

# EMPOWER

HELPING CHILDREN WORLDWIDE MAGAZINE | WINTER 2022 EDITION

## Empowered to Go Home

How the CRC enabled a child  
to come off the streets.



HELPING  
CHILDREN  
WORLDWIDE

# HELPING CHILDREN WORLDWIDE

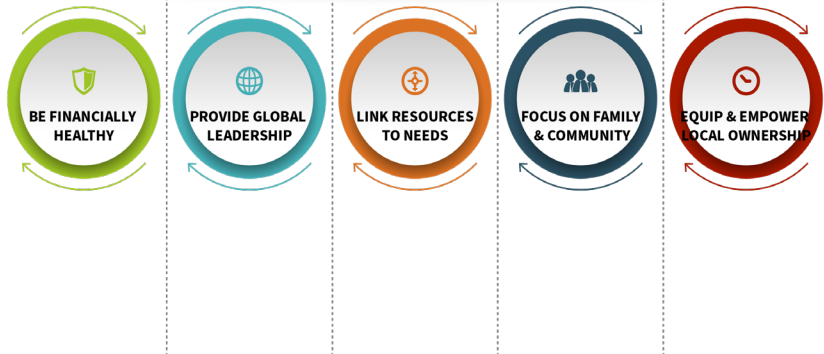


# AB

**WE HELP CHILDREN WORLDWIDE  
BY STRENGTHENING & EMPOWERING  
FAMILIES & COMMUNITIES**



**A mission strategically anchored to :**



# ABOUT US

Helping Children Worldwide's mission is to help children worldwide by strengthening and empowering families and communities. Our mission directive is strategically anchored in five ways, and we evaluate every proposed action through the lens of those five anchors.

- We insist on financial health of our organization,
- provide global leadership within our expertise,
- collaborate strategically to link resources to needs,
- focus on families and communities, and
- equip and empower local ownership of solutions.

Helping Children Worldwide operates through partnerships with people and organizations interested in finding solutions to the fundamental causes of child poverty and mortality. We are closely connected to the faith community, and in particular the United Methodist Church, but we do not discriminate in employment, in partnerships or in provision of services. Our primary implementing partners in Sierra Leone, West Africa, are the Child Reintegration Centre, Mercy UMC Hospital, and the Missionary Training Centre, Bo UMC Urban Campus, and we collaborate closely with those institutions and their leadership to equip and empower local ownership of solutions when sending mission teams, supporting program initiatives and linking resources to needs. Helping Children Worldwide supports initiatives worldwide within our mission directive and strategic anchors.

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## EDITORIAL

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# A letter from the Executive Director

This issue is our “partnership issue,” celebrating partnerships that have blessed our work. I want to draw attention to the lead story about the most important partnership that exists. Partnering with families in Sierra Leone who are seeking to overcome child poverty and mortality is crucial. Without their partnership, change isn’t possible. That is why we shifted from child sponsorship to a family partnership and empowerment model for donors.

I can’t ignore the virus that shut down the world, even delaying the publication of this issue. Living through years of pandemic has been rough. We struggled to relinquish outmoded ways of operating that did not serve us. We lost folks. We said goodbye to people who shared our journey and guided it, people we hold in our hearts, people we shall miss forever.

The experience of the pandemic also brought change to the way we manage partnership, pushing us to live more authentically into our core values of radical faith, radical honesty and radical collaboration. The inability to be together with our colleagues brought things into focus. We saw what happens when we get out of the way of well-equipped partners and let them take the lead. We saw what happens when we do not adequately link resources to

needs, and partners are not well-equipped to manage and lead.

We found opportunity in the world of remote connection, working with people we never met. I gained a new vocabulary, saying “IRL” for things happening in the same room and a realization that our “in real life” impact was not happening IRL for us, but somewhere else for other people.

These were humbling and empowering lessons about our role as partners.

We made a bold decision to increase our staff and cut our office footprint in 2022. As I look at the new space, I see a physical manifestation of the clarity we’ve gained in three years.

I am fond of saying that the folks at Helping Children Worldwide are humble renegades. They are open to change, willing to be agile, bolder and different in their approach. By anchoring our mission to the impacts we wish to achieve, we can be precise and specific in the investments we make in our partnerships. Many investments and partnerships are highlighted in this issue. I would like to share a few others that came about as we gained perspective on our role in addressing child poverty and family separation. We learned we can do a lot by asking respectful questions and listening for answers.



**Melody Curtiss, Esq.**

We invested in new systems to monitor and evaluate, equipped local leaders and linked expertise as a resource to empower them. Our Breaking Bread Table Fellowship Series is a tool to help people ask tough questions. The Village Partnership Family Strengthening Curriculum is a unique tool that partners leverage to build up families and communities. Together for Global Health and Rising Tides brings crucial voices together to discuss and collaborate.

We hope to return to a stable version of normal without losing what we learned in the last three years. Empowering others to take ownership of their future is not just a way we want to work, it is the only way we want to work. By leaning into the partnership model in everything that we do, we are doing exactly what we should to help children worldwide.



# CRC reunites a family. A grandson returns from the streets of Bo

“

*When Sualiman went missing, I was crying every day, My eyes were red. I had sleepless nights worrying about my grandson's whereabouts. But I did not lose hope. I was still praying.*

---

HAWA MANSARAY

Hawa makes her living as a petty trader, selling a variety of small items from the veranda of her tiny home in Bo, Sierra Leone. Whatever she can find, she sells to the people in her neighborhood: palm oil, gari (pounded cassava), charcoal and firewood, fried potatoes and plantains. Everyone knows Hawa by her nickname, “One-Five,” in which she takes great pride.

“They call me ‘One-Five’ because I negotiate the price of everything down to one thousand five hundred leones, or one-five (1,500 Leones = 15 cents). When I go to the market, most of the items cost about 2,000 leones. Then I will negotiate and tell them that I can only buy it at one-five. Each time the sellers see me coming to buy my items, they say, ‘Here comes Madame One-Five,’” she laughs.

Hawa has been a widow for many years. Her husband worked as a cleaner at a local clinic when he became infected with typhoid and malaria at the same time, a common occurrence among the working poor in Sierra Leone. ([pubmed.ncbi.nlm.nih.gov](https://pubmed.ncbi.nlm.nih.gov)) Unable to afford medical treatment, he became increasingly sick and ultimately died from complications of the two diseases.



