

The ISIS Foundation (Bermuda) is registered as a charitable trust in Bermuda (registration number 508).

The ISIS Foundation (UK) is registered as a charitable trust in the United Kingdom (Registration number 1098152).

The ISIS Foundation (Australia) is incorporated as a company limited by guarantee in Australia (ACN 131 310 355) and registered in Nepal as an international non-government organisation in Nepal (project agreement signed 27th August 2007 and amended on 7 March 2011).

The ISIS Children's Foundation is registered in Nepal as a non-government organisation (Registration numbers – DDC: 618/064/065 & DAO: 565.)

US taxpayers can make US taxdeductible donations if they donate to The ISIS Foundation through the International Charitable Fund of Bermuda, which has s501(c) (3) status in the USA. The ISIS Foundation (USA) is in the process of obtaining its s501(c)(3) status in its own right.

UK tax payers can make UK taxdeductible donations if they donate through The ISIS Foundation (UK).

Australian taxpayers can make Australian tax-deductible donations if they donate to The ISIS Foundation through the Australian Foundation for the Peoples of Asia and the Pacific Limited. The ISIS Foundation (Australia) is in the process of applying to obtain overseas aid gift deductible status in Australia.

The ISIS Foundation (Bermuda), The ISIS Foundation (USA), The ISIS Foundation (UK) and The ISIS Foundation (Australia) are not authorised to solicit funding support from any jurisdictions other than those in which they are registered.

For more information please see www.isisgroup.org

The names and details of some of the people featured in this report have been changed to protect their privacy.

Photographs © The ISIS Foundation, 2009 and 2010, courtesy of our staff, supporters and volunteers.



















# TWO EXTRAORDINARY YEARS As part of our growth and transition

What an amazing couple of years this has been! 'Milestones' is the theme of this report and we can think of no better way to describe the work of 2009 and 2010. As the senior management team for The ISIS Foundation globally, we are enormously proud to present the details of our achievements and the many milestones we have reached in the last two years. As we move into our 14th year of operations, we look back at not only our successes, but also the mistakes we've made, which have led to immense learning along the way. Our Ugandan friends have a saying, "So Much Done, So Much Yet to Do", which captures the place we now find ourselves in as we look ahead.

ISIS has grown organically from its early beginnings as a small familylike organisation to a significant international non-government organisation as it enters 2011. We are hugely proud that we have made this transition while still holding tight to ISIS culture and values and our disciplined development philosophy. One major milestone achieved in the last two years was the passing of the baton to the wonderful Susan Biggs as the Executive Officer of the Foundation, after an amazing nine years with Leo Exel leading the team. Together, we have embraced and built on the ground work Leo put in place for us and for the Foundation. As a team, together with Susan, we have charged ahead.

over the last two years, 2010 saw us focus on Foundation structure, governance and compliance, along with our sister companies, the ISIS Businesses. This has resulted in strengthened governance structures that will protect the Foundation and integrity of the work we do going forward. To this end, we are very pleased to welcome all of our 14 global Directors and Trustees, some of whom have been with us for many years and some who have joined us in 2010. Your support is immensely appreciated by the whole senior management team.

Spanning the globe and working together as a management team on a day to day basis presents challenges, but we have worked hard to ensure that we can support each other despite the physical distances. The ISIS mission unites us and as a team, we are immensely honoured and deeply privileged to lead The ISIS Foundation forward into the next 10 years. We are forever indebted to all ISIS family members worldwide who work so hard to achieve the dreams and goals we all share. We salute your work.

We remain eternally grateful to all our donors and in-country partners who have walked with us through rain, hail and snow in our journey so far. To our sister companies, the ISIS Businesses – we would not be ISIS without your backing and steady support, no matter what goes on in the world. We know that we cannot be who we are without you by our side.

Finally, at the very centre of who we are, to the beautiful communities and people we work with on a daily basis, you inspire us beyond measure. Your spirit and strength keep us moving forward every single day.

Dhanyabaad and Mwebale.

SUSAN BIGGS

Executive Officer

MELISSA BARRS Office Manager

-UE132M3+73

PRALHAD DHAKAL Nepal Country Manager

Kimber

KIMBER HADDIX MCKAY Research, Monitoring and Evaluation Manager

RICHARD KATAMBA Uganda Country Manager

DEBBIE LESTER
Clinical Practice Manager

ANUBHA RAWAT
Communications and
Partnerships Manager

FIONA ROBENS
Group Financial Controller

hona lobeus

SUMA TEKKATTE

General Counsel

















ALVON

LAXMI

RICHARD









SUMITRA



SUSHMITA





**SANTOSH** 





















**MOSES** 

**RODNEY** 



















DANIEL

























MICHAEL













JANE

MINGMA

ASHA

**5** / OPERATIONS REPORT 09/10 THE ISIS TEAM



## ISIS STRUCTURE

ONE OF THE KEY SUCCESSES OF ISIS HAS BEEN THE INTER-LINKED SUPPORT OF THE ISIS BUSINESSES, WHICH ARE A SET OF FINANCIAL SERVICES BUSINESSES. THESE COMPANIES HAVE TOGETHER PROVIDED OVER US\$ 4 MILLION OF DIRECT AND INDIRECT FUNDING OF ADMINISTRATION AND INFRASTRUCTURE COSTS AND SUPPORT FOR EMERGENCY PROJECT COSTS.



The ISIS Foundation was established in Bermuda in 1998. Since its inception, thanks to the tireless work of its staff and supporters, ISIS has expanded into a functioning group of trusts, non-profits and companies in Bermuda, the US, Australia, UK, Uganda and Nepal to achieve its mission of making a positive difference to the lives of children and women in the developing world, specifically Nepal and Uganda.



In 2009 and 2010, ISIS did a lot of work to set in place proper governance and compliance structures, to not only protect the work of the Foundation, but to also ensure that ISIS culture, values and development philosophy are preserved globally. We now have clear processes to ensure that the work of The ISIS Foundation is protected, with active Boards in each country and a Memorandum of Understanding executed by all ISIS entities and ISIS Businesses which sets out the way we work together and operate as a global entity.

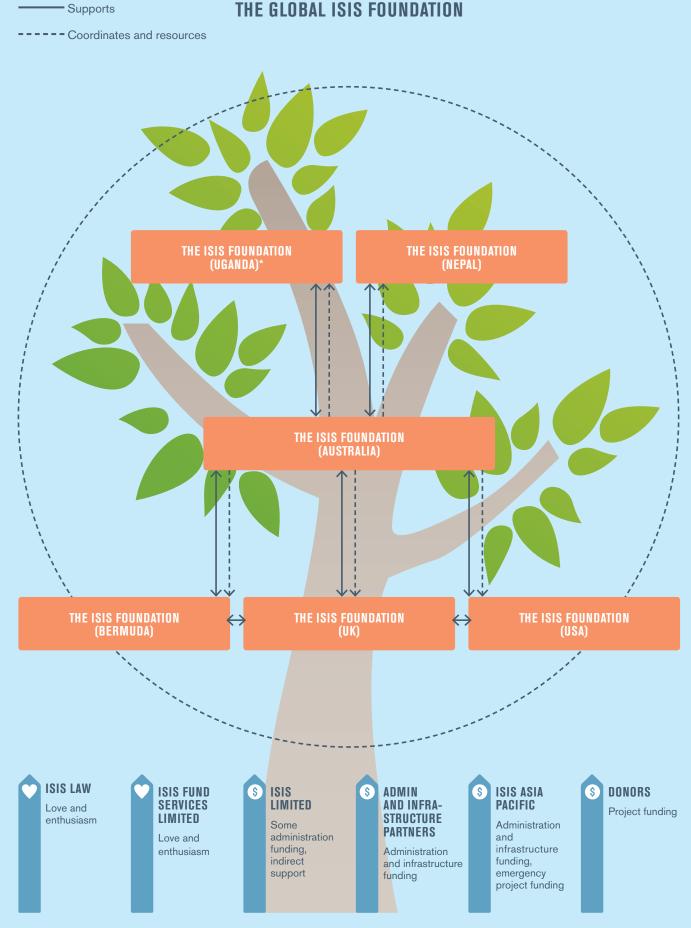
Legally, The ISIS Foundation as a whole is now called The ISIS Foundation (Global) or TIF (Global) and its entities are called TIF (Australia), TIF (Bermuda), TIF (USA), TIF (UK), TIF (Nepal) and TIF (Uganda), based on where each entity is located. TIF (Global) also has its own local non-profit organisation set up in Nepal called The ISIS Children's Foundation (ICF). For ease of reading, the work of TIF (Global) is referred to as ISIS or The ISIS Foundation.

TIF (Australia) is the core support hub of ISIS and coordinates and resources the work of ISIS around the world to achieve our mission.

