



INVEST IN GIRLS.
INVEST IN THE WORLD.

2014

ANNUAL REPORT



INTERNATIONAL WOMEN'S HEALTH COALITION

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COVER: In Rajasthan, India, Angeli, 11, was being forced by her parents into a marriage that was fortunately cancelled; she is now free to pursue her studies and enjoy her teenage years.

Photo by Tanzeel Ur Rehman

PRESIDENT'S LETTER



“When I reflect on the past year, I am encouraged by all that we have achieved so far—not only as an organization, but collectively as a movement.”

When I reflect on the past year, I am encouraged by all that we have achieved so far—not only as an organization, but collectively as a movement. We boldly, firmly, and successfully advocated for the rights of women and girls at the United Nations as governments negotiated a draft of what will be the “Sustainable Development Goals.” A blueprint for global economic and social development that will apply to all countries and not only developing ones, these goals will be finalized and adopted this year and used for the next 15.

Thanks to the dedication and hard work of women's rights activists from around the world, and in spite of a well-organized and often vociferous opposition, we were able to secure a goal on gender equality, as well as commitments to promote universal access to sexual and reproductive health services and to uphold reproductive rights. When these goals are adopted in September 2015, every country will be accountable for implementing policies and programs that empower women and girls and safeguard their health.

While this development framework won't be perfect, it will be an important starting point to further women's health and rights. The next, and crucial, step will be developing adequate measures of progress on these goals—whether and how much governments are advancing their people's health, economic status, and social welfare. National and local women's groups will play a critical role in holding their governments accountable.

Yet, while the passion and dedication of the women's movement is strong, its funding is limited. A recent review found that the median yearly income of more than 740 women's organizations worldwide was only \$20,000. Many of our local partners face similar financial constraints. Without support from the International Women's Health Coalition, they would be at risk of closing down. The world can't afford to let that happen.

It's clear that the work of the women's movement is far from over. There is much to be done—especially now that world leaders and policymakers seem to be moving from rhetoric to real action. At IWHC, we will continue to support and mobilize local groups and leaders and advocate for a just world where women's rights are fully upheld.

With dedicated and generous supporters like you, we can make our voices heard even louder and make a lasting impact on the lives of women and girls.

Françoise Girard



MESSAGE FROM OUR BOARD CHAIR



“One of the greatest hallmarks of IWHC is its ability to identify and mentor emerging leaders like Mairamou who can build strong movements in their countries.”

As Board Chair of the International Women's Health Coalition, I have the privilege of meeting many amazing women and girl activists from around the world. These bright young leaders are fighting against the odds and creating lasting change in their own communities.

Mairamou is one of our partners from Cameroon. When she was only 12 years old, Mairamou was forced by her father to marry one of his friends, who was in his late 40s. In her region—the extreme north of Cameroon—nearly 80 percent of adolescent girls are forced into early marriages. Thankfully, Mairamou escaped her marriage—and with the help of IWHC, she and other young girls like her started a support group called APAD.

Today, Mairamou and APAD travel to communities across Cameroon to educate parents, community leaders, and girls themselves about the harms of child marriage. They are the face of a new generation, standing up to injustice and proclaiming loudly that girls' lives matter.

One of the greatest hallmarks of IWHC is its ability to identify and mentor emerging leaders like Mairamou who can build strong movements in their countries. IWHC invests in these young women, and gives them the tools, mentorship, and funding they need to succeed. Since its founding in 1984, IWHC has helped build more than 80 organizations in 60 countries.

Of course, social change doesn't happen overnight. It requires sustained pressure at the global, regional, and local levels. Ten years ago, IWHC was one of a few international organizations calling for a global strategy to end child marriage, a practice that every year deprives 15 million girls of their rights. Thanks to this sustained advocacy, ending child marriage is now a global priority, and in 2014, the leaders of 118 countries committed to a plan of action to end this human rights violation.

None of this change would be possible without your sustained support and partnership. Thank you for standing with us in advocating for gender equality and helping to realize the health and rights of women and girls. Together we can enable the next generation of girls to not only lead healthy and safe lives, but to thrive.

