



Centre de coopération internationale
en santé et développement (CCISD)



irije paz
Prisma₂



Centre de coopération internationale
en santé et développement (CCISD)

Co da



OUR MISSION

Promoting healthy communities, *sustainably*.



Solidarity

We stand in solidarity with the communities we support in the pursuit of sustainable and collective outcomes.

Equity

We listen to people's needs so that they can have equitable opportunities to live healthy and thrive.

Respect

We are committed to respecting every person in their entirety, as well as their rights and their differences.

Humanism

Our commitment and sustained efforts are to ensure that each person is treated with dignity, compassion and kindness.

Integrity

Our interventions are driven by strong principles of ethics, social responsibility and good governance.

Excellence

Excellence is a driving force behind our thinking and actions, we focus on evidence-based practices and constant improvement.



2020 - 2021

Innovating in an uncertain world.

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Diane Morin

President of the Board of Directors

The year of the pandemic that has just passed will have had significant repercussions for all countries in the world. According to the WHO, the impact is particularly significant in terms of health inequalities, with the uneven availability of vaccines being the most striking illustration.

With our network of partners, we have contributed to the global effort by supporting the project teams in an ongoing and supportive manner, and we will continue to do so as long as necessary.

This year is also a milestone year for three important markers: a new executive leadership, our alliance with two great partners, and the rejuvenation of our identity brand.

As such, we welcomed the retirement notice of Robert Beaudry, Executive Director since 2007, who is leaving us on June 18, 2021. We are very pleased to welcome Matthieu Asselin, an expert in international project development and management, to take over. His complete profile can be consulted on our website (ccisd.org).

Then, in order to potentiate the collaborative effort already in place, CCISD formalized an alliance with two international development organizations of the Capitale-Nationale: SOCODEVI and Lawyers Without Borders - Canada. This alliance will be unique in Canada and brilliantly illustrates the link between health, economy and law.

Finally, CCISD will soon be adopting a new signature, which will be our main identity brand as of this fall.

Thus, the year 2020-2021 will have been both demanding and innovative. For this, I would like to thank the entire team at the head office and in the field, as well as all the members of the Board of Directors for their expert and generous involvement.



Robert Beaudry

Retiring Executive Director

In the context of COVID-19, the project teams were able to act quickly, with great flexibility and creativity.

Every three years, the CCISD team takes stock of its interventions and formulates strategic directions for the coming years. Despite all our good intentions and commendable strategic planning efforts, reality catches up with us, as iterative as it can be, and constantly forces us to reinvent ourselves.

In the context of COVID-19, one of the strengths of the project teams was precisely to act quickly, with a lot of flexibility and creativity, in order to respect the prevention measures, to adapt the programming and to ensure the continuation of the operations... all this while working remotely, using new communication technologies, everything we were used to do in person!

Although we still miss the presence of our colleagues, we have learned valuable lessons and seized opportunities to improve our practices. A new wind has blown for CCISD in an increasingly competitive environment. While staying true to our roots, we have begun to modernize, both internally and externally, and have expanded our horizons in terms of partnering and connecting with new audiences.

This year also marks the beginning of a new chapter with a change in general management, which will propel the organization with a new image and a more active philanthropic involvement with our partners and the Quebec City community, so that CCISD can act as a catalyst for Quebec solidarity in support of countries and communities in need. We hope that CCISD will make a real difference and contribute significantly to the improvement of the sustainable health of communities around the world.

As I write these lines, I am a few days away from retirement. I would like to extend my warmest thanks and regards to the members of the Board of Directors as well as to all my colleagues at CCISD, both in Quebec City and in the countries where we have worked for all these fruitful years of co-development. I wish my successor Matthieu Asselin every success!

Since 1987, we have been supporting the efforts of countries and communities to achieve sustainable improvements in health for all.

