“We must have hope for all humankind: No one is isolated from this pandemic, and no one is immune.”


Partnering with religious organizations in resource-poor countries for community-based HIV prevention and care.
When president Bill Rankin and board chair Ivan Weinberg visited Malawi this past summer, GAIA’s
country director, Jones Laviwa, reported that GAIA has saved 15,000 lives by helping thousands of people
to be tested for HIV and begin life-saving treatment, providing food to thousands of malnourished orphans,
prolonging lives with care and treatment for those ill with AIDS, and bringing emergency food relief in the
famine of 2005-2006. With pride, we highlight the accomplishments of 2007—always with deep appreciation
to you, our donors, who make the work possible.
**Village Interventions**

The intensive village strategies developed from 2003 through 2006 with funding from the Bill and Melinda Gates Foundation continued in 20 villages. In 2007 the GAIA caregivers, villagers who are trained and given a modest stipend for their work, enabled 2,400 people to receive HIV testing. Those found HIV positive were assisted in accessing the government’s program of free antiretroviral (anti-HIV) medications. The powerful consequence of their work is that parents live to raise their children as they return to health and are able to cultivate their fields. Once again they become contributors to community life. The GAIA caregivers identified and registered 1,300 orphans in these villages and provided them with supplementary food, clothing, and school supplies. School fees were paid for 50 secondary school orphans. The GAIA caregivers provided companionship, basic nursing care, supplies, and medicine for 171 ill people, bringing many back to health and caring with compassion for the dying.

A major piece of the caregivers’ work is health education. If you were to visit one of these villages you would find a caregiver with a group of neighbors gathered under a tree. The caregivers teach about HIV, tuberculosis, family planning, sexually transmitted infections, cervical cancer, child growth and development, and the empowerment of women. This information is reinforced by door-to-door counseling visits. The villagers’ simple mud and thatch dwellings enable an intimate setting where the caregivers can give confidential advice and respond to questions that people might not want to ask in a large group.

**Microfinance**

In late 2006, GAIA established a microfinance and HIV education and prevention pilot project in five villages in the Thyolo District of southern Malawi where there is high HIV prevalence, high food insecurity, very high numbers of orphans, and considerable poverty.

In August 2007, GAIA staff and volunteers visited the five villages where over 225 women loan recipients live and work. These are located in hard-to-reach hills with few services and where the local economy depends upon the inadequate wages paid by nearby tea plantations.

The women were given training and loans ranging from $70 to $125. They initially protested that they could not manage so much money, being extremely poor and with little education (60% are illiterate). But soon they were transporting huge bunches of bananas, dried fish, beans, and other items to markets in the cities. To date, 88% of the loan funds have been repaid, and the most successful women are receiving larger loans. The loan program is complemented by a vigorous HIV prevention education effort as well.

We learned a lot from an outside evaluator, Amelia Greenberg, a graduate student at the Johns Hopkins School of Advanced International Studies: selling firewood is more profitable than raising chickens; one older woman profits from the sale of beer made from tea leaves; and transportation is one of the highest business costs. Amelia’s report will strengthen outcomes as we extend the program to more women.

The project has achieved its primary goal of empowering women to become economically self-sufficient. This lessens their dependence on men and reduces their vulnerability to HIV transmission, while increasing the well-being of their families. These desperately poor women are newly able to afford food during the “hunger months” (the rainy season, when food production is down) and school fees for their children to attend school.

**GAIA Pro Gr A M s**

“Before I took the GAIA loan, I used to borrow money from other people [typically village loan sharks with high interest rates], and then it was like never having earned. I had to use all of my earnings to pay back the loan. But with GAIA, what I earn feels like my own money.”

“Last year we had to borrow to pay our children’s school costs, but after doing the business, we have enough money to save for school costs.”

“What I earn feels like my own money.”

“We have enough food. I am able to take care of the children and can pay school fees.”

GAIA Microfinance Recipients Speak:

A new entrepreneur sells maize and other groceries at a nearby store.

A GAIA microloan recipient tends to her thriving banana crop.
**Mobile Health Clinics**

The end of the year brought the exciting news that the Elizabeth Taylor HIV/AIDS Foundation will enable us to deploy two mobile clinics in rural areas in southern Malawi. Two specially modified 4-wheel drive SUVs will enable each clinic team to provide concentrated HIV and AIDS services, particularly voluntary HIV counseling and testing (VCT) to identify sero-positive people living with HIV. The mobile clinics will also follow up with those whose T-cell counts appear to be below 200 to provide them with life-saving anti-retroviral therapy. Medications will be conveyed to rural patients to treat AIDS-related opportunistic infections. Additionally, other basic health services such as pre- and postnata care, as well as malaria and tuberculosis testing and treatment will be provided.

