

## **BIRTHING KIT FOUNDATION (AUSTRALIA)**

### **ANNUAL REPORT**

**2012/2013**





## Values Statement

*“Every woman has the right to a clean and safe childbirth.”*

## Vision

*A world in which all women have access to safe birthing practices, regardless of race, religion, culture, history or socio-economic status.*

## Mission Statement

The Birthing Kit Foundation (Australia) works with organisations and communities to provide a clean birthing environment for women in developing countries in order to reduce the incidence of infant and maternal mortality.

We respect peoples’ dignity and values and work according to principles of basic human rights. We raise awareness, provide support and resources and act as a catalyst for the creation of birth attendant training programmes and community development projects.



**Birthing Kit Foundation (Australia)**

PO Box 330

Belair SA 5052

## Chairperson's report

2012–2013 has seen the Birthing Kit Foundation continue to grow and fulfil its goals. During the year we met our targets in the three main areas of activities:

### 1 Kit Production

We worked with 33 organisations in 20 countries to ensure that 140,000 kits were available for use for women in rural and remote areas. These were particularly in countries with the highest rate or number of maternal and neonatal deaths like Afghanistan, Nigeria, Kenya, DR Congo, Chad, Uganda, Ethiopia and PNG.

We commenced working with a further eight new partners during the year.

We are progressing our relationship with World Vision.

Many Zonta clubs and increasing numbers of community organisations, schools and colleges are continuing their support of Assembly Days.

### 2 In-Country Kit Production (ICKP)

Vietnam and DR Congo are continuing to create kits for their local needs.

The AusAID Africa project, which provided for 30,000 kits to be made by APDA, Abraham's Oasis and the Fistula Hospital in Ethiopia, was evaluated by Board members Ruth Jackson and Di Bartel.

Abraham's Oasis in Tigray Ethiopia has had a new proposal accepted for continuation of ICKP and training.

A report discussing all the previous requests for changes to kit components was considered.

Organisations making their own in-country kits could vary the contents but those made by BKFA would remain the same for ease of logistics.

### 3 Training programs

#### DR Congo

Dr Luc Mulimbalimba Masururu organised two further seminars for traditional midwives in early 2013 for the Mulenge and the Lemera Pigmies.

All the educational, catering and personal requirements had to be carried into the community on foot taking two to three days each way.

As almost 100 per cent of participants were illiterate, photo books were used as educational tools.

The planning stage for expansion of the training program, into up to three new provinces of DR Congo, using a train the trainer model, has commenced.

Birthing Kit Foundation (Australia)

PO Box 330

Belair SA 5052



## Chairperson's report continued



### India

#### SAWED

SAWED finished its training program in Tamil Nadu and reported to the Board.

#### SWEAD

SWEAD conducted training for a further 350 TBAs in Tamil Nadu. Board members Maggi Gregory and Jenny Weaver were chosen to do a Monitoring and Evaluation trip of these two projects later in 2013.

### Other

#### Millionth Kit

Our one millionth kit was made during August 2012. A number of events, organised by Zonta Clubs, were held in Adelaide, Sydney, Brisbane and Canberra to celebrate this milestone.

Dr Luc Mulimbalimba Masururu, our agent in Central Africa, came and shared his experiences with Zontians, politicians, community members and students.

#### Finances

Financially we are well-placed at present.

We are very grateful to the Zonta clubs who continue to support the Foundation, as well as to the individuals who donate through the Global Giving Program, My Cause and Everyday Hero. In addition, there are some people who make regular pay deductions or generous one-off or yearly donations.

#### Australian Charities and Not-for-Profit Commission (ACNC)

We prepared for the commencement of the Federal Government's independent regulator - the ACNC - and the relevant Act on 1 July 2013.

#### Marketing and PR

We were offered a stall at the three day Adelaide Pregnancy, Babies and Children's Expo in March 2013 where we were able to increase awareness of the Foundation.

Many thanks to the organisers, Ngaire Green (Zonta Club of Adelaide Flinders) and Julie Irwin (BKFA Board member) who organised and managed our involvement.

We also saw articles created by Julie Monis-Ivett placed in the Zonta International Zontian magazine as well as the Adelaide Hills Magazine.

Board members, especially Julie Monis-Ivett and Jenny Weaver, have spoken at various Zonta and Rotary Club venues, as well as with donors and politicians about the BKFA.



Birthing Kit Foundation (Australia)

PO Box 330

Belair SA 5052

## Chairperson's report continued

### Board members

The Board experienced major changes this year, with four directors leaving—Margaret Parsons, Di Bartel, Ruth Jackson and Naomi Arnold-Reschke. Two charter directors since 2006 must be given special recognition.

Margaret Parsons was the Assembly Day Coordinator for the original Zonta Birthing Kit Committee from 2004. Margaret was the friendly first point of contact for anyone organising an Assembly Day and was the perfect person for this. Margaret's role expanded into the membership and the writing of personal cards for donors, and she always gave her sound, sensible overview to all discussions.

Di Bartel was our Transport Coordinator from 2004. Di dealt with the transport issues within Australia and overseas. With 97 per cent of kits arriving at their remote destination, our processes were excellent. Di's greatest achievement for the BKFA was compiling our OAGDS application, which gave us tax deductibility of donations. Di was also Company Secretary. Her ability to organise and love of paperwork were her strengths.

Without the dedication and commitment of these two directors there would never have been a Birthing Kit Project and our subsequent Foundation.

This year we welcomed three new Board members—Fiona Smith, Julie Irwin and Anne Westley.

### Membership

Membership stood at 157 members as at 30 June 2013.

### Staff

This year we welcomed Viki Bickerton as our Company and Minutes Secretary.

We are also delighted to have Karen Gryst as our first CEO to oversee the operational side of the Foundation and to support the Board in concentrating on the governance aspects.

Erica Osborn is still our Project Administrator, albeit now residing interstate.

Along with Erica, Adrian Harris (Supplies and Logistics Coordinator), Hilary Carruthers (Assembly Day Coordinator) and Kellie Stelzer (Bookkeeper) continue to ensure the smooth running of the Foundation.

### Our Greatest Challenges

- Implementing a comprehensive operations structure.
- Ensuring our partners also have comprehensive financial and policy frameworks.
- Creating a Train the Trainer expansion module in DR Congo.

### Summary

The Foundation is building a strong base from which to launch sustainable programs which will help ensure more women will have access to safe and clean birthing practices and resources.

Joy O'Hazy

Chairperson

Birthing Kit Foundation (Australia)

PO Box 330

Belair SA 5052

## Corporate Achievements

### One Million Kits

The Foundation despatched its one millionth birthing kit in August 2012, a remarkable achievement in harnessing the energy and generosity of the Australian community.

### The Foundation's first CEO

Our first CEO, Karen Gryst, has been appointed and brings fresh skills, professionalism and expands the capacity of the BKFA.

### Project in Vietnam

Sustainability in kit production and training for Ha Giang Province is being achieved.

## Opportunities

### Targeted Partnerships

Organisations like World Vision and Rotary have the potential to build programs in areas where we have previously been unrepresented.

### A Pilot Train the Trainer program in DR Congo

This should enable the Foundation to train many more birth attendants and embed more local experience in DR Congo and could provide a template for other countries.

### Monitoring and Evaluation

Greater sophistication in reviewing our programs from the outset should improve the data we have, create more even results and raise our standards.

## Greatest Challenges

### Administration

The volunteer Board workload has been immense. However, the appointment of a CEO is the first step in separating governance and operations, thereby lowering this burden.

