



# Annual Report 2025



Health and well-being for all people and communities.







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# A Message from the Chairs of the Board of Directors



Photo Courtesy: Orvill Adams



Photo Courtesy: Eva Rathgeber

2025 was a year of significant disruption in the world with an important impact on global health. We are operating in a landscape where funding volatility, geopolitical shifts, global unrest, and growing pressures on civil society to uphold human rights are making it harder to plan and sustain focus over time. As funding has been withdrawn from some of the most vulnerable causes and sensitive topics, HealthBridge is responding with renewed commitment to our vision of health and well-being for all people and communities, and our mission to improve health and reduce health inequities in the world.

In keeping with our strategic plan 2025-2030, we have adjusted to emerging global health issues by supporting our partners to stay the course, in many cases with reduced funding from their donors, in four core health programs: nutrition and food security, tobacco control and NCD Prevention, Livable Cities, and Sexual, Reproductive, Maternal and Child Health & Rights. In the following pages you will read highlights from each of these programs through the work we do with our partners.

We have capitalized on the synergies between our programs, and have opened up opportunities in the area of urban nutrition and food security, bringing together the strength of our work in the Livable Cities and Nutrition and Food Security programs, and the work of our partners, on markets as potential sites for improving not only livelihoods, but also nutrition knowledge, diet quality, and social connections. Growing urbanization globally is reshaping food systems and presenting new nutrition challenges, particularly among low-income urban and peri-urban populations. While food insecurity rates appear lower in cities, urban averages can mask the inequalities with slum dwellers and other marginalized groups. Urban households often face limited capacity to produce their own food, increasing reliance on local food markets. The markets simultaneously support livelihoods and strengthen urban-rural food linkages, which makes them critical parts of the food system. Investing in local markets and improving functionality and accessibility of local markets can contribute to improved diet diversity and micronutrient intake, reduced food insecurity, enhanced vendor livelihoods, and greater spatial equity in urban food access.

Some key highlights from 2025 in other programs include setting up a Healing Park in Jaffna, Sri Lanka. Safe public spaces play an important role in healing and rebuilding social connections; these efforts improve health and inclusion and provide a model for nature-based resilience. In Nepal, mobile learning labs were piloted as an innovative and safe way to deliver comprehensive sexuality education in a setting where stigma and cultural practices can otherwise discourage girls from attending school. And the introduction of taxes on sugar sweetened beverages for the first time in Vietnam is projected to reduce consumption of these beverages and reduce overweight and obesity, as well as improve diet quality, thus addressing the double burden of malnutrition.

In the following pages you will read some exciting stories from our partners in Ghana, India, Tanzania, Uganda, Nepal, and other countries, including training of health workers in remote health posts in Nepal thus making services available to women and children closer to their homes. In Bangladesh youth volunteers supported health camps where events and exhibits promote the rights of women and adolescents and improved access to SRH services. Youth engagement in Dhaka culminated in the first Bangladesh Urban Youth Conference and produced the youth-led Dhaka Declaration 2026. The Mmofra Foundation in Ghana launched an initiative to connect urban residents, especially youth, with green spaces through digital storytelling in Accra.

With our partners, we strive to ensure all people have access to health and wellbeing. This work is made possible thanks to our partners, our staff, donors, and of course our board of directors. Thank you for all that you do.

Eva Rathgeber & Orvill Adams  
Co-Chairs, HealthBridge Board of Directors



Photo above: Bangladesh Urban Youth Conference 2025



## 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.

### *The Issue*

- The way cities are built impacts people's health, economic opportunities and relationships.
- A livable city should be walkable and provide access to water, sanitation, transportation, clean air, housing and healthy food.
- Everyone should have access to public spaces which are crucial for socializing and physical activity.

### *2025 Highlights*

- Wellness session participants at the **new Healing Park** in Jaffna, Sri Lanka reported an increase in daily physical activity by 20-45 minutes.
- **Safe school routes** were established in three countries including Bangladesh, Nepal and Vietnam.
- Car-Free Day in Kampala brought together more than 1,000 participants to advocate for safer, **people-friendly streets**.