Altogether the mobile clinics will extend vital services of Malawi Health Ministry District Health Centers to thousands of people in need, in areas where health services are currently non-existent. The clinical team on each van will consist of a Clinical Officer (similar to a physician’s assistant in the US), a Community Health Nurse, and a nurse’s aide trained in VCT. Each unit will average some 600 patient visits per month. GAIA Malawi staff skillfully accessed and provided all the information needed to create a successful proposal and negotiated the necessary initial agreements with the Ministry of Health. We expect to have the clinics up and running by mid 2008.

**Support for Community Based Organizations**

In 2007, GAIA supported 21 Community Based Organizations in Malawi. These ranged from grass roots village groups providing care to orphans and people ill with AIDS to a Muslim women’s organization conducting basic HIV education for Muslim girls. With the help of the Abbott Fund we helped HIV+ children in Malawi’s central region to access pediatric HIV treatment facilities. In the south, we worked through another local entity to reach traditional birth attendants in order to strengthen referrals to hospitals and clinics for HIV diagnosis and treatment and to reduce maternal and infant death rates. We are proud of our partnerships with these organizations that allow us to work with energetic and innovative Malawians committed to saving human lives.

**Providing Anti-Malaria Bed Nets**

In 2007, we partnered with Netgain Malawi to bring insecticide treated bed nets to eight GAIA villages. Netgain used the GAIA caregivers to train villagers in connecting malaria to mosquitoes, and thus in the importance of sleeping under nets. Our village infrastructures provided the ideal education and distribution platform for the nets. We learned that some villagers had misconceptions about malaria, such as believing that it was caused by eating too many tomatoes. Villagers were taught that malaria is passed by a mosquito species that bites at nighttime. A dramatic drop in malaria incidence occurred in the pilot villages and Netgain is now expanding to other GAIA villages.

**Nursing Scholarships**

In 2007, we expanded our nursing scholarship program. A total of 78 young women were in training in three nursing schools: the Malawi College of Health Sciences, Kamuzu College of Nursing, and Mzuzu University, where the first cohort of 10 students are among the entering class in Mzuzu’s newly launched nursing program. The scholarships pay for tuition, basic supplies like a uniform and shoes, stethoscope and blood pressure cuff, and a small living stipend. Almost all of the students are the first in their families to obtain higher education, and many are orphans themselves, responsible for younger siblings. The young women, “GAIA Scholars,” agree to serve in government or mission treatment facilities. In the south, we worked through another local entity to reach traditional birth attendants in order to strengthen referrals to hospitals and clinics for HIV diagnosis and treatment and to reduce maternal and infant death rates. We are proud of our partnerships with these organizations that allow us to work with energetic and innovative Malawians committed to saving human lives.

---

*“Yes, indeed there are many challenges that a girl child encounters especially in higher education. Our parents and guardians cannot afford many things we need. Your assistance has come on time, we promise to make optimum use of it. In Chichewa there is a saying ‘mzako akati konzu, nusoswe stilu konzu,’ meaning when a ‘friend has helped you, you should reciprocate with a good gesture.’ We promise to reciprocate to the Malawi nation after completing our training as nurses by serving Malawians with respect for their culture and for human dignity.”*

—GAIA Scholar speaking at the induction of scholarship students in her class
An American Visitor Speaks

When we stepped out of the car onto the dusty ground of Mtengowanthenga village, I saw a little girl swinging a pick in the field. With our translator I headed in her direction with my camera. I wanted to find out if the girl was working or playing, but we couldn’t get a straight answer. The kids became giddy as soon as they saw the camera. Their clothes were filthy and full of holes.

About 10 meters to my left, Jim stood with GAIA staffer Gertrude and a local clergy person, who were tending to a very, very sick woman. She was on a mat on the dirt with her caregiver Jim asked, “Why is this woman not in a hospital?” They did not have enough money to have her admitted. Jim asked about the cost and was told, “985 Kwachas” (about $7). He said, “I would like to give you this money for the hospital.”

The woman was loaded into the back of the GAIA truck and Jim and I lowered our cameras. We were thinking of the woman’s dignity. Gertrude turned right to me and said, “Please take pictures.” I felt very uncomfortable about it, but I took a couple quick shots. Now that I have had time to think about it, I believe she was right. I was there to witness and report back what is happening in Malawi, Africa. I believe what Gertrude was saying to us was, “Look at this, look at this sick woman. This is an ugly scene, but it is real. This is AIDS, this is what it looks like, right here in the back of this pick up truck and it is happening everyday in villages like this.”

Gertrude, the caregiver, and a few women from the village drove off to the hospital. I dropped my head and walked a few meters down the road to my left. There was a very shy young girl standing in a doorway. I asked her, “Can I take your picture?” but she just looked down at her feet. The priest came to my side and said, “You can take her picture.” So I lifted my camera and took the shot. The priest then said, “Her name is Mary, she is in the third grade. That was her mother you just sent to the hospital.”

