



BIRTHING KIT FOUNDATION (AUSTRALIA)



ANNUAL REPORT
2011/2012

Birthing Kit Foundation (Australia)

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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.

Goals

1. To develop initiatives to make clean birthing environments available for women in disadvantaged communities and to work towards locally generated sustainable solutions.
2. To raise awareness and advocate globally on issues of maternal and infant health.
3. To distribute birthing kits to women in developing countries to assist the provision of a clean and safe birth.
4. To administer the Birthing Kit Foundation (Australia) with integrity, efficiency and accountability.
5. To produce Birthing Kits within the budget and to continue to develop processes to increase the project’s efficiency and cost effectiveness.
6. To raise funds to support the Birthing Kit Foundation (Australia).



**Birthing Kit
Foundation
(Australia)**

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REPORT FROM CHAIRPERSON

In the 2011/2012 year the Birthing Kit Foundation met its goals and thrived. The introduction of the \$3 kit for assembly days provided us with the financial stability and security to plan further ahead and broaden our vision. The Governor-General, Quentin Bryce, became our Patron, and Zonta Past International President, Val Sarah, an Ambassador. Our in-country kit production has matured to a more sustainable level, new strong NGO partnerships have been forged, and our successful training programmes have been maintained.

The acceptance of the \$3 birthing kit by community organisations was immediate and profound. It meant the assembly day process was now self-sustaining, and extra fundraising by the foundation could be directed to in-country programmes. Our assembly day production target of 140,000 kits in Australia was comfortably achieved, despite the increased financial commitment required. In fact, enthusiasm for assembly days hit a peak early in the year when we were given some excellent exposure on a popular TV news programme. It brought new supporters from around Australia.

Our distribution charts show that 130,000 kits were dispatched over the year through our partner organisations in 24 countries. It is extremely satisfying to have the creation and distribution of kits so well integrated into the volunteer community in Australia, and we are deeply grateful for their support. Zonta Clubs in particular have maintained their level of commitment, while groups from companies, service clubs, churches, universities, and schools joined them in increasing numbers.

Our in-country kit production plans were given an important lift when the Foundation won a \$75,000 grant from AusAID. Funding was provided in January to develop and manage the production of 30,000 kits in three areas in Ethiopia. These projects employ poor women to make birthing kits which will be distributed and used in their own communities; it empowers

them through the pay they receive and the skills they learn. It was important for the Foundation that these projects occurred as it maintains the momentum of this part of our work. We are now encouraged that in Tigray Province, the Afar Desert, and through the Hamlin Fistula Hospital network regular kit production will gradually build the infrastructure necessary for long-term sustainability.



Val Sarah, Ambassador

These three new programmes maintain previous local production efforts in Ethiopia. In January 2012 funds from Rotary resulted in more than 10,000 kits being completed in the first effort of its kind by the Hamlin Fistula Hospital. In the Democratic Republic of Congo a second batch of 2,000 kits was completed under the watchful eye of Dr Luc Mulimbalimba at his hospital in Luvungi. In Vietnam 9,500 kits were made locally as our support for the Province of Ha Giang draws to a close under an agreement with the Provincial Health Authorities, in which they will take responsibility for the kit provision as of May 2013.

Kit production was done in tandem with training programmes in DR Congo and Kenya, educating more birth attendants from the Maasai and Pigmie populations. These training projects produce their own unique challenges for our partners, but are vital for the health and development of the mothers and babies of these regions. Funding for new training programmes in India was also approved in January and completed during the year.

Governor-General Quentin Bryce



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All this work, plus the commitment to apply for AusAID Base Accreditation, placed huge pressure on the Board. While the changes AusAID flagged for the Foundation provide a pathway to the future and we have been encouraged to apply again, it did take its toll. The demanding process identified a range of changes we need to make as we develop into a larger organisation, and put a strain on key Board members. Long-standing differences in the approach and priorities of individual Board members emerged, and to date these issues remain unresolved.

Acknowledgement and thanks must go to the extremely competent staff. Fiona Smith served brilliantly as Project Administrator until September, and was then elected to the Board in November. The \$3 kit was her initiative. Fiona resigned from the Board in April. Erica Osborn, our new Project Administrator, Hillary Caruthers, our newly appointed Volunteers' Coordinator, and Adrian Harris, who manages our warehouse and is our Transport and Supplies Coordinator, are all to be congratulated. An important addition to our team during the year was Kellie Seltzer, a part-time bookkeeper who assists our Treasurer. However, special recognition must go to Adrian for his outstanding work on our freight system. He initiated a detailed report for the Board which identified that we could switch from sea to air freight at a reduced cost. From July our kits now arrive more quickly, can be readily tracked, and we can manage their collection by our NGO partners more efficiently.

The Foundation must now refocus and capitalize on what has been built to date by adopting the recommendations from the AusAID accreditation process. This will give the Foundation the capacity to grow and develop into a more professional organisation.



Corporate Achievements

- **Applying for AusAID Base Accreditation:** Despite our lack of success it was a valuable learning experience and identified a range of resources we can access.
- **The \$3 kit:** The increased kit price has provided stability. The Foundation can now manage its growth with greater security because kit assembly in Australia is self-sustaining.
- **Reducing kit costs:** Continuing negotiations have brought our costs down, and a new air freight system will enable quicker, more precise, and cheaper kit delivery.
- **Finding quality partners for kit delivery:** We have started pilot programmes with many new and promising organisations. Negotiations with World Vision have proved particularly fruitful, and may enable us to fast-track kit delivery into targeted areas.



