



*Empowering Women and Girls:
Growing Healthy Food,
Growing Healthy Children*

A PROJECT FUNDED BY



**TOGETHER
WOMEN RISE**

Collective action for global gender equality

Progress Report (January to May 2023)
Self-Help International – Ghana
RISE Grant

1. Please provide the following information:

a. Organization Name: Self-Help International

b. Project Title: Empowering Women & Girls: Growing Healthy Food, Growing Healthy Children

c. Grant Amount: \$49,537.47

d. Contact Person:

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2. Recap briefly what outcomes the project was designed to achieve.

The Empowering Women and Girls: Growing Healthy Food, Growing Healthy Children project was designed as an integrated community-wide intervention to increase food availability, add to the social status and empowerment of women involved, and lead to healthier child development (Marquis et al., 2018).

The intervention improves nutrition outcomes for newborn babies within the first thousand (1,000) days by addressing the economic, agricultural and dietary diversity challenges of their mothers, caregivers and families, having a direct impact on 342 clients in three rural communities in the Ashanti Region of Ghana. The anticipated direct impact groups are made up of:

- 179 mothers/surrogate caregivers living in extreme poverty, between the ages of 15 and 45
- 163 children between newborn to two years old

Economic and agricultural interventions such as skills training and access to the resources to put those skills into action, delivered alongside regular nutrition education and fortification of the most at risk families' diets with supplements, result in fewer babies being underweight and increased adoption of exclusive breastfeeding in new mothers in the first 6 months of their child's life. Key outcomes include:

- **Increased income for women:** Through microcredit programming targeted at expectant and new mothers, women have the opportunity to pursue business opportunities that are of interest to them and will help to secure the financial well-being of their family.
- **Healthier children:** The integrated nature of this specific project ensures direct nutritional health benefits to pregnant and lactating mothers and their children.
- **Better nourished families:** cultivation of household gardens and best-practice agronomic techniques in production of staple and market crops such as maize and cassava will ensure that families have access to reliable income sources and to diverse sources of nutritious food for their families.

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3. Has funding changed for this project? For example, have you received unexpected funding from another source?

Together Women Rise provided the majority support (~78%) to implement this project, as proposed in the original grant application. SHI secured the balance of the funding from another foundation as projected.

SHI has learned from prior experience that families are most likely to achieve long-term food security when the interventions focus *first* on increasing long-term food security by supporting farm families to increase yields and supporting women entrepreneurs to increase family income, and *then* on short-term nutrition needs. While this approach may seem counterintuitive, we've found that addressing short-term needs first by leading with food supplements makes longer-term interventions that are slower to yield results - but more sustainable - more challenging. [Note: this methodology does not preclude emergency interventions for cases of severe acute malnutrition malnutrition.] Thus, while funding for this project was received in September 2022, due to the timing of the agricultural cycle, the RISE-funded portion of this project commenced in January 2023.

Inflation has been a serious challenge in Ghana throughout 2022 and into 2023. From the time the project application was submitted (January 2022), to the time the project implementation commenced (January 2023), year-on-year inflation in Ghana exceeded 50%. This has a significant impact on the budget in Ghana Cedi (GHS): inflation is driving prices up, and thus roughly 50% more cedis are required to carry out the same activities proposed in the original budget and funded by this grant.

Fluctuations in the USD exchange rate have mitigated these challenges to an extent. The budget submitted in January 2022 projected an exchange rate of \$1 USD: GHS 6. At the time the funds were received, in September 2022, the exchange rate was \$1 USD: GHS 9.1. Timing the market is difficult. Our organization's policy is to hold funds in USD and convert them to GHS as needed, typically monthly. Exchange rates have fluctuated from 11.2 GHS:\$1 USD to 9.0 GHS:\$1 USD since January 2023.

