mothers2mothers
QUARTERLY IMPACT REPORT
1 January 2023 - 31 March 2023

Released: September 2023
Three Key Takeaways From This Quarter

1. **Our 2022-2026 Strategic Plan is coming to life.** In 2022, we shared that we were planning to use our proven, peer-led model to broaden the range of health conditions we tackle, diversify the client groups we serve, and dial up our health system strengthening services, to ensure that health for all brings opportunity for all. This quarter, we have demonstrated that our plan is moving from intention to reality, with new integrated maternal health projects launched, an increased focus on all family members, and multiple technical assistance collaborations with governments.

2. **Global financial headwinds are having an impact.** This quarter, economies around the world continued to struggle with high inflation and low growth. Government and corporate funders are reducing award sizes or taking longer to make grants, and so we are slightly behind our revenue target.

3. **Our adolescent-focused work continues to thrive.** At the end of the first quarter, we have achieved 91% of our total annual reach target for those aged 10-19. This provides strong evidence that we successfully adapted our peer-led model to meet the unique needs of this group.

### The Big Picture (as of 31 March 2023)

<table>
<thead>
<tr>
<th>Number of New Clients Reached (Direct Service Delivery) Q1 2023</th>
<th>Q4 2022</th>
<th>Q1 2023</th>
<th>2023</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>m2m</td>
<td>m2m</td>
<td>Annual</td>
</tr>
<tr>
<td>Children (0-2)</td>
<td>16 889</td>
<td>19 437</td>
<td>70 729</td>
</tr>
<tr>
<td>Children (3-9)</td>
<td>4 226</td>
<td>12 115</td>
<td>28 419</td>
</tr>
<tr>
<td>Adolescents (10-19)</td>
<td>24 350</td>
<td>59 238</td>
<td>60 457</td>
</tr>
<tr>
<td>Young Adults (20-24)</td>
<td>25 725</td>
<td>21 659</td>
<td>77 203</td>
</tr>
<tr>
<td>Adults (25+)</td>
<td>46 824</td>
<td>69 140</td>
<td>204 264</td>
</tr>
<tr>
<td>TOTAL</td>
<td>118 014</td>
<td>181 589</td>
<td>441 073</td>
</tr>
</tbody>
</table>

### Our In-Person Service Reach in Quarter 1: A Closer Look

<table>
<thead>
<tr>
<th>Adolescents and Adults (disaggregated by HIV status) Newly Enrolled</th>
<th>Our Reach previous Quarter***</th>
<th>Our Reach this Quarter***</th>
<th>Annual Target</th>
<th>Cumulative Reach (Year To Date)</th>
<th>% Target Reached*** (Preliminary)</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV-positive 10+</td>
<td>26 469</td>
<td>34 613</td>
<td>145 230</td>
<td>34 613</td>
<td>24%</td>
</tr>
<tr>
<td>HIV-negative 10+</td>
<td>57 589</td>
<td>83 218</td>
<td>162 464</td>
<td>83 218</td>
<td>51%</td>
</tr>
<tr>
<td>Unknown Status at enrolment / status not documented 10+</td>
<td>15 351</td>
<td>35 181</td>
<td>34 697</td>
<td>35 181</td>
<td>101%</td>
</tr>
<tr>
<td>Subset of total: Clients 10+ reached by HIV status</td>
<td>99 409</td>
<td>153 012</td>
<td>342 391</td>
<td>153 012</td>
<td>45%</td>
</tr>
<tr>
<td>Children Ages 9 and Under (disaggregated by HIV exposure/status) Newly Enrolled</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HIV-exposed children 0-2</td>
<td>3 666</td>
<td>3 905</td>
<td>26 339</td>
<td>3 905</td>
<td>15%</td>
</tr>
<tr>
<td>HIV-unexposed children 0-2</td>
<td>12 046</td>
<td>12 233</td>
<td>35 006</td>
<td>12 233</td>
<td>35%</td>
</tr>
<tr>
<td>Children 0-2 of unknown exposure / exposure not documented at enrolment</td>
<td>6</td>
<td>99</td>
<td>2 953</td>
<td>99</td>
<td>3%</td>
</tr>
<tr>
<td>HIV-positive children 0-9</td>
<td>350</td>
<td>2 045</td>
<td>527</td>
<td>2 045</td>
<td>388%</td>
</tr>
<tr>
<td>HIV-negative children 0-9</td>
<td>357</td>
<td>6 408</td>
<td>15 669</td>
<td>6 408</td>
<td>41%</td>
</tr>
<tr>
<td>Children 0-9 of unknown status at enrolment or status not documented</td>
<td>2 180</td>
<td>3 887</td>
<td>18 188</td>
<td>3 887</td>
<td>21%</td>
</tr>
<tr>
<td>Subset of total: Children 0-9 reached by HIV exposure and HIV status</td>
<td>18 605</td>
<td>28 577</td>
<td>98 682</td>
<td>28 577</td>
<td>29%</td>
</tr>
</tbody>
</table>

