After years of hard work, maintaining high quality services and focusing on strategies that are effective, our programs are making undeniable change. We are starting to have the impact we envisioned many years ago. You’ll see our impressive results in the subsequent pages of this report. What I’d like to share with you is something that the report doesn’t explicitly demonstrate: Roots of Health has reached a turning point and has a seat at the table.

What do I mean by this? The Department of Health, the main gatekeeper of reproductive health service provision in Palawan, has invited us to partner with them to train their health workers and provide supplies when stock-outs occur. The Humanitarian Response Consortium has asked us to join their coalition to ensure reproductive health services and supplies are available during emergency situations. Family Planning 2020 invited us for a regrant to continue our mission trips to isolated provinces of the Philippines.

Over the last eight years, we have developed, adapted and honed our programs to be as effective as possible, and it seems that local, national and global actors are noticing our work. Roots of Health has become the go-to organization when it comes to technical and practical reproductive health expertise in Palawan. Ami and I are so proud of the team for their professionalism, passion and commitment to ensure we reached this turning point. We believe that this success comes from our commitment to keep the women, girls and young people that we serve, at the center of all we do.

We hope to continue to grow in 2018 and expand our reach, despite the challenges that persist in Palawan. A desire to do more for our clients and young people are what fuel our work and what got us to this point; they are our priority whichever table we’re sitting at.

I’d also like to take this opportunity to thank Dr. Susan Evangelista for her tireless efforts and commitment to a successful Roots of Health—she is the reason we’re all working toward this shared vision. Susan retired this year, but remains close to all that we do and will always be a thought-partner as we explore what comes next for the organization.

And thank you to all of you for your continued support of Roots of Health.

Marcus Swanepoel
For eight years, Roots of Health (ROH) has served the reproductive health needs of the most marginalized members of Palawan society: women, girls and young people. Roots of Health operates under the assumption that access to healthcare is a human right and that the rights of the people that we serve are often overlooked.

Our team supports the realization of these rights through a two-pronged approach of service delivery and education. We envision self-reliant women, young people and families leading healthy reproductive lives in Palawan. We seek to improve the health of women and girls and to reduce the incidence of maternal mortality, unplanned pregnancy and school dropouts. We achieve this by providing accurate sexuality health education in schools and universities, partnered with non-judgmental clinical services in communities.

Investing in reproductive health and young people is smart. When women get to choose how many children they have, mouths are more likely to be fed. When adolescents don’t get pregnant, they stay in school and have more opportunities for professional success. When boys and girls are taught about their bodies and health, they’re less likely to adopt risky behaviors. Supporting the reproductive health needs of women, girls and adolescents makes sense!
The age of consent in the Philippines is 12 years of age, yet adolescents are unable to obtain reproductive health services without parental consent until the age of 18; these policies have significant consequences. Currently, 25% of all Palawan births are attributed to adolescent pregnancies and HIV cases have increased five-fold over the last three years. Further, new cases disproportionately affect young people. Government health care is far from adequate, funding for contraception is especially limited, and stocks are often unavailable. In addition to all of this, maternal mortality remains an issue, as many women are unable to access prenatal screenings and at-home births are still common.

Roots of Health has been operating in rural Palawan as the only reproductive health organization for eight years. Given the lack of local government support for our issue areas, in large part due to religious conservatism and personal beliefs, ROH is providing the majority of the reproductive health services in the province. These are the realities that have fueled our work and programming. And this is why we need to do more.

By the age of 19, one in six teenagers will be a mother.

**Where We Work**

**TEENAGE PREGNANCY IN THE PHILIPPINES**

<table>
<thead>
<tr>
<th>Area</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Palawan</td>
<td>1/4</td>
</tr>
<tr>
<td>National</td>
<td>1/6</td>
</tr>
<tr>
<td>Global</td>
<td>1/10</td>
</tr>
</tbody>
</table>

2015 UNFPA  
2017 Philippines DHS
Our clients select their preferred method of contraception once they’ve received family planning consultation from one of our nurses. Every available form of modern contraception is explained to her and discussed in relation to any health issues she may have. Once the client decides which form she thinks is best for her, we provide it for free.

Currently, the government is mandated to provide women of reproductive age with the means to control whether or when to have a baby. However, it has struggled to secure and guarantee this basic human right, particularly for the country’s poorest women who cannot afford to buy contraception.