# 2025 ACHIEVEMENTS



Kristie Daniel  
Program Director

## Healing spaces in Jaffna, Sri Lanka

In Jaffna, Sri Lanka communities continue to recover from decades of conflict. Safe public spaces play an important role in healing and rebuilding social connections. Through the Healing Park and broader public parks initiatives, community programs are creating welcoming spaces for women, children, older adults, and people living with disabilities.

In 2025, wellness sessions at the Healing Park brought together women across generations to exercise and connect. Participants reported increasing daily physical activity by 20–45 minutes, while women, elderly participants, and people living with disabilities reported feeling safer and more included. Across Jaffna’s parks, events such as Play Time, English for Fun, and Open Streets reached more than 400 participants. Community clean-ups mobilized 52 volunteers, and 22 fruit trees were planted to encourage long-term stewardship. These efforts revived underused spaces, strengthened social cohesion, and improved health and inclusion, demonstrating how the Healing Park has become a model for nature-based healing and resilience in Jaffna.

## Safe school routes across Asia

HealthBridge and its partners are advancing safe school routes and zones across India, Nepal, Vietnam, and Bangladesh, helping make streets safer and more accessible for children. In Bangladesh, the Active Safe Routes to School initiative engaged students and communities in neighbourhood planning, with 69 students submitting letters to city officials and eight workshops held to design child-friendly environments. In India, safe school zones were piloted across multiple cities using simple street safety improvements and policy engagement to enhance safety and accessibility, impacting thousands of children. Nepal advanced people-centered street initiatives and car-free areas, creating safer environments for children and families. In Vietnam, streets around three schools were redesigned to improve safety, while more than 200 officials were trained on safe street and school-zone design. This resulted in strengthened partnerships, improved road safety, and increased support for child-friendly urban planning, demonstrating how safe school routes can create healthier, more inclusive cities across the region.

## Reclaiming streets and public spaces for people in Uganda

In Uganda, HealthBridge’s partner, Advocates for Public Spaces (APS), made significant progress in transforming how streets and public spaces are used in Kampala. A major milestone was the growing success of Car-Free Day, which attracted over 1,000 participants in 2025, demonstrating strong public demand for safer, people-centered streets. This momentum was reinforced through three large community events, each drawing more than 200 participants, where school playgrounds and city spaces were revitalized through tree planting and improved facilities.

These efforts contributed to safer, more accessible environments for walking, cycling, and play, while also strengthening public awareness and engagement. APS’s collaboration with government and partners has helped embed walking and cycling and public space improvements into city planning, laying the foundation for more inclusive, healthy, and sustainable urban development in Kampala.



## Tobacco Control & NCD Prevention



### *What We Do*

We aim to reduce 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 Issue*

- Tobacco use is one of the world's leading preventable causes of death and a risk factor that is common to four major non-communicable diseases (NCDs).
- NCDs are the leading cause of death globally and disproportionately affect people in low and middle income countries.
- In addition to tobacco use, the other main risk factors of NCDs are physical inactivity, unhealthy diet and misuse of alcohol.

### *2025 Highlights*

- A landmark decision to adopt a **mixed tobacco tax structure** in Vietnam will contribute to reduced affordability of tobacco and thus reduced tobacco use.
- Implementation of **smoke-free policies** was expanded across multiple tourism sites in Vietnam.
- Monitoring tobacco and junk food industry narratives and activities supports efforts to respond to and counter **industry interference**.

# 2025 ACHIEVEMENTS

## Advancing tobacco tax in Vietnam

In Vietnam, low tobacco tax remains one of the biggest challenges to reducing tobacco use, keeping cigarettes affordable and widely accessible. Over the past year, HealthBridge actively supported stronger tobacco tax policy in Vietnam, engaging closely with government agencies, the WHO, academic institutions, civil society organizations, and the media.