### Meeting AusAID standards

The BKFA has made a commitment to aspire to AusAID accreditation standards and this is an ongoing process of review and refinement.

### Managing PR across Australia

Our partners across Australia need more high-quality and up-to-date publicity material and we are exploring ways to maximise the opportunities that the internet and social media present.

*"Every woman has the right to a clean and safe childbirth."*

## Overview

### Training and In-Country Kit Production

Since inception, the Birthing Kit Foundation has gradually shifted its emphasis from kit production in Australia to include training programs and in-country kit production. This fits comfortably with the UN Millennium Development Goals (MDGs) including the growing evidence from the UN and elsewhere that skilled birth attendants can help reduce maternal and infant mortality. While the birthing kits lower the chance of infection and create a clean birthing environment, training can generate long lasting changes in the survival rate of mothers and their newborns. In-country kit production establishes new skills in remote communities and can ensure a consistency of supply. It moves communities closer to sustainability.

Long-lasting benefits from birth attendant training that we have identified from partner feedback include:

- Communities learn that the survival of mothers is not simply part of an expected life and death cycle, it is something they can increasingly control.
- The training of birth attendants raises their status and the importance of taking care of mothers at the time of birth.
- Harmful practices can be reduced as evidenced by the work of Valerie Browning training Afar birth attendants to stop female genital mutilation.
- Stopping the spread of HIV/Aids has become a vital part of kit use and education helps eliminate myths in the community about this disease and how it spreads.
- Discriminatory practices against women may be dealt with as part of the training, for example in India education on how chromosomes determine the gender of a baby has helped mothers avoid the vilification of their husbands.

New solutions to improve the survival rate of mothers and babies in developing countries are continually considered. The opportunity to create a 'Train the Trainer' program in DR Congo for example may prove to be a breakthrough. The Foundation is always reviewing the impact and results of its work.



Joyful women who have just been paid for helping at the Assembly Day at Luvungi Hospital, DR Congo



TBAs being shown how to use a birthing kit at the Hamlin Fistula Hospital

*"Every woman has the right to a clean and safe childbirth."*

## DR CONGO – Mission in Health Care and Development (MHCD)

### In-Country Kit Production:

When Dr Luc Mulimbalimba Masururu built his Luvungi Hospital he named one room in honour of the BKFA to thank us for our help in expanding his community work. In this room 4,000 kits were assembled to accompany two Pigmie training programs. The project included the purchase and transport of supplies from Nairobi to Luvungi, auditing and wages for the disadvantaged women assembling the kits.

### Training Programs:

This year Dr Luc administered two of his most difficult yet rewarding programs for Pigmies. His two three-day training programs for TBAs included midwifery, hygiene, nutrition, HIV/Aids prevention, primary healthcare, how to use a birthing kit and how to have a clean birth using local resources if a birthing kit is not available. A new feature of this program was the employment of MHCD staff to evaluate the knowledge of the TBAs prior to its start. After training staff carried out three-monthly reviews at 'Midwifery Club' meetings which were set up to assess the impact of the training, how much the TBAs had remembered and applied, and to supply more birthing kits. In 12 months a follow-up study will evaluate the full impact of these training programs.

Overall maternal mortality in DR Congo is estimated to be 1100:100,000. The mortality rate for Pigmie children under 5 years of age is estimated to be 59 per cent. Pigmies live in the forests and tend to keep to themselves. There are no schools and 99 per cent are illiterate. There are no health centres and many suffer from malnutrition. Ninety-nine per cent of Pigmie women give birth at home with the help of traditional midwives who have no resources or knowledge of safe birthing.

Pigmies are the most disadvantaged group in DR Congo and were assessed by MHCD as being in the greatest need of our assistance. The ongoing program of monthly Midwifery Clubs has been developed by MHCD. It brings together four or more TBAs to discuss problems and distribute birthing kits.

### Pigmies of Lemera:

There are eight territories in South Kivu Province. The three-day seminar to train 100 TBAs covered much of the Pigmie population from three territories including Fizi, Uvira and Walungu which make up approximately one-third of the geographic area of South Kivu Province. The seminar was held in the township of Lemera, a 30 – 60 km journey for most TBAs but easy and accessible transport was available via cars, motor bikes and bicycles. They were accommodated and fed in a Swedish Mission Hotel. Conservatively each TBA delivers two babies per week or more than 100 per year. This means more than 10,000 mothers and babies will benefit from this training annually.



Dr Luc with the Pigmie TBAs from Lemera after their training.



A Pigmie woman in front of her home.



Inside her home. Pigmie women have a particularly hard life.

*"Every woman has the right to a clean and safe childbirth."*

### **Pigmies of Mulenge:**

Mulenge is one of the eight territories in South Kivu Province. The township is on a mountain, a journey of two days on foot for Dr Luc but several days walk for the TBAs. There were numerous challenges and the logistics for this program would dissuade most people. Fortunately for the Pigmies Dr Luc is relentless and committed. It took the MHCD staff nine days walking up mountainsides in the district to contact and notify the TBAs about the upcoming training, to convince them to go and then to make sure they all arrived on the same day. Other challenges included getting teachers prepared to tolerate the hardships involved including the two-day climb and dealing with the disappointment from those TBAs who had not received invitations but still wanted to attend. Dr Luc employed over 30 carriers to take the supplies of food, tents, birthing kits and educational equipment up the mountain. Being so isolated it was also very dangerous but fortunately soldiers provided protection.



Beautiful Afar people

## **ETHIOPIA**

### **Afar Pastoralist Development Association (APDA)**

#### **In-Country Kit Production and Training Programs:**

AusAID funded a program to make 10,000 birthing kits with locally sourced supplies and 15 days of refresher training for 40 TBAs in Dagaba and Daaba, Dubte Woreda. To date APDA has trained 1,036 TBAs.

Ninety-three per cent of all Afar pastoralist mothers deliver in their remote nomadic homes attended by TBAs who have learnt all they know from a relative. Traditionally the TBAs had no equipment and no contact with any other health workers for support or referral. They carried out six dangerous practices in the birthing process. This program was aimed at ending those practices and creating a positive working relationship between HEWs and TBAs. The HEW gives the TBA a birthing kit to use at the next birth and trains the TBA to identify danger signs in the expectant mother. When a problem is found the TBA will refer the woman to a HEW early in the pregnancy with the possibility, in serious cases, of delivery at Valerie Browning's specialist maternity hospital in Mille.

Kit assembly provides employment for five local women and one supervisor. Local kit production is more cost effective than receiving kits from Australia. Reports have shown that the use of clean birthing kits in the past has reduced maternal and neonatal infection by 10 per cent. Anecdotal reports demonstrate that demand for birthing kits is increasing. HIV prevention awareness and AIDS response are thematic in APDAs program.

*"Every woman has the right to a clean and safe childbirth."*

## Hamlin Fistula Ethiopia (HFE) and Outreach Centres

### In-Country Kit Production:

15,000 birthing kits were assembled at the HFE from October 2012 to December 2012, funded by Rotary International (5,000) and AusAID (10,000). These kits were distributed to HEWs and TBAs for home births through rural health clinics in Bahir Dar, Mekelle, Harar, Yirgalem and Metu. A Birthing Kit Club was formed to make the kits at Desta Menda, a HFE community where women with long-term irreparable fistula injuries can live comfortably. Five vulnerable women became more independent through this employment and most chose to educate their children with the income. The program highlighted the importance of giving birth at health centres where skilled birth attendants are available. It also increased the use of clean birthing kits during delivery in remote areas where skilled birth attendants or health centres are not available. HFE has demand for about 30,000 to 35,000 kits annually.



