



Annual Report 2020



Health and well-being for all people and communities.



The background image shows an outdoor school courtyard. In the foreground, a woman in a black top is smiling and looking at something held by another woman in a dark blue top. They are surrounded by other people, including children in school uniforms. In the background, there are trees, a brick building with a white grid window, and colorful triangular flags strung across the courtyard. The scene is bright and sunny.

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A Message from the Co-Chairs of the Board of Directors



Photo Courtesy: Eva Rathgeber



Photo Courtesy: Carol Vlassoff

Well 2020 has certainly been an interesting year. The COVID-19 pandemic has dominated our work style, requiring us to do almost everything at a distance. The move to online programming was seamless in terms of technology, and because our team has done much of our work remotely for a number of years, relying on our excellent partners to carry the charge in the field, there was little impact on the overall programming. While so much of the COVID-19 pandemic has been heart-breaking, and we have seen first-hand how people living in vulnerable situations were made all the more vulnerable, we were fortunately able to continue to do good work with our partners.

The impact on the populations we serve, however, has not been minor. COVID-19 lockdown measures led to restrictions in health services, children being out of school, and food sources being disrupted in many parts of the world. They also led to challenges in accessing food and maintaining livelihoods in urban settings as markets were temporarily interrupted, parks and public spaces closed, and public transportation was limited. It is well known, more than one year into the pandemic, that women and children have been disproportionately affected by COVID-19, and that those already living in vulnerable situations, such as rural and remote settings or urban slum areas, have also been disproportionately affected.

Through this experience we have also learned what measures can be most protective in the case of a pandemic or other natural disaster. Priorities such as access to local food markets and outdoor public spaces, strong health systems that continue to operate at all levels, community-based health services that serve the most remote, and strong policies that protect people from non-communicable diseases and promote resilient local food systems, rose to the surface in the face of COVID-19. While we were utterly unprepared for the pandemic, our vision, mission, and principles proved to be even more important in protecting health and reducing health inequities in communities around the world.

We would like to thank our staff and Board of Directors for their commitment to achieving HealthBridge’s mission, and their resilience in adapting to the demands of a new way of working over the past year. We achieve what we do because of their dedication and hard work. Local partners have always driven the process in identifying priorities and solutions, and in applying innovative and evidence-informed policies and practices. Finally, we would also like to acknowledge the pandemic-related financial contributions we have received from the Government of Canada, which helped us to keep staff on board, and the contributions to programming received from various donors, both public and private.

Eva Rathgeber and Carol Vlassoff
Co-Chairs, HealthBridge Board of Directors



Livable Cities

What We Do

We improve the livability of cities for the most vulnerable by ensuring access to healthy transportation, healthy foods, parks and public spaces.

How We Work

We work with local groups in low and middle-income countries to strengthen the policies and programs needed to make cities livable.

"In 2020, the Livable Cities program, like every program around the world, needed to adjust to the challenges posed by COVID-19. However, our issues were more important than ever. Our partners quickly adapted to their new realities and helped inform governments of the important role public spaces play in controlling the pandemic and keeping people healthy and safe. Their outstanding work in 2020 included organizing pop-up bicycle lanes, mobile playgrounds, and hygiene stations in local markets and in open public spaces in informal settlements, which made a real difference in people's lives."



Kristie Daniel
Livable Cities Program Director

2020 ACHIEVEMENTS

Organizing mobile playground events during the COVID-19 pandemic in Hanoi, Vietnam

As a result of the COVID-19 pandemic, in Hanoi, Vietnam, children had to stay home, stop playing outdoors and stop going to school, which resulted in serious negative impacts to their physical and mental health. Although Hanoi, and all of Vietnam, were very successful in controlling the virus, public health guidance required that primary school children stay home as a precautionary measure. HealthBridge Vietnam, working with UN-Habitat and the local community, provided opportunities for children to be active outdoors through pop-up mobile playgrounds, while ensuring that COVID-19 prevention measures were upheld. The purpose of this project was to increase safe and inclusive community playgrounds for children that promote physical activity and social connection, and to mitigate the negative impacts of the COVID-19 pandemic among children in disadvantaged neighbourhoods. HealthBridge Vietnam trained 58 community members to organize playground events and in total 10 mobile playground events were held in five different communities where approximately 500 children came and played on the mobile playground.

