



Barbara May
Foundation

SAVE THE MOTHER.

SAVE THE WORLD.

Annual Report

for the year ended
30 June **2022**





Message from Michael Sharpe AO Chairman

A graph in this Annual Report illustrates the healthy annual increase over the last five years in donations the Foundation has received. This year's increase takes our annual donations to more than AUD\$5M, a phenomenal outcome.

Some of our supporters have pledged significant donations to enable the Foundation to build additional infrastructure to support the need for further capacity in the African projects. Dr Andrew sets out details of the planned capital projects which covers expenditure in Ethiopia, Tanzania and Uganda.

Our directors are well aware of our responsibility to expand the activities we finance efficiently and carefully. Recently we held a Strategy Day to determine what changes we need to make to enable us to handle the expansion our increased donations allow us to undertake. We are particularly anxious that Andrew and Valerie receive the support they require.

Many thanks to Andrew and Valerie's teams who have continued to maintain high standards of care in difficult times. Volunteers are only now returning to the hospitals we support and local staff are still bearing huge loads. In Valerie's hospital in the Afar district, poverty, civil unrest and drought have caused life-threatening circumstances. We have passed on donations totalling nearly AUD\$300,000 to supply food to pregnant women in the Afar. Much more is required.

Many thanks to our donors. We believe that our model of financing locally managed organisations who work with local staff supported by overseas volunteers is respected due to the excellent outcomes we are able to report. Dr Andrew's supervision and our policies are other factors which influence donors to entrust us with their donations.

Since our last Annual Report two new directors have joined our Board. Philippa Tyndale who is Chairman of Te-Kworo Foundation, is experienced in fundraising and knows much about Uganda. Jonathan Morris AM has served as a volunteer with us in Tanzania and is Professor of Obstetrics and Gynaecology at the University of Sydney. We welcome both to our Board and thank all directors for their hard work during the year. Thanks also to our loyal General Manager, Jo Crowley, who has been with us long enough to take long service leave next year.

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Donors, directors and other supporters gain much satisfaction from being associated with the work done in the African projects - joy from the safe arrival of healthy babies, and successful fistula surgery transforming women's lives giving them back their dignity and hope. It must not be forgotten that the projects also

provide many allied health services such as family planning, teenage maternal health services and education and midwife training. On a continent where so many births still end in tragedy, we are thankful we can assist in these many ways. We also acknowledge Andrew and Valerie, and the remarkable teams that support them, for allowing us to be part of this.

To God be the glory, great things he has done.

About the Barbara May Foundation

The primary focus of BMF-funded programs is safe childbirth, the delivery of live babies, and mothers not dying or injured during childbirth. Obstetric fistula treatment and family planning education is also provided. The majority of BMF-funded programs focus on women living in rural areas and disadvantaged communities. Services are provided to those in need for free, regardless of race, religion or financial status.

- ♥ About 830 women die from pregnancy – or childbirth-related complications around the world every day.
- ♥ Almost all maternal deaths (99%) occur in developing countries and 70-75% of these deaths occur in sub-Saharan Africa.
- ♥ For every death, many other women suffer from terrible birth-related injuries, including obstetric fistula.



Message from Dr Andrew Browning AM Medical Director

Too many maternal deaths. Too many babies dying. Too many fistulas still occurring. The past year has been one of enormous need and thankfully our Foundation has, with the help of so many donors, been able to respond to help thousands of women and babies.

Valerie Browning and her organisation in the desert of Ethiopia have been plagued by locusts, drought, famine and war. The Barbara May Foundation has responded by providing food and water relief to thousands of pregnant and lactating mothers, keeping them alive through each heartbreaking crisis.

However, the core of our work is safe birth and fistula treatment and as borders have reopened I have been able to travel back to Africa more freely. In the last year I have visited Uganda, Sth Sudan, Ethiopia and Tanzania where we were able to operate on 445 women with fistula injuries and train 11 more doctors in advanced surgical techniques. It's been wonderful to see the doctors' skills develop and see them heal more women, something they take great joy in as well.

At the Foundation, we are determined to do all we can to prevent fistulas happening in the first place. To this end we were able to provide free medical care for thousands of women as they delivered their babies with excellent standards of care.

