# Dining for Women Grant

**Catalyst Foundation Final Progress Report August 2016**

<table>
<thead>
<tr>
<th>Organization Name:</th>
<th>Catalyst Foundation</th>
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<tbody>
<tr>
<td>Contact Name:</td>
<td>Caroline Nguyen Ticarro</td>
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<td>Contact Title:</td>
<td>Founder &amp; Executive Director</td>
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<td>Contact Email and Phone number:</td>
<td><a href="mailto:caroline@catalystfoundation.org">caroline@catalystfoundation.org</a>  +1- 507-213-8448</td>
</tr>
</tbody>
</table>
| Mailing address:   | Catalyst Foundation  
710 St. Olaf Ave. Suite 100  
P.O. Box 13  
Northfield, MN 55057 |
| Organization’s Mission Statement: | Catalyst Foundation’s mission is to support community building in Vietnam to fight human trafficking. Centered on a holistic approach, we are a humanitarian organization that provides community programs which address basic needs, job opportunities, counseling and education to prevent the trafficking of women and girls. |
| Organization Website: | www.catalystfoundation.org |
| Program Title for DFW Grant: | Holistic Community Development Program |
| Grant Amount:       | $52,290 |
| Grant Objective:    | Our objective is to provide a Holistic Community Development Program that assists our community women in becoming self-sufficient. The four facets of the program are adult community education, vocational training and microloans, youth primary education, and health education. These four programs will impact 165 girls,176 women directly, and 477 total family members indirectly. |

## Objective #1 Community Education Center

Our adult community education program’s objective is to provide basic education to address the source of trafficking - extreme poverty. Desperately poor mothers, who see no other options to support their families, listen to the lies of traffickers. To combat this, we provide these women with access to social services, education. In addition, our team role-plays with the community, helping mothers recognize the trafficker’s methods. Our classes develop self-awareness and empathy to educate about the effects of trafficking on the community. Our final goal is to maintain ZERO cases of trafficked women and children in our community.

**Goals and Outcomes:**

- Provide Community Education classes to combat trafficking, educate community members on the dangers and reality of human trafficking
• We have had weekly and monthly community education classes for the women and girls on an individual family basis from June 2014 until January 2015 which included:
  Stranger Danger (Human Trafficking)
  Nutrition & Cooking
• In January 2015 our Community Education Center was opened and we had small group (10-15 women at one time) come for classes that included:
  • Food Safety
  • Body Hygiene
  • Dental Hygiene
  • Self Defense
  • Proper Medicine Use
Each lesson was taught in Vietnamese and Ragali, included role play, song, and hands on demonstrations. They were repeated twice a week for one month until all the women had an opportunity to attend and they told us they were comfortable enough to move on to a different lesson.

• There are zero cases of human trafficking, but there have been 3 cases of organ trafficking (women were tricked by traffickers to sell their kidneys for $50) and 1 case of organ theft (eyes were removed after the death of one elderly woman).

• There were three instances of strangers/traffickers that came to the community. In each instance, our social workers and Country Director were immediately notified and safety measures were implemented immediately.
  • Men on motorbikes offer rides to young girls walking home from school.
  • Men (Vietnamese and Western) visited families in their homes and offered them $10 if they could photograph the women/girls topless.
  • A woman offered jobs to young girls to work at a new “restaurant” that was recently opened for truck drivers.

• Supply social workers training to protect and counsel abused women and children in the community
  • Partnered with University of Sweden and Boston College School of Social Work to send interns, and allow our social workers access to current social work practices.
  • Monthly training from Caspersen Training Center for Narrative Therapy, specializing in counseling women and children that are victims of trauma.
  • Crisis Shelter was constructed and opened in March 2015

• Help students and their families acquire Identity Papers
  • We have acquired identity papers for 100% of the women and children.

Challenges:
Even though cases of reported domestic violence decreased, we believe that we must start a program within the next year, to support/reward a few of the “good” men (non-violent, good fathers/brothers) so that they can start being good role models for other men.

Objective #2 Vocational Training Program
The objective of Catalyst Foundation’s vocational training program is to provide our teen and adult women with the opportunity to develop financial self-reliance. The women in our community have no real employment opportunities and must contribute by doing what they can. Catalyst Foundation’s goal is to support 50+ community members in an agriculture and animal husbandry program that will teach them simple, sustainable and practical means of earning an income. We assist and educate about household debt management and provide adult literacy classes.

