

Building Healthy Communities in Africa



ANNUAL REPORT 2019–2020



CPAR

Canadian Physicians for Aid and Relief

Healthy systems supporting healthy lives.



Our Vision

Stronger health systems in Africa.

Our Mission

Building health system capacity and supporting healthy lives in low resourced regions.

About Canadian Physicians for Aid and Relief

Founded in 1984 in response to the famine in Ethiopia, Canadian Physicians for Aid and Relief (CPAR) is a charitable organization working in partnership with health professionals, vulnerable communities, governments, and diverse organizations to strengthen health systems in Africa.

CPAR supports the achievement of the Global Goals for Sustainable Development through programming that:

- ◆ Improves health system capacity
- ◆ Addresses the determinants of health that may also impact the health of the communities in which we are working (food security and nutrition, clean water, sanitation and hygiene, sustainable livelihoods)

CPAR has field offices and programs in Ethiopia, Malawi, and Tanzania.

CONTENTS

Board of Directors 2019-2020	4
2019–2020: Forging a new path for CPAR	5
A message from the CPAR Board Chair.....	6
A message from Kathrina Loeffler, Executive Director	8
Green Schools Project – Malawi.....	10
Project goals	11
Outputs and beneficiaries.....	11
Health System Strengthening at Fitch Hospital project – Ethiopia	13
Project goals	13
Improving emergency medicine health outcomes	14
Knowledge Exchange project.....	15
COVID-19: education, prevention, and treatment.....	16
Ethiopia	16
Malawi	17
Tanzania.....	18
Stop Malaria in its Tracks!	19
Building a community of support	22
Our digital town square	24
The gift of time and talent.....	24
Financial statements	25

Canadian Physicians for Aid and Relief

Board of Directors 2019-2020

Dr. Steve Ferracuti, Chair



Judith Dyck, Vice Chair



Susan Williams, Treasurer



Dr. Wondwossen Esheto Ezineh



Ewan Main



Dr. Graeme McKillop



Sherry Poirier



Getachew Tesfaye



Gizaw Shibru Tessema



George Limbika Vilili



2019–2020: Forging a new path for CPAR

The international development sphere is changing to favour organizations that are lean, effective, and responsive, and CPAR is changing to meet the challenge.

In 2019, the CPAR Board made some difficult restructuring decisions to reflect new priorities and directions. As part of this change, CPAR refined its mission and vision to focus on strengthening health system capacity in sub-Saharan Africa. Our community-centred development approach will see us continuing to assess determinants of health for the most vulnerable populations in the countries where we work, namely Malawi, Ethiopia, and Tanzania. And we will be developing a more widespread network of Canadian health professionals who can share their expertise.

Corporately, we made some leadership changes. We introduced Kathrina Loeffler as our new executive director, as part of management services provided by Facilitated Improvement for Corporate Success (FICS). We moved our headquarters to Ottawa, Canada to improve access to federal departments and agencies. We also made leadership changes in our programs in Africa and instituted a more cost-effective management model that allows us to put more money in the field where real change is happening.

These changes were significant. What has not changed is our fundamental commitment to supporting, engaging, and empowering local communities to improve the quality of life for all.

Restructuring is never easy, and we sincerely extend our appreciation to everyone who has been part of CPAR's history to date. To our many supporters, we thank you for your ongoing commitment to the CPAR cause as we move forward.

A message from the CPAR Board Chair

Welcome to CPAR's Annual Report for 2019–2020. It's been quite a year, hasn't it?

I am, of course, excited to talk about what we have accomplished this year to build stronger health systems in Africa. But first I want to share, on behalf of the board and staff, our hope that all of you who are such an important part of the CPAR family are finding your way through these turbulent times. Please take care of yourselves and stay safe and healthy.

At the end of 2019, the board was in the process of reviewing CPAR's mission, vision, and organizational structure. We saw this as an important part of our due diligence in overseeing a 35-year-old organization that needed to change with the changing times. As we began to put our plans into action, we knew it meant that 2020 might present some challenges.

Little did we know.