Creating public spaces in informal settlements in Bhopal, India

Caring for India (CFI), with the support of UN-Habitat, assisted residents of informal settlements in Bhopal, India to create public spaces and ensure proper hygiene to prevent the spread of COVID-19. CFI worked with 10 slum communities and undertook actions that would help residents get much-needed outdoor time while supporting them to remain safe. CFI added 40 benches that created seating arrangements appropriate for physical distancing, installed 10 handwashing kiosks (one per settlement), showed the community ways to disinfect the seating areas in the parks, and distributed 9090 masks and 1500 sanitizers. These measures introduced a formal structure to the informal settlements in Bhopal and were a welcome contribution by communities. Community members volunteered approximately 4000 hours of their time to clean and prepare the open public spaces and help with the installation work. As a result of the program, committees of local leaders are now maintaining the spaces that were created.

Establishing a comprehensive bicycle program in Hoi An, Vietnam

HealthBridge Vietnam, together with the City of Hoi An government, won the Transformative Urban Mobility Initiative (TUMI) Global Urban Mobility Challenge award. The award funded a comprehensive plan for green and sustainable transportation that focused on cyclists in Hoi An, a World Heritage Site in Vietnam. The project, which was completed in August 2020, developed a comprehensive bicycle transportation plan to support sustainable transportation in Hoi An, which has increased the number of safe bicycle routes in the city. The project also established a pilot safe cycling route on Hai Ba Trung road, which included the installation of bicycle signal lights, designated bike lanes, and speed management measures. In addition, the project team developed a public bike-sharing scheme, which by August 2020 had resulted in over 400 registered users, more than 1000 trips and 1620 km travelled. It is expected, once mobility is less restricted and tourism is permitted again, the number of trips will increase significantly within the city.



Tobacco Control & NCD Prevention



What We Do

We aim to reduce the death and illness caused by non-communicable diseases, of which tobacco and alcohol use are major risk factors.

How We Work

We work on policies and practices to create enabling environments that reduce the risk factors for non-communicable diseases.

"The Tobacco Control and NCD Prevention program made significant achievements in 2020 while witnessing the spread of the COVID-19 virus around the world. We have built upon existing successes with the implementation of smoke-free places in Hanoi, including a model of smoke-free tourism integrated with COVID-19 prevention; we continue to raise awareness of the harms of tobacco use and the socio-economic effects of consuming new tobacco products among the public, especially among youth and policy makers; and we continued our work in supporting taxation policies on sugar-sweetened beverages and nutrient labelling."



Le Thi Thu
Senior Program Manager, Vietnam

2020 ACHIEVEMENTS

Smoke-free spaces increase in Hanoi and smoke-free tourism spaces with COVID-19 prevention efforts are implemented in Bac Ninh province

In 2020, HealthBridge Vietnam continued to support the central district of Hanoi in their efforts of implementing smoke-free restaurants and smoke-free tourism spaces in 30 selected temples, pagodas and cultural sites, and expanded its support of smoke-free spaces to the Museum of Ethnography, in collaboration with Hanoi Center for Disease Control. With support from HealthBridge Vietnam, Do Temple in Bac Ninh province integrated a new model of smoke-free tourism and COVID-19 prevention.

HealthBridge launched a new project, “Advocacy for a sugar-sweetened beverage tax and nutrition labels in Vietnam”, aimed at reducing non-communicable diseases

Overweight and obesity are growing health concerns in Vietnam with prevalence rapidly increasing among both children and adults. Overweight and obesity are major risk factors for a number of non-communicable diseases (NCDs), including heart disease and diabetes. Not only can overweight and obesity be addressed through informed dietary choices, they can also be addressed through taxation policies that aim to reduce unhealthy food consumption. This project will generate and document evidence and raise awareness among the public and policy makers about the health consequences of unhealthy food consumption, including food products with high amounts of sugar, salt, cholesterol, and trans-fats. It will also address the need to establish policies targeting the consumption of sugary beverages, such as requiring nutrient labels on food products. The project, funded by the Global Health Advocacy Incubator, is expected to aid in decreasing Vietnam’s overweight and obesity rates on a national level.

