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Photo credits: Pg 11 lower right: MCpl Issa Paré, Rideau Hall
Thank you to Venice Arts for use of the images taken by the moms of mothers2mothers for The House is Small but the Welcome is Big photography project.
OUR VISION AND OUR MISSION

OUR VISION is a world without HIV infected babies, where mothers with HIV/AIDS live long and healthy lives, raising their children and caring for their families.

OUR MISSION is to create an effective, sustainable model of care that provides education and support for pregnant women and new mothers living with HIV/AIDS:

- To prevent babies from contracting HIV through mother-to-child transmission
- To keep mothers and babies living with HIV/AIDS alive and healthy by increasing their ability to access health-sustaining medical care
- To empower mothers to battle the stigma associated with HIV/AIDS in their families and their communities
Dear Friends:

mothers2mothers was born in response to a perceived gap in the services offered to pregnant women and mothers living with HIV. A basic medical model – a test and a pill – just couldn’t address the titanic issues facing a woman viewing her life as ending just as she is learning that a new life, her baby’s, is beginning.

mothers2mothers was born in response to a medical problem with social consequences; consequences that a test and a pill couldn’t treat. With education, emotional support, assistance with disclosure of HIV status to partners and family, and guidance with choices on infant feeding, a mother’s greatest needs could be met. In this way, m2m services complement the medical care provided by doctors and nurses, effectively bringing our Mentor Mothers into the health care team; effectively redefining a health service’s model of care.

mothers2mothers was born on October 5, 2001, when Mentor Mothers first met with pregnant women at Groote Schuur Hospital in Cape Town, providing care once a week to women attending my antenatal HIV clinic. Since then, we have touched hundreds of thousands of women, each with the same dream – to have a healthy baby and to live long enough and well enough to raise it. In my clinics and as I travel to our program sites I see the most incredible array of passionate, talented, committed staff now numbering in the hundreds, who share our vision to see mothers2mothers located wherever women with HIV receive care for before and after pregnancy. I see mothers with eyes full of hope, trusting that life can be better than they feared. I see our programs delivering, every day, the love and support, the education that contributes to empowerment and the opportunities to build a new life with partners and families.

In 2007, we hope to see our program extend its service across Africa. With the support of our many partners and friends, we look ahead to m2m in Rwanda, Kenya, Zambia, Malawi, Mozambique, Lesotho and Swaziland. We will also continuing to provide service in more sites and in more provinces in South Africa, our home.

So often in public health one sees a need and struggles to find a solution. mothers2mothers is that most unusual of programs, responding to a very complicated problem with a very simple solution, embracing a community’s greatest and most inexhaustible resource – its mothers. In the coming years we look forward to seeing the number of women for whom we care double and re-double. Ultimately, no need should go unmet.

Thank you for your support, for giving our mothers an opportunity to hope.

With heartfelt gratitude,

Dr. Mitch Besser
Founder, Medical Director
mothers2mothers
A WELCOME FROM CO-FOUNDERS, 
Robin Smalley, International Director 
and Gene Falk, Executive Director

Welcome to the inaugural mothers2mothers (m2m) Annual Report! This has been a very special publication to compile, as the commemoration of our first five years has prompted us to reflect upon the extraordinary growth of the organization, the friends we have made and our vision for the future.

We have come a long way since the genesis of m2m. Our earliest days in 2001 saw Mitch Besser pitching the program from an unlikely office in the backseat of his dilapidated car and tirelessly peddling bags of beads across continents. That was the year that m2m opened its first site in Cape Town. Now, only five short years later, we can enthusiastically report that m2m boasts 72 sites throughout South Africa.

2007 begins an exciting adventure for m2m. We will be accelerating our program roll-out in South Africa and initiating a significant international program as a result of substantial awards from PEPFAR (the President’s Emergency Plan for AIDS Relief) and their New Partners Initiative. Through private funding, our first international launch is already underway in Lesotho, and with operating partnerships with organizations including UNICEF, the Clinton Foundation, Partners in Health, ICAP (Columbia University) and the Catholic Medical Mission Board, planning is underway for launches in Kenya, Rwanda, Zambia, Swaziland, Ethiopia and Malawi.