Palawan’s leadership does not support reproductive health and routinely allocate 0% of the provincial budget towards contraception. The Department of Health can provide municipalities with free commodities, but most municipal health centers are understaffed and lack the resources to order supplies. Thanks to our inventory management systems, ROH was able to fill this gap. We supplied 11,350 commodities to 19 municipalities to ensure that women in these areas received uninterrupted services.

Because of the great demand for contraception, we have committed to provide free, high-quality services to everyone who wants to safeguard their reproductive health, but cannot afford to do so. ROH provides these services in our clinic, in each of the 12 communities we serve, and in municipalities throughout the province as part of our missions.

We provided reproductive health information to three times more women and adolescents than in previous years.

<table>
<thead>
<tr>
<th>Modern Contraceptive Users</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,748</td>
<td>5,853</td>
<td>17,893</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Years of Contraceptive Coverage</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,625</td>
<td>9,141</td>
<td>18,714</td>
<td></td>
</tr>
</tbody>
</table>
Breaking the Cycle

Palawan continues to have high rates of unplanned teen pregnancy. Not surprisingly, many young people do not communicate with their parents about their sexual behavior. So we’re heartened to notice an increase in the number of mothers bringing their teenage daughters to our clinic in order to access contraception.

The Philippines remains a very conservative society, and many of the mothers who visit us are not happy their daughters are sexually active. But they recognize that while they cannot control their children’s’ actions, they can help protect them from unplanned pregnancies and infections.

“I don’t want my daughter to be like me, to have the same problems I had when I got pregnant at 14”, says Maria. “But she has a boyfriend and I can’t make her stay home”. Our nurse talked to Maria and her daughter together, and Maria’s daughter opted to get an implant. We see this as progress in the right direction. Despite the challenging operating environment, we strive to ensure young people have supportive and enabling environments, so that they don’t find themselves in a situation similar to that of Maria’s.
We enrolled 90 pregnant clients in the Philhealth government insurance scheme. This allowed mothers to give birth in a hospital with no charge, and avail of newborn screenings.

We aim to empower women to plan their pregnancies, so that they have the best pregnancy outcomes when they choose to have a child. Our Healthy Pregnancy Program ensures that all the women in our community sites can access high quality, comprehensive prenatal, birthing, and antenatal care in order to have the best pregnancy outcomes possible.

The Healthy Pregnancy Program provides continuous care to many low income communities with the lowest access to health services.

On the frontline of service provision, our Community Health Advocates (CHA) make sure that all our pregnant clients receive regular prenatal check-ups during community clinical services. This service is complemented with free prenatal vitamins and up-to-date laboratory examinations with our partner local government centers.

Our clinical team and CHAs care deeply about the individuals they serve. They regularly go the extra mile and accompany women to the hospital or assist with deliveries. As a result of these services, the majority (92%) of our pregnant clients, especially high-risk clients, were able to deliver in a hospital facility or private birthing home.
Our Community Health Advocates allow the Roots of Health mission to transcend the clinic walls and ensure women and young people in 12 local communities around Puerto Princesa gain easy access to reproductive health services and information. The 71 CHAs are a carefully selected group of trained, empowered and enthusiastic women leaders from each of our communities. They help keep track of the community members’ reproductive health needs, keeping us informed when individuals need contraception, prenatal check-ups, are about to deliver or if an emergency arises.

Our CHA training program emphasizes technical knowledge and skills in family planning and prenatal health care, giving the CHAs increased capacity to better support their communities’ health.

One of the most important results of our training is our CHAs becoming equipped to apply communication and negotiation skills in influencing behavioural change among women and young people.

This year, we provided CHAs with information on HIV/AIDS prevention and treatment, which they were able to integrate into their conversations about family planning and care. As a result, more pregnant women accessed free HIV screening to prevent mother to child transmission of the virus. Additionally, CHAs now encourage condom use among non-monogamous couples, emphasizing that it is the only contraceptive that can prevent both unplanned pregnancies and HIV and other sexually transmitted infections (STIs).

We held refresher courses on all methods of contraception to help CHAs better understand how different contraceptives affect a woman’s body. We discussed the physiological properties of each form of contraception and the ideal methods based on a woman’s health condition to ensure that women access the form of contraception that is best for their individual needs.

Throughout the year we held workshops for the CHAs on Ethical Principles in Healthcare, so they can better grasp the basic principles under which we operate. They now understand the human rights principles which underpin the Reproductive Health Law and its relevance to our work and overall mission.

