### ACronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>AAH-I</td>
<td>Action Africa Help International</td>
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<td>AAHZ</td>
<td>Action Africa Help Zambia</td>
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<tr>
<td>ANC</td>
<td>Antenatal Care</td>
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<td>CHAST</td>
<td>Children’s Hygiene and Sanitation Training</td>
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<td>CLTS</td>
<td>Community Led Total Sanitation</td>
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<td>CRI</td>
<td>Core Relief Items</td>
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<td>CSEF</td>
<td>Civil Society Environment Fund</td>
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<tr>
<td>DFID</td>
<td>Department for International Development (UK)</td>
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<tr>
<td>eMTCT</td>
<td>Elimination of Mother-to-Child Transmission of HIV</td>
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<td>EVI</td>
<td>Extremely Vulnerable Individual</td>
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<td>FP</td>
<td>Family Planning</td>
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<td>GBV</td>
<td>Gender-based Violence</td>
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<td>HCT</td>
<td>HIV Counseling and Testing</td>
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<tr>
<td>NAPAD</td>
<td>Nomadic Assistance for Peace and Development</td>
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<td>POCs</td>
<td>Persons of Concern</td>
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<td>WDC</td>
<td>Water and Development Committee</td>
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<td>SDG</td>
<td>Sustainable Development Goals</td>
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<td>SENARK</td>
<td>Sustaining Environment and Natural Resources project</td>
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<td>SGBV</td>
<td>Sexual and Gender Based Violence</td>
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<td>UNHCR</td>
<td>United Nations High Commission for Refugees</td>
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<tr>
<td>USAID</td>
<td>United States Agency for International Development</td>
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<td>VSLA</td>
<td>Village Savings and Loan Associations</td>
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OVERVIEW

This Annual Report highlights the work of Action Africa Help International (AAH-I) in 2016.

Our strategic objective to design and deliver sustainable basic services in partnership with livelihood-challenged communities in conflict and post-conflict environments has continued to have a positive impact. Through our programmes, over 800,000 people benefitted from development and humanitarian interventions in Kenya, Uganda, Somalia, Zambia and South Sudan.

At AAH-I we believe in partnerships. We work with the local community, national governments and funding partners to improve the livelihoods of communities in our countries of operation. We were nominated and successfully defended our membership to the South Sudan Health Sector Strategic Advisory Board. We have also stepped up participation in UN Cluster Coordination meetings, and continue to receive positive feedback from funding partners because of our entrepreneurial approaches.

In the coming year, we look forward to making further progress towards our overall goal of supporting livelihood-challenged communities in Africa to sustainably improve their quality of life. This will be guided by our strategic organizational objectives and the global Sustainable Development Goals numbers 1, 2, 3, 4, 5, 6 and 16.

A farmer admiring his bean crop in Zambia.
ABOUT US

Action Africa Help International (AAH-I) is a regional African-led non-governmental organization that supports livelihood-challenged communities in East and Southern Africa to sustainably improve their well-being and standard of living. With Country Programmes in South Sudan, Kenya, Somalia, Uganda, Zambia, Ethiopia and Djibouti, AAH-I has over 25 years’ experience working with communities in conflict and post-conflict situations, including refugees, internally displaced people and host communities.

More recently AAH-I has expanded its activities to work with other marginalized communities including pastoralists and people living in urban informal settlements.

AAH-I is run by a Directorate based in Nairobi and governed by an International Board of Directors and National Boards in the countries of operation. AAH-I has decentralized its operations to give greater ownership and responsibility to Country Programmes, which are better placed to respond rapidly to local challenges and opportunities.

OUR STRATEGY

Our current five-year strategy (2014-2018) focuses on the following five strategic objectives:

1. Developing, promoting and implementing innovative entrepreneurial and sustainable livelihood programmes.

2. Designing and delivering sustainable basic services in partnership with livelihood-challenged communities.

3. Facilitating humanitarian relief and recovery programmes for displaced and returnee populations to attain sustainable resettlement.

4. Strengthening the capacity of implementing partners for sustained service delivery and governance.

5. Enhancing the capacity, efficiency, effectiveness and learning of AAH-I to innovatively deliver its mission.

We work closely with communities, local government and other development partners to identify and develop programmes that promote ownership, are relevant and sustainable.

