MISSION

We design and implement humanitarian programs in the areas of Global Health, Orphaned & Vulnerable Children, and Poverty Solutions that build capacity, develop opportunities, and save lives in the developing world.

VISION

We envision a world where all people have access to health, opportunity and hope.
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Letter from the President

Since our founding, our friends and partners have been the lifeblood of this organization, and we are thankful to everyone who has joined the cause to meet the needs of the world’s most vulnerable people. Whether you’ve been overseas on a project, or you’ve never been outside of the U.S., we are all in this together. We are grateful to have found so many people who feel compelled to respond to the challenges the world faces, and we are proud of what we accomplished together in 2016.

2016 was a year of growth for Assist International. We strengthened our programs addressing the needs of Orphaned and Vulnerable Children. In partnership with Sister Rosemary, we built five homes in northern Uganda that house young women scarred by war, their children, and orphans in the region. Our work with AOET continues to grow, and in 2016 we helped build a new dormitory, a duplex for orphans, and a sports court. We also started partnering with Gabriel, one of the Lost Boys of South Sudan, whose vision is to provide for orphan children living in his home country.

With our GE Foundation partnership, we increased our capacity to implement the Safe Surgery 2020 initiative, which takes innovative approaches to improving access to surgical care in some of the world’s most challenging health contexts. Together with the GE Foundation, we also expanded our Access to Oxygen program, laying the groundwork for expanding to Ethiopia, in addition to our work in Kenya and Rwanda.

Another notable project from 2016 was the Rainmaker Project in Mukono, Uganda, in partnership with Rotary International. This effort provided 150 bicycle-powered irrigation pumps to poor farmers, allowing them to continue growing crops and provide for their families during the droughts and dry seasons that are common in Uganda. The commissioning and distribution event brought together over 250 community members and 40 community leaders to celebrate. The Rotary Club of Mukono also arranged to have local experts teach the farmers in three different areas: business training, agricultural training, and pump maintenance training.

The story of Assist International is really a story about partners who come together to meet great needs in the developing world. We are excited about the future, and thankful for the friends and partners of Assist International.

Ralph Sudfeld
President/CEO
Letter from the Founder

Assist International, founded in 1990, has been privileged to address the needs of the world’s most vulnerable people through the completion of over 500 projects in more than 60 countries. In 2015, during Assist’s 25th anniversary celebration, Ralph Sudfeld assumed the role of President and has admirably led with an even greater calling on Assist International to do “MORE”. Under Ralph’s watch we are doing MORE projects than ever before. We are building orphan homes, school dormitories, oxygen plants, and implementing water, power and medical projects with our partners all over the world. Even as all of this is being done, much MORE is being asked of Assist International.

Assist International is being asked to build more orphan family villages in South Sudan and other areas in Africa. Five more homes will be built this year in the extreme North of Uganda for Sister Rosemary, expanding her capacity to minister to women and children victimized by war. Through the generosity of one donor, a new dormitory is being built at AOET Village in Jinja, Uganda, to serve students who otherwise must walk up to 10 kilometers a day to and from school. These are just a few of the needs we are driven to address.

As Founder, I am honored to continue overseeing special projects under our new leadership at Assist International. Charlene, my wife and the co-founder of Assist International, and I see a bright future for the organization. If 1000 more Assist Internationals were raised up, there would still be more needs than can be addressed. However, we continue to be grateful for the opportunity to serve the poorest and neediest people of the world. To us this is a sacred calling, and we thank you for joining us in our cause. Without you, the friends and partners of Assist International, none of this would be possible.

Warmest Regards,

Bob Pagett
Founder
The Power of Partnerships
We believe that every child deserves the opportunity to live a healthy, productive life, and there is nothing more life-changing than providing a young child with a family and education. Over 90% of orphans in the world live in developing countries. These children are orphaned from such things as HIV/AIDS and armed conflict. With no one to care for them, many of these children suffer from hunger and malnutrition. We care for orphaned and vulnerable children by developing and sustaining family-style orphan villages. We do this by identifying in-country local partners and then working together to increase their capacity to meet the needs of their local community.

We also provide for orphaned and vulnerable children by building and supporting schools for children. Education is the foundation of a hopeful, productive future, yet in the world today, nearly 75 million children do not have the opportunity to attend primary school. In Africa, one-third of children enrolled in primary school ultimately drop out. We work with our partners to provide educational opportunities to children that have limited or no access to education.

