Republic Day Greetings

PARTIERS PAGE



Volume-V, No.1

26th January 2022

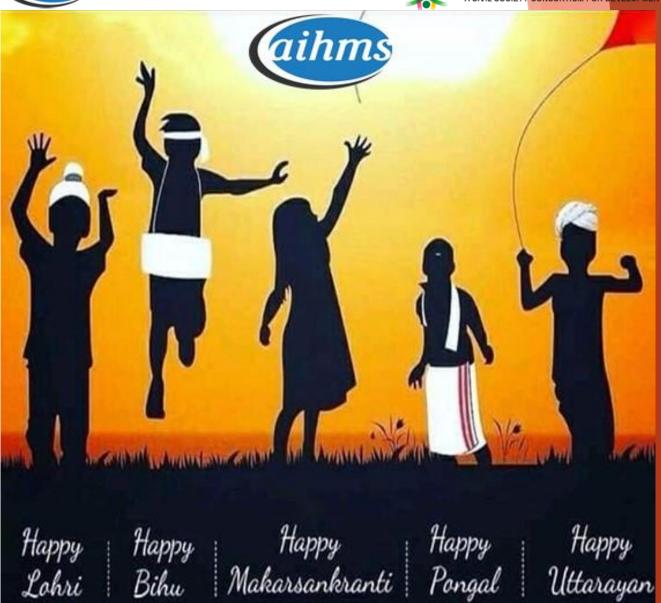
COVID-19
Supplement

The monthly E-Newsletter of AIHMS-Global & VIKASH-SAMUKHYA

www.aihms.org / www.vikashsamukhya.org







aihms AIHMS-Global

Celebrated 9th Foundation Day Friday, 14th January 2022 New Delhi & Bengaluru, India





Global Advocacy on COVID-19

Since April 2020, AIHMS-Global & VIKASH-SAMUKHYA on their part are continuing to do their best regarding Global Advocacy on COVID-19, by collaborating with national & international institutions to address the severity of the global pandemic.

AIHMS-Global & VIKASH-SAMUKHYA have joined more than 200 national & international organizations/ institutions of GAVI CSO Constituency in calling on the world stakeholders to commit to an equitable distribution of COVID-19 Vaccines among all nations: https://drive.google.com/file/d/1KCLoJDR4YrJzHDrcq7C2sPWeGJllTb_9/view

AIHMS-Global & VIKASH-SAMUKHYA along with Global Health Council & other International Partners and Patrons reiterated its stand to review the United States Government's Earlier Decision to Terminate Relations with the World Health Organization (WHO) through a Joint Statement:

https://globalhealth.org/wp-content/uploads/2020/06/COVID-19-WHO-CSEM-Response.pdf

On 1st December 2020, AIHMS-Global & VIKASH-SAMUKHYA, as associates of Health System Global along with its international patrons and global collaborators have signed the global call to action in urging the heads of state and government, and others involved in shaping the response to COVID-19, to adopt a set of ten principles and approaches to provide inclusive, just, equitable and effective public health approaches in countering COVID-19 and future pandemics:

https://www.healthysocieties2030.org/reclaiming-comprehensive-public-health?3ceabe6d_page=2





Global Advocacy on COVID-19 (Contd.)

AIHMS-Global & VIKASH-SAMUKHYA along with its 60 International Partners & Stakeholders have written to UN General Assembly President regarding the Special Session on the COVID-19 Pandemic on 3rd-4th December 2020 to address its apprehensions & concerns:

http://ngosbeyond2014.org/articles/2020/11/17/special-session-on-covid-19-letter-to-president-of-the-un-ge-1.html

AIHMS-Global along with its International Academic Collaborators & Civil Society Partners have been lobbying for Climate Change under its Sustainable Development Programs (SDG-13) since last couple of months after COVID-19 outbreak: https://www.changethechamber.org/participating-organizations

On 7th August 2020, AIHMS-Global along with its 200+ International Partners and Collaborators have updated the endorsed Global Consensus Statement on Meaningful Adolescent and Youth Engagement initiated by PMNCH, WHO: https://www.who.int/pmnch/media/news/2018/meaningful-adolescent-and-youth/en/

The said MAYE Statement is as follows: https://www.who.int/pmnch/mye-statement.pdf?ua=1





Global Advocacy on COVID-19 (Contd.)