All ISIS entities have adopted uniform and globally applicable policies in relation to all aspects of operations including, for example, corporate governance, child protection, employment, finance, fundraising, communication, privacy and antimoney laundering. Where necessary, these have been specifically adapted to ensure compliance with local laws and respect for local custom.

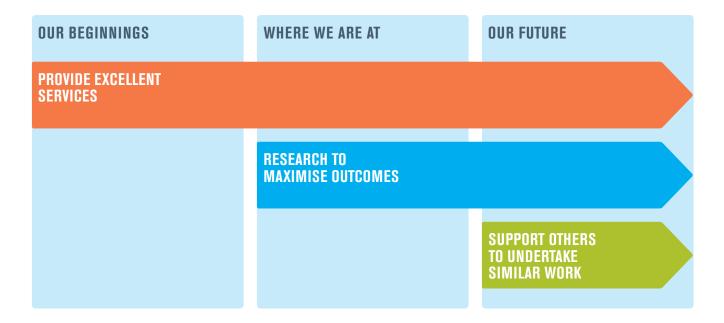
One of the key successes of ISIS has been the inter-linked support of the ISIS Businesses, which are a set of financial services businesses, namely ISIS Limited (ISIS Ltd), ISIS Asia Pacific Pty Limited (ISIS AP), ISIS Law and ISIS Funds Services (ISIS FSL). ISIS Ltd provides indirect support for TIF Global, while ISIS AP provides direct funding for administration and infrastructure costs globally. These companies have together provided over US\$ 4 million of direct and indirect funding of administration and infrastructure costs and support for emergency project costs. This has allowed us to build a solid central infrastructure to resource and inform our work on the ground. It has also allowed donors who support our project work to be sure that 100 cents in every dollar will go directly to project and project related costs. The ISIS Family Tree on the opposite page explains how we all fit together.

ISIS PEOPLE WORK
HARD, HAVE FUN,
AND ALWAYS
REMEMBER THAT
THEIR WORK IS FOR
CHILDREN IN NEED,
THEIR FAMILIES AND
THEIR COMMUNITIES.
THIS PHILOSOPHY
UNDERPINS ALL THE
WORK OF ISIS AND
THE ISIS BUSINESSES.



<sup>\*</sup> Currently in the process of being registered

8 / ISIS FOUNDATION ISIS STRATEGY



## ISIS STRATEGY

THE CORE UNDERPINNING
PHILOSOPHY OF ISIS'S WORK
IS THAT WE ALWAYS,
ALWAYS DO WHAT'S BEST
FOR THE KIDS AND FAMILIES
WE SUPPORT. WE HAVE
DEVELOPED A DETAILED
DEVELOPMENT PHILOSOPHY
OVER THE LAST TWO YEARS
TO ENSURE WE ACHIEVE
THIS GOAL IN THE SHORT,
MEDIUM AND LONG TERM.

The ISIS team is working towards a 3 to 5 year strategy which has three main pillars, as follows:

## SERVICE EXCELLENCE

Our number one priority is to support the communities that we partner with, to the absolute best of our ability, in accordance with best practice worldwide. We are committed to continual review and monitoring of our work, and deepening of our service to our communities, to ensure we meet a standard of global excellence in our work.

## RESEARCH

Research is at the heart of all that we do, and informs all our projects. As ISIS grows, we plan to expand and strengthen our research teams, so we can ensure that we understand over the short, medium and long term, the impact of our work: both positive and negative. As we build out our research focus over the next few years, we intend to widely share lessons learned, so that others can learn from our mistakes, as well as our successes.

## THE ISIS TOOL KIT: SUPPORT OTHERS TO UNDERTAKE SIMILAR WORK

Our dream is to move from supporting tens of thousands of people in need, to hundreds of thousands of people in need. Our aim is not to run more projects, but to create a third pillar of our work - supporting others. Our focus will be to build our capacity to support others from different regions and countries who would like to undertake similar projects, through training, developing 'replicability' streams and "the ISIS Tool Kit". We believe that if we can help others who wish to follow a similar path to ours, we can help hundreds of thousands more people in need.

## **PARTNERSHIPS**

PARTNERSHIPS ARE CRITICAL TO THE SUCCESS OF ISIS AT EVERY LEVEL, RIGHT FROM THE PARTNERSHIP BETWEEN THE ISIS BUSINESSES AND THE ISIS FOUNDATION, TO THE PARTNERSHIPS WITH OUR DONORS AND OUR COMMUNITIES ON THE GROUND.





Recognising the incredible power of cross discipline, cross-border partnerships, ISIS has established long-term, secure relationships with a handful of major partners. We have benefitted hugely from relationships with partners such as Aspen Reinsurance and their staff, the ISIS Kids Sponsors, the Kadoorie Charitable Foundation and PricewaterhouseCoopers. Our work would not be possible without them. We cannot thank them enough for their unstinting commitment towards the ISIS mission and communities in need

In 2010, ISIS embarked on a new partnership with Allens Arthur Robinson, a leading law firm in Australia. We highlight this partnership in this report, as an example of the power of partnerships and how deeply embedded they are in the work we do.

## ALLENS ARTHUR ROBINSON AMBASSADORS TO ISIS

In 2009, following the success of the PwC partnership, which has provided ISIS with a year-long secondment of one of their top quality chartered accountants for five years running, ISIS embarked on a partnership with Allens Arthur Robinson, a prestigious and well known law firm in Australia.

Their corporate and tax teams were already working with ISIS and PwC on a pro-bono basis. Building on this relationship, a partnership was formed which provides ISIS with a nine month long secondment for one of their top quality corporate lawyers to be the Allens – ISIS Ambassador working in the Sydney office as well as on project site. ISIS has been fortunate to continue with this partnership in 2011.

### WHAT DOES ALLENS SAY?

Michael Rose, Chief Executive Partner at Allens says, "The Ambassador programme with ISIS is part of our commitment towards the UN Global Compact. The things we do must be done well and have a real and lasting impact. We are delighted that one of our high performers gets the chance to use their legal skills in the unique structure of ISIS across various jurisdictions, learning a whole range of skills in the process, which they will bring back to Allens."

## FIRST ALLENS ISIS AMBASSADOR, EDWINA SINCLAIR

"I was attracted to the secondment opportunity at ISIS as a way to challenge myself both personally and professionally. I enjoyed the crossjurisdictional aspect of the position and working with a committed and inspiring team. I utilised my skills and training as a lawyer in new and exciting ways, and felt that the work I did assisted ISIS on the ground in Nepal and Uganda."

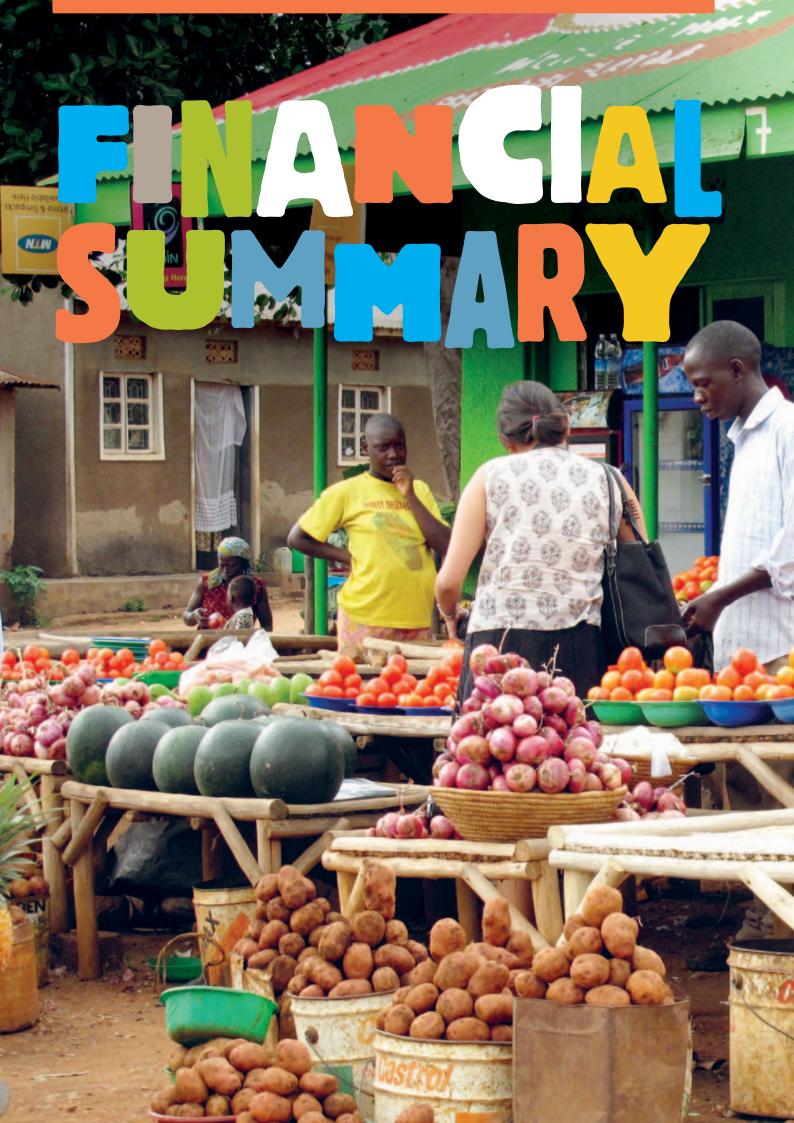
## WHAT DOES ISIS SAY?