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Our Greatest Challenges

- **Separating governance and operations:** This is a key issue to be addressed to avoid overworking the Board, and to ensure we have the structures in place for appropriate growth.
- **Monitoring and evaluation:** This is an area where new expertise is required to manage all aspects of our major work overseas where no Foundation staff are present, namely our training and kit production projects.
- **Policy application:** Making sure we have the full range of appropriate policies and then ensuring that our NGO partners understand and apply them.

Public Relations and Fundraising

- **The 7PM Project:** The Birthing Kit Foundation was given national exposure on this news programme in July. It brought a wave of welcome donations and new supporters.
- **Expanding the base of online donors:** MyCause and Everyday Hero have brought huge benefits to our efficiency, with supporters easily able to post a project and get tax deductible donations.
- **Kokoda Trek:** In a magnificent personal effort Simone Huntingford of Canberra raised \$9,592 for the Birthing Kit Foundation via a sponsored Kokoda Trek in April 2012.

Jenny Weaver
*Chair
Birthing Kit Foundation (Australia)*



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OVERVIEW

The latest global estimates on maternal mortality by the World Health Organization, UNICEF, UNFPA and The World Bank¹, show that an estimated 287,000 maternal deaths occurred in 2010, a decline of 47% from levels in 1990. Sub-Saharan Africa (56%) and Southern Asia (29%) accounted for 85% of the global burden (245,000 maternal deaths) in 2010.



The reduction of maternal mortality by three-quarters by 2015 was endorsed as one of the Millennium Development Goals (MDGs) in 2000, but the Maternal Mortality Ratio (MMR) in developing regions is still 15 times higher than in developed regions, and the target to reduce the MMR is the area of least progress of all the MDGs².

Globally, the proportion of deliveries attended by skilled health personnel in developing regions rose from 55% in 1990 to 65% in 2009, and the proportion of women who were attended to by skilled healthcare personnel at least once during pregnancy increased from 64% to 81%³.

BKFA continues to focus on MDG5, improving maternal health, by supplying clean birthing kits to women in developing countries, and providing training for birth attendants in antenatal care, clean and safe delivery, and postnatal care. BKFA is targeting sepsis, which accounts for approximately 10 or 11 per cent of direct maternal causes of death, especially when birth takes place in unhygienic conditions. We also target MDG4, to reduce mortality in children aged younger than five years by two-thirds by 2015, by reducing neonatal tetanus, which is responsible for half of all neonatal deaths.

We also address MDG6, combatting HIV/AIDS. Our partners in DR Congo and Kenya rank the dramatic reduction of HIV/AIDS in the community as the greatest impact of our kits. The incidence of HIV amongst birth attendants was a problem, and HIV positive women had difficulty getting assistance when giving birth. Babies were also being infected with HIV when birth attendants, with no funds to buy new blades and knowing no better, often cut several

umbilical cords with the same blade. With gloves in the kits, HIV positive women now receive help with their delivery, birth attendants feel safe, and the blades avoid the spread of infection to either mothers or their newborn infants.



Education through our midwifery/health training programs addresses MDG3 on gender equality. Women, once educated, go back to their communities to share their knowledge. To be provided with special training gives birth attendants new status and the impact of their knowledge reinforces their importance. The in-country kit production projects which provide employment for poor and often marginalised women, empowers them through the skills they gain and the money they earn.

- 1 WHO, UNICEF, UNFPA and The World Bank 2012, *Trends in maternal mortality: 1990 to 2010* WHO, UNICEF, UNFPA and The World Bank estimates, retrieved 10 May 2012, http://whqlibdoc.who.int/publications/2012/9789241503631_eng.pdf
- 2 United Nations Secretary-General 2008, 'High-level event on the Millennium Development Goals 25 September 2008, *Committing to action: achieving the Millennium Development Goals*', retrieved 10 July 2012, <http://www.un.org/millenniumgoals/2008highlevel/pdf/committing.pdf>
- 3 *The Millennium Development Goals report 2011*, New York, United Nations, 2011, retrieved 10 July 2012, [http://www.un.org/millenniumgoals/pdf/\(2011_E\)%20MDG%20Report%202011_Book%20LR.pdf](http://www.un.org/millenniumgoals/pdf/(2011_E)%20MDG%20Report%202011_Book%20LR.pdf)

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AusAID Grant – Kit Production in Ethiopia



The Australian Agency for International Development (AusAID) has funded the BKFA to develop and manage the assembly and distribution of 30,000 clean birthing kits in three regions in Ethiopia: Shire, Tigray Region; Logyia, Afar Region; and Addis Ababa. This project will create employment opportunities for vulnerable and marginalised women and provide refresher training for Traditional Birth Attendants in Afar.

Abraham's Oasis, Afar Pastoralist Development Association and Hamlin Fistula Ethiopia will employ women to make the kits. All three NGOs have been working with BKFA over the past four to seven years. This programme is seen as an entry point to promote community dialogue and education about issues such as early marriage, growth stunting of the female child, gender based violence, female circumcision, obstructed labour, and other problems that may lead to obstetric fistula and other obstetric problems.