Marlene Hess



ADVANCES FOR WOMEN AND GIRLS IN 2014



Global Development Goals Focus on Women and Girls

After sustained advocacy by IWHC and our partners in the Women's Major Group—the single platform that brings together the women's movement worldwide at the United Nations—the UN General Assembly proposed a set of Sustainable Development Goals (SDGs) that prioritize gender equality, reproductive rights, and universal access to sexual and reproductive health care. These goals will guide government investments and programs for the next 15 years. The General Assembly will finalize the SDGs in September 2015.



Sindh Province in Pakistan Outlaws Child Marriage

Lawmakers in Sindh Province, which has the highest rates of child marriage in Pakistan, passed the Child Marriage Restraint Act to ban the marriage of anyone under the age of 18. Under the new law, anyone who “performs, conducts, directs, brings about or in any way facilitates any child marriage” may be subjected to fines and up to three years imprisonment. IWHC's long-term partner Aahung, headquartered in Karachi, successfully advocated for the law despite strong opposition.



U.S. Extends Abortion Coverage to Peace Corps Volunteers

For decades, Peace Corps volunteers were one of the only groups of women who receive health care through the U.S. government to be denied coverage for abortion, even in cases of rape and life-threatening pregnancy. IWHC has long advocated for an end to this injustice, and in December, Congress finally lifted the restrictions. Peace Corps volunteers now receive the same reproductive health care coverage as federal employees and women who serve in the military.

ADVANCES FOR WOMEN AND GIRLS IN 2014



Abortion Legislation Advances in Argentina

After years of stalling, Argentina's Congress began debating a bill that would legalize abortion in the first 12 weeks of pregnancy, without exception, and require public facilities to provide the service free of charge. More than 70 Congress members publicly expressed support for the bill. IWHC will continue to provide financial support and technical assistance to Argentine reproductive rights groups as Congress debates the bill throughout 2015.



Governments Invest in Efforts to End Child Marriage and Female Genital Mutilation

Convened by the UK and UNICEF in London in July, the Girl Summit saw unprecedented government support to end female genital mutilation and child marriage. Financial commitments from the UK, Canada, Netherlands, and other countries totaling more than \$65 million will support programs to end child marriage. As a founder and co-chair of Girls Not Brides USA, IWHC helped facilitate discussions with governments and NGO partners at the Girl Summit in London, as well as at its satellite event in Washington, D.C.



United Nations Adopts Progressive Resolution on Child Marriage

IWHC worked closely with the governments of Zambia and Canada to put forward a UN resolution on the elimination of child, early, and forced marriage. The resolution was co-sponsored by 118 governments and was approved in November by the UN General Assembly, demonstrating strong political will from the Global South to eliminate this harmful practice.



Peru Clears Path for Legal Abortion Services

Abortion to save the life or health of a woman has been legal in Peru since 1924, but the absence of national guidelines meant doctors could not provide this life-saving treatment. IWHC joined its local partner PROMSEX in pushing the government to take action after this 90-year delay. New guidelines allow medical staff to perform an abortion to protect a woman's health up to 22 weeks of pregnancy.

JOAN B. DUNLOP AWARD: NINUK WIDYANTORO



On June 9, 2014, IWHC presented the second annual Joan B. Dunlop Award to Dr. Ninuk Widyantoro, co-founder of the Women's Health Foundation in Jakarta, Indonesia. A determined and highly effective activist, Ninuk played a key role in reforming Indonesia's national health law in 2011. The new law improved maternal health care services for poor and rural women, increased access to generic medicines, and decriminalized abortion in cases of rape or when the life of the woman is at risk.

Ninuk played an important role at the landmark International Conference on Population and Development in Cairo in 1994, which put women's rights at the center of population policies. In 2013, Ninuk was a key advisor to the Indonesian government at the Sixth Asian and Pacific Population Conference in Bangkok, where governments adopted a robust declaration stating that gender equality and sexual and reproductive health and rights are indispensable to sustainable development, and must be a key part of the next global development agenda.



