Executive Summary

Restore Hope: Liberia grew tremendously this year in its programmatic depth, strategic direction, and organizational capacity. This has been RHL’s first full year of operating in partnership with MAGIF, a collaboration that has proven fruitful.

Founder and Director of MAGIF, Margret Nimene, is RHL’s Program Director, based in Monrovia and she is overseeing the implementation of RHL’s projects. In order to increase local program capacity in Kolahun, she has employed James Kpangbai, a trained social worker, to be Program Coordinator based in Kolahun.

We began the fiscal year with 75 beneficiaries and have since expanded to 85. We also reviewed and revised our enrollment criteria in efforts to remain transparent and to grow our numbers in a systematic way. All of the able, school-aged beneficiaries have had their school fees paid and their households have received monthly distributions of rice, beans, oil, and soap. They also received school uniforms, supplies and additional clothing donated by Anything is Everything, a campaign built by Darlington Martor, who is now an Advisor to RHL.

The tutorial school continues to generate remarkable interest amongst youth. The classes are held after school from 3:00-5:30 Monday through Thursday with approximately 80% of beneficiaries regularly attending.

The Program Coordinator is conducting home visits, encouraging ongoing dialogue between caregivers and RHL, as well as providing psychosocial support.

Co-Founders Dr. Barbara Burke and Dr. Bob Rufsvold visited Kolahun in April 2017. They conducted thorough medical assessments of the beneficiaries, further enabling the program to monitor their health care. One of the more serious difficulties our beneficiaries and their caregivers face is the lack of medications available in the area. This year in particular has seen a tragic breakdown of government (Ministry of Health) and private sector supply chain of medications to Lofa County.

RHL has been working to expand its vision of holistic care by designing an Economic Development Program. As one of the first steps in this multi-year endeavor, RHL hired a consultant to conduct a two-week economic development assessment in Kolahun.

At much the same time, the caregivers of some of the beneficiaries asked RHL to conduct an adult literacy class two days a week. Out of that class, the women decided to start their own income generating initiative. Thus began the Women’s Weaving Cooperative in which trained weavers are teaching the other women to weave traditional country cloth. RHL is now supporting this project as its first pilot project of a broader Economic Development Program.
RHL is making concerted efforts to expand its fundraising through foundations and individual donors. RHL now has a website (www.restorehopeliberia.org) and online donations software. RHL conducted its first online fundraiser on Giving Tuesday and through the holidays, November-December 2016. While our results were modest, it was our first foray into online fundraising and we intend to take our lessons learned into our next effort this coming fall. We welcomed a new advisor to RHL, John Arnold, who has extensive experience in the advertising world and who is working closely with us to craft messaging and expand our reach. Currently we have one grant application pending for support of the Women's Weaving Cooperative.

Overall, RHL has made much progress in its growth and organizational development. Through our partnership, staff, new advisors, and efforts to hone our strategy, the program is blossoming into an effective and well-received endeavor.

Activities
(The information for this section was compiled from the monthly reports.)

Programmatic Developments
- Partnership with MAGIF.
- Hired program coordinator based in Kolahun.
- Drafted RHL Policies: Child Protection Policy; Enrollment Criteria; MOU for RHL & Parents/Guardians; Photo/video Permission Form.
- Mapped location of beneficiaries.
- Investigating cause of nonfunctional wells and quote for repair.
- Visit by Dr. Burke and Dr. Rufsvold, who conducted medical examinations of 70+ beneficiaries in Kolahun, a program evaluation, and networking with the RHL team in Monrovia and Kolahun. They also conducted program management training for senior RHL staff.
- End of year online fundraising campaign through Network for Good, a donor software management system to which RHL has subscribed.
->Welcomeed new advisors, including the most recent onboard who has advertising expertise and is working with RHL to improve messaging and email/website content.
- Created a beneficiary database to improve ongoing monitoring of beneficiary wellbeing.
- Contacts made with IRC, Lofa County Community College, MSF, Last Mile Health, Peace Corps, US Embassy, German Embassy and Ambassador, More Than Me, World Hope, GerLib Clinic, MAGIF Orphanage and Community Center.
- Developed an aspirational budget to reflect the full implementation of RHL’s programs.