Global tobacco control study finds evidence linking education and wealth levels to tobacco-product expenditure and consumption

HealthBridge is a partner on a multi-country study, convened by the Global Alliance for Chronic Diseases research network, examining the impact of tobacco prices on smoking onset, smoking cessation, and tobacco consumption, in Chile, Colombia, Ecuador, South Africa, and Vietnam. This five-year study, that began in March 2017, investigated the impact of cigarette prices on smoking behaviours and on tobacco consumption, surveyed the tobacco retail prices, and modelled the impacts of tobacco tax using the World Health Organization’s TaXSim model. In 2020, HealthBridge published the following findings on the impact of cigarette taxes and price increases in Vietnam: 1) individuals with lower wealth and education levels had a higher smoking prevalence and consumed a higher number of cigarettes per day; 2) disparities in education contribute largely to wealth-related inequality in smoking consumption where individuals with lower education and wealth levels are more likely to smoke compared to those with higher education levels; 3) individuals living in poverty spend a larger share of their expenditure on tobacco consumption compared to the wealthy and there exists a large inequality in health care utilization between those living in poverty and those with wealth. These findings suggest that improving education is an important and sustainable measure to reduce inequality in smoking consumption and expenditure and that reducing population tobacco expenditure could reduce inequities and improve health among individuals living in poverty.

HealthBridge In The World

CANADA

Since 2018, HealthBridge has been a partner on the Canadian Collaborative for Global Health, a research initiative launched by the Canadian Partnership for Women and Children's Health to address data gaps in global health research and practice. As part of one collaborative partnership, HealthBridge worked with the Canadian Coalition for Global Health Research and McGill University to harmonize the collection of global health data, producing three tools for data collection in the field: the Perinatal Experience Assessment Tool, the Male Engagement in Women and Children's Health Tool, and the Equity-Focused Tool for Valuing Global Health Partnerships.

NIGER



In Niger, working with our partners Public Spaces for All and UN-Habitat, handwashing facilities were added to five Niamey markets as a way to help prevent the spread of the COVID-19 virus. We distributed 30 handwashing devices (six to each market) and organized a general information campaign that explained COVID-19 and encouraged the use of the handwashing kiosks. In total the project reached 1250 people, with handwashing kiosks being used by over a 150 people on a daily basis.

TANZANIA



In 2019, Urban Planning for Community Change (UPC) and HealthBridge completed a study on the location and quality of markets in Arusha, Tanzania. The study found that more than 50% of people needed to travel by public taxi to reach a market; however, the pedestrian spaces between the transit stops and the markets were poor and unsafe. In 2020, UPC worked with one of the markets in Arusha, along with city officials, to improve pedestrian spaces to ensure that people are safely able to reach the market.

NEPAL



The International Nepal Fellowship (INF) and HealthBridge partnered to improve maternal and child health in Banke District, Nepal, through activities such as the creation of mothers' groups and husbands' groups, in addition to community awareness-raising. The project achieved key improvements in maternal and child health in the community, including an increase in the proportion of women and men who knew at least three danger signs during pregnancy. At the end of the project, women reported that after attending male engagement sessions, their husbands provided increased support during pregnancy and childbirth.

VIETNAM



Throughout the course of a four-year maternal and child health project in Vietnam, Ethnic Minority communities in Son La province expressed the need for improved access to adolescent reproductive health services and information. To address community-identified needs, HealthBridge and the Centre for Creative Initiatives in Health and Population held community educational events on adolescent reproductive health, which reached over 15000 adolescents and over 1200 parents and teachers and sparked discussion about gender equality, early pregnancy, and child marriage.

INDIA



Working with a local partner, ESAF, HealthBridge supported the government in creating safer cycling during the pandemic. Targeted cycling infrastructure projects were created around schools, worksites, and offices. In total the government organized 16km of pop up bicycle lanes. In addition, ESAF helped bring the bicycle mayor program to Bangalore. The bicycle mayor is the face and voice of cycling in a city. The bicycle mayor helped connect cyclists to seniors who faced challenges in purchasing food during the first wave of the pandemic.