OUR MISSION

To support livelihood-challenged communities in Africa to sustainably improve their quality of life.

OUR Core VALUES

- **Compassion** for livelihood-challenged communities
- **Community-centered sustainable** solutions
- **Respect** for all stakeholders
- **Partnership**, with shared responsibilities
- **Integrity** in all that we do
- **Efficiency** in resource utilization
- **Innovation** in programming
Students going to class at the AAH-run Maridi Training School in South Sudan.
FROM THE BOARD CHAIR

In 2016, I have had the pleasure of watching Action Africa Help International (AAH-I) continue to raise the bar through innovative and sustainable approaches for supporting livelihood-challenged communities in East and Southern Africa.

While the operating context for development organizations such as ours remains a very challenging one, I have seen our staff and partners rally together with a common goal to meet our strategic objectives. Despite resource challenges, we saw notable successes in 2016 and implemented a total of 39 projects. I had the opportunity to familiarize myself with some of these projects in Yei State in South Sudan, Kyangwali and Adjumani in Uganda, and in Kawambwa district in Zambia. I also had the pleasure to meet and exchange notes with our National Board members and partners in these countries.

As we move into 2017, I am excited about the future and look forward to advancing our leadership in the regional humanitarian and development space.

I strongly believe that we are uniquely positioned to transform our regions through the multi-sectoral dynamism that is a part of our organizational culture. I wish to conclude by seizing this opportunity to once more express my profound gratitude and appreciation to all our partners, and to reaffirm AAH-I’s unwavering commitment to further consolidate our cordial working relations.

Dr John Tabayi
FROM THE EXECUTIVE DIRECTOR

2016 was a challenging year for AAH-I. The escalating armed conflict and political impasse in South Sudan between 2015 and 2016 had many funding partners withhold resources to the country. Funding by USAID for our projects in South Sudan wound up. Expected funding from the World Bank was held back. We essentially lost about 20% of our funding base, which inevitably led to restructuring and downsizing within the organization. This was a very difficult time for us, and we express our gratitude to all those who continued to support the AAH-I story.

The operating context in 2016 was relatively calm in Zambia, Uganda and Kenya, but highly unpredictable in South Sudan and Somalia. Globally, the fluctuating Sterling Pound rate from the uncertainty due to Brexit had an adverse effect on AAH-I’s DFID-funded projects. On the other hand, the global refugee situation spurred us to rethink the refugee assistance paradigm to more sustainable models.

Despite these challenges, we were able to innovatively reorganize our resources so that the work of AAH-I continued to positively impact the communities in which we work. We were able to secure new funding, in particular for the vital life-saving health programmes we run in South Sudan, and for our livelihoods programmes in Kenya and Somalia. This report outlines some achievements and progress in selected key areas in 2016. In addition, the report provides financial results for the 2016 fiscal year.

Our continued success is not a coincidence, but a result of concerted effort from staff, partners and project beneficiaries. The challenge is to stay ahead of the curve and effectively utilize the opportunities presented to us. We continue to invest all our resources in our most impactful programme and organizational priorities. AAH-I is well-positioned, and we look forward to building on this for even greater success in 2017.

Dr Caroline Kisia
OUR REACH IN 2016

Under Strategic Objective 1: Developing, promoting and implementing innovative entrepreneurial and sustainable livelihood programmes.

- 9,510 People accessed financial services (through initiation and establishment of 35 Village Savings and Loan Associations at community level)
- 20,361 Farmers applied improved technologies or farm management practices
- 6,266 Refugees, asylum seekers and internally displaced persons supported with entrepreneurship / business training
- 557 Women traders supported to access capital and trained in business development
- 4,304 Community members received tree seedlings for planting

Under Strategic Objective 2: Designing and delivering sustainable basic services in partnership with livelihood-challenged communities.

- 142,754 People received Primary Health Care assistance
- 9,158 Children enrolled in Nursery and Primary school
- 80,420 Curative consultations for children under 5 years
- 55,531 People given access to safe water
- 124,539 Curative consultations for persons 5 years and older
- 39,099 Children that attended school health education and promotion sessions
- 142,539 Curative consultations for persons 5 years and older
- 3,283 Children received iron and food supplements
Under Strategic Objective 3: Facilitating humanitarian relief and recovery programmes for displaced and returnee populations to attain sustainable resettlements.