The communities and organisations which will use these kits:

- **Abraham's Oasis:** Abraham's Oasis places emphasis on women's health generally and maternal women's events in Tigray Zone, raising awareness for the plight of women and the need for change in the role of women. Abraham's Oasis aims to provide clean delivery kits for every delivery in the area whether at home or in a health facility and has received requests for birthing kits from neighbouring areas.



- **Afar Pastoralist Development Association (APDA):** Afar Pastoralist Development Association (APDA) has been implementing a primary health programme in the Afar pastoral society for 12 years. Even though some areas are only accessible by camel or foot, the traditional birth attendants (TBAs) have been trained. Clean and safe delivery is an essential component of this training. TBAs will receive refresher training as the kits are delivered to them.



- **Hamlin Fistula Hospital and Outreach Centres:** The BKFA has supplied over 97,000 kits to the Hamlin Fistula Hospital in Addis Ababa since 2004. They are distributed through their outreach centres in Bahir Dar, Mekele, Harar and Yirga Alem in their preventative health training programmes in remote regions. The Fistula Hospital conducts training programmes for Health Extension Workers and Traditional Birth Attendants.

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IN-COUNTRY KIT PRODUCTION AND TRAINING PROGRAMMES

DR Congo – Mission in Health Care and Development (MHCD) – Kit Production

2,000 kits were made at Luvungi Hospital to complement the Pigmie training programme, at a cost of AUD\$3,916. This was done in a special room at the hospital which has been set aside for this purpose.

DR Congo – Mission in Health Care and Development—Training Programmes

Dr Luc Mulimbalimba Masururu has already run some highly successful training programmes for the BKFA. This year he reported that after every one MHCD routinely sets up 'midwifery clubs' where groups of birth attendants gather monthly to discuss issues and reinforce correct procedures. As these women are illiterate, reinforcement comes from conversation. The clubs also provide an opportunity for the women to replenish their stocks of birthing kits and have their progress monitored.

- **Maasai Mara:** In February 2012 MHCD carried out a five day traditional midwifery training programme for 80 traditional midwives with the Maasai Mara communities of the Rift Valley Province, Narok—South District, Mara Division, Koyiaki Location, and Talek Sub-Location, at a cost of AUD\$10,376. The highlight for Dr Luc was seeing the changes that had occurred in the community after the last training programme in 2009. The women had created rudimentary toilets and taken definite steps to improve their diet by including more chicken, fish and greens, items which were not previously eaten. Having male leaders at the training programmes ensured the changes were more likely to be adopted. Dr Luc is a recognised leader in these communities; he became a Member of Parliament in the DRC in May. His presence at the training has led to a high level of support within the wider community.



- **Pigmie:** In May 2012 MHCD carried out a three day traditional midwifery training programme for 100 traditional midwives with the Pigmie communities of Mutano village, Bukumu location, Nyiragongo District, Kibati Division in the North Kivu province, at a cost of AUD\$9,613. This was a particularly difficult training programme as the pigmies were so dirty and smelly that their accommodation was refused, and new accommodation had to be sourced at the last minute. Pigmies never wash or wear clean clothes. After day one when hygiene was discussed the attendees turned up clean and washed, having all taken a shower. The pigmies are some of the most desperately poor people Dr Luc works with, but he is impressed and proud of their achievements in learning so much in such a short time.



Ethiopia – Hamlin Fistula Hospital – Kit Production

In 2010 Rotary International and two Queensland Rotary clubs provided US\$20,000 for the production of 7,000 birthing kits in Ethiopia. The BKFA worked with the staff at the Hamlin Fistula Hospital to establish the logistics of buying in bulk and the creation of an efficient production line for kit assembly. Despite the preparation time, it was a successful collaboration. Ultimately more than 10,000 kits were assembled with this money, and the local women look forward to making many more.

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**India – Centre for Social Action Women’s Education and Development
(SAWED) – Training Programme**

In January 2012 the Foundation commenced a one year project with SAWED to raise awareness of the importance of clean birthing practices. SAWED provided a two day training programme in 25 villages, with a total of 200 traditional birth attendants, including tribal and Dalit women, and village health volunteers in Theni and Dindigul Districts of Tamilnadu, India.

The first half of the programme consisted of awareness-raising camps, which were organised to teach the importance of nutrition, hygiene, immunisation, etc. In the 16 target villages SAWED distributed wall posters and notices, and sponsored local temple festivals, which created a high level of visibility and awareness in the community. The project presented many challenges as most of the women live in remote rural, interior villages, areas which are not reached by government programmes. Birthing kits were also distributed as part of the training. This project successfully builds on the pilot project which was completed in 2010 in other villages in this region.

**India – The Society for Women’s Education and Awareness Development
(SWEAD) – Training Programme**

For the second time SWEAD is running five day training programmes educating 250 midwives and volunteer birth attendants from 125 villages in the Cuddalore district in Tamilnadu, South India. In this region all health infrastructure is inadequate, with a shortage of manpower, a lack of facilities, and the nearest hospital over 15 kilometres away.

They are combining this training with a one day education programme for the husbands, guardians, and volunteers related to the 250 attendees to create a better understanding of pre-natal, neonatal, and maternal health. Two staff nurses have been employed for 12 months to monitor the effectiveness of the training, collect data, and support the trainees.

In conjunction with the training, a baseline survey assessed the causal factors for and estimated the rate of infant and maternal mortality (IMR). SWEAD reports that the lower than average IMR in the area has been achieved through effective and efficient management, good education, strong monitoring, and effective community involvement. The village records showed 2.5 maternal deaths for every 100 live births.