We continue to see and measure the benefits of m2m as we reach upwards of 20,000 HIV positive mothers a month. Through education, and social, emotional and psychological support provided by the m2m program, these women become empowered role models in their communities. And we are also leaving an economic footprint: in our current sites, we already employ over 300 HIV positive mothers who might otherwise have no opportunity to support themselves and their families.

What started as a big idea and a tiny program has over five years become a very real and recognizable force in the world-wide campaign to protect mothers and children from the devastation that HIV/AIDS has wreaked in Africa. With great success comes great challenges, and we continually search for funding to support site expansion, strengthen organizational infrastructure, expand capacity and sustain the quality of our programs.

We are enormously grateful to everyone who has believed in m2m throughout our development. Those of us who are part of m2m experience the fulfillment of seeing our efforts borne out every day in hundreds of healthy babies. We are humbled and awed when witnessing women’s empowerment, receiving international recognition and watching our model work in far-flung settings.

To our friends and supporters, we hope that you too experience a sense of pride and accomplishment for all of the victories of the past years. Your support and encouragement have made all of this possible. In the words of Singathwa, a Mentor Mother, “I am now very proud of myself because I can stand and light the candle to the world because of empowerment I have received from mothers2mothers”.

Thank you for sharing our dream of giving mothers and children a future.

Gene Falk 
Co-Founder 
Executive Director

Robin Allinson Smalley 
Co-Founder 
International Director
One of the most crucial elements in the fight against HIV/AIDS is the prevention of mother-to-child transmission (PMTCT) of the virus – both during and after pregnancy. Medical care is beneficial, but only if accessed. Anti-retroviral (ARV) therapy and protective infant feeding practices are effective, but only if adhered to properly. Additionally, the stigma associated with HIV/AIDS infection, the lack of women’s empowerment, and the deficiency of appropriate and culturally sensitive clinical support services, even in facilities providing PMTCT services, means that many women go through their ordeal alone, confused and afraid.

**m2m** presents an innovative solution to the challenges faced by traditional PMTCT services. First, **m2m** develops a team of HIV positive mothers to advocate for and listen to newly diagnosed women. These Mentor Mothers are educated through a rigorous training program, and are consistently able and available to help navigate complex drug regimens, infant feeding decisions, and limited health care infrastructures; all of which they have come to understand through personal experience.

**m2m** also takes advantage of PMTCT enrollment as a unique opportunity to involve entire families in long-term health care. By providing consistent education and mentoring, **m2m** can improve the health not only of the woman enrolled in the programs, but also that of her entire family.

Finally, by paying Mentor Mothers, the **m2m** approach professionalizes its model of psychosocial care. Employment of mothers living with HIV/AIDS is a model that is not only effective; it is sustainable and replicable. The basic resource it draws upon - women who have themselves received PMTCT care - is self-generating and universally under-utilized. Intensive training enables these women to serve as important educators, while their personal experience makes them credible as advocates and powerful as role models. From providing pre-test counseling to leading group discussions and providing a bridge to antiretroviral support, Mentor Mothers are the heart of the mothers2mothers program.

“Seeing these strong women gave us hope. It showed us that HIV is not a death sentence, it can be a second chance.”

**mothers2mothers**

**Multiple Impact Points in PMTCT Care**

- **FIRST ANC VISIT**
- **COUNSELING & TESTING**
- **ANTE-NATAL CLINIC**
- **POSTPARTUM WARD**
- **POST-PMTCT CARE**

**TEST UPTAKE**
- **AWARENESS AND KNOWLEDGE OF HIV AND PMTCT SERVICES**
- **HEALTH OF MOTHER AND BABY**
- **REFERAL TO MEDICAL AND ARV SERVICES**
Current commitments from founders will support the roll-out of 75 sites in South Africa and 150 sites in other countries in Africa through 2009.
My name is Amanda and I fell pregnant in January of 2005. I heard about mothers2mothers training at Frere Hospital. At the time I knew that I was HIV+ and pregnant but I did not know what to do after being diagnosed at my local clinic. My recruitment to mothers2mothers helped because the information was readily available to me and other mothers. Issues of feeding choices, safe sex, disclosure were openly discussed in the support groups. We were also referred to the services within the hospital and it was easy to access all the services offered. This was where I stopped thinking about death, abortion and my baby being ill.