When her husband died, Hawa became the provider and sole caretaker for several of her grandchildren. When her son Ansu fell ill from a chronic skin condition, she became responsible for yet another grandson named Sulaiman, who was seven years old at the time.

Although Hawa enjoyed taking care of her grandchildren, she struggled to provide for the family, who were crammed into a tiny, dilapidated mud house. Hunger and need were a constant, and they all struggled.

Separated from his father, living in an over-crowded house with never enough to eat, Sulaiman began to suffer acutely from loneliness and deprivation. Out of desperation, he escaped to the streets of Bo, where he scraped out an existence with other street boys. Life on the streets was even harder, but Sulaiman was ashamed to return home.

Heartbroken and terribly worried about her grandson, Hawa

searched everywhere for Sulaiman. His father came from the village and they scoured the markets and dumps every day, but they could not find him.

“When Sulaiman went missing, I was crying every day,” Hawa says. “My eyes were red. I had sleepless nights worrying about my grandson’s whereabouts. I cried until my eyeballs were swollen and they were about to fall out. But one thing that I did not lose is faith. I did not lose hope. I was still praying.”

The Child Reintegration Centre social work team had just launched their mission to rescue street children when they encountered Sulaiman. In fact, he was among the first group of children identified by the CRC for family reintegration. Sulaiman gave the CRC case managers his grandmother’s address, and they located her.

After a brief stay in the CRC’s interim home to stabilize his condition, case managers took Sulaiman home to his grandmother. Hawa was overwhelmed with joy to be reunited with Sulaiman. “Oh my God! I can’t believe it,” Hawa recalls. “I nearly fainted when I saw Sulaiman back at home.”

The CRC helped Hawa re-enroll Sulaiman in school. As a client of the CRC, his school fees are paid and he receives all of his school supplies, healthcare at Mercy Hospital, ongoing case management, and the opportunity to participate in developmental activities. The CRC case managers continue to visit the home, to check on the family and monitor their needs.

Hawa and other close family members are mentored by the CRC case managers, and they have attended family strengthening classes, including the newly launched Attachment Theory workshop, where they learned skills about dealing with children who have suffered abuse, neglect, or abandonment. The family also received material support.

**“During this pandemic, the CRC supplied us with food items. They educated us on COVID-19 prevention, sanitation, and hygiene. Since the CRC came to our aid, life has not been the same.”**

With her family reunited, Hawa once again enjoys conducting her little veranda store. Every morning, she takes out all the jars, trays, and plastics that contain items for sale and displays them on her porch. Sulaiman helps his grandmother by packaging the charcoal, fetching water, and sweeping around the house. Sierra Leonean children are expected to help with household chores from a young age, and development experts believe that giving children responsibility helps them become confident and capable.



Sulaiman is happy to reunite with his best friend Alie (left) and his cousin Aminata (front) who all live in the same household with him and his grandmother.

to fade away. I was beginning to think that Sulaiman was not coming back. But this God is always good. I will forever be grateful to Him and the CRC.”

Hawa’s partnership with the CRC has given her new energy to care for her family. “I am a grandmother, but I am strong, and I can still do my business very well. With the CRC intervention, I have even become more empowered and motivated to keep doing my best to take care of my family. In fact, the name, ‘One-Five’ is now shining more than ever.” ★

Encouraging children to help with the household or family business is a far cry from child labor, and an admirable aspect of the way Sierra Leoneans raise their children. Sulaiman attends a junior secondary school near his grandmother’s home, where his attendance is regular and punctual. He takes his schoolwork seriously and aspires to go into the medical field someday. “I know my family is poor and uneducated,” he explains. “I want to be able to lift them out of poverty with my education. My country needs healthcare workers to help treat the many diseases we have. I want to be part of the healthcare solution.”

Like most boys his age, Sulaiman loves playing football (soccer) with his friends at school and in the neighborhood. His friend Alie says, “Sulaiman is very good at soccer. He is very strong. He dribbles the ball as if he invented it.”

Sulaiman’s dad Ansu’s health has improved, and he often visits Hawa’s house to spend time with his son and mother. Sulaiman also goes to the village on holidays and sometimes on weekends

to see his dad. “It makes my heart happy to see Sulaiman going to school,” Ansu says. “I am happy for the relationship between me and my son.”

Undeniably, poverty and illiteracy have made Hawa’s life hard; but she is a happy woman, and so much fun to be around. She makes everyone in the neighborhood laugh with her jokes and banter. “I am in the ‘oldies,’ but I can act in the ‘youngies,’” she says to kids who tease her about being being a grandmother.

Hawa is so grateful to the Child Reintegration Centre for rescuing her grandson from the streets and reuniting their family. “CRC was a God send,” Hawa says. “They came in when my hope was starting

*The Child Reintegration Centre is dedicated to reunite abandoned and orphaned children with caring families. Visit [helpingchildrenworldwide.org/](http://helpingchildrenworldwide.org/sponsor-a-family) sponsor-a-family or scan the qr code on the right.*



Sulaiman helps his grandmother Hawa with her small business by bagging portions of charcoal to sell to the neighbors. Many households in Sierra Leone use a charcoal cook stove to prepare meals.







# EVERY CHILD NEEDS TO GROW UP IN A FAMILY

## HOW DO CHILDREN END UP LIVING ON THE STREETS OF BO?

According to studies conducted by UNICEF, up to 20% of children under the age of 18 in Sierra Leone may lack parental supervision and end up living on the streets as a result. Unaccompanied minors are at a far greater risk of violence or exploitation, and most do not have access to good nutrition, basic healthcare, or even a safe place to sleep at night.<sup>1</sup>

Rural families may send their children to live with relatives or friends in urban centres like Bo, in the hope that they will attend school and build a better future. However, these children often become victims of neglect, abuse, or forced labor.<sup>2</sup>

More than a quarter of children under the age of 18 do not live with a biological parent, according to the 2019 Sierra Leone Demographic and Health Survey.<sup>3</sup> It is not unusual for children to live with extended family members, and many of the children and youth enrolled in the

Child Reintegration Centre are cared for by grandparents, aunts, uncles, siblings, or other caregivers. Street Child estimates that 12,000 children lost a key caregiver during the Ebola crisis of 2014-2015.<sup>2</sup>

In Sierra Leone, 36% of children never complete primary school and many more leave school without foundational literacy and numeracy skills. Children who drop out of school usually enter the work force, working in mines or quarries, scavenging scrap metal, street selling, fishing, or doing domestic labor, according to a 2019 report by the US Department of Justice.<sup>4</sup> These children often end up on the street, fending for themselves.