### New Clients Enrolled by Age (Q1 2023)

- **Children (0-2):** 38%
- **Children (3-9):** 11%
- **Adolescents (10-19):** 7%
- **Young Adults (20-24):** 12%
- **Adults (25+):** 33%

*Index clients: HIV-positive and HIV-negative pregnant women, new mothers, as well as HIV-exposed and unexposed children under 2 years old. Reached = received one or more m2m service including: Prevention of Mother-to-Child Transmission; Reproductive, Maternal, Newborn, and Child Health; Early Childhood Development; and Adolescent Health

**eServices refer to both Peer Services delivered by phone and our automated Virtual Mentor Mother Platform (VMMP). Peer via phone services were rolled out by 15 April 2020, and a total of 437,880 clients have been reached through this channel. The VMMP was soft launched, in English only, on 10 June 2021, and by the end of Q1 (2023), 52,172 clients enrolled for this service.

***Preliminary results, subject to further data audits
As well as measuring the scale of our programme, we measure quality and impact by working towards the UN's 95-95-95 targets—a framework for the global HIV response. **Please note:** Due to the COVID-19 pandemic, clinical services such as viral load testing and HIV PCR testing have been de-prioritised in some health facilities, negatively impacting key services and the data below.

### 1st 95 - Know Your Status

- **95% of pregnant women tested for HIV (Facility)**
- **82%** of infants tested (6-8 week/10 week PCR*)
- **66%** of infants tested and results received (6-8 week/10 week PCR)
- **74%** of children tested (18-24 month HIV test)
- **99%** of children tested and results received (18-24 months)

### 2nd 95 - On Antiretroviral Therapy

- **133%** of pregnant women and new mothers completing ART refills on schedule
- **92%** of eligible pregnant women initiated on ART
- **92%** of pregnant women and new mothers completing ART refills on schedule

### 3rd 95 - Adherent and Virologically Suppressed

- **98%** of adherence assessments >80% adherent based on 7-day recall
- **89%** of Viral Load test conducted
- **58%** of Viral Load test results obtained

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*PCR = Polymerase chain reaction test—a highly sensitive and accurate test for early detection of HIV infection. It is administered at different times in different countries, depending on national guidelines.*
In the first quarter of 2023, mothers2mothers (m2m) continued its mission of providing healthcare for families who need it most, delivered by women who know them best. We played a pivotal role in Angola's COVID-19 vaccination effort, and in Malawi, our involvement extended to supporting a comprehensive vaccination campaign, thus significantly enhancing disease prevention initiatives. Noteworthy progress was achieved in promoting the adoption of PrEP (Pre-Exposure Prophylaxis) among pregnant and breastfeeding women, as well as men, in Mozambique, South Africa, and Zambia. This targeted approach towards core audiences represents a substantial stride in bolstering HIV prevention measures.

m2m also contributed significantly to health systems strengthening through active engagement with governments and partners. This involvement led to the development of policies recognizing the critical role of community health workers in Uganda (refer to page 9 for details) and championing maternal and child health and wellbeing as part of an Elimination of Mother-to-Child Transmission (EMTCT) joint task force in Kenya.

Looking ahead, we are determined to build upon these achievements, forging a path toward a healthier and more empowered future for African women and their families.

**ANGOLA**

- Through the USAID-funded RISE II project, m2m supports the Angolan First Lady’s Born Free to Shine campaign, which aims to reduce new HIV infections among women of childbearing age, prevent vertical mother-child transmission of HIV, and ensure appropriate treatment for children born with HIV. By the end of this quarter, we exceeded 50% of the annual target for testing and identifying clients living with HIV. We reached 7,066 clients with HIV testing, against an annual target of 8,784 and 347 clients were newly identified as living with HIV, against an annual target of 685.

