5 male) provided to five single mothers living in rural areas as a means of income generation

40

kilograms of honey collected from the bee farm 4,823

eggs collected from Yenege Tesfa's egg farm 2

girls' toilets were built at Basso and Zanjira primary schools

50

disadvantaged girls have been sponsored through the Fassiledes high school girls Sponsorship program to complete their studies and continue their education at a higher level 14

girls currently receiving shelter, resources and trainings in Mintewab children grouphome in Gondar

MESERET'S STORY



Meseret Alemu is one of the five single mothers who received four sheep each a year and a half ago. Through her hard work, she was able to increase the number of her sheep raised to 10. She sold two sheep and collected 5,000.00 Ethiopian Birr (\$135AUD). With this income, she was able to buy school materials for her children and buy additional food for her sheep. Meseret was able to rent a better room that serves for living in, and she has also been able to start a small business selling local beer. Thanks to her new ability to earn money, her family's living conditions have improved and she sees a future for her children.

A BRIGHT FUTURE FOR SELAM



Among the 14 girls in the Mintewab group home, there is a girl named Selam Moges. She lost her parents while she was young. She had no one very close, so she started living with a distant relative. The relative was economically weak, and Selam was exposed to child labour abuse. She was working day and night beyond her age and capacity. Due to hard work, one of her legs was injured and became seriously infected. When she visited a hospital, her infected leg was amputated. Selam was offered a place at the group home, where she was given food, shelter and care, and was enrolled in grade 1 in the public school. It has been nine years since she came to the group home, and she is now completing her grade 10 studies. She is a clever student who stood 3rd in her class in her 1st-semester exam result this year. When she graduates, she is determined to go to university and then manage her own life.



GENDER-BASED VIOLENCE

Gender-based violence is one of the most systematic, widespread human rights violations in the world. In Ethiopia, half of all women have experienced physical or sexual violence at least once in their lifetime. Despite laws which outlaw it, traditional cultural values around the treatment of women are deeply entrenched and many people ignore or are simply unaware of new laws. For example, 68% agree that wifebeating can be justified and around 65% of women aged 15-49 having undergone FGM.

In Ethiopia, 23% of women have experienced physical violence. 10% have experienced sexual violence, of which 7% reported that they had experienced sexual violence in the past 12 months. Additionally, 77% of pregnant women suffered physical violence perpetuated by partners during their pregnancy. Ethiopia has signed an international convention to protect women from violence and has undertaken revisions on the criminal and family laws to reduce violence against women and girls.

However, implementation and enforcement of laws and policies have been hampered due to weak institutional capacity coupled with low awareness and engagement of community members to stand against and work closely with law enforcement bodies.

Our aim is to protect survivors of abuse, equip them for a safe, independent life, and tackle the root causes of gender-based violence in Ethiopia.



PROJECT PARTNERS:

Afar Pastoralist Development Association (APDA) Yenege Tesfa

Jerusalem Children & Community Development Organisation

KEY CONTACTS:

Nigisti Gebreslassie, Founder & Manager Yenege Tesfa Mulugeta Gebru, Executive Director JeCCDO Valerie Browning, Co-Founder and Program Director APDA

REGION:

Afar, Gondar, Debre Berhan





FORCED MARRIAGE:

Collaborating with young people to eliminate these customs.

EDUCATION:

Conducting conferences aimed at educating clan leaders about the disparity between religious beliefs and gender-based violence, while also ensuring that women and girls have access to literacy.

EMPOWERMENT:

Educational efforts aimed at promoting awareness of gender-based violence risks among boys and girls in schools.

RELIEF WORK:

Providing essential aid during times of crisis to mitigate the increased risks of gender-based violence in conflict zones.

CAPACITY BUILDING:

Targeting and equipping community members and local leaders in rural areas.

Appointing Women's Economic Empowerment Groups (to foster self-sufficiency and discourage GBV before it occurs).

YOUR IMPACT THE STATS

50

women extension workers delivered a total of 54,348 messages, demonstrations and counselling sessions to girls and women in the project target areas **710**

students are learning literacy and numeracy in Afar region. Of these students, 41.97% are females 20

women extension workers benefited from refresher training and re-planning of their activities

80

traditional birth attendants were given refresher/ upgrading training consolidating the network 14

girls currently receiving shelter, resources and trainings in Mintewab children group-home in Gondar 12

self-help groups formed for marginalised women





HOSPICE AND PALLIATIVE CARE

There is only one radiation therapy machine in the whole of Ethiopia. One machine for a population of over 110 million. To this day, awareness of hospice and palliative care is low and access is severely limited, especially outside the cities. Many people wracked with cancer or HIV don't know what's happening to them. The wealthy may go abroad for treatment, but the vast majority of people die in pain and without dignity.

Our aim is to provide medical, emotional and financial care to those who are destitute and terminally ill so that they can live out their lives with peace and dignity.

PROJECT PARTNERS:

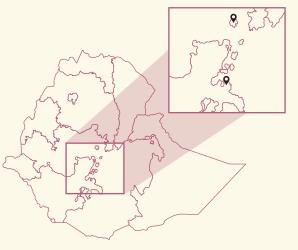
Hospice Ethiopia

KEY CONTACTS:

Ephrem Abathun, Executive Director

REGION:

Addis Ababa, Hawassa





ACTIVITIES YOU SUPPORT

PATIENT CARE: Providing services to support individuals with serious illnesses, including palliative care in the comfort of their own homes, outpatient check-ups at a clinic, and a day care centre where they can receive social and emotional support.

FAMILY SUPPORT: Support services such as counselling for grief and financial aid for family members.

MEDICAL TRAINING: Providing education and training to healthcare professionals on palliative care, pain evaluation, and managing chronic pain.