1. [unicef.org/sierraleone](https://www.unicef.org/sierraleone)
2. [street-child.co.uk/sierra-leone](https://www.street-child.co.uk/sierra-leone)
3. [dol.gov/agencies/ilab/resources/reports/child-labor/sierra-leone](https://www.dol.gov/agencies/ilab/resources/reports/child-labor/sierra-leone)
4. [dhsprogram.com/data/dataset/Sierra-Leone](https://dhsprogram.com/data/dataset/Sierra-Leone)

**11% OF CHILDREN UNDER THE AGE OF 18 ARE DOUBLE ORPHANS.**

**44% OF HOUSEHOLDS CARE FOR ORPHANS OR FOSTER CHILDREN**

**25% OF CHILDREN DON'T LIVE WITH A BIOLOGICAL PARENT.**

**UP TO 20% OF CHILDREN UNDER 18 LACK ADULT SUPERVISION.**

# The heartbeat of God

*Pastor Katie Newkirk shares her story about serving on a mission team to Sierra Leone. Pastor Katie serves as Associate Pastor of the First United Methodist Church of Colleyville, Texas, an HCW Partner Church.*

I listened to the heartbeat. I was standing in a dark corner room of the village community centre, with a woman lying on a bed next to me, her eyes filled with hope and expectation. We were on a Village Outreach with Mercy Hospital in Selego, a village about 30 minutes outside of Bo. I watched as the nurse rubbed an ultrasound device over the woman's beautiful round belly. And then all of a sudden, I hear a noise. Thump, thump, thump, thump. I remember it being a soft sound, not realizing at first what it was. And then the nurse told me, "that is the sound of the child's heartbeat." Soon after, I learned that it was the first time the mother had heard the heartbeat of her child, and I felt so humbled to be able to experience that joy with her. What sacred space to bear witness to this new life being brought into this world.

Later, I learned that not only was that moment the first time the mother had listened to her child's heartbeat, it was also the first time she'd received medical care for her pregnancy. The Mercy Hospital staff performed an exam, and gave her prenatal vitamins. The mother's good health and that of her growing baby is a priority to the compassionate and caring team at Mercy Hospital, who not only care for people who enter the doors of their facility in the town of Bo, but who intentionally go out into remote villages to administer to those unable to travel to afford medical care.

That special moment was not the only time I experienced a "heartbeat" on this trip. As I stood in the wooden pews at Leader Memorial United Methodist Church on Sunday morning, listening to the harmonies of voices and clapping hands, hearing the beat of the drums and gazing upon the dancing feet and raised palms, I felt the heartbeat of God in our praise and worship. The rhythm of song and dance of the Sierra Leonean people was joy to behold and participate in.

And finally, I experienced the heartbeat of God in the children and families supported by the Child Reintegration Centre. One day our team assisted with Family Fun Day activities; a special interest

program that engages CRC children and their families in activities like bike riding, computer classes and other workshops that build family bonds, strengthen and empower families with relationship and other skills, and provide an opportunity for fellowship with one another and CRC staff.

I was assigned to assist CRC staff with the bicycle station. I heard the heartbeat of God in the giggles of the children as they rode the bikes in big circles around the CRC grounds. I enjoyed assisting younger children as they learned to peddle and keep the bikes

upright. I hear the heartbeat of God on a visit with a CRC family in their home, where I saw first-hand the power donors can have when they partner with HCW and the CRC to strengthen parents and caregivers to raise their children in ways that allow them to dream big and that equip and empower them to achieve financial independence and end the cycle of poverty.

*"As I stood in the wooden pews of Leader Memorial Methodist Church on Sunday morning, listening to the harmonies of voices and clapping hands, hearing the beat of the drums, and gazing upon the dancing feet and raised palms, I felt the heartbeat of God in our praise and worship."*

Jesus said in Matthew 19:14, "Let the little children come to me, and do not hinder them, for the kingdom of heaven belongs to such as these." As I reflect on my trip with HCW in April of 2018, I see the heartbeat of God so evident in the kingdom work being done there - in support of children's and families' holistic health and strengthening, and in the compassionate care of all patients at Mercy Hospital.

With Joy,  
**Pastor Katie Newkirk**  
Associate Pastor at FUMC Colleyville



Pastor Katie (right) visited the home of Child Reintegration Centre students with former Sponsor A Child Coordinator Joseph Junisa (at left in baseball cap) and HCW Executive Director Melody Curtiss (center, blue shirt.)

# Mobilizing Christians to support family-based care around the world

*Allison Coble  
Director of Programs, Faith To Action Initiative*

**W**hen you consider the challenges that children around the world are facing, especially over the past two years, we realize the utmost importance of working together.

The Faith to Action Initiative ([www.faithtoaction.org](http://www.faithtoaction.org)) is a coalition of organizations who came together 15 years ago to help Christians align with best practices in their ministry to orphans and vulnerable children. We work to educate and mobilize Christians in the US to support family-based care around the world. Through our resources, website, podcasts, webinars and workshops, we offer practical tools and up-to-date information on key strategies and best practices in global orphan care.

However, it is the collaboration we help facilitate between organizations that has brought our initiative some of the greatest accomplishments. By working as a platform for convening and collaboration we have seen that shared learning, creative solutions to big problems, and partnerships allow organizations to do more than they could ever do on their own.

Faith to Action's relationship with Helping Children Worldwide began near the end of their transition

to family-based care as they were reconsidering the best ways to approach short-term mission trips moving forward. After completing Faith Action's Transitioning to Family Care Online training, we met with the HCW team where we learned about the incredible and brave work they had performed in the transition of the Child Reintegration Centre.

We were encouraged by their diligence during the transition to family care; engaging all stakeholders, from donors to CRC graduates, to do what is in the best interest of the children in their care. From there we worked to connect them with others in the family care movement, and HCW quickly moved from feeling alone in this work, to joining and becoming sought after as thought leaders within the larger global movement toward family care.