Our Orphaned and Vulnerable Children programs are currently active in Romania, Uganda, Rwanda, Kenya, and Thailand.

The following pages feature some program highlights from 2016.
Sister Rosemary Orphan Village

Sister Rosemary gives hope to girls and young women scarred by war in northern Uganda. These girls’ lives have been devastated by violence and sexual exploitation. In order to help these women support themselves, Sister Rosemary is training them in tailoring and catering. Most importantly, she has created a home and sense of belonging for these women and their children. The orphan village in Atiak provides homes for these young women and their children, as well as other orphan children in the region. Five homes have been built, and five more will be built in 2017 and 2018. We also plan to partner with Sister Rosemary to build a school and medical clinic in Atiak. We are grateful for the opportunity to help Sister Rosemary achieve her vision.

AOET (Rescuing Orphans in Uganda)

Due to AIDS epidemics, civil wars and extreme poverty, there are over 2.6 million children who have been orphaned in Uganda. Sam Tushabe, once an orphan himself, founded AOET (AIDS Orphan Education Trust) in response to the suffering he witnessed in his own community. Founded in 2000, AOET now cares for nearly 4000 children. Through the generous funding of partners of Assist International, we have partnered with AOET to build a high school, kindergarten, library, an orphan village consisting of 20 homes, and two dormitories at the high school.

In the last 10 years, 1743 children have graduated from high school through the AOET program. Many of these children are orphans, and many others come from broken families. 446 students have gone on to graduate from university, and 802 have graduated from vocational school.

We are very proud of AOET and we continue to partner with this incredible organization.
Gabriel (Lost Boys of South Sudan)

In 2016, we met a man named Gabriel, who is one of the original Lost Boys of South Sudan. As a teenager, he fled by foot to Ethiopia to escape the civil war in South Sudan and ended up living at a refugee camp in Kenya for many years. A few years ago he received a chance at a new life in San Jose, California, when his name came up in a refugee lottery. Though he received a second chance in America, his heart’s desire is to provide for orphan children in South Sudan.

While in America, Gabriel has raised support for many South Sudanese refugee children to pay for their shelter and schooling. Assist International is committed to partnering with Gabriel to help him achieve his vision of eventually building an orphan village and school in his home city of Bor, South Sudan. Until that time, we are working together to place these children from South Sudan in homes and schools in Uganda.

Caminul Felix

In 1989, when communism fell in Romania, many major news organizations became aware of the inhumane conditions for the 100,000 children in state-run orphanages. One ABC news article described what they saw: “Young children in straightjackets, groups of mentally disturbed adolescents spending their days in bleak rooms sitting in eerie silence, babies nearly starving to death.”

While visiting Romania with his wife in 1990, Assist International founder Bob Pagett witnessed the Romanian orphan crisis with his own eyes, and he felt compelled to respond. He partnered with an organization called Caminul Felix, which means “Happy Home” in Romanian, and built a family-style orphan village in Oradea, Romania. This orphan village “gives families to the children of the world.”

Founded in 1990, today many of the children who arrived at Caminul Felix as young orphans are living joyful lives and have families of their own. Today, Caminul Felix has two orphan villages and a total of 16 homes, each providing a mother and father for orphaned and abandoned children. Assist International is honored to have partnered with Caminul Felix for over 20 years, giving these children families, hope and a bright future. Child Protective Services of Romania has called Caminul Felix one of the best models for orphan care in the country.

Every year, Assist International sponsors the Romanian Orphan Choir Tour. The Choir is made up of children living at Caminul Felix, and they tour the US each year to raise support and child sponsorships.
JHOR

JHOR/Onesimus House, based in Timisoara, Romania, addresses the needs of vulnerable people of all ages. The organization provides housing and care for orphans, abandoned children, and at-risk adolescents at the Onesimus House in Timisoara. JHOR also provides food and clothing for poor and homeless people in the community, as well service for AIDS patients.