IN 2020-2021

5

12 M

2,8 M

**PROJECTS
AS LEAD PARTNER**

**BUDGETS
MANAGED (\$ CA)**

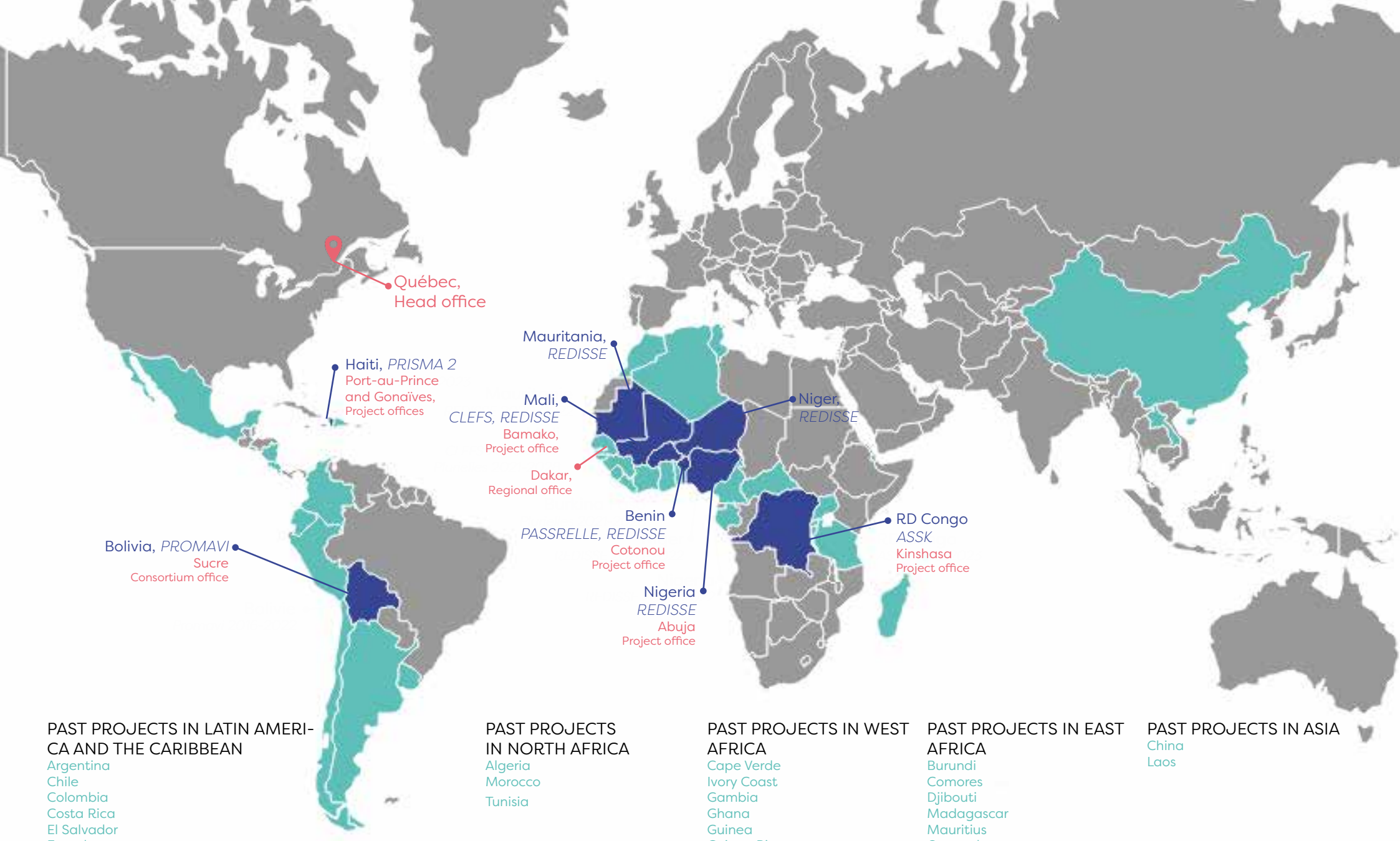
PARTICIPANTS

SINCE THE BEGINNING

121

256,5

13,8 M



Québec,
Head office

Haiti, *PRISMA 2*
Port-au-Prince
and Gonaïves,
Project offices

Bolivia, *PROMAVI*
Sucre
Consortium office

Mauritania,
REDISSE

Mali,
CLEFS, REDISSE
Bamako,
Project office

Dakar,
Regional office

Niger,
REDISSE

Benin
PASSRELLE, REDISSE
Cotonou
Project office

RD Congo
ASSK
Kinshasa
Project office

Nigeria
REDISSE
Abuja
Project office

PAST PROJECTS IN LATIN AMERICA AND THE CARIBBEAN

- Argentina
- Chile
- Colombia
- Costa Rica
- El Salvador
- Ecuador
- Mexico
- Nicaragua
- Peru
- Dominican Republic
- Uruguay

PAST PROJECTS IN NORTH AFRICA

- Algeria
- Morocco
- Tunisia

PAST PROJECTS IN WEST AFRICA

- Cape Verde
- Ivory Coast
- Gambia
- Ghana
- Guinea
- Guinea Bissau
- Liberia
- Senegal
- Sierra Leone
- Togo