Healthy mother and baby at Abraham's Oasis, Eithiopia

### Abraham's Oasis

#### In-Country Kit Production:

AusAID funded this program to assemble and distribute 10,000 birthing kits in Shire-Endaselassie, Tahtay Koraro Woreda, North Western Zone, in Tigray region. Components were bought in bulk and kit assembly took place in a rented condominium in Shire by a nurse supervisor and one vulnerable woman with learning difficulties, with an extra woman employed in a busy period. One of the main motivations for Abraham's Oasis to make their own kits has been the cost of customs duty and the remoteness of the North Western Zone in Tigray. Collecting the kits from Addis Ababa in the past has been extremely difficult, expensive and time consuming.

Birthing kits will be distributed to TBAs, Heath Extension Workers and other health professionals, providing basic clean delivery for each new birth to help reduce maternal and infant infection rates. As the birth attendant collects more kits, she reports to Abraham's Oasis and has the opportunity to discuss any problems with skilled birth attendants.

## VIETNAM

### Centre for Ecologically Sustainable Agriculture (CENESA)

The final stage of the BKFA's work in Vietnam started in April 2013. Funding was provided for the manufacture of 6,000 kits, to Vietnamese government standards, in an army factory in Hanoi. They will be distributed in Ha Giang Province where the BKFA has a commitment from the local Provincial Health Authorities to take over the project. Ha Giang, a mountainous and remote area, contains 22 ethnic groups and has a home birth rate estimated at about 80 per cent.

Over the years the BKFA has funded training for approximately 4,700 birth attendants in Vietnam and about 96,000 kits have been distributed in the north of the country and other remote provinces.

The local health authorities in Ha Giang have signed an agreement to take over the project from May 2013 and the BKFA intends monitoring this arrangement to ensure that sustainability has been achieved.

*"Every woman has the right to a clean and safe childbirth."*

## INDIA

### The Society for Women's Education and Awareness Development (SWEAD)

Due to the success of the previous two training programs BKFA has supported SWEAD by continuing funding in the Cuddalore district in Tamilnadu for 12 months (Jan - Dec 2013) educating a further 350 TBAs and husbands/guardians of the attendees. Three staff nurses have been employed for this period to monitor the effectiveness of the training, collect data, and support the trainees.

In the mid-term report SWEAD tells a story as told by one of trained TBA's:

Apurvam was selected by her village to participate in the five-day training program where she learnt to perform deliveries in a hygienic and safe way, pre and post natal care, discourage harmful practices, recognise danger signs and how to refer women with complications to facilities where essential obstetric care is available. She felt the training has made a big difference to the survival of women and babies as Apurvam now ensures there is a clean place to give birth, a sharp clean tool to cut the cord, her hands are washed, and the baby and mother are cared for after the birth.

There is a limit to what Apurvam with her new training can do in her village as a proportion of all births require the kind of intervention that is provided in a hospital environment. Without this kind of help mothers and babies will still die.

Apurvam told SWEAD a story about a lady from her village named Lakshmi, who had a difficult pregnancy. Apurvam recommended that Lakshmi go to the health centre or a hospital for the birth of her baby but her family refused. Apurvam was not allowed to attend the birth. Finally Lakshmi, her husband and mother-in-law went to the Primary Health centre in Sethiathoppe where within a day both Lakshmi and her son died. Apurvam was upset that she had not been able to help this family with her new knowledge.

"This story is just one example of change that SWEAD and trained TBAs are working on in communities, but you can begin to see that deep down, community wide, long-term change is not straight forward. Like any attempt at change in the community, geography, culture, power, opportunity, education and forces inside and outside the community complicate things."

"SWEAD helped this community advocate with the government to ensure the health centre was equipped and staffed as well as a system to provide the means to get pregnant women to the clinic or the local hospital in an emergency. This involved negotiation with 108 government ambulance drivers about mobility in an emergency and making phone numbers available. "

"A few years ago, the Indian Government introduced a rural health system that includes one community health worker for every 15,000 people. This person is meant to be chosen fairly by local councils. However, in many cases, these government-sanctioned health workers have been selected in ways that are at best unhelpful and at worst corrupt.

SWEAD managed to advocate with the local councils to give the health worker role to women."

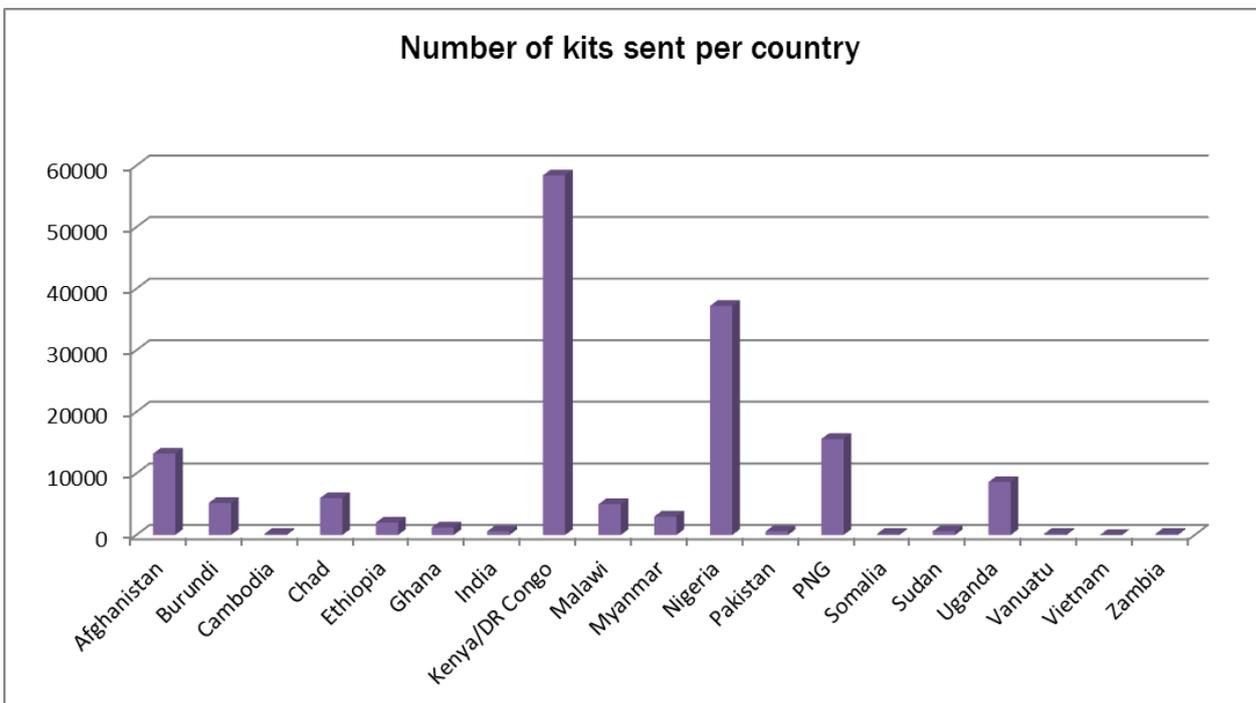
This program will be completed in December 2013.