Over the last several years, our relationship with HCW has evolved into a genuine partnership. We often request HCW staff to present with us on the importance of family-based care, by sharing their experiences, expertise, and encouragement.

Faith to Action has also connected HCW with other orphanages and organizations in West Africa who desperately want their first-hand knowledge. Laura Horvath serves as a member of our Advisory

Network by providing insight and advice on our work, and is part of our Advocates Program which equips and connects those desiring to advocate for family care within their network.

In 2019, we worked together to map all of the organizations around the world that support orphanages in transitioning to family care. This project was a significant contribution to ensuring that orphanages interested in transitioning to family care can access help from experts.

In 2020, HCW joined Faith to Action and several other organizations in the development of the Global Church Pledge to See Children Thrive in Safe and Loving Families.

Over 60 organizations and churches have signed the pledge, alongside 300 individuals. It is the ultimate example of people coming together to recognize the importance of collaboration and partnership to address the challenges of children and families. Faith to Action is grateful for our partnership with Helping Children Worldwide and excited to see how God will use our partnership in the future.

Faith to Action and co-collaborator Home for Good created the Global Church Pledge to unify Christians around the globe in support of family-based care for children. Learn more about the Pledge and become a signer at [globalchurchpledge.org](https://globalchurchpledge.org).



A consortium of organizations and agencies gathered in Washington D.C. and New York during major events such as the UNGA and the National Prayer Breakfast to engage in discussions about the role of Church leadership in bringing about the transition to family based care. Helping Children Worldwide was one of the original signatory agencies for the Global Church Pledge.

# A children's charity that does not work with children?

**Dan Hope**

CEO & Trainer,

Strengthening Families and Children

Strengthening Families and Children (SFAC) is a children's charity that does not work with children! What? Yep, we work with trusted partners who ARE working with children. Our project is to support them through educating, equipping and empowering them in good practice. Our motto is "to turn good intentions into good practice."

We are a multi-disciplinary team of qualified and experienced social workers, psychological and legal (lawyers and judges) professionals, based in the UK, that support organisations through training, mentoring and coaching around the world. We have existed since 2002 and have operated in over 40 countries with hundreds of organisations in their mission to care for and protect vulnerable children.

We sometimes see ourselves as Yoda in Star Wars, or Gandalf in Lord of the Rings, guiding the main people to fulfill their mission and be the heroes they are! We are like the football (or as you say in the US - soccer (but you're wrong)) coach that gives guidance for the players.

SFAC began in 2002 when our founder, Mick Pease, a foster care and adoption social worker in Leeds, England went on a mission trip to an orphanage in Brazil with his wife Brenda. There, he questioned why children who cannot live with their parents should be in orphanages? Why were they not in foster care, kinship care, or domestic adoption? It led Mick to launch his own mission to advocate for family care; a mission with **Psalms 68:6-8** as his guiding principle

Our goal at SFAC is to support organisations in becoming independent and confident in their practice.



A key task of social work is to support families to become independent and able to manage without our assistance.

With this in mind, we are partnering with HCW and the Child Reintegration Centre (CRC) to help the social work team in Bo develop systems and processes of case management that help them to identify children at particular risk of significant harm that need more intervention, and how the team can provide appropriate care for them.

SFAC's work is about providing practitioners like the case team at CRC With the knowledge and skills to develop services to support children and families and become confident in their own abilities and skills so that eventually they are able to train others and SFAC's support is no longer required. SFAC is working to empower the CRC team, who will then be able to teach others in Sierra Leone the skills they've learned, through the CRC's Transition Coaching and Mentoring (TCM) department.

We have seen a growing number of organisations supporting children living in safe and appropriate families, rather than in children's homes and orphanages. To learn more about SFAC's work, please visit [www.sfac.org.uk](http://www.sfac.org.uk).

## **Psalms 68:6-8**

God sets the lonely in families,[a] he leads out the prisoners with singing; but the rebellious live in a sun-scorched land.



# Learning to reintegrate families in Haiti

**Jessica Damille**

*Development and Communications Manager,  
Helping Haitian Angels*

**H**elping Haitian Angels (HHA) is a ministry providing complete care for the children of Kay Anj (Angel House) Village in Dekle, Haiti. What started as a rescue mission for meeting the basic immediate needs of 35 orphanage and abandoned children in 2008, quickly evolved into an unexpected calling to meet the holistic needs of every child entrusted to our care.

The road to understanding and delivering holistic care has not been easy! In fact, our Founder and Executive Director, Debbie Harvey loves to say, "At HHA, we've mastered the art of failing forward!" Meaning we are constantly seeking and learning new ways to provide the best care for the children we serve.

As the global childcare community began to discover its own failing forward opportunities, and began to shift away from orphanages and children's homes we too began to explore the reunification options for the kids in our care who had living parents or relatives we knew about.

As we identified kids who could be reunified with family, we realized that we couldn't just reintroduce the children to biological families without some sort of formal program that included caregiver training and follow-up support. After all, many of the children at Kay Anj had never experienced living in a traditional Haitian home setting or knew really how to live in a family.

On a quest to find a model that we could duplicate, Debbie and a team of dedicated volunteers attended the 2019 HCW Rising Tides Conference. It was there that HHA began to build a great relationship with Laura Horvath, and the entire HCW team.

While at the conference, Debbie realized that a successful

reunification program for HHA needed to include a family strengthening curriculum that included training for caregivers to build healthy connections with their children. This was especially important to us at HHA because we wanted to ensure that the children would continue to receive the best care, love, and opportunities possible, even if they were no longer living at Kay Anj.

Laura connected HHA to HCW's partners at University of Maine Honors College, who had collaboratively developed the Attachment Theory Workshop with the CRC and HCW. The trauma-informed curriculum has been a key component for preparing and training caregivers receiving reintegrated children, and ensuring the permanency of these placements. HCW and UMaine are working to get the curriculum to organizations in countries all over the world, and were excited to have the opportunity to share this workshop with HHA to help Haitian families with reunification.

With HCW and UMaine's help, the HHA team in Haiti, consisting of house parents and a Haitian psychologist, reviewed the workshop modules and began the collaborative process of adapting the curriculum materials to suit the cultural context and specific needs of our families and children in Haiti. Our request to add more material related to the impact of corporal punishment of children to the workshop was not only honored, the UMaine team is now working to incorporate more of this material into versions for other countries as well. We hope to launch our program this summer.