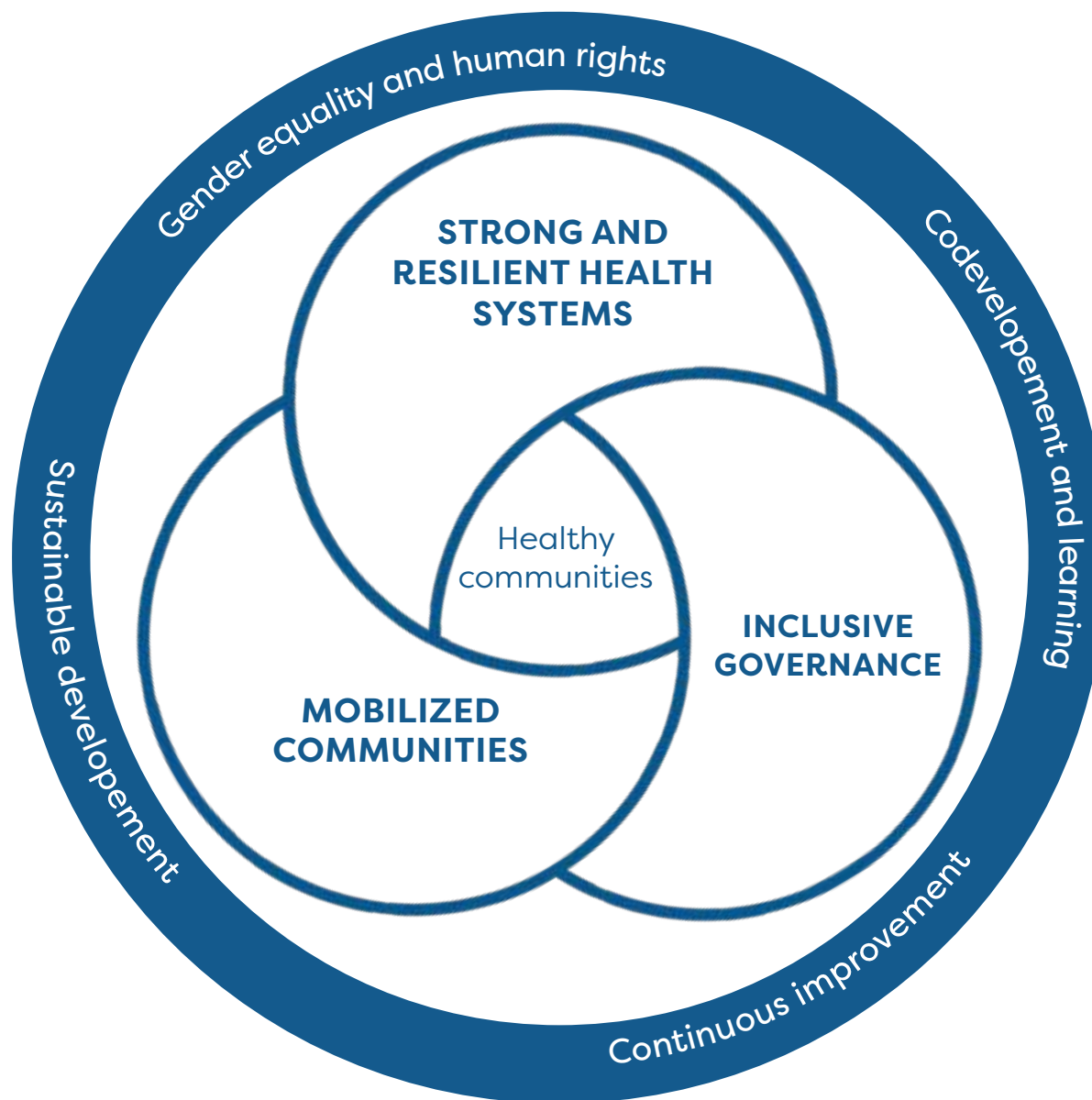
PAST PROJECTS IN EAST AFRICA

- Burundi
- Comores
- Djibouti
- Madagascar
- Mauritius
- Ouganda
- Rwanda
- Tanzania

PAST PROJECTS IN ASIA

- China
- Laos

AN INTEGRATED APPROACH *for a sustainable impact*



Why?

For real impact on community health, factors beyond availability and access to health care must be considered:

- social norms and inequalities
- behaviours and attitudes
- living environment
- access to information

A concerted effort for more sustainability!

- Involvement of the right stakeholders at all stages
- Rigorous management
- A supportive regulatory environment (laws, policies)



STRONG AND RESILIENT HEALTH SYSTEMS

For high quality, comprehensive, respectful and safe 1st line services.



Efficient and safe services for people who need them most.



Enough skilled staff, where most needed.



Complete, reliable and timely health information.



Quality medicines, vaccines, equipment, etc., available and in sufficient quantity.



Financing mechanisms to facilitate access and effective functioning of services.



Leadership to facilitate policy formulation and implementation in a transparent manner.



MOBILIZED COMMUNITIES

For the promotion of healthy lifestyles and prevention.



Access to appropriate knowledge.



Exercise of human rights.



Power to act and mobilise.



The adoption and promotion of behaviours and attitudes conducive to better health.



A diverse community fabric that mobilises:

- Community health workers;
- Women's groups;
- Community-based associations and organisations.



INCLUSIVE GOVERNANCE

For an environment conducive to sustainable engagement.



Support for a more favourable context for change and for the exercise of the right to health (laws, policies, training, etc.).



Support for the creation or strengthening of sector-specific and multisectorial platforms.



The participation of professional associations and training institutions.



Involvement of a variety of actors and decision-makers.

GENDER EQUALITY AND HUMAN RIGHTS - SUSTAINABLE DEVELOPMENT - CO-DEVELOPMENT AND LEARNING - CONTINUOUS IMPROVEMENT

Women rights *are human rights!*

Mainstreaming gender equality and human rights across the board, at all stages.

With committed staff and transformative approaches, our organisation contributes to reducing inequalities in health and beyond. Our tailored participatory interventions increase the promotion of human rights, the provision of gender-sensitive services to marginalised and vulnerable populations, and their active participation in decision-making spaces.

These are our key achievements in 2020 - 2021:



SHARING OF EXPERTISE

- 4 workshops to share good practice.
- 200 collaborative tool creation meetings.
- 16 lunchtime meetings open to all staff.



PUBLICATIONS

- Gender equality policy updated in a participatory manner.
 - 1 chapter on gender issues in intervention epidemiology integrated into training materials.
- A new online training module to prevent sexual and psychological harassment was made available to our staff in June 2021.



Health at the heart of sustainable development

How can we mitigate environmental risks and innovate for sustainability?

This year, we adopted a sustainable development policy to ensure greater coherence between our actions and our values in this area. A three-year action plan was launched and is ongoing in 5 countries! Among the commitments, we have decided to integrate sustainable development into our operations (in Canada and elsewhere) as well as in the design and implementation of projects. In addition, we are delivering on our environmental commitments in all initiatives developed and implemented, in accordance with national, Canadian and international standards. Key results for 2020-2021 include:



TRAINING

- 170 people trained in hygiene and biomedical waste management in Haiti and the Democratic Republic of Congo.



EQUIPMENT

- 3 health centres equipped with materials, hygiene and maintenance equipment, including colour-coded bins to facilitate waste separation.



INNOVATION

- 1 technique for manufacturing improved biomedical waste incinerators from regional exchanges.
- 1 methodology for manufacturing «refractory» bricks developed to withstand stresses during waste incineration (800°C).



800 degrees Celsius. This is the temperature needed to safely dispose of biomedical waste. Drawing on the experience of our team in Mali (BECEYA project, 2015-2020), the ASSK project team in the DRC has been working hard to build the very first improved and innovative incinerator model that meets international standards in the entire province of Kinshasa. Now that the expertise has been acquired and two prototypes built, a total of ten incinerators will be constructed in the province to safely dispose of biomedical waste with the support of the project.



5 examples of resilience and solidarity deployed by our partners

In all the countries where we have been active this year, we have contributed to national response plans to COVID-19. Here are some concrete examples of this support.

1. Support for frontline services

As maternal health services and mobile clinics had to be closed, project teams in Haiti and the DRC stepped up their efforts to ensure that community health workers could continue to provide basic support to communities.

2. Sexual and reproductive health awareness

With the suspension of contraceptive distribution and information campaigns in rural areas, extraordinary initiatives have emerged, such as in Benin, using community radio to reach adolescent girls (PASSRELLE project).

3. Capacity building in behaviour change communication

Noting that in some cases rumours and misinformation had the effect of reducing attendance at health centres (through fear of contamination), specific support has enabled university community health centres to build the capacity of providers to disseminate public health messages (CLEFS project, Mali).