GLOBAL

Since 2010, HealthBridge has partnered on a multi-country tobacco control project aiming to reduce tobacco use and contribute to the achievement of Sustainable Development Goals by strengthening the implementation of the WHO Framework Convention on Tobacco Control. In Vietnam, the project focuses on strengthening the implementation of tobacco control policies including price and tax measures, protection from exposure to tobacco smoke, packaging and labelling of tobacco products, tobacco advertising, promotion and sponsorship, and the protection of public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry. In 2020, the project achieved 1) the expansion of smoke-free tourism places in Hanoi and Bac Ninh province; 2) raising youth and public awareness on new tobacco products and the need for their regulation; 3) evidence on the impact of tobacco tax on health and economic outcomes; 4) evidence on tobacco industry tactics and interference in policy development to tobacco control stakeholders and networks.



Sexual, Reproductive, Maternal & Child Health and Rights



What We Do

We improve sexual, reproductive, maternal & child health and rights among people living in vulnerable situations.

How We Work

We address the root causes of gender inequality and strengthen policies and practices that promote sexual, reproductive, maternal & child health and rights, including through the engagement of men, boys, family members, and community.

“2020 posed many challenges as the COVID-19 pandemic spread across the world. Early in the pandemic, our Sexual, Reproductive, Maternal & Child Health & Rights team in Vietnam pivoted quickly to conduct a rapid assessment of the impacts of the pandemic and the associated lockdowns on women, adolescents and children in Son La province. We are poised to act on the successes and learnings from past projects and to continue to collaborate with our implementing partners to further strengthen local health systems and promote gender equality.”



Rebecca Brodmann
Project Manager

2020 ACHIEVEMENTS

Preventing child marriage and addressing early pregnancy in Ethnic Minority communities of Son La province, Vietnam

HealthBridge Vietnam and partner, the Centre for Disease Control Son La, with the support of the Canadian Fund for Local Initiatives, implemented a project aimed at improving reproductive health among adolescents and preventing child marriage and early pregnancy in rural and remote Ethnic Minority communities of Son La province, Vietnam. This project was informed by the results of a rapid assessment that HealthBridge Vietnam and the Child Rights Working Group conducted to investigate the impacts of the COVID-19 pandemic and associated public health measures on Ethnic Minority children, adolescents, and women. The assessment revealed that adolescent reproductive health, early child bearing, and early marriage were key concerns among community members. The project addressed the root causes of early child bearing and marriage through reproductive health education for adolescents and the wider community. Adolescent reproductive health services in the region were also strengthened by working with and supporting Ethnic Minority Midwives and Female Village Health Workers to build knowledge, skills and capacity on adolescent reproductive health service delivery.

Improved health outcomes among mothers and children in Banke District, Nepal

The four year project, "Strengthening Health Systems and Improving Nutrition in Vietnam and Nepal", concluded in 2020. With our partner, the International Nepal Fellowship, we used a health systems strengthening and community mobilization approach in Banke District, Nepal, to improve maternal and child health. The Global Affairs Canada funded project strengthened the health system by supporting Health Posts to make improvements to their infrastructure, infection control, and equipment. At the end of the project, a higher proportion of women delivered at a health facility with a skilled birth attendant and the proportion of women and newborns who received post-natal care increased. HealthBridge and partners plan to build on these successes in Nepal by working with the International Nepal Fellowship to improve reproductive health in rural communities.

Improvements in male and family engagement in maternal and child health in Son La province, Vietnam

HealthBridge and partner organization, the Centre for Creative Initiatives in Health and Population, worked in Son La province, Vietnam, on the four-year "Strengthening Health Systems and Improving Nutrition in Vietnam and Nepal" project, funded by Global Affairs Canada. The project integrated male and family member engagement activities to address gender and cultural barriers to improving maternal and child health in the region. Engagement activities included education sessions with male community members, which addressed gender and cultural barriers to health, and counselling sessions which informed mothers, fathers, pregnant women and their husbands about maternal, newborn and child health and nutrition. In 2020, at the end of the project, more men reported regularly accompanying their wives to antenatal care visits and counselling visits, the percentage of women who attended four antenatal care visits almost doubled, and the percentage of partners who reported joint decision making about where to give birth increased.