- **218,725** People benefitted from humanitarian relief and recovery interventions
- **86,736** Metric tonnes of goods/fuel/non-food items warehoused and transported/delivered
- **4,370** People reached with nutrition education during food and cash distributions
- **21** Buildings/structures constructed
- **1,213** Motor vehicle repairs/maintenance conducted

Under Strategic Objective 4: Strengthening the capacity of implementing partners for sustained service delivery and governance.

- **225** Water, peace and community development committee members trained
- **33,040** People reached with community awareness messages on GBV
- **26,354** People reached in community policing
- **225** Survivors of gender-based violence facilitated to access justice

We are passionate about communities
PROGRAMME OVERVIEW

During the year under review, AAH-I implemented programme interventions in South Sudan, Uganda, Zambia, Somalia and Kenya. AAH-I expanded to Djibouti in 2016 and implementations of activities began in March 2017.

AAH-I implemented a total of 39 projects in 2016 - 22 in South Sudan, 3 in Uganda, 4 in Kenya, 4 in Somalia and 6 in Zambia. The number of projects that closed, were newly initiated and implemented throughout the year under review were 10, 13 and 16, respectively.

In line with the Sustainable Development Goals (SDGs) numbers 1 (ending poverty), 2 (ending hunger), 3 (ensure healthy lives), 4 (ensure inclusive & equitable quality education), 5 (achieve gender equality), 6 (ensure availability & sustainable management of water), and 16 (promote peaceful and inclusive societies), the Programme worked with communities, local governments and other development partners to improve:

- Basic services (health, education, water, hygiene and sanitation)
- Food and income security
- Environmental management and responsiveness to climate change
- Governance, civil society strengthening and peace building
- Humanitarian relief and recovery
- Research to provide the evidence base for the above

Challenges the Programmes faced

The year under review witnessed multiple challenges. Escalation of armed conflict and political instability in our largest country of operation, South Sudan, led to the withholding of funding by various donors. Funding by USAID for our projects wound up. In addition, an expected funding from the World Bank was held back. We essentially lost about 20% of our funding base in South Sudan.

In Uganda, Bidibidi and Palorinya refugee settlements opened in 2016 and new settlements opened in Imvepi and Lamwo. According to data from UNHCR, there was an influx of refugees into Uganda from South Sudan, with at least 2,000 South Sudan refugees arriving daily in the West Nile region of the country since July 2016. However, reduced funding of AAH Uganda projects presented new challenges in our service delivery to the increasing number of refugees.

There were also challenges in the operational context that negatively affected implementation of some Programme activities. In South Sudan, armed clashes in the Equatorias led to inaccessibility of most major highways leading to AAH projects locations, including the Juba-Yei road. This especially negatively impacted health projects in Yei, Kajo Keji, Mundri West and Morobo Counties.

In addition, the drought situation in the Horn of Africa slowed down implementation of some of our water-related agricultural projects in Somalia and Kenya.

Despite these challenges, we were able to innovatively reorganize our resources, secure new funding, and ensure that the work of AAH-I continued to positively impact the communities with whom we work.

A member of Umoja Youth Group in Uganda making bead bangles for sale, under the AAH Uganda women empowerment programme in Karamoja.
PROGRAMME COVERAGE

Thematic Area 1
Basic Services: Health, Water, Hygiene & Sanitation and Education

At least 580,000 refugees, asylum seekers and internally displaced people, including adolescents, children, received support in basic services under our Programmes.

Health

Our health programmes are aligned to SDG Goal 3 which seeks to achieve universal health coverage, access to quality essential healthcare services and access to safe, effective, quality and affordable essential medicines and vaccines for all. AAH-I is promoting healthy lives and well-being for all at all ages.

Supporting local government ministries and community outreach and sensitization activities are key in improving the health outcomes of the communities that we serve. In 2016, AAH-I maintained health education and promotion at community and health facility levels in South Sudan. 39,000 children attended school health education and 12,480 children were reached with growth monitoring and nutrition promotion services. Additionally, 4,265 child deliveries were conducted at the AAH-I-run Maridi County Hospital overseen by skilled birth attendants. The programme also had 80,420 curative consultations for children under five and at least 124,000 for children and persons beyond the age of five. The curative consultations involved nutritional screening, basic laboratory testing, health education, screening of pregnant mothers and immunization.

