

Impact Report 2025



CHASE
A F R I C A





Contents

| | |
|----|--|
| 4 | Chair's Welcome |
| 5 | CEO's Welcome |
| 6 | Partner Highlights |
| 8 | Our Impact in 2025 |
| 10 | The Health and Wellbeing of Women and Girls |
| 14 | Our Story: 25 Years of CHASE Africa |
| 18 | Social and Behaviour Change Communication: From Awareness to Action |
| 22 | Last Mile Healthcare |
| 26 | Building Stronger and Resilient Health Systems |
| 30 | Healthy Communities, Healthy Environments |
| 34 | The CHASE Africa Partner Network: Collaboration and Learning |
| 38 | Looking Forward to 2026 |
| 40 | Financial Review |
| 47 | Thank You |

Front cover photo: Chemisia with her children. Read her story on page 12.
Left: Mothers bring their children for regular checkups at our outreach clinics

Chair's Welcome



I am delighted to introduce CHASE Africa's 2025 Impact Report, marking a milestone year for the organisation as we celebrated our 25th anniversary.

It was a privilege to meet many of our partners during the year. In May, I visited several programmes in Kenya and attended our annual Partner Forum in Limuru. Seeing our work first-hand brought home not only the scale of the need, but the dedication and resilience of the local organisations delivering life changing support on a daily basis.

It was also a year shaped by profound challenges. Major cuts to international aid have already affected health systems across the region, contributing to shortages of essential drugs, reduced staffing and increased pressure on community health structures.

At the same time, extreme weather disrupted livelihoods and made access to health services even more difficult for many families. These pressures underscore how vital our long-term approach is: strengthening local partners, listening to community priorities and investing in systems that can withstand uncertainty.

Despite these challenges, our partners achieved remarkable impact. We expanded our programmes and healthcare services, reaching people in some of the most remote areas.

The annual Partner Forum brought together over 50 delegates for three days and reminded me of the power of collaboration. The openness with which partners shared learning and their commitment to continuous improvement was truly inspiring. It was exciting to see our partners' passion to achieve our shared purpose.

I would like to express my sincere thanks to our supporters, donors, staff and partners. Your commitment ensures that even in the most challenging contexts, women, girls and communities continue to access essential healthcare, information and choices. I look forward to building on this progress in the year ahead.

Miles Geldard
Chair of Trustees

CEO's Welcome



2025 marked our 25th anniversary, an important moment to reflect on how far we have come and to reaffirm our commitment to ensuring that women, girls and rural communities across East Africa can access the health services and information they need.

Our partners reached hundreds of thousands of people with essential health information, family planning services, adolescent and youth programmes and basic healthcare. Mobile outreach clinics, Backpack Nurses and Community Health Workers continued to bring services directly to people's doorsteps, especially in areas where facilities are sparse or under-resourced.

In 2025, we expanded programmes in Kenya's South Rift and Baringo, strengthened adolescent health services in Meru, grew HIV prevention work in Uganda and supported new integrated health and conservation projects in Tanzania.

I am privileged to get to visit our partners and see the work we support. The dedication of our partners' staff is always inspiring, so often going above and beyond to reach remote communities. The visits also highlight the ongoing need for our programmes.

When I attended a women's dialogue at Olderkesi, on the Kenyan-Tanzanian border, which was the first in the area, I saw both the appetite for information and the challenges women face when accessing health services for themselves and their children. This was the first time the women had been able to seek such support.

We ran our first BBC Radio 4 Appeal, a wonderful opportunity to raise awareness of the Backpack Nurse model and highlight the challenges faced by rural communities. We also ran our first Big Give Green Match Fund and our annual Big Give Christmas Challenge. A huge thank you to all the supporters who gave to these campaigns.


Looking ahead, 2026 will see the launch of our new strategic plan and our partner toolkit. We will deepen our evidence base, continue expanding technical assistance and invest further in building the capabilities of partner staff and Ministry of Health teams.

None of this would be possible without the dedication of our local partners, the hard work of our team, the support of our trustees and the generosity of our donors. My sincere thanks to all of you.

Harriet Gordon-Brown
Chief Executive Officer

 Below: A Backpack Nurse visits a client at her home



 Below: Harriet and Miles with colleagues at our annual Partner Forum



Partner Highlights

SOUTH SUDAN

Rural Initiative for Community Empowerment - West Nile continued providing vital health services in the Bidibidi Refugee Settlement despite an increasingly critical situation caused by severe funding shortages that threaten health services.

Kalyet Afya Foundation supported communities through its outreach clinics, while Youth Peer Educators became positive role models, successfully engaging teens in school and out-of-school youth.

Dandelion Africa built two new Backpack Nurse sites and launched training for Community Health Assistants, strengthening community-level health service delivery.

Rwenzori Centre for Research and Advocacy Uganda initiated a new project which focused on young people living with HIV, supporting them to establish their own food gardens to improve nutrition, treatment adherence and household food security.

ETHIOPIA

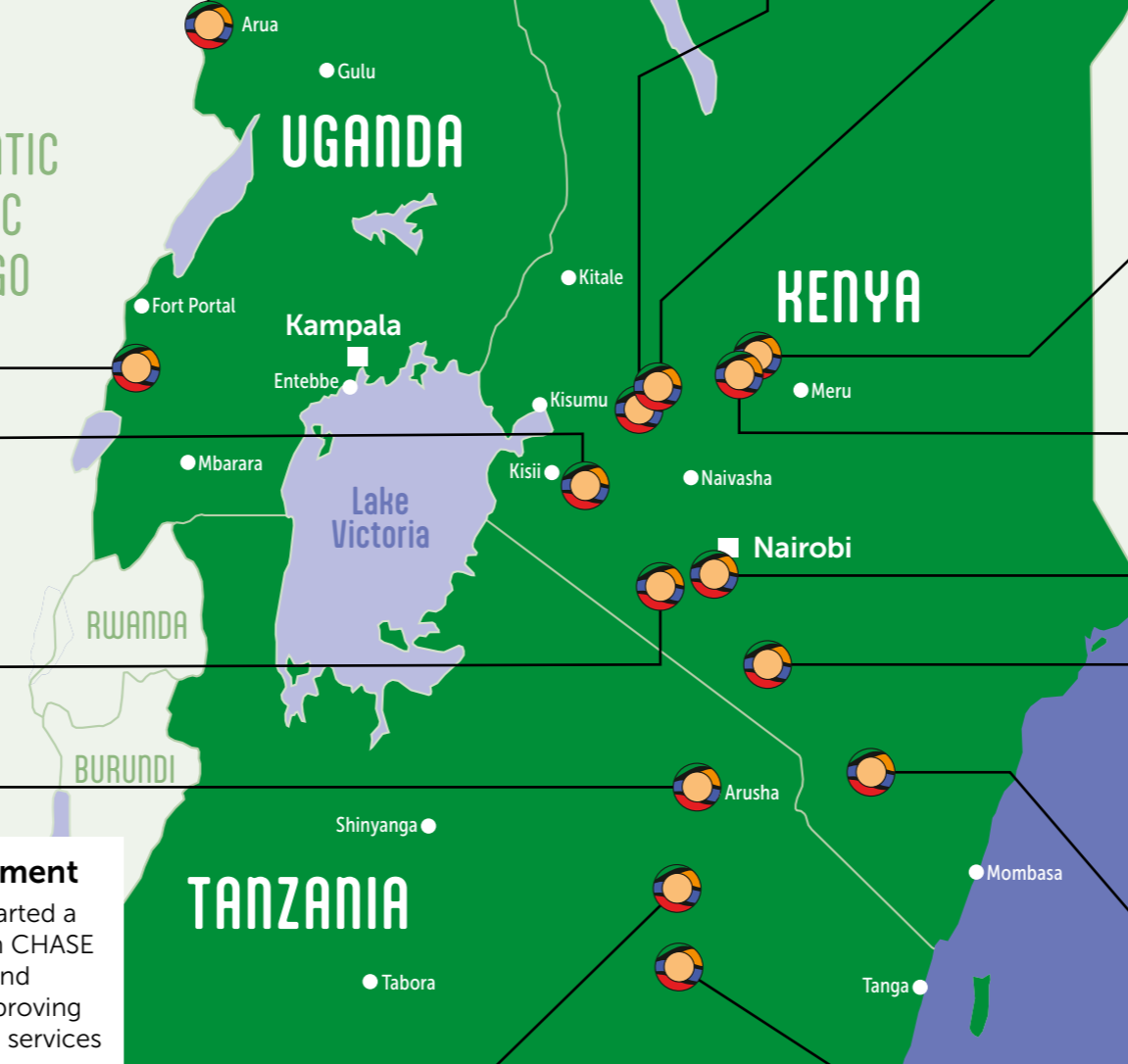
Mount Kenya Trust supported reusable pad production and distribution of 500 dignity packs in three schools, improving menstrual health and enabling girls to stay in class and participate fully in school activities.