- With support from USAID, m2m supported the Government of the Republic of Angola's (GRA's) COVID-19 mitigation response efforts. m2m Mentor Mothers assisted with community mobilisation and screening, to help the national government reach its goal of 70% COVID-19 vaccination coverage. By the end of March, m2m had met and surpassed the project target by achieving a 101% cumulative target reach—with m2m's support, 55,780 people were vaccinated in project districts in Cunene and Huambo provinces, against a target of 55,380.

New Clients Enrolled: **4,149**

Mentor Mothers Employed: **81**
Kenya

In response to growing concerns about the performance of the government’s prevention of mother-to-child transmission (PMTCT) programme in Nairobi County, the Nairobi County PMTCT Technical Working Group (TWG) established an Elimination of mother-to-child transmission (EMTCT) Task Force in February. m2m Kenya was approached to serve on this task force due to our successful integrated reproductive, maternal, newborn, and child health (RMNCH)/PMTCT and inclusive early childhood development (ECD) programme, which has turned Mathare North Hospital into an EMTCT Centre of Excellence. m2m Kenya will leverage our 20 years of experience in health systems strengthening to address the implementation gaps and challenges to improve care for mothers and their babies.

To amplify our impact through targeted health systems strengthening, m2m will be the lead technical assistance sub-partner in a consortium led by Medicus Mundi Italia (MMI), funded by the Global Fund through the Italian Development Agency (AICS), to implement a 24-month project dubbed “Born to Be Healthy – PMTCT and the fight against HIV at community level.” The project will be implemented at five high-volume health facilities across four sub counties in Nairobi County and will run until January 2025.

Ghana

m2m has achieved significant results since the launch of our third site at the Ga West Municipal Hospital last year. For instance, in Q1 of this year, we were able to ensure that 100% of HIV-exposed infants (HEI) received the 6-8-week PCR test at the site. This is a significant improvement compared to the end of Q4 2022, when only 40% of HEIs received the test. Additionally, the uptake of viral load tests has increased from 0% in Q4 2022 to an impressive 92% in the current quarter. Furthermore, there has been a notable increase in retention in care, rising from 53% at the end of 2022 to 89% in Q1 2023.

In this quarter, m2m Ghana’s Project Director—Yvonne Prempeh-Ferguson, participated in the Global Fund Writing Workshop and the Mock Technical Review Panels for the Government of Ghana’s Grant Preparation and Development for Global Fund Cycle 7, a new funding mechanism scheduled to start in January 2024. Through this engagement, m2m Ghana cultivated and built new strategic partnerships and alliances with other key stakeholders. These partnerships have given m2m a voice at the national level and enabled us to contribute meaningfully to the National HIV and TB response; and position ourselves to embark on our new strategic plan, especially in the delivery of interventions for the triple elimination of HIV, hepatitis B, and syphilis, and non-communicable diseases, malaria, and TB.
LESOTHO

New Clients Enrolled: 26,234  Mentor Mothers Employed: 212

• HIV self-testing is an effective way to overcome barriers to HIV testing, particularly for populations who are hesitant to go to health facilities for testing. In Lesotho, the Ministry of Health is distributing HIV self-testing kits to expand testing coverage. To support this effort, m2m distributed 325 self-test kits this quarter and made sure that all test results were returned. This allowed individuals who tested positive for HIV to receive confirmatory tests and start antiretroviral therapy (ART) promptly. Out of the 325 clients, twelve tested positive for HIV and were enrolled in treatment.

• The Ministry of Health and HIV partners in Lesotho are making great efforts to quickly identify and treat individuals with advanced HIV disease (AHD). This is because people with AHD have a high risk of death, even after starting ART. In the last quarter, m2m Lesotho screened a total of 536 clients; out of these, 18 were found to have AHD. All the identified cases (100%) received the AHD minimum package, which includes screening, diagnosis, and management for opportunistic infections such as tuberculosis, meningitis, and other related conditions.

MALAWI

New Clients Enrolled: 30,765  Mentor Mothers Employed: 46

• m2m Malawi is receiving funding from Pfizer to address misunderstandings and false beliefs surrounding vaccinations. Our goal is to improve vaccination rates among women, adolescent girls, young women, and children under the age of five. To achieve this, m2m partnered with the Ministry of Health to provide additional training to government-employed community health workers (CHWs). These workers will now focus on encouraging people to receive vaccines for diseases such as HPV, cholera, hepatitis, malaria, and COVID-19.

