Helping Children Worldwide is committed to a vision of communities where mutual respect and caring is common practice and the generous sharing of resources, knowledge, and spiritual well-being lifts every child from hopelessness and poverty, shining God’s light into every corner of the world.

We practice our vision through the programs we support, the partnerships we develop, and the mission teams we deploy.

Our Mission
Helping Children Worldwide (HCW) is transforming communities by serving vulnerable children and families through support for education, health care, and spiritual mentoring.

Our Vision
All the people of the world will live in strong, nurturing communities where children and their families can fulfill their God-given potential.

Our Approach
We partner with local leadership to support children and families where they live and connect them to the resources needed to build sustainable futures.

We partner with local leadership to build sustainability in the community by identifying local needs, and by encouraging our partners to employ local solutions.

We coordinate with in-country leadership to ensure that solutions are feasible and sustainable in the larger context of the community.

We measure program impact through robust monitoring, data collection, and evaluation, and provide technical assistance, training, and feedback to ensure that the programs we support continue to improve and thrive.

We cultivate trusted relationships and provide accountability and transparency to investors in our work.

Our Challenge
In Sierra Leone, one in seventeen women will die in childbirth, one in seven children will not survive until their sixth birthday, and the average life expectancy is only 51 years. The adult male literacy rate is 59% and the adult female literacy rate is 43%.

Extreme poverty affects 760 million people worldwide, and in developing nations extreme poverty impacts 50% of the population. 60% of Sierra Leoneans live below the poverty line and most people survive through subsistence farming.

For the sake of family survival, many Sierra Leonean children go to work at the same age children in wealthy countries begin preschool. Poor families in Sierra Leone cannot afford medical care and lack access to clean water, sanitation, electricity, and adequate nutrition.

Bo, Sierra Leone is a dense urban area where the average person survives on income below the "severe poverty" threshold of less than $1.90 a day. Those living in villages a long way from the nearest hospital may live their entire lives without once receiving medical care for illnesses and injuries, because (1) they can’t afford it, and (2) they can’t get to it.

The Child Rescue Centre
The Child Rescue Centre (CRC) Headquarters at the UMC Bo Urban Centre is a hub of activities and a recognized model of exemplary child welfare services in Sierra Leone. HCW and the United Methodist Church Sierra Leone Annual Conference (UMC-SLAC) opened this home for children in Bo in 2000, during the last years of the Civil War.

However, the CRC is NOT an orphanage.

Instead, the CRC provides access to education and health care for children and youth in Bo and surrounding villages and communities with robust case management services and professional staff. Throughout the 2017-18 school year, the HCW child sponsorship program provided scholarships for 567 primary and secondary students, and 24 students enrolled in post-secondary education.

The CRC supports family-based care, providing family counseling, parenting education, career training, and access to microfinance training and loans for parents to lift families out of extreme poverty.

HCW provides underwriting for 100% of the CRC programs, technical expertise and administrative support for CRC leadership, program administrators, case managers and accounting staff. During 2018, HCW contracted with service providers to train CRC personnel in community mapping for effective service delivery, provided strategic planning and budget training, and secured training materials and resources for the implementation of a robust case management system.

To strengthen the educational system, HCW established a teacher learning collaborative to problem-solve classroom issues faced by primary school teachers in extreme low-resource environments. Building on the success of that exchange, a case management collaborative launched linking case managers at the CRC and other child welfare agencies with other licensed social workers via video conference. In 2019, an electronic case management records system is being developed to improve child welfare case monitoring.

The system will enhance security of confidential data and reliability of information, including expense tracking and case activities, interventions and outcomes reports.

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MERCY HOSPITAL

Mercy Hospital is part of the United Methodist Church Health System, and a regional hub for services in the Bo District. Mercy extends its services to 55 villages surrounding Bo via mobile outreach clinics in 11 catchment areas. HCW supports Mercy’s mission to improve infant, child, and maternal health through holistic, community-focused care. We enable Mercy’s provision of services to the destitute, data-driven health care programs, and professional training, staff development, and wise collaborations to better serve the Bo community.