The Joan B. Dunlop Award was created in tribute to the extraordinary legacy of IWHC's first president, who passed away on June 29, 2012. The award comes with a cash prize of \$7,500 and is presented annually to an activist who is working under difficult circumstances to promote the health and rights of women and girls.

Ninuk accepted the award, noting that Joan was a mentor to her and supported her to establish the Women's Health Foundation in 2001. "Receiving this award at this time—when the road ahead is still long and unclear and so much more work needs to be done in Indonesia to ensure our health and rights—it is just what I needed most," said Ninuk.



A CELEBRATION OF BOLD AND INDEPENDENT VOICES

IWHC marked its 30th anniversary on September 9, 2014, with an evening of bold and independent voices for women's health and rights. Nearly 300 passionate supporters of IWHC gathered in New York City to reflect on how far women and girls have come in the past three decades, and how much further we need to go.

Supreme Court Justice Ruth Bader Ginsburg—a champion for women's rights in the United States—joined IWHC President Françoise Girard and IWHC Board Member Aryeh Neier in a dinner conversation on legal advances and setbacks for gender equality and reproductive rights. “A woman's control of her own body, her choice whether or when to reproduce, that's essential to women and it's most basic to women's health to have the ability to have access to whatever contraception she chooses,” said Justice Ginsburg.

Justice Ginsburg spoke candidly about her dissent in the controversial Hobby Lobby case, where the Court majority (all men) ruled that “closely held” corporations do not have to provide employees with health insurance coverage for contraception if they are morally opposed to it. This decision was widely criticized for essentially saying a corporation may have religious beliefs, and that those beliefs trump a woman's right to health care. In her fiery dissent, Justice Ginsburg wrote, “the Court has stepped into a minefield.”

However, she noted that widespread backlash to the decision could lead to positive change.

A CELEBRATION OF BOLD AND INDEPENDENT VOICES

"One couldn't think of a health care package today responding to the needs of people in the community that wouldn't include contraceptives," said Justice Ginsburg. "So maybe the reaction to Hobby Lobby will get some of my colleagues to think a little more than they did. When the Court goes the wrong way, it can be a very effective tool!"

In a panel discussion led by Erin Burnett, host of *Erin Burnett OutFront* on CNN, IWHC's partners from Nigeria, Kenya, and Pakistan offered similar hope for their countries.

Sheena Hadi, director of Aahung in Pakistan, discussed her organization's innovative life-skills education program that teaches girls and boys about gender discrimination, sexual abuse and domestic violence, family planning, and a woman's right to decide if, when, and whom she marries. This program has been adopted by both public and charter schools and is now taught as part of the curriculum in more than 250 schools in Sindh Province.

Fadekemi Akinfaderin, co-founder and executive director of Education as a Vaccine (EVA), one of Nigeria's leading nonprofit organizations, noted that sex and puberty are still taboo topics in

Nigeria and that parents are reluctant to talk to their daughters about basic health issues like menstruation. To fill this gap, EVA reaches youth directly through peer outreach, social media, and a text messaging hotline that receives 15,000 messages a month. Since its inception, EVA has reached more than 700,000 young Nigerians with information about HIV prevention, sexuality, and contraception.

Yvette Kathurima, head of advocacy of FEMNET, the African Women's Development and Communication Network based in Nairobi, Kenya, works closely with women's groups in 40 countries across Africa to amplify women's voices and increase women's participation in political debates and decision-making. FEMNET is spearheading a number of campaigns, including efforts to end harmful cultural practices like child marriage and female genital mutilation. The work is challenging, but FEMNET has made great strides by partnering with cultural and community leaders.

IWHC thanked the visionary activists and Justice Ginsburg for their work and for inspiring a new generation of young people to join the global movement for women's health and rights.



PARTNER SPOTLIGHT

GIRLS' POWER INITIATIVE

STRONG, ASSERTIVE, ARTICULATE, INFORMED.

These are some of the words that have been used to describe graduates of Girls' Power Initiative (GPI) in Nigeria. Girls in GPI's training are armed with the strategies, skills, and self-esteem they need to negotiate their adolescent years in good health. These young women represent the country's next generation of leaders, committed to realizing their vision of social justice and gender equality.