Nguyen Thi An  
Country Director, Vietnam

A landmark policy achievement was reached on June 13, 2025, when the National Assembly of Vietnam passed the amended Law on Excise Tax. A key feature of the tobacco tax reform is the shift from a purely ad-valorem system to a mixed excise structure, introducing a specific tax component to strengthen policy effectiveness. Under the new law, a specific excise tax of 2,000 VND (10¢) per pack of cigarettes will take effect in January 2027, with annual increases reaching 10,000 VND (50¢) per pack by 2031. The reform is projected to deliver significant health and economic gains, including a reduction in smoking prevalence from 41% to 37% by 2031, helping 2.1 million people quit or avoid smoking by 2031, preventing 700,000 premature deaths over the coming decades, and generating an additional VND 24,000 billion (equivalent to almost USD 1 billion) in annual government revenue by 2031.

## Advancing smoke-free policies and implementation

Notable achievements were made in advancing smoke-free (SF) policy and implementation across Vietnam in 2025. In close collaboration with the Ministry of Culture, Sport and Tourism, enforcement of SF policies was strengthened and SF tourism models were expanded to Quang Binh, Phu Quoc, and Hue, which are popular tourist sites in Vietnam. SF schools were promoted through a partnership with the Ministry of Education and Training – integrating SF environments into school settings, delivering communication campaigns, and conducting training courses for teachers who in turn would train students. Importantly, the program successfully secured the Ministry of Health’s commitment to further strengthen SF environments in Vietnam, supporting the revision of SF policy to transition from partial indoor smoking restrictions toward a comprehensive indoor smoking ban across public places such as airports, ships, bars and hotels.

## Strengthening industry monitoring and response to industry interference

Industry monitoring and response is a key pillar of policy advocacy for tobacco and sugar-sweetened beverage (SSB) control. Building on earlier work in tobacco taxation and smoke-free policies, HealthBridge has developed a comprehensive and systematic approach to monitor and counter industry interference. Industry narratives and activities are tracked daily across multiple channels and recorded in a dedicated monitoring system. The data is analyzed and synthesized into regular outputs, including the monthly Tobacco Industry Monitoring Newsletter, the 2025 Tobacco Industry Interference Index, and monthly Media Surveillance reports for SSB taxation and nutrition labelling. Continuous monitoring strengthens coordination and collective action across advocacy networks by rapidly translating findings into advocacy tools and regularly sharing them with partners. Media partners are actively engaged in monitoring and response efforts, improving journalists’ ability to identify and report industry misinformation, and promoting more accurate, evidence-based reporting and greater public awareness. Policymakers have also gained a stronger understanding of industry tactics through workshops and knowledge-sharing, resulting in better alignment and more effective policy responses.

# HealthBridge Partner Impacts Around The World

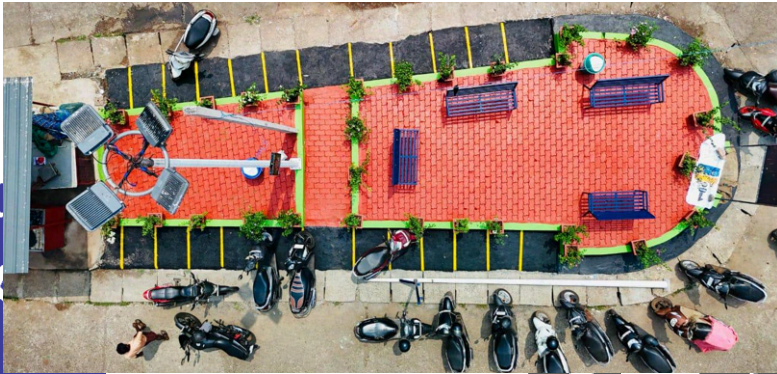


Photo: Local public market in Kerala, India after clean up efforts

Recognizing the need to protect and preserve markets, **ESAF Foundation** partnered with Ramanattukara Municipality and the Local Self Government Department to revitalize a local public market in Kerala. As part of the project, community-led clean-up drives were organized. A neglected area that was used for waste dumping directly in front of the shopfronts was transformed into a functional public seating space. This simple intervention significantly improved the usability and appeal of the market environment. Building on this initiative, the municipality has now allocated 500 USD for further renovations in the market and renovations are also planned in other local markets.