Educational Support
- All school-aged children, who are able to attend, enrolled in schools.
- Supplied each child with book bag, books, writing utensils, uniforms, donated clothing, and sanitary care items for girls.
- Tutoring school is running Monday through Thursdays 3:00-5:30 with 70 of RHL beneficiaries attending and a total of 100-120 in regular attendance (it was decided in April that only RHL beneficiaries may attend due to the limited number of tutors available).
- Renovations to tutorial building included improvement of latrines.
- Held meetings with teachers and guardians.

Guardian Participation
- Conducted monthly home visits.
- Provided psychosocial support to guardians (as well as children) during monthly home visits.
- Guardians met with school administration and requested regular meetings in the future for information sharing.
- RHL hosted a Christmas Party for the families.
• Guardians requested Adult Literacy Classes, which began in February.
• Guardians initiated and have started a Women’s Weaving Cooperative.
• MOUs between guardians and RHL have been introduced.

Community Engagement & Advocacy
• Meetings held with local authorities, including the Mayor, District Commissioner, and Paramount Chiefs.
• Joined the monthly NGO Health Coordination meeting for Lofa County.
• Joined the Health Sector meeting.
• Meetings held with school principals.
• Meetings held with Community Service Organizations and Faith Communities, local churches.
• Meeting held with District Education Officer (dispelled myths around epilepsy).
• Vulnerable Women’s Group formed of women whose husbands have died or “left”.

Health Care
• Health system strengthening by contacting the National Program Manager of HIV/AIDS in Monrovia to inquire about support to Kolahun Hospital.
• Provided monthly food distribution to beneficiary household of rice, beans, oil, and soap.
• In November, a monthly supply of epilepsy medication was brought from Monrovia to RHL beneficiaries in need.
• There is often NO medicine available in Kolahun, specifically no HIV/AIDS, TB or epilepsy medications available.
• There is no Mental Health clinician at the Kolahun hospital.
• A Mental Health counselor at the Kolahun hospital was hired and RHL met with them to discuss collaboration.
• A physical exam was conducted on each beneficiary by a visiting PA and follow-up exams by Dr. Barbara and Dr. Bob.
• Gerlib Clinic donated 75 mosquito nets that were distributed to beneficiaries.
• Two beneficiaries were found pregnant; both of whom had safe, healthy deliveries and are remaining in school and receiving support.

Income Generating Initiatives
• Gathered information on skills-based training topics (suggested areas are carpentry, baking, tailoring and weaving, and computer/information technology).
• Chicken breeding, fish farming, pig breeding were suggested as areas of skills training and future income activities for farmers (there are no meat or eggs available in Kolahun).
• Consultant conducted economic development assessment.
• Female guardians began the Women’s Weaving Cooperative to produce traditional country cloth, which has become RHL’s pilot project for the larger Economic Development Program currently being conceptualized.

Challenges
One of the greatest challenges that affect our beneficiaries and caregivers, certainly the community as a whole, is the dire state of health care in the area. There has often been no medication available in Kolahun Hospital for most of the year. From what RHL has been able to determine, NGOs that were previously supplying medications are no longer doing so, which means the responsibility rests with the Ministry of Health, which is failing to provide even the most basic support. This has serious health repercussions for our beneficiaries with chronic disease. Currently, we are filling the gap through supplies from Monrovia. While RHL only monitors health care and advocates for patients, it has created challenges when the health system simply is not functioning and cannot meet the medical needs of beneficiaries. Similarly, there is no mental health clinician in an area in acute need of such support. RHL is providing psychosocial support recognizing the need for such services.
Another health challenge is the lack of sexual & reproductive health and family planning education for the youth in the District, not only for just our beneficiaries. The District Education Officer has asked RHL, as the only NGO remaining in Kolahun, to help create such an education training and peer-to-peer support program in the District schools. RHL has committed to do this if the requisite funding can be found and raised.