Finally, our intensive Pregnancy Health (“Buntis”) sessions empowered the CHAs to help mothers prepare for childbirth by utilizing simple checklists. Many of our CHAs have noted how much easier it is to monitor the progress of each pregnancy with these checklists. These lists also help mothers have a better sense of what to expect during each trimester, and how to plan ahead in the lead-up to their delivery.
Despite the current developments around the province, Palawan is still predominantly made up of rural communities and island municipalities that oftentimes have inconsistent access to affordable or free health services.

Because of this, our clinical team conducts regular mission trips to geographically isolated and marginalized communities, so that more women and adolescents have access to the services and information they need.

These trips focus on family planning counseling, increasing the number of contraceptive acceptors and training local health care providers. While local health providers have more regular access to short-term methods of contraception like pills and DMPA, we found that they have less access to Long-acting reversible contraceptives (LARCs), such as implants and intrauterine devices (IUDs).

Because of this, our missions focused on the provision of LARCs to guarantee that women could access their preferred contraceptive method.

In the 17 municipalities we visited, we educated more than 8,000 community members about reproductive health and provided modern forms of contraception to over 5,000 women of reproductive age.

Although implants continued to be the preferred LARC among our clients, we saw a noticeable increase (481%) of IUD acceptors this year.

We reached ethnic minorities, indigenous populations and some of Palawan’s most marginalized women during our mission trips to the northern and southern parts of the province. Our clinical team always returned from trips with stories of the women and adolescents they served, the difficult travel and logistics conditions they faced, and a sense of urgency and excitement to start the next mission.

We would not have been able to accomplish these successes without the support of our local government counterparts.

Our clinical team worked hand-in-hand with the Palawan Provincial Health Office and Rural Health Unit employees. We look forward to continued partnership and collaboration in years to come!
Our first mission to the municipality of Taytay, about 200 km north of Puerto Princesa, was almost cancelled due to the devastation from a passing typhoon. When our nurses reached the Taytay bridge, they found it destroyed.

With the help of locals, our dedicated team forged ahead making several return trips on makeshift wooden bridges to be able to transport all of the contraceptive supplies.

Upon arrival they were warmly welcomed by women and girls, many of whom had traveled for days to be there. Most of the participants had never used any contraception and so listened eagerly to our information sessions.

Women overwhelmingly chose to get implants, and our team served 817 clients over a three day period.

**Reaching Remote Areas**

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Women overwhelmingly chose to get implants, and our team served 817 clients over a three day period.
A major part of Roots of Health’s work is our Youth Program. This work can be broadly divided into two sub-portfolios: our comprehensive sexuality education (CSE) in high-schools and colleges, and our Youth Advocate (YA) program. We believe that education, and a focus on young people, is necessary to be able to reduce the reproductive health disparities in Palawan.

Despite the undeniable increases in adolescent pregnancy and incidences of HIV among young people, CSE remains a low priority among school administrators and decision-makers. Teachers report that providing sexuality education would encourage “risky behavior” and they prefer to teach less contentious topics like anatomy or abstinence-only lessons.

Our teacher and school principal trainings center around young people’s needs, empathy and scientifically-based facts on youth sexuality.

Similar to the CSE courses our Youth Team provides for students, a significant amount of time is equally spent debunking myths and misconceptions. We see attitude changes almost immediately through our pre and post-tests.

Our current modules are divided into three core lessons: puberty for 7th-8th graders; reproductive health for 9th-10th graders; and HIV/AIDS and STIs for 11th and 12th graders.

The stories that we hear from the students keep our team motivated. One of our key activities during our lessons is chismis or check (gossip or fact)? This is a true or false game that tests the students’ reproductive health knowledge. We believe this is important because we regularly hear information circulating amongst young people that is false, and oftentimes dangerous.

“The two remedies that young people most commonly cite as cures for STIs are drinking buko (coconut) juice and dissolving and drinking Tide detergent powder in a glass of water.”
- Youth Teaching Team, 2017

7th-8th grade | 9th-10th grade | 11th-12th grade
---|---|---
6,838 | 7,039 | 5,364

Puberty  | RH | HIV/AIDS/STI

School-based Education

To refine our programming, we conducted a baseline survey of over 900 young people between the ages 14-24. The results are informative and staggering.