We have exciting new programs and new generous donors enabling them. For example, a new maternity and fistula repair hospital in Tanzania is being planned to help many thousands more women; we plan to expand our hospital in BarhirDar, Ethiopia and a new partnership with Te Kworu in

Uganda, will allow the building of a new maternity hospital.

Midwife training continues in all our centres. An expanded program with advanced clinical skills training has now started in Kivulini, Tanzania. This new program is based on the previous program we undertook in the original hospital in Tanzania. It was so well received we decided to implement the upgraded program now that we are well settled into Kivulini.

As we look forward to another year of helping women, we thank the tremendous staff we have, Dr Mbise in Tanzania, Dr Birhanu and Dr Omar in Ethiopia, each leading their respective hospitals. We can't do it without them and all the midwives and allied staff that serve alongside them. The coming year will see even more women helped and lives changed and we thank you, the donors, for making all of this possible.

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The Women We Serve in Africa

There are 80 major ethnic groups in Ethiopia and 216 different dialects. In Tanzania there are 130 different tribes. Translators are often required to get a medical history from a patient which may mean navigating multiple languages.

Each tribe has a different culture and belief system around pregnancy and delivery. For example, in the Gumuz tribe, based west of Barhir Dar, their custom dictates a pregnant woman will go by herself into the bush at 38 weeks and stay there until she has delivered her child. Unattended, she receives no assistance if the delivery becomes problematic possibly resulting in serious injury or death.

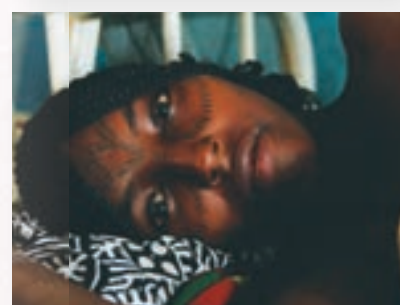
In the Afar desert region, the women and girls are the most underserved in the world when it comes to women's health and maternal care.

Most rural women live more than 50km from the nearest health centre, often having to walk there, and more than 90% are still delivering in their village homes. In many regions, traditional practices, such as Female Genital Mutilation are still common. Many of the women we see are fearful of hospital settings and require gentle reassurance, patience and respect.

In the new project in Northern Uganda, the women served by Te-Kworo maternal and child healthcare programs are the generation of mothers following a 20-year conflict that ended in 2006. The trauma and cultural damage caused by war has left them as some of the poorest, most vulnerable and least resourced women in the country with high maternal mortality rates.

Sexual violence, early marriage and teenage pregnancy are well above the national average. One-in-five babies delivered at the Te-Kworo clinic are born to a mother under 18-years-old. A program to subsidise safe, medically supervised births at the clinic has resulted in 1,500 live births since opening in 2017.

Wanting to receive maternal healthcare – in a culture of disengagement of men in pregnancy and childbirth – pregnant women will walk for two or more hours to reach the clinic for antenatal care and group childbirth classes. In addition, through community outreach, we are seeing a shift in the engagement of father's in the birthing process.



Fistula Camps

Fistula surgery camps were undertaken in five different countries this year; Uganda, Sth Sudan, Tanzania, Ethiopia and Malawi. In all 445 operations were performed and 11 doctors trained.

The fistula service in Tanzania has grown with our new medical director, Dr Mbise, who, having been trained in fistula surgery over the years with Dr Andrew, is now offering a full-time fistula service in Kivulini. As a result they were able to perform 180 major fistula operations this year, a record for our hospital in Tanzania. This could not have been achieved without Grace, our outreach worker, going regularly to the remote areas to find patients and bring them to the hospital.

Several papers were published in international medical journals and chapters in medical text books. In addition, Dr Andrew finalised the second edition of the main fistula text book that will be used in the only recognised fistula surgery training program in the world. The books have already started to be distributed.



445

Fistula Operations



11

11 Doctors trained



Projects supported in Africa (in whole or in part)



Barbara May Memorial Hospital (BMMH) – The Afar Region, Mille, Ethiopia

The Afar is considered one of the harshest environments in the world where temperatures regularly exceed 50°. The tribal group (The Afar) are a proud and beautiful nomadic people. In 2010, the Foundation funded the building of the Barbara May Memorial Maternity Hospital providing access to free, safe, maternal health services to remote and nomadic women for the first time in history.