In 2025 **Mmofra Foundation** launched a new initiative to connect urban residents, especially youth, with green spaces through digital storytelling in Accra. By piloting interactive tools such as QR codes and mobile platforms in a public park, they aim to increase awareness of the health and climate benefits of green spaces while strengthening public engagement and influencing policy support for more inclusive urban parks.

## GHANA



Photo: Mobile platform for literature in Accra, Ghana

## INDIA

## UGANDA

**Advocates for Public Spaces** is advancing improvements at Kasubi Market by redesigning fish stalls to enhance hygiene, storage, and accessibility, directly improving conditions for vendors and customers. At the same time, the introduction of “Farmers’ Corners” is strengthening links between farmers and urban markets, creating new pathways for selling fresh, locally produced food.

## TANZANIA

**Urban Planning for Community Change** has supported the development and upgrading of community parks that now serve an estimated 62,000 residents within walking distance, improving access to safe, shared public spaces. These parks have strengthened community ownership and created important spaces for recreation and social connection, and ongoing work is addressing gaps in inclusivity and accessibility.



Photo: Making improvements to Kasubi market in Uganda

# NEPAL

Poor road conditions and the mountainous terrain in the Kalikot district of Nepal make it difficult to reach central health facilities such as hospitals. As a result, most women rely on nearby health posts, which often have limited equipment and few health staff with specialized training. One nurse shared “I worked in the health field since 2011 without receiving any further training. Without training, proper equipment or transportation, it was very hard work, especially in a remote place like Kalikot where the roads are bad”. HealthBridge’s partner **International Nepal Fellowship** provided training for health workers in Kalikot on a number of sexual, reproductive, maternal and child health topics. The same nurse now reports that the trainings have strengthened her technical skills and increased her confidence. She now provides services to women who previously had to walk for hours to another health facility.



Photo: Nurse doing patient intake at health post in Kalikot, Nepal



Photo: Health worker providing SRHR services in Bangladesh

**Ipas Bangladesh** and other partners trained more than 100 general practitioners in underserved urban areas as part of the SRHR in Dhaka project, to provide family planning, menstrual regulation, and postabortion care with respect and empathy. One of the trained GPs, Dr. Asma Huq, met Sathee\*, a 21-year-old mother of two married at 16, who faced restrictions on family planning from her husband and felt anxious and fearful. Through confidential, rights-based counseling, Sathee chose the injectable contraceptive method and received regular follow-ups. Over time, she regained confidence, improved her wellbeing, and started small income-generating activities. In her words, “Now, I no longer live in fear of an unplanned pregnancy.” Sathee’s story shows that access to voluntary, rights-based family planning is more than a health service. It is a pathway for women to reclaim autonomy, dignity, and control over their lives.

# BANGLADESH

# VIETNAM

**VinUniversity** and HealthBridge signed a Memorandum of Understanding, marking the start of a strategic partnership in the field of public health. Collaborating with VinUniversity strengthens coordination in education, research and knowledge exchange. The partnership will focus on three core pillars: education and training, scientific research and collaboration and knowledge translation. VinUniveristy’s academic excellence and strong research capacity will meet HealthBridge’s extensive field-based program implementation and policy engagement experience, to produce sustainable improvements in public health.

# SRI LANKA

**ESAF Global Canada** supported the launch of Jaffna’s first-ever Farmers Market, enabling 14 vendors, many of them women, to access urban customers and earn income directly. The market also integrated a counselling stall linking healthy food with mental well-being. Together, these efforts are strengthening local livelihoods, food systems, and community well-being in Jaffna.



Photo: Vendor at a market in Sri Lanka



## Sexual, Reproductive, Maternal and Child Health & Rights



### *What We Do*

We improve sexual, reproductive, maternal & child health (SRMCH) 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.