Felix Family Village, Thailand

The vision of Felix Family Village in Surat Thani, Thailand is to rescue children and young people who have been orphaned or abandoned, and place them in families. Priority is given to children who have lost their parents due to HIV/AIDS. Each child is given a family, complete with a mother and father and siblings. Since its beginning in 2007, Felix Family has continued to grow, and in 2016, we were able to complete the tenth orphan home in Surat Thani. Each of these homes provides a family and a loving environment for up to 10 children. Assist International is privileged to partner with Felix Thailand to help vulnerable Thai children.
Every day, thousands of people die from curable or treatable causes because of a lack of adequate health care. In the developing world, nearly 1 in 8 children die before the age of five. In the face of these obstacles, we work with our partners to improve the quality of health in the developing world by increasing the capacity of local healthcare providers. We have a wide range of programs and projects that aim to strengthen health systems and save the lives of people in developing countries.

The following pages feature some program highlights from 2016.
Osogo, Nigeria Ambulance

Thanks to a generous donation by the Modesto Sunrise Rotary Club, an ambulance was sent to Fountain University Medical School in Osogbo, Nigeria. Osogbo is a rural community in Nigeria, far from the main hospitals, and the ambulance makes it possible to transport critically ill patients from Osogbo to the bigger hospitals in the region.

Lanre Gidado, who led the effort, said: “Assist International has made a great and huge impact on my community here in Nigeria…. thank you, thank you, thank you.”

Maternal Ward and Children’s Department (General Hospital of Kotor, Montenegro)

Assist International received a global grant from the Rotary Foundation to upgrade medical equipment in the Maternal Ward and Children’s Department at the General Hospital of Kotor, Montenegro. The Rotary Club of Budva and the Rotary Club of Oklahoma City led the project, and many other rotary clubs across the country participated. The installation and commissioning took place in May 2016. Equipment included a GE Logiq C3 ultrasound, patient monitors, fetal monitors, infusion pumps, a blood gas analyzer, and a pediatric transport ventilator, as well as many other important medical devices.

Medical Project in Sibiu, Romania

In partnership with International Aid, we provided a Lab-In-A-Suitcase and medical equipment to a health clinic that will serve the poor gypsy communities in Sibiu, Romania. The Lab-In-A-Suitcase is a portable medical lab that allows doctors and nurses to perform 80% of standard diagnostic tests. The new equipment is making a significant impact on the community.
Since 2004, Assist International has been a proud partner of GE Foundation’s Developing Health Globally™ (DHG) program. The aim of DHG is to improve healthcare delivery for some of the world’s most vulnerable populations. The program focuses on simple interventions and works to improve access to healthcare through capacity-building initiatives in 16 countries in sub-Saharan Africa, Latin America and South Asia. Since its founding, DHG has greatly impacted over 300 health facilities.

The following pages feature some program highlights from 2016.
Safe Surgery 2020

Around the world, an emerging group of leaders are taking innovative approaches to improving access to surgical care in some of the world’s most challenging health contexts. Assist International is part of the Safe Surgery 2020 Initiative and partners with the GE Foundation, Dahlberg, JHPIEGO, Harvard PGSSC and the G4 Alliance to support these leaders to transform access to safe, affordable surgical and anesthetic care and has targeted 3-5 LMICs. The initiative also shapes the global dialogue on how to approach safe surgery and fosters learning on improving surgical outcomes. SS2020 focuses on three pillars to advance the initiative:

- **Leadership Development** trains and mentors surgical teams to identify safe surgery gaps in their facilities, seek the resources they need, take action to improve surgical outcomes and share their experiences.

- **Innovation** drives new solutions to top-priority surgical gaps in low- and middle-income countries by finding and supporting innovators with funding, training, and mentorship.

- **Elevating Ideas** enables sharing of best practices, innovations, and insights by building a body of evidence on how to improve access to safe surgery and sparking national and global conversations.
Healthcare Technology Management aims to strengthen hospitals and clinics in the developing world by helping them efficiently and effectively manage their healthcare technology. Building technical and clinical skills and equipping health facilities with the right technology builds capacity and significantly impacts the local community in a sustainable way. In sub-Saharan Africa, WHO estimates that as much as 70% of laboratory and medical equipment is partially or completely out of service, and timely access to emergency care can reduce seven of the 15 leading causes of death. Training technicians to fix and maintain equipment and improve basic medical skills are simple solutions that greatly reduce the number of preventable deaths.