We continue to support the government of South Sudan through training of nurses and midwives to improve quality, access and delivery of basic health services to communities. 40 new students were recruited in 2016.

AAH Zambia (AAHZ) partnered with district medical health teams to hold refresher training for 30 community Health Workers, Community Action Group members and Village Health Teams on antenatal, prenatal and postnatal care to enable them deliver accurate and effective messages. AAHZ further facilitated training on sexual reproductive health and elimination of mother-to-child transmission of HIV for youths in and out of schools. The objective was to promote and increase access to sexual and reproductive health services especially among adolescents. AAHZ, in collaboration with rural health centres staff and Community Action Group members, conducted 4 integrated mobile outreaches on HIV counselling and testing, antenatal care and family planning reaching 2,827 people in Kawambwa.

In 2016, the AAH Uganda health programme in Kyangwali provided preventive, curative and rehabilitative medical services through five health centers and community outreach programs to 72,931 individuals - 42,931 refugees and 30,000 nationals from the host community.

We continue to support the government of South Sudan through training of nurses and midwives to improve quality, access and delivery of basic health services.
A child receiving nutritional screening at Tanamuko Primary Health Care Centre during a medical camp facilitated by AAH South Sudan in Ibba County
Water, Sanitation and Hygiene (WASH)

Our WASH programmes focus on identifying key hygiene problems and then providing culturally-appropriate solutions for the target community. In line with SDG 6, AAH-I supports and strengthens the participation of local communities in improving water and sanitation management.

Under AAH Somalia, a water committee was formed in Ausqurun where members were trained on Community-Led Total Sanitations (CLTS). Partner staff from Nomadic Assistance for Peace and Development (NAPAD) and the Water and Development Committee (WDC) were also trained on the methodology. AAH Somalia also facilitated training of local community members to lead CLTS in Wagberi and Wadajir villages in Elwak. The programme further supported the rehabilitation of two shallow wells and installation of solar panels and water pumps, one in Elwak and one in Ausqurun, in partnership with NAPAD and WDC. These local partners are regularly monitoring hygiene practices and the use of the wells. We encourage participatory approaches where the community is allowed to monitor and improve their own hygiene habits.

The AAH Uganda programme ensured that 42,931 refugees and 3,000 host community members have access to safe water. The programme facilitated CLTS and Child Hygiene and Sanitation Training sessions for partner NGOs, community social workers and local government officials. In addition, village health teams were supported to carry out hygiene promotion campaigns which reached over 10,000 people. This led to an improvement in the percentage of households with drop-hole latrines by 12.7% - from 80.3% in December 2015 to 93% in December 2016, against the annual target of 85%. The result was a reduction in health risks related to poor sanitation conditions, evidenced by no outbreak of sanitation-related diseases.

Education

According to data from UNICEF, over one third of the world’s refugee children are missing out on primary education. AAH-I is contributing to the bridging of this gap by supporting inclusive and equitable quality education in Somalia. 516 Yemeni refugee learners (271 boys and 245 girls) were enrolled to the AAH-I-run Yemeni Community School in Mogadishu. 14 learners from the host community were also enrolled. Learning and teaching materials were supplied to the school - teachers received reference materials to aid lesson delivery while 420 learners were provided with scholastic material and school uniforms. 5 of the existing toilets in the school were renovated to make them girl-friendly and to improve school retention. A hand-washing section was also installed. A school-feeding program is in place to support class attendance. In Hargeisa, Somaliland, the Peaceful Coexistence Centre was launched in 2016. 49 learners were enrolled, retained and graduated in numeracy and literacy lessons, 62 in English and 54 in ICT. More than 1,200 refugees, asylum seekers and host community members, including children, utilized the Centre.

In Uganda, the Karamoja Economic Empowerment Project saw 170 adolescent girls and young women living with HIV economically empowered through training in life and business skills. The vocational training programme in the mechanical workshop based in Adjumani district had over 60 youth trained in motor vehicle mechanics and driving, welding and metal fabrication, and plumbing and electrical installation. Uganda programme also promoted access to vocational skills amongst youth aged 15-24 years, by enabling them to access training in skills such as hair dressing, poultry management and motor vehicle mechanics. In Kyangwali, AAH Uganda is providing continuous and sustainable education and mainstreaming refugee education within national and local government systems, through partnerships with the Ministry of Education, Windle Trust, other education societies and community-based. AAH Uganda is supporting 7 schools in the Kyangwali refugee settlement, with a student population of 8,529.
Refugee children from Yemen enjoy a class break at the AAH Somalia-run Yemeni Community School in Mogadishu.
Thematic Area 2
Food and Income Security

About 60,000 traders and farmers, mostly refugees and internally displaced people, received support in access to capital and business/entrepreneurship skills.