The grant of \$49,537.47 USD is estimated to buy roughly 450,800 GHS. To date, GHS 251,581.07 has been spent. Thus, roughly 50 - 55% of the grant funds have been spent from January - May 2023. Though the actual expenses in GHS are significantly higher than budgeted, the exchange rate also allows the grant to buy more local currency than initially projected to offset the increased costs.

Overall, management anticipates that sufficient funds are available to achieve the stated goals of the project. A revised budget with prices adjusted for inflation and exchange rates adjusted to FY 23 is available upon request. Fluctuations in both market prices and exchange rates have required vigilant monitoring by management. The [May 2023 IMF Extended Credit Facility Arrangement for Ghana](#) is anticipated to bring more economic stability to the country and the currency.

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4. Is your organization or project situation different than presented in the approved proposal? For example, a new executive director, significant project staffing changes or NGO affiliation, loss of large funding, or other significant changes?

Our organization is in an even stronger position today to achieve our mission in Ghana than at the time of our application. The Ghana Programs Manager role (previously held by Jessica Crawford and based in Iowa) has been modified and the responsibilities have been transferred to a staff member based in Ghana. The position is now called Program Coordinator for Design, Strategy and Evaluation and has been occupied by Peter Canicius Kuusaana since November 2022. Bernice Agyekwena also joined the Ghana team as Communications Manager in October 2022. These changes reflect SHI's intentional emphasis on strengthening the local leadership in Ghana, expanding services to deliver urgent program needs of our clients, centering communications as closely to clients as possible, and providing efficient funding outcomes to our funders and other stakeholders.

5. Have the number of beneficiaries changed? To report this please refer to the original numbers in your grant proposal under Number of women and girls/children Directly Impacted and population Indirectly Impacted.

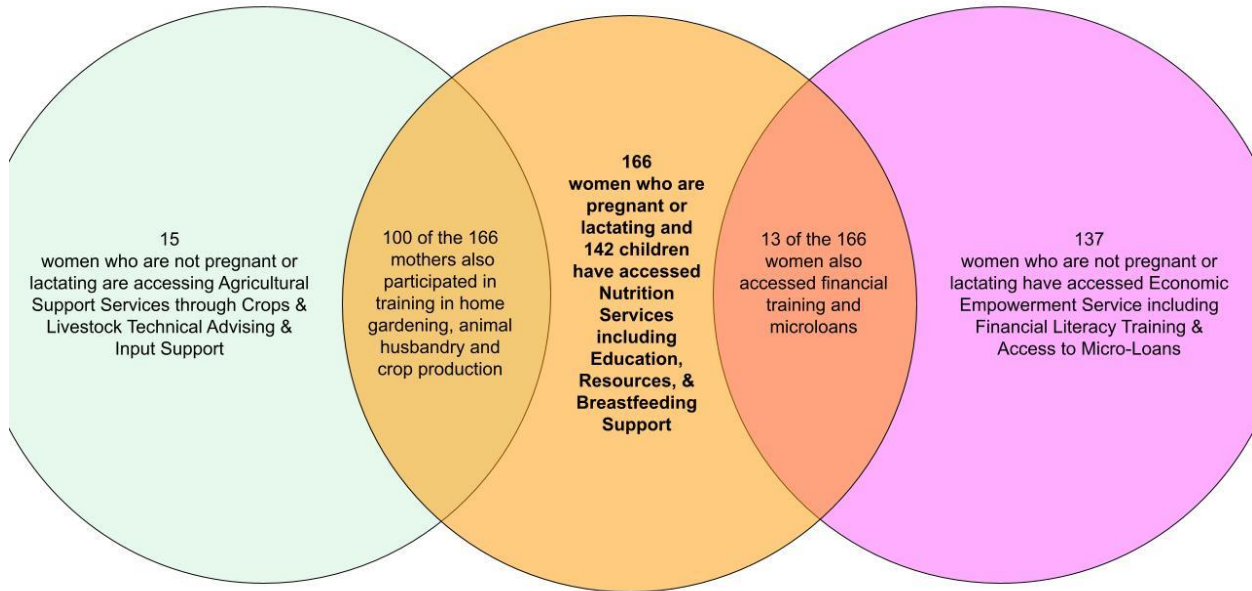
At the time this grant funding started, Self-Help International was operating the Growing Healthy Food, Growing Healthy Children project in two communities in the Atwima Mponua District in the Ashanti Region (Beposo and Kukubuso), and this funding allowed us to continue serving those communities while expanding the service area to a third community, namely Fankamawe.