HCW works closely with the UMC Health Coordinator and Hospital’s Local Management Committee to recruit technical and medical expertise and provide financial supports that promote WHO standards of care at Mercy. The Mercy compound also houses an HIV/AIDS treatment and counseling center, a prosthetics limb-fitting and rehabilitation center, and a first class research laboratory. Mercy provided care to over 17,000 patients during 2018 through inpatient, outpatient, and outreach services.

During 2018, construction on a Surgical Wing was completed and two new operating theatres were equipped, along with post-surgical and private patient wards and renovation of most of the hospital facilities and grounds. Mercy Medical Outreach mapped specific community health needs in 14 villages. With that information, staff began tailoring health services provided to those areas, utilizing greater collaborations with government and other NGO health providers to identify gaps in essential services, and provided WASH infrastructure and education services to villages without access to safe, clean water or sanitation.

Outreach to the network of villages surrounding the city of Bo extends services to thousands of people who live far from the hospital. Twice weekly, the staff travels over precarious bridges and rough roads to bring care to remote sites. The services they provide include screening for malnutrition, enrollment in Mercy’s under 5 nutrition program, prenatal examinations, with ultrasound determinations of approximate due dates, malaria and HIV testing, provision of scarce medicines and hospital referrals and transport where needed.

HCW, Mercy Hospital, and Mercy Research Lab collaborated to design and pilot an electronic hospital information system (EMIS) for hospital management and patient medical records, specifically designed for Mercy’s unique needs. The EMIS will improve individual diagnosis and treatment, preserve confidentiality of patient information, standardize treatment protocols, track patterns of disease outbreak, document progress on SDG targeted medical outcomes for the region, and promote strengthening the health system for the entire country.

As a result of the community mapping conducted by Mercy Hospital, staff were able to identify the need for clean water in two villages outside of Bo: Gbanahun and Bumbeh. The people in these villages were walking several miles each day to a swamp in order to fetch water, carrying the heavy water buckets back to be used at home. This sole source of water was used for drinking, cooking, bathing, laundry, and waste. This water was extremely unhygienic, causing high rates of deadly waterborne illnesses, such as diarrhea and typhoid in the village. HCW and Deep Well Ministries collaborated to dig and install the deep bore wells - a well that extends tens to hundreds of meters into the earth to extract clean groundwater. These wells have the capacity to serve up to 500 people and will improve the overall health for the villages of Gbanahun and Bumbeh.
A letter from HCW Executive Director Melody Curtiss

Dear Friends,

Last year was a year we saw many promises fulfilled.

For one, the long planned surgical wing at Mercy Hospital became a reality, and we celebrated its opening this January. The surgical wing was part of a promise we made to the mothers of Sierra Leone that we would do something to reduce the number of women dying in childbirth. Mercy served thousands of mothers with prenatal care and antenatal clinics at the compound in Bo and in remote villages in the District in 2018 and now Mercy has taken the next step in preventing maternal and infant death, performing cesarean sections at Mercy Hospital. I am so grateful to the visionaries who imagined Mercy could become this regional hub and the many more who chipped in to manifest it.

Another HCW promise was to the children of Sierra Leone that we would do something to lift them from poverty and despair. In 2018, we renewed our promise to underwrite the sustainable development goals of child welfare, to reduce poverty and increase access to education and employment. There is nothing more impoverishing than the loss of family, nothing more heart-wrenching than the global orphan crisis. Like everywhere else in the world, Sierra Leone’s orphan crisis is experienced by children who have families who would care for them if they had the resources. In 2018, the Child Rescue Centre directly addressed the family preservation crisis that was turning children into virtual orphans with parent education, child and family counseling and case management services, educational scholarships, microfinance training, healthcare and community building programs.

HCW strongly supports the shift in focus at the CRC from crisis care to case management, supporting the professional growth of social workers and case managers to support over 600 children in their families and communities in order to sustain, nurture and successfully launch them into the life of abundance and joy that God has planned for them. We worried a bit that our donors wouldn’t understand that the children of Sierra Leone still needed their help. Other organizations that supported a shift away from institutional care to supported family care have lost donors in their sponsorship programs. That was not the case with HCW’s sponsors.