While COVID-19 brought an unexpected layer of complexity to our plans, it did not derail them. The most significant change was hiring Kathrina Loeffler and her team at Facilitated Improvement for Corporate Success, or FICS, to manage day-to-day operations and guide CPAR into the future. The board held many long, into-the-night discussions about this new model and what it would mean. We believed then and continue to believe that the move to an external management team is the best approach for CPAR's growth and ultimately for the many communities in Africa where we work.

We also refined our [mission and vision](#) to clarify and focus our efforts, and developed strategic priorities through 2024. At every step, we remain focused on using our resources effectively and efficiently, and ensuring, to the greatest extent possible, that they reach the communities and people who need them the most.



Dr. Ferracuti has been a member of the Board since 2004. He is a family physician based in Haliburton, Ontario, Canada. He practices as a staff physician at Haliburton Highlands Health Services and Peterborough Regional Health Centre, and has extensive emergency room experience.

Steve is Chair of the Board and the Program Advisory Committee. His commitment to CPAR's international development work is informed by his experiences as a CPAR volunteer, particularly his time at Fitch Hospital in Ethiopia.

The results speak for themselves, despite our having to curtail our volunteer health professional program at Fitch Hospital. We expect those visits will resume in 2021.

- ◆ We procured and distributed personal protective equipment to our field offices and local communities to help prevent [COVID-19](#).
- ◆ We joined forces with Global Affairs Canada to begin planning a new four-year, \$4.1 million CAD project to improve the sexual and reproductive health of women and adolescents in Ethiopia.
- ◆ We advanced the [Green Schools](#) project (thank you to the Gay Lea Foundation) and the [Stop Malaria in its Tracks!](#) project.
- ◆ We coordinated [Basic Emergency Care training](#) and [field visits to hospitals](#) in Addis Ababa for Fitch Hospital staff.
- ◆ We developed a much more active presence on social media. Follow us!

I have every confidence that our successes will only continue to grow. Thank you for being part of our journey.

Dr. Steve Ferracuti, CPAR Board Chair

"As CPAR emerges into this next decade of growth, our board and staff are excited about the future and about working in partnership with local communities to bring about sustainable change to address their needs, in the places where they live."

-Dr. Steve Ferracuti, CPAR Board Chair

A message from Kathrina Loeffler, Executive Director



Kathrina Loeffler holds a degree in cultural anthropology from Western University, and a Bachelor of Education and a Master of Education in Organizational Studies from the University of Ottawa.

Kathrina's studies honed her expertise in program evaluation and knowledge transfer, leading to extensive work as an adult educator and professional facilitator.

Throughout her career, Kathrina has focused on understanding and improving health systems. To that end, she became a Certified Health Executive (CHE) with the Canadian College of Health Leaders in 2018.

Hello everyone,

My message for the CPAR Annual Report 2020 is a simple one. Thank you for inviting FICS to be part of this marvelous organization. And thank you for allowing me to return to one of my first passions, international development, and for showing me how drive and determination can move mountains. I saw that first-hand in the team's widespread efforts to find and distribute personal protective equipment early in the pandemic, and it was inspiring.

I'd like to take a few words to introduce myself. In my youth, I lived in Papua New Guinea and then in Lesotho. These experiences sparked my interest in other cultures and a desire to help address poverty and inequity. Over the years, I developed my expertise in cross-cultural communication, health systems strengthening, continuous quality improvement, and leadership effectiveness. In 2011, I took the plunge and launched FICS as a full-service corporate improvement company, and my team and I are delighted to be part of helping to steer CPAR's course.

There is no question that 2020 was an interesting year to start on this new path with CPAR. A highlight was my trip to Africa in January, where I got to know our talented, dedicated African staff and see them in action in the local communities. Those experiences still drive our efforts back in Canada as we work to raise awareness of the need to strengthen health systems in Africa and raise funds to make it happen. To that end, I must

express my deepest appreciation for our supportive and all-around wonderful donors. Thank you for your confidence in CPAR and your commitment to making the world a better place.