We originally projected that by expanding to one additional community, the GHFGHC project would directly impact 342 individuals, progressively equipping 179 mothers of 92 baby girls and 71 baby boys with knowledge and resources to achieve a healthier and equitable future for themselves and their families.

As of May 2023, the project is directly serving 318 women and 142 infants under the age of two across three communities. Of those, 166 women were either pregnant or the primary caregiver to a child under the age of two years old (typically the birth mother, but occasionally a grandmother or other relative, particularly in the cases of teenage deliveries), which represents 92% of the annual target for mothers, and 87% of the target for children less than 2 years old. About 10 clients (5 children and their caregivers) have graduated from the program.

As depicted in the graphic below, one hundred and sixty-six mothers (136 caregivers and 30 pregnant women) are accessing nutrition services, 137 women are accessing microcredit services, 15 are accessing agricultural services. Within the intersections of these service categories, there are 100 women who are also accessing both agriculture and nutrition services and 13 women who are accessing both microcredit and nutrition services. Also included in this beneficiary list are 142 babies comprising 132 currently on the project and 10 who have reached the age of two years old and graduated from the project with their caregivers.

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There are two rainy seasons/growing seasons in Ashanti Region, and thus we anticipate the number of women accessing agricultural services to continue to increase. Fathers/men from the communities accessing agricultural services are not included in the data above. Likewise, new pregnancies and new deliveries result in new mother and child enrollees in this intervention monthly, thus the figures are anticipated to continue to increase through the course of the year. While business is conducted year-round, the micro-credit program trains all clients in basic financial management training before they are given loans. The figures above reflect women presently accessing *both* financial training and loans, and do not include women who are receiving training in preparation to accessing loans. Thus we anticipate the number of women accessing financial services to increase as well.

6. What challenges are you facing as you move forward with this project? How are you approaching these challenges?

Most of our clients in the nutrition program are from migrant farmer households, and have settled in the Ashanti Region seeking a better life. As a result, some mothers and children intermittently move in and out of the communities where this project is active, which can inhibit the effectiveness of interventions. There is the tendency for some of the babies to retrogress in their nutritional outcomes during periods when their mothers/caregivers migrate. To mitigate the negative impact of migration on child health, SHI has been partnering with community health nurses from the Ghana Health Service (GHS) and ensuring that clients are using the approved GHS client cards which they can present at any approved care facility when they migrate. This will guarantee them quality maternal and child health care when they are not within the reach of our program interventions.

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7. Have you revised your original objectives since the project began? If so, why? What are your new objectives?

The original objectives of the project have not changed. Programmed activities implemented so far indicate that the original objectives are realistic and attainable within the programming needs of our clients. The beneficiaries are progressively receiving targeted services in the following areas:

- **Nutrition support services to pregnant and lactating mothers and their children:** The project continues to foster direct and positive nutritional health benefits to pregnant and lactating mothers and their children, through targeted training and the supply of emergency nutritional items and counseling services.
- **Economic empowerment for women who are excluded from accessing traditional financial services:** Our programming efforts continue to focus on improving the livelihood resilience of our clients through micro-credits and agricultural extension services. The project is directly targeting all mothers and caregivers in our nutrition program with financial literacy and inclusion services to ensure the sustainability of the gains made. We are putting in extra efforts to make sure that the majority of mothers and caregivers in our nutrition program exit with sustainable and resilient sources of sustenance in businesses and agriculture/food production.
- **Improved food security:** One hundred mothers participated in home vegetable production technical training so far this year to improve household food security, nutrition, and dietary diversity. The microcredit and agricultural programs are moving ahead of the curve by not only targeting our nutrition clients but also identifying vulnerable women in our project communities and advancing them training, loans and agricultural production advice/inputs to invest and shield their families against any future threats to their livelihoods. A total of 152 women who are not currently pregnant or raising an infant under the age of two years old have participated in microcredit and agricultural programs.