VIKASH-SAMUKHYA, along with its 143 International Civil Society Partners call on the major funders in Global Health (WHO, WORLD BANK, GAVI, IMF, ILO, EU, OECD, GFF & GFATM) to prioritise global funding that supports recruitment of health workers in resource limited contexts:

https://www.wemos.nl/wp-content/uploads/2020/04/Joint-letter-to-global-funders-on-HRH-

financing.pdf?fbclid=IwAR37oBzPGUUq4FMKE7y05waSqm8xgLs 3767vS7jEnNlPLYV7Ay7ILFWj_3A

AIHMS-Global along with its 166 International Partners & Collaborators had published an Open Appeal to Funders & Donors for Preserving Global South's Research Capacity in the Post-COVID-19 Scenario in this part of the world:

https://science.sciencemag.org/content/368/6492/725 & https://science.sciencemag.org/content/sci/suppl/2020/05/13/368.6492.725.DC1/Reidpath-abc2677-SM.pdf

On 20th June 2020, VIKASH-SAMUKHYA & AIHMS-Global on their part in continuing their efforts in global advocacy on Women & COVID-19 had prepared a Joint Statement and pledged it along with its International Partners & Patrons:

https://womenindev.com/campaigns/covid-19/





Global Advocacy on COVID-19 (Contd.)

AIHMS-Global along with its 84 International Partners and Collaborators have urged USA Senate & Congress Committees to not squeeze funding for UN Agencies & WHO amid the Global Health Pandemic of COVID-19:

https://betterworldcampaign.org/resource/congress-united-nations-

funding/?fbclid=IwAR3TgEuXF9Zyp6jNZ6XAo3b7eN2zyDrmiVslTg
cbbn1N9m3dSqv7wUcuWMQ

On 20th May 2020, AIHMS-Global & VIKASH-SAMUKHYA with many leading international organizations have submitted a duly signed Civil Society Open Letter in support of the United Nations and the World Health Organization during COVID-19 Pandemic and promised their total support in days to come: https://iwhc.org/wp-content/uploads/2020/05/CSO-letter-in-support-of-UN-and-WHO_20May2020.pdf

On 21st April 2020, AIHMS-Global & VIKASH-SAMUKHYA were among the primary signatories to an "Open Letter Calling on Governments to Apply a Gender Lens to COVID-19 Preparedness, Response, and Recovery" with all your goodwill over the years.

Kindly check the same and extend your organizational support to this initiative and oblige:

https://deliverforgood.org/sign-on-to-this-open-letter-callingon-governments-to-apply-a-gender-lens-to-covid-19preparedness-response-and-recovery/



SUSTAINABLE GALS





































Committed to Working Together with our 535 CSO Partners until the 17 SDGs are achieved for India





Our Program Sectors

Health & Family Welfare

Nutrition & Food Security

Formal & Non-Formal Education

Livelihood Opportunities & Skill Development

Agriculture & Animal Husbandry

Information & Communication Technology (ICT)

Renewable Energy & Clean Environment

Climate Change & WASH

Partnerships & Networking

(Control + Click each sector for further details)





State-wise Distribution of CSO Partners in India



Consortium Membership List Updated as on 24th December 2021

1. Ad hoc Members: 224
2. Provisional Members: 162
3. Regular Members: 140
4. Prime Members: 009

Total: 535



State /UT	No.
Andhra Pradesh	09
Arunachal Pradesh	09
Assam	07
Bihar	66
Chhattisgarh	10
Delhi	10
Gujarat	07
Haryana	02
Himachal Pradesh	07
Jammu & Kashmir	04
Jharkhand	40
Karnataka	09
Madhya Pradesh	22
Maharashtra	19
Manipur	07
Meghalaya	06
Mizoram	07
Nagaland	08
Odisha	75
Rajasthan	20
Sikkim	09
Tamil Nadu	28
Telangana	06
Tripura	08
Uttar Pradesh	75
Uttarakhand	14
West Bengal	49
Dadra & Nagar Haveli	02