Partnering with Engineering World Health (EWH), Duke University and Assist International, the GE Foundation supports a biomedical engineering technician training curriculum that helps to promote—and sustain—equipment repair and maintenance in Developing Health Globally communities. These local biomedical technology-training programs focus on repairing—versus replacing—equipment using available resources, and educating the first generation of biomedical technicians to support ministry of health facilities and assets. The program provides ongoing coaching and mentoring resources to cultivate a professional community of biomedical technicians who are able to support the technical needs of public district hospitals and health centers. EWH has tailored the curriculum for different countries and educational partners, and, in partnership with Duke University, is evaluating its impact.
Impact of BMET Education

Since 2009, GEF has invested $5.5 million to build BMET capacity globally.

- 480+ BMETs trained or in-training
- 10+ biomedical Centers of Excellence
- 25 local trainers trained

Biomedical Equip. Technician (BMET) Training Program

Rwanda, Honduras, Ghana, Cambodia, Nigeria, Ethiopia

Approach

- Setup school in country to design and upgrade BMET curriculum to accreditation standards to train existing and new BMETs
- Establish COE workshop for on-going hands-on regional training for BMETs
- Mentorship (remote or onsite) for on-going support
- Setup asset management system for equip. inventory
- Monitoring & Evaluation for impact and sustainability

BMET Program Impact

- 7.6% Less out of service equip. w/ trained technicians after 1 year
- 35% Equipment uptime in Rwanda
- 480+ BMETs across 5 countries
- 276% Increase in using BMET skills
- 1,520 Pieces of working equipment a donor would need to supply match program impact over 20 yrs.
Biomedical Education Training (BMET)

From classrooms to impacting the health system...

OVERALL IMPACT

- A donor would need to donate 80 times the average yearly contribution to match the impact of the training program over 20 years.*
- Trained BMETs are 2 times more productive and proactive in their work.
- Hospitals without trained technicians have nearly twice as much out-of-service equipment.
- Sites with trained BMETs have improved communication leading to positive relationship between technicians and hospital administration.

LOCAL IMPACT

**RWANDA**
- Program will be fully, locally owned by IPRC in 2016
- 251 BMETs trained or in-training
- 10 faculty members trained

**HONDURAS**
- Sustainable/fully transitioned to INFOP in 2014
- 3 trainers and fully accredited BMET program
- 48 new students in Honduras.
- Hospitals with trained BMETs report 30% less out-of-service equipment.

**CAMBODIA**
- 56 BMETs in training
- Intervention hospitals are reporting 30% less out-of-service equipment compared to control hospitals.

**GHANA**: 5 Centers of Excellence (CoE)

**NIGERIA**: 56 BMETs in training

**ETHIOPIA**: 20 BMETs in training

Nuestro Equipo Medico (NEM)

Developed in close collaboration with experts from Honduras and is being implemented by local program managers to ensure that NEM is both sustainable and locally responsible.

Impact:

- BMETs at program sites are more productive and spend five times more time calibrating and repairing medical devices when compared to control sites.
- BMETs at program sites complete twice as many repairs as control sites.
- Increases in equipment uptime showing that NEM can increase the availability of functional medical devices in a health system.
- NEM was selected as one of the top three social innovations for late-stage programs at the 2016 Global Health and Innovation Conference organized by Unite for Sight.

Saving Equipment, Saves Lives
Although oxygen is a medical necessity, access to oxygen is erratic and expensive for rural hospitals in East Africa. Oxygen is considered an essential drug yet it is rarely available to hospitals in low income countries. However, a collaboration of partners including the GE Foundation, Center for Public Health and Development (Kenya) and Health Builders (Rwanda), has developed and implemented a solution that allows greater access to oxygen for patients that need it most.

**Hewa Tele (Kenya)**
Hewa Tele is a social enterprise based on a public-private partnership model that delivers affordable oxygen to over 30 hospitals in the western region of Kenya.

- By the end of 2016, Hewa Tele was distributing an average of 9,122 liters of oxygen per month, or an average of 182 cylinders per month.

- Prior to the introduction of the Hewa Tele oxygen plant in Kenya, access to oxygen took an average of 3.26 days. Hospitals in the catchment area can now access oxygen in less than 3 hours.

- Hewa Tele has reduced the average oxygen cost per cylinder by 39% for large cylinders, 46% for medium cylinders, and 62% for small cylinders.
Total Oxygen Solutions (Rwanda)

Total Oxygen Solutions oxygen plant is located at Ruhengeri District Hospital in Rwanda.