4. Training and support for epidemiological surveillance

Immunisation campaigns against measles, tuberculosis, yellow fever, polio and other diseases have been postponed in at least 15 African countries; our teams have carried out assessments of surveillance capacities, with a view to implementing a training programme in field epidemiology for surveillance officers in 60 health districts in Benin, Mali, Mauritania, Niger and Nigeria (REDISSE mandate). Our partners will be prepared to detect the emergence of epidemics and other public health threats.

5. Contribution to national response plans

Despite significant restrictions on travel, the teams managed to achieve the objectives of accompanying communities and local authorities and contributing to the response and mitigation of the effects of the pandemic, thanks to exceptional creativity and determination, maximising the use of radio and other remote means (PROMAVI in Bolivia, PASSRELLE in Benin, ASSK in DRC).



We would like to express our gratitude to PASSRELLE for providing us with inputs for the response to COVID-19, i.e. personal protective equipment for rapid response teams and care centres, soap, hydroalcoholic gel and many other essential items for care. In addition, the DDS benefited from 3,400 sampling kits, which served to boost the detection of suspected cases at a time when availability was low. PASSRELLE has also assisted in strengthening the capacities of a dozen senior staff members who will contribute to the development of contingency and supervision plans for greater effectiveness in the response.

Dr GOUNDOTE Aimé, Head of Public Health and Traditional Medicine Department, DDS Atlantic.



Our teams continue to accompany our partners as they do everything possible to maintain quality frontline services that meet the needs of the most vulnerable populations. In the photo, ASSK project partners (DR Congo) proudly show their certificate following their training in hospital hygiene and biomedical waste management in Ngiri-Ngiri in January 2021.



In Haiti, 26 murals were painted at health institutions and in communities with key messages on prevention and promotion of barrier behaviours (hand washing with soap and water, wearing a mask, physical distancing, etc.). The aim was to encourage the adoption of behaviours that prevent the transmission of COVID-19, using social art for behavioural change, an approach advocated by the One Drop Foundation, a partner in the PRISMA 2 project.

Our projects 2020-2021

SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS



Because every person has the right to make decisions about their body and access appropriate services.

2020 - 2021 RESULTS

How can we ensure that we provide comprehensive frontline services, including a diverse range of modern contraceptives, counselling, addressing gender based violence, and providing the best maternal and newborn care?

For thousands of people, frontline health services are an effective way to access essential services and exercise their rights.

Sexual and reproductive health is an integral part of primary health care; everyone should be able to access appropriate primary health care services in order to thrive in dignity!

In resource-limited settings, however, there are many gaps in service provision, and conditions are detrimental to the exercise of human rights, particularly for women and girls in vulnerable situations. CCISD is helping to fill these gaps and improve the sexual and reproductive health and rights of thousands of people through its integrated approach, including:



BUILDING STRONGER HEALTH SYSTEMS

For comprehensive, quality and rights-based 1st line services

- Trained staff, respectful of human rights.
- Modern contraceptives.
- Adequate infrastructure.



SUPPORTING COMMUNITIES

Enabling a more favourable environment for the respect and exercise of these rights

- Men and boys are made aware of positive masculinity.
- Social disapproval of violence.
- Acknowledgement of the needs and rights of adolescents.



TRAINING HEALTH PERSONNEL

- Nearly 200 health personnel trained in 3 countries.
- Support for continuing education in clinical aspects (family planning, neonatal health, maternal health) but also concerning the rights and needs of people in vulnerable situations.



GREATER USE OF SERVICES

- Significant increase in the use of services by adolescents, with over 7,200 adolescents accessing these services;
- Increase in the number of modern planning users (15,610 users in 20-21 in the 9 communes supported by PRISMA2).



GENDER-BASED VIOLENCE AWARENESS/ SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS (SRHR)

- Thousands of people (3,739 girls and boys in Benin, 1,850 women and men in Bolivia) sensitised to gender-based violence (an important issue during the pandemic);
- 106 activities carried out by community leaders (DRC);
- More than 5000 activities carried out by peer education (Benin);
- Dozens of radio programmes, thousands of awareness-raising spots on the rights of adolescents and other aspects of SRHR (Haiti, Benin, Bolivia);
- Support to 11 women's organisations (Haiti) and training of community actors to raise awareness of sexual and reproductive health and rights, positive masculinities and the rights of adolescents;
- 96% of the associations supported in Benin integrate the promotion of SRHR services into their activities.



PRISMA 2

Integrated Management of Mother and Child Health Project in Artibonite (Phase 2)



2017 - 2023



22,2 M\$ CA

- Global Affairs Canada : 19,5 M\$
- One Drop Fondation : 2,6 M\$



HAÏTI

- Province of Artibonite



Social art to curb the spread of COVID-19 in Haiti

Art is a powerful tool for change. One Drop, a PRISMA 2 financial and technical partner, has developed a Social Art for Behaviour Change (SABC) model adapted to hygiene and sanitation promotion.

When COVID-19 appeared, the PRISMA 2 team quickly mobilised to set up original activities with local artists:

- Radio programmes and adverts on hygiene;
- Songs and videoclips for social media;
- Street theatre, performed in public squares and in waiting rooms of health institutions;
- Murals;
- Colourful sanitary installations.

254 000 PEOPLE

will benefit from the project.



65 900 women ages 25 to 49 and **85 200 young women** ages 15 to 24.



14 200 women who are likely to be pregnant.



20 000 young people ages 12-14
68 700 children ages 5 and younger.

PARTNERS

- Ministry of Public Health and Population (MSPP)
- Ministry for the Status of Women and Women's Rights (MCFDF)
- National Directorate of Drinking Water and Sanitation (DINEPA)

OBJECTIFS

- Increased use of health services by women of childbearing age, girls and children under 5, in nine communes of Artibonite, integrating gender perspective and environmentally friendly methods.
- Leadership and inclusive governance strengthened in the Departmental Health Directorate of Artibonite in reproductive, maternal, newborn and child health, integrating gender perspective and environmentally friendly methods.