The formation of this partnership demonstrates ISIS's belief, that to actually affect social change, the world of business must truly collaborate with the world of development. Allens has provided invaluable legal support to ISIS which was critical to setting in place proper governance and compliance structures for the Foundation. Suma Tekkatte has joined ISIS in 2011 as the next Ambassador. ISIS is incredibly grateful to have garnered the support of Allens, one of the best law firms in the country, and the impact of their support to us is profound.







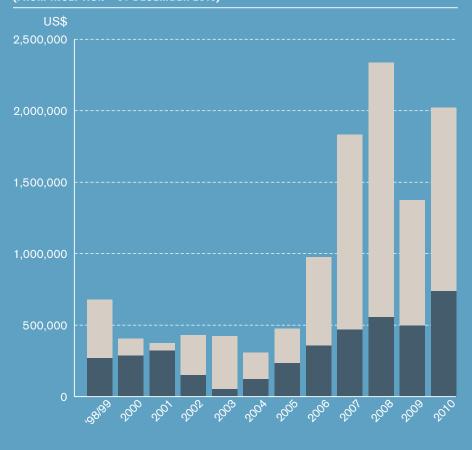




## **INCOME OVERVIEW**

ISIS HAS BEEN EXTREMELY FORTUNATE TO HAVE RECEIVED SUPPORT FROM A WIDE RANGE OF DONORS OVER THE YEARS. WE HAVE RECEIVED A TOTAL OF US\$ 11.9 MILLION SINCE OUR INCEPTION IN 1998, OF WHICH OVER US\$ 4 MILLION WERE CONTRIBUTIONS FROM THE ISIS BUSINESSES TOWARDS ADMINISTRATION AND INFRASTRUCTURE COSTS FOR ISIS AND SOME PROJECT RELATED COSTS. TREMENDOUS THANKS TO ISIS DONORS FOR THEIR BELIEF AND FAITH IN THE WORK OF ISIS AND THEIR ON-GOING COMMITMENT AND SUPPORT.

## DONATIONS TO THE ISIS FOUNDATION (FROM INCEPTION - 31 DECEMBER 2010)



## 2009 - 2010

The ISIS Businesses are the Foundation's biggest donor and have historically funded all administration and infrastructure costs of the Foundation. This ensures that 100% of the donations received from other donors are sent directly to ISIS projects for Nepal and Uganda partner organisations, staff on the ground and specialist managers working in USA for research, medical advisory and equipment collection programmes.

- In 2009, US\$ 1.4 million was donated to our work, of which US\$ 0.5 million was contributed by the ISIS Businesses.
- In 2010, US\$ 2.2 million was donated to our work, of which US\$ 0.7 million was contributed by the ISIS Businesses.

During the period, we received significant financial support Kids Sponsors, the Kadoorie Charitable Foundation and the Kathmandu Kids Club. ISIS has also had significant support from new Australian donors, including Michael Skala, the Portland House Foundation and the Uechtritz Foundation. In addition, ISIS has partnered with the first ever ISIS Administration and Infrastructure Partner, the Helen and Bori Liberman Family. We are proud to be working with a family of such standing and integrity, and delighted to welcome Laini Liberman to our board in Australia.

These fantastic efforts in supporting ISIS have had a massive impact on the number of children, families, and communities we support in Nepal and Uganda.

The ISIS Group

External Donors

## **EXPENDITURE**

NEPAL EXPENDITURE
DURING 2009
AND 2010 WAS
APPROXIMATELY
US\$ 1.1 MILLION.
THIS HAS DECREASED
FROM 2007 AND
2008, DUE TO
SIGNIFICANT PROJECT
PLANNING FOR THE
NEXT THREE YEARS
IN THE HUMLA REGION
FOR 2011 ONWARDS.

## **NEPAL PROJECTS**

PROJECT	EXPENDITURE 2009/2010 (USD)	KEY ACHIEVEMENTS
Management in Nepal	126,075	Overall programme management     Four fabulous staff     Project planning, implementation, capacity building, monitoring and evaluation of all Nepal partner organisations and projects     Assisting partner organisations with registration and compliance requirements and ensuring that all partners are exercising good governance
WORKING WITH HUMLIS Community Infrastructure in Humla	92,510	<ul> <li>Village by village community development</li> <li>Continuation of the provision of community infrastructure – smokeless stoves, clean drinking water, greenhouses, solar lights and building materials</li> <li>Infrastructure set up in Humla</li> <li>Hiring a Humla Programme Manager</li> <li>Provision of nutrition and non-formal education classes for women and children</li> <li>Project planning for 2011-2013, developing the Humla Plan</li> </ul>
Mobile Tibetan Medical Health Care	22,863	<ul> <li>Supporting health care in Humla</li> <li>One Tibetan 'Amchi' or health practitioner who spends 9 months every year travelling from village to village providing health care</li> <li>Provision of health care for over 2,693 people in Humla</li> <li>Medications and transport of medications</li> </ul>

NUMBER OF PROJECTS IN NEPAL

6

IN COUNTRY PARTNERS

5

ISIS STAFF IN NEPAL (DIRECT AND THROUGH PARTNERS)

67



## **NEPAL PROJECTS (CONTINUED)**

PROJECT	EXPENDITURE 2009/2010 (USD)	KEY ACHIEVEMENTS
Remote Mountainous Education	67,454	<ul> <li>Enabling education 10,000 feet above sea level in Yalbang</li> <li>7 wonderful staff</li> <li>Supporting 122 children</li> <li>Improving hostel accommodation by the addition of a new metal roof, new bunk beds, new toilets, and a solar electricity generator</li> <li>Resourcing the school with a new teacher</li> <li>Construction of 3 new classrooms which were completed, inaugurated and handed over to the school management board in October 2010</li> <li>Provision of medical health care services for the children by Tibetan health care practitioner</li> </ul>
Child Wellbeing	708,880	Care and full support of 136 children who were trafficked  • 46 brilliant staff  • At end 2010, 38 children moved to boarding schools, 5 to a Youth Flat, 20 were reintegrated back into their community, 4 graduated from ISIS financial support and 69 children were still in ISIS homes  • Provision of education, nutrition, health and post school options  • Reconnecting children with their families of origin
KATHMANDU		_
Free Basic Health Care in Kathmandu	37,053	Supporting 4 health clinics  • 6 dedicated staff  • Laboratory services for testing  • Provision of medication, equipment and medical supplies  • Training and development
Educating girls in Kathmandu	22,650	Supporting education of 100 disadvantaged girls  • 2 hands on social workers  • Provision of health care for 100 girls  • Support to families in need as required
Other Project Expenditure	4,255	This covers a range of expenses across all projects



## BUILDING INFRASTRUCTURE

2009 and 2010 has been a period of building infrastructure to support the Foundation, in particular the finance function globally. The finance team is now well resourced with quality staff. Much time has been invested into improving processes, updating policies and aligning financial reporting standards globally. All Foundation entities now report under International Financial Reporting Standards (IFRS) and all entities are up to date with audit and compliance requirements. The team has had a huge amount of support from PwC with pro bono tax and accounting advice provided as well as the invaluable contribution of a Senior Accountant on secondment as the PwC Ambassador. We have also been fortunate enough to have our Australia and Bermuda audits performed by KPMG pro bono.

NUMBER OF PROJECTS IN UGANDA

2

ISIS STAFF IN UGANDA (DIRECT AND THROUGH PARTNERS)

56

APPROXIMATELY
US\$ 1.2 MILLION
WAS SPENT ON OUR
UGANDA PROJECTS
IN 2009 AND 2010.
THIS HAS INCREASED
SIGNIFICANTLY SINCE
2007 AND 2008 AS
A RESULT OF OUR
DEEPER RELATIONSHIP
WITH THE KIWOKO
HOSPITAL AND OUR
COMMITMENT TO
THE EBENEZER
BOYS PROJECT.