PARTNER SPOTLIGHT: GIRLS' POWER INITIATIVE



In Nigeria, adolescent girls are disproportionately vulnerable to HIV, sexual violence, unwanted pregnancies, and trafficking. To address these challenges, the International Women's Health Coalition helped launch GPI in 1993 and continues to provide the organization with financial and technical support.

"Working with IWHC has been unique because it's a relationship; it goes beyond funder/grantee," said Grace Osakue, who co-founded GPI with Bene Madunagu. "IWHC and GPI join hands to come up with the solutions to support GPI's new visions."

GPI began as a life-skills education course for 16 girls. Today, GPI reaches approximately 20,000 girls a year through outreach programs and its own TV show. It has become an international model for educating young women about human rights and gender equality.

GPI programs fill the gaps left by the standard education system by giving girls vital information

about their bodies, their rights, and their responsibilities. These lessons empower girls to take control of their reproductive and sexual lives and realize their full potential as individuals.

At the policy level, GPI advocates for comprehensive sexuality education to be taught as part of official school curricula. In 2001, GPI played a critical role in the passage of Nigeria's Family Life and HIV Education curriculum. In 2014, the textbook was updated to include a stronger focus on gender equality and on challenging harmful gender norms.

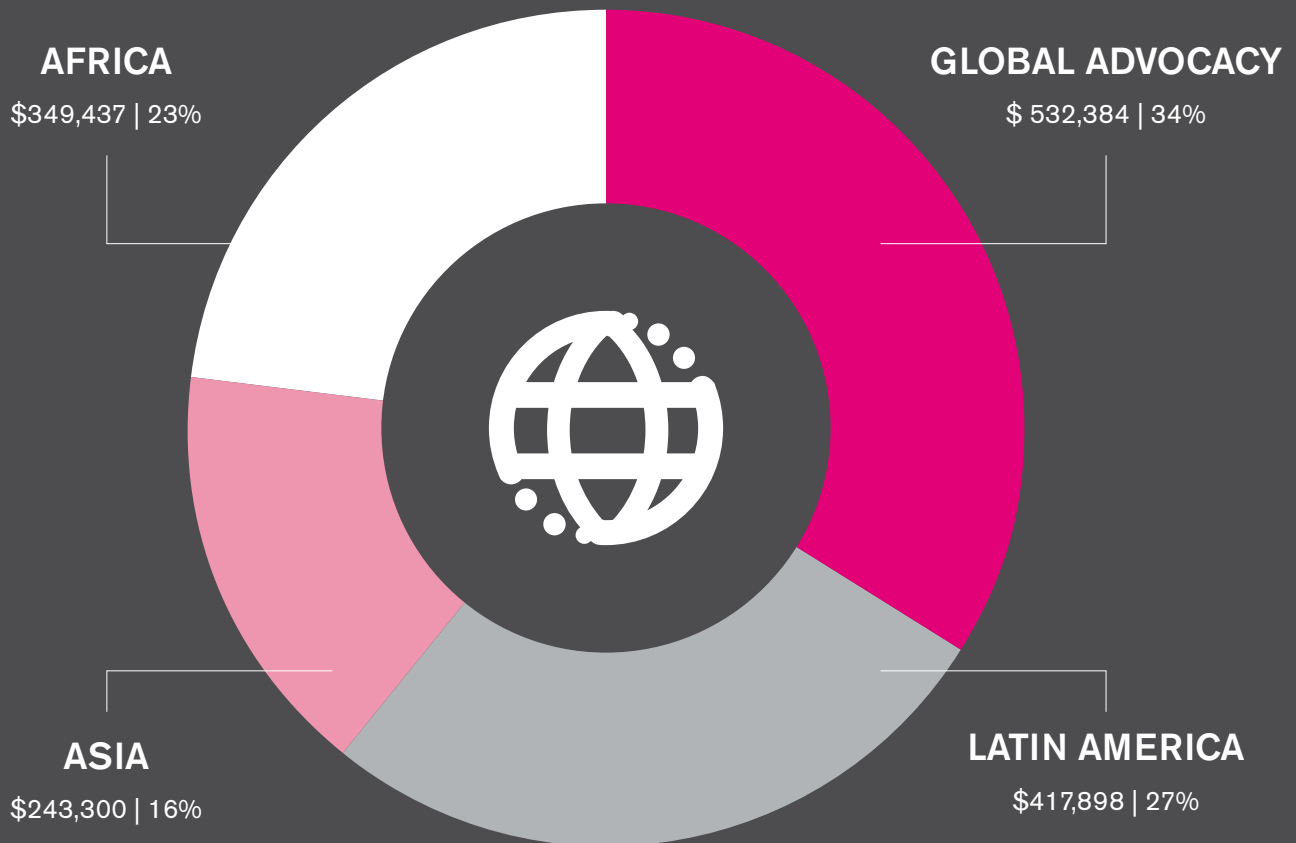
Although its programs have grown significantly, the girl remains at the heart of GPI's work.