Goals and Outcomes:
• Coordinate vocational training for women
  • Coordinated with 2 local businesses to start a sewing/tailoring vocational training
  • Coordinated with 2 local restaurants to start a cooking classes
• Interview and selection of vocational students
  • 35 women interviewed, 29 women selected for first sewing/tailoring training July - present
• 18 women interviewed and selected for first cooking classes March – June (cooking classes were not as popular because they have never had a lot of food and only knew how to cook rice and soup)
• Prepare for training (materials, supplies, teacher)
  • Community Education Center has a classroom for sewing/tailoring
  • Private cooking classes were done in each family’s home from January – June
  • 6 women in our community cook breakfast and lunch for the school children every day.
  • Adult Literacy education classes are held 3 times a week.
• Monitor progress of students
  • Weekly progress monitored as our social workers visited training classes
• Evaluate training, determine which participants will need microcredit loans to continue
  • 29 women completed tailor/sewing training. 9 women were employed by the local businesses; 4 women have applied for microcredit loans to buy their own sewing machines to share with other 7 women
• Provide families with Saving & Microcredit Loan Education
  • 42 (out of 48) families participated in Savings and MicroCredit Loan Education classes. Each family, starting January 2015 contributes an equivalent of $1.00/week to the community savings plan. As of April 30, 2015 the total savings plan has $671,CF matched 100% on April 30, 2015.
  • 4 families have received microcredit loans of $100 each to purchase sewing machines.
  • 9 families have received microcredit loans of $50 each to purchase new cooking equipment

Challenges:
To meet the challenge of illiteracy, all of our training includes role play, many pictures, hands on trial, song, and short poems for participants to memorize instead of reading. Adult literacy classes started January 2015 and will continue as long as it is necessary so that women and teen girls will feel that they can incorporate reading and writing into their daily lives with ease.

Objective #3 Education: The “Project Backpack” Program
The “Project Backpack” Program seeks to enable children between the ages of 5 and 18 to attend school. Because of their extreme poverty, our families see education as an extravagance and their children work instead of attending school. Only 32% of the community has had any formal education and those that did go to school did not attend beyond the 5th grade.

Our objective is to give children who have only known a life of working: education, food, and safety. The sponsorship program provides a foundation of material and social resources that give our children the opportunity to attend school. Our goal is to increase school enrollment each year until all children are attending school.

Goals and Outcomes:
• Provide K-5th grade education for children in the community (Project Backpack)
  • 106 girls are currently enrolled:
    • Kindergarten – 23 students
    • Grades 1-5 – 54 students
    • Grades 6-7 – 29 students
• Provide uniforms, textbooks, school supplies and health insurance.
  • All students 106 students enrolled in school have been provided for
• Discuss educational goals with parents, students, teachers and social workers.
  • Exams will be taken in late January to determine progress.
  • Children need tutoring to pass exams and extra homework help.
• Provide daily meals for each student.
  • Lunch is being served to Kindergarten and primary school children daily, secondary students are eating at home.
• Provide monthly food allowance of rice and pantry items for the family.
  • 48 families have received 15 kg of rice, noodles, and pantry items.
• Monitor the progress of students.
  • Bi-monthly home visits are done with each family to monitor their well being.

Challenges:
94% of the women in the community are illiterate, it is impossible for the girls to receive any additional homework help at home. Therefore, we have started tutoring classes before and after school for the students.

**Objective #4 Community Medical Clinic**

There is an immediate and severe need for medical attention within the community. Because of their ethnicity, our community members are refused admittance or care from the local clinic and the provincial hospital. They have no access to medical attention or counseling. The lacks of pre and post-natal care, malnutrition, anemia are major issues in our community.

**Goals and Outcomes:**

- Staff and Supply Community Medical Clinic
  - A separate medical clinic was not built, but we used instead one of the rooms in the Community Education Center.
  - Our staff currently transports women and children to the hospital and clinics as needed for emergencies.
  - Volunteer doctors from the USA and Ho Chi Minh are available via skype to virtually diagnose and prescribe medicine daily.
- Work in partnership with international doctors and nurses to plan aid expeditions
  - Three groups of volunteer medical professionals to provide basic medical care to our community – in March 2014, August of 2014, March 2015.
- Work with local health officials to distribute medicines and immunizations
  - Hepatitis B immunizations for all girls and women under the age of 40. This is a series of three shots in six months. (March 2014, June 2014, and September 2014).
  - Anti-worm/deworming medicine distributed every six months (April 2014, October 2014, April 2015)
- Conduct bi-annual medical needs survey to prioritize resources
  - The first complete medical survey will be done with customized digital database in November.
  - Custom health database was created to record and track health of women and girls.

Most common ailments amongst the women and girls are: intestinal parasites, ear/skin infections, abdominal pain, diarrhea, headaches, hypertension, and dental cavities - directly related to lack of access to enough water to meet their needs, malnutrition, and lack of proper hygiene.

**Challenges:**

At first, women in the community believed that medicine would cure all their ailments, and they were in everyday to ask for medicine from vitamins to ibuprofen. In addition, they were not taking the medicine as prescribed directly related to illiteracy. We stopped prescribing medicine for every visit and started a Community Education Class to teach “Proper Medicine Use”.

**DFW Final Progress Report Additional Questions:**

**Is your organization or program situation different than presented in the approved proposal? For example, new executive director, significant program staffing changes or NGO affiliation, loss of large funding, or other significant changes?**

None

**What were the most important lessons learned?**

Our major challenge is illiteracy. Most of the adult women and teenagers have never been taught Vietnamese. They speak their indigenous language, Raglai. Trainers find it very challenging to communicate and there are only 3 women in the entire hamlet that are bilingual. The most important lesson learned is to slow down and be patient. We adjusted our expectations for our participants in community education classes and, so the training is done by watching and repeating, which is a much slower way to teach.