The Maa Trust strengthened local leadership and accountability in health services through training and supporting the Health Facility Management Committee.

DEMOCRATIC REPUBLIC OF CONGO

Communities Health Africa Trust exceeded expectations in their provision of both information and health services by reaching new, underserved communities living around the Tana River.

South Rift Association of Land Owners launched outreach clinics from two additional health centres, extending integrated health and conservation support to many more communities.



Reproductive Health Network Kenya concluded training for 120 healthcare providers across Meru County, helping improve adolescent- and youth-friendly sexual and reproductive health services.

Honeyguide Foundation have worked with the Makame Wildlife Management Area (WMA) for several years. We collaborated with Honeyguide Foundation, Makame WMA and MWEDO to establish a new community health programme. It is part-funded by Makame WMA's income from its conservation work.

Maasai Women's Development Organisation (MWEDO) started a new project in collaboration with CHASE Africa, Honeyguide Foundation and Makame WMA. The project is improving access to health information and services for 26,000 people.

Big Life Foundation supported 22 health centres to improve health services and standards of care at outreaches, through standardised quality improvement work. This will benefit their wider community health programme.

Tanzania People and Wildlife completed their pilot project integrating information and awareness on health, particularly Sexual and Reproductive Health and Rights, into their wider conservation work around Loibor Siret.

Makame Wildlife Management Area (WMA) is the largest community-run conservation area (1,040km²) in Tanzania. They are new partners for a joint project with MWEDO and Honeyguide Foundation.

Save the Elephants supported communities living alongside wildlife through integrated health service delivery, youth engagement and community participation. They use creative methods to encourage dialogue and leadership.

Our Impact in 2025



Here are some of the key successes from CHASE Africa's local partners in 2025. These successes have been made possible because of our donors' generous support.

Trained

60 Community Health Workers

in Meru County, Kenya, on Adolescent Sexual and Reproductive Health.

35 Community Health Assistants

in Tiaty sub-counties, Baringo, Kenya.

138 Youth Peer Mentors

from Narok and Kajiado counties in Kenya.

Provided follow-on training on Quality Improvement for staff from

22 health facilities in Kajiado County, Kenya.

Where we work

3 countries
Kenya, Uganda & Tanzania

15 local partners

Services Delivered

580,492 attendances

at information- and awareness-raising sessions,

252,384

of these were for under 19s

112,784

Family Planning and other Sexual and Reproductive Health Services

102,044

other basic health services delivered.

Delivering on Our Strategy (2023-25)

Attendances at information- and awareness-raising sessions

Target

1,500,000

Incl. 500,000 adolescents

Result

1,718,820

Incl. 722,567 adolescents reached

Basic Healthcare Services for Women and Children

Target

300,000 services

Result

397,227 services

Family Planning Services

Target

250,000 services

Over **40%** first-time users

Result

233,277 services

37% first-time users

Other Sexual and Reproductive Health and Rights Services

(Antenatal care, HIV testing & counselling, cancer screening, STI treatment, gender-based violence treatment)

Target

60,000 services

Result

168,981 services

The Health and Wellbeing of Women and Girls

For women in remote communities, access to healthcare is often shaped by distance, cost, social and economic barriers. CHASE Africa works alongside women to remove these barriers, supporting them to make informed choices about their health, their families and their futures. The stories that follow are women's own accounts of how access, information and support can change daily life and make a lasting difference.

 Below: Our local partner MWEDO provides a patient with essential healthcare services





Chemisia

When healthcare finally came within reach, one mother's children began receiving life-saving vaccinations for the first time.

Chemisia is 37 and lives in a remote village in Kenya where poor roads and poverty once made healthcare unreachable. The nearest facility was over 10 kilometres away and she walked because even motorbikes could not reach her home.

"When I was pregnant, I did not go for antenatal care. I delivered both of my children at home because I could not reach the facility and I did not have money for transport."

With limited income and little information about maternal or child health, access to services felt impossible.

"At that time, my baby was two years old and had never received any immunisations. Now, I no longer worry about walking long distances or struggling to find money for transport. Through the Backpack Nurse clinics, I have learned why it is so important to ensure my children are fully immunised and why delivering in a health facility is the safest choice for both mother and baby."



Agnes

A young mother gaining the knowledge and confidence to plan her family's future on her own terms.

Agnes is 21 and balances caring for her child, managing her home, and supporting her husband to manage their livestock.

"I often felt stressed and worried about whether I could provide enough for my family's needs. I had very limited knowledge about Sexual and Reproductive Health, family planning and skilled maternal care."

She wanted a well-spaced family and safer choices for her future, but did not know how to achieve this. Through community dialogues and backpack outreaches, she began accessing services close to home.

"When I attended the dialogues, I felt comfortable asking questions. The Community Health Workers explained everything clearly. I learned important things about family planning, antenatal care, immunisation and women's health. This knowledge empowered me to make better choices for myself and my child."

After discussing child spacing with her husband and finding a method that worked for her, Agnes felt able to plan ahead.

"Today, my life has improved greatly. I feel confident and in control of my health, my family's wellbeing, and my future decisions."



"Today, I feel healthier and more at peace knowing that I am protected from unplanned pregnancies."

Jane

Jane

Accurate information and trusted community support helped one refugee mother protect her health and plan her family's future.

Jane is a South Sudanese refugee and mother of six living in a settlement in Uganda where food shortages and uncertainty shape daily life. When she became pregnant again, just eight months after giving birth, she felt overwhelmed.

"I was not prepared – physically, emotionally or financially for another pregnancy so soon."

Without accurate information or access to services, she turned to unsafe methods to end the pregnancy.

"Heavy bleeding lasted for a whole week. I was very weak and scared, and I realised that my life was in danger. I wanted to space my children and stay healthy, but I did not know how to talk to my husband about it or where to seek help."