SDG-1: No Poverty

COVID-19: Civil Society Response in India



PACE (Andhra Pradesh) is in action, conducting Community Awareness Meetings for its state level program of the Centre For Financial Literacy

SDG-2: Zero Hunger

COVID-19: Civil Society Response in India



Jana Kalyan Pratisthan (Odisha) is in action, distributing nutritious food supplements to mothers & children and making them aware of COVID-19

SDG-2: Zero Hunger

COVID-19: Civil Society Response in India



Village Welfare Society (West Bengal) is in action, distributing nutritious food supplements to school children and making them aware of COVID-19

SDG-2: Zero Hunger

COVID-19: Civil Society Response in India



SHARE (Jharkhand) is in action, distributing milk & other nutritious food supplements to children in the schools and making them aware of COVID-19

SDG-3: Good Health & Wellbeing COVID-19: Civil Society Response in India



Bihar Gram Vikas Parishad (Bihar) is in action, training the Youth Warriors to provide quality healthcare in collaboration with state health functionaries

SDG-3: Good Health & Wellbeing COVID-19: Civil Society Response in India



Bhojpur Mahila Kala Kendra (Bihar) is in action, training the women volunteers to prepare and provide quality isolation kits during COVID-19

COVID-19: Civil Society Response in India



EKTA (Odisha) is in action, conducting health camps among villagers to protect them against COVID-19 during the current wave prevailing in the state

COVID-19: Civil Society Response in India



UP Voluntary Health Association (Uttar Pradesh) is in action, conducting Sensitization Workshops with public service providers on health issues

COVID-19: Civil Society Response in India





EKTA (Odisha) is in action, training ASHA workers of the district about COVID-19 by providing them with necessary medical support to work with

COVID-19: Civil Society Response in India



Onkar Seva Sansthan (Jharkhand) is in action, conducting Health Awareness Programs for the community on Proper Hygiene & Healthcare in difficult times

SDG-4: Quality Education

COVID-19: Civil Society Response in India





EKTA (Odisha) is in action, conducting awareness programs for school students on their rights to protection, and entitlements to quality education

SDG-4: Quality Education

COVID-19: Civil Society Response in India



Cohesion Foundation (Gujarat) is in action, conducting Awareness Programs for school students to go back to school and maintain health & hygiene

COVID-19: Civil Society Response in India



Premasharay Mahila Kalyan Samiti (Madhya Pradesh) is in action, conducting community level advocacy workshops on women empowerment & gender issues

COVID-19: Civil Society Response in India



EKTA (Odisha) is in action, conducting advocacy workshops in tribal districts on child rights & gender issues in fields of health, education & protection

COVID-19: Civil Society Response in India



SAHYOGI (Bihar) is in action, conducting advocacy workshops in schools on gender rights & entitlements in fields of health, education & protection

COVID-19: Civil Society Response in India



Manay Seva Kendra (Bihar) is in action, conducting advocacy workshops with stakeholders on protection and safety rights of women & girl children in the rural & remote areas of the state during the current wave of the pandemic



Yuva Rural Association (Maharashtra) is in action, training the rural youth to do innovative organic farming and to go for effective product marketing



EKTA (Odisha) is in action, training village women in organic farming through live demonstration and exchange visits within the state for self-reliance







Cohesion Foundation (Gujarat) is in action, orientating village women on organic farming and market practices for better income options in future



Yuva Rural Association (Maharashtra) is in action, orientating village women in doing kitchen garden practices for better income opportunities in future



Hind Yuva Shakti (Bihar) is in action, establishing JLG units in rural and remote areas with support of NABARD to have better income opportunities



Gram Sathi (Jharkhand) is in action, helping the rural people to establish poultry farms in outreach areas and marketing its products in nearby cities