## **UGANDA PROJECTS**

PROJECT	EXPENDITURE 2009/2010 (USD)	KEY ACHIEVEMENTS
Management in Uganda	78,900	Overall programme management  • Hiring three new staff to assist the Country
		Manager in focusing on project needs on the ground
		<ul> <li>Project planning, implementation, capacity building, monitoring and evaluation of Kiwoko Hospital projects</li> </ul>
		Ensuring that good governance is being exercised in Uganda
Kiwoko Hospital and	1,010,019	Supporting the Kiwoko community
International Clinical Oversight		<ul> <li>14 brilliant NICU nurses, 23 maternity nurses and 14 support staff</li> </ul>
		Capacity building and international medical advisory services
		Provision of medical equipment and supplies for NICU and maternity health department
		Supplying nutrition, medical and counselling support for HIV/AIDS patients
		Ensuring patients receive subsidised diabetes medication
		Guaranteeing educational support for HIV/AIDS orphans and children
		<ul> <li>Planning research and clinical programmes with Harvard University and Brigham Women's Hospital</li> </ul>
		Provision of expert medical volunteers to the hospital
		Training and development
Ebenezer Boys	71,548	Educational support for 25 ex-street children
		• 2 wonderful staff
		<ul><li>Transitioned all boys into boarding schools</li><li>School holiday workshops on life skills</li></ul>
		Family links workshops on parenting
		Programme planning to ensure children
		are equipped to look after themselves in the future
Other Project Expenditure	5,627	This covers a range of expenses across all projects

## RESEARCH, MONITORING AND EVALUATION

Research, Monitoring and Evaluation

68,070

## Undertaking research

- Research, Evaluation and Monitoring Manager undertaking formal research on efficacy of programmes in Humla
- Researching future programme designs and best practice in the areas of food security and microenterprise
- Designing and implementing baseline survey for Humla region in Nepal and Luwero region in Uganda

IN COUNTRY PARTNERS

# NEPAL

SET AGAINST THE MAJESTIC HIMALAYAS, NEPAL IS A BEAUTIFUL COUNTRY, ALBEIT ONE OF THE POOREST IN THE WORLD. HAVING BECOME A REPUBLIC IN 2008, IT IS STILL STRUGGLING TO OVERCOME ECONOMIC AND POLITICAL INSTABILITY.





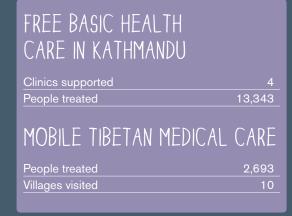
18 / ISIS FOUNDATION NEPAL OPERATIONS

## AT A GLANCE ISIS IN NEPAL

ISIS HAS WORKED IN NEPAL FOR OVER 13 YEARS IN BOTH KATHMANDU, THE CAPITAL, AND IN HUMLA, A REMOTE AND HIGHLY DISADVANTAGED REGION IN THE NORTHWEST. ISIS PROJECTS FOCUS ON HEALTH AND EDUCATION PROGRAMMES FOR CHILDREN AND THEIR FAMILIES IN PARTNERSHIP WITH LOCAL COMMUNITIES. PROJECTS HAVE RANGED FROM ALTERNATIVE TECHNOLOGY COMMUNITY DEVELOPMENT PROJECTS, REMOTE MOBILE HEALTH CARE SERVICES AND ANTITRAFFICKING INITIATIVES IN HUMLA, TO EMERGENCY RELIEF, RESCUE AND CARE OF TRAFFICKED CHILDREN AS WELL AS HEALTH CARE FOR DISADVANTAGED COMMUNITIES IN KATHMANDU.

# EDUCATION IN HUMLA Kids enrolled in pilot residential school 122 Non-formal education classes 19 Technical and vocational scholarships provided 7 EDUCATING GIRLS IN KATHMANDU Children supported 100

COMMUNITY INFRASTRUCTURE		
Pit latrines installed	903	
Smokeless stoves subsidised	738	
Solar lighting installed	379	
Safe drinking water installed	3 systems for 270 households	
Greenhouses installed	23	
Solar driers now in villages	6	
Slow water sand filters trialled	6	
Villages followed up	591 households from 10 villages	





CHILD MELLBEING	
Rescued children	136
Graduated children	4
Children reintegrated	20
Children in boarding schools	38
Children in homes	69
Children in Youth Flats	5



## HUMLA

HUMLA IS A REMOTE REGION IN NORTHWEST NEPAL, BORDERING TIBET, AND FARES POORLY ON ANY DEVELOPMENT MEASURE. HUMLA HAS THE NATION'S LOWEST LITERACY RATES, HIGH MATERNAL AND INFANT MORTALITY WELL ABOVE THE NEPALI AVERAGE AND FOOD SHORTAGES EACH WINTER, WHEN FAMILIES ARE SOMETIMES SNOWED IN FOR MONTHS.

## **WORKING WITH HUMLIS**

Access to the region is by two weeks walk from the nearest road, or small plane from the Indian border to Simikot, the 'capital', at around 9,800 feet. From there, villages are only accessible by foot or by horse. Communities in Humla suffer entrenched disadvantage and poverty, as a result of the region's remoteness and harsh conditions. In particular, the situation for children and young people is dire. With very poor quality education and healthcare facilities, poor housing, inadequate sanitation and other basic infrastructure, limited food supply and almost no cash economy, it is difficult for communities to sustain their children.

During the time of the civil war, many desperate families fell afoul to child traffickers, who convinced them to pay for their children to be taken to Kathmandu in the guise of educating them and keeping them safe while the war raged in the mountains. The result of this is that thousands of children ended up in Kathmandu in sub-standard homes run by opportunists, living in appalling conditions and at serious risk of ending up in the sex or slave trade. Not only are Humli children in Kathmandu at serious risk, but Humli community structure has deteriorated by their children's departure over those ten years of civil unrest.

Humli people often get forgotten in Nepal. It is for this reason that ISIS decided to focus on this region – it deserves not to be forgotten. We have a long-term commitment to Humla and its people and we have now been working in the region for 13 years. Our work in 2009 and 2010 has focused on four main areas – building community infrastructure, providing basic health care, building remote residential education facilities for children and supporting child wellbeing, specifically related to child trafficking.

### COMMUNITY INFRASTRUCTURE

Given Humla's remoteness, most families have survived using resinous wood to light fires in their homes for warmth, lighting and to cook their food. However, this has led to high rates of respiratory and eye infections. Also, the community has accessed water from running streams, with high bacterial content which has led to many communicable diseases. The growing period in this mountainous region is only 3 months of the year and so families often face severe food shortages in the harsh winter months, causing malnutrition. Our goal in working with the Humli community has been to improve basic community infrastructure such as cooking technology, access to clean drinking water, pit latrines, greenhouses, solar lights and driers which has brought about dramatic changes for the people of Humla.

The combination of solar lighting systems and smokeless stoves has reduced indoor air pollution by more than an order of magnitude, as measured by the amount of particulate matter inside homes, and has contributed to the decreasing rates of symptoms of respiratory disease in the villagers living in those homes. Greenhouses have been built and are in use, supplementing villagers' diets even in the cold months of the year, when traditionally meals lacked fresh vegetables. Solar driers have been installed and are used to dry foods, so they can be stored for longer periods without going bad, helping to ensure food security. Nutrition programmes have resulted in lower levels of malnutrition in children.

Hundreds of villagers have received training on the importance of maintaining and using a clean water supply, proper toilet technique, broad diet and indoor air cleanliness that have improved their quality of life and their understanding of avenues leading to good health. Thousands of villagers have shared information with us for our baseline and follow-up surveys. This information has helped us monitor health, social and attitudinal changes associated with our projects.



### MOBILE TIBETAN MEDICAL CARE

In Humla, medical service is generally unavailable due to the topography of the region, which makes transportation and communication across Humla almost impossible for the local people. The Tibetan Health Care programme is a traditional medical/health service in the form of a mobile camp which brings health care to the people of Humla.

This project has had a significant impact on the health of the people of upper Humla, where other functional health services are few and far between. In 2009 and 2010, Kelsang Tsering, an experienced Tibetan medical health care practitioner or 'Amchi' trekked through Humla for 9 months of each year, treating 2693 people from 10 villages. He has also referred patients requiring further medical attention to disparate local health posts or to the main government hospital based in Simikot. He also attends to the Yalbang School to treat the children and has delivered medicines to a local monastery so that people in dire need can access them when he moves to Kathmandu during the winter months.

NUMBER OF HOUSEHOLDS IN HUMLA:\*
7553

POPULATION OF HUMALA:\*
49,300

HIGHER SECONDARY SCHOOLS (TO GRADE 12):\*

5

ADULT
LITERACY RATE
IN HUMLA:\*

27%

## **EDUCATION IN HUMLA**

ISIS continues to work on the fundamental issues that need to be resolved to remove the obstacles to children staying in their communities and to reduce child trafficking. The lack of quality high-altitude schools means that parents feel their children must leave the district in order to survive. We have worked for several years with the Himalayan Children's Society (HCS), an upper-Humla based non-profit organisation, to improve the school and hostel infrastructure for Yalbang School. With HCS, we hope to build a sustainable model of providing education to children in remote mountainous settings, so families don't feel the need to send their children away from them for schooling. 122 children (74 girls and 48 boys) now have access to good quality education, regular teachers and comfortable residential facilities. They also have access to medical care and run a thriving extracurricular programme 10,000 feet above sea level. This programme is now commended by regional and district education offices as well as other NGO's as an example of best practice education in Humla and we hope to encourage other organisations to set up similar models for education in Humla and in other remote mountainous communities around the world.