Outcast Indian woman and baby from the Dalit sect, Tamilnadu state

*"Every woman has the right to a clean and safe childbirth."*

## Kit Distribution (2012-2013)



*"Every woman has the right to a clean and safe childbirth."*

## Kit Distribution – Asia/Pacific Region

Country	NGO	Total	Project
Afghanistan	CARE International, Afghanistan	3,000	According to CARE, they have designed a tool for birth readiness. This tool helps to evaluate each pregnant woman on a monthly basis and appraise their readiness for the upcoming delivery. CARE notes that it has a strong impact not only on their knowledge but on practical application of that knowledge. The women are scored based on their level of preparedness, and are provided with updated information and education on birth readiness and complication readiness issues. During the reporting period there was a 42 per cent improvement in knowledge level of pregnant mothers, 31.6 per cent improvement in their attitude and 26 per cent improvement in practice of them occurred.
	Terre des Homme in Kabul, Kandahar and Rustaq (Tdh)		Tdh did not receive any kits in the 2012-13 year as they were reassessing the program. Tdh then notified the BKFA that they had handed over to local NGO who is responsible in Takhar province of Afghanistan for all our health activities. BKFA is currently liaising with the NGO.
	World Vision	10,200	BKFA is excited to be working alongside World Vision in Afghanistan. World Vision provides relief in emergency situations and works on long-term community development projects. Together, these address the causes of poverty and help people move towards self-sufficiency.
Cambodia	The Children's Sanctuary	200	The Children's Sanctuary is working in the Siem Reap province in Cambodia. The Children's Sanctuary Incorporated (CSI) is an Australian organisation dedicated building a brighter, healthier, stronger Cambodia. The CSI is independent, not-for-profit and is managed by Australian doctors and nurses.
India	Society for Women's Education and Awareness Development (SWEAD)	600	SWEAD is implementing integrated health skills training for rural TBA and volunteers, with the financial support of BKFA. During this year 175 villages were covered under this program and the birthing kits were distributed with training.
Myanmar	MSI, Myanmar	3,000	Kits were distributed to pregnant women who visited to MSI Myanmar centres/clinic. MSI Myanmar also provides to delivery care providers (e.g. TBAs, midwives).
Pakistan	World Vision	600	A trial of 600 kits was sent to WV Pakistan. We are currently waiting for reporting on the success of the program. It is hoped that this will lead to considerably greater number of kits being sent.

*"Every woman has the right to a clean and safe childbirth."*

## Kit Distribution – Asia/Pacific Region continued

Country	NGO	Total	Project
Papua New Guinea	Australian Doctors International	1,800	ADIs goal is to improve the health of people in remote and rural areas of PNG. ADI specialises in <i>Doctor Supervised Integrated Health Patrols</i> , deploying volunteer doctors and health managers to work in partnership with local health providers to provide medical treatment to save lives and reduce suffering, community health education to reduce preventable illness and disease, and training to build the capacity of local health workers.
	Medical Society of PNG	8,000	The Medical Society of PNG has noticed that the infection rate has dropped by a further 15 per cent and noted that the program encouraged "excellent community involvement".
	Talisman	4,200	Welcomed as a new partner in 2012 and is currently receiving 2000 kits per year. Talisman Energy put together a training program for the TBAs before distributing the birthing kits. They have noticed an improvement in mother and child health since starting the program.
	World Hope	600	World Hope has noted that the VBA workers are very excited about the supplies. It motivates them to do their job better.
	World Vision	1,000	World Vision has reported that the birthing kit use is building a strong relationship amongst the women folks with the VBA. It also creates opportunity for the VBAs to educate the women more on the use of clean births, on safe motherhood, birth preparedness and family planning. Some husbands are also seeing the importance of family planning and have shown it during the VBAs visit to their homes.
Vanuatu	World Vision	200	World Vision in Vanuatu is a new partner. A pilot program of 200 has been received and we are awaiting further feedback.
Vietnam	Tu Du Ob-Gyn Hospital		Tu Du has not received any kits in the past year. This is due to the success of the in-country kit program.
<b>TOTAL</b>		<b>33400</b>	

*"Every woman has the right to a clean and safe childbirth."*

## Kit Distribution – Africa Region

Country	NGO	Total	Project
Burundi	Association Infirmier San Frontiere (AISF)-Burundi	200	Welcomed as a new partner in June 2013. A pilot program has been sent.
	Green Ark	5,000	Green Ark has noted numerous benefits since they started receiving birthing kits. This includes: women are benefiting from safe motherhood services in their own villages; pregnant mothers are spared from frequently moving to cities & towns for delivery reasons; and family expenses allocated to the treatment of maternal and newborn infections have decreased.
Chad	Safer Birth in Chad	6,000	Safer Birth in Chad has reported that "It is likely that the kits make a significant contribution to hygiene, and by providing something where there is almost nothing for the midwife to use, they can raise morale."
Ethiopia	Hamlin Fistula Hospital	2,000	Kits were supplied to the Hamlin Fistula Hospital for use by the outreach centres in Bahir Dar, Mekele, Harer and Yirga Allem in their preventative health training programs in remote regions.
	Abraham's Oasis		Abraham's Oasis in North-Western Zone, Tigray Region works with women HEWs serving the large rural community, often alone in remote and exceedingly difficult places.
Ghana	Apostle Padi Ologo Traditional Birth Centre (APOTBC)	1,200	APOTBCs mission is to reduce infant mortality through improved maternity health in Africa. Their vision is a culture of sustainability—knowledgeable communities who value and implement best practices in the pursuit of safer and healthier maternal delivery.

*"Every woman has the right to a clean and safe childbirth."*

## Kit Distribution – Africa Region continued

Country	NGO	Total	Project
Kenya/DR Congo	Green Ark	5,200	See GreenArk - Burundi.
	Kamukuywa Harvest	1,200	Based in Bungoma County and aims to improve community services in primary health care.
	Mission in Health Care and Development	22,000	The birthing kits were distributed at remote villages in Kenya and DR Congo where training in clean birthing practices had previously been given. The Foundation also funded the production of kits in-country.
	Peace and Conflict Resolution	5,000	PCR is supplying birthing kits and soap to the women at maternity clinics and hospitals in the village and slum areas in Bukavu DR Congo. PCR distributes the kits at clinics and hospitals in Kakwende, Kalonge.
	Talent Search Youth Group	8,000	TSYG has distributed kits in Bungoma County and Busia County, Kenya.
	Sweet Mother International	16,000	SMI actively campaign to save African women from pregnancy-related deaths. They organise various grass-root workshops to educate women on pregnancy and anti-natal issues, as well as mobilising rallies in major cities and processions to government offices to canvass for effective actions to be taken to reduce pregnancy-related deaths in Africa.
	World Youth International	1,000	A Safe Mothers Club has been established in the village of Odede, approximately two hours from the city of Kisumu in Nyanza Province – Kenya. The club meets on a weekly basis and discusses nutrition, safe birthing practices and infant care.