Due to the information I got from the support group I knew what to do and took all the necessary steps to prevent my baby from being infected. I am now a Site Coordinator for mothers2mothers who educates pregnant and new mothers about something I know has worked for me. I think this program has helped me to look after myself as well as help other women. I am happy to tell you that my baby has tested HIV negative in June 2006.

My name is Singathwa and I am a mother of one, living with HIV. I tested positive for the virus while pregnant in 2001. I thought that it was the end of the world and the end of my life. What made the situation worse was that my baby Unathi also tested positive for the virus.

Through my employment with mothers2mothers and training within the program I have acquired counseling, coping and life skills. I have also been made aware of many issues that I did not know or think about before. I did not think that my daughter can live with the virus up to 4 years because when she was born she was critically ill. Through the knowledge I got from m2m, I have learned how to look after her and most of all how to adhere to my own treatment. I am now very proud of myself because I can stand and light the candle to the world because of empowerment I have received from mothers2mothers.
**I am Phindiwe** and I tested positive when I was pregnant. I came to mothers2mothers and met other women who are also positive. I was very afraid to disclose to my husband and when I did he turned violent after hearing about my status. The Site Coordinator at Ndende Clinic helped me a lot through the home visits they did and also spoke to my husband about positive living. He has now come to good senses and we are a Happy Family. Thank you to mothers2mothers.

**My name is Vuyiswa** and my life was so miserable when I tested positive while expecting my baby. I wanted to have an abortion but at that time I met someone who invited me to come to the mothers2mothers support group. I did go and the mentors and the mothers there taught me a lot about feeding options, safe sex, and preventing my baby from being infected. Without mothers2mothers I do not know where I would be. My baby has tested HIV negative! When I was told that I cried with joy.
mothers gain the confidence & independence that carries into all areas of their lives.

**Mothers’ Creations**, a project of mothers2mothers, supports HIV/AIDS prevention and treatment adherence programs through economic empowerment. New mothers living with HIV, many of them the sole providers for their families, are trained in beading skills and design and the products of their work are sold throughout the U.S., Europe, and South Africa. Participating mothers are also trained in basic financial management skills, open bank accounts, and are taught to budget for their needs and save for their future. In its four years of operation, Mothers’ Creations has paid out more than 3.5 million Rand ($500,000) to the women in the program. Our current payroll is nearly R30,000 ($4,200) per week, covering a pool of 250 full- and part-time beaders. With 57% of all South African children subsisting on less than two-hundred rand a month ($30), this income has allowed the mothers to buy food, clothing, and medicine…and even to buy their own homes for the very first time.

Through the process of designing and selling their unique crafts, the mothers gain the confidence and independence that carries over into all areas of their lives and is essential to their survival as women living with HIV/AIDS.

**mothers2community** (m2c) utilizes the seasoned skills and talents of Mentor Mothers to provide community education and outreach on topics related to reproductive health, especially HIV/AIDS. m2c recognizes that the trained Mentor Mothers are invaluable assets in their neighborhoods and townships, becoming trusted health educators and encouraging testing and disclosure in the community.

**“HIV won’t rule you; you must rule HIV.”**
Initiated in the summer of 2004, our intern/fellowship program has provided m2m with an extraordinary group of volunteers who have helped provide the backbone for much of our early expansion efforts. Some of these enthusiastic and energetic young people have arrived independently, but many have been sponsored by two invaluable programs, Princeton-in-Africa and Williams-in-Africa. These volunteers continue to benefit from deep and meaningful work experiences that are challenging, varied, and contribute to the ongoing development and management of mothers2mothers.