PROSAMI

Maternal and child health project in Léogâne and Gressier in Haiti

A consortium project with Mission Inclusion (lead partner).



2016 - 2021



8,76 M\$ CA

➤ Global Affairs Canada



HAÏTI

➤ Léogâne et Gressier



An additional C\$ 1.4 M for the response

Global Affairs Canada's contribution to the response to COVID-19 provided financial support to the network of institutions attached to the comprehensive emergency obstetric and neonatal care in Léogâne. In addition, to meet the requirements of the immediate response to COVID-19, PROSAMI helped strengthen the surveillance system, enabling the detection of 29 suspected cases among 118,466 people. 22 new multipurpose community health workers (MCHWs) were recruited in April, bringing the total number of MCHWs to 35, who reached 45,880 people, more than 50% of whom were women.

Fathers' clubs and other civil society organisations have been trained on COVID-19 and empowered to intervene with the population to promote adequate protection measures against COVID-19, including GBV issues in emergency and confinement settings.

30 000 PEOPLE

will benefit from the project.



«The fight against COVID-19 must be a collective effort, a commitment by all citizens. This is why we have set up the Sound-Struk as an awareness-raising tool. Indeed, the repetition of messages of the messages promotes greater awareness within the community.

– Alande, owner of SOUND-STRUK
Published by Mission Inclusion in its 2021 activity report.

PARTNERS

- Ministry of Public Health and Population (MSPP)
- Ministry for the Status of Women and Women's Rights (MCFDF)
- National Directorate of Drinking Water and Sanitation (DINEPA)

OBJECTIVES

The PROSAMI project aims to strengthen basic health services and infrastructure available to pregnant women, newborns and children aged 0-5 years in the communes of Léogâne and Gressier, both located in the Western Department of Haiti.

Adopting a three-pronged strategy, this initiative provides support to governance bodies, health structures and communities to increase the use of reproductive, maternal, newborn and child health (RMNCH) services.

ASSK

Access to health services in Kinshasa

A consortium project: CCISD (lead Partner) with CHUM-USI.

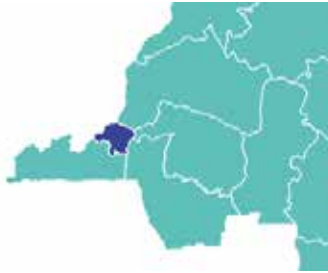


2018 - 2023



20,8 M\$ CA

▶ Global Affairs
Canada



RD CONGO

**Province of
Kinshasa**



Deux élèves et une professeure du village de Bondoko portent fièrement les masques sourires fournies par ASSK pour personnes malentendantes. Crédit: CCISD

1 930 200 PEOPLE

will benefit from the project.



These include **984 400 femmes, of whom 405 340 are of childbearing age.**



482 550 teenagers between 12 and 14 years old
386 040 children 5 years and younger.

PARTNERS

- ▶ Ministry of Public Health (MSP)
- ▶ City province of Kinshasa

OBJECTIVES

- ▶ Improve the quality and availability of health services, including sexual and reproductive health services, taking into account gender equality and the rights of women and girls.
- ▶ Increase the use of these services by women, children and adolescents.

Additional funding of \$1.3 million to support the COVID-19 response

The project team bounced back quickly after the first cases of COVID-19 arrived in DRC. At the request of the Kinshasa Provincial Ministry of Health, and with additional funding of \$1.3 million from AMC, the project supported the COVID-19 response efforts. Support focused on maintaining safe, quality health services and their use by women, children and adolescents, despite the pandemic, for example:

- capacity building;
- awareness raising;
- provision of medical and protective equipment, water tanks;
- setting up isolation units.

PASSRELLE

Project to improve the sexual and reproductive health and rights of adolescent girls in Benin



2018 - 2022



9,9 M\$ CA

► Global Affairs
Canada



BENIN

Atlantique and Mono
provinces



Crédit: Enabel au Bénin

Additional \$1 million for the response to COVID-19

Since April 2020, PASSRELLE has been assisting the Ministry of Health to increase the resilience of the health system for a gender-responsive response to COVID-19, integrating the sexual and reproductive health needs of women and girls for nearly 1,600,000 direct beneficiaries.

- More than 2,000 awareness-raising sessions for the adoption of barrier measures and the prevention of COVID-19 have been organised;
- Nearly 800 community agents have been trained;
- 7 governance structures have received equipment and protective material for contact case finding, among others.

100 000 YOUNG WOMEN

between 15 and 19 years old will benefit from the project.



1,6 M PEOPLE



of which **804 254 women and girls** were reached by the Ministry of Health, supported by CCISD, as part of the response to COVID-19.

PARTNERS

- Ministry of Health of Benin
- BASP'96 - Public Health Support Office

OBJECTIVES

PASSRELLE aims to improve sexual and reproductive health (SRH) and respect for adolescent girls' rights through two strategies:

- Strengthen the supply of and demand for SRH services adapted to the needs of adolescent girls and focused on respect for their rights;
- Improving the coordination of SRH prevention and care activities with governance structures.

«We sincerely thank PASSRELLE for its support in providing inputs for the response to COVID-19, i.e. personal protective equipment for rapid intervention teams and care centres.»

Dr GOUNDOTE Aimé, Head of Public Health and Traditional Medicine Department, DDS Atlantic.

CLEFS

Local Education Communities for Healthy Women and Girls

A consortium project: CCISD (lead partner), Cégep de Saint-Jérôme and University of Sherbrooke.