We are so grateful for the partnerships we have established through HCW and are honored to serve alongside them to serve children in need all over the world. Learn more about our work at <https://www.helpinghaitianangels.org/>.



**Transform  
Alliance  
Africa**

# Joining hands to move care reform forward

**Stephen Ucembe**  
Coordinator:  
*Transform Alliance  
Africa*

In February of 2021, Helping Children Worldwide became a member of Transform Alliance Africa. The Alliance is a growing collective of NGOs bound by a vision of an Africa free of institutional care, where all children will belong and grow up in a safe and loving family. Our mission is to be a catalyst that will end institutional care of children in Africa by bringing together our collective voices, knowledge, practice, and experience to strengthen families.

The vision of the Alliance is echoed in international as well as regional instruments. The preambles of the United Nations Convention on the Rights of the Child and the African Charter on the Rights and Welfare of the Child explicitly state the importance of the family. The UNCRC, which is the most complete statement of children's rights ever produce and is the most widely ratified human rights treaty in history, says "the child, for the full and harmonious development of his or her personality, should grow up in a family environment, in an atmosphere of happiness, love and understanding.

Most countries have ratified the Africa Charter on the Rights and Welfare of the Child. Article 18 of the charter on the protection of the family says, "The family shall be the natural unit and basis of society. It shall enjoy the protection and support of the State for its establishment and development." However, thousands of children today are deprived of this significant right. The COVID-19 pandemic has highlighted the myth that these facilities accommodate orphans; many children were taken back to their families and communities after the onset of the pandemic. HCW vision is aligned to TAA vision, we all agree children should be supported to grow-up in strong, loving and nurturing families and communities - a society where children are not separated and kept

in orphanages or institutions away from their families.

This collaboration with HCW is beyond the alignment of visions. HCW's wealth of experience with street connected children is important to other members within the alliance and from other countries who are willing and want to learn how best to support these children and prevent unnecessary separation from families and communities; demonstrating how families can be strengthened and how to develop alternative families for children who are unable to return to their biological parents.

The Alliance, which was born in 2016, brings together our collective voices, knowledge, practice, passion, and experiences to strengthen families and communities, and to catalyze the end of institutional care in Africa. At continental level, the Alliance is a force to be reckoned with, with a critical mass and with a common objective, the Alliance is able to gradually influence regional bodies and civil society organizations to prioritize care reform. And through partners like HCW at the national level, the Alliance is able to influence governments to invest in families and communities and reduce reliance on orphanages.

Organizations that are members and already engaged in family support and strengthening work continue to share suitable solutions with other organizations that are willing to change the way they care, so that they can respond to children's needs and circumstances the right way and subsequently prevent separation and unnecessary placement in orphanages.

Learn more about Transform Alliance Africa at [transformallianceafrica.org](https://transformallianceafrica.org).



# A different way to serve in missions

Chandler Boyarko

Data Scientist and Founder of Torres Analytics

I learned about Helping Children Worldwide years ago from a colleague who knew I was looking for a medical mission trip. His church partnered with HCW for missions. I was extremely interested in the chance to get hands-on time with children either in a medical setting at the hospital, or in a trauma recovery capacity.

I believe if we are brave enough to ask the hard questions of ourselves, curiously testing and observing our lives, we can grow and rise above external pressures and turn any challenge from a disadvantage into a secret weapon. It's a passion of mine to hold this space for others as well. I really had a heart for what the children of Sierra Leone had been through and wanted to help.

Ebola broke out in West Africa a week after I was accepted for the trip, and my trip was canceled a few weeks later. I had continued to financially support HCW here and there, but I got busy with life. It wasn't until a few years later that I reconnected with HCW personally, Laura Horvath and Mohamed Nabieu (Nabs) invited me out for coffee.



Chandler Boyarko

It was then that I learned about the radical changes HCW and the CRC had made, transforming its child support model from an orphanage to a family-based care model in order to best support the children AND their families in Sierra Leone. I have studied a good bit of psychology over the years and the rationale made sense, but to be honest, I was floored. I couldn't believe that HCW operated with such humility that it was able to organize itself around such a fundamental change.

After that meeting, Nabs found out that I am a data scientist by occupation, and we decided to see if there were ways I could help HCW and the CRC improve the management of child and case data and the analysis of that data to improve the family support operations. It turns out this kind of work is exactly my area of expertise.

When COVID hit, my client sent us all home at half time so a friend and I decided to undertake an endeavor to build a website that could safely host child case data to allow the Child Reintegration Centre staff to run improved analytics and get out of spreadsheets. The application has been introduced to the CRC case managers and early feedback is favorable. While there have been some delays while the CRC has been training other organizations to transition their model from orphanage to family-based care, we hope to fully deploy the application in 2022.

I'm looking forward to the full deployment and to seeing HCW improve its processes around choosing the best programs to provide and increasing its ability to provide more information to stakeholders as well. I hope this contribution will improve the business model so that more children are helped in meaningful ways. It's not the mission trip I'd imagined in the beginning, but being able to offer my expertise to build the capacity of those on the ground is a powerful mission nonetheless.

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Do you have a skill you would like to volunteer to Helping Children Worldwide's mission? We would love to hear from you! Send an email with your contact information to [volunteer@helpingchildrenworldwide.org](mailto:volunteer@helpingchildrenworldwide.org) and we'll get in touch.

# Changing the story for mothers and babies in rural villages

*Dr. Carol Nelson  
Rural Health Care Initiative*



*Dr. Carol Nelson and a young friend in the remote village of Julian, on the Sewa River in Tikonko Chiefdom. Rural Health Care Initiative's mission is to partner with village communities in Sierra Leone to rebuild health systems, and to overcome one of the world's highest rates of maternal and child mortality. Learn more at [rhcimnsl.org](http://rhcimnsl.org).*

Working in the Tikonko Chiefdom, Rural Health Care Initiative (RHCI) operates two birth waiting homes, motorbike outreach clinics to eight villages, a child malnutrition program, training for Community Health Workers, and a large garden project. RHCI was founded by nurse Alic Karpéh, a Sierra Leonean native who grew up in Tikonko and came to the US with her nine children in 1994 after her husband had been killed in the civil war.