A neighbour connected her to a Community Health Worker, who supported open discussion and involved her husband.

"With her guidance, I chose and received a three-year family planning method when a Nurse came to our community."

"Today, I feel healthier and more at peace knowing that I am protected from unplanned pregnancies. I now have the time and strength to care for my children properly. Access to information and support through the Community Health Worker saved me."

Above: A patient with her medication.



Our Story: 25 Years of CHASE Africa

What began 25 years ago as a small initiative to restore forests in Kenya has grown into a regional network advancing community health and environmental resilience. CHASE Africa now collaborates with 15 local partners across East Africa. Read on to discover how our work has evolved over the past quarter of a century.

CHASE Africa began life in 2000 as the Rift Valley Tree Trust (RVTT). At the time, the focus was on restoring degraded landscapes, particularly around the Mau Forest in Kenya. As the work developed, it became increasingly clear that environmental decline could not be separated from the realities people faced in their daily lives: poverty, poor health, children unable to attend school, shrinking biodiversity and a huge unmet need for family planning.

In 2012, we changed our name to Community Health and Sustainable Environment (CHASE) Africa and shifted our approach. We began working with our first health partner organisation in Kenya. We started supporting mobile clinics that delivered family planning and primary healthcare services to people living in remote and marginalised areas.

This marked a turning point. As CHASE Africa's understanding of rural livelihoods deepened, it became clear that improving access to Sexual and Reproductive Health was not a standalone goal, but something that strengthened many other outcomes.

Healthier families were better able to manage their land, support their children's education and adapt to environmental pressures. Over time, CHASE Africa began encouraging other conservation and development organisations to integrate primary healthcare and Sexual and Reproductive Health and Rights into their work, helping them meet their wider objectives more effectively.

 Above: Our local partner MWEDO runs an outreach clinic in Makame Wildlife Management Area in Tanzania

A defining feature of CHASE Africa's approach has been partnership. Rather than delivering services directly, we have focused on working through local organisations that are deeply embedded in the communities they support. From one partner in Kenya, CHASE Africa now supports 15 local partners across Kenya, Uganda and Tanzania. Many of these partnerships have been built over years, allowing trust, learning and shared accountability to grow.

25 years on, what started as a small environmental initiative has evolved into a regional network advancing integrated health and conservation approaches. The context continues to shift, shaped by climate pressures, funding uncertainty and growing demand for services, but the principle remains the same: lasting change is achieved by supporting local organisations to lead change in their own communities.

Our founder

Robin Witt founded the Rift Valley Tree Trust in 2000 to counter the rapid deforestation he witnessed on regular visits to Kenya. None of what has been achieved by CHASE Africa in the past 25 years would have been possible without Robin's unceasing commitment and drive. He was a visionary in 2012 when he shifted our approach and CHASE Africa was formed – not only identifying the vital importance of giving women the chance to choose the timing and spacing of their pregnancies, but also our focus on rural, last-mile communities and seeing the multiple interconnections between human and environmental health. Robin, along with Henry Pomeroy, CHASE Africa's Director for its first 10 years, built the foundations of CHASE Africa and set the organisational culture: unpretentious, authentic, passionate about the work we support, and full of integrity. Characteristics that, alongside the difference our programmes make, are ones we hold on to today.



London event

On 25 September, we marked our anniversary, by celebrating 25 years of impact across East Africa at a reception in London. Seventy supporters joined us to reflect on our journey and future ambitions, hearing from staff and local partners. The evening also featured the premiere of our 25th anniversary film.



Scan to watch our
25th anniversary film

25 Years of Community Health and Sustainable Environment



2000
Robin Witt sets up Rift Valley Tree Trust



2010
Conversations with women involved in tree-planting increasingly highlight lack of access to healthcare and high number of unplanned pregnancies



2014
Start working with first conservation partner, Mount Kenya Trust



2021
Publish 'Supporting Community and Ecosystem Health' – a guide on why and how to include community health and rights-based family planning in conservation programmes



2025
Working with 15 local partners. Delivered a total of 716,000 family planning services and 1,671,000 other health services. Reaching over half a million people with health information per year.



2019
First CHASE Africa Partner Forum with 7 local partner organisations



2023
Join the IUCN Biodiversity and Family Planning Taskforce



The story continues...

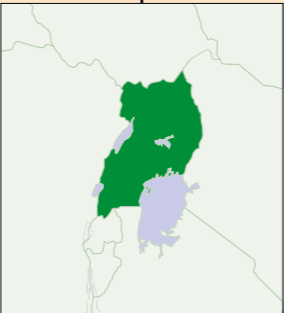
2005
Supporting 2 local partners in Kenya to plant trees around the Mau Forest



2012
Change our name to CHASE Africa



Start working with first local partner carrying out a community health programme. Delivered 5,000 FP services.



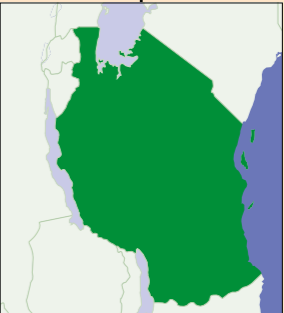
2018
Expand to Uganda



2022
Expansion of Adolescent and Youth programmes to respond to triple threat of high teenage pregnancy rates, school dropout and HIV




2020
Backpack Nurse service delivery expands during COVID



2024
Expand to Tanzania

Social and Behaviour Change Communication: From Awareness to Action

At CHASE Africa, we recognise that behaviour does not change because of information alone. People weigh costs, risks and social consequences when making decisions about their health and lives. Real change happens when a new behaviour feels possible, acceptable and beneficial.

 Below: A Nurse speaks with a patient at an outreach clinic.





What is Social and Behaviour Change Communication?

Drawing on behaviour change science, our Social and Behaviour Change Communication (SBCC) work focuses on three essential conditions for change: motivation (beliefs and social norms); capability (knowledge and skills); and opportunity (supportive households, peers and services).

SBCC is how we move from ‘hearing a message’ to ‘acting on it.’ It is a deliberate approach that uses trusted relationships, well-timed information and practical support to shift knowledge, attitudes and everyday decisions that affect health and rights.

Our work addresses the barriers that prevent women, girls, adolescents and young people from realising their rights and accessing quality Sexual and Reproductive Health (SRH) services.

Through our mobile outreach clinics and Backpack Nurse outreaches, we also build trust in services by addressing confidentiality concerns and correcting misinformation about who services are for and what they provide.

Above: Participants take part in SBCC training at our Partner Forum

How CHASE Africa Strengthened SBCC in 2025

Over the past year, we reviewed how and why change happens in the communities where our local partners work. At the 2025 Partner Forum, we dedicated time to examining what makes SBCC effective.

We explored how different audiences, such as first-time adolescent clients, young mothers, fathers, caregivers, community gatekeepers and providers, face distinct pressures and make different decisions. This reinforced the importance of clear audience segmentation and tailored messaging.

Common barriers identified included fear of judgement, partner opposition, transport and time costs, low perception of risk, misinformation and unequal power in relationships. At the same time, we identified powerful levers for change: trusted peers, male champions, visible service responsiveness and benefits that people respected can see in their daily lives.