This annual report summarizes the highlights of the past year. But we work hard all year to keep you up to date through our newsletters and our website, and on social media. I

urge you to check in often—there is a lot going on at CPAR these days. And if you are not following us already, consider doing so on Twitter, Facebook, Instagram, and LinkedIn. We even have a TikTok channel! We tell good stories, and I would not want you to miss a thing.

At this point, I will close with a fervent wish that the coming year brings hope and new beginnings for all. Please continue to follow public health guidelines and keep yourselves and your families safe.

Kathrina Loeffler, CPAR Executive Director



K. Loeffler, second from left, with CPAR Malawi office staff



Green Schools Project – Malawi

A vegetable-planting demonstration.

Water in Malawi

Malawi is home to 5,000 primary schools and nearly 4.5 million school aged children.

More than 30% of schools do not have access to safe drinking water, over 75% of them have less than one toilet per 60 students. Only 4% have handwashing facilities.

Malawi's Central Region is among the most heavily impacted. Only 54% of people living in the Kasungu District have access to safe, clean water.

In January 2019, CPAR began the Green Schools project in partnership with the Gay Lea Foundation. The project was implemented in primary schools in the Kasungu District and supported long-term sustainable interventions focusing on conservation agriculture; permaculture; water, sanitation, and hygiene (WASH); and the construction of rainwater harvesting tanks.

Lack of access to clean water affects students' health. It is more difficult for children to attend and complete their education due to illnesses such as cholera, typhoid, and dysentery. Those students that do attend school sometimes need to share water with livestock, or walk during school hours to collect water from unprotected or unsafe rivers and springs. Fetching water reduces the time that students can be in class and learning. Also, when water is rationed, basic

hygiene practices such as washing hands after using the toilet are compromised. This further contributes to the spread of illness.

Project goals



Agriculture

Initiate a range of agricultural activities within the schools on permaculture, conservation agriculture, environmental conservation and sanitation and hygiene.



Nutrition

Improve nutrition for primary school students in Kasungu District and establish the Green Schools Network to share knowledge and information.



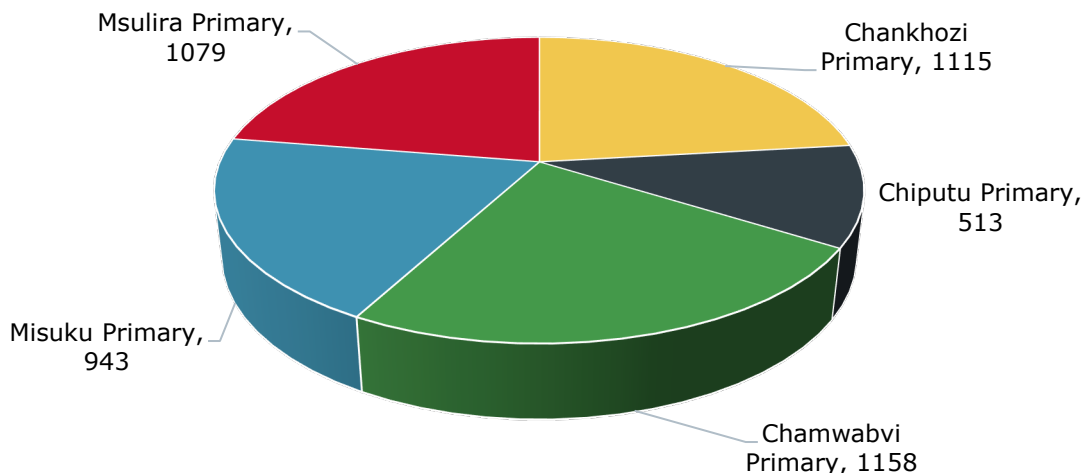
Sanitation & Hygiene

Construct a rainwater harvesting tank at one school to increase access to water for agriculture, and sanitation and hygiene.

Outputs and beneficiaries

All 4,808 students and their teachers in five Malawian primary schools now have access to a variety of fresh vegetables to help combat nutritional deficiencies. When the fruit trees begin producing in two years' time, the teachers and students will be able to add the fruit to their diets as well. All students from the five schools received training on permaculture, conservation agriculture, environmental conservation, and sanitation and hygiene.