Onkar Seva Sansthan (Jharkhand) is in action, helping the rural women to learn new skill-sets for growing innovative crops and effective product marketing

SDG-10: Reduced Inequality

COVID-19: Civil Society Response in India



Village Welfare Society (West Bengal) is in action, supporting Women & Senior Citizens of rural areas with distribution of clothes in winter

SDG-10: Reduced Inequality

COVID-19: Civil Society Response in India



Jana Kalyan Pratisthan (Odisha) is in action, conducting ICYF training workshops to orient its stakeholders for working at the community level without disparity

SDG-10: Reduced Inequality

COVID-19: Civil Society Response in India



Kaladanga Al-Qirat Charitable Society (West Bengal) is in action, supporting women & old people of the villages with distribution of blankets in winter

SDG-12: Responsible Consumption & Production COVID-19: Civil Society Response in India



Jana Kalyan Pratisthan (Odisha) is in action, supporting the village farmers to do different types of cultivation for its local consumption & marketing

SDG-12: Responsible Consumption & Production COVID-19: Civil Society Response in India







Cohesion Foundation (Gujarat) is in action, supporting the village women to do mushroom cultivation and its wholesale marketing in rural areas

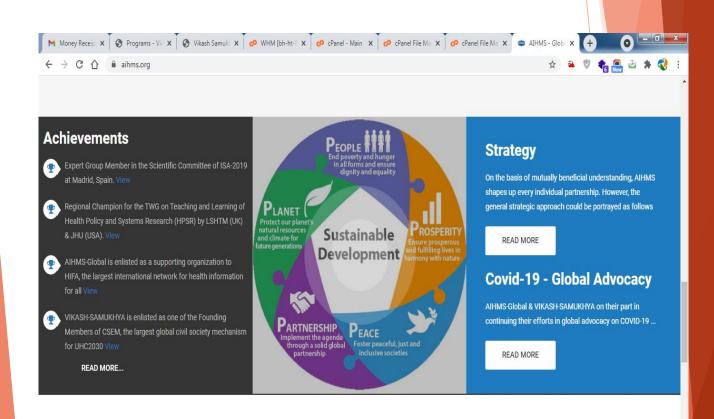




SDG-17: Partnerships to achieve the Goals

Global Advocacy on COVID-19 AIHMS-Global

https://www.aihms.org/global-advocacy.html



OUR PARTNERS





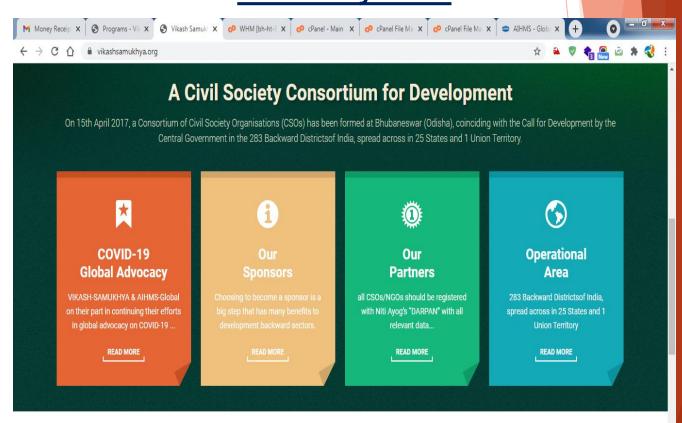




SDG-17: Partnerships to achieve the Goals

Global Advocacy on COVID-19 VIKASH-SAMUKHYA

https://www.vikashsamukhya.org/global-advocacy.html



WHO WE ARE?