2020 - 2025



21 M\$ CA

► Global Affairs
Canada



MALI

Bamako, Kayes,
Koulikoro, Ségou et
Sikasso



Assisting the coordination committees for the management of Covid-19

Mali has an adaptable national health system that can mobilise for a rapid response to epidemics. The CLEFS project has maintained close relations with the coordination bodies since their establishment in March 2020. Training activities in the University Community Health Centres (CSCoM-U) were supported to contribute to the following national outcomes:

- Ensuring a good understanding of the disease, symptoms and actions to be taken (what to do in case of potential cases);
- Mastering the appropriate hygiene protocol for CSCoM-U: hand washing, disinfection of equipment, wearing and removal of the procedure mask, physical distancing, etc.
- Ensure increased monitoring of gender-based violence and mental health issues in the context of the pandemic;
- Ensure early access to health care;
- Maintain essential preventive and health promotion activities.

500 000 PEOPLE

75 % are young women ages 15 to 19.



2 800 HEALTH PROFESSIONALS

50 % are women.



PARTNERS

- University community health centres
- Faculty of Medicine and Odontostomatology of the University of Bamako
- National Institute for Training in Health Sciences
- National Federation of Community Health Associations
- Association of private health schools in Mali and designated public schools
- Ministry of Health and Social Development
- Ministry of Higher Education and Scientific Research
- Ministry for the Promotion of Women, Children and the Family

OBJECTIVES

The project contributes to the improvement of primary health care and sexual and reproductive health and rights for women and girls in Mali. Building on the achievements of the Project to Support the Training of Health Professionals in Mali (DECLIC, 2010-2018), CLEFS proposes structuring actions, focusing on primary health care and the training of competent interdisciplinary teams to meet sexual and reproductive health needs.

For better prevention, detection and response to potential epidemics, *and for more resilient health systems!*

2020 - 2021 RESULTS

Health information management is a key function in ensuring the resilience and strength of a health system.

CCISD has developed a long track record of contributing to the strengthening of disease surveillance systems, through support for better health data management. Where it makes a difference is at the decentralised level (health district or equivalent). Continuous monitoring, good data management and analysis capacities, and timely communication are essential for the detection and better prevention of epidemics. In addition, it is important to foster and promote coordination with other key services: laboratories, and increasingly, animal health and environmental services (One Health approach). This coordination also helps to improve risk communication.

Our expertise includes :



COACHING AND TRAINING

- A robust, tailored, hands on intervention epidemiology training programme.
- On-site coaching, technical assistance and support to existing resources.
- Partnership with relevant national resources.



ASSISTANCE TO HEALTH SYSTEMS

- Improved district performance in surveillance of diseases with epidemic potential and in addressing specific needs.
- Capacity building to meet international obligations.
- Support to surveillance activities at decentralised levels.



THE DISAGGREGATION OF DATA

- Promoting the disaggregation of data by age and sex to health authorities to better address the needs of women and girls.



ADVISING THE CANADIAN EMBASSY IN SENEGAL

- Sharing the expertise of the CCISD team in Dakar to support the Canadian Embassy's Cooperation Programme in the planning, implementation, analysis and monitoring of programme activities in the response to the COVID-19 crisis in Senegal.



ASSISTANCE TO 5 COUNTRIES IN WEST AFRICA

- Continued support to REDISSE, in partnership with the West African Health Organisation (WAHO) and in synergy with Fondation Mérieux (new mandate in 5 countries).



TRAINING MANUAL ON INTERVENTION EPIDEMIOLOGY (FR/ANG)

- In-depth update of the training manual for health workers in West Africa under the REDISSE mandate. Applied Epidemiology and Biostatistics - Public Health - Gender and Epidemiology - Applied Research - One Health. **Applied Epidemiology and Biostatistics - Public Health - Genre et épidémiologie -**



ASSISTING THE HEALTH SYSTEM IN THE DRC

- Provide assistance to 6 general referral hospitals and 7 health zones to improve the transmission of data and the performance of surveillance activities;
- Assistance and training for staff responsible for health statistics.

REDISSE

A 2nd mandate to support the Regional Project for Strengthening Disease Surveillance Systems in West Africa



2020 - 2022



3 M\$ US

► World Bank (as WAHO technical partner)



WEST AFRICA

Benin, Mali, Mauritania, Niger, and Nigeria



Supporting epidemiological surveillance in the midst of the COVID-19 epidemic

Even though the pandemic delayed the start of the project, regular monitoring and evaluation allowed us to adjust our planning to reality. Thanks to constant dialogue with Fondation Mérieux and WAHO, we were able to:

- Complete a thorough update of the training tools (in French and English), through an iterative process and with the participation of the technical team.
- Ensure the commitment of the national authorities of the 5 countries covered, through the participation in joint introductory missions (WAHO-CCISD-FMx), with pre-selection of the districts to be supported and designation of the trainers involved;
- Carry out an inventory in 53+ health districts;
- Train 11 instructors from the 5 countries concerned.

180 HEALTH AGENTS

in charge of epidemiological surveillance and their substitutes



11 INSTRUCTORS

from the 5 countries concerned



PARTNERS

- Fondation Mérieux (FMx)
- Nigeria Centre for Disease Control (NCDC)

OBJECTIVES

- To contribute to the strengthening of surveillance systems in 60 health districts (or equivalents) in the countries covered, in close collaboration with the relevant national authorities;
- Assist countries in strengthening prevention, detection and response capacities in line with their commitments under the International Health Regulations (IHR), in a manner consistent with Integrated Disease Surveillance and Response (IDSR) and taking into account the One Health approach.

MULTISECTORIAL APPROACHES



PROMAVI

Multisectoral programme to improve living conditions in rural Bolivia

A consortium project with SOCODEVI (lead partner).



2016 - 2022



11,4 M\$ CA

- ▶ 11 M\$ Global Affairs Canada
- ▶ 0,4 M\$ Socodevi and municipalities



BOLIVIA

▶ Chuquisaca



10 000 PEOPLE

women, men, adolescents and children in rural areas, including :



Over 2000 families



Health personnel



Community leaders



Municipal officials

PARTNERS

- ▶ The municipal autonomous governments of 14 municipalities in the department of Chuquisaca.
- ▶ Associative organisations.
- ▶ Departmental Health Service, Chuquisaca (SEDES-CH).
- ▶ Municipal health networks.
- ▶ Networks of municipalities.