- Only 1 in 3 sexually experienced youth reported using a condom during their last sexual encounter.
- 33% of respondents had had sexual intercourse. Mean age for sexual debut was 16.8.
- 40% of the girls that had had sex were pregnant at least once.
- About half of respondents noted they would have liked more sexuality and reproductive health classes in school.

Youth Survey

![Photo by ROH Youth Teaching Team](image-url)
It is young leaders like one of our YAs, Allana, that make our work so rewarding. Before Allana became a Youth Advocate, she remembers her reservations and views that young people shouldn’t talk openly about sex. Coming from a religious family, Allana says, “At first it was really hard to discuss sexuality and family planning. Sex tends to be a taboo topic. Then my horizons as a young woman started to broaden working as a YA. Initially having a goal wasn’t a priority. But through my work at ROH, I started to develop a goal; and that’s to finish my degree and dedicate as much time as possible to advocacy and education for young people on contraception and reproductive health.”

We will continue to strengthen the YA program by assessing our clinic to ensure it is as youth-friendly as possible, provide stronger communication training and also focusing our next round of YA training on existing community youth leaders, as they gain the trust of many of their peers.

“Without education, people will continue to believe in what they think is right without realizing that it is wrong. And without services, young people will not be able to protect themselves from unplanned pregnancies, STIs and the worsening HIV situation.”
- Allana, Youth Advocate
Roots of Health strives for sustainable change in the communities that we serve, and we recognize we cannot realize this change alone. Thanks to our partnership with the Department of Health (DOH), our small yet mighty clinical team was asked to train local barangay health workers (BHWs) as well as municipal health nurses and midwives. With more capacitated health providers comes better access to the services women, young people and girls need.

Despite their limited training, BHWs are oftentimes the first community member approached when there is a health concern. Most of these health workers have little understanding of reproductive health and family planning, and ROH found that they were often reactive to women’s health needs rather than proactively providing accurate information.

As a result of our strong relationship with the DOH, our clinical team held 16 training sessions for 1,162 BHWs in Puerto Princesa and the municipalities of Aborlan, Bataraza, Brooke’s Point, Narra, Quezon, Roxas and Taytay. The trainings themselves were dynamic with role playing activities, and included lecture material that outlined the reproductive health systems of men and women, all modern forms of contraception and HIV/STI transmission. Like in all of our trainings, we conducted pre-and post-tests with participants to measure knowledge gained and attitude change—the results were encouraging.

Most importantly, we saw an increase in demand for contraceptives in the communities where we provided BHW trainings. This correlation most likely comes from informed BHWs spreading accurate information to their community members about reproductive health services. We rely on these BHWs, and the DOH, for positive and sustainable change in Palawan—we were glad to have this meaningful partnership!

### PRE & POST KNOWLEDGE TEST

<table>
<thead>
<tr>
<th>Believed that young people should have access to confidential RH services</th>
<th>Pre</th>
<th>Post</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>55%</td>
<td>94%</td>
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<table>
<thead>
<tr>
<th>More comfortable providing contraceptives to young people who were sexually active</th>
<th>Pre</th>
<th>Post</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>57%</td>
<td>91%</td>
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**STATEMENT OF ACTIVITY**

**PHILIPPINES**

**Statement of Financial Position**

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<th>ASSETS</th>
<th>Total</th>
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<td>Fixed Assets</td>
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<td>Equipment</td>
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<td>Furniture &amp; Fixtures</td>
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<td>Vehicles</td>
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<td>Total Fixed Assets</td>
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<td>TOTAL ASSETS</td>
<td>P2,675,908.49</td>
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**LIABILITIES AND EQUITY**

| Liabilities                 | P0.00     |
| Equity                      | P17,133.45 |
| Opening Balance Equity      | P4,062,266.02 |
| Net Revenue                 | -P1,386,907.53 |
| Total Equity                | P2,675,908.49 |

**TOTAL LIABILITIES AND EQUITY**

| P2,675,908.49               |

**Statement of Activity**

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<th>TOTAL REVENUE</th>
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<tr>
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<td>Other General and Admin Expenses</td>
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<td>Other Miscellaneous Service Cost</td>
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<td>Freight &amp; Lease</td>
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<td>Taxes &amp; Licences</td>
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<tr>
<td>Total Expenditures</td>
<td>P17,805,357.56</td>
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</tbody>
</table>

| Net Operating Revenue | -P1,392,399.83 |
| Other Revenue         | P5,692.30       |
| Other Expenditures    | P2,000.00       |
| Net Other Revenue     | P5,492.30       |
| NET REVENUE           | -P1,386,907.53 |