Health, Nutrition & Food Security



What We Do

We support healthier food systems to address food security and malnutrition.

How We Work

We address the double burden of over and under nutrition through a food systems approach, strengthen food systems towards resilience, and improve child feeding practices, including breastfeeding.

"With COVID-19 dominating our work style, requiring us to do almost everything at a distance, the move to online programming and monitoring was quite seamless. The team has, for a number of years, done most of its work remotely, relying on our excellent partners for updates from the field. While everything else about COVID-19 has been heart-breaking, we were fortunately able to continue to do good work."



Peter Berti
Nutrition Advisor

2020 ACHIEVEMENTS

Improved nutrition among children and families in Banke District, Nepal

In 2020 HealthBridge completed the evaluation of the "Strengthening Health Systems and Improving Nutrition in Nepal and Vietnam" project. Our partner, the International Nepal Fellowship worked with communities to improve child nutrition and feeding practices through the promotion of breastfeeding, cooking demonstrations and nutrition education, and the identification and referral to further care of acutely malnourished children. The project's impact was demonstrated through the important changes that occurred from 2016 to 2019 among children in participating communities. For example, breastfeeding initiation within the first hour after birth increased from 62% at the start of the project to 87% at the end of the project. Similarly, the proportion of children consuming "Minimum Adequate Diets" increased from 44% to 60%, and the proportion of children who received Vitamin A capsules, an essential micronutrient, increased from 75% to 87%. These improvements can have lifelong positive health benefits for these children.

HealthBridge and partners investigated maximizing the use of publicly available data to strengthen program design, evaluation, and impact

In 2020, HealthBridge and project partners (Université de Montréal, Centre for Creative Initiatives in Health and Population, International Nepal Fellowship) completed research investigating the use of publicly available data and its potential utilization in baseline data collection – a resource and time intensive process, especially for NGOs that invest in conducting baseline surveys. The project answered the question: can publicly available MNCH data be used instead of, or to supplement, NGO baseline surveys? In comparing the estimates of over 100 indicators from 42 NGO baseline reports to the estimates from publicly available data from the Multiple Indicator Cluster Surveys (MIS) or the Demographic and Health Surveys (DHS), our findings indicate that in some situations, for instance, when NGOs can tolerate low or unknown accuracy, publicly available data can supplement or replace baseline survey data for NGOs.

Scaling Up Nutrition Civil Society Alliance (SUN CSA) Vietnam and partners successfully advocate for government lactation rooms in workplaces

Lactation rooms support and promote the health of mothers and babies through continued nursing by providing the space and time for mothers to express milk throughout the day at their workplace. SUN CSA Vietnam, with the leadership of HealthBridge and Save the Children (as co-Chairs), worked closely with Alive and Thrive, the Vietnam Labour Union, and UN Women in Vietnam to advocate for the need to create lactation rooms in Vietnamese workplaces. Together, the team successfully advocated for government mandated lactation rooms in workplaces with at least 1000 female workers. The new mandate was effected on February 1, 2021, where at least 40% of Vietnam's female workforce working in the formal sector gained rights to breastfeed at their workplace. This achievement creates an enabling environment that supports mothers returning from six months paid maternity leave to continue to breastfeed and express milk. While there is much more work to be done in ensuring that all workplaces have lactation rooms, investments in lactation rooms not only benefit mothers, but also benefit workplace employers, other employees, public health, and the economy.

Photo: Fresh produce market

Spotlight: Advocates for Public Spaces

HealthBridge Partner, Uganda

Advocates for Public Spaces (APS) is a Ugandan registered non-profit organization working to promote and protect the availability and quality of public spaces in urban areas. Established in 2015, their objective is to increase access to safe, inclusive, and accessible green and public spaces, fresh food markets, urban fresh air, and non-motorized active transportation. To achieve this objective, APS works with urban communities, local and national governments, and international stakeholders.

HealthBridge has been working with APS since its inception to implement its public space program. In 2015, APS and HealthBridge completed two studies that examined formal and informal parks in Kampala. The findings of the studies, which used a combination of direct observation and focus group discussions, were quite clear: there is a lack of formal public parks and open spaces in the city, particularly in outlying areas and slum settlements, creating a significant spatial inequality, and formal spaces that do exist are often of poor quality.