Students Impacted: 4,808



In addition, a Green Schools Network has been established among the schools to help share information about current agricultural activities and successes. This helps the students learn from each other and will ensure the sustainability of the project after the implementation phase.

The number of indirect beneficiaries is projected to increase year over year, impacting neighbouring villages and communities. As students learn to grow healthy food and understand the value of clean water, they will bring this knowledge to their families and communities.

Factors that contribute to the sustainability and reach of the Green Schools project include our pay-it forward approach, the willingness with which participants share their knowledge, and the interest generated through the demonstration of successful results.



Health System Strengthening at Fitcha Hospital project – Ethiopia

Fitcha Hospital is a 102-bed zone hospital located approximately 125 kilometres from Addis Ababa in the Fitcha District of the North Shoa Zone of Oromia Regional State, Ethiopia. This is one of the poorest regions in the world and has one of the highest newborn child mortality rates in the country. Fitcha Hospital serves approximately 1.5 million people and is a referral center for 57 health centres and 297 health posts in North Shoa Zone. Resources in the hospital, both in terms of skilled personnel and medical equipment, are markedly limited. CPAR’s Healthy Communities project is a five-year initiative, that aims to strengthen the capacity of patient services in North Shoa Zone.

The emergency department is often the entry point into a hospital like Fitcha. As part of CPAR’s commitment to improving health systems in Ethiopia – and thereby the health of communities –in 2016 we launched the Health Systems Strengthening at Fitcha Hospital project that is still ongoing.

Project goals

The goal of the Health System Strengthening project is to improve Fitcha Hospital’s ability to provide health services in the region, with an emphasis on strengthening the provision of emergency medicine. Recent project activities have furthered this goal through:



Emergency Medicine Training



Equipment & Supplies



Knowledge Exchange

This people-centred project focuses on transferring knowledge from Canadian medical experts to the professionals at Fitcha Hospital. Activities include developing a knowledge-sharing partnership between Canadian medical practitioners and the medical staff at Fitcha Hospital, as well as procuring necessary medical equipment and supplies for the hospital.

Below are highlights of our activities in 2019–2020 that strengthened Fitcha Hospital and its associated health centres' abilities to provide treatment in their communities.

Improving emergency medicine health outcomes through Health System Strengthening

The Disease Control Priorities Project, a joint project of the World Health Organization, the World Bank, the Gates Foundation, and others, estimates that nearly half of all deaths and a third of disabilities in low- and middle-income countries result from conditions that could be addressed by emergency care.

In 2019 and 2020, frontline healthcare workers from Fitcha Hospital and its health centres attended two interactive, hands-on training programs focused on how to respond to the most frequent emergency room cases: trauma, difficulty breathing, shock, and altered mental states. This project was organized by CPAR in collaboration with the Ethiopian Ministry of Health, Oromia Regional Health Bureau, North Shoa Zone Health Office, and Selale University.



CPAR Ethiopia: Basic emergency care training

In summer 2019, 19 health professionals from the North Shoa Zone Health Office participated. In January 2020, another 16 trainees attended the second program. Since returning to work, participants report they have had many opportunities to put their new skills into action. In addition, they have passed on their new knowledge to colleagues, ensuring a growth in emergency medical skills far beyond the initial group of trainees.

Knowledge Exchange project

The Knowledge Exchange project is designed to strengthen health service delivery at Fitche Hospital through knowledge sharing with other hospitals. Fitche Hospital is in a rural area and, while the staff do a wonderful job with what they have, conditions are difficult and resources are limited.

In March 2020, eleven Fitche Hospital staff, along with Dr. Ferracuti, CPAR Board Chair and Canadian emergency room physician and CPAR program officer Sandra Abeje, toured AaBET and St. Peter's hospitals in Addis Ababa. These high-functioning organizations specialize in emergency and critical care management and are among the best public hospitals in the region. Participants spent time in the emergency room, the nursing stations, the triage and the procedure areas, the pharmacy, and the lab. They saw how the crash carts are set up and observed several triage protocols in practice.