The programme outcomes reported so far are:

- 65% of women had four prenatal visits by volunteers/Traditional Birth Attendants
- 92% of pregnant women received teaching about the danger signs of pregnancy
- 95% of women had a birth plan
- 66% of women who delivered at home delivered with a clean birth kit (baseline 0%)
- 90% of women delivered with a skilled birth attendant (baseline 20%)

This programme will be completed in December 2012. SWEAD would like to continue the programmes in 2013 in order to significantly increase individual, household, and community action that will directly and indirectly improve maternal and newborn health.



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**Vietnam – Centre for Ecologically Sustainable Agriculture (CENESA) –
Kit Production**

9,500 kits were produced as part of the final phase of support to Ha Giang Province, situated in the far north of Vietnam. In this area, along the border with China, live some of the most isolated of Vietnam’s minority women. Nevertheless their community is enjoying a gradual improvement in living standards as the wealth of the whole nation rises, and provincial health authorities take control of their own health budgets. In May 2011 the BKFA signed an agreement with the Ha Giang Provincial Health Authorities to take full responsibility for local kit production and distribution from May 2013. Our responsibility is to maintain kit supply up to that point. These kits, produced cost efficiently in Hanoi by an army factory and made to the exact requirements of the Vietnamese government, will be some of the last made before the completion of this project.



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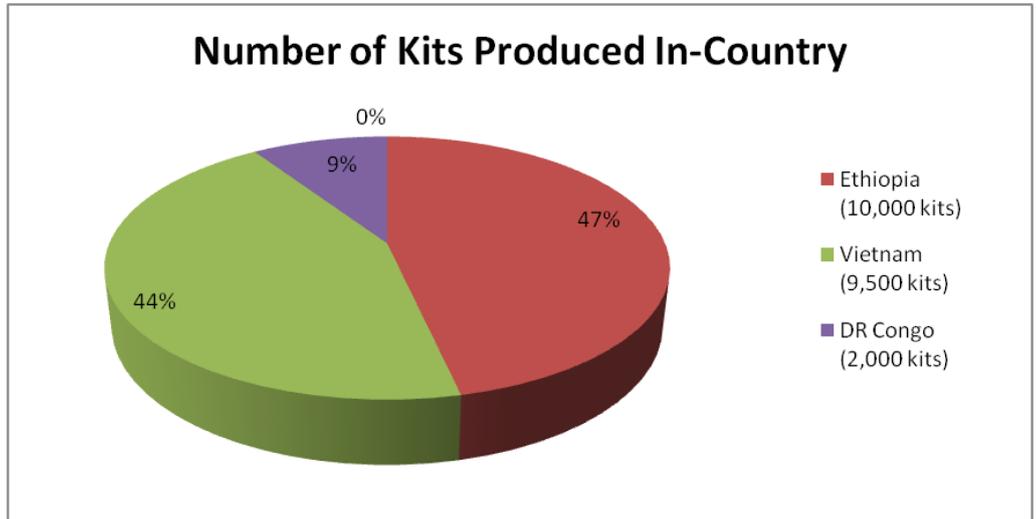
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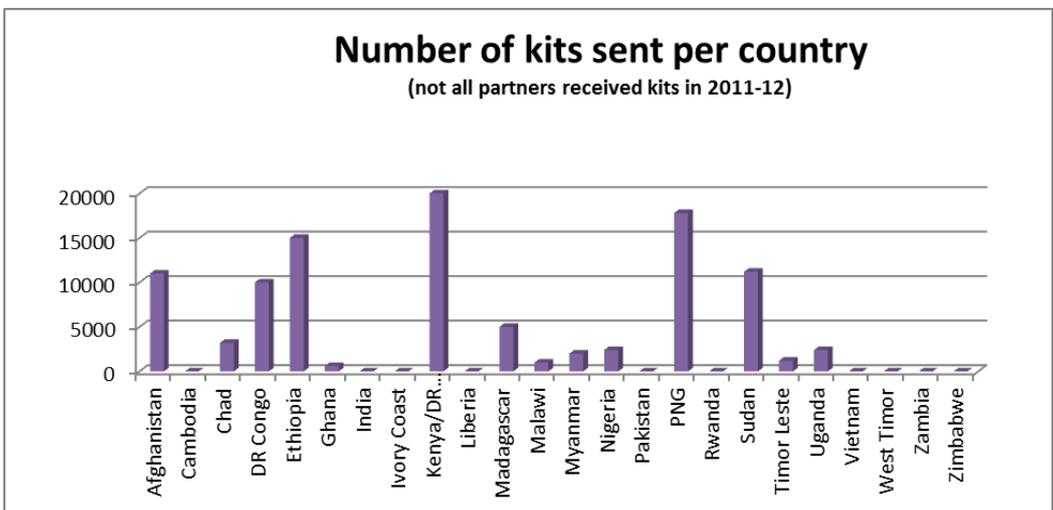
Every woman has the right to a clean and safe childbirth.

NUMBER OF KITS PRODUCED IN-COUNTRY

A total of 21,500 kits were produced in the countries where they are to be used. In Vietnam they are made in a factory, but in Ethiopia and DR Congo kit production employs disadvantaged women.