In addition to supporting the Yalbang School, during 2009 and 2010 ISIS has provided seven Humli students with scholarships for technical training at the Karnali Technical School where the students undertake courses for 29 month periods. This ensures that local Humli's are given the opportunity to continue to study and work in their own community. We also provide non-formal education to Humli mothers and children in several villages.

FEMALE LITERACY RATE:\*

9%







## CHILDREN UNDER 19:\* 19,683

## DISTRICT HOSPITAL IN HUMLA:\*

### CHILD WELLBEING

The ISIS Children's Foundation (ICF) was established in Kathmandu several years ago as an urgent response to trafficking of children from Humla to Kathmandu, during the period of political unrest in Nepal. ISIS found and rescued the children from four awful homes, jammed with children in abject poverty, possibly on their way to being sent to prostitution and slave rackets. Malnutrition, lack of hygiene and illness was the norm. Several of the children were near death. We fought for over two years to obtain guardianship of these children and get them into safety.

Over the last five years, with the support of 13 incredibly generous families, ICF has grown from providing first class emergency care to the 136 trafficked children whom we rescued in 2006, into an organisation that has improved the health, educational and emotional outcomes for children who have been trafficked. We have worked tirelessly to find the ISIS kids families and to support the ISIS kids to reconnect to their family of origin as the political situation stabilises. We work with The Himalayan Innovative Society (THIS) to facilitate the reconnection, reunification and repatriation of the children from our homes in Kathmandu to their families and villages in Humla.

We have now found the parents and/or established links back to the families of all the ISIS kids and have transferred legal responsibility back to the respective families, where possible. In 2009 and 2010, 20 kids were successfully reintegrated with their families of origin with our educational support, and almost half of the kids have returned home to visit their families at least once. We have established a phone for parents in Humla, so parents can call their children. ICF works very hard to maintain the kids' awareness of their culture, village and family of origin. At the end of 2010, we were funding and managing 7 kids' homes and one 'Youth Flat', in addition to having 38 of our older kids in boarding schools. Much to our delight, four of the ISIS children (now adults!) have graduated and are living independently. This is a huge milestone for ISIS.

## RESEARCH

As set out earlier in this report, research is one of the three main pillars of ISIS's strategy. In 2009 and 2010 Dr Kimber Haddix-McKay, our Research, Monitoring and Evaluation Manager, along with the research team that includes students from local universities, researched indoor air pollution in Humli homes, evaluated the use of solar technologies, tested drinking water supplies, conducted community participation meetings and started working on food security and microenterprise issues in Humla. As this report is being written, work has also begun on redesigning our baseline and follow up surveys to help us track changes in the community and impact of our projects.







District Development Plan, 2008, District Information and Documentation Centre, District Development Committee, Humla; District Profile and Analysis, 2008, District Development Committee, Humla; Population of Nepal, National Planning Commission, Government of Nepal; DCWB, 2010 'The state of children of Humla District'



## KATHMANDU

IN ADDITION TO THE WORK ISIS DOES IN HUMLA, WE HAVE ALSO SUPPORTED LOCAL PARTNER ORGANISATIONS IN AND AROUND KATHMANDU TO ASSIST THEM IN REALISING THEIR HEALTH AND EDUCATIONAL GOALS. WE BELIEVE THAT BUILDING THE CAPACITY OF LOCAL ORGANISATIONS ENSURES THEIR ABILITY TO PARTICIPATE IN THE DEVELOPMENT OF THEIR COMMUNITIES. OUR AIM IS TO WORK WITH THESE ORGANISATIONS TO BUILD THEIR INFRASTRUCTURE AND STAFF EXPERTISE.