Dedicated Zontians Anne Selle and Janet Cobbs with students and guests enjoying a luncheon to celebrate the one millionth kit

*"Every woman has the right to a clean and safe childbirth."*

## Kit Distribution – Africa Region continued

Country	NGO	Total	Project
Malawi	Sustainable Rural Community Development Organisation (SURCOD)	5,000	SURCOD has partnered with the Presidential Initiative for Safe Motherhood in Malawi. They have conducted three trainings on safe motherhood to the community midwives and they have recommended the use of birthing kits as one of the initiatives to encourage safe motherhood in Malawi.
Nigeria	Brown Button Foundation	1,000	Brown Button has a Birth Attendant and Community Awareness training program, which runs in several parts of Nigeria where maternal mortality rates are the highest. Often the kits are distributed at the trainings to birth attendants after practical demonstration.
	Office of Senior Special Assistant of Primary Health Care	200	Welcomed as a new member in May 2013 and has successfully received their pilot program. A regular supply of birthing kits will now be sent.
	Rotary International Fistula Project (RIFP)	15,000	The birthing kits were distributed to the 20 hospitals selected to participate in the Maternal and Child Health Project. The kits are stored in the health facilities and will be distributed to Skilled Birth Attendants in the surrounding communities when they are trained by RIFP midwives.
	Sweet Mother International	21,000	See SMI Kenya.
Somalia	Social Relief Organisation	200	Welcomed as a new member in May 2013 and has successfully received their pilot program. A regular supply of birthing kits will now be sent.
Sudan	Health for Mothers Sudan	400	Birthing kits are distributed by a community midwife in Nasir in the Upper Nile State, Sudan.
	Churches of Christ of Overseas Aid	200	200 kits have been sent for distribution in Aweil community of Northern Barh el Ghazal State in Southern Sudan.

*"Every woman has the right to a clean and safe childbirth."*

## Kit Distribution – Africa Region continued

Country	NGO	Total	Project
Uganda	Uganda Australia Christian Outreach	2,400	UACO have noted the following benefits when using the birthing kits: reduced maternal infections; safe deliveries; and happy mothers.
	One Mama	1,400	One Mama distributes the kits through birth attendants and midwives in Kirindi Village, Uganda through health programs established by the Ugandan Ministry of Health.
	Think Humanity	800	Think Humanity work within the Kyangwali and Kyaka II Refugee Camps in Uganda. Kits are distributed through the Azur Christian Clinic in Hoima, Uganda.
	Rotary Club of Makindye	3,000	Welcomed as a new partner in April 2013. After a pilot program was successfully received the Rotary Club of Makindye received a further 2,800 kits. It is hoped that they can distribute a further 5,000 in 2013-2014.
	Kigezi African Partnership	1,000	The kits are distributed in the Kigezi region of South West Uganda through grass-roots level health centres and by TBAs.
Zambia	Chikankata Mission Hospital	200	Welcomed as a new partner in June 2013. A pilot program has been sent and we await confirmation of the arrival.
<b>TOTAL</b>		<b>124,600</b>	
<b>TOTAL KITS SUPPLIED IN 2012/2013 - 158,000</b>			

*"Every woman has the right to a clean and safe childbirth."*

## Monitoring and Evaluation

Monitoring is the best way to assess the achievements of our projects and to get a better understanding of the challenges we face in each area.

Program delivery in a developing country can present huge problems, many of which are only properly understood when we are 'on the ground' and speaking to our partners. New perspectives can assist us with project development. It is vital and valuable to meet our partners and for them to meet us.

There is no perfect way to monitor in the 22 countries in which we work. However, we do attempt to carry out a detailed evaluation for one or two of our more complex programs each year.

In October/November 2012 Directors Di Bartel and Ruth Jackson went to Ethiopia to review the programs with Hamlin Fistula Hospital (HFH), Abraham's Oasis (AO) and the Afar Pastoralist Development Association (APDA). A grant from AusAID enabled the Foundation to fund these proven and long-standing partners to produce locally made kits and do extra training. Meetings with AusAID and with UNFPA representatives were also included in the visit.

Highlights of the trip were:

- The Hamlin Fistula Hospital's 'Birthing Kit Club' was assembling kits at Desta Menda (part of the HFH) when they visited and even the internationally renowned Dr Catherine Hamlin was assisting. Two Health Extension Workers (HEWs) were also interviewed in Yirgalem.
- In Tigray Province our Directors met with a key Abraham's Oasis adviser, Ruth Kennedy, and visited the Seleklaeka Health Centre and Adi Gieshti Health Post. They visited the birthing kit assembly room which, for Abraham's Oasis, is an apartment where three disadvantaged women are employed to assemble kits.
- Meetings were also held with the APDA Program Manager Valerie Browning and the APDA Primary Health Coordinator at their Logia office in north-east Ethiopia. Here the kits were made in hygienic rooms by five women who received a wage. Their record-keeping was outstanding with stock in hand, distribution lists to woredas, plus receipts and an asset register.

These three partners are doing excellent work and the detailed evaluation report revealed how seriously they take their commitment to improving health outcomes for birthing mothers and their infants. The existence of gender policies, the training in the use of the kits as they are delivered and an increasing dialogue with the government on maternal health issues, all point to improved service delivery. While there is still a long way to go in Ethiopia these programs are powerful elements in improving the lives of these birthing mothers.



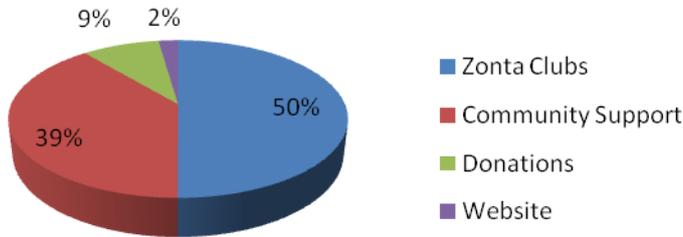
Catherine Hamlin helping women make birthing kits at Desta Menda



Young Afar woman at training—deep in thought

*"Every woman has the right to a clean and safe childbirth."*

### Donations and Gifts



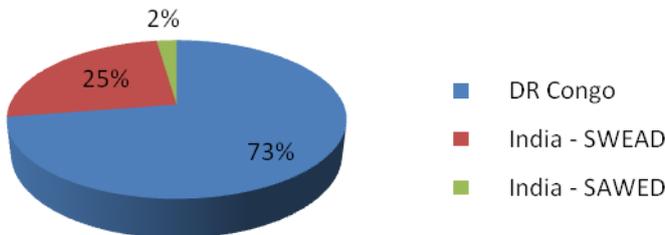
Fundraising by **Zonta Clubs** who have held Assembly Days.

Donations from **Community Groups** who have held Assembly Days.

**Donations** from the public, major individuals and corporate sponsorship.

**Website** online giving.

### Training Programmes

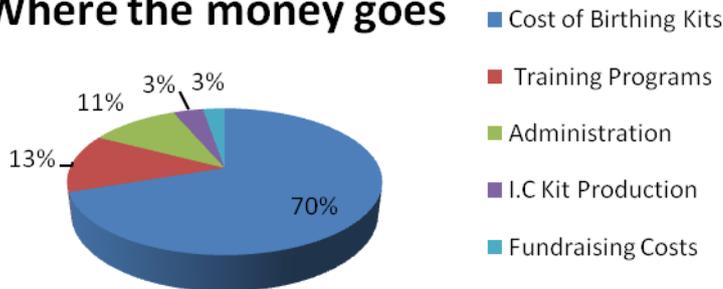


**DR Congo**—To educate 100 Pigmie TBAs in Mulenge and 100 Pigmie TBAs in Lemera.

**India SWEAD**—To educate 350 TBAs and 350 husbands/caretakers.

**India SAWED**—Final payment to complete the training of 200 TBAs.

### Where the money goes



**Cost of birthing kits** includes purchasing of supplies, storage, freight and support costs.

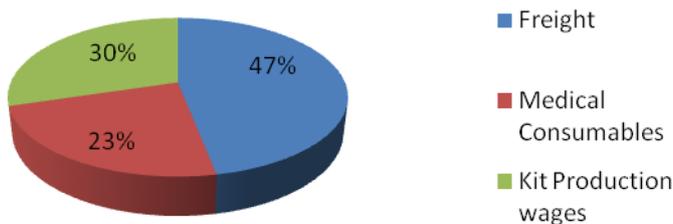
**Training Program** costs are related to our overseas education programs.