On Sunday night, our last night in Malawi, we had dinner at Gertrude’s house. She told us that indeed, the woman did get into the hospital, but she died two days later. Her death made Mary the newest orphan in Mtengowanthenga.

Why am I telling you this story? Because this happens far too often in Africa, it happens far too often in Malawi, it happens far too often in Mtengowanthenga…They desperately, desperately need our help.

—Rob MacNamara, a member of St. Thomas Church, Whitemarsh
Village by Village: A Garden Party for GAIA

In April, actors Jane Kaczmarek and Bradley Whitford hosted a lovely garden party at their southern California home, which raised more than $416,500 for GAIA’s village projects. This enabled us to continue our interventions in several Malawi villages. The Southern California Resource Group, led by Claudia Pearce, mobilized dozens of volunteers. They elegantly produced the event, including its silent auction, live auction, and everything from ticket sales to food and beverages. California’s First Lady Maria Shriver was a surprise guest, and author Anne Lamott gave a moving speech about the power of GAIA’s work. Richard Yohane, who heads up a GAIA-sponsored community based orphan care organization, bravely spoke about his own experience of living with HIV and of the impact of GAIA’s work in Malawi.

A Very Special Delivery: A Benefit for GAIA’s Hospitals & Clinics Program

The maternal death rate in Malawi places the country third in this category worldwide. Moreover, HIV is heavily implicated in maternal death rates. When Agnes Grohs visited a rural hospital we support, and learned of the risks to women and their infants due to inadequate birthing conditions, she resolved to help. Returning home, she spearheaded an October event at Boris and Tiffany Beljak’s home in Pasadena that raised over $200,000 for GAIA’s hospital and clinics program. We will use the bulk of these funds to construct and equip a safe-birthing clinic at St. Joseph’s Hospital, Ludzi, in Malawi’s central region near the Zambia border. This intervention will greatly assist the community of nursing sisters there, while also supporting the Health Ministry’s overall plan to cut maternal deaths.

Friends Get-Togethers

We thank GAIA supporters who opened their homes or hosted groups at other locations to introduce their friends to our work. The gatherings give us the chance to thank loyal GAIA supporters and to recruit others to the struggle. We express our appreciation to the Santa Barbara GAIA Resource Group, the Bay Area GAIA Resource group, HomeAID for Africa, Margaret and Charles Sedenquist, Mike and Mimi deCruy, Jay and Sharon Levy, Don and Mary Thomas, Paul and Heather Haapa, Andrea Wotan, Courtney Booker, San Juanita Herrera, Michael Gottlieb, MD and Wendy Gordon, Grant and Elizabeth Norris, and the Rev. David Anderson. Carrie Brock wonderfully organized “The Seed Project,” a series of dinners for people to learn about GAIA and to help them become donors to our work.

A special event to honor GAIA co-founder Dr. Charles Wilson was a highlight for us. Charlie Wilson is of pivotal importance in our history and he is a giant in the medical world. The Wilson event preceded a “Partnerships to Save Lives” conference, which brought together San Francisco Bay Area congregations to learn about the AIDS epidemic and ways in which religious congregations can assume a life-saving role in Africa through partnership with us. GAIA donor appreciation events were generously hosted by GAIA Trustees Alan Becker, Dan King, and David Gilmour.

Businesses are also GAIA’s friends: Whole Foods in West Hollywood, CA donated 5% of one day’s profits to GAIA and Paradise Foods in Corte Madera, CA helps us greatly by placing GAIA donation boxes at check out stands and generously matching all gifts given through the market.
Religious Congregations and Other Groups

Over the course of the year, GAIA staff and trustees made presentations about our work to dozens of congregations, civic groups, and other gatherings. We especially thank GAIA trustees and supporters Sharon Youmans, Don Thomas, Michael Gottlieb, and Susan Kools who gave generously of their time and expertise in this regard.

We are grateful to religious groups who support our work in countless creative ways through outreach committee giving, auctions, rummage sales, seasonal fairs, concerts and art events, and through promoting our Alternative Gift Market, which provides a lovely way to honor friends and relatives through donations to GAIA.

St. Luke’s Parish

Some 90 religious congregations around the country support GAIA’s work. This year we highlight St. Luke’s Parish in Darien, Connecticut.

In 2002, Bill Rankin spoke and led an adult education hour. After he opened up the possibility of helping in Africa, a church group formed to develop ways to partner with GAIA. Since then, the level of activity at St. Luke’s has grown steadily. St. Luke’s and GAIA now partner in a number of Malawi projects. This is enabled by grants from the church’s outreach budget, a portion of the Christmas and Easter offerings, special fundraisers, and the individual direct support of over 100 parishioners. A few years ago parishioner Bill Anderson organized the church’s hosting of a conference for Connecticut and New York religious congregations. When St. Luke’s high school youth group learned about the need in Africa, the teenagers decided to hold a fashion show as a fundraiser.