Taking it all in at the AaBET Hospital nursing station

Afterwards, when the Fitche staff held a round table discussion to assess what they had learned, there was a clear realization that even though Fitche Hospital lacks resources and equipment, they could still use some of the protocols and best practices they had seen to make some immediate improvements to how they were providing emergency care.



COVID-19: education, prevention, and treatment

CPAR staff preparing to deliver brochures and posters.

In March 2020, the COVID-19 pandemic began to impact health systems in every part of the world. With many other CPAR project activities necessarily paused to decrease the risk of COVID-19 transmission, CPAR turned to providing healthcare providers and communities with personal protective equipment (PPE), equipment for treatment, and information on preventing and treating COVID-19.

Ethiopia

In Ethiopia, CPAR worked with the Ethiopian Ministry of Health, the North Shoa Regional Health Authority, and Fitche Hospital to procure essential PPE so Fitche Hospital could protect its staff, their families, and patients. CPAR procured large oxygen tanks, regulators, and oxygen administration cannula and masks to increase the hospital's capacity to administer oxygen therapy. At the hospital's request, CPAR developed learning modules with essential information for frontline healthcare workers about the management of COVID-19 patients.

CPAR also implemented public awareness messaging about COVID-19 prevention in rural communities through radio and social media, in collaboration with the Ministry of Health and regional health authorities. Radio is very popular in Ethiopia and this approach helped CPAR reach many people without putting staff or communities at risk. As part of this campaign, and at the request of the Ministry of Health, messaging also included

vital information about sexual reproductive health and rights and gender-based violence, to address the increased risk due to enforced isolation and physical distancing.

Results



Formed partnerships with all levels of government and local community leaders



Increased Fitch Hospital's capacity to provide oxygen therapy



Provided frontline healthcare workers with PPE and education about COVID-19 prevention, preparation, screening, and treatment



Increased community awareness about COVID-19 prevention measures

Malawi

In Malawi, CPAR field officers worked alongside the District Rapid Response Team to implement prevention measures and sensitize communities to the symptoms and dangers of COVID-19. CPAR's focus was on villages in the Fukamapiri, Malengamzoma, and Malada regions. This included sharing information about proper handwashing, social distancing, and symptoms by distributing leaflets and putting up informative posters. Much of the work was done through mobile van outdoor "road shows," keeping community members and field officers safe.



The COVID-19 prevention information "road show" in Malawi

Results

- ◆ Formed partnerships with local governments and other NGOs that have similar projects in the Nkhata Bay area, and local community leaders
- ◆ Collaborated with community leaders to mobilize communities and share COVID-19 information, including:
 - the importance of handwashing and social distancing
 - how to recognize symptoms
 - when to seek medical attention responsibly so as not to overwhelm local healthcare facilities

Tanzania

In Tanzania, CPAR field officers focused on sharing information in rural communities in the Karatu and Bunda districts in northern Tanzania and on Ukerewe Island. Staff and volunteers distributed posters and brochures, and met with people directly to answer their questions about the disease.

CPAR also broadcast radio messages to reach as many people as possible, particularly those who were unable to access written media or could not be reached by in-person campaigns.

Results

- ◆ Distributed and posted over 2,500 posters and gave out over 25,000 brochures
- ◆ Helped 32 health centres and health outposts share information about preventing COVID-19 and using PPE
- ◆ Collaborated closely with community leaders and district medical officers to mobilize communities and share information about COVID-19, with an emphasis on the importance of handwashing, physical distancing, recognizing symptoms, and knowing when to seek treatment



Stop Malaria in its Tracks!

CPAR's Stop Malaria in its Tracks! project operated in the Nkhata Bay District in Malawi, in cooperation with Management Sciences for Health. The project supported the Government of Malawi's efforts to promote malaria prevention strategies such as the use of insecticidal nets, indoor spraying, and preventive treatment.

Community intermittent prevention and treatment in pregnancy (C-IPTP) involves providing anti-malarial medication to pregnant women at routine antenatal care visits. It reduces maternal malaria episodes, and the health impacts of malaria on both mother and baby.