• To support m2m’s goal of improving health systems, with support from LGT, we are assisting the Ministry of Health’s Community Health Section to improve data collection and management. m2m facilitated the training of 10 Health Surveillance Assistants that serve the Mitundi and Kabudula Community Hospitals in the Integrated Community Health Information Systems (ICHIS). This digital platform allows CHWs to input data into the government’s database efficiently. The data collected will aid decision-makers in addressing health issues effectively. It also enhances coordination between the government and implementing partners such as m2m to assess the performance of community structures through standardized reporting tools, which was previously not possible.
MOZAMBIQUE

New Clients Enrolled: 22,259  Mentor Mothers Employed: 381

- DREAMS (which stands for Determined, Resilient, Empowered, AIDS-free, and Safe) is a USAID-funded collaborative initiative aimed at reducing HIV rates among Adolescent Girls and Young Women (AGYW) in countries heavily affected by HIV. m2m Mozambique implemented an adapted DREAMS package this quarter. A total of 712 AGYW were enrolled in the programme, with 469 in the age range of 9-14 years and 243 in the age range of 15-24 years. Among them, 648 participated in Girls’ Clubs and received services tailored to their respective age groups, including HIV screening, testing, and psychosocial support.

- One of the biggest reasons children living with HIV don’t get the treatment they need, is that parents don’t feel confident preparing and administering their medication. To tackle this issue, m2m Mentor Mothers have been actively demonstrating best practices, offering guidance to parents, and ensuring that over 7,000 instances of medication administration were carried out correctly this quarter. This support has been instrumental in helping parents ensure that their children receive the life-saving HIV drugs they need.

- m2m Mozambique is providing tailored services to ensure clients have access to Pre-Exposure Prophylaxis (PrEP), a medication which can prevent transmission of HIV. During this reporting period, 68 new HIV-negative pregnant and breastfeeding women (PBFW) with partners living with HIV were enrolled into the programme. All were initiated on PrEP and all their partners have received education and support from Mentor Mothers on adherence to achieve viral suppression. To date, out of the 285 PBFW in serodiscordant relationships who have received support from Mentor Mothers, 195 were eligible for retesting after three months. Encouragingly, all 195 women tested negative for HIV, indicating the effectiveness of the support provided in preventing transmission within these relationships.
SOUTH AFRICA

New Clients Enrolled: 63,019
Mentor Mothers Employed: 233

• In the Western Cape, as part of Project Amplify, m2m is modifying its peer-led model to support gay men and other men who have sex with men (MSM) and their families. As part of this initiative, which is funded by the Merck Foundation, m2m has added a new module to the Virtual Mentor Mother Platform—an interactive tool that operates on the messaging platform WhatsApp where users can access important health information, which can also be shared with family and friends. Within the platform, topics related to “Human Sexuality” are now available, including explanations on the distinctions between sex and gender, gender identity, sexual orientation, and sexual practices. By providing access to critical health information and promoting acceptance and understanding, Project AMPLIFY is taking significant steps towards creating a healthier and more supportive community for MSM in the Western Cape.

• Pre-exposure prophylaxis (PrEP) is a highly effective medication for preventing HIV infection, and the World Health Organization recommends daily use of PrEP for individuals, regardless of gender, who are at a substantial risk of acquiring HIV. With assistance from Jhpiego, m2m facilitated training sessions on PrEP for Mentor Mothers stationed at the Ikhwezi Community Health Centre in Cape Town, to encourage awareness raising among pregnant and breastfeeding women regarding the safety of PrEP, thus encouraging their interest and uptake of this preventive measure. As part of the training, the PrEP module on the VMMP was updated to include information on its safety for pregnant and breastfeeding clients, in addition to emphasizing its role in HIV prevention.

• In Mpumalanga, m2m is implementing the USAID-funded Children and Adolescents Are My Priority (CHAMP) programme. In the districts of Ehlanzeni, Gert Sibande, and Nkangala, the CHAMP team provided support to 9,351 children and adolescents living with HIV (C/ALHIVs) and successfully enrolled an additional 459 new C/ALHIVs into their comprehensive OVC support programme. Their support included closely monitoring the initiation and adherence of these children to antiretroviral therapy (ART) and managing their viral load levels. The results were exceptional: all of the enrolled C/ALHIVs (9,810) were on ART. Of these, 100% of the previously enrolled (9,351) C/ALHIVs were adhering to their treatment and the 459 newly enrolled C/ALHIVs were successfully initiated on ART. Moreover, an impressive 91% of C/ALHIVs achieved viral suppression, indicating the effectiveness of the programme.
Tanzania

• During this reporting period, Mother Champions in Tanzania have surpassed the UNAIDS 95-95-95 targets. A total of 4,166 (100%) pregnant and breastfeeding women with unknown status were tested for HIV. Out of those tested, 241 women tested positive, and 100% were initiated on ART. Additionally, Mother Champions reached 427 (99.5%) of eligible clients with HIV viral load testing services, with 97% of them attaining viral suppression.