**Administration** expenses include costs associated with the overall operation of BKFA.

**In-country kit production** includes costs associated to making of kits overseas.

**Fundraising costs** are those related to our efforts to attract donations.

### Kit Component Costs



**Freight** involves the costs associated with supplies going to Assembly Days as well as the birthing kits going overseas.

**Medical Consumables** are the supplies that are purchased for the contents of the birthing kits.

**Kit Production wages** are for the staff who support in the making and distribution of the birthing kits.

*All graphs are expressed as a percentage sourced from the Income and Expenditure Statement.*

*“Every woman has the right to a clean and safe childbirth.”*

**Birthing Kit Foundation (Australia)**

<b>Income Statement for the year ended 30 June 2013</b>			
		<b>2013</b>	<b>2012</b>
<b>Revenue</b>			
Donations and Gifts			
Monetary	<b>1</b>	483,578	430,725
Non-monetary	<b>2</b>	164,780	141,255
Grants			
AusAID		0	74,750
Investment Income		7,536	3,977
Membership		4,475	3,049
Other Income		22,121	10,451
<b>Total Revenue</b>		<b>682,491</b>	<b>664,207</b>
<b>Expenditure</b>			
International Aid and Development Program Expenditure			
International Programs			
Funds to International Programs	<b>3</b>	262,256	325,793
Program Support Costs	<b>4</b>	75,828	61,885
Community Education		694	959
Fundraising Costs			
Public		10,499	4,891
Accountability and Administration		42,702	15,742
Non-Monetary Expenditure		164,780	141,255
Accountability and Administration		141,255	156,348
Total International Aid and Development Program Expenditure		556,759	550,525
<b>Total Expenditure</b>		<b>556,759</b>	<b>550,525</b>
<b>Excess (shortfall) of Revenue over Expenditure</b>		<b>125,732</b>	<b>113,682</b>

During the financial year the Birthing Kit Foundation (Australia) has no transaction in the following categories:

- Bequests and Legacies
- Other Australian Grants
- Other Overseas Grants
- Domestic Programs Expenditure
- Government, multilateral and private Fundraising Costs
- International Political or Religious Adherence Promotion Programs Expenditure
- Revenue for International Political or Religious Adherence Promotion

*"Every woman has the right to a clean and safe childbirth."*

**Birthing Kit Foundation (Australia)****Balance Sheet as at 30 June 2013**

		2013	2012
<b>Assets</b>			
Current Assets			
Cash and Cash Equivalents	5	335,544	208,149
Trade and Other Receivables		45,704	37,560
Total Current Assets		381,248	245,709
Non Current Assets			
Property, Plant and Equipment		362	0
Accumulated Depreciation		-50	0
Total Non-Current Assets		312	0
<b>Total Assets</b>		<b>381,560</b>	<b>245,709</b>
<b>Liabilities</b>			
Current Liabilities			
Trade and Other Payables		7,288	0
Current Tax Liabilities	6	-5,028	-6,400
Other Current Liabilities	7	3,153	1,694
Total Current Liabilities		5,413	-4,706
<b>Total Liabilities</b>		<b>5,413</b>	<b>-4,706</b>
<b>Net Assets</b>		<b>376,147</b>	<b>250,415</b>
<b>Equity</b>			
Reserves brought forward		250,415	136,733
Excess of Revenue over Expenditure		125,732	113,682
<b>Total Equity</b>		<b>376,147</b>	<b>250,415</b>

At the end of the financial year, the Birthing Kit Foundation (Australia) has no balances in the following categories:

- Inventories, Assets held for Sale and Other Current Financial Assets
- Non Current Trade and Other Receivables and Other Financial Assets
- Current Borrowings, Provisions and Other Financial Liabilities
- Non-Current Borrowings, Provisions and Other Financial Liabilities

*"Every woman has the right to a clean and safe childbirth."*

**Birthing Kit Foundation (Australia)**

<b>Statement of Cash Flows for the year ended 30 June 2013</b>			
		<b>2013</b>	<b>2012</b>
<b>Cash and cash equivalents available at the beginning of the year</b>		208,149	130,429
<b>Cash flows from operations</b>			
Grants, donations and receipts from customers		501,869	516,890
Interest received		7,536	3,976
Refunds		2,130	0
Payments to suppliers and employees		379,333	439,245
Tax and withholding liabilities paid		4,807	3,901
<b>Net cash generated</b>		<b>127,395</b>	<b>77,720</b>
<b>Cash at the end of the year</b>		<b>335,544</b>	<b>208,149</b>

<b>Birthing Kit Foundation (Australia)</b>			
<b>Statement of Changes in Equity for the year ended 30 June 2013</b>			
<b>Balance at 30 June 2012</b>			<b>250,415</b>
Excess of Revenue over Expenditure			125,732
<b>Balance at 30 June 2013</b>			<b>376,147</b>

During the financial year there were no adjustments or changes in equity due to adoption of new accounting standards or changes in asset fair value transactions.

## Birthing Kit Foundation (Australia)

### Notes to the Financial Statements for the year ended 30 June 2013

#### Note 1 Monetary donations and gifts

Donations including monthly donations	42,603
Website Donations	10,786
Zonta Club Donations	241,932
Project and Program Donations	188,257
	<b>483,578</b>

#### Note 2 Non-monetary donations and gifts

Voluntary work 01/07/2012–30/06/2013 (8,137.3 hrs * \$20.25/hr)	164,780
	<b>164,780</b>

#### Note 3 Funds to International Programs

Medical consumables and supply materials for birthing kits	59,434
Overseas freight for kits	119,786
Kits funded in-country	14,406
Storage Costs	2,994
Assembly Day Costs and operating expenses	15,025
Birth attendant training programs	50,611
	<b>262,256</b>

#### Note 4 Program Support Costs

Kit production wages	69,121
Kit production Superannuation	6,221
Worker's Compensation	486
	<b>75,828</b>

#### Note 5 Cash and Cash Equivalents

BKFA Cheque Account	11,686
BKFA Maternal Health Gift Fund Account	762
BKFA Online Saver Account	323,096
	<b>335,544</b>

#### Note 6 Current Tax Liabilities

GST Collected	0
GST Paid	-5,028
	<b>-5,028</b>

#### Note 7 Other Current Liabilities

Superannuation Payable	0
Wages PAYG Withholding Payable	3,153
	<b>3,153</b>

*"Every woman has the right to a clean and safe childbirth."*

**BIRTHING KIT FOUNDATION (AUSTRALIA)**  
**Notes to the Financial Statements**  
**for the year ended 30 June 2013**

**STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES**

The Birthing Kit Foundation (Australia) was incorporated on 8 September 2006 in South Australia under the Corporations Act 2001 as a public company limited by guarantee.

These financial statements for the period from 1 July 2012 to 30 June 2013 have been prepared in accordance with the Australian Account Standards and requirements of the Corporations Act 2001 for the members of the Birthing Kit Foundation (Australia).

They have been prepared in Australian dollars using historical costs on an accrual basis.

There were no depreciable assets during the period.

***Income Tax***

The Birthing Kit Foundation (Australia), a health promotion charity, is Income Tax exempt under Subdivision 50-B of the Income Tax Assessment Act 1997, receives GST concessions under Division 176 of A New Tax System (Goods and Services Tax) Act 1999, and is Fringe Benefits Tax exempt under section 123D of the Fringe Benefit Tax Assessment Act 1986.