**UNITED STATES**

**Statement of Financial Position**

<table>
<thead>
<tr>
<th>ASSETS</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Current Assets</td>
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</tr>
<tr>
<td>Total Fixed Assets</td>
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<tr>
<td>TOTAL ASSETS</td>
<td>$1,722,021.02</td>
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</tbody>
</table>

**LIABILITIES AND EQUITY**

| Total Liabilities           | $0.00     |
| Opening Balance Equity      | $146,020.17 |
| Net Revenue                 | $26,000.00 |
| TOTAL LIABILITIES AND EQUITY| $172,021.02 |

**Statement of Activity**

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<tr>
<th>TOTAL REVENUE</th>
<th>$178,355.46</th>
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</thead>
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<td>EXPENDITURES</td>
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<tr>
<td>Bank Charges</td>
<td>$266.45</td>
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<tr>
<td>Dues &amp; Subscription</td>
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<td>Grants</td>
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<td>Legal &amp; Professional Fees</td>
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<td>Meals &amp; Entertainment</td>
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<tr>
<td>Taxes &amp; Licences</td>
<td>$260.00</td>
</tr>
<tr>
<td>Total Expenditures</td>
<td>$149,867.61</td>
</tr>
</tbody>
</table>

| Net Operating Revenue | $20,667.85 |
| Other Revenue         | $89.00     |
| Other Expenditures    | $2,756.00  |
| Net Other Revenue     | $2,667.00  |
| NET REVENUE           | $26,000.00 |

2017 Exchange Rate: $1 USD = 49.9 PHP as of 12/29/2017
The Roots of Health team is a family of passionate, committed and thoughtful individuals. Our full-time staff sit within our Clinical, Youth, Administration, Executive and Monitoring and Evaluation (M&E) teams, however, everyone keeps the women, adolescents and girls of Palawan at the center of their day-to-day work. Our team is the biggest it’s been since our inception, however, and we remain committed to strengthening the capacity of this fabulous group of professionals.

**Administration Team**
- Jay Arguelles
- Ruiza Bersales
- Darlene Jagmis
- Gehnefer Lavirez
- Rica Andrea Pacaldo

**Clinical Team**
- Mary Josephine Amit
- Meryl Arzaga
- Daisy Ellorquez
- Mark Vil Favila
- Charlene Rabang
- Shery Ann Villagracia

**Executive Team**
- Melinda Buñag Arzaga
- Nazario Benitez
- Robelle Lahoç-Cortezano
- Dr. Susan Evangelista
- Amina Evangelista Swanepoel
- Marcus Swanepoel

**Youth/Teaching Team**
- Vanessa Abiog
- Erlyn Española
- Robaika Pagusara
- Dolly April Plaza
- Ivann George Polizon
- Connie Samsona
- Jan Michael Servando

**M&E Team**
- Jeri Abenoja
- Ana Almira Buñag
- Rowena Clasara
- Mary Rose Miranda
- John Danver Paalan
- Ciara Lee Quiban
- Justin Miguel Sespeñe

**Fellows and Consultants**
- Hyun-ji Byun
- Jane Cho
- Kate Peters
- Annamarie Reyes
Our New York based-Board of Directors is a group of seven dedicated individuals from a diverse set of backgrounds. They are responsible for guiding the work of Roots of Health by providing oversight to the organization’s governance, finances, programming and fundraising.

Marty Dewees (Treasurer)  
Justine Fonte (Vice President)  
Sabrina Hermosilla  
Suneeta Kaimal  
Keefe Murren (Secretary)  
Rachelle Ocampo  
Stefanie Schmidt (President)

The Roots of Health Advisory Committee’s mission is to: “Provide technical, programmatic and fundraising support to Ugat ng Kalusugan as well as offer external feedback and direction.”

This group is made-up of women’s reproductive health advocates and practitioners, leaders in the education field, academics and business-people. To ensure we are incorporating the voices of those that we serve, we also have two Community Health Advocates and two Youth Advocates as part of the Advisory Committee.

Annabelle Agustin  
Cleven Vasquez Arquero  
Allanna Busa  
Pamela Cajilig  
Carlos Celdran  
Dr. Susan Evangelista  
Geralden Gabay  
Mae Legazpi  
Dr. Junice Melgar  
Narcy Mikkelson  
Michelle Ongpin  
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