“There were times when I would stop myself, just so thoroughly awed by the experiences I was having.” Steve Porter, former fellow currently a student at Harvard University Medical School

“I would have a hard time imagining a year-long experience that would stretch me more. My career as an anthropologist, a clinician, and a public health worker will no doubt be fundamentally shaped by my time with mothers2mothers.” Amy Saltzman, former fellow currently pursuing an MD/PhD in medicine and medical anthropology at Harvard.

Since the spring of 2004, mothers2mothers has been the beneficiary of the Pfizer Global Health Fellow Program. Leveraging the time provided by skilled employees within Pfizer’s business sectors has enabled m2m to build its own finance department. Pfizer employees are “loaned” for a specific period of time ranging from 3 - 6 months and during this time each has made important contributions, helping to create financial systems and determine the financial direction of the program by supporting the m2m management team.

In Xhosa, the word Mamekhaya translates to "respect for women". Participants in Mamekhaya, an important research project, chose this name because of the gift it gives to the women who join it: empowerment. Project Mamekhaya is an exciting collaboration between m2m and researchers at two U.S. medical facilities, Albert Einstein (Centers for AIDS Research, Adolescent AIDS Program) and UCLA (Center for Community Health) and the University of Cape Town (School of Child and Adolescent Health). Sponsored by the National Institute of Health, the study has adapted state-of-the-art prevention programs in the U.S. for Xhosa women in South Africa. If Mamekhaya proves successful, elements of it can be readily adapted into m2m’s current approach and curriculum.

Providing care and support to mothers living with HIV/AIDS can carry unique and painful stresses for both Mentor Mothers and Site Coordinators. The Psycho-Social Support Project was developed to care for our own caregivers. Funded by the Canadian International Development Agency (CIDA), this project provides monthly support group sessions and crisis counseling for all m2m staff, most of whom are also living with HIV/AIDS themselves.
In February, 15 women from m2m participate in a mentorship photography project with Venice Arts. The resulting exhibit was shown at the International AIDS Conference in Toronto and is currently on tour throughout the U.S.

CIDA (Canadian International Development Agency) approves a R1 million grant to initiate a Psychosocial Support for Staff project. The project began roll-out in May.

In March, U.S. First Lady Laura Bush recognizes six Site Coordinators in a public ceremony at the White House. Along with m2m senior staff, they are also feted with a private tea with Mrs. Bush in the family quarters, a press conference and a luncheon reception. The mothers spend an additional week in the nation’s capitol, as well as in Baltimore and Philadelphia as guests of the State Department’s Distinguished Visitor Program.

Partnership agreement is signed between m2m and UNICEF.

m2m is an official member of the U.S. delegation to the UN Special Session on HIV/AIDS.

m2m is invited to attend the World Economic Forum in Africa in recognition of their status as one of Schwab Foundation’s “Social Entrepreneurs of the Year.”

In July m2m gives a presentation at PEPFAR’s Conference for Partners in Durban, South Africa.

In August m2m attends the 2006 International AIDS Conference in Toronto.

m2m receives its first direct funding from the U.S. government, a PEPFAR grant that will specifically fund an additional 60 sites in three provinces in South Africa.

A U.S. congressional delegation headed by Speaker of the House Nancy Pelosi visits m2m in Cape Town.

m2m receives funding from Atlantic Philanthropies to open 15 new sites in KwaZulu Natal.
In September, Site Coordinator Gloria Ncyanwa is invited by First Lady Laura Bush to attend the White House Conference on Literacy and the Clinton Global Initiative Conference in New York. The work of m2m was highlighted at both events and Gloria rings the closing bell at the New York Stock Exchange!

In October, four new sites sponsored by Johnson & Johnson, open in the Eastern Cape.

In November, six new sites open in KwaZulu Natal, funded by Atlantic Philanthropy and Positive Moms.

Senator Barak Obama visits m2m in Khayelitsha.