Sustainable Development Goals



COVID-19 & SDGs: Awards & Rewards



Cohesion Foundation (Gujarat) won the CSR Times Award last year under Bronze category in the area of Healthcare (SDG-3) for their program on improved and qualitative access to holistic early childcare, development & education

COVID-19: STOP PRESS (In Hindi)

बच्चों द्वारा तैयार किए गए चित्रों से बनाया कलेंडर

सत्ता सुधार 🔳 ग्वालियर

चाईल्ड राईट्स आर्ब्जवेटी संस्था भोपाल द्वारा यूनिसेफ के सहयोग से प्रकाशित करवाए गए कैलेंडरों का जिला बाल अधिकार मंच , ग्वालियर एवं गोपाल किरन समाजसेवी संस्था ने ग्वालियर , स्कूल फोरम के बच्चों की उपस्थिति में प्रदान किया। कैलेंडर में प्रदेश के विभिन्न जिलों के बच्चों द्वारा तैयार किए गए चित्रों का समावेश है। नववर्ष के अवसर पर माननीय विधायक श्री सतीश सिकरवार ग्वालियर पूर्व ने किया। ग्वालियर मैं विमोचित किया ।चाईल्ड राईट्स आर्बुजवेर्टी संस्था भोपाल द्वारा यूनिसेफ के विशेष सहयोग से विगत दिनों संपूर्ण प्रदेश में स्कूली बच्चों के



लिए चित्रकला प्रतियोगिता का आयोजन किया गया था। जिसका उद्देश्य सर्वश्रेष्ठ चित्रों कासीआरओ द्वारा वर्ष-2022 के जारी किए जाने वालो कैलेंडरों के 12 माह के मुख्य पृष्ठों पर प्रकाशन रहा। प्रतियोगिता के माध्यम से सैकड़ों प्रविष्ठीयां आई। जिसमें कुल 12 सर्वश्रेष्ठ चित्रों का सीआरओ ने चयन कर बाद उन सुंदर और आकर्षक चित्रों का प्रकाशन वर्ष-2022 का कैलेंडर जारी करते हुए किया गया है।

Gopal Kiran Samaj Sevi Sanstha (Madhya Pradesh) is praised by the local press for their efforts in publishing the "Children's Calendar-2022" with state support & UNICEF





* End Note*

Last month, we have collectively acted and have pledged to stand with survivors on the Human Rights Day on 10th December 2021.

AIHMS-Global & VIKASH-SAMUKHYA along with its 144 international partners and collaborators, majority from the Global South, have come together to call for an end to sexual exploitation and abuse by WHO staff and generally in the health sector in many countries.

We are confirming that the attached open letter following next regarding ending sexual exploitation, abuse and harassment has been sent to Dr Tedros, Director General of the World Health Organization (WHO) and Dr Amoth, Chair of the WHO Executive Board for their kind consideration and necessary action.

Look forward to working with you on this call for action in the coming year,

Warm regards & Best wishes,

~AIHMS-Global & VIKASH-SAMUKHYA Team

PARTNERS PAGE: E-Newsletter of VIKASH-SAMUKHYA









Actions pour la Rélinearties Sociale de la Ferena



10 December 2021

H. E. Dr. Tedros Adhanom Ghebreyesus

Director General of the World Health Organization

Dr Patrick Amoth

Chair of the Executive Board of the World Health Organization

ENDING SEXUAL EXPLOITATION, ABUSE AND HARASSMENT IN GLOBAL HEALTH

Your excellencies,

The 16 Days of Activism, 25 November to 10 December, mark the global campaign for the prevention and elimination of Gender Based Violence. During the 16 Days of Activism 2021, we the undersigned organizations, wish to express our deep concern at the sexual exploitation, abuse and harassment (SEAH) of women and girls by WHO staff during the tenth Ebola response in the Democratic Republic of Congo (DRC). We stand with survivors of SEAH and whistleblowers in their pursuit of justice and the truth, and we call on WHO to act now to prevent and eliminate violence against women and girls.