The project was designed to:

- ◆ Educate as many people as possible about malaria prevention and treatment
- ◆ Improve oversight and accountability for health services by engaging with traditional authorities, health facility advisory committees, and communities
- ◆ Provide information about recent research, to build an understanding of and uptake for malaria prevention and treatment medication during pregnancy

As with any community education and awareness campaign, a variety of approaches was needed. Focus groups, involving about 120 people, helped identify women's perspectives and generate appropriate messages about C-IPTP awareness. Information education communication and social and behaviour change communication materials were distributed as part of each activity.

Malaria in Malawi

Malaria is one of the world's leading killers. It is endemic in Malawi.

The World Health Organization estimates that as of 2019, over 229 million people worldwide were infected. More than 94% of malaria-related cases and deaths occur in Africa.

The disease disproportionately affects vulnerable populations such as pregnant women, young children, and the poor.

Key messages focused on the need to:

- ◆ Seek healthcare within 24 hours of the onset of fever
- ◆ Finish medication prescriptions
- ◆ Ensure all pregnant women take at least three doses of anti-malaria medication
- ◆ Ensure all household members always sleep under a treated bed net

The success of the project depended on being able to mobilize local community leaders and health service providers. CPAR met with 66 local leaders and community structures, youth clubs, mother groups, teachers and education advisors, and health and social service workers and officers to orient them to the project. CPAR trained 24 community volunteers (11 male, 13 female) to work with us. We also visited 106 villages and worked with many youth clubs to disseminate information. This table shows the key activities and reach of this project.

Activity	# of events held	# of people reached	Notes
Open air community meetings	124	56,554	Facilitated by youth groups
Drama presentations	106	45,132	Mentored participatory theatre for community engagement
Mobile van road show sessions	89	73,015	Conducted by CPAR officers, youth club members and health personnel
Door-to-door canvassing	989 households	4,988	Targeted households with vulnerable members; those using treated bed nets for other tasks such as gardens or drying fish; those in hard-to-reach areas
Sports gatherings	2	1,030	Presented youth-led participatory theatre productions
Total:	1,310 events	More than 180,000 people reached	

The personal approach makes a difference.

One day while driving through a village in Nkhata Bay, staff in a CPAR mobile van noticed some bed nets being used to dry cassava. When they stopped to talk to the homeowner, she told them the net was torn so she was reusing it rather than throwing it out. It turned out that although the whole family slept under bed nets, many of the nets were torn, making them ineffective to prevent mosquito bites.

Staff explained how important it is not to have any holes where mosquitos can get in and suggested using pieces from one of the torn nets to mend the others. The homeowner was very appreciative of the information and this simple solution.



The family with the visiting CPAR Project Officer



Building a community of support

In praise of purpose

CPAR is a small organization with big goals, so we count on the time, talent, and treasure that our donors and volunteers invest in making our work possible. Thank you!

In 2019–2020, we saw a commitment from donors across Canada who understand deeply that providing health support for communities in rural Malawi, Tanzania, and Ethiopia is an investment in the people we serve today, and the generations that will follow.

We are especially grateful to our monthly donors, whose regular, ongoing commitment is the foundation upon which we build our work. Over half of our donors made more than one gift in support of CPAR's work over this past fiscal year, with over 950 donating once a month or more.

Perhaps even more important, a good number of our donors have been with us for many years and are true partners in fulfilling our mission.

2019–2020

\$ Raised

\$787,921
from
2,242
donors



Regions

- ◆ Maritimes:
\$27,484
- ◆ Central:
\$454,707
- ◆ Prairies:
\$152,306
- ◆ Pacific & North:
\$101,179



Children in Karatu, Tanzania

Our digital town square

If COVID-19 has taught us anything, it is that the world is now living online. To that end, we are building a community of online support through our social media channels and our website.

This year marks the beginning of a more concerted effort to engage our supporters and global citizens in our work. We have been tracking our results in earnest since October 2019 and will report more fully on our progress next year.