In October, m2m is invited to attend the swearing-in ceremony of Ambassador Mark Dybul in Washington, D.C.

In November in Salt Lake City, m2m is awarded the Ambassadors of Caring Award by Equitable Insurance Company and the international syndicated television program, Profiles in Caring. This honor is accompanied by a $10,000 grant.

In November, m2m is one of a handful of NGOs invited to participate in UNICEF’s All Africa Representatives Meeting in Dakar, Senegal.

In November m2m receives a Global Women’s Health Award from the Albert Einstein College of Medicine of Yeshiva University in New York.

On World AIDS Day, m2m receives word that it will be receiving additional PEPFAR funding from the New Partners Initiative (NPI) to expand services throughout Kenya, Rwanda and Zambia.

In December, the Governor General of Canada, Michaëlle Jean, visits an m2m site in Cape Town.

Senator Barak Obama visits m2m in Khayelitsha

Canadian Governor General Michaëlle Jean presents flowers to m2m mothers at Michael Mupongwana Clinic in Cape Town.
## HISTORICAL OVERVIEW

### 2001
- The first **m2m** site opens in Groote Schuur Hospital, Cape Town in September.
- First Mentor Mothers are hired and trained in October.

### 2002
- Second **m2m** site opens in April at Mowbray Maternity Hospital.
- **m2m** site coordinators and mentors present at the International AIDS Conference in Barcelona.
- Mothers’ Creations program is introduced in November.
- Rap icon P Diddy visits **m2m** in Khayelitsha.
- Six sites open and running by the end of the year.

### 2003
- First office space, shared with another NGO, in Wynberg.
- Opening of first site outside the Western Cape.
- Landmark 10th site is opened.
- Bono and Beyoncé visit **m2m** site after performing at Nelson Mandela’s 46664 concert in Cape Town.
- MTV Store in Times Square, NYC, markets Mothers Creations beading projects.

### 2004
- Expansion into KwaZulu Natal.
- First real office established in Goodwood.
- **m2m** presents posters at the International AIDS Conference in Bangkok.
- **m2m** is beneficiary of Princeton-in-Africa and Pfizer Fellowship Programs.

### 2005
- Funding from Johnson & Johnson supports expansion into Eastern Cape Province.
- Partnership with Columbia’s ICAP allows **m2m** services to be combined with ARV adherence counseling in East London and the Lusikisiki district of the Eastern Cape.
- Partnership with Provincial Dept of Health of Mpumalanga promotes expansion into Mpumalanga Province.
- First international expansion marked by opening of pilot partnerships in Ethiopia and Botswana.
- First Lady Laura Bush visits **m2m** in Cape Town.
- **m2m** recognized at the TIME Magazine Health Summit.
- Kenneth Cole visits program and decides to stock all of his stores with Mothers Creations lanyards.
- Grant from Elizabeth Glaser Pediatric AIDS Foundation establishes sites in Pietermaritzburg and Piet Retief.
- **m2m** Site Coordinator addresses the Fortune Magazine Most Powerful Women Conference in Pasadena, Calif.
- **m2m** invited to attend World AIDS Day celebration at the White House.

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Mitch with Mentor Mothers Flora and Yandiswa at Mowbray in the early days.

Bono and Beyonce mingle with moms at a visit to Site B in Cape Town.

Mrs. Bush gets to know some special moms at Site B.

Site Coordinator Babalwa Mbono with Robin, addresses the Fortune Magazine Most Powerful Women Conference.
“mothers2mothers harnesses the enormous wellness and economic potential of the poorest of poor women who have the added burden of living with HIV. The sheer humanity of these women who, under the weight of their own infection and the spectre of stigmatisation, find it in their hearts to voluntarily counsel other women is an exhibition of the strength and moral courage of our species in the face of tragic events created by the AIDS pandemic.” …Dr. Fareed Abdullah, Former Deputy Director, Western Cape HIV/AIDS Programme