- By the end of 2016, Total Oxygen Solutions was distributing an average of 49,563 liters of oxygen per month, or an average of 991 cylinders per month.

- The quarterly oxygen consumption rose an average of 48.46% per facility from Q4 2015 to Q2 2016.

- Customer hospitals report that previously they had to wait days or even weeks for oxygen from their supplier to reach sales local depots near them. Due to the oxygen plants, hospital oxygen is now consistently delivered directly to hospitals, and many hospitals report that they have not had an oxygen stock-out since they began purchasing oxygen from the plants.

Ethiopia

Assist International partnered with the Ethiopian Ministry of Health and many other partners to help develop the Ethiopian National Oxygen Road Map. This document is designed to address the growing need for medical oxygen throughout Ethiopia. One aspect of this scale up is the planned construction of thirteen oxygen plants around the country. Assist International is partnering with Global Challenges Canada and the GE Foundation to establish two financially-sustainable oxygen production and distribution plants in Ethiopia.
Through the sponsorship of the GE Foundation, Assist International offered Facility Accelerator Fund Grants to hospitals in the two Safe Surgery 2020 regions of Ethiopia. FAF grants are designed to help hospitals improve facilities so they can better serve the local community. Here are the results:

- Five hospitals in the Tigray region received GE Carestation 30 anesthesia machines in order to create an operating room dedicated to performing emergency C-sections.

- Multiple hospitals in the Amhara region received GE VScan Access ultrasounds.

- One hospital in the Amhara region received two GE B40 patient monitors.

- One hospital received funding to upgrade water and sewer facilities in the operating theater. This will minimize the risk of surgical complications.

- One hospital received funding to build a client waiting room. This will minimize outside contamination for patients recovering from surgery.
Assist International, the GE Foundation, Columbia University, the Center for Public Health and Development, and Health Builders completed the three-year CPAP program in 2016. Respiratory illnesses account for 27% and 38% of deaths annually in children under 5 in Rwanda and Kenya, where advanced airway management, the preferred treatment, is often unfeasible due to high cost of equipment and a lack of highly skilled personnel. CPAP (Continuous Positive Airway Pressure) is a low-cost, low-technology intervention that decreases breathing difficulty while giving health care workers vitally needed time to respond to the underlying causes of acute respiratory distress.

This CPAP program created a group of CPAP senior trainers who trained other clinicians at their respective hospitals. This caused the use of CPAP to spread to many hospitals, children received greater access to CPAP, and, ultimately, CPAP became integrated into the public health systems of Kenya and Rwanda. This program greatly improved respiratory health in the region.

**CPAP Program Accomplishments:**

- The CPAP training model is being used in 24 institutions across Kenya and Rwanda.
- 77 clinicians were trained as CPAP instructors: 37 in Kenya; 40 in Rwanda.
- 83 second generation clinicians were observed being trained by local instructors in Kenya.
- 45 CPAP machines and associated equipment were delivered and are in use.
- Because CPAP is sometimes used on critically ill patients, not all patients treated with CPAP survive. However, CPAP usage does give physicians valuable time to treat serious conditions.
- Over a 22-month period, there have been 1112 documented CPAP uses in Kenya.
- Over a 28-month period, there have been 1005 documented uses in Rwanda.
- Health Builders presented CPAP findings and techniques to the Rwandan Pediatric Society in September 2016, with the hope that they will continue to support CPAP as official program support from Assist International and partners ended.
- The Kenyan Ministry of Health fully endorsed CPAP in the national guidelines for a new neonatal protocol.
In June 2016, Assist International, in partnership with Consultores para el Desarrollo de Honduras (CODHO) and the GE Foundation, wrapped up a three-year program that improved the lives of mothers and children throughout the poorest sections of Honduras. After identifying barriers and delays to care, the program created interventions specifically targeting these issues. Integrating these solutions and emphasizing communication between communities, clinics, and hospitals strengthened the entire health system.

To address delays in problem recognition, decision to seek care, and transportation, the program created new materials to train Community Health Workers (CHWs). This program has trained over 200 CHWs to identify pregnant women, help them get timely prenatal care, recognize pregnancy danger signs, and design birth plans with transportation solutions. According to pre- and post-tests, knowledge around best practices in the community increased from a meager 15% to 89%, even 6 months after the initial training.