***Cash***

For the purposes of the Cash Flow Statement, cash includes cash on hand and in bank. Cash at the end of the financial year shown in the Statement of Cash Flow is reconciled to the related items in the Income Statement.

***Remuneration of Board Members***

The Board members serve in an honorary capacity and do not receive any remuneration for their services in that capacity.

***Table of cash movements for designated purposes***

No table of cash movements for designated purposes is included in the financial report as no single project or other form of fundraising for a designated purpose generated 10% or more of total income for the year under review.

***Financial Reports***

BKFA summary financial reports comply with the standards set out by ACFID Code of Conduct. The ACFID Code of Conduct is available at [www.acfid.asn.au/code-of-conduct](http://www.acfid.asn.au/code-of-conduct).

BKFA full financial reports balances agree to the balances in the summarised financial reports included in the annual report. BKFA full financial statements are available on our website: [www.birthingkitfoundation.org.au](http://www.birthingkitfoundation.org.au).

**BIRTHING KIT FOUNDATION (AUSTRALIA)**  
**INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF**  
**BIRTHING KIT FOUNDATION (AUSTRALIA)**

We have audited the accompanying financial report of Birthing Kit Foundation (Australia) (the company) for the year ended 30 June 2013.

Our audit has included the Code of Conduct Summary Financial Reports.

**Directors' Responsibility for the Financial Report**

The directors of the company are responsible for the preparation and fair presentation of the financial report and have determined that the accounting policies described in Note 1 of the financial report are appropriate to meet the requirements of the Corporations Act 2001 and are appropriate to meet the needs of the members. The directors' responsibility also includes such internal control as the directors determine is necessary to enable the preparation of a financial report that is free from material misstatement, whether due to fraud or error.

**Auditor's Responsibility**

Our responsibility is to express an opinion on the financial report based on our audit. We have conducted our audit in accordance with Australian Auditing Standards. Those standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the company's preparation of the financial report that gives a true and fair view in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the directors, as well as evaluating the overall presentation of the financial report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

**Independence**

In conducting our audit, we have complied with the independence requirements of the Corporations Act 2001. We confirm that the independence declaration required by the Corporations Act 2001, which has been given to the directors of Birthing Kit Foundation (Australia), would be in the same terms if given to the directors as at the date of this auditor's report.

**BIRTHING KIT FOUNDATION (AUSTRALIA)**  
**INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF**  
**BIRTHING KIT FOUNDATION (AUSTRALIA)**

**Opinion**

In our opinion the financial report of Birthing Kit Foundation (Australia), including is in accordance with the Corporations Act 2001, including:

- a. giving a true and fair view of the company's financial position as at 30 June 2013 and of its performance for the year ended on that date in accordance with the accounting policies described in Note 1; and
- b. complying with Australian Accounting Standards (including Australian Accounting Interpretations) to the extent described in Note 1 and the Corporations Regulations 2011.



Ronald Glenn Norton FCA  
Indigo Financial  
(08) 8212 8585  
Level 1, 19 Sturt Street, Adelaide SA

Dated this 7th day of November 2013

**BIRTHING KIT FOUNDATION (AUSTRALIA)  
AUDITORS INDEPENDENCE DECLARATION  
UNDER SECTION 307C OF THE CORPORATIONS ACT 2001**

To the Directors of Birthing Kit Foundation (Australia)

I declare that, to the best of my knowledge and belief, in relation to the audit of Birthing Kit Foundation (Australia) for the year ended 30 June 2013 there have been:

- (a) no contraventions of the auditor independence requirements as set out in the Corporations Act 2001 in relation to the audit; and
- (b) no contraventions of any applicable code of professional conduct in relation to the audit.



Ronald Glenn Norton FCA  
Indigo Financial  
(08) 8212 8585  
Level 1, 19 Sturt Street, Adelaide SA

Dated this 7th day of November 2013

## BIRTHING KIT FOUNDATION (AUSTRALIA)

ABN 65 121 658 428

### Statement by Members of the Committee

#### For the year ended 30 June 2013

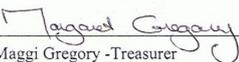
The Committee has determined that the association is not a reporting entity and that this special purpose financial report should be prepared in accordance with the accounting policies outlined in Note 1 to the financial statements.

In the opinion of the Committee the Income and Expenditure Statement, Statement of Financial Position, and Notes to the Financial Statements:

1. Presents fairly the financial position of Birthing Kit Foundation (Australia) as at 30 June 2013 and its performance for the year ended on that date.
2. At the date of this statement, there are reasonable grounds to believe that the association will be able to pay its debts as and when they fall due.

This statement is made in accordance with a resolution of the Committee and is signed for and on behalf of the Committee by:

  
Joy O'Hazy - Chairperson

  
Maggi Gregory - Treasurer

Dated this 8<sup>th</sup> day of November 2013

## BIRTHING KIT FOUNDATION (AUSTRALIA)

### Directors' Financial Report

### for the Financial Year ended 30 June 2013

#### Operating results

The net excess of revenue over expenditure for the financial year ended 30 June 2013 was \$125,732.

#### Significant changes

There were no significant changes in the affairs of the Foundation during the financial year.

#### Matters subsequent to end of the financial year

There are no matters or circumstances that have arisen since the end of the financial year that have significantly affected or may significantly affect the operations of the Foundation, the result of those operations, or the state of affairs of the Foundation.

#### Indemnification and insurance of Directors and Officers

During the financial year the Foundation paid premiums for a contract insuring all the Directors and Officers of the Foundation against costs incurred in defending proceedings for conduct involving a contravention of sections 182 or 183 of the Corporations Act 2001, as permitted by section 199B of the Corporations Act 2001. The total amount of insurance premiums paid was \$1,902.

#### Dividends

The Foundation is prohibited by its constitution from paying dividends.

#### Likely developments

Project operations are expected to continue in Asia, the Pacific, and Africa supported by funding from the Australian public, the Australian Government, and multilateral sources.

#### Auditor independence

The Directors received a declaration of independence from the auditor of the Foundation which is attached to this report.

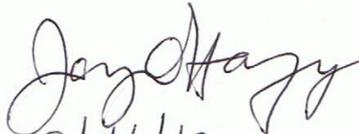
#### Directors' benefits

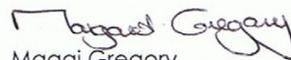
Since the end of the previous financial year, no director of the Foundation has received or become entitled to receive any benefit from the Foundation except reimbursement of board approved expenses at cost.

Signed in accordance with a resolution of the Directors

Joy O'Hazy  
Chairperson

Date:

  
8/11/13

  
Maggi Gregory  
Treasurer

Date: 8/11/2013

## BIRTHING KIT FOUNDATION (AUSTRALIA)

### Directors' Declaration for the Financial Year Ended 30 June 2013

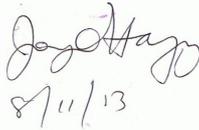
The Board Members declare that in their opinion:

1. There are reasonable grounds to believe that the Foundation will be able to pay its debts as and when they become due and payable.
2. The attached financial statements and notes thereto are in compliance with accounting standards and give a true and fair view of the financial position and performance of the Foundation.

Signed on behalf of the Board and in accordance with a resolution of the Board by:

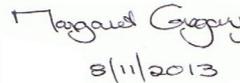
Joy O'Hazy

Chairperson

  
8/11/13

Maggi Gregory

Treasurer

  
8/11/2013

## CORPORATE GOVERNANCE

### CORPORATE GOVERNANCE STATEMENT

The Foundation is committed to achieving international and Australian best practice in corporate governance for non-profit organisations. The Board regularly reviews the Foundation's corporate governance framework to ensure compliance with best practice standards.