“PMTCT uptake has increased dramatically and previously, we at PMTCT were post counseling these mothers but our counseling was never based on our personal experiences. I reckon it was not so effective; also the time was not enough as we had other clinical duties. There were gaps in the service, i.e. babies missing Nevirapine, but now because of the presence of mentor mothers they can easily identify the babies who have not been given the syrup and rectify the situation immediately. This program has made a huge difference in the lives of pregnant women in the Eastern Cape.” …Sister Jwacu, PMTCT Nurse, Eastern Cape

“The Community Chest is proud to be associated with an organisation whose philosophy of community-based, community driven services have resulted in the poorest of the poor community having access to a variety of services well before it became the politically correct action. The organisation’s proactive intervention in service rendering and addressing developmental issues within the HIV/AIDS area has resulted it being perceived as the leader in this sector. Their innovative approach to all work is also highly regarded within the Western Cape Province and other parts of South Africa.” …Nazlie du Toit, Manager: Community Chest, Cape Town

“The program has increased the uptake of HIV testing in pregnancy. Patients now avail themselves more often for testing and treatment. Women are more positive and open about their HIV status. Overall, there is the perception of improved support for these HIV+ women.” …Dr. Bera, Obstetrics and Gynaecology, Frere Hospital, East London
**m2m Revenue & Expenditures 2005 - 2006**

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<th>REVENUE</th>
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<td>Government</td>
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<td>Nutrition</td>
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<td>Other Site Expenses (Travel, Eq, Coms, Field Oversite, Misc.)</td>
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<td>$258,511</td>
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<td><strong>$2,630,010</strong></td>
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**Summary of Financial Activities 2005-2006**

**2005**
Throughout the year, program expansion within South Africa continued at an accelerated rate, with 60 sites operational by the end of 2005. In addition, program initiatives were launched at sites in both Botswana and Ethiopia. Program revenues increased by 155% over the previous year with U.S. funding sources accounting for 70% of total revenues. Revenue growth reflected new sources of revenue in all categories of funding and increases in funding streams from existing funders. Administration costs increased by 2% in 2005 to 11% of total expenditure. This was in response to steps taken to strengthen resource management and improve systems to cater for further program expansion in 2006.

Program expenditures in the charts are not broken down by category for 2005, as categorization was revised as of 2006 in order to provide a more detailed portrait of activities.

**2006**
The year built on the trends and initiatives put in place in 2005 with continued focus on securing longer term funding commitments. In addition, improved management systems were developed to ensure that funding resources are spent even more efficiently and effectively in 2007. Revenue for the year increased by approximately 60%, with program expenditure accounting for 86% of all spending. Administration and Development costs together declined from 16% to 14% as a percent of overall expenditures.

For more details on these financial reports, or copies of audited financial reports by our independent auditor, please contact Robin Smalley, robin@m2m.org.
$100,000 AND ABOVE
Atlantic Philanthropies
Bickerstaff Family Foundation,
   Glenn and Deborah Bickerstaff
Shaun Church
Columbia University ICAP Program
Elizabeth Glaser Pediatric AIDS Foundation
Johnson & Johnson Foundation
Ed and Marie Matthews
Michael Palm Foundation
William and Judith Scheide
Starr Foundation
Wallace Global Fund,
   Scott and Christy Wallace
Anonymous

$25,000 - $99,999
ARK
Cape Town Community Chest
Hawkins Family Foundation and
   Deborah Scott Foundation on behalf of Positive Moms
Lucky Star Foundation, Judy and Steven Gluckstern
Pfizer Foundation
Tom Reagan
Waterfront Rotary, Cape Town

$10,000 - $24,999
Ackermann Foundation
Curtis McGraw Foundation
The Eli & Edythe L. Broad Foundation
Generations Family Trust, Bob and Rohini Finch
Mary V. Mochary
Nederburg
Pick ‘n Pay Foundation
Geoffery and Katherine McCormick
Profiles in Caring/Equitable Life and Casualty
Benjamin Slome Charitable Foundation, Ian and Manon Slome
Tod White