"GPI's mission is to empower girls to become catalysts for change and bring about gender equality in Nigeria," Osakue says. "The heart of what we do is training girls to think critically, to make informed decisions, and to take actions for themselves and on behalf of others."

GRANTS TO PARTNERS

FY2014 AT-A-GLANCE

GRANTS BY REGION



164

FEMINIST
ACTIVISTS TRAINED
AND SUPPORTED

70

MEMBERS OF
CONGRESS IN
ARGENTINA SUPPORT
LIBERALIZING
ABORTION LAW

20K

GIRLS IN NIGERIA
EMPOWERED WITH
INFORMATION ON
GENDER EQUALITY
& HUMAN RIGHTS

250

SCHOOLS IN
PAKISTAN TEACH
SEXUALITY &
LIFE-SKILLS
CURRICULUM

GRANTS TO PARTNERS

FISCAL YEAR 2014

OCTOBER 1, 2013 TO SEPTEMBER 30, 2014

AFRICA

CAMEROON | \$36,600

Association de Lutte contre les Violences faites aux Femmes/Antenne de l'Extrême Nord (ALVF/EN) | Conduct a nationwide qualitative study on early and forced marriage practices in Cameroon and strengthen survivor-led initiatives to stop the practice.

CAMEROON | \$17,375

Association pour la Promotion de l'Autonomie et des Droits de la Fille/Femme (APAD) | Support survivors of early and forced marriage in the Extreme North region of Cameroon to mobilize against the practice and raise awareness in communities across the region.

CAMEROON | \$35,000

Femmes-Santé-Développement (FESADE) | Promote young people's access to gender-sensitive sexuality education by building a coalition of civil society organizations to advocate jointly with the government.

CAMEROON | \$4,240

Society for Women and AIDS in Africa (SWAAC) | Document SWAAC's experiences and lessons learned in promoting and distributing female condoms in six regions of Cameroon.

CAMEROON | \$25,000

Women in Alternative Action (WAA Cameroon) | Convene the 6th Africa Conference on Sexual Health and Rights held in Yaoundé, Cameroon.

KENYA | \$5,000

Coalition on Violence Against Women (COVAW) | Support COVAW to participate in the UN Commission on the Status of Women in New York from March 10-21, 2014.

KENYA | \$50,000

Kisumu Medical Education Trust (KMET) | Build the capacity of community-based organizations to provide sexual and reproductive health and rights information and support to adolescent girls in Western Kenya, and advocate for strong national policies and programs.

NIGERIA | \$90,122

Action Health Incorporated (AHI) | Strengthen sexuality education for adolescents by documenting the effects of a revised Family Life and HIV Education (FLHE) textbook intended to foster more equitable gender norms and critical thinking skills among students.

NIGERIA | \$40,000

Girls' Power Initiative (GPI) | Strengthen organizational capacity and develop five-year strategic plan to educate adolescent girls about gender equality, sexuality, and human rights.

NIGERIA | \$46,100

International Centre for Reproductive Health and Sexual Rights (INCRESE) | Prevent early and forced marriage in Minna, Nigeria, through the promotion of girls' education and leadership.