SUMMARY OF PARTNERS AND KITS FOR 2011-2012



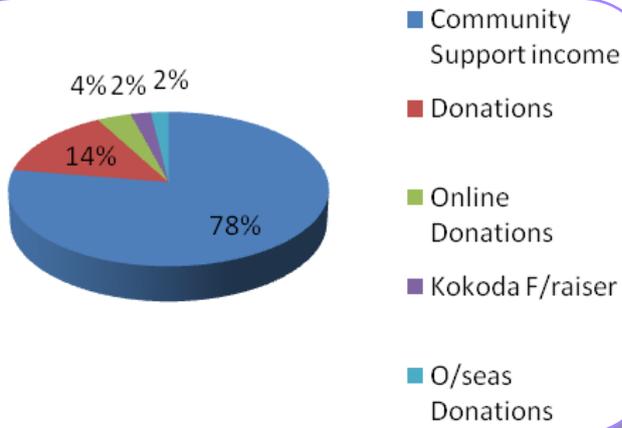
SUMMARY OF KIT RECIPIENTS IN 2011-2012

Country	NGO	Kits Sent	Project
Afghanistan	Terre des Homme in Kabul, Kandahar and Rustaq (Tdh)	9,000	The kits are distributed in 14 areas of Kabul city and in the south they are provided through a home visiting programme. In the north, at Rustaq, Tdh is building capacity of Female Community Health Workers to provide basic services.
	MSI, Afghanistan	2,000	Marie Stopes International, Afghanistan distribute the kits through their health centre in Kabul, as well as to Community Health Educators (CHW).
Cambodia	Sydney Adventist Hospital Health Care Outreach	400	SAHHCO have partnered with International Children's Care (Australia) who have established a medical clinic and mobile clinic service based from their site in Kompong Thom. They will distribute kits to the various communities that the mobile clinic visits plus relevant patients seen at the on-site clinic.
Chad	Safer Birth in Chad Foundation	3,200	The kits are used specifically by midwives and trained nurses for deliveries both in hospital and when attending home deliveries.
DR Congo	Peace and Conflict Resolution	10,000	PCR distribute the kits through health clinics and hospitals in DR Congo.
Ethiopia	Addis Ababa Fistula Hospital	15,000	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 programmes in remote
Ghana	Apostle Padi Ologo Traditional Birth Centre	600	This birthing centre was established by the Chiefs and Elders in Sra Community in collaboration with the District Health Administration.
Kenya/ DR Congo/ Rwanda	Mission in Health Care and Development	15,000	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.
	Talent Search Youth Group	15,000	TSYG are distributing kits in Bungoma County and Busia County, Kenya. They are keen to run training programmes and to start in-country production of birthing kits.
	Sweet Mother International	3,000	SMI actively campaign to save African women from pregnancy-related deaths. They organise various grass root workshops to educate women on pregnancy and antenatal 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.
Madagascar	Marie Stopes International	5,000	MSI has 11 outreach teams which work throughout Madagascar to provide reproductive health and education awareness.
Malawi	Carole Tomvald	1,000	The kits are distributed via health clinics and hospitals.
	Sustainable Rural Community Development Organisation (SURCOD)	5,000	SURCOD aims to promote good health through increasing awareness on the causes of various diseases, as well as promotion of safe motherhood.
Myanmar	MSI, Myanmar	1,000	Kits are distributed by MSI, Myanmar through their static and mobile clinics, and are provided to visibly pregnant women and to grass root level delivery care providers.

SUMMARY OF KIT RECIPIENTS IN 2011-2012

Country	NGO	Kits Sent	Project
Nigeria	Brown Button Foundation	200	The Brown Button Foundation seeks to assist by providing more opportunities of obtaining skilled care to pregnant women.
	Sweet Mother International (Kwara State)	2,000	See Kenya—SMI
	Sweet Mother International (Abuja State)	10,000	See Kenya—SMI
Papua New Guinea	Australian Doctors International (ADI)	400	ADI distributed 200 kits in the Western Province and 200 kits in New Ireland.
	Medical Society of PNG	16,000	The Medical Society of PNG currently distributes the kits through three provinces—Bougainville, Manus and Morobe.
	Oro Community Development Project	1,000	Members of the Mothers' Union for the Anglican Church, village birth attendants, and village women are trained on how to use the kits by the Oro Community Development Project team doctor. 16 villages within the Oro Province in the north have been provided with kits.
	World Hope	400	The kits are distributed via health clinics and hospitals.
Sudan	Birralee Maternity	1,200	Birthing kits are distributed by a community midwife in Nasir in the Upper Nile State, Sudan.
	Padang Lutheran Christian Relief	10,000	Kits are distributed to Traditional Birth Attendants in the Malakal region and Upper Nile and Warrap States in Southern Sudan.
Timor Leste	Clinic Café Timor	1,200	Clinic Café Timor offers primary level health services to the coffee farmers and their families in the remote mountain coffee growing districts of East Timor.
Uganda	Think Humanity	400	Think Humanity work within the Kyangwali and Kyaka II Refugee Camps in Uganda. Kits are distributed through the Azur Christian Clinic in Hoima, Uganda. The kits are distributed through women's groups and associations under UACO Health Education guidelines and traditional midwife training programmes.
TOTAL		130,000	

FINANCIAL REPORT



Where the donations and gifts come from:

Community Support Income is money received from Zonta Clubs and community groups who fundraise to hold assembly days.