Power imbalances and root causes

As diverse organizations working for the rights of women and girls in global health, we are appalled at the reports of SEAH by United Nations' employees and international aid workers, including WHO, outlined in the <u>Independent Commission report</u> of 28 September 2021. The Commission uncovered 83 alleged perpetrators, 21 of whom were WHO employees. The allegations included 9 rapes and countless demands for sex for jobs. Women and girls as young as 13 years old became pregnant, had miscarriages and abortions as a result of rape and sexual exploitation, and a reported 22 children were born. It is shameful and completely unacceptable that male staff of UN and aid agencies have caused such deep harm and blighted the lives of women and girls whose health they were paid to protect. This case in DRC is one in a long series of such cases and almost certainly the tip of the iceberg within the health sector.

Deep power imbalances exist between those delivering humanitarian programs and the populations in vulnerable situations that those programs are intended to protect, especially women, girls and boys. Sexual exploitation, abuse and harassment (SEAH) in humanitarian settings is part of a broader pattern of gender-based violence, enabled by gender inequality and inequality between the countries of the Global North and Global South. The risk of SEAH was increased in the WHO Ebola operation in DRC by the underrepresentation of women in staff and leadership: 73% of the 2,800 WHO staff were men, and men held 77% of leadership roles.

Recommendations for accountability and transformation

We commend WHO for establishing an Independent Commission to investigate the facts of the DRC case and we acknowledge the members of the Commission for their work. An Independent Commission was an important and transparent first step that other agencies should follow. We also note WHO's Management Response of 21 October 2021 and the Implementation Plan of 12 November 2021.





The DRC case places an unprecedented obligation upon WHO to act immediately to end abuse by its staff. We seek bold, high level and consistent leadership from WHO and the WHO Executive Board. WHO must deliver the Management Response and provide regular, accessible updates on implementation. Immediate plans to support victims and survivors and follow up on allegations of SEAH and managerial misconduct must not be delayed. The institutional and organizational change management planned within WHO is vital for implementing the Management Response. Achieving sustainable change will require WHO to address power imbalances internally and externally, with a strong focus on gender equality and geographical balance.

Allegations of SEAH in the tenth Ebola Response in DRC were made against staff of several UN and international aid agencies, in addition to WHO, highlighting the need for a sector wide approach. Given its global mandate to advocate for health as a human right and health equity, WHO must play a leadership role in preventing and eliminating SEAH within the health sector.

WE URGE THE FOLLOWING:

1. Leadership, accountability and resources:

- 1.1 Visible and unwavering leadership from the Director General WHO on all actions, including with partners and member states, to ensure prevention of SEAH is a central and permanent goal in all WHO operations and work;
- 1.2 WHO Executive Board to make prevention of SEAH a permanent indicator of performance management and accountability for WHO;
- 1.3 WHO to follow up urgently with resources and reparations for the survivors in DRC, as well as on sanctions for perpetrators and any WHO managerial staff implicated. Resources for local and community level sensitization, awareness creation and capacity strengthening around identifying and reporting cases of abuse must also be available;
- 1.4 Provide regular status updates through multiple channels on the implementation plan, ensuring updates reach the impacted persons and communities, including interim updates on any barriers to progress;

- 1.5 Introduction of an investigatory system for WHO that centers and protects survivors, acts swiftly and transparently and ensures that perpetrators face justice and a level of sanctions that will act as a deterrent to others;
- 1.6 Resources dedicated to the prevention of SEAH in the short and longer term, from global to country level operations, paying special attention to humanitarian and health emergencies;
- 1.7 Gender parity in leadership, especially within WHO country offices and emergency response teams. The presence of a critical mass of women will reduce the risk of SEAH;
- 1.8 Engage women from the Global South as a critical part of the solution to the prevention and elimination of SEAH, including to disseminate information to women on WHO codes of behavior for staff and reporting mechanisms for SEAH.

2. WHO leadership in the health sector

- 2.1 WHO must collaborate with and urge other organizations implicated in the DRC allegations to investigate, take responsibility for and make concrete plans to hold perpetrators and managers accountable, and compensate survivors;
- 2.2 WHO must work with partners to prioritize prevention of SEAH in health sector aid and

humanitarian operations. It must meaningfully engage governments and international and local NGOs/CSOs, especially women-led organizations, to develop a transparent and coordinated accountability system.