The greatest challenge facing our beneficiaries and beneficiary families is the extreme poverty they must deal with on a daily basis, the lack of economic opportunity and the sense that nothing will change, in terms of economic development. This, in turn, deepens the sense of hopelessness that many in the community felt at the inception of RESTORE HOPE: LIBERIA. This, coupled with the trauma, loss and grief that was pervasive following the Ebola epidemic, has created the need for a full-on, holistic recovery program, one that grows from the grass roots of the community and takes advantage of their inherent strengths, their resilience, and their own native ability to find solutions.

RHL’s Economic Development Program, now in the early implementation stage, even as the broader program is still being conceptualized, is essential now, if RHL’s program of support is to be sustainable, or create lasting change.

One of the organizational challenges RHL faces is to prioritize and limit the scope of our support to what the current budget can achieve, while at the same time developing a strategic direction for the organization and designing expanded programming, as we aim to garner financial support.

**Program Needs**

The program needs are many. Underlying these is the basic need for a larger organizational budget. RHL is the only organization on the ground in Kolahun. The community needs are great. It is estimated by our Program Coordinator that approximately 400 children could benefit from enrollment in RHL. A large number of hand pumps in Kolahun are not functioning. Their repair would improve the health of the community. The community has requested a sexual and reproductive health program in the schools to address the high rates of teenage pregnancies, a project we hope to create in the future, but will require additional funds to do so. Developing income-generating initiatives would do a great deal to address the burden of extreme poverty in Kolahun. Much is needed.

RHL is actively working to develop a more successful fundraising strategy. We are continuing to look for foundations that might be interested in our work. We are also planning to reach out to Embassies and Rotary clubs for interest.

RHL’s organizational capacity will need to grow with an increased budget and programmatic expanse. This would include hiring more staff, both in country and administrative staff.

The Economic Development Program in particular needs to be further developed to begin taking concrete steps to implement this in the next 3-5 years.

RHL learned the disconcerting news that medications are often no longer available locally, the result of a practically nonfunctional health system. While RHL does not directly provide health care, we are working to coordinate care as best available. With additional funding, RHL may be able to increase the support given by hiring a PA or nurse, as well as developing a sexual and reproductive health program.

With additional funding, the basic provisions could be increased including quantity of food per household and/or cash distributions, and perhaps mattresses and linens for the children (which were reportedly in poor shape or altogether absent in some households).
Lessons Learned
RHL held its first online fundraising campaign with a new website and donor management software. While we successfully launched the campaign, and had the industry average rate of 2-3% donors, it was far below expectations. We have been assessing what we can do better for our next online fundraising and working on our messaging and pitch to both the general public and foundations.

In regards to management, the communication between Liberia-based staff and US-based advisors has improved greatly with our partnership with MAGIF and new Program Coordinator. There are some growing pains as we all learn when and to whom our communications ought to be directed.

Operationally, the Program Coordinator is doing an excellent job and RHL recognizes the pressures he faces locally due to the limitations of what and whom RHL can support. Revising the Enrollment Criteria was one such initiative to help ease the pressures on the ground.

Plans for 2017/2018
RHL’s plans for the next fiscal year are ambitious. We plan to continue developing our Economic Development Program by drafting a proposal to include all potential income-generating projects within the larger program, including budgets. We plan to roll out the support to the Women’s Weaving Cooperative to include business skills workshops and microfinance support.

RHL intends to expand the number of beneficiaries to 150.

RHL plans to attend all future PTA meetings and encourage parents/guardians to do the same.

RHL plans to hold Community Healing Circles in its psychosocial support efforts.

RHL intends to add small cash distributions to the monthly support given to beneficiary households, which will replace food distributions when food is available in local markets.

If our fundraising is successful, we will further investigate costs and sustainability of repairing wells.

RHL will continue its efforts in growing the RHL brand to attract more interest and dollars.

Budget vs. Expenses FY2017

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<tr>
<th>FY2017 BUDGET vs. ACTUAL EXPENSES</th>
<th>Budgeted Expenses</th>
<th>Actual Expenses</th>
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<tr>
<td>Health Care</td>
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<td>Education - School Fees</td>
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<td>Education - School Materials</td>
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<td>Food Procurement and Distribution</td>
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<td><strong>Total 12 months program budget &amp; expenses</strong></td>
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<td><strong>$48,174</strong></td>
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