ASIA**REGIONAL | \$60,000****Asia Safe Abortion Partnership (ASAP)**

Engage in regional advocacy to improve access to safe and legal abortion in Asia.

INDIA | \$70,000

Creating Resources for Empowerment in Action (CREA) | Provide core support to build feminist leadership, advance women's human rights, and expand sexual and reproductive freedoms through capacity-building, advocacy, and public mobilization.

INDIA | \$30,000

Talking About Reproductive and Sexual Health Issues (TARSHI) | Advocate for comprehensive sexuality education and promote and increase the knowledge and awareness of sexual and reproductive health and rights among young people.

INDIA | \$35,600**CommonHealth/The Coalition for Maternal-Neonatal Health and Safe Abortion**

Strengthen advocacy on maternal health care and

safe abortion and train health advocates to monitor reproductive health care services for women.

PAKISTAN | \$47,700

Aahung | Train teachers in Sindh Province to implement Aahung's sexuality education curriculum, advocate for nationwide adoption of this curriculum, and raise awareness of adolescent sexual and reproductive health and rights through community sensitization and mass media.

LATIN AMERICA AND CARIBBEAN**ARGENTINA | \$35,000**

Católicas Por El Derecho A Decidir-Córdoba (CDD-Argentina) | Advocate for decriminalization of abortion and strengthen the National Campaign for the Right to Legal, Safe, and Free Abortion.

ARGENTINA | \$40,000

Centro de Estudios de Estado y Sociedad (CEDES) | Strengthen a network of advocates and providers of safe abortion services to develop sustainable public health policies and services that comply with existing abortion regulations.

ARGENTINA | \$31,800

El Centro de Estudios Legales y Sociales (CELS) | Advocate for decriminalization of abortion from a human rights perspective by meeting with legislators, drafting working papers, and engaging the media.

GRANTS TO PARTNERS | FISCAL YEAR 2014

BELIZE | \$7,100

GOBelize | Strengthen the capacity of 12 GOBelize alumni to advocate effectively for comprehensive sexuality education (CSE) in primary and secondary schools.

BRAZIL | \$43,000

Católicas pelo Direito de Decidir-Brasil (CDD-Brazil) | Strengthen CDD-Brazil as a counterweight to the anti-choice activism of the Catholic Church and other actors who oppose sexual and reproductive health and rights.

BRAZIL | \$25,000

Serviço de Orientação da Família (SOF)
Organize a three-day meeting of feminist bloggers to develop an online advocacy campaign in support of legalizing abortion.

GUATEMALA | \$9,466

Gojoven Guatemala | Strengthen the capacity of young people to advocate for sexual and reproductive health and rights using the “Montevideo Consensus” agreed at the Latin American and Caribbean Inter-Governmental Conference on Population and Development.

HONDURAS | \$9,466

Gojoven Honduras | Strengthen the capacity of young people to advocate for sexual and reproductive health and rights using the “Montevideo Consensus” agreed at the Latin American and Caribbean Inter-Governmental Conference on Population and Development.

JAMAICA | \$7,400

Jamaica Youth Advocacy Network | Strengthen the capacity of 25 youth activists to raise awareness and influence policy and programming on sexual and reproductive health and rights.

PARAGUAY | \$7,000

Las Ramonas | Strengthen the capacity of young feminist activists to effectively engage in the Post-2015 Development Agenda process.

PERU | \$36,200

Instituto de Educación y Salud (IES)
Facilitate the participation of young people and regional educational authorities in the implementation of the new national educational framework, which includes sexuality education.

PERU | \$52,000

PROMSEX/Centro de Promoción y Defensa de los Derechos Sexuales y Reproductivos
Use a citizens’ legislative initiative to introduce a bill to decriminalize abortion in the case of rape, and mobilize support in Congress to vote in favor of the bill.

PERU | \$50,000

PROMSEX/Centro de Promoción y Defensa de los Derechos Sexuales y Reproductivos
Create a national network of public-sector safe and legal abortion providers committed to expanding access to high quality abortion services.