Barriers to receiving optimal clinical care included new doctors’ lack of knowledge, a 100% staff turnover rate at clinics, and a weak referral system. This program has trained over 240 hospital staff on appropriate maternal and neonatal health care techniques that follow the national standards. Clinician’s knowledge of Maternal, Neonatal and Child Health best practices increased from 59% to 95%, with clinicians retaining this knowledge months after training.

Pairing work in the community with work at the clinical level allowed this program to follow patients from initial consultations to delivery through the early months of the new baby’s life, strengthening the local referral system and improving health across Western Honduras.

The program has created significant changes in these communities. Deaths in children under five have dropped by 70%. More women are attending their prenatal (89% increase) and postnatal visits (38% increase), allowing doctors to identify problems early in the pregnancy. The total number of newborn deaths has decreased by 20%. Because of this program, many of the most vulnerable women served by the public health system are seeking help for obstetric and neonatal problems before it is too late, and medical residents charged with treating these patients are providing quality care.
In Western Kenya, there is an immense need for surgery. While there are many surgeons in the region, there is a critical shortage of anesthesia professionals. Very few anesthetists attempt to cover an enormous case load, which sometimes results in patients not receiving the surgery they need. To solve this problem, the GE Foundation has partnered with Assist International, Kijabe Hospital, Vanderbilt University, the Center for Public Health and Development (CPHD), and Kenya Medical Training College (KMTC) to train Kenya Registered Nurse Anesthetists (KRNAs) for Western Kenya.

KRNAs can be trained faster than anesthesiologists who commonly provide anesthesia care. Supplying qualified anesthesia providers to regional hospitals increases the capacity of local hospitals to perform surgery and improve patient outcomes. As a result of programmatic success, the GE Foundation and the Clinton Global Initiative have launched an expansion of the Anesthesia Program.

**ImPACT Anesthesia Program 2016 & CGI Expansion**

**ImPACT Anesthesia & CGI Expansion 2016 Program Review**

- 41 students are currently in training at KMTC to become KRNAs.
- 7 students are currently in training at Kijabe Hospital and are expected to graduate in November 2017.
- A total of 22 nurse anaesthetists have completed their training at Kijabe Hospital. These nurses are now working in seven counties in Western Kenya.
- Two simulation centers have been opened at Kijabe and Kisumu. Each site received SimMom and SimBaby mannequins that will allow KRNAs and students in training to practice their skill without fear or worry of harming a patient. To-date over 500 training sessions have occurred in the simulation centers.
- A Mobile Simulation Center that specializes in obstetrics was launched in 2016. The Mobile Sim Center is an impactful achievement in the program as it allows teams training in anesthesia to practice their skill at their facility without worry of harming patients.
- Vanderbilt has successfully completed the first round of emergency obstetrical team training at 8 hospitals with the new mobile simulation center.
Millions of people in the developing world lack access to clean water. This fundamental problem leads to disease, lack of education, and poverty. One out of every five deaths of children under the age of five is due to a water-related disease. Many children in isolated areas are unable to attend school because they spend the whole day gathering water for the family. We work with our partners to provide clean, safe water to people in the developing world.

The following pages feature some program highlights from 2016.
Many hospitals and health centers throughout the developing world do not have access to safe water to wash wounds, serve patients, or clean instruments. Preventable infections account for 36% of maternal mortality, which is often caused by contaminated water and poor sanitation. One in five newborn deaths in the developing world is due to lack of safe water, sanitation and clean hands. Clean, safe water is critical for saving the lives of the most vulnerable. Because of this, Assist International has partnered with GE Foundation and Emory University to provide safe water filtration systems at 39 health facilities across five countries (Rwanda, Ghana, Honduras, Cambodia, and Uganda). Providing safe water at health facilities protects those whose bodies are least able to combat infection.
In October 2016, Hurricane Matthew took a substantial toll on the island country of Haiti. Nearly 900 people were killed, and many survivors were left with no clean water, shelter or food. In response to this emergency, Assist International, in partnership with GE Water, helped assemble and ship two water filtration systems for St. Boniface Hospital in Fond-des-Blancs, Haiti.
More than one billion people live on less than $1.25 per day, and poverty contributes to malnutrition, lack of education, and inadequate healthcare. We develop programs that empower the poor to lift themselves out of poverty. We work with our partners to provide sustainable income opportunities for people in the developing world.