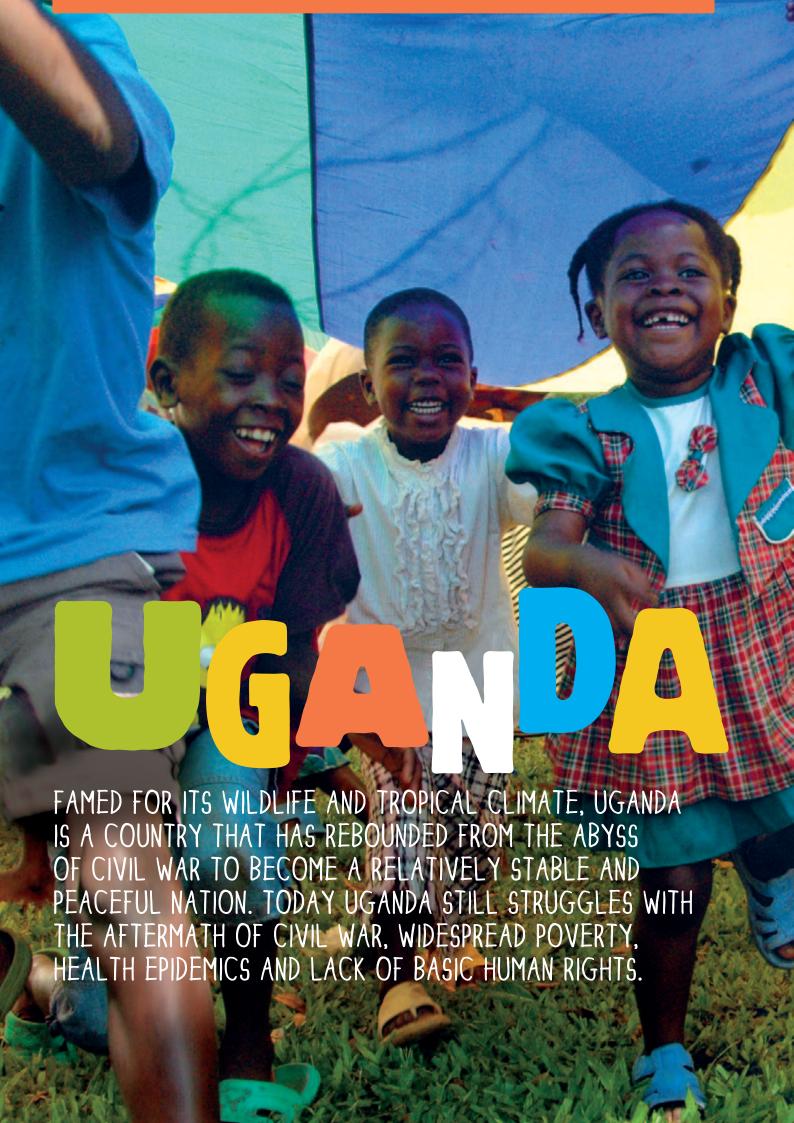


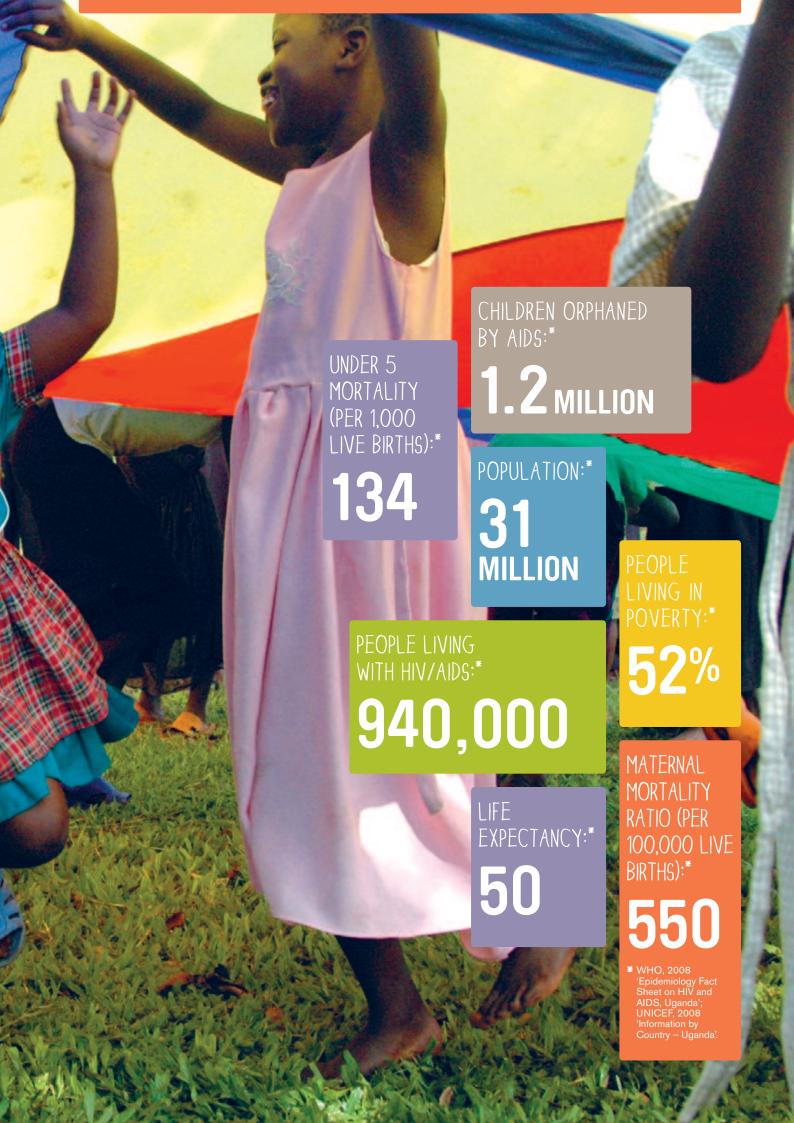
### **EDUCATING GIRLS IN KATHMANDU**

Hands In Outreach (HIO) is a superb organisation which aims to address the illiteracy and lack of formal education in Nepal, and especially helps to redress the huge gender disparity in education. Through their programmes, HIO supports kids and families who they find living in dire conditions in Nepal. Over 100 children, 96% girls, are provided with access to good quality education. ISIS supports HIO's management costs, family support, and cost of the children's health care. Our support helps HIO ensure that these educational opportunities are fully supported. This has a significant impact on the long term development of the families and communities where the children are from, helping their families to break the poverty cycle. Many of the girls who would not have had the chance to even attend school are now doing extremely well, even being accepted into Universities in 2010!

### FREE BASIC HEALTH CARE IN KATHMANDU

The Himalayan Medical Foundation (HMF) provides free basic health care services to severely disadvantaged people, especially women and children, through small clinics in and around Kathmandu. The clinics are open year-round, 5 days a week and on average, for 4 hours a day. ISIS funding supported four clinics in Kathmandu - Benchen Clinic, Pharping Clinic, Nagi Clinic and Mangal Deep Clinic. Through these clinics, ISIS has been able to provide more than 13,000 people with basic medical treatment as well as free check-ups, laboratory services for routine testing, free prescriptions and free dental checkups. We have worked with HMF to assist them to build the capacity and infrastructure of their clinics and to run them efficiently and effectively. In particular, our focus is on training and skill development, assisting with the supply of medical equipment, and the building of infrastructure so the clinics can become self-sufficient. As a result, since 2010, the Mangal Deep Clinic has been able to operate without the assistance of ISIS.





## AT A GLANCE ISIS IN UGANDA

IN 1998, ISIS STARTED WORKING IN UGANDA, IN THE NAKASEKE DISTRICT, PART OF THE LUWERO REGION. THE LUWERO REGION WAS THE EPICENTRE OF CIVIL WAR IN THE 1970'S AND 80'S. THROUGH 13 YEARS OF PARTNERSHIP WITH A RURAL HOSPITAL, KIWOKO HOSPITAL, ISIS HAS FOCUSED ON SUPPORTING COMMUNITY BASED HEALTH CARE INITIATIVES, ESTABLISHING A NEONATAL INTENSIVE CARE UNIT, STRENGTHENING THE MATERNAL HEALTH PROGRAMME, AND WORKING WITH ADULTS AND CHILDREN LIVING WITH HIV/AIDS. WE ALSO SUPPORT A SMALL PROJECT FOCUSED ON REHABILITATION OF EX-STREET CHILDREN.

## MEDICAL EQUIPMENT COLLECTION, ADVISORY SERVICES AND TRAINING

Equipment collected	16,315 kgs
Containers sent from US to Uganda	2
Medical queries answered via email	50
Training sessions for hospital staff	25

## COMMUNITY BASED HEALTHCARE

Villages visited through community based health care 104
Kilometres travelled 21,091
Number of diabetes patients seen and visited at home 125

## NEONATAL INTENSIVE CARE

Babies born	1,232
Babies followed up at 6 months	395
Emergency transport for babies	91
Number of destitute mums	
provided with nutritional support	76
Average number of nurses on duty per quarter	17

## MATERNITY CARE

Number of mothers admitted	4,046
Number of caesareans	726
Number of complications	
during labour	189
Number of nurses on	
average per quarter	17

## HIV/AIDS

Adults supported	200
Patients provided with	
family planning services	25
Children supported	130
Orphaned children supported	35

## EBENEZER BOYS

Street children supported 2

## KIWOKO HOSPITAL

KIWOKO HOSPITAL IS ABOUT 50 MILES OUTSIDE OF KAMPALA, IN THE HEART OF THE LUWERO TRIANGLE (AN AREA DEVASTATED BY IDI AMIN AND MILTON OBOTE'S TROOPS). IT STARTED AS A CLINIC UNDER A TREE IN 1988 BY AN IRISH MISSIONARY WITH A DESIRE TO AID THE PEOPLE OF A COMMUNITY DEVASTATED BY WAR. IT IS NOW A 25-ACRE COMPOUND EMPLOYING OVER 350 STAFF, WITH 270 PATIENT BEDS AND OFFERING A WIDE RANGE OF MEDICAL SERVICES.





Although the Hospital has only 6 doctors to service a catchment area of 500,000, it has a full range of generalist ward facilities in addition to maternal health care, specialised new-born care and specialist care for people with diabetes, HIV/AIDS and tuberculosis. Pharmacy, laboratory and nursing training are provided by the hospital with nationally accredited courses. In addition to these facilities, Kiwoko runs a sizable community based health care department, through staff and volunteers who deliver services to the community. Immunisation, school training, distribution of bed-nets and pit latrine slabs are also part of the programmes.

Over 13 years of partnership, our aim with this project has been to develop the hospital and its services, particularly those that support children, directly or indirectly through families and mums, so that the community can sustain their long-term medical needs, therefore improving lives overall. Our support has ranged from community based health care (CBHC) to tertiary health care initiatives on the grounds of the hospital itself. Our particular focus has been specialised new-born care, maternal health and services to remote patients and their families living with diabetes and HIV/AIDS.

## SPECIALISED NEW BORN CARE

In 1998, ISIS saw the urgent need for a specialist unit to care for newborn babies at Kiwoko Hospital, which resulted in the funding and building of a neonatal intensive care unit (NICU) in 2000. The programme was also designed to provide medical advisory services and capacity building to the staff. From 2006, the original NICU had outgrown its capacity, supporting more than 500 babies every year, and larger facilities were necessary to accommodate its growing needs.

The new facilities were completed in late 2009, through a partnership between ISIS and Aspen Reinsurance. The official opening of these new facilities in May 2010 represented a major milestone for ISIS, Kiwoko, and the communities that are served by the hospital.

The newly built unit can hold up to 36 beds, which is about three times the number in the old NICU, and is also neatly demarcated so nurses can get to the sickest babies as quickly as possible. Funding for babies of particularly destitute mums and providing supplementary feeding to boost nutrition of these mums has continued, as well as emergency transportation of sick babies that need specialist care or testing elsewhere.

Beyond funding support, ISIS also helps Kiwoko Hospital with programme design, medical protocols, and running regular training and development for the staff – provided both locally and through specialists sent to Kiwoko every year. For years the University of Washington's Neonatology Department has been informally supporting our programme through the hard work and dedication of Dr. Maneesh Batra and others on his team. During the writing of this report, we are working towards formalising this powerful partnership.

### MATERNAL HEALTH PROGRAMMES

ISIS began supporting maternal health programmes at Kiwoko Hospital in 2007, with the aim of optimising the quality of care to the infants and their mothers by assisting and resourcing the staff to manage effective delivery of services. In 2009, with the help of Aspen Reinsurance and the Synchronicity Foundation, ISIS was able to provide the hospital with a brand new maternal health department. The new Maternity Ward became operational in late 2009 and almost overnight was completely occupied - a huge sign of community participation and need. As a result of the improved facilities, an increasing number of mothers are choosing to come to the hospital to give birth, particularly those requiring emergency assistance after encountering complications in labour. The new ward can now provide care for more than three times the number of mothers than the old ward, with both antenatal care and raising maternal awareness now a focus of the new programme.

In 2010, a new relationship was established between ISIS, Kiwoko Hospital, and Brigham Women's Hospital/Harvard University in Boston, USA. The goal of the partnership is to work together to improve the health of the people of the Luwero region, particularly mothers and babies utilising the maternal health department, and to support sustainable models of surgical, obstetric and gynaecological care at Kiwoko Hospital. Dr. Julianna Kane, an Obstetrician and Head of the Global Health Programme at Brigham, visits Kiwoko Hospital three times a year with a resident to work collaboratively with ISIS and Kiwoko Hospital to undertake a programme of training and development in maternal health for hospital staff. We are hugely excited by this new partnership and the opportunities it will bring for improved support to mothers in need.