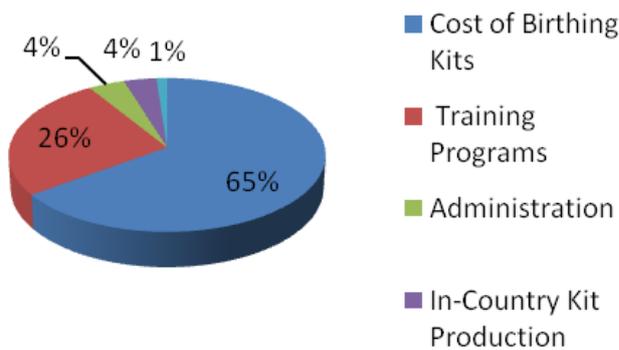
Donations include funds from the public, major individuals and corporate sponsorship.

Online donations are sourced from website giving.

Kokoda Fundraiser is money donated by individuals who walked the trail.

Overseas donations are from a global giving website.

Expressed as a percentage from figures sourced from Note 1 in financial statements.



Where the money goes:

Cost of birthing kits includes purchasing of supplies, storage, freighting to assembly days, support costs, and freight overseas.

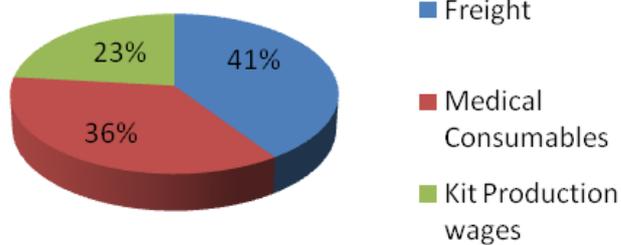
Training Programme costs are related to our overseas education programme.

Administration expenses include costs associated with the overall operational capability of our organisation; for example, audit fees, insurance premiums, and office maintenance.

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

Fundraising expenses are those related to our efforts to attract donations to fund our programmes and projects.

Expressed as a percentage sourced from the Income Statement.



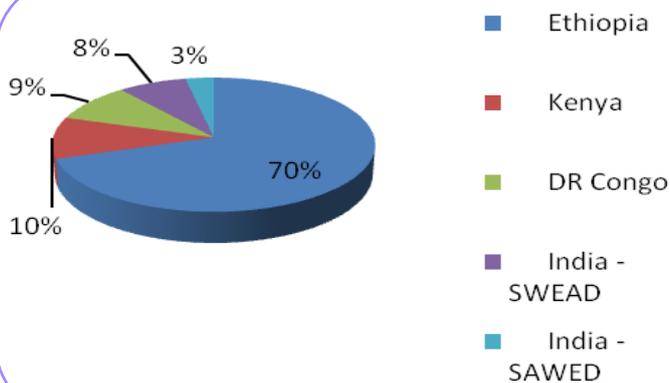
Kit Component Costs:

Freight involves the costs associated with supplies going to Zonta Clubs and community groups who assemble birthing kits, as well as the birthing kits going overseas.

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

Kit Production wages are for our support staff who assist groups with their assembly days.

Expressed as a percentage from figures sourced from the Notes to the Financial Statements.



Where Training Programme money is spent:

Ethiopia: An AusAID grant was sourced to produce 30,000 birthing kits in-country and a refresher course for 40 Traditional Birth Attendants.

Kenya: MHCD—To educate 80 traditional midwives of the Maasai Mara people.

Congo: MHCD—To educate 100 traditional midwives of the Pigmie people.

India: SWEAD—To educate 200 midwives.

India: SAWED—To educate 200 midwives.

Expressed as a percentage from figures sourced from the Income Statement.

Birthing Kit Foundation (Australia)

Income Statement for the year ended 30 June 2012

		2012	2011
Revenue			
Donations and Gifts			
Monetary	1	430,725	272,023
Non-monetary	2	141,255	156,348
Grants			
AusAID		74,750	0
Other Australian		0	0
Other Overseas		0	0
Investment Income		3,977	3,911
Membership		3,049	2,575
Other Income		10,451	1,744
Total Revenue		664,207	436,601
Expenditure			
International Aid and Development Program Expenditure			
International Programs			
Funds to International Programs	3	325,793	260,246
Program Support Costs	4	61,885	52,749
Community Education		959	8,159
Fundraising Costs			
Public		4,891	1,394
Government, multilateral and private		0	0
Non-Monetary Expenditure		141,255	156,348
Accountability and Administration		15,742	11,883
Total International Aid and Development Program Expenditure		550,525	490,779
Total Expenditure		550,525	490,779
Excess of Revenue over Expenditure		113,682	-54,178

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

Bequests and Legacies,

Revenue for International Political or Religious Adherence Promotion programs,

International Political or Religious Adherence Promotion Programs Expenditure,

and Domestic Programs Expenditure.

Birthing Kit Foundation (Australia)

Balance Sheet as at 30 June 2012

		2012	2011
Assets			
Current Assets			
Cash and Cash Equivalents	5	208,149	130,428
Trade and Other Receivables		37,560	35,475
Total Current Assets		245,709	165,903
Total Assets		245,709	165,903
Liabilities			
Current Liabilities			
Trade and Other Payables		0	29,726
Current Tax Liabilities	6	-6,400	-3,917
Other Current Liabilities	7	1,694	3,361
Total Current Liabilities		-4,706	29,170
Total Liabilities		-4,706	29,170
Net Assets		250,415	136,733
Equity			
Reserves brought forward		136,733	190,911
Excess of Revenue over Expenditure		113,682	-54,178
Total Equity		250,415	136,733

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 Financial Assets,

Non Current Assets, Trade and Other Payables

Borrowings, Other Financial Liabilities and Provisions,

and Non Current Liabilities.