The following pages feature some program highlights from 2016.
Two of the biggest challenges in Africa are food security and poverty. In Africa, 70% of the people earn a living and support their family by farming a small plot of land. However, they must rely on seasonal, unpredictable rainfall to grow crops, and when droughts come, it is extremely challenging to provide enough food for the family.

Uganda contains many different sources of water, including rivers, springs, and lakes. The challenge faced by the farmers is finding an effective way to transport available water. The Rainmaker bicycle-powered water pump is a solution to this problem. This tool allows each farmer to build a business by growing a second and third crop during the dry season. After feeding their family, they are able to take crops to market to sell. The proceeds enable farmers to pay for such things as schooling for their children, medical bills, and a place to live.

Assist International partnered with Rotary International, WomenFirst, and Project 41 to provide 150 Rainmaker bicycle pumps to poor families in the Mukono region of northern Uganda. The distribution and training took place in March 2016. One year later, Robert Ssentongo, President of the Rotary Club of Mukono, visited farmers and said: “Most of the farmers that received those pumps have been able to farm during this long drought that hit Uganda. They are happy and have not suffered as other Ugandans due to the drought. If given an opportunity I would do the project again because I have seen the impact.”
Sister Rosemary Sewing Hope Tailoring School
Sister Rosemary ministers to women who were abducted and abused, empowering them by teaching them to sew in order to support themselves. Once a student passes the training at the tailoring school, a sewing machine is sent with her to start a self-supporting sewing business.

WomenFirst
In 2016, Assist International helped provide sewing machines to WomenFirst- a humanitarian organization based in Jinja, Uganda. This organization provides business management training and start-up funds to women in Uganda and Kenya. WomenFirst equips women with skills to create small business enterprises, which in turn allows the women to provide for their families. Skills include sewing, cooking, and computer training.

Enzi Jewelry
Enzi Jewelry is a program that enables women in Uganda to support their families by making natural and paper bead jewelry, which is sold in the US, and the proceeds return to women in Uganda.
### Consolidated Statements of Financial Position

**Assets**
- Cash & cash equivalents ... $7,893,499
- Other assets ... $6,674,647
  - **Total assets** ... $14,568,146

**Liabilities**
- Accounts payable and accrued expenses ... $43,284
- Security deposits ... 4,968
- Note Payable ... 1,129,501
  - **Total liabilities** ... $1,177,753

**Net Assets**
- Unrestricted ... $2,099,282
- Temporarily restricted ... 11,291,111
  - **Total net assets** ... $13,390,393

  - **Total liabilities and net assets** ... $14,568,146

### Consolidated Statements of Activities

**Unrestricted Net Assets**

**Support and revenues**
- Cash & cash equivalents ... $7,739,553
- Other support ... 141,716
  - **Total unrestricted support and revenues** ... $7,881,269

**Net assets released from restrictions** ... 3,320,298
  - **Total support and revenues** ... $11,201,567

**Expenses**
- Program services ... $11,963,316
- General and administrative ... 580,905
- Fundraising ... 113,454
  - **Total expenses** ... $12,657,675

**Net change in unrestricted net assets** ... ($1,456,108)
Consolidated Statements of Activities Cont.

Temporarily Restricted Net assets
_contributions
_donated equipment, materials and services
_net assets released from purpose restrictions

Net change in temporarily restricted net assets

Change in net assets

Net assets, beginning of year

Net assets, end of year

Program Services - $11,963,316
General and Administrative - $580,905
Fundraising - $113,454

Only 5.5% of donations go to General, Administrative and Fundraising.

That means 94.5 cents of every dollar donated goes directly to meet the needs of some of the most vulnerable people in our world!
On June 1, 2017, Assist International received a 4-star rating from Charity Navigator for the fourth consecutive year. Only 11% of the charities evaluated by Charity Navigator receive at least four consecutive 4-star evaluations.

Charity Navigator is America’s largest independent charity evaluator.
Board of Directors

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Michael Comer - Doctor of Management Degree, Partner with The Hayes Group International, Inc.
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Robert J. Pagett - Founder, Assist International
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Dr. Ward Tanneberg - Author
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