### PEOPLE LIVING WITH HIV/AIDS

The HIV clinic at Kiwoko Hospital started in 1983, in the face of overwhelming need, and was able to offer only very basic testing and counselling to the local community. With an estimated 940,000 of Uganda's population living with HIV/AIDS, there is a huge need for increased support. ISIS began supporting HIV/AIDS work in 2005, filling programme gaps that fall outside the usual ambit of other international donors. These include support of a comprehensive nutrition programme that seeks to build the health of those needing to access lifesaving antiretroviral medication. Over the years, crucial progress has been made in meeting the nutritional, medical and educational needs of individuals living with HIV/AIDS and in turn supporting their families.

In 2009 and 2010 ISIS supported 200 HIV positive adults and 165 HIV positive children. This care included free medical treatment, nutrition, family planning services such as counselling and testing, health education, and provision of school fees and scholastic materials for 35 AIDS orphans. The HIV/AIDS team works in a number of districts, with a community counsellor visiting schools and locals who are HIV positive. As the counsellors visit people in the community, they provide basic drugs to combat opportunistic infections. Counselling and education was provided to over 500 mothers in the local districts. Our work represents only a drop in the ocean of need, and we dream of doing more for these clients in the years to come.





BIRTHS ATTENDED BY SKILLED HEALTHCARE WORKERS:\*

44%

NUMBER OF DOCTORS IN LUWERO REGION:\*

8

## COMMUNITY BASED HEALTH CARE

ISIS believes that community based health care in the Luwero region is key to strengthening the community and its development prospects, whilst encouraging people to use the facilities at Kiwoko Hospital and reach out for further support. In 2010 ISIS continued its funding to the Kiwoko Hospital diabetes programme, a cause which is crucial in a country where diabetes prevalence is on the rise, mainly due to lifestyle and lack of understanding about this serious chronic disease. The diabetes programme and clinic support the community through providing insulin if required, teaching patients about caring for themselves at home and helping health workers improve their knowledge and skills.

## RESEARCH

During the writing of this report, ISIS is launching a significant baseline community health needs assessment for the Luwero region, to better inform our work. We will be speaking with approximately 500 households to get a clearer understanding of disease prevalence, health seeking behaviour and additional needs in the region.

## **EBENEZER BOYS**

In Uganda, many kids live on the streets because their families have been decimated by AIDS, poverty, or unrest. With approximately 1.2 million AIDS orphans in Uganda, communities are not able to support all of these children. Other children are victims of civil war, escaping terrible poverty or abuse and are forced to go to the city to seek food or money. ISIS supports 25 boys that had been living on the streets, some for more than 8 years. They all now go to boarding schools in the Nakaseke district and are looked after by the ISIS Uganda team. Twelve boys are in primary school, ten in secondary school and three in post-school vocational training. The older boys keep an eye out for the younger ones, and they have developed a sense of community in the years since they have been on the streets.

ISIS works with the boys families with the aim to reconcile the boys to their families of origin wherever safe and possible to do so.

Our overall goal in working with the Ebenezer Boys in Uganda is to support and empower them to live happy, healthy and productive lives in their communities. We hope to break the cycle of destitution and displacement and to help these kids live independently, so that in turn they can assist to lift their own families out of the cycle of poverty.

CHILDREN ORPHANED
BY AIDS (FSTIMATE):\*

32,000





POPULATION SERVICED BY KIWOKO HOSPITAL:\*

500,000

PEOPLE IN LUWERO REGION LIVING WITH HIV/AIDS (ESTIMATE):\*

48,000

EXPECTANCY
IN LUWERO
REGION:\*

46

DISTRICT HOSPITAL IN LUWERO REGION:\*

\* Luwero Information Portal, 'Luwero District 2006 Statistical Abstract'

## CELEBRATION IN KIWOKO



Key ISIS team members, together with some of our Directors, Trustees and partners attended the opening ceremony. The opening was a huge success and represented a major achievement of the partnership between ISIS, Aspen Reinsurance, the Synchronicity Foundation and Kiwoko Hospital. Three times the number of mums and babies can now access high quality maternal and neonatal health care.

ISIS has learnt a great deal about international development over the past 13 years, in particular the operation of maternal and neonatal health care in a rural setting. Much of our learning has been through painful mistakes and constant debate and learning. We hope, looking ahead that we can share our knowledge and experience with others working in the developing world in remote, rural settings who are seeking to support mums and kids as we do.







33 / OPERATIONS REPORT 09/10 SUPPORTERS



## **DONORS & PARTNERS**

ISIS is especially fortunate to have teamed up with a handful of major donor partners. Through long term, embedded relationships with a number of those partners and businesses, ISIS is able to act as a bridge between the world of the lucky and wealthy and the world of the vulnerable and impoverished.

We are also indebted to all the wonderful people who have fundraised on our behalf over the last two years - from running a myriad of events, to staff fundraising initiatives, to trekking to the outer reaches of Nepal - thank you to everyone who has flown the flag for ISIS in 2009 and 2010.

Our Roll of Thank You's is long, but heartfelt!

### **CORPORATIONS AND BUSINESSES**

Aspen Reinsurance, PricewaterhouseCoopers, Allen Arthur Robinson, Ariel Re, ISIS Fund Services, ISIS (Asia Pacific) Pty Ltd., ISIS Limited, Renaissance Re, KPMG.

## **FOUNDATIONS AND TRUSTS**

Kadoorie Charitable Foundation, L&R Uechtritz Foundation, Portland House Foundation, Synchronicity Foundation, The Lancashire Foundation, The Metta Enlightenment Foundation, The Vose Foundation, Weiser Family Foundation, XL Foundation Ltd., Yoskin Family Foundation, The Helen and Bori Liberman Family Foundation.



## INDIVIDUALS, COUPLES AND FAMILIES

Amy Coe & Carol Rohl, Andrew Banks & Pamela Gordon, Ashley and Jake Tracy, Audrey Mandell, B Pinchuk, Bettina & Raoul Witteveen, Bitten & Nick Dill, Brian & Nancy O'Hara, Brian Hall, Carol & Ian Feathers, Chris & Liz Greetham. Jack Turnbull & Janet Clegg, Christina Westholm Schroder, Claire Ladwa, Corey Fagan, Daina Casling, David A. Goodwin, David Ezekiel, Nan Guslander, Dmitry Mnushkin, Edna Hall in Memory of Joseph Hall, Elizabeth Kuzzy, Fiona Robens, Gail Petteruti, Georgia Pettman, The Henderson Family, Jan & John Meriweather, Jane A Lewis, Jay & Beverly Johannsen, Jeff & Ede Convers, Jeffrey & Helen Mahemoff, Jerry & Molly Hackett, Jillyn Cernava, Jim Rice, Joel Schaefer, John & Jean Campbell, John & Sue Buchanan, John Charman, Jon Karnofsky, June Olson, Koala Resources, Lani & Cesar Casasbeaux, Linda Mihalov, Lorraine McConachie, The Lowenstein Family & Hillsdale Fund, Lusandi Family, Marcia Durfee, Margaret DuBrock, Maria Candida & William Meriweather, Marki Knox, Mary Exel, Melissa & Gerald Davis, Michael & Zoe Butt, Molly R. Smith, Mr & Mrs Russell Brooke, Mrs J B Thomson, Nancy O'Neil, Patrick Dumas, Patrick Odier, Paul & Teddi Johannsen, Retrofit Technology, Richard Francis, Richard LeBlanc & Molly Sidwell, Suzi and Barry Carp, Rob & Mary Childs, Robert Levine & Carol Bohmke, Robin & Amber Mehta, Ruth Ingham, Stewart Napier, Sean Moore, Susan Biggs, Steve & Maura Walsh, Todd Fonner, Tom & Terry Heinecke, Tracy Johannsen, Victor and Gail Khosla,

William Wallace, William Wood.

### **GROUPS AND WORKPLACES**

Aspen Staff, Association of Women's Health Obstetrics and Neonatal Nursing, Bermuda Government Donors, Brigham Women's Hospital, Demeter Wealth Management, Enki Fund, Evergreen Medical Center, Harvard University, Insight Visual Communications Ltd., Northwest Medical Center, Overlake Medical Center, Pacific Northwest Association of Neonatal Nurses, Providence Everett, Providence Olympia, RBK Advertising and Design, Seattle Children's Hospital, Swedish Medical Center, The Island Press Ltd., Town of Comox in Memory of Doris Louise Percy, University of Washington Medical Center, Whidbey General, YPO Xmas Party, The Town of Comox in Memory of Doris Louise Percy, Warwick Academy.