• In March 2023, m2m conducted a retrospective comparative analysis to evaluate the performance of indicators related to the prevention of mother-to-child transmission of HIV (PMTCT) in the Morogoro region. The analysis focused on two types of sites: those supported by m2m Mother Champions and those not supported by them. The results indicated a significant increase in PMTCT coverage, including HIV testing, treatment, viral load testing, and early infant diagnosis, in m2m-supported sites over a two-year period (from 69% in 2020 to 89% in 2022). The findings demonstrated that having a peer mentor (Mother Champion) in a Reproductive and Child Health clinic had the added benefit of improving service quality and achieving high performance in PMTCT indicators.

• m2m actively participated in the launch of the Global Alliance to End AIDS in Children by 2030, which took place in Dar Es Salaam in February 2023. During this event, 12 countries, including Tanzania, presented their action plans to the Global Alliance. As a member of the Tanzania country task team, m2m played a role in the finalisation and validation meeting for the Tanzania Global Alliance Action Plan held in the Morogoro Region, in the weeks leading up to the event. We used the platform to advocate for the inclusion of the Mentor Mother Model as a key activity in the Global Alliance’s efforts to identify children living with HIV, initiate them into antiretroviral (ARV) care, and monitor their adherence for viral suppression.
**Highlights by Country This Quarter (Continued)**

**ZAMBIA**

- **New Clients Enrolled:** 5,746  
  **Mentor Mothers Employed:** 44

  - In January 2023, m2m received funding from ViiV Healthcare Positive Action to implement a project entitled, “Accelerating HIV response and Prevention of Mother-to-Child Transmission (PMTCT) among adolescent girls and boys (10-24) in Lusaka Province of Zambia.” The objective of the project is to scale-up m2m’s Peer Mentor Model to achieve health inclusion and transformational change among adolescent girls and young women (AGYW) in Zambia. Nineteen Mentor Mothers, including four Adolescent Peer Mentor Mothers, were trained and deployed at five sites during this quarter.

  - Under this reporting period, we also expanded our work to Itezhi-Tezhi District in Southern Province to deliver integrated Reproductive Maternal Newborn Child and Adolescent Health (RMNCAH), PMTCT, and HIV services to pregnant and breastfeeding women and their infants. In March, a pre-service training was conducted by m2m and Ministry of Health (MoH) trainers with nine Mentor Mothers who will support the project activities. Additionally, a facility baseline assessment was conducted for the five intervention sites for this project to highlight key areas or key gaps in those facilities that Mentor Mothers will address.

  - In Zambia, male partner engagement in HIV prevention is lagging, with a national coverage of below 25%. With the effort of Mentor Mothers in Lusaka District, 382 male partners received HIV testing during the period under review. This was against the target of 387 (98.7% reach) for male partners. PrEP education and initiation were conducted for these male partners. This is aligned with m2m’s commitment to serve all family members to end AIDS and deliver health for all.

**UGANDA**

- **New Clients Enrolled:** 17,208  
  **Mentor Mothers Employed:** 33

  - Our programme in Uganda remains dedicated to addressing the sexual reproductive health and rights of adolescents. We have been providing crucial support to adolescent mothers who are living with HIV and their children with health education, psychosocial support, referrals for health services, and facilitating access to other critical services. Our target was to assist 504 mothers, but we were able to extend our reach and help 1,766. Out of 982 eligible mothers, all were tested for HIV, with 18 testing positive for HIV initiated on treatment. Additionally, during this quarter, 19 Adolescent Peer Mothers in Jinja received in-service training on integrated reproductive, maternal, newborn, and child health, early childhood development, and paediatric services.