The Foundation also funds the **Rural Maternal & Women's Health Outreach** program in that region which can see up to 10,000 women a year.

Number of deliveries:

BMMH	RURAL MATERNAL OUTREACH
684	8,814



Vision Maternity Care Hospital (VMC) – Barhir Dar, Ethiopia

Operated in partnership with the local Health Bureau, VMC was opened in 2017 overseeing up to 3,000 births-a-year. The unit is known as one of the safest places to have a baby in Ethiopia with no maternal deaths recorded. In addition, VMC provides antenatal and post-natal care, HIV screenings and family planning advice. It is also a training centre for midwives and supervises nine surrounding health centres.

In 2023, the Foundation, through a generous donor, is funding an extension to the hospital to include a maternity waiting area, and added surgical capacity.

Number of deliveries:

2,174

Clinic visits:

11,404



Te Kworo External-View (Artist impression). The hospital will provide support for a mobile clinic operating in remote villages across four large districts of northern Uganda



Kivulini Maternity Centre – Maternity Africa (MA) – Arusha, Tanzania

Kivulini, which opened in June 2018, is now recording 2,000 births-a-year. Kivulini comprises a modern and well-equipped 48-bed maternity centre, a midwife training school and an obstetric fistula treatment unit. The Outreach program covers up to 20 surrounding regions.

In 2023, due to the generosity of a donor, we are hoping to commence the building of a satellite hospital to Kivulini in Dodoma, Tanzania – a more remote area, providing important capacity for the women of this under-served region.

Number of deliveries:

2,527

Clinic visits:

9,662



Reconciliation Hospital, Referendum, South Sudan

In 2019, with the help of the Lutheran Church, a new fistula treatment centre was built in the capital Juba.

In 2020 they agreed to fund a 10-bed maternity unit which opened in July 2021. The Foundation is supporting the volunteer midwives and doctors to staff the centre and train the local staff.

Unfortunately, just as the unit opened, our volunteers were evacuated due to civil unrest, and the delivery unit has subsequently been closed for much of the year and has only just reopened. Sr Marianne, who is currently managing our midwife training course at Kivulini, will hopefully return this financial year to train the local midwives.

Te-Kworo Maternity Hospital in Agago, Northern Uganda.

In April 2022, Barbara May Foundation formed a partnership with Te-Kworo Foundation in northern Uganda to build a maternity hospital in East Africa, and the first in Uganda.

The new hospital will be located on 20 acres beside a major thoroughfare, serving an estimated 500,000 people in Pader and Agago Districts. The new facility will replace Te-Kworo Foundation's small maternal and child health (MCH) clinic in Pader Township, opened in 2017, which has been overwhelmed throughout the Covid-19 pandemic. Some 1,500 babies were born and the clinic has conducted more than 3,000 antenatal visits in the past two years.

The Te-Kworo Hospital, with an estimated cost of \$1.7

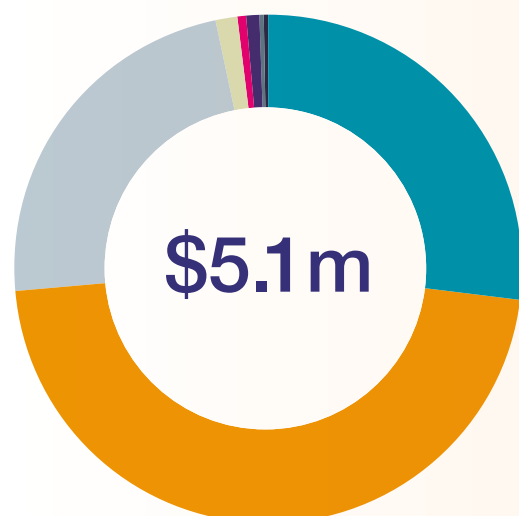
million for construction and fit-out, was designed as a pro bono project by Australian architects, NBRS. When completed in 2024, women and babies will have access to a blood bank, birthing suite, specialised newborn baby unit, operating theatre and pathology facility. Dr Browning will provide ongoing oversight and training to ensure the high quality of the new facilities. We expect many lives to be saved when women and babies can be treated locally instead of being transferred to other hospitals.

The hospital will provide support for a mobile clinic operating in remote villages across four large districts of northern Uganda, as well as nursing and midwifery training for girls coming through Te-Kworo's scholarship program.