Since the completion of these important studies, APS has been working to address the spatial inequality of parks that exist in the city, while also addressing the quality concerns identified. By implementing pilot projects, where residents are active collaborators, APS has helped to create much loved spaces in the city while also modelling ways of improving parks for local officials. For example, APS worked with the community surrounding Lukuli Community Playground to make improvements to the space. The playground attracts hundreds of people ranging in age, from the very young to the very old, and ranging in geography, from 12 parishes in the surrounding community. Lukuli Community Playground is the only park within walking distance for over 400,000 people and is part of the numerous informal playgrounds that serve the greater Kampala Capital City area. APS worked to re-imagine Lukuli to support the active play and recreation needs of both children and women, which included the addition of safe change facilities for women, netball courts, and a children's play area.

Lukuli is a case study for future community-led projects and provides the foundation for APS's evidence-based advocacy campaign for public space policy improvement in Kampala and other cities in Uganda. APS has now begun working on local public markets following a similar approach. Since completing their market assessment studies, APS has begun advocating for the development of stronger market policies throughout the country.

For more information about APS, please visit their website at: <https://www.advocatesforpublicspace.org/>



(Top) Children play at at Lukuli Community Playground
(Bottom) Community engagement workshop with the residents near Lukuli

An Intern's Story: My experience as an Intern with HealthBridge's Sexual, Reproductive, Maternal and Child Health program

By Ariana Mihan

Upon entering the Master of Public Health (MPH) program at Queen's University, students were encouraged to develop a mission statement for our goals in public health. My mission statement focused on my passion for health equity and how I am motivated to contribute to health equity-focused research to inform evidence-based health policies aimed at reducing health disparities. When I was exploring opportunities for practicum placements, HealthBridge's mission and goals caught my eye, as their focus on collaborating with international partners to improve health equity through research, policy and action, aligned with the mission statement that I had developed for myself. In May 2020, I joined the HealthBridge team as an Intern to complete my MPH practicum under the Sexual, Reproductive, Maternal & Child Health & Rights program.



Photo: Ariana Mihan

During my placement, I conducted a literature review on comprehensive sexuality education interventions and programs in Southeast Asia, with the goal of informing HealthBridge's future programming. I was able to take an independent approach to this project, while gaining regular feedback and being supported by my supervisor. Through this project, I reviewed and analyzed the literature, synthesized the results and wrote a narrative review. I also developed a briefing note where I synthesized the key review findings and communicated actionable recommendations for HealthBridge's future sexuality education program development. In addition to these key deliverables, this project enriched my understanding of the core components of interventions aimed at improving sexual and reproductive health, and specifically, the importance of applying a gender equality and human rights lens in these approaches.

In addition to this main project, I had the opportunity to co-facilitate virtual "lessons learned" sessions with HealthBridge's partner organizations in Nepal and Vietnam. This was a unique and great learning experience for me in terms of facilitating and leading discussions. I also developed infographics to disseminate the findings of a Maternal, Newborn and Child Health project in Nepal. These deliverables allowed me to enhance my ability to communicate key information and effectively tailor it to the target audience.

My practicum with HealthBridge was a valuable and well-rounded experience. I gained insight into the workings of a collaborative, global health NGO. This enhanced my understanding of how interventions to improve health equity can be successfully implemented and how collaborating with local community members and groups are of utmost importance in this process. Finally, my practicum allowed me to work on a variety of projects. These projects allowed me to further develop and improve both my literature review and communication skills. These are skills that I am able to leverage and apply to my work in health services research, where critically assessing research evidence and collaborating with partners are key components of the work.

To learn more about internship opportunities, visit: healthbridge.ca/page/get-involved



Project Donors

Thank you to our generous donors for their contributions to the "Strengthening Health Systems and Improving Nutrition in Nepal and Vietnam" project.

Over the course of the four-year project, which came to an end in 2020, HealthBridge received generous donations which have supported our work to improve access to health services and nutrition among vulnerable communities in Vietnam and Nepal. In the coming years, HealthBridge will continue its work with communities in Nepal and Vietnam, where we plan to build upon key learnings from the project and work closely with local stakeholders to ensure sustainability of the most integral aspects of the project.