Birthing Kit Foundation (Australia)

Statement of Cash Flows for the year ended 30 June 2012

		2012	2011
Cash available at the beginning of the year		130,429	168,505
Cash flows from operations			
Grants, donations and receipts from customers		516,890	272,667
Interest received		3,976	3,911
Payments to suppliers and employees		-439,245	-309,110
Tax and withholding liabilities paid		-3,901	-5,545
Net cash generated		77,720	-38,077
Cash at the end of the year		208,149	130,428

Birthing Kit Foundation (Australia)

Statement of Changes in Equity for the year ended 30 June 2012

Balance at 30 June 2011			136,733
Excess of Revenue over Expenditure			113,682
Balance at 30 June 2012			250,415

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 2012

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 2011 to 30 June 2012 have been prepared in accordance with 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.

BKFA full financial reports balances agree to the balances in the summarized financial reports included in the annual report.

BKFA full financial statements are available on our website: www.birthingkitfoundation.org.au.

Birthing Kit Foundation (Australia)

Notes to the Financial Statements for the year ended 30 June 2012

Note 1 Monetary donations and gifts	
Donations including monthly donations	71,933
Website Donations	24,636
Zonta Club Donations	146,060
Project and Program Donations	188,096
	430,725
Note 2 Non-monetary donations and gifts	
Voluntary work 01/07/2011–30/06/2012 (6,975.54 hrs * \$20.25/hr)	141,255
	141,255
Note 3 Funds to International Programs	
Medical consumables and supply materials for birthing kits	79,217
Overseas freight for kits	107,744
Kits funded in-country	14,972
Storage Costs	2,774
Assembly Day Costs and operating expenses	14,522
Birth attendant training programs	106,564
	325,793
Note 4 Program Support Costs	
Kit production wages	56,024
Kit production Superannuation	5,042
Worker's Compensation	819
	61,885
Note 5 Cash and Cash Equivalents	
BKFA Cheque Account	12,384
BKFA Maternal Health Gift Fund Account	38,618
BKFA Online Saver Account	157,147
	208,149
Note 6 Current Tax Liabilities	
GST Collected	0
GST Paid	-6,400
	-6,400
Note 7 Other Current Liabilities	
Superannuation Payable	0
Wages PAYG Withholding Payable	1,694
	1,694

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 2012.

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 that gives a true and fair view in accordance with Australian Accounting Standards and the Corporations Act 2001 and for such internal control as the directors determine is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error. In Note 1, the directors also state, in accordance with Accounting Standard AASB 101 : Presentation of Financial Statements, that the financial statements comply with International Financial Reporting Standards (IFRS).

Auditor's Responsibility

Our responsibility is to express an opinion on the financial report based on our audit. We 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 and fair presentation of the financial report 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.

Auditor's Opinion

In our opinion:

- (a) the financial report of Birthing Kit Foundation (Australia), including the code of conduct summary financial report, is in accordance with the Corporations Act 2001, including:
 - (i) giving a true and fair view of the consolidated entity's financial position as at 30 June 2012 and of their performance for the year ended on that date; and
 - (ii) complying with Australian Accounting Standards (including Australian Accounting Interpretations) and the Corporations Regulations 2001.
- (b) the financial report also complies with International Financial Reporting Standards as disclosed in Note 1.



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

Dated this 15th day of November 2012

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 2012 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 15th day of November 2012

Birthing Kit Foundation (Australia)

Directors' Financial Report for the Financial Year ended 30 June 2012

Operating results

The net excess of revenue over expenditure for the financial year ended 30 June 2012 was \$113,682.

Significant changes

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

Matters subsequent to the 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 \$2,260.

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.

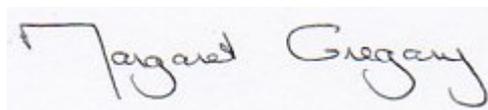
Directors' benefits

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 Board of Directors by:



Jenny Weaver
Director



Maggi Gregory
Treasurer

Date: 16 November 2012

Birthing Kit Foundation (Australia)

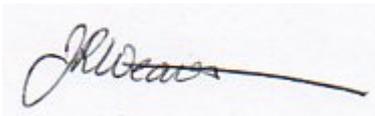
**Directors' Declaration
for the Financial Year ended 30 June 2012**

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.

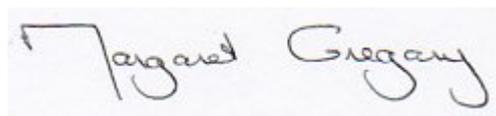
Signed on behalf of the Board and in accordance with a resolution of the Board by:

Jenny Weaver



Director

Maggi Gregory



Treasurer

Date: 16 November 2012

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www.birthingkitfoundation.org.au



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

CORPORATE GOVERNANCE STATEMENT

The Foundation is committed to achieving the 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 by the Government 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 has been endorsed as a deductible gift recipient and approval for The Foundation's Maternal Health Gift Fund was declared by the Department of the Treasury under subsection 30-85(2) of the Income Tax Assessment Act 1997 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.*

The Foundation prepared a lengthy application for accreditation with AusAID but was not successful in this instance. It has been invited to reapply in one year with good prospects for success. This is a rigorous process and to date there have been only 44 NGOs accredited with AusAID.