Our interventions in food and income security target the most vulnerable individuals and groups.

AAH Kenya supported 200 refugees with farming startup kits (seeds, fertilizer, pesticides, farm tools, sprayers and watering cans) in Kakuma, Turkana County, and promoted and supported market access for the produce. The programme also facilitated business training for 4,385 refugees. An additional 921 were trained on financial literacy, life-skills and business skills, and 78 provided with business capital.

In Somalia, 359 returnees, asylum seekers, internally displaced persons and refugees were direct loan beneficiaries from 85 businesses established in 2015. Of these, 63 individual businesses reaching 281 individuals continued to generate income in 2016, allowing the owners to pay rent, provide for their basic needs and improve diet and nutrition for their families with an impact indicator of 74%. Additionally, 28 women were trained in crocheting using plastic waste at AAH Somalia/Somaliland’s Basic Skills and Production Centre in Hargeisa. In Elwak, women groups were trained in safe milk handling processes, value addition and basic business skills.

In Uganda, 14,822 farmers in Kyangwali are using improved farming methods using skills gained through AAH-I interventions in continuous community-based training in agronomic practices and exposure visits. 2,008 farmers realized increased production after receiving farm and non-farm production kits for self-reliance. Our vocational training programme in the mechanical workshop based in Adjumani district supported 60 youth undergoing a one-year training in motor vehicle mechanics and driving, welding and metal fabrication, and plumbing and electrical installation. The goal is to ease high youth unemployment in the area. The training follows the Ugandan national curriculum.

Under the Sustaining Environment and Natural Resources (SENARK) project in Zambia, 820 community members were supported in good agricultural practices for vegetable production and bee keeping.

Thematic Area 3
Environmental management and responsiveness to climate change

Climate change presents the single biggest threat to development, and its widespread, unprecedented impacts disproportionately burden the poorest and most vulnerable. In partnership with local governments, we work to build community resilience in disaster risk reduction, climate change adaptation and ecosystem management and restoration for sustainable environments.

Through the SENARK project, AAH Zambia facilitated training of 330 community conservation members in environmental management, integrated pest management, production of energy saving stoves and training in leadership in Kawambwa district. An outcome of this is that the community was rallied to plant 80,000 tree seedlings as efforts to reverse and mitigate the negative impact on the environment.

AAH Uganda provided over 1,100 households with charcoal briquettes and at least 3,900 with moveable energy-saving stoves. Through facilitation and management of community-based tree nurseries, tree planting campaigns and environment education sessions, communities received environmental management awareness messages and accessed 79,505 trees and fruit tree seedlings to plant at household level and within institutions.
A farmer from Kawambwa district in Zambia with his tomato harvest.
Thematic Area 4
Governance, Civil Society Strengthening and Peace-building

We support community governance systems, promote the rule of law at national and international levels, and support equal access to justice for all.

At least 60,000 people across our programmes, including survivors of Sexual and Gender Based Violence (SGBV), were empowered to live peacefully, access justice and participate in their own development. This was done through art, community dialogue, community policing as well as legal and logistical support.

The AAH Uganda programme facilitated access to justice for 225 SGBV survivors. 33,040 people were reached with community awareness messages on gender based violence, through music, dance and drama sessions, meetings/dialogue and school debates. 26,354 people benefitted from community policing.

Thematic Area 5
Humanitarian Relief and Recovery

AAH-I is a logistics partner for UNHCR in Kenya, Uganda, Somalia, Zambia and South Sudan, where we work with partners to provide timely interventions to displaced persons. Our approach is people-centered and is planned and implemented in coordination with the relevant government authorities, humanitarian agencies, civil society organizations and the local community. AAH-I is charged with vehicle and generator maintenance and repair, warehouse management and fleet and fuel management in these countries, including using mobile workshops to provide vehicle/generator maintenance and repairs in remote locations in South Sudan such as Mingkaman, Aweil, Melut and Kuajok where there are no workshops.