8. What progress have you made toward achieving your objectives? Please address each stated objective.

Directly impact 342 persons and equip 271 women and girls out of this target with knowledge and resources to achieve a healthier and equitable future for themselves and their families.

As of June 2023, the project is directly impacting 460 individuals, comprised of and equipping 402 women and girls out of this target with knowledge and resources to achieve a healthier and equitable future for themselves and their families, exceeding targets by more than 35%.

Target directly, 200 mothers from 2 active communities and 100 mothers from 1 new community.

Of the 318 women working with SHI from the three communities, 166 women were either pregnant or the primary caregiver to a child under the age of two years old (typically the birth mother, but occasionally a grandmother or other relative, particularly in the cases of teenage deliveries), which represents 92% of the annual target for mothers.

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	Projected	Actual as of May 2023			
	Total	Total	Beposo	Kukubuso	Fankamawe
Women	179	166	66	86	14
Baby girls	92	84	35	49	0
Baby boys	71	48	21	27	0
Total	342	381	122	162	0

The overall number of clients served on track with consistent with initial projections. The distribution among the three communities varies from projections: the number of women/lactating mothers is greater than projected in Kukubuso and Beposo, and fewer than projected in Fankamawe. There are two primary factors:

1. Pregnant and lactating women from surrounding communities walk great distances to participate in the nutrition programs in Kukubuso and Beposo, thus the program serves women in the wider catchment area, not only immediate residents of the village and the population served is greater than what one would expect based on the community population alone
2. At the time that the original proposal was submitted, we anticipated expanding the interventions to a third community with a population similar to that of Beposo and Kukubuso. We've found that the most important indicator of program success is strong community leadership. Based on feedback from program officers who work in a number of communities and have established relationships with community leaders based on trust and mutual commitment, we determined that this intervention was most likely to achieve the desired outcomes in Fankamawe, which is a smaller community, and thus has a smaller potential population of pregnant women. We anticipate that, as we saw in Beposo and Kukubuso, as people experience and witness the impact, pregnant mothers in surrounding hamlets will begin coming to Fankamawe to enroll as well.

Hundred percent (100%) of the children born into the project are above the 15th percentile for weight-for-age at 24 months

Initial data indicate that this metric is on track. So far this year, 10 infants graduated when they met the criteria of achieving the age of two years old and having a weight-for-age in excess of the 15th percentile.

Hundred percent (100%) of women who are able, exclusively breastfed their child their first 6 months

Out of the 132 children enrolled, 17 are within the 0 to 5 months' category. The decision to adopt exclusive breastfeeding on the program is a voluntary decision of the mothers of these children. The project creates the enabling environment for these mothers to safely practice exclusive breastfeeding by providing them with nutrition counseling, training in the preparation of healthy baby weaning foods and the services of community based lactation coaches. Sixteen (16) clients representing 94.12% of the total have opted to exclusively breastfeed their children. These women are being followed regularly, incentivized and

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assessed to ensure their children draw on the nutritional benefits of the first 6 months of their lactation. One mother has opted out of the exclusive breastfeeding program due to insufficient breast milk production. She is being supported with nutrition supplements and the services of community based lactation coaches to attain normal lactation.

Eighty (80%) of women increased their Dietary Diversity Score by graduation

A survey on the dietary diversity of women on the project has been conducted to serve as a baseline against which an exit survey would be conducted when they are graduating from the program. While the nutrition program is intensifying its nutrition education with the clients, the micro-credit and agricultural programs are implementing complementary services to help these clients improve upon their income and food production to address and improve their dietary diversity and that of their families.