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 by members.

The Board has established a policy on the Role of Directors, including ethical responsibilities and leadership, an Employee and Volunteer Code of Conduct, Gender Policy, and a Conflicts of Interest policy to identify if a conflict of interest exists between any board member and the work of the BKFA. No conflict of interest has been identified.

A Gender Policy and Procedure has also been developed to ensure the Foundation does not discriminate on the basis of gender.



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; appointment of a CEO; 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.

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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@birthingkitfoundation.org.au.

Board of Directors

Directors are elected by members by postal ballot prior to the Annual General Meetings and 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 met monthly during the year. The Company Secretary lodges official ASIC (Australian Securities and Investments Commission) returns.



Financial Reporting and Performance

The Board receives budget and financial performance reports prepared by the Treasurer at each meeting. Audited Financial Statements are included in the Annual Report and forwarded to members each year prior to the AGM, as well as to ASIC, ACFID and the State Government. The Foundation reports to AusAID on receipt and dispersal of grants twice a year. Annual Reports are available on the Foundation's website at www.birthingkitfoundation.org.au.



AUSTRALIAN
COUNCIL
FOR
INTERNATIONAL
DEVELOPMENT

*The Foundation is a signatory to the Australian Council for International Development (ACFID) Code of Conduct. The Code defines minimum standards of governance, management and accountability for NGOs. Our adherence to the Code demonstrates our commitment to ethical practice and public accountability. Complaints for breaches of the Code can be lodged with ACFID by post to Code of Conduct Management Team, Private Bage 3, Deaking, ACT 2600, or by email to code@acfid.asn.au.

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:

- Ted A'Bear
- Jamie Ackerman-Harvie
- AusAID
- Valerie Browning
- Mike Gardiner
- Hunter Hall Investment Management
- Roger and Deborah Lorenz
- Peggy Charitable Foundation
- Rio Coffee
- Stirling Proactive Accountants
- Simone Huntingford
- Zonta Clubs District 22, 23 and 24

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GOVERNING BODY

The following people were members of the Board during 2011/2012.

JENNIFER WEAVER, Chairperson

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 coordinates a Zonta interclub advocacy committee and is President of the Zonta Club of Adelaide Torrens.

Special responsibilities: Chairperson, Compliance Officer, Public Relations and Marketing.

Term of office: Inaugural Board member.

Board meetings attended: 14/15

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 Coordinator for Australia 2004 to the present. Liaison person with Zonta International and clubs overseas. PR, fundraising, and programme development.

Term of office: Inaugural Board member.

Board meetings attended: 15/15

DI BARTEL, Company Secretary

Qualifications: Retired Registered Nurse

Experience: Di has worked in Adelaide and overseas in various areas in nursing, fieldwork for medical research and administration. She is one of the original members of the Birthing Kit Committee and has worked for the Foundation in gaining ACFID Code of Conduct signatory status, gaining Overseas Aid Gift Deductibility Status, policy development, strategic planning, in-country evaluation, and sustainable community development. She has been a member of Zonta International for 12 years and has served in many capacities, including club president.

Special responsibilities: Company Secretary, managing community development projects, oversight of corporate governance.

Term of office: Inaugural Board member.

Board meetings attended: 7/15

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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.

Board meetings attended: 13/15

NAOMI ARNOLD-RESCHKE, Director

Qualifications: M.Ed., BA, Dip.Ed., Dip.T.

Experience: Naomi has a wide background in strategic planning, public administration, programme development and review. Director of Education, responsible for the oversight of schools and preschools in regions in South Australia. Recently retired as Director, International Board, Convention Chairman for Zonta International Convention Melbourne, and other leadership positions at the local and international level.

Special responsibilities: Research, Programme Development and Review.

Term of office: Board member November 2011.

Board meetings attended: 10/10



RUTH JACKSON, Director

Qualifications: BA, B.Litt. (Hons), PhD International Development, Deakin

Experience: Associate Lecturer, Research Assistant, International Development. Ruth's personal and professional interests overlap. Her PhD was on maternal mortality and Ethiopia's development agenda. She is now exploring future research opportunities, assessing the distribution of clean birth kits and the uptake of women seeking facility birth, in rural Ethiopia or elsewhere.

Special responsibilities: Research, Funding Applications, Gender Analysis.

Term of office: Board member since November 2010.

Board meetings attended: 8/15

JOYLEEN O'HAZY, Director

Qualifications: MBBS, DRANZCOG

Experience: Joy has a wide background in public relations, administration, fundraising 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. She is still actively involved in the Assembly Days.

Special responsibilities: Medical information research.

Term of office: Inaugural Board member.

Board meetings attended: 13/15

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MARGARET PARSONS, Director

Qualifications: Diploma in Teaching

Experience: An original member of the Birthing Kit Committee and previous President of the Zonta Club of the Adelaide Hills. She was, for many years, the Assembly Day Coordinator for the project. Margaret is an active volunteer within her local school, church and scouting communities, and she loves camping, bush walking, reading and cooking.

Special responsibilities: Membership Officer, Post Box Correspondence Secretary.

Term of office: Inaugural Board member.

Board meetings attended: 13/15

FIONA SMITH, Director

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

Experience: Fiona was the Project Administrator of the Zonta Birthing Kit Project 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, Programme Development

Term of office: Board member November 2011 to April 2012

Board meetings attended: 3/5