Our Finances Year ending June 2022

A full version of our audited annual financial statements can be found on our website.

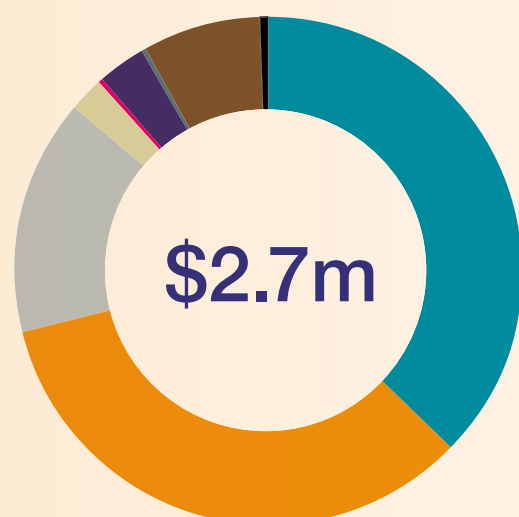
Where the money came from



General Donations	\$1.4m
Restricted Donations (Program operating expenses)*	\$2.4m
Restricted Donations (Hospital building costs)*	\$1.2m
Restricted Donations (Equipment & fitout)*	\$0.06m
Restricted Donations (Medical supervision & travel)*	\$0.03m
Fundraising income	\$0.05m
Sales of goods	<\$0.01m
Interest income	<\$0.01m
Total Income:	\$5.1m

*\$3.7M of donations were received where the donor has requested their donation be directed towards certain programs or expenditure. The Foundation intends to honour the requests of such donors. All donations over \$2 are tax deductible.

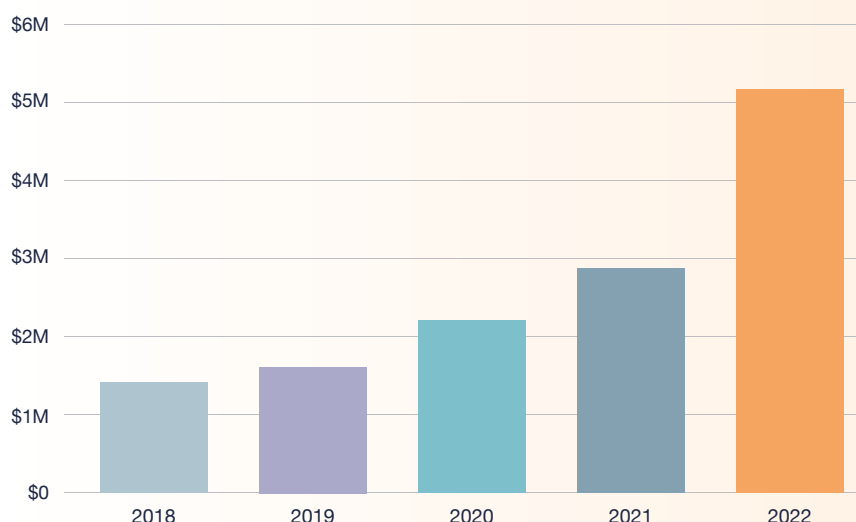
Where the money was spent



Arusha, Tanzania	\$1.0m
Afar Region, Ethiopia	\$0.9m
Barhir Dar, Ethiopia	\$0.4m
Northern Uganda	\$0.06m
Juba, South Sudan	\$0.01m
Medical supervision & travel	\$0.08m
Other program expenditure	<\$0.01m
Fundraising & administration*	\$0.2m
Cost of goods sold	<\$0.01m
Total Expenditure:	\$2.7m

*Cost of fundraising: 4% of revenue was spent on fundraising and administration.

Historical donations



2018	\$1,412,373
2019	\$1,601,524
2020	\$2,211,710
2021	\$2,867,739
2022	\$5,158,021

The Foundation currently holds sufficient cash reserves to fund its current operations for approximately one year. With significant inflationary pressures and planned capital projects to expand capacity, **the Foundation's operating budget is expected to increase to more than \$4.5M p.a. in future years.**

The Foundation is therefore building its cash reserves and seeking further growth in donations to fund this increased operating budget as it continues to increase the number of poor and marginalised women reached.

How far does a donation go?