### *The Issue*

- Access to adequate, affordable and quality SRMCH services is often limited especially for people living in vulnerable situations.
- Gender inequality is a root cause of many SRMCH and rights issues.
- Despite global improvements to SRMCH and rights, women and children still suffer from largely preventable health issues that have lifelong consequences, such as infection and malnutrition.

### *2025 Highlights*

- Young people played a central role in **community mobilization and raising awareness** of sexual and reproductive health and rights issues in Bangladesh.
- **Mobile learning labs** were piloted as an innovative way to deliver **comprehensive sexuality education** in rural Nepal.
- Access to and use of **sexual, reproductive, maternal and child health services** increased in Nepal and Vietnam as a result of health systems strengthening and community engagement.

# 2025 ACHIEVEMENTS

## Improving sexual and reproductive health and rights in Dhaka, Bangladesh

The Improving Sexual and Reproductive Health and Rights (SRHR) in Dhaka project places young people at the center of its community mobilization strategy. More than 1,000 youth volunteers were recruited and trained to lead awareness and advocacy efforts in underserved, low-income areas of Dhaka. They played a key role in reaching peers and communities with SRHR messages through interactive sessions using visual aids, games and real-life storytelling.



Kamilla Pinter  
Project Manager

Youth volunteers also supported health camps by mobilizing participants, assisting with client registration and guiding service seekers to appropriate services. They participated in advocacy events and exhibitions promoting the rights of women and adolescents, improved access to SRHR services, and action against sexual and gender-based violence. A youth Photovoice initiative enabled young people to share their SRHR experiences and challenges through photos and personal stories, which were exhibited in communities and at high-level stakeholder events. Youth engagement culminated in the first Bangladesh Urban Youth Conference 2025, which brought together 646 participants and produced the youth-led Dhaka Declaration 2025, a 16-point policy framework currently under government review that calls for an urban health system that ensures sexual and reproductive health and rights for all.

## Mobile learning labs deliver comprehensive sexuality education in Nepal

In rural Nepal, retention and participation of girls in school is closely linked with sexual and reproductive health (SRH). Stigma, lack of awareness around SRH issues, harmful practices like chaupadi (segregation during menstruation) and child marriage often lead to girls dropping out of school. HealthBridge and our partner International Nepal Fellowship piloted mobile learning labs (MLLs) in five schools to deliver comprehensive sexuality education (CSE). MLLs use servers with pre-loaded content, making them suitable for low-resource settings without internet access. Because students can access the content privately and at their own pace, MLLs provided a practical way to address sensitive SRH topics that are often not openly discussed. The pilot showed that MLLs were a context-appropriate and well-received approach for delivering sensitive education in rural Nepal. By the end of the school year, students demonstrated improved knowledge across several SRH topics.

## Strong reproductive and maternal health outcomes in Nepal and Vietnam

The “Improving reproductive health and preventing child marriage in Nepal and Vietnam” project was completed in September 2025. The project improved access to and use of quality sexual, reproductive, maternal and child health (SRMCH) services in remote and underserved regions. Adolescents and community members also showed better knowledge and more positive attitudes about the importance of timely health care, gender equality, and the harmful effects of child marriage.

In Nepal the use of essential health services like antenatal care and postnatal care increased. Most women who attended at least one educational session could identify the correct schedule for antenatal checkups and name three danger signs during childbirth. Men who took part in male engagement sessions also showed positive attitudes toward sharing housework and making joint decisions about contraceptive use. In Vietnam, communication between couples was reported to improve, and adolescents showed greater knowledge about pregnancy and contraceptives. By the end of the project, women and girls in Vietnam also reported greater confidence in making their own SRMCH decisions.



## 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.

### *The Issue*

- The double burden of malnutrition, the coexistence of both under and over nutrition, is a growing challenge in many developing countries.
- Progress in reducing food insecurity and malnutrition is fragile due to emerging challenges like public health emergencies, climate shocks and conflict.
- Both physical and policy environments have important implications on access to healthy and nutritious foods thus impacting obesity and overweight.