  - m2m Uganda actively collaborated with and assisted the Ministry of Health (MOH) in developing and introducing the inaugural National Community Worker Health Strategy (NCHWS). m2m played a crucial role in shaping the strategy and organized a pre-launch workshop and educational site visit for health commissioners and district health officers, where they could engage with and learn from our community-led cadre of Mentor Mothers. Moreover, there are ongoing discussions for additional initiatives that focus on strengthening the healthcare system to help the MoH achieve its NCHWS objectives.
mothers2mothers (m2m) recognised revenue of $4.8M in Q1, which is 8% lower than our forecast of $5.2M for the quarter. We are confident that we will make up this variance during the year and accordingly have not adjusted our full year Revenue Projection. Our Expenses for the quarter amounted to $6.3M, with 85% of our costs allocated to our programmes.

We continue to prioritise the efficient utilization of our resources to maximise the positive outcomes we deliver to our clients, and we are well positioned to achieve our financial goals for the year.

### Q1 Fundraising Highlights

We have secured a one-year grant from the Pfizer Foundation that will contribute to universal health coverage in Malawi by reducing child, adolescent, and adult morbidity and mortality rates through provision of health services, including essential immunisation services among children under five years old in Lilongwe District, Malawi.

Jasmine Social Investments have been a key donor and partner of m2m since 2012. In April 2023, we received our 10th unrestricted grant from Jasmine Social Investments.

In March, we launched our first global Mother’s Day campaign—celebrating what it means to be M❤️MStrong. Between March and May, we shared stories of Mentor Mothers who embody the courage, resilience, dedication, and patience that are at the heart of being M❤️MStrong, and held a Mother’s Day Afternoon Tea for U.K.-based supporters, partners, and friends.
Uganda’s National Community Health Worker Strategy Launch

“This is a good step towards achieving better health for all Ugandans, to achieving Universal Health Coverage, and our targets in the Sustainable Development Goals.”

This was the message from the Honourable Dr. Jane Ruth Aceng Ocero, Minister of Health of Uganda, as she launched the nation’s first ever National Community Health Worker Strategy (NCHWS) on 9th of February 2023, at a high-level event near Kampala. mothers2mothers played an active role in the launch, and the associated community health week, after we had helped to shape the strategy itself, thanks to our close partnership with the Ugandan Ministry of Health.

Now—with the NCHS ready to guide the implementation of the country’s Community Health Programme over the next five years—we stand ready to help take the strategy from idea to execution, both through Health System Strengthening support and on-the-ground service delivery.

m2m is delighted to see the strategy highlighting the potential of CHWs in delivering Integrated Primary Health Care as a lever to Universal Health Coverage (UHC)—a pillar of m2m’s own 2022-2026 Strategic Plan. Critically, the strategy recognizes that Community Health Workers (CHWs) must be set up for success, by being compensated, and correctly supported.

That is why we particularly welcome the following elements in Uganda’s NCHWS:

**Strategic Direction 1**

“Increase availability and access (geographic and functional) to equitable and integrated CH services”

which is directly linked with our commitment to deliver Integrated Primary Health Care Services within m2m’s new Strategic Plan.

**Strategic Direction 2**

“Ensure a skilled, equipped, committed, and compensated Community Health Workforce”

this is an opportunity to standardise recruitment and training, and create a cadre of certified, accredited CHWs, delivering better health outcomes for communities, and better career paths for CHWs.
We also fully endorse Objective 2.2., which argues that Community Health Workers must be “Digitised, Equipped, Supported, and Compensated.” This aligns with our experience and expertise over the past 20 years:

- **Digitised**: Ensuring CHWs have access to mobile tools brings multiple benefits. It allows for more effective training and communication, supports service delivery, and enables effective data collection and analysis. All m2m CHWs have digital devices and use two highly effective apps to deliver services and capture data. We also have a robust, digital M&E system that feeds into national databases to allow for evidence-based decision making.

- **Equipped**: CHWs must have the tools they need to do their job and deliver impact. This includes appropriate personal protective equipment, clinical supplies, and more.

- **Supported**: Supportive supervision is essential to the success of CHWs. m2m invests in recruitment, training, and supportive supervision—a critical element in our success.

- **Compensated**: Fair compensation for CHWs is not just ethical, it helps to improve impact through increased commitment and focus from CHWs. In fact, an international study suggests that each $1 invested in CHW programmes delivers a $10 return.

m2m remains committed to our peer-led model of highly skilled, local CHWs, and increasingly using our platform to advocate for greater recognition for CHWs and their further integration into national health infrastructures. A key focus of this is deepening partnerships, like the one with the Uganda Ministry of Health, and continuing to support African governments to unlock the power of female CHWs through certification, employment, and career pathing.