Participants also shared practical methodologies that encourage reflection and dialogue rather than one-way messaging. One of our guests, Critical Conversations Association, demonstrated the use of drama, music, dance and storytelling to open discussion on sensitive issues. While the charity Tackle shared how sport, particularly football, can integrate health education into coaching activities, providing an engaging entry point for young people. These approaches create safe spaces where difficult conversations can happen naturally and constructively.

Our Core SBCC Activities

Community dialogues

Structured discussions to identify restrictive norms, correct misinformation and identify practical steps, including referral pathways and timely care-seeking.

Men’s forums

Conversations on shared responsibility, respectful relationships, birth preparedness, contraception support and prevention of violence.

Women’s forums

Practical learning on maternal and child health, postpartum family planning and early warning signs, alongside problem-solving for household constraints, such as financial limitations, food and childcare.

Youth peer-led sessions

Age-appropriate discussions led by Youth Peer Mentors on rights, consent, contraception and navigating youth-friendly services.

We will continue strengthening our SBCC work by improving audience segmentation, refining messaging and building facilitator skills. Using community feedback, routine service data and participant insights, we will adapt content and select the most effective communication channels, ensuring our approach remains responsive, evidence-informed and grounded in community realities.

Right: A men’s dialogue organised by The Maa Trust. Below: A football tournament organised by SORALO.



Major’s Story

As a husband and father, Major, 35, believed being a man meant staying strong, providing financially and leaving family health matters to women. He rarely discussed pressures he felt and saw family planning as outside his responsibility.

After being invited to a men’s forum by a Community Health Worker, he joined out of curiosity and found a safe space for honest discussion about relationships, health and shared responsibility.

“I began to understand how my choices, mindset and silence had impacted not just my health, but those around me. I learned that being informed, respectful and involved doesn’t take away from manhood – it strengthens it.”





Last-Mile Healthcare

For many rural families, distance is a key barrier to accessing health services. Long journeys, poor roads and overstretched facilities prevent mothers and children from accessing essential services. CHASE Africa works with partners to bring healthcare closer to remote communities, ensuring that no one is left behind simply because of where they live.

 Left: A Backpack Nurse visits homes on foot in Kenya



Delivering healthcare to the 'last mile' means reaching communities that are geographically remote, economically vulnerable or socially marginalised. We work with our local partners to come up with practical solutions for removing barriers such as transport costs, clinic opening times and availability of supplies. In parallel, we increase awareness, trust and confidence in local health service provision.

By providing Backpack Nurses and mobile outreach clinics, CHASE Africa delivers a variety of healthcare, including antenatal services, immunisation and family planning, consistently and close to home.

 Above: Esther with a patient

Esther, a Nurse serving remote villages, has seen first-hand what happens when services are too far away.

Before outreach services were introduced, the nearest government facility was often over 20 kilometres from the communities Esther supports. Many families could not afford transport, particularly for services such as antenatal care, immunisation or family planning. As a result, pregnant women missed appointments and children missed out on life-saving vaccines.

"At the facility itself, we also faced another major problem: insufficient supplies of commodities and vaccines."

Often, Esther worked alone with a heavy workload, treating sick patients, giving antenatal care, immunisations, family planning and more.

"When clients came in the afternoon, we had to tell them to return the next day. Many never came back. My hope was for the community to get services easily and for mothers not to miss important healthcare because of distance or time."

Through outreach clinics in remote villages, services are now available closer to families throughout the whole day. Vaccines and commodities are reliably supplied, while Community Health Workers support mobilisation, triage and growth-monitoring. This allows Esther to focus on delivering quality care.

"I felt supported because I was no longer working alone. Life for the community is much better. Health services are closer and no one is forced to travel long distances or spend money they don't have."

"The biggest surprise for me was how quickly mothers returned for antenatal care and immunisation once services were brought closer and were available the whole day."


Today, defaulters have reduced significantly. Preventive care has become accessible, consistent and trusted.

Last-mile healthcare is about more than proximity. It is about dignity, reliability and ensuring that geography does not determine health outcomes. Esther's experience reflects what is possible when barriers of distance, cost and time are removed.




BBC Radio 4 Appeal 2025

In 2025, CHASE Africa was honoured to feature in the BBC Radio 4 Appeal for the first time, highlighting the role of Backpack Nurses in addressing last-mile healthcare. The appeal, read by supporter of our work, Grammy and Brit award-winning singer Joss Stone, focused on bringing vital services to remote communities. Thanks to incredible listener generosity and matched funding, we raised £46,528. We are very grateful to everyone who listened and donated.

 Right: The Maa Trust brings Sexual and Reproductive Health information to remote communities

Building Stronger and Resilient Health Systems

CHASE Africa and our local partners collaborate with the Ministry of Health and local health facilities to strengthen service delivery. Through targeted technical support, we strengthen existing health systems so they can provide better-quality healthcare and respond more effectively to outbreaks and public-health issues.

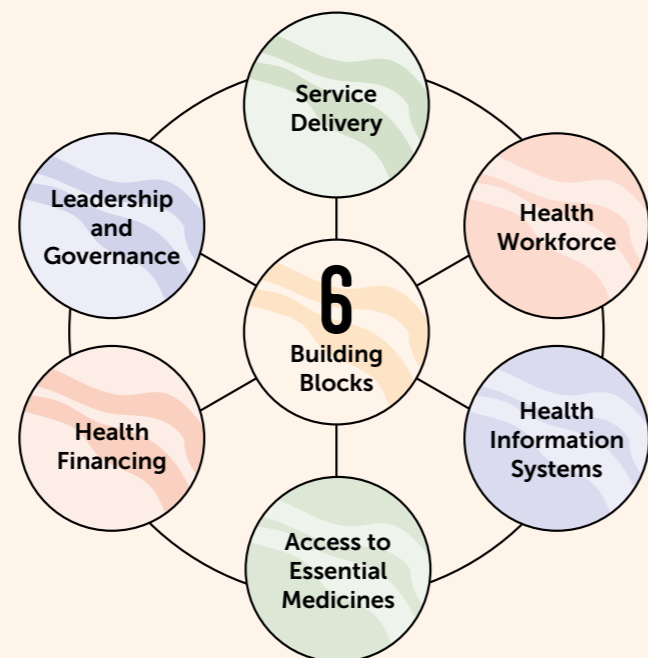
 Below: One of four Backpack Nurse outreach sites launched by our partner Dandelion Africa in 2025 to bring healthcare to even more people



In 2025, we supported a range of interventions to strengthen the local health systems where our programmes take place. This included:

- Enhancing **service delivery** through mobile outreaches, and providing support supervision for Community Health Workers.
- Strengthening the **health workforce**, by training clinical staff on Sexual and Reproductive Health (SRH), including family planning and adolescent SRH.
- Improving **health information systems** by training Health Records Officers and strengthening data collection.
- Enhancing **access to essential medicines** by strengthening supply chains and providing emergency funding for family planning commodities when there are stock outs.
- Health financing** for health infrastructure improvements and supporting mobile outreaches.
- Building the **leadership and governance** of community health structures through training and mentoring of Community Health Management Committees and Facility Management Committees.

Our programmes are guided by the WHO's six health system building blocks, helping ensure that every part of the health system works together effectively.



Training Community Health Assistants to Improve Care in Baringo County

To support Dandelion Africa expand into Tiaty East and West sub-counties in Baringo County, Kenya, we trained 35 Community Health Assistants (CHAs). The training enhanced their mentorship and leadership skills, enabling them to take a more proactive role in managing community health units.