My first visit to Mercy Hospital in Bo was in the summer of 2015 at the end of the Ebola outbreak, while I was there to visit RHCI's outreach programs. During my visit, I was happy to learn about the many services provided by Mercy Hospital and its mobile outreach clinics. That summer I was a volunteer with RHCI, assisting in a 3/12 week training for Community Health Workers in Tikonko.

Because of our collaboration with Helping Children Worldwide, I was asked and honored to serve on Mercy Hospital's Way Forward Task Force as part of the Community Outreach Primary Care Clinic Team in 2020-2021. It was wonderful to become acquainted with the staff at Mercy, to discover their accomplishments and impact on the Bo District communities, and to understand their needs.

As the Executive Director of RHCI (the US office is based in Minnesota), we work with the Tikonko Chiefdom south of Bo and hope to collaborate more closely with Mercy Hospital. For example, our in-country staff transported a boy with a large and painful hernia to Mercy in 2020, where Dr. Aruna Stevens performed a successful surgery to repair it. In January of 2021, RHCI referred two children with HIV and Sickle Cell Disease to Dr. Stevens.

Coordinating our outreach clinics with Mercy's so as to improve care and avoid duplication of services in the same villages is one of RHCI's goals. We've also been pleased to join HCW's collaborative network, Together for Global Health, connecting RHCI not only with HCW and other health initiatives in Sierra Leone, but also with public health programs in Uganda, Granada, Uganda, Grenada, Lesotho, Malawi, Madagascar, Cambodia, and Zambia. Through this group we are able to share best practices in providing care in some of the hardest places in the world, and we have received tangible benefit too, receiving 5 hospital beds through a collaborative effort led by Mercy Hospital and Project Cure to deliver beds to RHCI, Mercy, and other health organizations in Sierra Leone.

Read about the launch of Helping Children Worldwide's latest collaboration, the Global Public Health Initiative and find out how you or your organization can get involved at [helpingchildrenworldwide.org/latestnews](http://helpingchildrenworldwide.org/latestnews)

## A DAY OF FUN FOR A LIFETIME OF HOPE

### Join us for our epic annual golf tournament!

**Monday, September 12, 2022.** Every year since 2001, we've held our epic golf tournament to help vulnerable children and families in Sierra Leone.

**BACK BY POPULAR DEMAND:** The 2022 tournament will once again be held at the beautiful Westfields Golf Club in Clifton, Virginia, centrally located and close to Routes 28 and 66. Westfields' stunning, Fred Couples-designed course is challenging for experienced golfers but accessible for novices. Golfers bragged that they played their best game ever, had fun, got great swag and made a difference. You should try it!

As always, there will be a spirited team competition to win a trophy, lively on-course games, great raffle prizes, a silent auction, and an *al fresco* reception and dinner at the end of the day.

Whether you're a veteran sponsor or this is your first time participating, the golf tournament promises to be a memorable day of fun and fellowship. Join us for "A Day of Fun for a Lifetime of Hope" and help transform the lives of thousands of extremely vulnerable children and their families!

Register at [www.helpingchildrenworldwide.org/2022hcwgolf](http://www.helpingchildrenworldwide.org/2022hcwgolf). For information or assistance, email [support@helpingchildrenworldwide.org](mailto:support@helpingchildrenworldwide.org) or call 703-793-9521.

### TOURNAMENT SPONSORSHIP OPPORTUNITIES:

<b>TITLE SPONSORSHIP</b>	<b>\$12,500</b>	Title Naming Rights, Corporate Recognition Award, logo on cover and two page ad in program, organization banner, 12 players in tournament and banquet, signage on two holes, team photos, features in digital promotional materials. (\$350 for each additional player)
<b>PLATINUM SPONSORSHIP</b>	<b>\$10,000</b>	Corporate Recognition Award, two page program ad, logo on cover, organization banner, 12 players in tournament and banquet, signage on two holes, team photos. (\$350 for each additional player)
<b>GOLD SPONSORSHIP</b>	<b>\$5,000</b>	Corporate Recognition Award, full page program ad, logo on cover, organization banner, 8 players in tournament and banquet, signage on one hole, team photos. (\$350 for each additional player)
<b>SILVER SPONSORSHIP</b>	<b>\$2,500</b>	Corporate Recognition Award, half page program ad, 4 players in tournament and banquet, Signage on one hole, team photos. No additional players.
<b>BRONZE SPONSORSHIP</b>	<b>\$1,500</b>	Program acknowledgement, 4 players in tournament and banquet, signage on one hole, team photos. No additional players.
<b>LEGACY PATRON SPONSORSHIP</b>	<b>\$450</b>	Program acknowledgement, \$450 per player in tournament and banquet, team photo. Legacy player teams only.



# WE HELP CHILDREN WORLDWIDE BY STRENGTHENING & EMPOWERING FAMILIES & COMMUNITIES

## A mission strategically anchored to :



1. adequate fund balances
2. financial oversight capacity
3. verified data
4. accurate trend projection
5. expand & preserve donor base
6. minimize asset depletion
7. value human contribution
8. frequent review & reflection
9. recognize change indicators
10. rapidly adjust



1. advocate for child dignity
2. show & tell the story
3. validate facts
4. speak truth & foster trust
5. demonstrate knowledge
6. support engagement
7. welcome allies
8. move others to change
9. provide clear roadmaps
10. toolkits to enable change



1. form strategic partnerships
2. value SPIFS resources
3. increase support
4. combine resources
5. create brain trust
6. expand expertise
7. recruit exceptional people
8. connect allied interests
9. develop tools to fill gaps
10. prepare future supports



1. tackle root causes of child poverty, not symptoms
2. support family as the best environment for children
3. recognize community as a naturally sustaining network
4. understand local culture
5. respect individual needs
6. work holistically
7. recognize strengths
8. adopt good enough rules



1. form local partnerships
2. respect local expertise
3. provide necessary help
4. increase local capacity
5. adopt ASAP disengage rule
6. transfer knowledge
7. transfer tools
8. transfer support networks
9. relinquish authority
10. relinquish responsibility

### Our 2022 Board of Directors, Officers and Members

- |                           |                            |
|---------------------------|----------------------------|
| Rick Auman, Chair         | Alan Larson, Member        |
| Pam Piester, Vice Chair   | Dr. Carol McIntosh, Member |
| Craig Hiserman, Treasurer | MaryAnn Gilkenson, Member  |
| Francis Conteh, Secretary | Paul Monteiro, Member      |
|                           | Allan Ballenger, Member    |
|                           | Gene Murphy, Member        |