We would like to extend our gratitude to our project donors for their support. To donate to HealthBridge, visit <https://healthbridge.ca/donate> for more information

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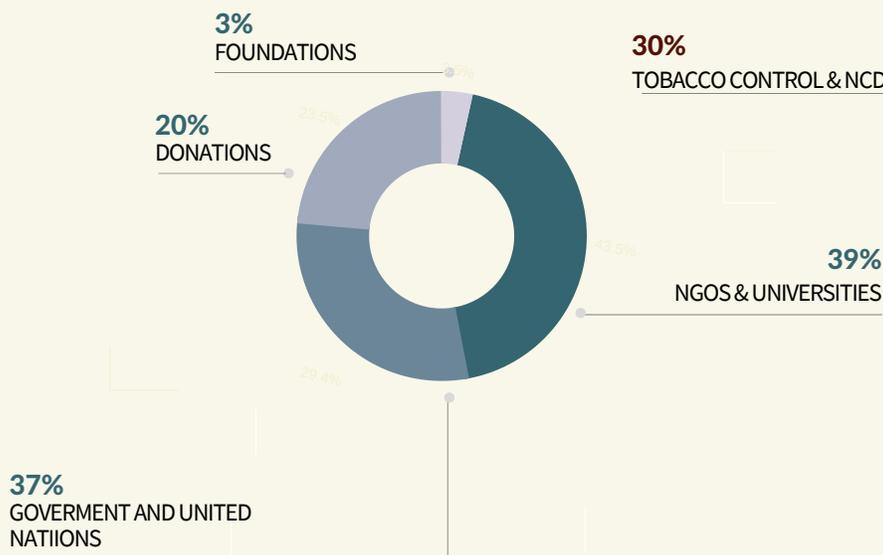
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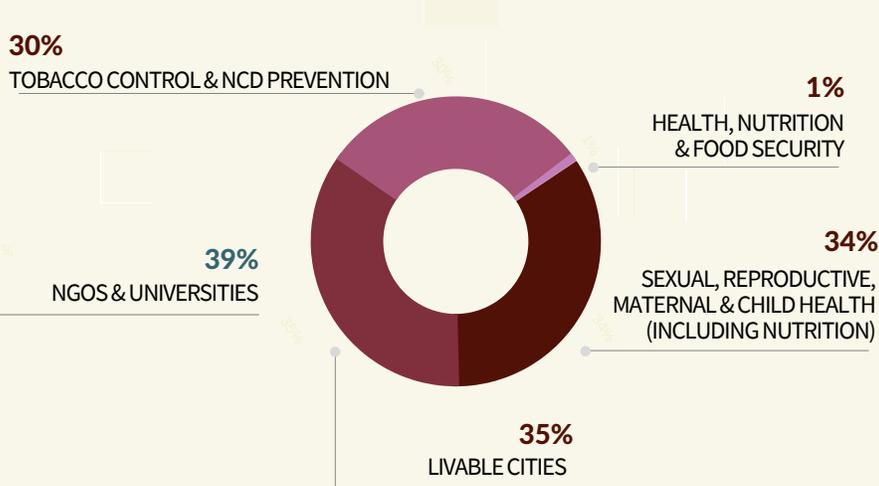
Financial Summary 2020

The following is an excerpt from HealthBridge's audited financial statements. For more information, please visit www.healthbridge.ca.

REVENUE SOURCES



USE OF FUNDS BY PROGRAM



Acknowledgments

We are grateful for the contributions made by individual donors and the following:

Institutions

- American Cancer Society
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- Tundra Technical Solutions
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- UNIFOR Social Justice Fund

Thank you to our dedicated interns

- Ariana Mihan
- Kamilla Pinter

Tim Stone Memorial Award



Congratulations to Kamilla Pinter, recipient of the 2020 Tim Stone Memorial Award. Kamilla worked with HealthBridge during the early days of the COVID-19 pandemic and authored a paper on Building Back Better in the Health Sector.



HealthBridge works with partners and communities worldwide to improve health and reduce health inequities through research, policy and action.



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