CHAs are a vital part of the community health system. They supervise and support Community Health Workers (CHWs), significantly influencing CHW engagement and effectiveness. They also act as a crucial link between the community, health facilities and the Ministry of Health.

With enhanced skills, the CHAs are now better equipped to provide reliable support to CHWs in remote villages and improve overall management of community health services.

Tackling Teenage Pregnancy Through Community Health Worker Training

To address the challenges of high rates of teenage pregnancy, rising HIV infections and associated school drop out in Meru County, we expanded the provision of Adolescent and Youth Sexual and Reproductive Health services delivered by our local partner, Mount Kenya Trust.

To strengthen and enhance this project, we provided training to 60 additional Community Health Workers on Adolescent Sexual and Reproductive Health. This equipped them with the knowledge and skills to deliver youth-friendly Sexual and Reproductive Health services in their communities.

We also trained Health Records Information Officers to improve the accuracy and consistency of Sexual and Reproductive Health data collected from both Community Health Workers and health facilities. Improved data quality enables better targeting of services.

Improving Service Quality in 22 Rural Health Centres

In Loitoktok Sub-county, Kajiado, we strengthened the quality of care across 22 rural health facilities supported through Big Life Foundation's community health programme. Through regular supervision and hands-on coaching, facility teams learned to use the SafeCare Quality Improvement Tool to identify service gaps, prioritise actions and track progress. This led to practical improvements in infection prevention and control, patient flow and waiting time management, clinical documentation, medicine management and respectful care.

These changes are already making healthcare safer and more reliable. Patients now experience shorter waiting times, better privacy, more consistent access to essential services and better communication and information from health workers. Over the past year, 69% of supported health facilities showed measurable improvements during follow-up assessments, giving communities confidence in the quality and availability of services available close to home.

Stronger Links Between Community and County Health Systems

Our local partners facilitated regular coordination meetings that connected Community Health Workers, Community Health Assistants, health-centre staff and county health teams. These sessions improved stock management, including vaccines and family planning commodities, outreach planning, referrals and follow-up. As a result, communities experience reliable services, better continuity of care and faster resolution of barriers like long waits and missed appointments.

 Above & opposite: Our partner, Save the Elephants, delivers community dialogues to rural communities in Kenya




Healthy Communities, Healthy Environments

Across East Africa, the programmes we support are based in rural communities where lives and livelihoods depend directly on natural resources.

When livelihoods are affected by climate, the effects are felt immediately in household nutrition, income and health. For this reason, we do not treat health and the environment as separate issues. Our partners adapt their activities to their specific context, but the aim is consistent: strengthen community health while promoting more sustainable use of natural resources.



 Right: A woman tends to her kitchen garden in Bidibidi Refugee Settlement in Uganda



Rangelands in Kenya and Tanzania

In pastoralist areas of Kenya and Tanzania, we work with five organisations supporting communities whose income depends on livestock and communal rangelands. Our health outreaches run alongside training on rangeland restoration, grazing management and improved water access.

Partners support local grass seed banks, soil bunds and discussions on land governance. Sustainable rangeland management leads to healthier livestock, improved nutrition and reduced household vulnerability. We integrate messaging on both human and environmental health at community dialogues and look for opportunities for cross-messaging to widen reach.

Bidibidi Refugee Settlement in Uganda

In Uganda, RICE–West Nile integrates environmental action into community health projects and efforts to improve livelihoods in Bidibidi Refugee Settlement. Alongside Sexual and Reproductive Health outreach and self-help groups, families establish kitchen gardens, learn soil and water conservation techniques, and explore how land degradation contributes to food insecurity and poor health. Environmental awareness forms part of regular community dialogues, helping families understand how land use, tree cover and water management affect income and wellbeing.

Forest Communities in Kenya

In Kenya’s forest communities, Mount Kenya Trust links community health programmes with forest protection and agroforestry. Work to safeguard the Mount Kenya forest ecosystem, a critical water source for much of the country, now runs alongside community health activities and small-scale reforestation.

Rwenzori Mountains and West Nile in Uganda

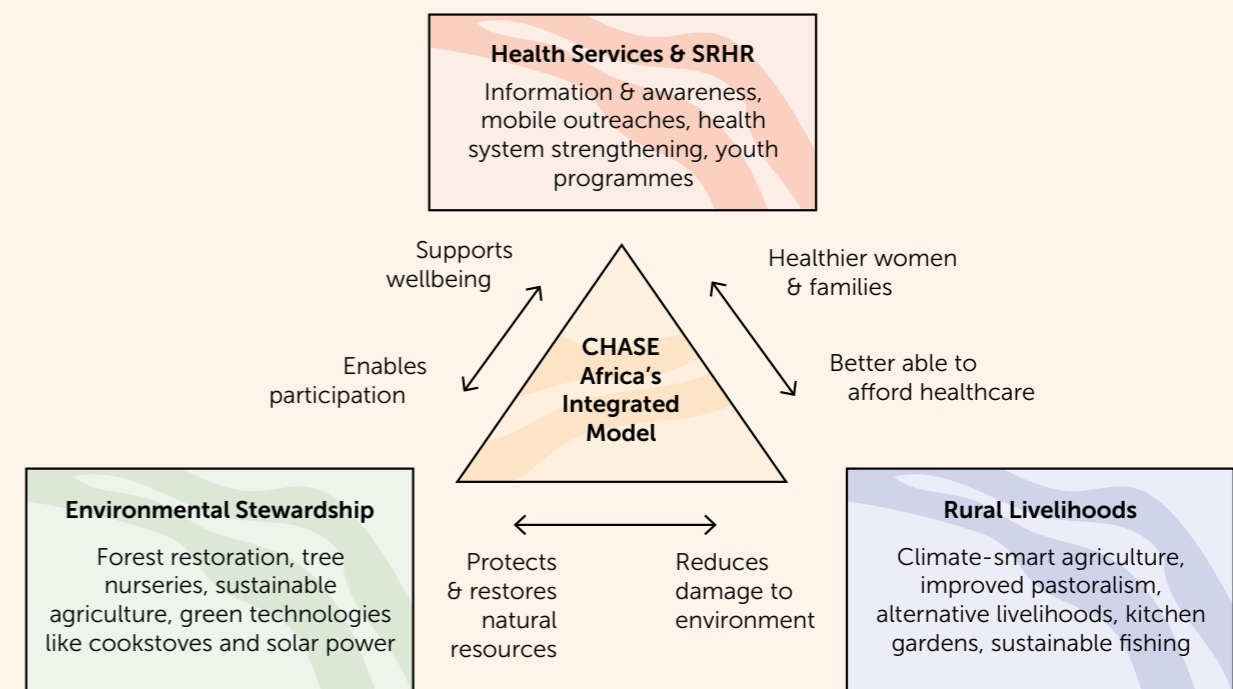
In Uganda, we have supported climate-smart agriculture training, including water harvesting, soil conservation, natural pesticides and intercropping. Alternative livelihoods, such as poultry rearing and vegetable growing, diversify incomes, particularly for women. We have also supported fishing communities along the River Nile with education on sustainable fishing practices alongside health services.

Across all these settings, health education – especially on reproductive, maternal and child health – runs in parallel with environmental activities. When women are able to look after their health and decide if and when to have children, they are better able to take part in farming, conservation work and community decisions. Keeping girls in school, reducing teenage pregnancy and supporting young people to shape their own futures are key parts of this work.