### *2025 Highlights*

- Food markets were supported and championed as key instruments to improve **urban food security**.
- Introducing **taxes on sugar sweetened beverages** for the first time in Vietnam is projected to reduce consumption of SSB and reduce overweight and obesity.
- Strengthening the implementation of **nutrition labelling** in Vietnam will guide consumers to make more informed choices about their diet.

# 2025 ACHIEVEMENTS



Behnoush Ahranjani  
*Nutrition Advisor & Evaluation Expert*

## **Championing markets for urban food security**

HealthBridge recognizes the increasing importance and unique challenges of urban food security. Urban populations are growing globally, and unlike rural populations, depend mainly on purchased food which makes them vulnerable to food price volatility, supply chain disruptions and climate-related shocks.

Over many years, HealthBridge's Livable Cities program has supported and strengthened urban food markets. For many urban households, markets are a primary source of fresh, healthy food. Markets are also centers of economic and social activity where people, often women, earn a living, manage household food purchasing, and exchange information. At the UN Food Systems Summit in 2025, HealthBridge highlighted the potential of markets as a part of sustainable solution to food insecurity while also illustrating how markets support broader health, wellbeing and long-term development. HealthBridge will continue to champion markets and seek partnerships and opportunities for leveraging markets to improve urban food security.

## **Introducing taxes for sugar-sweetened beverages (SSB) for the first time in Vietnam**

HealthBridge successfully supported the adoption of an SSB excise tax in Vietnam, leading to an amendment of the Law on Excise Tax in 2025. For the first time, SSBs containing more than 5 grams of sugar per 100 ml were included in the excise tax framework, with rates set at 8% from January 1, 2027, increasing to 10% by January 1, 2028. HealthBridge's advocacy combined evidence-based policy work, strategic communications and strong collaboration with government, UN agencies, civil society and the media. The organization also provided technical support for a model developed by the WHO and Hanoi University of Public Health, which found that a 20% increase in SSB retail prices, as recommended by the WHO, could reduce consumption and lower overweight and obesity rates by 2.1% and 1.5%, respectively. The model also projected the prevention of approximately 80,000 diabetes cases and savings of nearly VND 800 billion (USD 30 million) in healthcare costs.

## **Support for implementing nutrition labelling in Vietnam**

Nutrition labelling helps consumers make informed choices by providing easy-to-understand information on packaged foods. HealthBridge has supported the implementation and strengthening of nutrition labelling policies in Vietnam, including enforcement of back-of-package labelling (BOPL) and advancing the policy, regulatory and evidence base for front-of-package labelling (FOPL). A standardized BOPL framework outlining which nutrients must be declared and how they are measured and presented provides the foundation for FOPL development.

HealthBridge strengthened BOPL legislation by working with the Ministry of Health to address questions on labelling requirements, particularly around sugar content declarations for beverages. To support enforcement, HealthBridge, the Ministry of Health and the WHO organized workshops across Vietnam on nutrient declaration and nutrition labelling. These efforts improved regulatory readiness, clarified implementation requirements and strengthened coordination among central and provincial authorities.

Working closely with government agencies and the WHO, HealthBridge also advanced momentum for FOPL by providing guidance on nutrient profiling, organizing capacity-building workshops for ministries and inspection bodies, and developing resources on best practices, legal gaps, and FOPL design and requirements. In addition, HealthBridge produced a policy brief and Q&A booklet to inform National Assembly delegates ahead of the upcoming legislative session and build support for FOPL policy.

# Partner Spotlight: Mmofra Foundation

Founded in 1997, the Mmofra Foundation is dedicated to enriching the cultural and intellectual lives of children across Ghana. “Mmofra,” meaning children in Akan, reflects the organization’s core mission: to create opportunities for children to learn, play, and thrive beyond the classroom. Building on the legacy of Efuia T. Sutherland, a pioneer in children’s literature and cultural development, the Foundation continues her vision of child-centred spaces and programming in rapidly urbanizing contexts.