So, thank you to our donors for the support you provided to the mothers, the babies, the children and the families. You kept your promises, too.

In 2019, Helping Children Worldwide will again support the vulnerable children and families of the world. There is still not access to electricity, to clean water, to education or health care for the majority of people in West Africa. We can’t promise to fix it, but we can and do promise to help.

I hope you will join us!

Melody Curtiss, Executive Director
Fulfilling the Promise of Leadership

Since the Child Rescue Centre was first established in 2000, growing the future leaders of Sierra Leone through education has always been at the heart of the CRC’s mission. The CRC began by providing education support to the first forty children brought into the residential program, and soon expanded to including children living with families as well.

In 2008, the CRC added a post-secondary scholarship program to its portfolio of support, allowing qualified and needy young adults to further their education and achieve their dreams in either university or technical-vocational institutions. 43 students have graduated from the CRC’s post-secondary Promise Scholarship Program, and 25 are now stepping into various careers and leadership roles. The unemployment rate in Sierra Leone is approximately 4.5%; it is difficult even for qualified young people to find work in a variety of fields.

Two CRC program students, Abdulai Sumaila and Alfreda Humper, grew up in the residential program. Upon graduation from senior secondary school, each applied for and won a Promise Scholarship that allowed them to attend their respective university courses.

Abdulai attended Forah Bay College to study civil engineering before graduating in 2016. Currently, he is working as a Senior Civil Engineer in Freetown. In this role, he is responsible for the supervision of the construction of 225KV transmission lines as part of a government initiative supported by the Mano River Union. This effort will bring reliable, 24-hour-a-day power to Sierra Leone, Cote d’Ivoire, Liberia and Guinea by the year 2025.

Alfreda came into the CRC’s residential program shortly after it opened, and spent her entire childhood there before graduating from Zenith International Academy in Bo, and earning her own Promise Scholarship. Alfreda attended Njala University to pursue a teacher certificate program, earning that certificate in 2012. Married and the proud mother of a daughter, Alfreda is presently teaching at the United Primary School New Site Bo, teaching class one (US first grade). She has been teaching for over five years on stipend.

It is not uncommon for it to take many years for teachers to gain approval from the Ministry of Education in order to begin receiving salary from the government. Although Alfreda’s name is not yet officially on the government payroll, she is hopeful that under the new administration this will happen soon. As a class one teacher, Alfreda teaches all subjects in her class for the 46 young boys and girls in her class.
Fulfilling the Promise to Reduce Maternal Mortality Rates

Established in 2007 as a small, 25-bed charity facility, the mission of Mercy Hospital has always been focused on improving infant and maternal health in the Bo community. Mercy's prenatal programs, both at outreach clinics serving 55 villages and at the health center itself, have enjoyed high rates of successful and safe deliveries since Mercy officially opened its doors. But for 12 years, women needing a c-section had to be referred to Bo Government Hospital as Mercy had no surgical capacity.

Construction on the surgical suite at Mercy was completed in November of 2018, and officially opened in January 2019. Over 55 surgeries were performed in the first two days; the majority of which were hernia operations, performed by the PRAISE Foundation team who provided supplies and training of the Mercy surgical staff. After receiving training in c-sections in the Philippines in early spring, and the arrival of a blood bank, Dr. Sao Amara and Sister Augusta Kpanabam were finally ready to offer the first c-sections performed at Mercy Hospital by Mercy staff. As of May 15, the Mercy staff has performed 7 successful c-sections in the new OR wing, safely delivering 7 healthy baby boys!

Twenty-six year old Linda has the distinction of being Mercy's first c-section patient. Having delivered her second child at Mercy, Linda was familiar and comfortable with the staff and facilities and chose to return for the birth of her third child. She was in labor for approximately 7 hours when it became clear to the maternity staff that she was having an extraordinarily difficult delivery. She was engaged and trying to push, but the baby simply refused to come out. Suddenly, the fetal heart rate increased and the team knew the baby was in serious trouble.