In the following years, CHASE Africa aims to strengthen collaboration between health and conservation even further. There are clear opportunities for more cross-messaging, shared training and joint community engagement. We are having conversations with organisations to continue to integrate health, livelihoods and environmental action more widely. Together, they create the conditions for lasting resilience for both people and the landscapes they depend on.

CHASE Africa Integrated Model

Each pillar reinforces the others. When people are healthier they can better protect the environment and improve their livelihoods; when ecosystems flourish, livelihoods and human health improve.




The CHASE Africa Partner Network: Collaboration and Learning

In the current, rapidly changing environment, effective development depends on organisations working together, continually learning and adapting. CHASE Africa's Partner Network is a highly valued forum for collaboration and shared learning.

Rather than focusing on training for individual partners, we support peer exchanges, creative workshops, multi-partner training and learning visits. We give our local partners opportunities to discuss challenges, share ideas and benefit from joint training and technical support. These opportunities enable our partners to test new approaches, share such experiences and reflect on what has worked in their own communities.

For CHASE Africa, collaboration in practice looks very different from a formal agreement on paper. It is reflecting together after a long day in the field and discussing what is working and what is not. This is amplified within a network of partners all striving to address common challenges to bring lasting change to the lives of women and girls. We draw on skills and approaches from other organisations (both within the CHASE Africa network and more broadly) to strengthen our programmes and deepen their impact. Then we share learning from within our network with other organisations.

Over the years, we have learnt that successful partnership comes from careful listening by CHASE Africa to its partners and our partners listening to the communities they support. In parallel strong, trusting relationships, built over time, are core to our success.

 **Right: Attendees at our annual Partner Forum in Kenya**





Annual Partner Forum

A key moment in the year was our annual Partner Forum, held in May at the Brackenhurst Centre in Limuru, Kenya. We welcomed more than 50 delegates, including partner staff and peer organisations working in related fields, creating a valuable space for shared learning and collaboration.


Over three days, sessions focused on: Social and Behaviour Change Communication; Gender Transformative Programming; Climate Resilience and Health; Health Systems Strengthening; Monitoring, Evaluation and Learning; and Safeguarding.

Our new trustee, Dr Kate Campbell, delivered training on family planning methods and quality service delivery. Throughout the Forum, there was an emphasis on integrating health and environmental approaches to achieve greater cross-benefits and lasting impact.

Participants valued both the formal learning and informal exchanges that strengthened relationships across the network. As Paxton Maina from Mount Kenya Trust reflected: *“These shared experiences highlighted how interconnected our work is and reinforced the importance of collaboration in driving long-term meaningful change.”*

Listening to Partners’ Priorities

Following discussions at the May 2025 Partner Forum, CHASE Africa organised webinars on Gender Equality and Social Inclusion, and on Social and Behaviour Change Communication. Two peer support groups, one for programme managers and one for project officers, were also set up. These groups provide space for sharing challenges, practical solutions and mutual support.

 Above: Attendees join a variety of workshops at our Partner Forum

“It was energising to see so many organisations committed to community health and social justice coming together.”

Fortunata Omondi, Child.org
(charity guest at our Partner Forum)

Strengthening Support Through Local Presence

In October 2024 we recruited a Nairobi-based team member, Francis Kadiri, as Sexual and Reproductive Health and Rights (SRHR) Manager. Francis has deep knowledge of the Kenyan health system, as well as many years’ experience in Sexual and Reproductive Health and Education, and gender and youth programming. Having a presence on the ground locally has enabled CHASE Africa to deepen its technical support to local partners and helped facilitate cross-learning between partners.

 Right: Francis, SRHR Regional Manager

“I work closely with our local partners and conduct regular field visits. This enables me to understand local realities and provide practical technical support that strengthens local programmes.”

Francis, SRHR Regional Manager



Looking Forward to 2026



- 🌍 **We will publish our strategic plan for 2026 and beyond**, outlining the direction for CHASE Africa's continued impact and growth.
- 🌍 **We will launch our comprehensive toolkit for new and existing partners** to support the implementation of community health programmes. It will include specific resources on Sexual and Reproductive Health and Family Planning.
- 🌍 **We will complement our portfolio of project activities in 2026 by setting up Young Mothers Clubs** to improve both maternal and child health and development.
- 🌍 **We will continue to build the capacity of our local partners' staff, and selected Ministry of Health personnel**, through a Train-the-Trainers programme. This will enhance their expertise in Sexual and Reproductive Health and Family Planning. We will also strengthen the Trainers' facilitation skills to enable stronger behavioural change communication.
- 🌍 **We will carry out comprehensive surveys across several programme areas** to deepen our understanding of community needs and to better demonstrate our impact; a key milestone in strengthening our evidence-base for future investment.
- 🌍 **We will hold our annual Partner Forum in September 2026**, bringing together all our local partners for shared learning and knowledge exchange. As in previous years, we will also invite other organisations working on similar issues who are keen to learn about CHASE Africa's approach, better understand the practical experience of our local partners and enrich the discussions through their own best practice and experience.
- 🌍 **We will participate more actively in forums, networks and knowledge-exchange platforms**, to share our programmatic experience more widely and advocate for the needs of women and girls in the communities that we support.

🌍 **Left: A community dialogue organised by MWEDO in Tanzania**

Financial Review

In 2025, expenditure on charitable activities in the year was £815,176 (compared to £825,307 in 2024), this nearly maintained expenditure on charitable activities, despite a slightly lower income.

The charity's total income in 2025 was £832,140 slightly down from £850,379 in 2024. The chart opposite illustrates our income over the past 10 years. Despite an extremely challenging fundraising environment in 2025, considering unprecedented cuts to international development aid, we had many positive achievements in terms of fundraising.

We ran our first BBC Radio 4 Appeal, raising £46,528. We received our first legacy of £20,000. In 2025, we were also successful in winning grants from five new funders, including two multiyear grants and our first grant from Guernsey Overseas Aid.

We continue to have a significant number of trusts, foundations and individuals who have supported us with repeat funding, demonstrating our strong grant stewardship and the impact we are delivering through the programmes we support.