Led by Executive Director Esi Sutherland-Addy, Mmofra works with a global network of architects, educators, and artists to design innovative play and learning environments. Their approach emphasizes informal, outdoor spaces as critical sites for creativity, cultural expression, and early childhood development.

One standout initiative is the Book Stroll, which transformed public spaces into interactive reading environments using enlarged pages from children’s books in English and local languages. These events, reaching up to 2,000 participants, made reading a shared, joyful, and culturally grounded experience for children and families.

Another key project was the Market Play Spaces project, which addressed the needs of young children in urban markets, where many spend long hours with caregivers. By creating early childhood micro-play spaces in markets like Malata and Nima, Mmofra is improving safety, stimulation, and developmental opportunities for children in some of Accra’s busiest environments.

Through its innovative programming and strong community partnerships, Mmofra Foundation is demonstrating how inclusive, child-centered public spaces can support learning, well-being, and creativity, thereby helping shape the next generation of change-makers in Ghana and beyond.



Top Photo: Children at market play space in Accra, Ghana  
Bottom Photo: Book Stroll in Accra Ghana

*Learn more about Mmofra Foundation: <https://www.mmofraghana.org/>*

# An Intern's Story

By Araz Bazajian

Throughout my academic journey, I found myself increasingly drawn to understanding how our surroundings shape our health. I was consistently motivated by efforts that keep people healthy and prevent illness, rather than responding only after illness has progressed. A central question always guided my path: how do society, the built environment, and the systems around us influence health? While pursuing my Master of Public Health, I was excited to discover an internship opportunity that aligned so closely with these interests, exploring the intersection of urban environments and public health.

I completed my internship with the Livable Cities Program at HealthBridge during the summer of 2023.

I developed impact reports and infographics using evaluation data from projects across Africa and Asia, working closely with international partners. I also conducted a literature review on green public spaces to inform a new project in Sri Lanka, as well as developed its logic model aligned with the UN Sustainable Development Goals. In addition, I contributed to integrating diversity, equity, and inclusion principles into evaluation frameworks. This experience allowed me to bring together research, analysis, and evaluation, grounded in equity, sustainability, and collaboration.

When my internship concluded, I knew my journey with HealthBridge was far from over. The lessons I gained carried into all aspects of my work, and I remained eager to contribute to the organization's mission of improving health and reducing inequities through research, policy, and action. After completing my master's degree, I continued supporting the Livable Cities Program as a consultant, synthesizing research and translating findings into actionable insights through report writing, with a focus on programming and policy related to nutrition and urban public space.

From the very beginning of my time at HealthBridge, I have been inspired by the organization's commitment to shape healthier, more equitable communities globally through evidence-informed approaches. I am thrilled to write that my journey with HealthBridge still continues, as I have now joined the team as Project Officer, continuing to advance the work I deeply admire and value.



Photo: Araz Bazajian

To learn more about internship opportunities, visit: [healthbridge.ca/page/get-involved](https://healthbridge.ca/page/get-involved)



## Project Donors

**Thank you to our generous donors for their contributions to reproductive, maternal and child health and nutrition in Son La, Vietnam.**

In the remote and rural regions of Vietnam like Son La province, stunting among children is still a considerable challenge. Villages are located far from commune health centers and often hard to reach due to the mountainous geography and poor road conditions. Local village health workers are present in the community but often lack training on nutrition for children. This means that local communities do not receive important nutrition information and services. Since 2023, HealthBridge has worked with teams of community educators and health workers who travel from village to village to provide mobile sessions on nutrition and cooking demonstrations. Educators and health workers are trained on maternal and child nutrition, breastfeeding and complementary feeding, as well as facilitation techniques before they are deployed to the field. The training boosts their knowledge and confidence and the mobile teams bring practical education sessions to the doorstep of local people. As one educator notes, “In the past, food demonstrations were only done in community health centers, which makes it difficult for mothers who live far away to participate. But now, they happen in their own villages.”