Melody Curtiss-Cathey, Executive Director/CEO (non-voting)

# Summary Impact Report

## Helping Children Worldwide, Inc.

### Statement of Functional Expenses

<i>For the Year Ended December 31, 2021</i>	African Programs			Management and General	Fundraising	<b>Total</b>
	Child Welfare/ Child Reintegration Centre	Global Health/ Mercy Hospital	Mission Team Deployment/ Missionary Training Centre			
Administrative	\$ 5,613	\$ 4,498	\$ 1,131	\$ 19,519	\$ 7,260	\$ 38,021
Contributions	163,050	172,778	7,452	-	-	343,280
Depreciation and amortization	619	477	150	147	162	1,555
Equipment and computer software	2,501	1,732	334	6,199	9,831	20,597
Insurance	1,848	1,425	448	440	484	4,645
Legal and professional	5,628	5,397	2,397	48,104	-	61,526
Licenses	127	98	31	30	33	319
Rent	10,041	7,740	2,431	2,392	2,628	25,232
Salaries and benefits	154,793	119,322	37,480	36,875	40,518	388,988
Special events - other	-	-	-	-	4,299	4,299
Travel and meetings	11,912	12,858	18,085	505	3,215	46,575
<b>Total</b>	<b>\$ 356,132</b>	<b>\$ 326,325</b>	<b>\$ 69,939</b>	<b>\$ 114,211</b>	<b>\$ 68,430</b>	<b>\$ 935,037</b>

During 2021, the Organization entered into new collaborations in Liberia, Haiti, Uganda, and Kenya. A new initiative called "Together for Global Health" with members from Sierra Leone, Uganda, Lesotho, Grenada, Ethiopia, Bangladesh, Mozambique, Kenya, Mali, South Africa, Malawi, Zambia, Cambodia, Madagascar, Zimbabwe, and the United States began working together to link resources to needs. The Organization worked to educate the global community on child welfare and global mission practices through its Rising Tides workshops, Table Fellowship discussion series for ethical international mission and presentations regarding best practices in child welfare, child reintegration, and family supports in the majority world.

In Sierra Leone, HCW supported the "Hands Off Our Girls" initiative to combat abuses like early marriage, educational discrimination, FGM practices, sex and labor trafficking and exploitation of girls and vulnerable young women. 601 children and 450 families were supported by the Child Reintegration Centre (CRC) during 2021. CRC programming is family-centered and community based, with a professional case management staff, and offers clients educational scholarships, access to medical care, and family strengthening services through counseling,

parenting education, economic supports, community education and training.

Mercy Hospital and Mercy Outreach were able to provide medical and diagnostic services to approximately 12,000 patients in Bo and 46 villages. Mercy's outreach into the surrounding villages includes nutrition clinics and treatment provided for malnourished infants, prenatal care and education, malaria testing and treatment, diarrhetic disease diagnosis and treatment, and HIV/AIDS testing and counseling, as well as support for basic health needs as clean water and sanitation.

To mitigate impacts of the pandemic over the past three years, HCW supported the hospital with installation of a small solar grid to power the surgical wing of the facility, and shipped equipment and supplies, including PPE and hand-washing stations for populations and communities served by Mercy Outreach. A surgical table was provided to Mercy through the generosity of Medical University of South Carolina. 100 patient beds were delivered to clinics, hospitals and care facilities through the collaboration of Together for Global Health. CRC families were provided emergency food rations and radios for children to continue accessing education during mandatory regional curfews and travel restrictions, and school and business closures.

# **From our Audited Financial Statements:**

**To access the complete report from the audit  
go to <https://www.helpingchildrenworldwide.org/financials.html>**

## Helping Children Worldwide, Inc.

### Statement of Financial Position

<i>December 31,</i>	<b>2022</b>
<b>Assets</b>	
<b>Current assets</b>	
Cash and cash equivalents	\$ 665,365
Pledge receivable	50,000
Prepaid expenses	6,616
<b>Total current assets</b>	<b>721,981</b>
<b>Other assets</b>	
Deposit	2,323
Right-of-use asset - finance lease	18,322
Right-of-use asset - operating lease	41,827
Property and equipment, net	3,698
<b>Total other assets</b>	<b>66,170</b>
<b>Total assets</b>	<b>\$ 788,151</b>
<b>Liabilities and Net Assets</b>	
<b>Current liabilities</b>	
Lease liability - finance lease, current portion	\$ 3,857
Lease liability - operating lease, current	19,251
Accounts payable and accrued expenses	14,739
Deferred revenue	10,950
<b>Total current liabilities</b>	<b>48,797</b>
<b>Long-term liabilities</b>	
Lease liability - finance lease, net of current portion	14,465
Lease liability - operating lease, net of current portion	23,107
Total long-term liabilities	37,572
<b>Total liabilities</b>	<b>86,369</b>
<b>Net assets</b>	
Without donor restrictions	446,089
With donor restrictions	255,693
<b>Total net assets</b>	<b>701,782</b>
<b>Total liabilities and net assets</b>	<b>\$ 788,151</b>

The accompanying Notes to Financial Statements are an integral part of these financial statements.

## Helping Children Worldwide, Inc.

### Statement of Activities and Changes in Net Assets

<i>For the Year Ended December 31, 2022</i>	Without Donor Restrictions	With Donor Restrictions	Total
<b>Support and revenue</b>			
Contributions and foundation grants	\$ 358,167	\$ 637,416	\$ 995,583
Special events	155,184	17,400	172,584
Less: cost of direct donor benefit	(20,350)	-	(20,350)
UMVIM volunteer funds	79,108	-	79,108
Interest income	23	-	23
Net assets released from restrictions	576,648	(576,648)	-
<b>Total support and revenue</b>	<b>1,148,780</b>	<b>78,168</b>	<b>1,226,948</b>
<b>Expenses</b>			
Program services:			
Child Welfare / Child Reintegration Centre	382,876	-	382,876
Global Health / Mercy Hospital	355,258	-	355,258
Empowerment programs	224,510	-	224,510
Supporting services:			
Management and general	137,681	-	137,681
Fundraising	77,383	-	77,383
<b>Total expenses</b>	<b>1,177,708</b>	<b>-</b>	<b>1,177,708</b>
<b>Change in net assets</b>	<b>(28,928)</b>	<b>78,168</b>	<b>49,240</b>
<b>Net assets, beginning of year</b>	<b>475,017</b>	<b>177,525</b>	<b>652,542</b>
<b>Net assets, end of year</b>	<b>\$ 446,089</b>	<b>\$ 255,693</b>	<b>\$ 701,782</b>

The accompanying Notes to Financial Statements are an integral part of these financial statements.