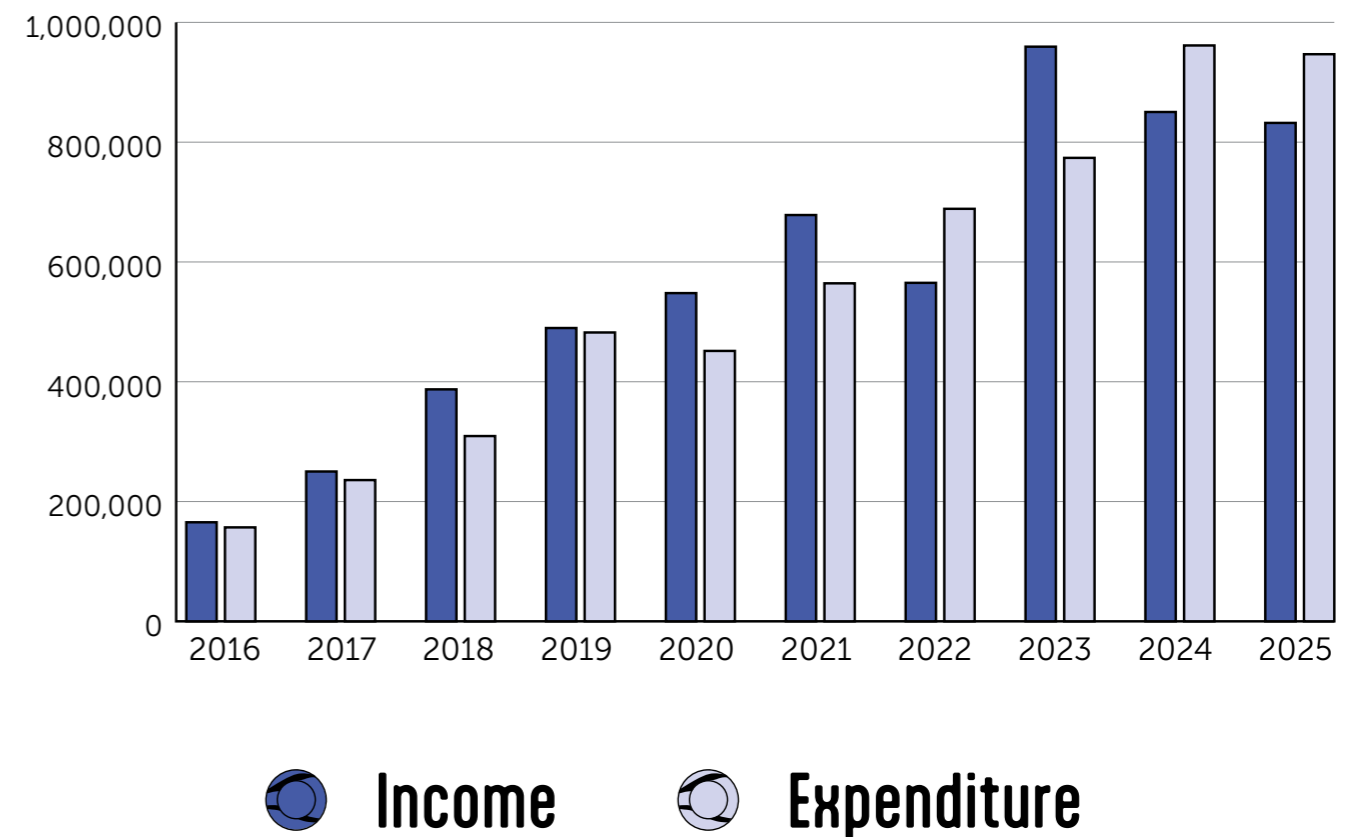
We continue to hold a good level of unrestricted reserves of £212,533, which are comfortably above our reserve policy level of £150,000.

Key achievements for the year included:

- £620,243 worth of grants were made to partners in Kenya, Uganda and Tanzania (compared to £624,591 in 2024). This maintained the significant (33% increase) achieved in 2024.
- Expenditure on charitable activities remained high at £815,176 (compared to £825,307 in 2024) despite slightly lower income.
- Income from trusts and foundations was £578,724 compared to £656,214 in 2024, whilst income from institutional (government) funders increased to £67,540 (up from £47,029 in 2024) due to follow-on funding from Global Health Partnerships and a new grant from Guernsey Overseas Aid.
- Individual donations (including Gift Aid) increased from £114,753 in 2024 to £168,370 in 2025. This was partly due to our first BBC Radio 4 Appeal, which raised £46,528, as well as a Big Give Green Match Fund, some successful individual fundraising and our first legacy of £20,000.

The charts shown demonstrate our historic income and expenditure growth over the past 10 years and compare CHASE Africa's income and expenditure during 2024 and 2025.

Historic income and expenditure growth over the past 10 years



Income



Expenditure

Statement of financial activities

for the Year Ended 31 December 2025

| | Unrestricted Funds £ | Restricted Funds £ | Total 2025 £ | Total 2024 £ |
|------------------------------------|----------------------------|--------------------------|--------------------|--------------------|
| Income and Endowments from: | | | | |
| Donations, grants and legacies | 360,396 | 324,030 | 684,426 | 770,557 |
| Other trading activities | 140,983 | 0 | 140,983 | 66,485 |
| Investment income | 13,337 | 0 | 6,731 | 13,337 |
| Total Income | 508,110 | 324,030 | 832,140 | 850,379 |
| Expenditure on: | | | | |
| Raising Funds | 131,659 | 0 | 131,659 | 136,155 |
| Charitable activities | 137,384 | 677,792 | 815,176 | 825,307 |
| Total expenditure | 269,043 | 677,792 | 946,835 | 961,462 |
| Net Income / Expenditure | | | | |
| | 239,067 | (353,762) | (114,695) | (111,083) |
| Funds Transfer | (230,896) | (230,896) | 0 | 0 |
| Net movement in funds | (8,171) | (122,866) | (114,695) | (111,083) |
| Reconciliation of funds | | | | |
| Total funds brought forward | 204,362 | 244,030 | 448,392 | 559,475 |
| Total funds carried forward | 212,533 | 121,164 | 333,697 | 448,392 |

Balance Sheet

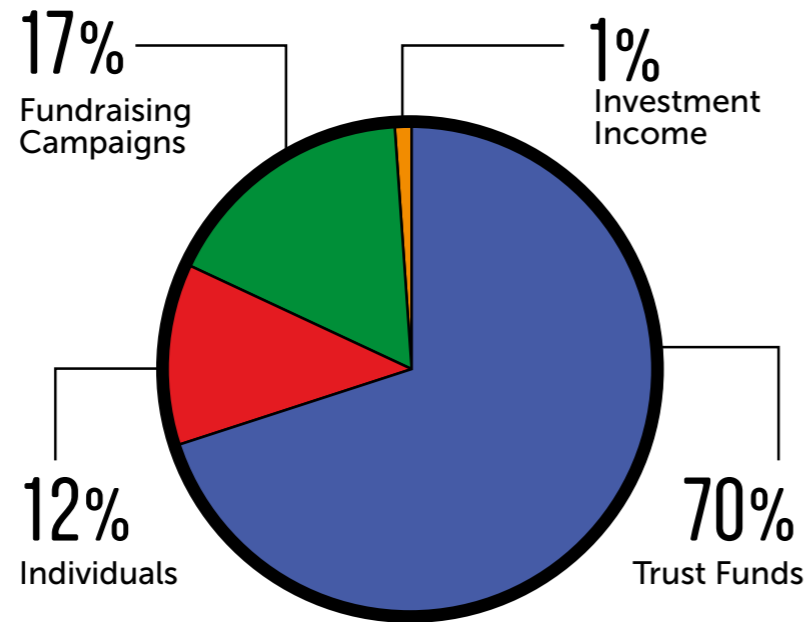
as at 31 December 2025

| | 2025 £ | 2024 £ |
|---|----------------|----------------|
| Current Assets | | |
| Debtors | 171,974 | 248,685 |
| Cash held in Long Term Deposits | 86,770 | 137,212 |
| Cash held in Savings and Current Accounts | 80,176 | 76,563 |
| | 338,920 | 462,460 |
| Creditors | | |
| Amounts falling due within one year | (5,223) | (14,068) |
| | 333,697 | 448,392 |
| Net Assets | | |
| | 333,697 | 448,392 |
| Funds of the charity | | |
| Restricted funds: | 121,164 | 244,030 |
| Unrestricted funds: | | |
| Unrestricted income funds | 212,533 | 204,362 |
| Total funds | 333,697 | 448,392 |