Fifty percent (50%) of participants started home gardens or expanded crops they are growing.

Agriculture-related activities commenced towards the end of April 2023 with the onset of the rains and the major growing season in our target communities. One hundred (100) out of the 166 mothers in the nutrition program participated in training in home gardening, animal husbandry and crop production. Fifteen (15) women in the target communities who are not pregnant or lactating were also given cockerels to raise at the family level to increase animal source protein availability at the household and community levels.

Fifty percent (50%) of women have an independent income source.

165 women have directly accessed resources from SHI to establish their own independent income sources so far this year. This includes 150 women who have accessed micro-loans for investment in various business ventures, and 15 women have received cockerels (poultry) to raise for income and nutrition. This is a significant outcome because these are women from our target communities who are putting measures in place to be able to handle their own financial responsibilities in the future.

Clients in the nutrition program are receiving training in financial literacy and empowerment from the microcredit team to ensure they build the necessary competencies and venture into businesses that would improve their financial and livelihood security after graduation. It's common for women already engaged in entrepreneurial ventures to take breaks from their businesses for some portion of their pregnancies and immediately following delivery and thus to defer accessing loans. The micro-credit training program helps set women up for success so that those who wish to start or expand their own business are able to access the needed credit when the women themselves are ready to do so. More clients are being screened for engagement by the micro-credit program at the end of June 2023. The agricultural program has also procured about 400 day-old chicks to be groomed and delivered to more clients by the close of July 2023.

9. Do you anticipate any difficulties in completing your project in the timeframe outlined in your proposal?

The implementation trajectory of the project has so far not pointed to any significant changes that would affect the duration of the project.

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Within the report also include:

Several high-resolution JPG photographs of the project depicting the women/girls who have benefited from the grant funds should be posted to your assigned Dropbox. Photos should be submitted with the right to use in all forms and media in Together Women Rise documents and website. Include confirmation of grantee's right and consent to use photos/videos as per local law.

A compilation of JPG photographs of some of the engagements have been made available by the communications team of the project at this [link](#).

Any message you would like us to convey to our membership and donors about the impact our grant is having on those being served and/or your organization and its mission.

We've focused a lot on outcome metrics in this report, but day to day, we are working with people who are much more than statistics. We're working with mothers who want what's best for their children, who are struggling to be able to access and provide for those needs, and who are seizing opportunities to change their circumstances by participating in this project.

The RISE funding is supporting women and infants during one year of their journeys, but many were active in this project prior to January 2023 and will continue beyond December 2023. Memuna and her daughter recently graduated from the Growing Healthy Food, Growing Healthy Children program, which they participated in throughout the first two years of Yaa's life. Their family's journey is exemplary of the life changing impact that this funding is creating for women in Beposo, Kukubuso, and Fankamawe.

The following information was prepared by SHI Communications Officer Bernice Agyekwena, who obtained informed consent directly from Memuna prior to sharing.

Memuna, a 38-year-old resident of Beposo, was in the third trimester of her fifth pregnancy when she was introduced by a friend to Self-Help International's Growing Healthy Food Growing Healthy Children (GHFGHC) Program in late 2020.

At the time, Memuna was experiencing anemia. In order to help her rectify this issue and better prepare her to experience a safe delivery, SHI's nutritionists counseled Memuna about how she could boost her hemoglobin levels by consuming iron rich vegetables, and also advised her on other nutrient dense food crops.

In a bid to help pregnant and lactating women cultivate and consume a variety of nutritious vegetable crops to boost their immune system as well as that of their babies, SHI's agricultural team gave Memuna vegetable seeds including *ayoyo*, a leafy green often used in soups and stews, as well as cabbage, carrot, pepper, tomatoes, and aubergine (eggplant) seeds to cultivate to give her ready access to nutritious food.