St. Luke’s outreach committee member Blake Robinson traveled to Malawi with GAIA staff for two weeks in 2006. He returned greatly moved and emboldened to advocate for the Malawi people among fellow parishioners and at nearby churches and civic organizations.

The Rev. Dr. Paul Carling, Associate Rector and clergy liaison for outreach, recently said, “Malawi is so far from our life here in Darien, Connecticut, but GAIA has done an amazing job of keeping us closely connected with the folks whose lives are being saved there by its inspired work.” In a recent sermon Rector David Anderson preached about the parish’s partnership, commenting, “When there’s so much to be done, there’s always that little voice that says, ‘But why bother? Your work is a like an eyedropper taking one drop from the ocean.’ But listen: That is a lie. First of all, one life redeemed, one baby saved from AIDS, one orphan child kept alive and given a home and an education—one life is everything. One life is worth it. And second—what’s more—we’re making a difference, all of us who are working around the world for the UN Millennium Development Goals.”

Blake Robinson adds, “Our parishioners know that the people we are assisting in Malawi are indeed God’s people. And it’s a blessed gift for all of us at St. Luke’s to be able to connect with God’s people—through GAIA.”

GAIA U.S. Programs

As a young man, David Gilmour was inspired by letters he received from his aunt and uncle who provided basic medical and dental care in rural Indonesia. He witnessed his father and the church assist Guatemalan Indians gain access to more fertile land and heard him counsel his Quaker parish to “live simply so others can simply live.”

While a boy growing up in southern California, David and his 7 siblings were expected to give back 20% of their earnings to the household. David’s share came from his job working in a grocery store. He went on to make his career in this business.

In 2001, David opened Paradise Foods in Marin County, California, where he serves as president of the Marin Leadership Foundation and on community and business boards. He became a GAIA trustee in 2006 because of the efficiency and effectiveness he sees in a “reasonably small and reasonably young organization. This is a place where I want to put my time, money, and resources,” he says. GAIA staff “do not merely ship things over to Africa; they are going to deliver directly to the huts.”

He admires the business leaders who “are driven to see the bigger picture. These CEOs are often involved in more than one place—their church, their non-profit, their university... It is not enough to be involved in only business. How can I help, and even more so, how can I help in an effective way?”

Trustee in the Spotlight:

David Gilmour—Driven by the Big Picture
<table>
<thead>
<tr>
<th>Program</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Orphan Care</td>
<td>Orphans cared for: 4526, Orphans assisted with secondary school tuitions: 269, Orphans assisted with vocational school tuition: 19</td>
</tr>
<tr>
<td>HIV Prevention</td>
<td>People tested for HIV: 2437, People reached with prevention messages: 15000+, Youth prevention clubs funded: 24, Youth served through clubs: 1478</td>
</tr>
<tr>
<td>Home Based Care</td>
<td>Caregivers trained in home based care: 90, Patients cared for: 1181</td>
</tr>
<tr>
<td>Women’s Empowerment</td>
<td>Families receiving goats: 200, Women receiving microloans: 290, Number of community income generating projects: 23</td>
</tr>
<tr>
<td>Nursing Scholarships</td>
<td>Students supported: 78</td>
</tr>
<tr>
<td>Hospitals/Clincs supported</td>
<td>Number of hospitals and clinics supported: 2</td>
</tr>
<tr>
<td>HIV &amp; AIDS Training Conferences</td>
<td>Muslim girls trained in peer HIV prevention: 151</td>
</tr>
</tbody>
</table>

Summary of Accomplishments in 2007 (Totals from all programs combined)
**Financial Statement**

GAIA’s income in 2007 totaled $1,890,932. Expenses totaled $1,929,092. Because of reserved funds held from prior years’ income, GAIA was able to release and spend more money in 2007.

---

**2007 Income**

- **35%** Individuals
- **30%** Major Events
- **12%** Religious Organizations
- **12%** Corporation/Small Businesses
- **11%** Family and Community Foundations
- **7%** Independent Foundations
- **1%** Interest Income

**2007 Expenses**

- **87%** Program Services
- **1%** Fundraising
- **12%** Administration
We are grateful to the chairs and volunteers who carried out the wildly successful “Village by Village: A Garden Party for GAIA” and “A Special Delivery: A Benefit for GAIA’s Hospitals and Clinics Program,” the Southern California Development Committee and GAIA Resource Group, the Bay Area Development Committee and Resource Group, the Santa Barbara GAIA Resource Group, office volunteers, Malawi travel companions, and clergy and parishioners who share their passion for GAIA with others.

GAIA’s work in Malawi grew with the extraordinary help and dedication of its many volunteers.