Through Facebook, Twitter, TikTok, Instagram, and LinkedIn, we are sharing stories of the people we serve and the needs that must be met. Our goal is to inform our digital audiences on the challenges, opportunities, and incredible people we have encountered in the course of our work to bring health and hope to Ethiopia, Malawi, and Tanzania. If you haven't done so already, please join our growing online community:



- ◆ Average weekly visitors to cpar.ca: **699**
- ◆ Social media followers (over all platforms at year-end): **1,967**

The gift of time and talent

CPAR would like to acknowledge some of the individuals and groups that have volunteered their time and skills with CPAR this year. We could not do our work without you, and your contributions are sincerely appreciated.

Youth club volunteers in Nkhata Bay District, Malawi

Our malaria prevention and control project in Malawi would not have been possible without the many youth club members who helped us reach 180,000 people with their dynamic community meetings, dramatic presentations, and mobile road shows. Thank you to everyone who participated. You made a tremendous contribution to the health of your communities!

Youth club name	Traditional Authority name (Impact area)
Msomba & Uhoho Youth Club	Malanda
Mwayi Youth Club	Malengamzoma
Mwaya Youth Club	Fukamapiri

Fitche Hospital volunteers

The individuals listed below travelled from Canada to partner with healthcare providers at Fitche Hospital in 2019–2020. Thank you for sharing your knowledge, experience, and time. Your impact in strengthening healthcare systems in the region is immeasurable.



CPAR volunteers with Fitche Hospital staff

- ◆ Samuel Appavoo, Emergency Physician
- ◆ Mike Cotterill, Emergency Physician
- ◆ Steve Ferracuti, Emergency Physician
- ◆ Rahul Khosla, Emergency Physician
- ◆ Kirk Nyquist, Community Health Nurse
- ◆ Vanessa Matthews, Registered Nurse
- ◆ Danielle Milotte, Registered Nurse
- ◆ Anjali Oberai, Emergency Physician
- ◆ Yvonne Wildenhain, Emergency Physician

Fitche Hospital volunteers reflect on their experiences:

Water, water, water, water. Access to water is not continuous and obviously this is a danger to patients and staff.

We spent considerable time finding and repairing equipment. It would be great if staff could be trained/retrained on all equipment maintenance.

I built strong relationships while I was working with Fitche staff. The people are very friendly and are eager to learn new skills. They have some strong skills while working with few resources.

Nursing staff were openly sad to see us leave. They promised to continue with the work we accomplished and inquired when more nurses were coming.



Financial statements

CPAR publishes its annual financial statements online at cpar.ca/About-Us/

CANADIAN PHYSICIANS FOR AID AND RELIEF

	2020	2019
SUMMARIZED STATEMENT OF REVENUE AND EXPENDITURES		
YEAR ENDED MARCH 31, 2020		
REVENUE		
Grants	\$ 301,352	\$ 544,367
Donations and other	928,237	1,018,358
Gain on sale of capital assets	-	682,635
	1,229,589	2,245,360
EXPENDITURES		
Overseas development and relief projects	889,228	1,230,254
Fundraising, communications and development education	286,696	375,222
Administration	234,932	218,211
Transition costs related to reorganization and relocation	357,063	-
	1,410,856	1,823,687
EXCESS OF (EXPENDITURES OVER REVENUE)		
REVENUE OVER EXPENDITURES	\$ (357,063)	\$ 421,673

SUMMARIZED STATEMENT OF FINANCIAL POSITION

AS AT MARCH 31, 2020

ASSETS		
Current assets	\$ 1,676,632	\$ 1,532,815
Investment held for endowment purposes	15,986	15,594
Capital and intangible assets	35,785	48,163
	1,728,403	1,596,572
LIABILITIES AND NET ASSETS		
Current liabilities	1,031,450	361,289
Net assets	696,953	1,235,283
	\$ 1,728,403	\$ 1,596,572



CPAR

Canadian Physicians for Aid and Relief

CPAR works in partnership with health professionals, vulnerable communities, governments, and diverse organizations to strengthen health systems in Africa.

Canadian Physicians for Aid and Relief

Suite 401, 240 Bank St., Ottawa, ON K2P 1X4

info@cpar.ca

416.369.0865 | 1.800.263.2727

Charitable Number 11883 5230 RR0001



Learn more and get involved at cpar.ca

*Select photography courtesy of
Allan Lissner and OCIC*