OBJECTIVES

This initiative will contribute to the improvement of the living conditions of women, men and children from rural families living in vulnerable conditions in the department of Chuquisaca. Through a multisectoral approach, PROMAVI combines :

- ▶ Capacity building for family farmers and the development of a new agricultural sector supported by a social enterprise;
- ▶ Supporting communities and municipal governments to improve their capacity to promote health and economic development, and to respond to the needs of the population, particularly women and girls;
- ▶ Promoting women's empowerment.

4000 families reached in the COVID-19 response

PROMAVI reached 4000 families through its collaboration with municipalities and its assistance in the implementation of municipal contingency plans:

- 4 municipal health networks were assisted in the organisation/reorganisation of resources, development of prevention strategies, monitoring and management of COVID-19.
- 6 Municipal Emergency Committees have been strengthened in managing the COVID-19 pandemic.
- 58 health staff have been trained on COVID-19 related topics.
- 4,000 families received family baskets, personal hygiene kits and seeds for home gardens (food security).
- 67,000 rural families were reached through communication and awareness campaigns for the prevention of violence

PLURIELLES

A Comprehensive Package of Sexual and Reproductive Health and Rights Services for Women

Project consortium: CCISD (lead partner),
Lawyers Without Borders Canada and SOCODEVI

**NEW PROJECT
(2021 - 2027)**



2021 - 2027



46,5 M\$ CA

- Global Affairs Canada: 42,3 M\$
- One Drop: 4,2 M\$



MALI

Kayes



BENIN

Mono



BURKINA FASO

Cascades

A multi-sectoral approach rooted in the consortium's specific expertise in:

- HEALTH
- ECONOMIC JUSTICE
- HUMAN RIGHTS

The innovative nature of the initiative lies in the synergy between the expertise of three organisations specialised in their respective fields: health, economic development and the realisation of human rights through access to justice. This complementary expertise will allow us to act on multiple factors limiting health-related human rights and thus have a more significant and lasting impact on the lives of women and girls. The consortium will promote a fully assertive multi-sectoral approach, while working simultaneously and closely with communities, civil society and the state, in both rural and urban areas.

2 000 000 WOMEN AND GIRLS

in vulnerable situations will benefit from the project.



PARTNERS

- ROPS-BENIN-Inter (Benin)
- Association Munyu and Voix des femmes (Burkina Faso)
- ASPROFER, ASACOs and Committees of users of community health services (Mali)
- WILDAF, a pan-African FAD advocacy network present in all three countries
- Civic Academy for Africa's Future and the Association of Women Lawyers (Benin)
- The Centre for Legal Training and Information (Burkina Faso)
- Association des juristes maliennes and Association pour le développement des droits des femmes (Mali)

OBJECTIVES

This initiative aims to improve sexual and reproductive health and rights for vulnerable and marginalised women and girls in Benin, Burkina Faso and Mali.

- Address the economic, socio-cultural and gender barriers that accentuate, perpetuate and legitimise the lack of access to health services;
- Better structure SRHR services around the needs and rights of vulnerable and marginalised women and girls;
- Strengthen their capacity to act in order to participate in the promotion of a normative framework that protects their fundamental health rights.

At CCISD, every team member counts.

No matter where our teams are, we combine our strength and expertise for the sustainable health of communities around the world.

PROJECT TEAMS

**PRISMA 2
HAITI**

**ASSK
RDC**

**REDISSE
NIGERIA
SENEGAL**

**PASSRELLE
BENIN**

**CLEFS
MALI**

22002201

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Component 2 Coordinator

Dr Jeffson Bercy
Component 3 Coordinator

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Professional Resource

Dr Raymond Décimus
Professional Resource

Lise Geffrard Sylvestre
Professional Resource

Evans Cetout
WASH Infrastructure Engineer

Inodyl Fils Pierre
Social Art for Behaviour Change
(SABC) Coordinator

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Gender Equality and Human
Rights Advisor

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Johanne Petit-Frère
Logistician and Secretary

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Maintenance Worker

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Marc Narly Jean Claude
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Head of Governance

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Mabus
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Community Participation and
Communication for Behaviour
Change Coordinator

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Rights Advisor

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Advisor on Sexual and
Reproductive Health and Rights

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Administrative Assistant and
Accountant

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Rights Officer

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Manager

Adama Mélanie N'Diaye
Philanthropic Development
Manager

Caroline Gosselin
Administrative Manager

Simon Bélanger
Administrative Manager

Maryse Lorrain
Administrative Assistant

Gladys Ojeda I.
Executive Assistant

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- Port-au-Prince

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Adama Mélanie N'Diaye



Michel Dubois



Alexandrine Nasse



Kathy Paré



Patrice Ngangué

2020-2021

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Administrator



**Pascale Cholette,
médecin de famille**
Administrator

Thank you for your commitment,
you will be missed.

Welcome to our new members!
The adventure has just begun.



**Geneviève
Larouche,
pharmacist**
Administrator



**Sylvianne Forget,
M.D., MSC, FRCPC**
Vice President and
Treasurer (2016-
2021)



Denis Savard
Administrator
(2016 - 2020)



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ASC, C.DIR.,**
Membre of the
Audit committee
03/2021



**Serge A. Kablan,
LL.D.**
Administrator since
03/2021

THUMBS UP TO OUR LOYAL PARTNERS!