Linda also appeared to be fading, and became extremely weak and unable to stand. Staff realized that she was experiencing cephalopelvic disproportion, caused when the baby's head was too big to pass through the pelvis. The Mercy team quickly brought her into the new operating room and performed a successful cesarian section procedure. The baby was not breathing, but the staff was able to quickly resuscitate him. Linda was thrilled to have a healthy baby boy, and recovered from surgery well. Although names are not normally assigned at birth in Sierra Leone, the family confided in staff that they hoped to name him Mohamed.

The decrease started when our partners asked us to send teams less frequently. "It's not that our partners were saying they don't need help," Executive Director Melody Loncar said. "They were telling us to send the right help."

"It is about working in true partnership."

Helping Children Worldwide has been deploying short term mission teams to West Africa since 2002. Before halting all travel due to the Ebola crisis in 2014, HCW had deployed nearly 500 missioners on 57 separate trips. We resumed sending teams in 2016 after the CDC declared traveling safe again. Since then, we have seen a decrease in interest of short term missions, resulting in just 152 missioners on 17 trips over the last four years.

What is the right help in 2019? The global movement to ensure that every child grows up in the loving care of a family instead of an institution is changing the nature of global short term missions and impacting engagement. As we work together with others in the field of child welfare and missions, we believe that God is calling for a new perspective on how we engage in short term mission trips.

We call for short term missions focused on vulnerable families and the communities in which they live and work. We need missioners committed to serve by helping families identify and utilize the assets and strengths they already possess, and by helping communities find ways to work together to care for the members who may need additional support.

"Now that all the CRC children are with their families, I believe I'm called to serve in mission to the adults who take care of them 24/7," says Sharon Gardner. "It's about working in true partnership with them as they support the children. It's not that I think I have all the answers about how to do anything, but I can come alongside CRC staff, Bo teachers, even parents and offer encouragement and support."

Sharon also cautions the importance of maintaining a posture of humility. "To be honest, it's about sharing and gaining a different perspective - the flow of information should go both ways, and we should learn as much or more than we share."

When asked about working with parents in the CRC microfinance program and meeting the families and community, long time mission leader Patty Morell said, "When I go to Sierra Leone, I never know who God is going to make me fall in love with. I know I will fall in love with the children, but I didn't know I could fall in love with these adults, or feel so welcomed, loved and accepted by a whole village!"

Although the focus of short term missions is transitioning, they remain important and relevant. One of the goals for our policy conference Rising Tides is to explore how we can continue to make a difference in the lives of the world's most vulnerable after the transformation of short term missions. We hope you will join us in the conversations.
## 2018 IMPACT AT A GLANCE

### CHILD WELFARE

- 567 extremely vulnerable children and youth received scholarships for free education, case management, counseling, education, healthcare, and spiritual mentoring through the Child Rescue Centre.

- 1,800 primary school students impacted by the 30 Sierra Leone teachers who participated in the 2018 Teachers’ Learning Collaborative.

- 19 secondary students passed entry requirements testing for university admission.

- 24 post secondary students received Promise Scholarships for university, vocational and technical programs.

- 78 primary and secondary school students successfully passed required tests in order to matriculate and be eligible to continue education.

- 50 women caregivers of Child Rescue Centre students who have enrolled in the CRC Microfinance Program are in loan repayment status from their successful small businesses.

### MEDICAL AND HEALTH

- 1,139 total infants and children under 5 years of age enrolled in Mercy Hospital’s Nutrition Program.

- 8,100 patients treated for malaria by Mercy Hospital and Mercy Medical Outreach.

- 1,353 adults and children treated for HIV/AIDS through Mercy Hospital’s HIV/AIDS program.

- 17,407 patients received quality care from Mercy Hospital or Mercy Medical Outreach regardless of their ability to pay.

- 900 villagers gained access to clean, safe drinking water from 2 deep bore well projects.

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