PERU | \$9,466

Red de Organizaciones de Jóvenes Indígenas del Perú (REOJIP) | Strengthen the ability of Peruvian indigenous youth to effectively communicate and advocate for the priorities and recommendations of the Montevideo Consensus in their respective communities.

URUGUAY | \$55,000**Mujer y Salud en Uruguay (MYSU)**

Advocate for expanded access to safe, high quality sexual and reproductive health services, including abortion services, by monitoring and documenting implementation of the 2012 law allowing abortion up to 12 weeks.

GLOBAL ADVOCACY**Youth Coalition | \$25,250**

Support the Youth Coalition to convene a global youth strategy meeting on sexual and reproductive health and rights.

Feminist Strategy Meeting | \$135,461

Support 60 feminist leaders from around the world to come together and develop a common platform for advocacy on the Post-2015 Development Agenda.

**58th Commission on the Status of Women
\$111,099**

Support participation of 18 activists from Armenia, China, Ecuador, El Salvador, Georgia, India, Kenya, Lebanon, Liberia, Mexico, Nigeria, the Philippines, Tunisia, and Uganda.

**47th Commission on Population and
Development | \$158,288**

Support participation of 41 activists from Bulgaria, Cameroon, Canada, Georgia, Ghana, Indonesia, Jordan, Kenya, Macedonia, Pakistan, Tanzania, Thailand, Turkey, Uganda, and Vietnam.

**UN General Assembly Special Session on
ICPD Beyond 2014 | \$10,039**

Support participation by members of the RESURJ alliance.

UN High Level Political Forum 2014**\$33,564**

Support participation of 7 activists from Egypt, Fiji, India, the Philippines, Romania, South Africa, and Uganda.

**8th Session of the Open Working Group on
Sustainable Development Goals | \$6,429**

Support participation of 5 activists from Barbados, Kenya, Nigeria, Romania, and Uganda.

**13th Session of the Open Working Group on
Sustainable Development Goals | \$26,848**

Support participation of 9 activists from Cameroon, Fiji, Georgia, Ireland, Lebanon, Malaysia, Thailand, United Kingdom, and Uruguay.

**UN General Assembly: Panel Discussion on
Child, Early and Forced Marriage Worldwide
\$6,547**

Support presentation by IWHC partner Girls' Power Initiative, Nigeria.

US/African Leaders Summit | \$4,610

Support presentation by IWHC partner INCREASE, Nigeria.

**International Forum on Intercountry
Adoption and Global Surrogacy
\$3,210**

Support keynote presentation by Sama-Resource Group for Women and Health.

**Strategy Meeting on UN Negotiations
\$11,039**

Support participation of 7 experts on sexual and reproductive rights from Argentina, Botswana, India, Kenya, Mexico, Peru, and South Africa.

THANK YOU TO OUR DONORS

OCTOBER 1, 2013 TO SEPTEMBER 30, 2014

\$500,000 & UP

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\$999 TO \$500

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 Shelley Aron
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 Frances Hill Barlow
 Joanne Blum
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FINANCIAL STATEMENTS