## Helping Children Worldwide, Inc.

### Statement of Cash Flows

<i>For the Year Ended December 31,</i>	<b>2022</b>
<hr/>	
<b>Cash flows from operating activities</b>	
Change in net assets	\$ 49,240
<b>Adjustments to reconcile changes in net assets to net cash used in operating activities</b>	
Depreciation and amortization	2,880
<b>(Increase) decrease in:</b>	
Pledge receivable	(50,000)
Prepaid expenses	(6,616)
Right-of-use asset - operating lease	15,841
<b>Increase (decrease) in:</b>	
Lease liability - operating lease	(15,310)
Accounts payable and accrued expenses	2,543
Deferred revenue	(16,867)
<b>Net cash used in operating activities</b>	<b>(18,289)</b>
<hr/>	
<b>Cash flows from investing activities</b>	
Purchases of property and equipment	(3,014)
<hr/>	
<b>Cash flows from financing activities</b>	
Payments on lease liability - finance lease	(964)
<hr/>	
<b>Net change in cash and cash equivalents</b>	<b>(22,267)</b>
<hr/>	
<b>Cash and cash equivalents, beginning of year</b>	<b>687,632</b>
<hr/>	
<b>Cash and cash equivalents, end of year</b>	<b>\$ 665,365</b>
<hr/>	
<b>Supplemental disclosure</b>	
Recognition of right-of-use asset - finance lease	\$ 19,286
Recognition of right-of-use asset - operating lease	\$ 57,668
Recognition of lease liability - finance lease	\$ 19,286
Recognition of lease liability - operating lease	\$ 57,668

The accompanying Notes to Financial Statements are an integral part of these financial statements.

# 1 year anniversary of Together for Global Health: let's all learn

*Yasmine Vaughan  
Technical Advisor, HCW Missions and Global Health*

The last few years have been categorized as times of isolation and loneliness for many people. In addition to the stresses here at home in the US, supply chain issues and the inability to travel significantly impacted the way we were able to interact with our partners in Sierra Leone. We at HCW knew we were not alone in trying to alleviate poverty and save lives, but we began to wonder if other organizations faced the same challenges we did, or if they had some solutions we did not know of. Our Director of Programs and Global Engagement Laura Horvath often lamented that in the child welfare sector there were many organizations that gathered in meetings and conferences to discuss these shared issues and solutions, but that we did not know of any in global health.

So, in true HCW fashion, we decided that if we wanted to join a collaborative group of global health organizations, we were just going to have to create one ourselves. In March of 2021 this organization began with about six partners in a handful of countries. What began as a conversation space between organizations quickly grew into a full on coalition. We named ourselves Together for Global Health, a global coalition of individuals and organizations

dedicated to promoting sustainable health care and wellness in low resource communities to ensure the people we serve can receive care regardless of ability to pay. Our mission is to bring together diverse health-focused organizations and individuals that share a spirit of collaboration and empowerment, to support and partner with low resource communities globally.



*Together for Global Health meetings are open to all individuals and organizations interested in advancing the field of global health and primary health in underserved communities and majority world countries.*

“Together for Global Health has been rolling like a snowball to gain new members and partners, with 16 organizations from Sierra Leone, Uganda, Lesotho, Grenada, Ethiopia, Bangladesh, Mozambique, Kenya, Mali, South Africa, Malawi, Zambia, Cambodia, Madagascar, Zimbabwe, and the United States.”

Since this first meeting, Together for Global Health has been rolling like a snowball to gain new members and partners, with 16 organizations from Sierra Leone, Uganda, Lesotho, Grenada, Ethiopia, Bangladesh, Mozambique, Kenya, Mali, South Africa, Malawi, Zambia, Cambodia, Madagascar, Zimbabwe, and the United States. You may recall an article from last year about our group sharing a donation of hospital beds courtesy of Rick and Phoebe Peterson and Project CURE. While the group aims to continue to share the burden of supply resources, many of the benefits of the group are not material. Each meeting, members have presented about their organizations, highlighting the amazing work their programs are doing as well as the strategies and resources they have used to achieve that work. We have been able to be a source of encouragement to one another, both in seeing how the same challenges affect us all as well as seeing how others have succeeded in goals we are hoping to achieve ourselves.

Wess Stafford, former CEO of Compassion International, once said “Do what you can, and influence what you can’t.” The people who attend the TGH meetings, quickly find that their organization is not alone in its problems or desire to find workable solutions.

The organizations that join the TGH coalition are experienced at facing challenges just like theirs, and eager to figure out how to overcome them. More than that, they are motivated by the desire to help others, a desire that extends to everybody serving in global health. At TGH, we recognize that we can make faster progress by working together to overcome challenges we are all facing. We are in this together, hoping to influence change and bring improvements where we can. Together, we are all working towards the same goal of equipping health service providers and empowering people to be healthy and happy.



Sister Catherine Norman, UMCSLAC Health Coordinator receives 100 patient beds to distribute to Kissy General, Mercy UMC and Rotifunk hospitals, as well as clinics run by other members of TGH in Sierra Leone.



Petty traders peddle their wares on the streets of Bo. Many children and youth drop out of school after the primary grades to help their families survive.

Learn how you can work with us to equip and empower families and communities with ownership of the solutions to overcome child poverty, child mortality and family separation at [www.helpingchildrenworldwide.org](http://www.helpingchildrenworldwide.org).



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Chantilly, VA 20151  
703.793.9521  
[www.helpingchildrenworldwide.org](http://www.helpingchildrenworldwide.org)

Helping Children Worldwide  
by strengthening and  
empowering families and  
communities

[www.helpingchildrenworldwide.org/give](http://www.helpingchildrenworldwide.org/give)

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