

mothers2mothers

Annual Report 2017-2018

(2017 Financials)

Raising the future.

ROAD TO

Dear m2m Family, Friends, and Supporters,

As the global community works to achieve the United Nations Sustainable Development Goals (Global Goals) by 2030, sub-Saharan Africa faces major obstacles in meeting them, in particular ending the AIDS epidemic, ensuring good health and wellbeing for everyone, and achieving gender equality. This year's Annual Report explores how mothers2mothers (m2m) contributed to the Global Goals in 2017 by broadening our scope and **deepening** our services—all with our eye on the prize of ending paediatric AIDS and keeping mothers and families alive and healthy.

For the first time, our Annual Report has gone digital. This printed summary will give you a snapshot of our work, and I also invite you to view the full report at features.m2m.org/2017-18AnnualReport, and learn more about how our Mentor Mother Model is supporting women, children, and adolescents to access vital medical services, adhere to treatment, and remain in care—while simultaneously creating economic opportunities for women who are often among society's most marginalised.

Abrazos,

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Frank Badle de Palvarno

Frank Beadle de Palomo President and Chief Executive Officer Martha Alimonda, a Mentor Mother in Byumbwe, Malawi, first met m2m in 2013 when she was pregnant with her second child. She now has two sons, who are both HIV-negative.

I decided to become a Mentor Mother to educate other women and help them learn from what I went through. One of the big challenges in accessing medical care in my community is that many families have to travel more than five kilometers (three miles) to reach the nearest health centre, and if they don't have money for transportation they may decide not to go. There is also a shortage of medical staff at the clinics which means families must wait a long time to get care. And for those people who test HIV-positive, they can have problems accessing medical care if they have not disclosed their HIV status.

Mentor Mothers are very important in the community because by making home visits, we are able to identify pregnant women and other family members who have not accessed medical care and support them to visit the health facility for important health services. Because Mentor Mothers have good relationships with the people in the community, the people are more comfortable to approach them and ask questions. Since I started working with m2m in 2015, I have helped more than 2,000 families to access medical care.

To say the truth, m2m helps us as Mentor Mothers, as well as the clients we serve. I use the money I earn to support my family and buy my children what they need for school.

Read the full report: features.m2m.org/2017-18AnnualReport



BROADER AND DEEPER

2.3M new clients, including women, children, and adolescents, were enrolled into care in 2017, either directly by m2m or through our partners—an 18% rise over 2016.

2,912

HIV-positive women were employed as Mentor Mothers by m2m and our partners, creating **economic wellbeing** for women who are often among society's most marginalised.

1.6%

is the mother-to-child HIV transmission rate among enrolled m2m clients. This is well below the UN's 5% benchmark, and makes 2017 the fourth consecutive year that m2m has achieved **virtual elimination.**

99%

of HIV-positive pregnant women/new mothers we served were **initiated on treatment**. 90% are alive and **remain on treatment** after a year, compared to 83% on average in Eastern and Southern Africa.¹

0.07%

of women who were **HIVnegative** at enrollment into the m2m programme acquired HIV—50 times lower than the 2014 pan-African benchmark of 3.6%.²

Data from m2m's 2017 Annual Evaluation

- 1 UNAIDS 2017 data, accessed via http://aidsinfo.unaids.org/ on 17 October 2018.
- 2 Drake et al, 'Incident HIV during Pregnancy and Postpartum and Risk of Mother-to-Child HIV Transmission: A Systematic Review and Meta-Analysis' (2014) Published at: https://doi.org/10.1371/journal.pmed.1001608

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97%

of children enrolled in our Early Childhood Development services achieved their developmental milestones at 12 months.

34%

of m2m clients were **adolescents and young adults**, between the ages of 10 and 24 years, up from 29% in 2016.

Our Approach

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mothers2mothers (m2m) is an African NGO that unlocks the potential of women to create healthy families and eliminate paediatric AIDS. We train, employ, and create empowerment opportunities for local, HIV-positive mothers as Mentor Mothers—community health workers who educate and support women and their families to overcome barriers to medical care and ensure they receive essential health services that help families to thrive.

m2m Mentor Mothers work at over 1,000 locations across 8 countries

—including health centres and their surrounding communities.

Our Health Facility-to-Community Platform is designed to ensure women, children, and adolescents access healthcare, start any treatment they need, and are retained in care. To do this, we employ Community Mentor Mothers (CMM) who go door-to-door in the catchment areas served by the nearest health centre, and educate and engage with women and families who have not received medical care or who have stopped treatment. In addition to providing direct services, they link clients to Mentor Mothers working at nearby health centres who support them in accessing the services they need. Our digital tools allow us to optimise client service delivery, while ensuring accurate tracking, follow up, and reporting.

Our Services

m2m is investing in deepening our services to meet the changing needs of women, children, and adolescents—our three primary client groups. We are doing this by enhancing and improving existing services, while adding new service lines. Services include:

Women Aged 15-49

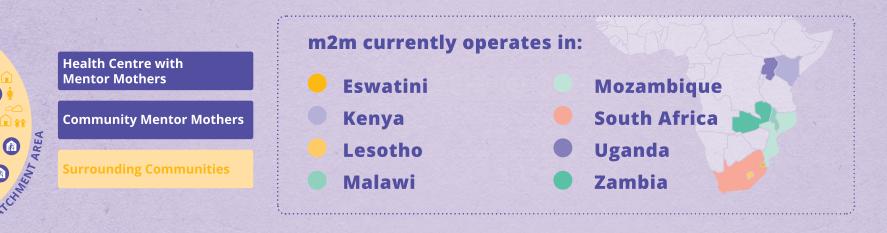
- Section 2 Essential health services including: sexual and reproductive health (i.e. HIV/STI prevention and treatment, family planning) and screening for malaria and TB
- Ensuring healthy pregnancies, safe deliveries, and quality postnatal care
- Treatment initiation, retention and adherence support for HIV-positive pregnant and postnatal women to prevent mother-to-child transmission of HIV
- Strengthening economic wellbeing and food security to build resilient households