\$60

will pay for the transport of a woman to hospital



\$250

will pay for a safe delivery in a hospital including pre & post-natal care



\$150

will pay for 65 delivery kits for local birth attendants in remote regions



\$600

will pay for a life-changing fistula operation

Our wishlist

A champion and funding partner for Valerie's Rural Maternal Healthcare program. AUD\$240,000 is required annually for this critical program servicing the most marginalised women in the world.

Doctors who work in BMF-funded hospitals

BMF have incredible doctors who work in our hospitals and clinics, working tirelessly to help their local communities.

Dr Omar

Dr Omar has been working under considerable pressure over the last year. He's the only doctor in the Barbara May Memorial Hospital (BMMH) in the Ethiopian Afar desert and as such, is on call 24/7. He and the staff have stayed at the hospital during the recent conflicts so in addition to providing maternity services, they are having to take in casualties from the war, which at its closest, was only about 40km from the hospital. Taking in wounded soldiers, Dr Omar and the team stabilised patients and then transferred the most serious cases to the government hospital some two hours away. The government hospital was so busy that they then diverted their maternity cases back to the BMMH for Dr Omar to care for. The government of Ethiopia was so impressed by the hospital and its actions and level of care, led by Dr Omar, that it recognised the staff with an award. We are incredibly proud of this team as they continue to provide professional and sensitive care in the most difficult of circumstances.



Dr Omar

Dr Birhanu

Dr Birhanu was the founding director of Vision Maternity Care Hospital (VMC) in Barhir Dar, Ethiopia, in 2011 and is now the medical director. The last two years have been very difficult in this region with Covid, war and high inflation. Dr Birhanu with VMC's manager, Ato Negash, have calmly and wisely guided the hospital and staff through these difficulties while maintaining the high clinical standards that we have grown to expect from VMC. More than 15,000 women have delivered safely at VMC since it opened and there hasn't been a single maternal death or fistula injury recorded. The health bureau and regional government regularly take visitors around VMC to showcase the high level of care that is offered. Congratulations to Dr Birhanu and his wonderful team of midwives.



VMC Mum and babe with Dr Birhanu

Dr Mbise

Dr Mbise has been the medical director of the Kivulini Maternity Centre since early 2022. He was trained as an obstetrician and gynaecologist with the help of a BMF donor who sponsored his training through the Foundation. Since taking up his position as medical director he has overseen the implementation of several important programs including a cervical cancer screening program with the help of donors in the US; the midwifery training program spearheaded by Sr Marianne Botenbal from The Netherlands and the adolescent school education program. In addition he is providing clinical oversight to our growing medical team with Dr Doreen and volunteer expat Dr Jonny Rust.

Dr Mbise has been learning fistula surgery for some years and is now on the FIGO fistula surgery training program. At Kivulini we have treated more fistula patients than ever before this year because of Dr Mbise's continued dedication.



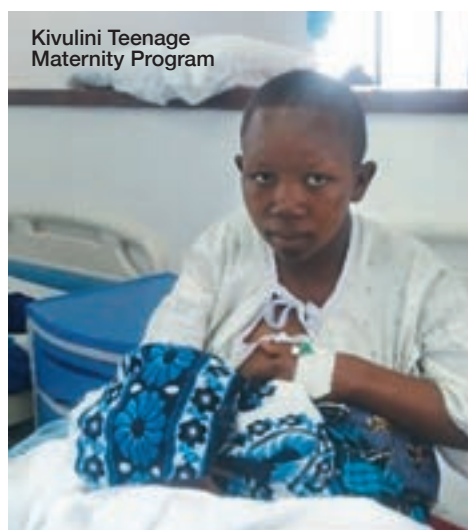
Dr Mbise



BMF BMMH Twins
in birthing suite



BMF VMC
antenatal clinic



Kivulini Teenage
Maternity Program



Midwife Training
Program at Kivulini

Allied Health programs provided by the facilities

Family planning education and provision is provided at all of the BMF-funded hospitals. At VMC this is done in conjunction with the neighbouring government health centre but all patients get advice and education through our clinics. In Kivulini, every clinic visit is an opportunity for family planning education and every woman who delivers is given the option to use family planning post-delivery. In addition, women can come for free family planning appointments in our clinic and the community is engaged through outreach programs.