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



## Leadership

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### Executive Director

Sian FitzGerald

### International Presence

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Senior Advisor  
Debra Efroymsen

#### India

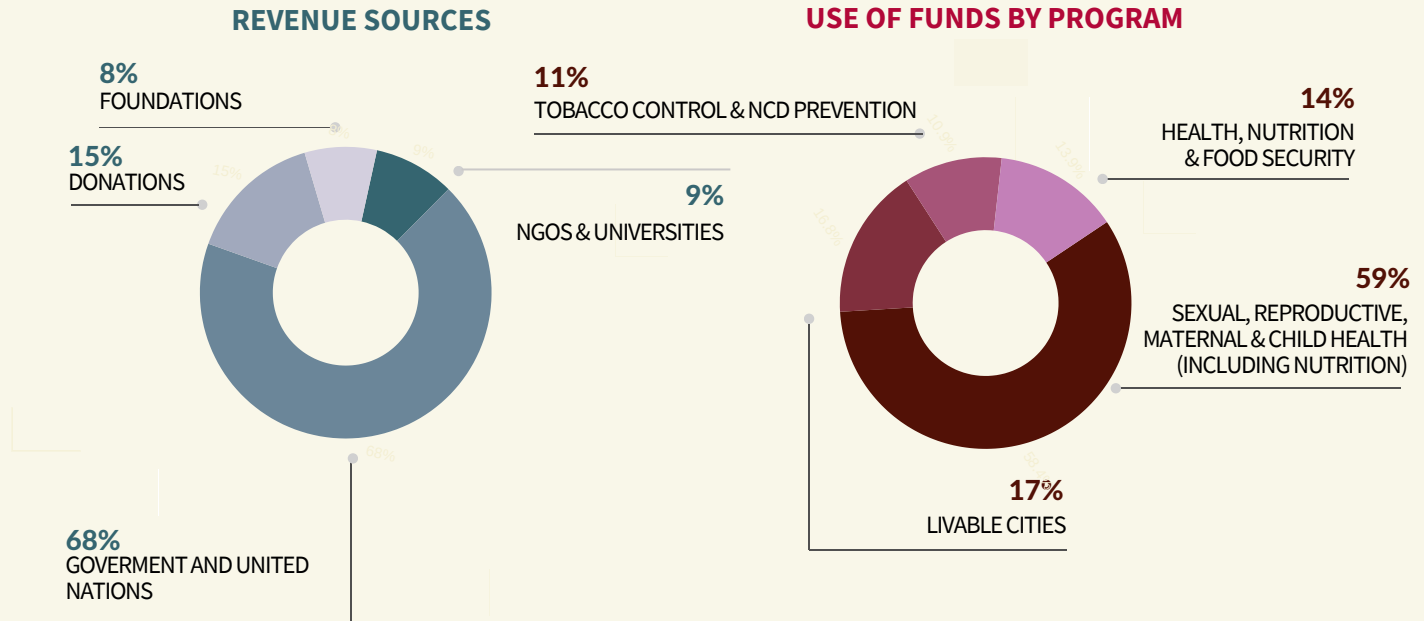
Regional Manager South Asia  
Phaeba Abraham

#### Vietnam

Country Director  
Nguyen Thi An

# Financial Summary 2025

The following is an excerpt from HealthBridge's audited financial statements. For more information, please visit [www.healthbridge.ca](http://www.healthbridge.ca).



## Acknowledgments

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

### Institutions

Red Cross  
SEATCA  
Campaign for Tobacco Free Kids  
UN Habitat  
University of Montreal  
World Resources Institute

### Foundations

60 Million Girls Foundation  
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Rockefeller Philanthropy  
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UNIFOR Social Justice Fund

### Government

Government of Canada

*Thank you to our dedicated interns and volunteers*

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Emily Meier  
Farhan Khandakar  
Nasrin Sultana Nipa  
Ranee Law  
Sofia Kim





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



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