PUBLIC AWARENESS: Raising awareness about the significance of palliative care among the general public and decision-makers.

YOUR IMPACT THE STATS

50

health care professionals were trained in basic palliative care services

120

palliative care was delivered to 120 terminally ill patients

36

two rounds of Food support was provided and through this, we reached 36 patients

TRAINING PALLIATIVE CARE PROFESSIONALS

Dr Alem is the Head of
Management Reform at Jimma
University Comprehensive
Specialised Hospital, and
previously, he was the in-patient
director. Dr. Alem didn't know
much about palliative care and
how it affected people's quality
of life; however, after receiving
training from Hospice Ethiopia,
his viewpoint wholly transformed.
And he put his training in primary
palliative care services from
Hospice Ethiopia into practice.

"The palliative care training has changed my perspective, made me learn new things, and has had me visualise the impact in the long run," said Dr Alem. Dr Alem started to realise the impact of integrating palliative care services into hospitals, and worked to establish a program into the hospital in Jimma.

"I can see the difference we can make when we start providing palliative care services through our trained medical personnel," he said. "For this reason, I grew passionate about the project with Hospice Ethiopia, and they provide technical support from to establish homecare and integrate palliative care into inpatient programs."

Pallative care services have been integrated into four hospital wards at the hospital: adult

oncology, pediatric oncology, pulmonary unit, and emergency room. A palliative care home was also set up.

Dr Alem says that the most important outcome of the training from Hospice Ethiopia was the attitude shift it inspired. It impacted Dr. Alem's perspective and decision–making, which in turn significantly contributed to the success of the project.



A LIGHT IN A DARK TIME

Hirut* is a 40 year old woman living with HIV stage 4. She was diagnosed 16 years ago and has been supported by Hospice Ethiopia for over a year. She is divorced, and has one 14 year old daughter. Her husband abandoned her due to her illness, as she was unable to get out of bed for a whole year.

Before becoming ill, she worked as a councillor for people with HIV, and would help to encourage the patients to continue taking their HIV medications. Alongside her physical illness, Hirut is also suffering from depression as she

is now unable to work to support her daughter, and gets no support from her husband.

Hirut was very worried about not being able to buy food and school supplies for her daughter, and she worries if she dies, who will look after her? Her daughter also has a condition with her eyes (glaucoma) that needs medical treatment.

The team at Hospice Ethiopia are supporting Hirut with managing her pain and symptoms, as well as providing food support, psychological support, and medical treatment of distressing symptoms.

As well as providing an on-call service, the palliative care nurse visits at the beginning of each week.

Hirut says her improved health has given her joy, she's not in bed all time, and is able to take on daily tasks again: "there is a light in my dark time".

*name has been changed



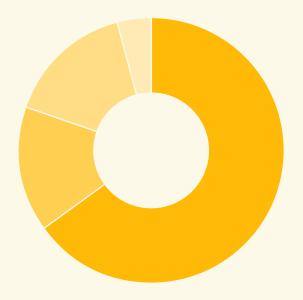
SNAPSHOT

22-23

TOTAL INCOME

Because of the generosity of **7080** supporters across Australia, we raised a total of **\$1,921,034** this financial year.

Single donations	\$1,249,710	
Monthly/regular gifts	\$297,572	
Grants	\$295,371	
Gifts left in Wills	\$78,381	
Total income 1,921,034		

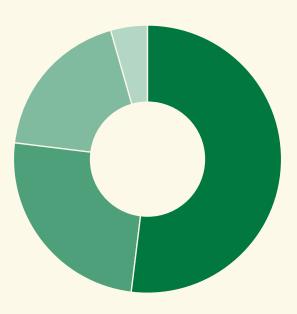


TOTAL EXPENDITURE

With just three full-time staff, pro bono office space and wholesale costs for all our fundraising, we keep our overheads low.

Payments to Ethiopian partners	\$1,123,579
Fundraising	\$537,917
Operating	\$399,793*
Administration and other costs	\$92,374

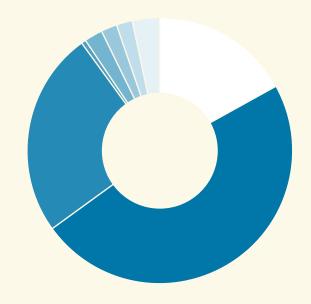
^{*}Depreciation and amortisation + Employee benefits expense (Full breakdown of payment partners on next page.)





PAYMENTS TO PROJECT PARTNERS

	JeCCDO	192,000
	APDA	539,871
	Healing Hands of Joy	280,000
	Monitoring & Evaluation	8,208
	Yenege Tesfa	23,000
	Hospice Ethiopia	22,500
	For-ethiopia	23,000
	Hope of Light	35,000
Total Payments		1,123,579



Ethiopiaid is working to a 5-year plan to recruit more donors and improve our long-term sustainability so that we can send more funds to Ethiopia on an ongoing basis. This requires investment in donor acquisition which is reflected in our fundraising cost. While we are currently operating at a strategic deficit, we closely monitor all fundraising campaigns to ensure that every dollar invested works as hard as possible and, over the long term, raises more money for our project partners in Ethiopia.

To see our audited accounts in full, visit our website: ethiopiaid.org.au/how-your-donation-is-used



TRANSFORMING LIVES IN ETHIOPIA POSITIVE CHANGE BY ETHIOPIANS, FOR ETHIOPIANS.

We're firm believers that people-powered change leads to sustainable change. That's why we've teamed up with local, grassroots organisations in Ethiopia. That means your donations go to local programs and communities, equipping people with the skills and resources to lift themselves out of poverty today and for generations to come.