At Kivulini 8% of our patients are teenagers. They are invariably from poor communities, haven't had access to maternal health education and have experienced difficult and abusive relationships. Often the father of their child has abandoned them. The teenage program at Kivulini provides support, including home visits with our social work team, and physical support and education. We provide them with further home visits after the baby is born, help with breastfeeding, and supporting the family with necessary materials such as baby clothes, hygiene products, clothing and food.

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The staff of Kivulini has just started a school education program teaching teenagers about reproductive health and rights. The students are free to ask questions and learn as they have a lot of misunderstandings about their bodies, pregnancy and delivery. For example, a question that is often asked is, 'will I die if I have a caesarean?'. It's a valuable chance to educate young women about the importance of delivering within a hospital to prevent maternal and neonatal death and injury.

The education programs in the Afar desert in Northern Ethiopia are provided within the framework of the Afar Pastoral Development Association (APDA), founded by Valerie Browning and her husband Ishmael Ali Garde. They have a far-reaching health education and primary health care network in the nomadic villages. Every year tens-of-thousands of people receive health education and basic health care for common conditions such as malaria, diarrhoea and pneumonia. The outreach team also do antenatal checks, maternal health education and with the village birth attendants, deliver babies in the villages and refer women to the Barbara May Memorial Hospital (BMMH) when needed.

The BMF Board

Chairman: Michael Sharpe AO

Deputy Chair: Dr Samantha Hargreaves

Founding Director: David Browning OAM

Treasurer: Matthew Pendleton

Audit Committee Chair: Tom Crawford

Julie Toma

Richard Browning

Philippa Tyndale

Prof. Jonathan Morris AM

The BMF Management Team

Valerie Browning AM

Dr Andrew Browning AM, Medical Director

Jo Crowley: General Manager

Michael Hynds: International Donor Relations

Joanna Shaw: PA to Dr Andrew Browning

Ambassadors

The Foundation is also assisted by the Board appointment of Honorary Ambassadors: Dr Arthur Adeny, Brad Baker, Sr Kareena Shaw, Dr Geoff Kelsey, Patrick Kennedy, Prof. Ray Hodgson and Elisa McDonald. We thank them most sincerely for their support.

Volunteers

Our thanks goes out to the doctors, midwives and general supporters who have volunteered over the past Financial Year.

Major Project Partners & Supporters

– Australia

Australian Communities Foundation, Cubit Family Foundation, DAK Foundation, Herbert Smith Freehills, Morris Family Foundation, My Sister's Baby, Nourish Baby, Planet Wheeler Foundation, PwC, Savannah Foundation, Sonic Healthcare Australia, Sydney Local Health District, South Western Sydney Local Health District, South Eastern Sydney Local Health District, Safe Sleep Space, Story Street Fund, Ripple Foundation, Twice the Doctor

– International

The Talbot Family, Impact UK, King Baudouin USA, Excellence in Giving USA, Lutheran Churches of USA & South Sudan, Family Foundations from the UK, USA and Switzerland who prefer to remain anonymous.

Thank-you to all our supporters and donors both large and small. Together, and through your generosity, we are delivering safe birth and freedom from fistula for the most disadvantaged women in regional and remote Africa.



How can you help?


Donating to the Barbara May Foundation will allow us to support volunteer doctors and midwives, build and operate maternal health facilities, maintain and increase the Outreach programs, and provide vital medical supplies.

Donate

Any donations, whether great or small, are very much appreciated and will help us deliver care to the many women who need it.

You can donate:

-  **Online:** www.barbaramayfoundation.com
-  **By cheque or money order:**
Care of The Barbara May Foundation, PO Box 2371
Bowral NSW 2576. Please include your contact
details so we can issue a receipt.

-  **By Direct Deposit:***
BSB: 032716 (Westpac)
Account: 403741

Other Ways to Support

There are many other ways to help BMF deliver lasting change including workplace giving, fundraising, bequests, and regular giving. To find out more, visit: barbaramayfoundation.com/how-can-i-help

ABN 351 412 489 00

*Please note you will need to contact us to advise of a Direct Debit transfer so we can issue you a tax deductible receipt by emailing: daviddaphne1@gmail.com



**Barbara May
Foundation**

P.O. Box 2371, Bowral NSW 2576
Jo Crowley - General Manager
E jo.crowley@barbaramayfoundation.com
T +61 412 446 969