## THE KATHMANDU KIDS CLUB MANAGEMENT TEAM

Annie Glasspool, Bonnie McGlynn, Charles Reilly, Eve Foster, Jennie Lee O'Donnell, Karen Clare, Kim Carter, Laura Haynes, Lorraine McConachie, Melissa Moore, Natasha Merino Power, Nicola Jones, Stephen Benn, Sydney Richardson, Tom Quinn, Alex Hasselkuss, Liz Martin, Julia Cooke, Chris Gibbons, Gail Wright, Megan Kempe, Ruth Kempe.

## OTHER

African Aids Angels Project, Amy Johannsen & Kathryn Harper, CBL Nirvana Golf Tournament & Fundraiser, Isabella Boonstra, ISIS Trek for Kids Humla Expedition 2010 (Alex Convers, Caitlin Convers, Iona D'Souza, Adam Power, Jennie Lee O'Donnell, Judith Landsberg, Steve Martin, Neil McConachie, David Pierson, Nick Pritchard, Derek Stapley, Mark Stapley, Barrie Trimingham, Steve Thomson, Calista Todd), Just for Laughs, J & K Martin's Birthday Party, Jeff Schackman, Somersfield Academy, Megan Spangler, Michael Skala's Bar Mitzvah, XL Everest Challenge.

## **VOLUNTEERS**

ISIS volunteers have spent hours of their precious time to help us in any way that they can, and we can't think of enough superlatives to accurately describe them! Many of those volunteers are doctors and nurses who spend time in Uganda training staff at Kiwoko Hospital. Others collect, sort and pack medical equipment and supplies Uganda bound. ISIS volunteers run fundraising events around the world, help with administration and make videos, amongst many other tasks! Thank you to all of you who believe in the ISIS dream!

## ISIS VOLUNTEERS FROM AROUND THE WORLD

Akino Ogawa, Andrea McCormick, Andrew Every, Angela Weibel, Angelita Bautista, Anjanette Allard, Anne Bennett-Smith, April Miller, Asha Furbert, Awino Charlotte, Barbara Hayes, Barbara Jean, Barbara Lett, Becky Clayton, Bill Madden, Bonnie Ronan, Brad Lord, Caitlin Gillis, Catherine Palmer, Cecelia Navaluna, Cheryl White, Chris Duncan, Claire Underhill, Deanne Edwards, Dominic McCabe, Don Wolfe, Elizabeth Choate, Ellen Cella, Eney Gaines Wrinkle, Erin LeBeau, Evie Pfau, Fiona Stewart, Hannah Bauer, Heidi Nakamura, James Newman, Jane Appleyard, Jane Lewis-Alexander, Jeff Schackman, Jennifer Bond, Jim Bowman, Jim Overton, Joan Mahan, Jessica Fuller, Janet Curran, Joseph Kadib, Josie Santos, Joyce Duker, Judith Rollins, Juliet Hardman, Karen Balph, Karly Overman, Kathy Bowman, Kelli Cronin, Kim Stanich, Lauren Johnson, Lauren Thorngate, Leigh Coppin, Leslie Amira, Lori Markham, Louise Doman, Maneesh Batra, Mary Dennison, Mary Hjelm, Maureen Kelley, Megan Spangler, Michelle Park, Mikki Clouse, Molly Macguffie, Mona Zuill, Nancy Foro, Nicolas Madsen, Nicole Chastain, Patti Jason, Peter Rowinsky, Peter Sanderson, Phillip Escadon, Rabin Raj Pokhrel, Rachel Clayton, Robin Narruhn, Ryan McAdams, Sandy Aprill, Sarah Brown, Satkriti Camber, Scott Harbert, Sean Stapley, Shannon Stapley, Stephanie Sanderson, Sue Prueitt, Terrie Rasmussen, Toby Hardman, Tsering Dolkar, Valerie Clayton, Vicki Neil, Vickie Taylor, Vivienne Lochhead, Warren Berkstresser, Wendy Smith, Will Cheney.

In Bermuda, the Kathmandu Kids Club continues its astonishing passion for our work, fundraising for us with many events, treks and other imaginative ways to support ISIS.

### KATHMANDU KIDS CLUB VOLUNTEERS

Abena Okanta-Ofori, Adam Power, Alex Turley, Alexa Petty, Alexa Rosdol, Allison Watson, Brown, Ampah Hubbard, Amy Adderley, Amy Harvey, Anne Bennett-Smith, April Vesey, Arabella Tribley, Arlene Heath-London, Ashley Lee, Ben Wright, Bonnie Langille, Brendan O'Connell, Brita Little, Bryan Walker, Carolyn Bamford, Celine Daly, Chelsea Terceira, Cherie-Ann Dam, Chris Cabal, Chris Pearson, Christine Terceira, Claire Underhill, Darragh Donoghue, David Outerbridge, David Rourke, Denice Repose, Deon Graham, Diane Hill, Dustin Pierce, Ed Christopher, Elena Bernaldez, Ellen White, Emma Msawao, Fiona Hunter, Fiona Lloyd, Francesca Cacae, Gail Tribley, Gina Newson, Heather Deveau, Helen Hill, Helen Hughes, Jacqui Tangey, James Thigpen, Jamie Bough, Jane Appleyard, Janine Advice, Jayne Burnet, Jayne Stevens, Jeffrey Eddy, Jenna Chernetsky, Jennifer O'Farrelly, Jill Pidwerbesky, Joanne Ronane, Jocelyn Morrison, Jose Jiminez, Joy Rothwell, Judith Landsberg, June Caines, Justin Mathias, Karen Peckett, Karlene Parker, Kathleen Moniz, Katriona Smith, Ken Martin, Kerri Howland, Kerry Shaw, Kurt Thomas, Laura Knight, Laura Nubel, Lee Tiller, Libby Sousa, Linda Pollett, Lisa Van Wanrooy, Louise Legg, Louise Park, Magda Szalapac, Maria Hart, Marion Smith, Marissa Pailing, Mark Pomeroy, Marsha Simas, Mary Geraghty, Mary Hjelm, Matthew Coelho, , Maureen Noon, Maureen Ryan, Megan Kempe, Michelle Gallacher, Michelle Hicks, Nadanja Bailey, Nadia Aguiar, Nandi Davis, Natasha Reimmer, Neil McConachie, Nick Pewter, Nicola Arnold, Nikki Thomas, Orlanda Bascome, Pat Foster, Phil Every, Phillipa Nortcliffe, Phillipe Rouja, Piera Defina, Pippa Jones, Rachel Derry, Rachel Sully, Rana Sayegh, Ricardo Maybury, Rodney Davies, Roy Burke, Ruth Marquardt, Sam Norton, Sarah Bonnett, Sarah Dunstan, Sarah Thompson, Savannah Tribley, Scott Watson Brown, , Shante Dill, Sharon Craig, Sinead Dowdall, Sonia Jabon, Susan Pateras, Suzannah Hennah, Sylvia Vander Schee, Tim Hasselbring, Toby Butterfield, Tom Cormier, Tommy Straton, Tonia Szeto, Tracey Keane, Verde Pineda, Yvonne West.











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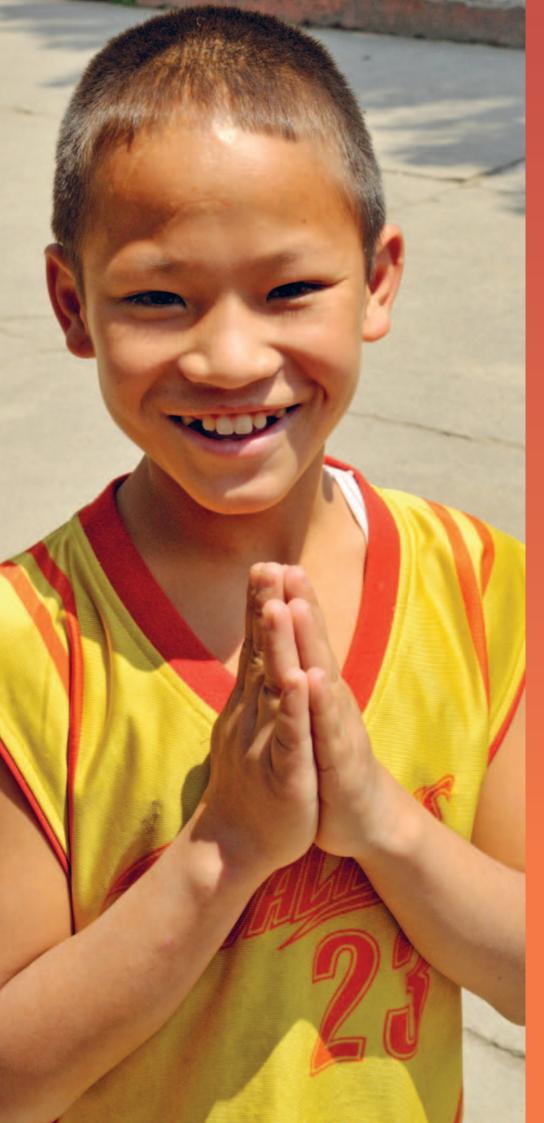
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