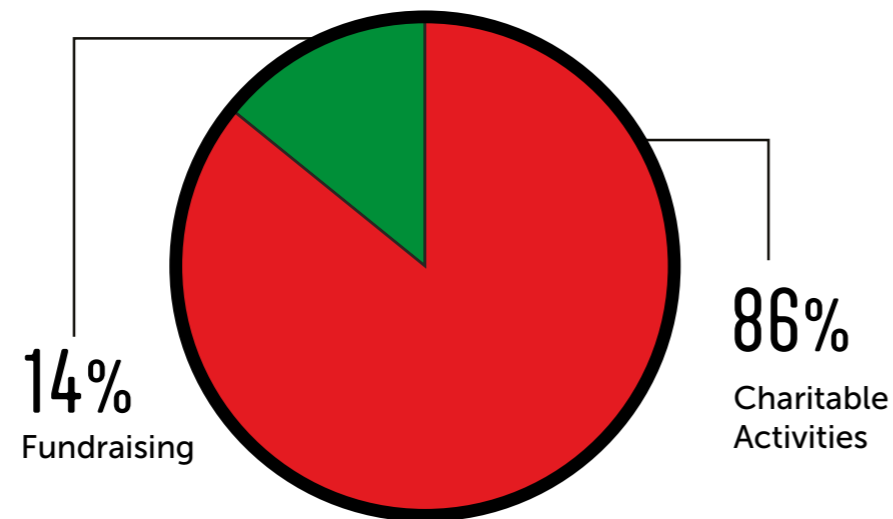
CHASE Africa's Income and Expenditure in 2025 and 2024

2025

Income
£832,140

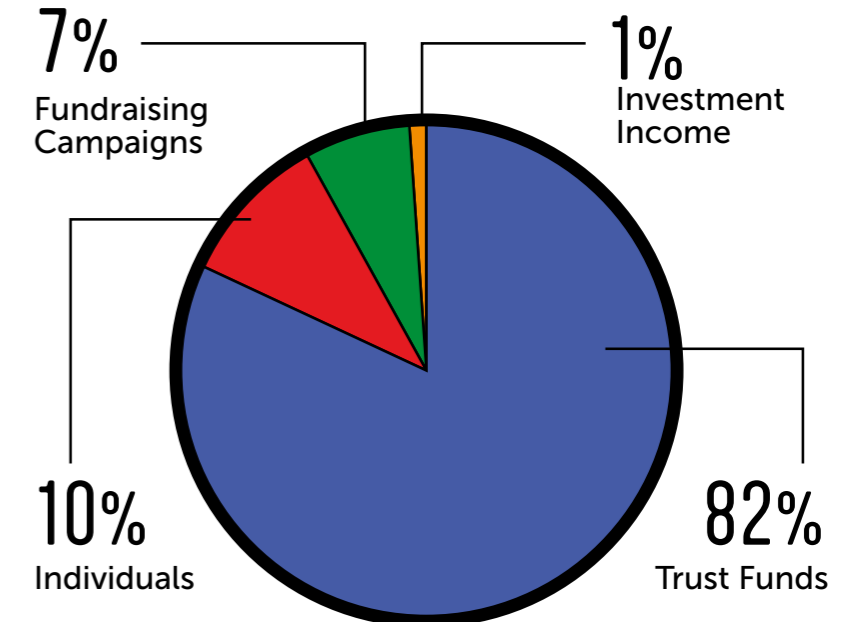


Expenditure
£946,835

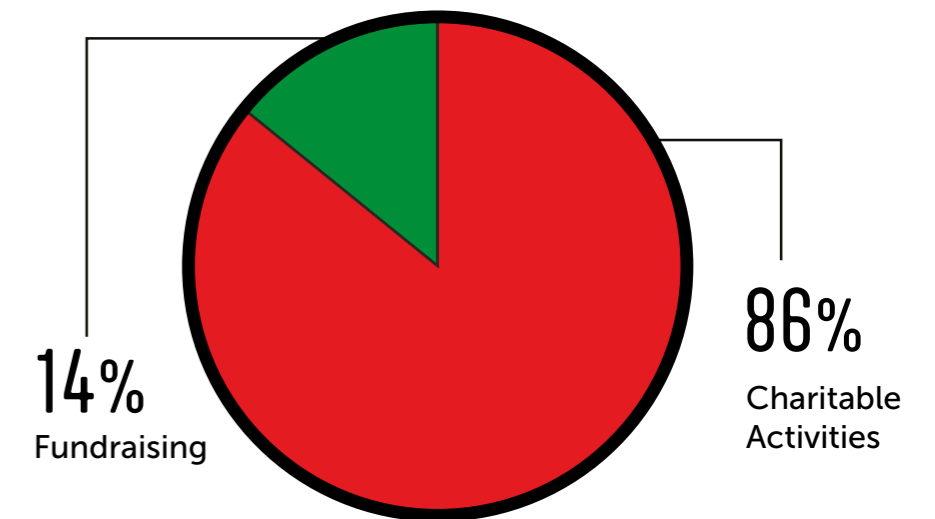


2024

Income
£850,379



Expenditure
£961,462



Reference and Admin

Trustees

Kate Campbell
Miles Geldard (Chair)
Krupa Hirani Mehta (Treasurer)
Claire Maxey
Matilda Mutanguha
Dossie Payne
Tori Rumbold Wright

Registered Office

The Office, Barrow Farm
Rode Hill, Rode
Somerset
BA11 6PS

Charity Registration Number

1200992 (previously 1082958)

Chief Executive Officer


Harriet Gordon-Brown

Finance Manager

Ruth Haynes

Independent Examiner

Milsted Langdon
4 Queen Street
Bath
BA1 1HE


 Below: A Community Health Worker and Nurse at an outreach clinic organised by SORALO

Thank You

Our work continues because of the extraordinary community that stands alongside us.

We are immensely grateful to the individuals, trusts, foundations and institutions who make our work possible. Together, we are improving the wellbeing of entire communities – particularly women and girls – by providing access to essential healthcare services, including family planning, and information. We are strengthening programmes in Kenya and Uganda and building new partnerships in Tanzania that continue to demonstrate the vital connection between human health and the protection of ecosystems.

In a changing funding landscape, it is your collective commitment that enables us to continue delivering vital projects and standing alongside the communities we partner with. At a time when international aid budgets are under increasing pressure, your support has ensured that our programmes have not only continued, but delivered meaningful impact where it is needed most.

 Below: Loading up medical supplies for a Backpack Nurse outreach organised by Big Life Foundation

We extend our sincere thanks to our Trustees, Ambassadors and Advisory Group for their guidance, expertise and ongoing commitment.

We are very grateful to the individuals and organisations who fundraise on our behalf. Whether taking on personal challenges or bringing communities together, you raise both crucial funds and awareness, extending our reach far beyond what we could achieve alone.

We also acknowledge those who have kindly chosen to leave a gift in their Will. Legacies play a transformative role, helping to secure the future of our work for generations to come.

To those who stay connected, reading our updates, sharing our stories, engaging with our campaigns and following our work throughout the year, your advocacy helps amplify the voices of the communities we serve.

We encourage you to stay connected by following us on social media and subscribing to our newsletter to see the difference your support makes.





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REGULATOR**

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(Former no. 1082958.)



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