FY2014 AT-A-GLANCE

EXPENSES

PROGRAMS

\$3,884,016 | 75%

FUNDRAISING

\$647,681 | 12%

ADMINISTRATION & MANAGEMENT

\$684,684 | 13%

REVENUE

55%

FOUNDATIONS

\$2,445,500

28%

INDIVIDUALS & EVENTS

\$1,247,342

14%

GOVERNMENTS

\$626,106

3%

OTHER

\$122,510

FINANCIAL STATEMENTS

FISCAL YEAR 2014 | OCTOBER 1, 2013 TO SEPTEMBER 30, 2014

STATEMENT OF FINANCIAL POSITION

	2014	2013
ASSETS		
CURRENT ASSETS		
Cash and cash equivalents	4,729,366	4,551,547
Grants and contributions receivable	1,311,806	1,539,986
Prepaid expenses and other current assets	51,594	26,232
TOTAL CURRENT ASSETS	\$6,092,766	\$6,117,765
Investment in Certificate of Deposit – Restricted	43,629	43,597
Grants and Contributions Receivable, net	–	964,772
Property and Equipment, net	65,472	80,288
TOTAL ASSETS	\$6,201,867	\$7,206,422
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES		
Accounts payable and accrued expenses	382,976	225,866
Grants payable	104,040	122,259
TOTAL CURRENT LIABILITIES	\$487,016	\$348,125
TOTAL LIABILITIES	\$487,016	\$348,125
COMMITMENTS AND CONTINGENCIES		
NET ASSETS		
Unrestricted:		
Operating	2,545,235	3,581,027
Board-designated	1,591,558	1,591,558
TOTAL UNRESTRICTED NET ASSETS	\$4,136,793	\$5,172,585
Temporarily restricted	1,578,058	1,685,712
TOTAL NET ASSETS	5,714,851	6,858,297
TOTAL LIABILITIES AND NET ASSETS	\$6,201,867	\$7,206,422

STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS

	2014 Unrestricted	2014 Temporarily Restricted	2014 Total	2013 Unrestricted	2013 Temporarily Restricted	2013 Total
SUPPORT AND REVENUE						
CURRENT ASSETS						
Contributions—foundations and others	1,274,030	1,171,470	2,445,500	2,082,640	654,500	2,737,140
Contributions—individuals	388,707	—	388,707	1,177,055	—	1,177,055
Grants—government agencies	626,106	—	626,106	—	124,001	124,001
Special events	858,635	—	858,635	840,969	—	840,969
Direct expenses of special events	(332,027)	—	(332,027)	(155,084)	—	(155,084)
Investment income	4,626	—	4,626	4,948	—	4,948
Miscellaneous income	117,884	—	117,884	70,286	—	70,286
Net assets released from restriction	1,233,879	(1,233,879)	—	2,228,684	(2,228,684)	—
TOTAL SUPPORT AND REVENUE	\$4,171,840	(\$62,409)	\$4,109,431	\$6,249,498	(\$1,450,183)	\$4,799,315
EXPENSES						
PROGRAM SERVICES						
Advocacy and Policy	1,481,350	—	1,481,350	1,296,889	—	1,296,889
Strengthening International Partnerships	1,874,275	—	1,874,275	1,309,248	—	1,309,248
Coalition Institutional Capacity	528,391	—	528,391	333,188	—	333,188
TOTAL PROGRAM SERVICES	\$3,884,016	—	\$3,884,016	\$2,939,325	—	\$2,939,325
INSTITUTIONAL DEVELOPMENT						
Management, administrative and board liaison	684,684	—	684,684	805,948	—	805,948
Fundraising	647,681	—	647,681	743,539	—	743,539
TOTAL INSTITUTIONAL DEVELOPMENT	\$1,332,365	—	\$1,332,365	\$1,549,487	—	\$1,549,487
TOTAL EXPENSES	\$5,216,381	—	\$5,216,381	\$4,488,812	—	\$4,488,812
(Decrease) Increase in Net Assets before	—	—	—	—	—	—
Foreign Currency Exchange Gain (Loss)	(1,044,541)	(62,409)	(1,106,950)	1,760,686	(1,450,183)	310,503
Unrealized Foreign Currency Exchange Loss	—	(45,245)	(45,245)	—	—	—
Realized Foreign Currency Exchange Gain (Loss)	8,749	—	8,749	(30,281)	—	(30,281)
(Decrease) Increase in Net Assets	(1,035,792)	(107,654)	(1,143,446)	1,730,405	(1,450,183)	280,222
Net Assets, beginning of year	5,172,585	1,685,712	6,858,297	3,442,180	3,135,895	6,578,075
NET ASSETS, END OF YEAR	\$4,136,793	\$1,578,058	\$5,714,851	\$5,172,585	\$1,685,712	\$6,858,297

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The International Women's Health Coalition (IWHC) advances the sexual and reproductive health and rights of women and young people, particularly adolescent girls, in Africa, Asia, Latin America, and the Middle East. IWHC furthers this agenda by supporting and strengthening leaders and organizations working at the community, national, regional, and global levels, and by advocating for international and U.S. policies, programs, and funding.