At least 223,000 people, including women, girls, refugees, asylum seekers, patients and their escorts, were provided with basic humanitarian assistance.

In South Sudan, we accommodated 17, 206 refugees and relocated 19,866 from Yida to Pamir and Ajuong Thok camps. We built physical infrastructure such as the Fifth Primary School in Ajuong Thok refugee camp, the Pamir Primary Health Care Centre, Pamir police post, and roads within the Pamir camp in Unity State.

AAH Kenya in partnership with UNHCR saw the transportation of new arrivals from the Nadapal border to Kalobeyei, and relocation of refugees from Kakuma refugee camp to Kalobeyei settlement. In 2016, there were at least 9,000 new arrivals from the border point and 15,000 refugees relocated to Kalobeyei to decongest the Kakuma refugee camp. AAH Kenya manages 10 rub halls and 3 storage facilities. From here core relief items were transported and distributed within the Kakuma camps and Kalobeyei settlement.

The Urban Refugee Project in Lusaka had over 9,800 refugees access humanitarian basic services in Zambia. AAH Zambia also manages three warehouses and mechanical workshops for UNHCR in Lusaka, Maheba and Mayukwayukwa. The handover of Makeni Health Clinic by AAH Zambia to the Government of Zambia in 2016 reinforces our commitment to work with local administrations.

Under the AAH Uganda programme, 1,310 people received core relief items and 7,447 women and girls of reproductive age received sanitary packages. 1,410 people participated in food and cash basket monitoring cycles and 3,120 were reached with nutrition education.

AAH Somalia continued to operate two warehouses in Mogadishu, and had at least 130,000 core relief items dispatched from there. We also supported the distribution of core relief items to more than 180 families of Ethiopian refugees in Hargeisa, Somaliland.
AAH Kenya staff supporting access to safe and clean water to refugees in Kakuma, Turkana County.
FINANCIALS

Source of funds

- **UNHCR** ($12,801,645)
- **UNICEF** ($1,086,119)
- **USAID/Abt Associates** ($759,773)
- **USAID/Jhpiego** ($866,323)
- **UNICEF** ($1,086,119)
- **Crown Agents/DFID/Health Pooled Fund** ($1,535,788)
- **Positive Action for Children Fund** ($95,502)
- **World Bank/Ministry of Agriculture and Food Security, South Sudan** ($1,022,148)
- **DFID** ($160,392)
- **CSEF** ($94,194)
- **Diakonie** ($85,973)
- **World Food Programme** ($89,684)
- **UN Women** ($51,729)
- **Others** ($81,857)
- **Bread for the World** ($1,565,680)
- **Others** ($81,857)
How we spent funds

- Humanitarian assistance and refugee management programme: 55%
- Basic services (primary health care, water, sanitation & hygiene, education): 16%
- Food and income security and environmental management and protection: 9%
- Civil society strengthening and peace building: 5%
- Administration and support: 15%
- Programme support costs: 14.7%
- Direct programme costs: 85.3%
FUNDING PARTNERS

Bread for the World
Civil Society Environment Fund
Crown Agents/DFID
DFID
Diakonie Katastrophenhilfe
King Solomon Foundation
Health Pool Fund, funded by DFID, Canadian International Development Agency, the EU, Sida and USAID.
Ministry for Foreign Affairs, Finland
Positive Action for Children Fund
UK Aid
UN Women
UNHCR
UNICEF
USAID/Abt Associates
USAID/Jhpiego
World Bank / Ministry of Agriculture and Food Security, South Sudan
World Food Programme
BOARD MEMBERS

Dr John Tabayi – Chair, AAH-I
Dr Vinand Nantulya – Founder Member, AAH-I
Mr Leonard Logo – Chair, AAH South Sudan National Board
Dr Noerine Kaleeba - Chair, AAH Uganda National Board
Mr Mungule Chikoye – Chair, AAH Zambia National Board
Mr Lawrence Masaviru - Chair, AAH Kenya National Board and Treasurer, AAH-I
Ms Margaret Oriaro - AAH-I Board Member
Mr Haron Wachira - AAH-I Board Member
Prof. Aggrey Abate - AAH-I Board Member
Dr Caroline Kisia – AAH-I Executive Director, Secretary to the Board
We are passionate about communities