IMPLEMENTING PARTNERS

> Africa

Benin

- National Primary Health Care Agency (ANSSP)
- Public Health Support Office (BASP'96)
- National Council for the Fight against HIV/AIDS, Tuberculosis, Malaria, Hepatitis, Sexually Transmitted Infections and Epidemics (CNLS-TP)
- Ministry of Health

Democratic Republic of Congo

- Provincial Ministry of Public Health of Kinshasa and its decentralised bodies
- The Provincial Health Inspectorate of Kinshasa
- The educational provinces of Funa, Tshangu and Plateau
- National adolescent health programme
- Rotary Club for Development / Kinshasa

> Latin America and the Caribbean

Bolivia

- Ministry of Health and Departmental Health Service (SEDES) of the Department of Chuquisaca, through the consortium with SOCODEVI (PROMAVI)

Haiti

- Ministry of Public Health and Population (Centralized level and Artibonite health department) of Haiti
- Ministry for the Status of Women and Women's Rights of Haiti (MCFDF)

Mali

- University Community Health Centres (CCom-U) of Banconi, Ségué, Koniakary, Konobougou and Sanoubougou 2
- Faculty of Medicine and Odontostomatology of the University of Technical Sciences and Technologies of Bamako
- Ministry of Health and Social Development
- National Federation of Community Health Associations (FENASCOM)
- National Institute for Training in Health Sciences (INFSS)
- Ministry of Higher Education and Scientific Research (MESRS)
- Ministry for the Promotion of Women, Children and the Family of Mali

Others

- Nigeria Centre for Disease Control (NCDC)
- Agence Nationale de Sécurité Sanitaire (ANSS) of the Republic of Guinea Conakry

> Canada and international

- Cégep de Saint-Jérôme
- Faculty of Medicine and Health Sciences (FMSS) of the Université de Sherbrooke
- Fondation Mérieux
- CARE Canada
- Mission-Inclusion (L'Œuvre Léger)
- Société de coopération pour le développement international (SOCODEVI)
- Unité de santé internationale du Centre hospitalier de l'Université de Montréal (CHUM/USI)
- Lawyers Without Borders Canada

NETWORKS AND ALLIES

- National Steering Committee for Results-Based Financing (RBF) in Health, Haiti
- Cooperation Canada
- Fédération des médecins omnipraticiens du Québec (FMOQ)
- Fédération des médecins spécialistes du Québec (FMSQ)
- Canadian Partnership for Women's and Children's Health (CanSFE)
- Pharmacists Without Borders
- Secrétariat international des infirmières et infirmiers de l'espace francophone (SIDIEF)
- Canadian Society for International Health (CSIH)
- Health Sector Table and HTA Sector Table, Haiti
- EHA Sector Table facilitated by WHO (through BECEYA), Mali
- Laval University

TECHNICAL AND FINANCIAL SUPPORT

- Global Affairs Canada (GAC)
- World Bank
- One Drop Foundation
- West African Health Organization (WAHO)

A COMPLETE MAKEOVER!

After 35 years of activity, CCISD is getting a makeover. Here are the key aspects of this transformation, which will be launched in the coming months.

A new look to reach new audiences

Our ecosystem has changed a lot in 35 years. While analyzing the new challenges, three elements stand out:

- Despite an excellent reputation in the countries where we operate, we are relatively unknown in Quebec and Canada.
- Our current identity is difficult to retain and makes it difficult to acquire new audiences.
- A new name and a new image are a necessary first step in expanding our notoriety.

Getting closer to our community

The COVID-19 pandemic was a painful reminder that no one is safe until everyone is. We recognise that we have an important role to play in addressing global inequalities, starting with public education in our own community to increase solidarity with vulnerable communities around the world.



More than a cosmetic change : a strategic transformation

We took the time to review not only the exterior package of the CCISD, but also to do some real soul-searching. Here are the biggest changes to date.

✓ Revisiting our mission, vision and values

After a consultative process that lasted several months, we have clarified our mission, vision and values that define us and are reflected in our work. You can find the result on our website.

✓ A new Innovation and Expertise department

A new department was created in June 2021 to coordinate the efforts of our projects in relation to gender equality and human rights, sustainable development and monitoring/evaluation and learning, three cross-cutting issues that are taken into account in all our projects. We can't wait to see what they have in stock for us!

New tools for online fundraising

Through our Facebook, LinkedIn, Twitter and YouTube pages, it is now easier to follow our activities and get in touch with us.

Don't forget to follow us!



Facebook



LinkedIn



Twitter



Youtube

You are sympathetic to our mission and wish to participate in our actions?

*Here are 3 ways to **get involved**:*

1

Become a philanthropist

Do you work in health, education or business development? Put your network to work to further our mission. As a philanthropist, you will be spreading Quebec's generosity and excellence around the world!

2

Sponsor a project

Specially designed for group initiatives, sponsorship allows you to fund a specific project with family, friends or colleagues. This solution allows you to see the positive impact of your generosity with regular reports from the field.

3

Partner with us

Do you represent a foundation, a business or a non-profit organisation? Our team is actively looking for sustainable partnerships in order to pursue our objectives, in line with our values.

Contact us :
ccisd@ccisd.org



New Website coming soon!

In September 2021, we will unveil our highly anticipated website. It will feature CCISD's new look and be easier to navigate than our current one. The redesign of our brand identity and the website are the foundations of our new, sustainable and secure fundraising strategy. These tools will enable the development of online campaigns to support our mission, everywhere we work.



Donate

- ✓ Safely
- ✓ Quickly
- ✓ From the heart



With Canadon's secure platform integrated into our website, you can send your donations in a few clicks to the communities that need them most. Choose between a one-time donation or a monthly donation which allows us to plan for the longer term.

Visit www.ccisd.org - Launching soon!

COORDINATION AND GRAPHIC DESIGN : Sandrine Muir-Bouchard

REDACTION : Sandrine Muir-Bouchard, Ericka Moerkerken, Sophie Bourdon, Robert Beaudry, Diane Morin, Adama Mélanie N'Diaye

With contributions from : Aïssatou Tinka Bah, Alfred Nikiéma, Camille Schoemaker Marcotte, Geneviève Blouin, Maguil Gouja, Maman Bachir Maman, Sergio Solano, Pierre Champagne

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PHOTOGRAPHS : Carole-Anne Cormier, Émilie Drolet, Mathieu Laprise, Mission Inclusion, Enabel au Bénin, SOCODEVI.



Don't miss anything,
subscribe to the newsletter!



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