There can be no excuses for the harm done by WHO staff to women and girls in DRC and nothing can undo that harm. We have high expectations of the leadership of WHO and are fully committed to supporting WHO to uphold the rights, safety and dignity of all women and girls by ending SEAH in the health sector.

Sincerely,

Bibyshe Mundjo Takubusoga

Executive Secretary, Actions pour la Réinsertion sociale de la Femme & Vice Chairperson of FEMNET (Central Africa) Democratic Republic of Congo

Memory Kachambwa

Executive Director, FEMNET Kenya Dr. Roopa Dhatt

Executive Director, Women in Global Health United States

On behalf of the undersigned organizations:

- ABAAD-Resource Centre for Gender Equality, Lebanon
- Action Congolaise pour le Respect des Droits Humains, DRC
- African Women 4 Empowerment, Germany
- AfriYAN Ghana, Ghana
- AIHMS-GLOBAL. India
- · Akina Mama wa Afrika, Africa
- AMREF Health Africa, Africa
- Anis Instituto de Bioética, Brazil
- Association Amis du Musee de la Femme Henriette Bathily, West Africa
- Association des Centres pour Handicapés de l'Afrique Central, DRC
- Association for the welfare of women and indigenous people, Cameroon
- Balance Promoción para el Desarrollo y Juventud, México
- BCH Africa Cameroon, Cameroon
- BFLA, Belize
- Botswana Gender Based Violence Prevention and Support Centre, Botswana
- Building Together Cameroon, Cameroon
- Centre d'Education et de Recherche pour les Droits des Femmes, DRC

- Christian Action for Development & Support (CADS), South Sudan
- CIVICUS, Global
- CNPF RDC, DRC
- Coalition on Violence Against Women-COVAW, Kenya
- COMMUNITY AND FAMILY AID FOUNDATION-GHANA, Ghana
- Core Group, Global
- Echoes of Women in Africa Initiatives, Nigeria
- Egyptian Feminist Union, Egypt
- Engender Health, Global
- Episcopal church, Global
- · Feminism Makes Us Smarter, Global
- Family Planning NSW, Australia and the Pacific
- · Fiji Women's Rights Movement, Fiji
- FOKUS Forum for Women and Development, Norway
- Fundación para Estudio e investigación de la Mujer, Argentina
- GenCap NRC with HCT South Sudan, South Sudan
- Generation initiative for Women and Youth Network(GIWYN), Nigeria





- Gestos, Brazil
- Girl Child Network, Kenya
- Girls and Women Empowerment Network, Zimbabwe
- Girls' Globe, Sweden
- Girls Health Ed, Global
- Global Action on Men's Health, Global
- Global Health Corps, USA
- Global Health Council, USA
- Global Justice Center, Global
- Global Network of Women Peacebuilders, USA
- Global Network of Women Peacebuilders, Global
- Good Samaritan Association (GSA), Ethiopia
- Her Narrative, Kenya
- Himaya Daeem Aataa (HDA), Lebanon
- HeR Liberty, Malawi
- IGI, DRC
- Impact Her World Foundation, Nigeria
- Iniciativas Sanitarias, Uruguay
- Iniskoy for peace and Development Organization, Somalia
- Initiatives Alpha, DRC
- Institute of Gender and Children's Health Research, Sierra Leone
- International Center for Research on Women (ICRW), Global
- International Confederation of Midwives, Global
- International Council of Nurses ICN, Global
- International Federation of Medical Students' Associations, Global
- International Pharmaceutical Federation, Netherlands
- Irish Global Health Network, Ireland
- JUMUIYA WOMEN FUND, East Africa
- Ligne pour la solidarité congolaise, DRC
- Ligue pour les Droits de la Femme Congolaise (LDFC), DRC