$5,000 - $9,999
Robin Beningson & Salvatore Yannotti
David and Randi Fett
Ken and Audrey Gould
Eugene Mercy
Andrew Sebba
Jeff Soref
Jonathan Tisch
Enrique and Patricia Torres

$1,000 - $4,999
Sanford and Millie Allinson
Neal Baer and Gerrie Smith
Laird H. Barber
Shirley Baskin Familian
Pamela Druckerman
Stephen Herbits
The Gonda Family Foundation
Terrell M. Griggs
Thomas and Kathryn Knox
Paul and Sue Kumleben
Howard and Susan Mandel
Alan and Judith Marash
Ian Mattoch
Linda Miller
Thomas and Catherine Nicholson
Richard and Carol Pickard
Shelley Rabin
John Rawls
Tim Savin and Gene Falk
Craig Schlossberg
Robert Shaw
Mitchell Smith
Marc Spendlove
Lee Tannen and Thomas Wells
Paul and Leslie Tillotson
Catherine Torres
Williams College
World Education Fund
Zeldin Family Foundation

$500 - $999
William and Ruth Besser
Fiduciary Trust Company, Boston
Pearl S. Drellich
Brian and Kate Folb
Roy Freeman
Jo Holzman
Gregory and Paula Lutz
Ron and Marti Montbleau
Susan Pereira
Primary Stages Theatre Company
Megan Rupp
Sophy Smallie
Andrew Stern
Kenneth Tepper
Peter Thambouraris and Demetrios Sengos
Michael Tronick and Barbara Scott
Helen Vanston
John Vlahopulos
Whitlock Family Trust
FUNDERS & FRIENDS

UNDER $500
Kevin and Linda Adeson
Agnes Aronsohn
Marc and Carole Arsenault
Wallace and Alice Alston
Girardo Alvarez
Christopher and Julie Barker
Denise Barry
John and Marcelline Baumann
Mary V. Bell
Lisa Belzburg
Nancy Berger
Anton Bestebreurtje
Marissa Black
Barbara Blake-Galeazzi
Erika Block
Kevin and B.J. Booth
Karen Bowen
Nya Bowen
Jeremiah Brantner
Jason Braswell
Janet Brav
Kimberly Brenner
Emily Brouwer
Steve Broydrick
Kathy Burgoine
Sean Burns
Elizabeth Casparian
Elizabeth Chace
James and Fleur Chandler
Thomas and Lynn Charles
Pascal Chausson
Jacques Cerat
Marlene Chiavacci
Knud and Lindsay Christiansen
Mary Clark
Stephen and Elisabeth Clark
Jeffrey Clark
Valdene Clarke
Barbara Clarkin
Barry and Linda Coffman
Benjamin Connard
Dan and Sidnie Crawford
Michael Cristal
Mark and Brenda Curran
Nancy and Steven Cutter
David and Catherine Davis
Neil and Elsie Davis
Esther Davis
Kevin Dean
Harold Denton
Annegret Dettwiler and Wolfgang Danspeckgruber
Hope Dodson
Christine and Michael Donovan
Susan Doran
David Drelich
Jon and Heidi DuBois
Nancy Duff
Ed and JoAnn Dulworth
Wilhelmina Eaton
Rqfaat Ebied
Leslie Mattson Emerson
Harold and Judy Erdman
Abigail Evans
Leona Falk
Mark and Katharine Farrell
Fiduciary Trust
Randy Fields
Anthea Fisher
The Flower Warehouse
Dean and Sandra Foose
Robert and Evelyn Fortna
Michael and Kathleen Franklin
Gary Friedman
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A note on our logo by its designer, graphic artist Alex Levetan:

The simple shapes of ovals form a representation of three interlocking figures, a mentor mother, an expectant mother and her child, all embraced in a circle, the symbol of life. The colors evoke the same response as those on many African flags, and so are part of this continent’s weave. All warm, caring and interconnected… just like mothers2mothers
U.S. Donations can be sent to:
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