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O Tailored support for HIV-positive or -exposed children and families, including testing, disclosure, treatment initiation, adherence, and retention support

Integrated management of childhood illness services, including nutrition education and immunisations

• Assistance with registering births and accessing social services



***** Children Aged 0-9

5 Early childhood development support and education for caregivers and families

Adolescents Aged 10-24

• Sexual and reproductive health education and services for girls and boys, and young women and young men

• Age-appropriate interventions to prevent new HIV infections and unplanned pregnancies

Prevention of mother-to-child transmission services for HIV-positive pregnant and postnatal adolescent girls and young women

Tailored Early Childhood Development and parenting support for vulnerable adolescent parents and caregivers

Our 2017 Financials

Statement of Financial Position

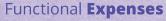
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Current Assets		Revenue
Cash and Cash Equivalents	3,481,696	Grants ar
Contributions and Other Receivables	3,100,060	Contribut
Other Assets	304,985	Other Inc
Total Assets	\$6,886,741	Total Rev
Liabilities and Net Assets		Expenses
Total Liabilities	2,356,547	Program
Net Assets - Unrestricted	2,048,336	Managen
Net Assets - Temporarily Restricted	2,481,858	Fundraisi
Total Ending Net Assets	4,530,194	Total Exp
	State State State	
Total Liabilities and Net Assets	\$6,886,741	Changes

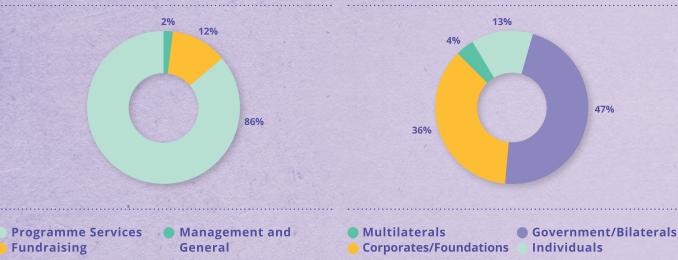
Statement of Activities

Revenue by Category

	Revenue and Support	
696	Grants and Contracts	16,934,233
060	Contributions	2,952,900
985	Other Income	149,771
741	Total Revenue and Support	\$20,036,904
	Expenses	
	Expenses	
547	Programme Services	17,193,909
.336	Management and General	341,225
858	Fundraising	2,312,772
194	Total Expenses	\$19,847,906
741	Changes in Net Assets	\$188,998

Explanatory note: Audited figures are available on our website for each of the three entities that make up the m2m group, but these consolidated financial statements are unaudited. All figures are in US dollars.





Donors

m2m is grateful to the funders and partners who support our work. The organisations listed here made gifts of over \$5,000 between 1 January - 31 December 2017. To see all of our donors, including the many individuals who generously support us, please visit features.m2m.org/2017-18AnnualReport.

Government Agencies

Centers for Disease Control and Prevention (CDC) Department of Health, Mpumalanga **Province, South Africa Department of Health, Western Cape Province**. South Africa United States Agency for International **Development (USAID) U.S. Department of State**

Multilateral Organisations

United Nations Children's Fund (UNICEF) Malawi **UNICEF, South Africa UNICEF**, Uganda

Trusts and Foundations

Be One Percent Bickerstaff Family Foundation The Butters Foundation **The Cadbury Foundation Cartier Philanthropy Comic Relief Conrad N. Hilton Foundation** The Curtis W. McGraw Foundation **Denise Coates Foundation Discovery Fund Trust** The Elizabeth Taylor AIDS Foundation (ETAF) **The ELMA Foundation**

GMC Trust The Hunter Foundation Jasmine Social Investments Imago Dei Fund LGT Venture Philanthropy Foundation M·A·C AIDS Fund **Mulago Foundation** Newman's Own Foundation **Porticus Africa Limited Porticus Foundation** Sarnat-Hoffman Family Foundation **Stephen Lewis Foundation Stavros S. Niarchos Foundation The West Foundation**

Corporates

Allen & Overy athenahealth Bruce Ritchie. Residential Land Ltd **British Airways Voting Initiative GUCCI** Johnson & Johnson **Kering International Limited** M·A·C Cosmetics Selfish Mother **Sage Publishing** Stella McCartney thredUP Value Retail The Webster

m2m Global Giving Circle

Debbie Bickerstaff Leslie Brunner **Kurt Chapman** Laure Hériard Dubreuil **Pat Fernandes** Nancy Gallt Susan Gibson & Mark Bergman Carol Hill & Richard R. Pickard Janet & Derek Lubner **Michael Marsh Edward E. Matthews** Ngozi Nnenna Orji Carolina & Martin Schwab Maartje & Esteban Skare **Carl Stewart Amy Wilson-Janice**

We are also thankful to our partners with whom we deliver services across sub-Saharan Africa Centre for Communication Impact NPC **Elizabeth Glaser Pediatric AIDS Foundation** FHI 360 Jhpiego John Snow, Inc. Plan International USA **TB/HIV** Care Association World Education Inc.





To engage with us or support us, please contact: *Emma France* Global Development & Strategic Engagement Director

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