- Local Initiatives for Women Development (ILOFEM), Burundi
- Make Every Woman Count, Guinea
- Medical IMPACT, México
- Midwifery Society of Nepal, Nepal
- New Millennium Women Empowerment Organization(NMWEO), Ethiopia
- ONG PROMODEF, Mali
- P2impact, Pakistan
- PaRiter, Croatia
- Pathfinder International, Global
- Pilier aux Femmes Vulnérables Actives -PIFEVA, DRC
- Power2empower, South Africa
- Real Relief, Denmark
- REBUILD WOMEN'S HOPE RDC, DRC
- RECODEF Senegal, Senegal
- · Red Dot Foundation, Global
- Red Dot Foundation, India
- Reproductive Health Network Kenya, Kenya
- Réseau Musonet, Africa
- SAHAJ, India
- Sama Resource Group for Women and Health, India
- SERAC-Bangladesh, Bangladesh
- SHALUPE FOUNDATION, DRC
- SheDecides Global Champion for PSEA, Global
- SHEKINAH GIRLS' EMPOWERMENT AND PROTECTION INITIATIVE, Nigeria
- Slums and Rural Health Initiatives-Rwanda(SRHIN), Rwanda
- Stellas Girls, USA
- Success Capital Organisation, Botswana
- Taking Up Space ZA, South Africa
- Talent Youth Association, Ethiopia
- Tear Fund, Global
- The Gender Security Project, India
- The George Institute for Global Health, Global





- Ujeengo Global Community, Kenya/ Nigeria
- UWEMA ASBL, DRC
- UzalendoAfrica initiative, Kenya
- VIKASH-SAMUKHYA, India
- Visible Impact, Nepal
- Vision Spring Initiatives, Nigeria
- War Against Rape (WAR), Pakistan
- · White Ribbon Alliance, Global
- Women at the Table, Switzerland
- Women Deliver, Global
- Women Engage for a Common Future -WECF, Netherlands
- · Women for Equal Chances-Congo, DRC
- Women for Fair Development (WOFAD), Malawi
- Women for Women's Human Rights New Ways, Turkey
- Women's Initiatives for Gender Justice, Global
- Women's International Peace Centre, Uganda
- Women in Global Health Afrique de l'Ouest Francophone
- Women in Global Health Afrique de l'Ouest Francophone, Sénégal
- Women in Global Health Afrique de l'Ouest Francophone, Togo
- · Women in Global Health, Canada and

- CWIGH Leadership Steering Committee
- Women in Global Health, Chile
- · Women in Global Health, DC
- Women in Global Health, Georgia USA
- Women in Global Health, Germany
- Women in Global Health, Finland
- Women in Global Health, Ireland
- · Women in Global Health, India
- · Women in Global Health, Malawi
- · Women in Global Health, Midwest
- Women in Global Health, Nigeria
- · Women in Global Health, Norway
- Women in Global Health, Pakistan
- Women in Global Health, Portugal
- Women in Global Health, Somalia
- Women in Global Health. South Africa
- Women in Global Health, Spain
- · Women in Global Health, Sweden
- · Women in Global Health, Switzerland
- · Women in Global Health, United Kingdom
- · Women in Global Health, Zambia
- Women Pillar Alliance (WOPA), Kenya
- Women's Global Health Innovations, Canada
- WREPA, Kenya
- Young PeaceBuilders (YPB), Sierra Leone
- Youth Harvest Foundation Ghana, Ghana





Actions peur la Rémourtion Sociele de la Ferma ARSF











AIHMS-Global & VIKASH-SAMUKHYA,

Greetings,

I'm taking a quick moment in this busy season to thank you. Your passion for and dedication to climate justice provides hundreds of communities around the world with the resources and tools they need to reach their full potential and fight climate change.

Together, we made great strides in building equitable, sustainable communities centered on solutions that are shaped and shared by all.

Your support makes it possible to advance community-driven and locally led climate solutions that benefit everyone - from creating resilience hubs in Brooklyn, NY where folks can access resources during a power outage, to supporting women cotton farmers in India, and steering cities in China toward net-zero emissions.

On behalf of the Institute for Sustainable Communities, thank you.

Deeohn Ferris, President, The Institute for Sustainable Communities



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For 17
Sustainable
Development
Goals (SDGs) with
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