#### Corporate Structure and Operations

The Foundation is an Australian public company limited by guarantee registered under the Australian Corporations Act 2001. As such it must comply with the corporate governance provisions prescribed under the Act and Regulations and administered by the Australian Securities and Investments Commission.

The Foundation has Income Tax Concession Charity status with the Australian Taxation Office on the basis of being a health promotion charity, and is registered in South Australia under the Collections for Charitable Purposes Act, 1939.

The Foundation is endorsed as a deductible gift recipient and the Foundation's Maternal Health Gift Fund has been approved by the Department of the Treasury under the Income Tax Assessment Act 1997 subsection 30-85(2) as a developing country relief fund, following which donations to the Foundation of \$2 or more are tax deductible in Australia.

The Foundation is a signatory to the Australian Council for International Development (ACFID) Code of Conduct, which defines minimum standards of governance, management and accountability for NGOs. Our adherence to the Code demonstrates our commitment to ethical practice and public accountability.

#### Corporate Governance

The Foundation's constitution provides for a voluntary and independent Board of Directors to be responsible for overall management and specifies the Board's powers and responsibilities and how directors are elected and re-elected by the members.

Directors are not paid for their services as Board members. The Board may appoint a person to fill a casual vacancy on the Board until the next AGM. The Board is required to meet at least four times a year, but have met at least monthly during the past year. The Company Secretary lodges official ASIC (Australian Securities and Investments Commission) returns.

Under its Delegation of Authorities policy, the Board has reserved the following responsibilities for itself: setting and monitoring of strategic direction and goals; approving the annual plan and budget, and monitoring performance against them; remuneration of employees; review of Board performance; and approval of Policies and Procedures.

The Board continues to evaluate risk under its Risk Management System which complies with the AS/NZS ISO 31000/2009 standard.

Complaints to the Board of Directors about any aspect of the Foundation's performance may be posted to the Company Secretary, Birthing Kit Foundation (Australia), PO Box 330, Belair, South Australia 5052, or emailed to [info@bkf.org.au](mailto:info@bkf.org.au).

The Board receives budget and financial performance reports prepared by the Treasurer at each meeting. Audited financial statements are forwarded to its members each year in the Annual Report and are reported to ASIC, ACFID and the Australian Charities and Not-for-Profit Commission, as well as any relevant state and federal government departments. Annual Reports are available on the Foundation's website at [www.birthingkitfoundation.org.au](http://www.birthingkitfoundation.org.au).

*"Every woman has the right to a clean and safe childbirth."*

## SUPPORTERS

We wish to thank the following individuals and organisations for their generous support and their contributions to the success of the work of the Foundation:

AusAID  
Georgina Davison CPA  
Hunter Hall Investment Management  
Dr Luc Mulimbalimba Masururu  
Peggy Charitable Foundation  
Pregnancy Babies and Children's Expo  
Prescott Securities Ltd  
Rio Coffee  
Rotary Club of Adelaide  
Talisman Energy  
Valerie Browning  
Zonta Clubs of Districts 22, 23 and 24  
Several anonymous benefactors



BKFA member and Zontian Doone Winnall supported by fellow Zontians at the Adelaide Pregnancy, Babies and Children's Expo



BKFA members Judi and Helen Hutchinson—the powerhouse twins behind the successful team of Zontians and volunteers organising the one millionth kit Assembly Day where 10,000 kits were assembled

*"Every woman has the right to a clean and safe childbirth."*

## GOVERNING BODY

The following people were members of the Board during 2012/2013:

### **JOYLEEN O'HAZY, Chairperson**



**Qualifications:** MBBS, DRANZCOG

**Experience:** Joy has a wide background in administration and strategic planning. She created the birthing kit and started production in 1999, supported by her fellow members of the Zonta Club of Adelaide Hills, and was an original member of the Zonta Birthing Kit Committee.

**Special responsibilities:** Medical information research

**Term of office:** Inaugural Board member

### **JULIE MONIS-IVETT, Vice Chairperson**



**Qualifications:** Dental Surgeon

**Experience:** Julie brings with her business administration, personnel management skills, and health profession knowledge as a partner in a large private dental practice. She is a Charter Member of Zonta Club of Adelaide Hills, serving at Board level for 15 years, including that of president for two years. She coordinated the Zonta Birthing Kit Project with Joy O'Hazy from 2000, and was Project Administrator from 2004-2007.

**Special responsibilities:** Inaugural Chair of Board. Zonta District Project Co-ordinator for Australia 2004 to the present. Liaison person with Zonta International and clubs overseas. PR, fundraising, and program development.

**Term of office:** Inaugural Board member

### **MAGGI GREGORY, Treasurer**



**Qualifications:** Company Secretary and Public Officer of a private company, Business Partner, JP.

**Experience:** Treasurer of Zonta International District 23 8th Biennial Conference and the Zonta International District 23 social event, Treasurer of the Zonta Birthing Kit Project. She enjoys the challenge of bushwalking and backpacking, and from these experiences, particularly in developing countries, she has been inspired to embrace the birthing kit project. An inaugural member of the Zonta Club of Gawler, she has held many positions within the club.

**Special responsibilities:** Treasurer

**Term of office:** Inaugural Board member

*"Every woman has the right to a clean and safe childbirth."*

## GOVERNING BODY *continued*

### **JENNIFER WEAVER, Director**



**Qualifications:** BA, Dip.Ed.

**Experience:** Jenny was a senior adviser in a financial advisory company and retired in 2010. She brings corporate, financial and management skills to the Board. She is an active member of Zonta International, having served in many capacities in her 20 years of membership. Currently she is the President of the Zonta Club of Adelaide Torrens and coordinates a Zonta interclub advocacy committee.

**Special responsibilities:** Compliance Officer, Public Relations and Marketing

**Term of office:** Inaugural Board member

### **FIONA SMITH, Director**



**Qualifications:** BA(Comm.Studies), Grad.Dip.Fin.Planning

**Experience:** Fiona was the Project Administrator of the BKFA from April 2010 to September 2011, gaining a thorough understanding of the operational work of the Foundation and its partner organisations. While with the BKFA she expanded the supporter base via social media and broad-based promotion, and restructured the kit funding model. Her background is in business management, finance and marketing.

**Special responsibilities:** Public Relations, Program Development

**Term of office:** Board member November 2011 to April 2012 and since November 2012

### **JULIE IRWIN, Director**



**Qualifications:** BApp Sc (Comp Studies), Graduate of Aust. Institute of Company Directors.

**Experience:** Julie brings with her business development and management experience and ICT knowledge. Over the last three years, Julie has developed and managed a small holiday home business in West Beach. She is a Member of Zonta Club of Adelaide Flinders, serving at Board level since May 2009.

**Special responsibilities:** Pregnancy, Babies and Children's Expo

**Term of office:** Board member since November 2012

*"Every woman has the right to a clean and safe childbirth."*

## GOVERNING BODY *continued*

### **ANNETTE WESTLEY, Director**



**Qualifications:** BEc, Grad Dip Women's Studies, Grad Dip Mgt, MBA

**Experience:** Anne has wide experience in public policy, legislative reform, government management and corporate governance gained during a long career in the South Australian public sector. She is currently a member of the SA Government Financing Authority Advisory Board. Anne is a member of the Zonta Club of Adelaide Flinders where she is currently serving on the club Board.

**Special responsibilities:** Corporate governance

**Term of office:** Board member since May 2013