Memuna reported, "I planted all these seeds on my farm and this really helped my family because we were able to consume vegetables at home."

Following her introduction to a healthier diet, Memuna's hemoglobin levels improved and she was able to bring her pregnancy to term and delivered her daughter Yaa in December 2020.

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But right after delivery, Yaa exhibited a yellowish coloration.

“The doctor informed me that she had jaundice,” Memuna explained. “We were later on discharged from the hospital when her condition was much better.”

But Yaa’s health challenges did not end there.

“I discovered that my daughter had Down's Syndrome, and my husband abandoned me and our five children. Life was very hard for us,” Memuna recalls.

“I had a few friends reaching out to help me and the nutrition officers from Self-Help helped a lot by giving me supplements. These included Ready to Use Therapeutic Food (RUTF), koko plus, eggs and tom brown.”

Thus, with the support of the GHFGHC Program, Memuna was able to provide nutritious meals for her daughter, and Yaa’s health status began to improve.

“At first, I was afraid I would lose my daughter. But with the help of my landlord who gave me a piece of land to cultivate, and support from SHI, it has been possible to put food on the table,” she said.

“In spite of suffering from Down’s syndrome, Yaa is very active and I am able to leave her with her older siblings to work on my farm.”

Memuna expressed gratitude to the GHFGHC program for their support and the role they played in the upbringing of her daughter Yaa, saying, “I want to say a big thank you to the sponsors of the program and the nutrition officers of GHFGHC for supporting me thus far.”

On behalf of Self-Help International and our partner communities, thank you for investing in families like Memuna’s. Your gifts give hope, and practical tools that create opportunities for mothers to better support their families, and for children to reach their biological potential.

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Detailed list of all expenses incurred during the reporting period which have been paid for with the Together Women Rise grant.

Expenses incurred from 1 January to 27 June 2023 represent 49% of the total grant amount as follows:

	Total (GHS)		Total (USD)	
	GHS	495,374.70	\$	49,537.47
RISE Grant Amount				
Expenditures				
2401 Salaries				
2401.01 Salary Expenses		123,257.12		12,325.71
Total 2401 Salaries	GHS	123,257.12	\$	12,325.71
2404 Support staff				
2501 Fuel & Lubricants		5,010.71		501.07
2502 Repairs & Maintenance		1,824.93		182.49
2503 Insurance/Registration		6,129.31		612.93
2504 Travel & Subsistence		600.00		60.00
2701 Office Equipment Repairs		700.00		70.00
2702 Utilities		900.00		90.00
2703 Supplies		1,640.00		164.00
2705 Registration & Licensing		160.00		16.00
2706 Office Equipment Replacement		1,056.00		105.60
2707 Communication		516.00		51.60
2801 Micro Finance				
2801.03 Training incentives MF		0.00		0.00
Total 2801 Micro Finance	GHS	0.00	\$	-
2803 Growing Healthy Food Growing Healthy Children				
2803.01 Training personnel		0.00		0.00
2803.02 Training materials GHF		3,728.00		372.80
2803.03 Training incentives GHF		3,530.00		353.00
2803.04 Stakeholder support GHF		100.00		10.00
2803.05 Communication GHF		1,300.00		130.00
2803.08 Food supplement		90,783.00		9,078.30
Total 2803 Growing Healthy Food Growing Healthy Children	GHS	99,441.00	\$	9,944.10
2805 Agricultural Extensions Services				
2805.02 Training materials		0.00		0.00
2805.03 Training incentives		0.00		0.00
2805.09 Extension Agro inputs		0.00		0.00
2805.11 Training center poultry		10,346.00		1,034.60
Total 2805 Agricultural Extensions Services	GHS	10,346.00	\$	1,034.60
Total Expenditures	GHS	251,581.07	\$	25,158.11
Balance	GHS	243,793.63	\$	24,379.36