**What has changed within your organization as a result of this project?**

The women and girls have HOPE, the feeling is unmeasurable but they have something tangible that they can now start having a plan for their future such as how much they will learn to read and write in Vietnamese, what kind of new job opportunities are now available now that they know how to sew and cook. Daily survival needs are now being met through Project Backpack and the medical care given at the Community Education Center.
Describe the unexpected events and outcomes, including unexpected benefits.
Our children thrived from being in school, regular check-ups, immunizations, and being fed at least one full nutritious meal every day. There was immediate change in their growth and well-being and recorded in our database within the first six months of funding. Unfortunately, without daily access to water, there we still had challenges around personal hygiene and sanitation, which led to many more cases of worm infestations.

Did you change your strategy as a result of obstacles your encountered? How will you address these challenges in the future?
We adjusted the way we train and our measurements of success because of the language barrier and illiteracy. Each Community Education lesson is now taught in Vietnamese and Ragali, and includes role play, many pictures, a song or poem, and hands on demonstrations to help them learn and memorize the lessons.

Approximately how many lives have been touched, both directly and indirectly, by the program?
165 girls are in the program (106 are enrolled in school, 17 are not old enough to be in school, and 42 are over the age of 12 and not enrolled in school)
176 women are directly impacted in community education classes 68 women are actively involved).
There are 485 total family members indirectly impacted by our programming.

What are the measurements used to monitor success and how was this information measured (e.g., surveys, observation)? Be specific and include measurable results.
We survey each family that has been identified by local officials as the poorest of the poor to decipher as much information about their living situation as possible. In addition, we catalogue basic information: family size and structure, income, level of education, and living conditions. We also ask of community health issues: do they know what trafficking is; do they know anyone who’s been trafficked; do they have access to health care; are they immunized, among other issues. We use this information as the baseline to measure our progress.

Monthly, the social worker and staff perform "home visits" to access the status of the families. There are also monthly community check-ins which serve as town hall meetings. Yearly, each family in the community is re-surveyed as part of their program renewal process to access the progress of the program.

Results for each objective of the DFW grant were given above.

If the program is ongoing, provide plans and expected results, including projected timeframe.
We will be serving this community for a minimum of five years. We will continue with our current programs and add more vocational opportunities, housing, daily access to water, health and hygiene center, medical clinic, and night school for the adults.

Did this grant and relationship with DFW assist your organization in obtaining other funding, partnerships with other organizations, or public recognition in some capacity?
The DFW grant and endorsement letter from, helped us to receive a $25,000 grant in August 2015 from One Day’s Wages.

Budget Attached
<table>
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<tr>
<th>Holistic Community Development Program</th>
<th>Grant Budget</th>
<th>Expenses May-Oct 2014</th>
<th>Expenses Nov 2014 - Apr 2015</th>
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<td><strong>Programs to Improve Women’s Lives</strong></td>
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<td><strong>Vocational &amp; Agricultural Training</strong></td>
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<td>- Cooking Program, Renovation of School Kitchen</td>
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<td>- Cooking Program, Trainers Salary</td>
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<td>- Cooking Program, Salary for 3 women to cook at school (Aug-Oct), 6 women (Oct-Apr)</td>
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<td>- Agricultural Training, Pun Pun</td>
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<td><strong>MicroSavings and Loan</strong></td>
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<td>- Food (5kg of rice, noodles, cooking oil, soy sauce, fish sauce, sugar, 48 families)</td>
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<td>- Food for daily meals for 106 children ($60/week)</td>
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<td>- Hepatitis B Vaccinations for women and girls</td>
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<td>- Deworming medicine every 6 months for women and girls</td>
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<td><strong>Operation Expenses</strong></td>
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<td>Field Visits (bus, meals, hotels, supplies)</td>
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<td>Staff Salaries</td>
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Chamaléa Thị Phiêu
Chamaléa Thị Hiếu

Phiêu is 58 years old; she lives with her 30-year-old daughter Hiếu, and her three children. The house they live in was built with a loan from the government. Some of the inner parts of the house weren’t well built and now it leaks water.

School
Durong (Hiếu’s first child) dropped out of school in 4th grade to help earn money for the family. She still knows how to read and write though, and often helps her youngest sister Phim, with her homework. Phim is in 2nd grade and enjoy going to school, like her older sister Thào, who is in 4th grade. Last school year, Thào and Phim both received certificate of merits, proving that they were good students.

Health
The family boils water to drink. Vinh is very strict about his children having clean water to drink.

One year ago, Phiêu discovered that she has heart disease. The doctor gave her medicine to take and advised her to stop doing heavy work. However, she still has to do heavy work. When she gets tired, she would take 2-3 days off. She wants to have another job but does not know what to do. Recently, she was offered a job in the factory but her mother didn’t allow her to work there since it is far away from home.

Economy
The whole family works on the farm to earn their living. Hiếu raises some chickens and pigs at the cottage.

DFW Grant Impact
The family felt a big relief when Catalyst Foundation helped them to cover the school fees, books and school bags. They had difficulties earning money for school fee before. And now they don’t have to worry about feeding the children during the school day.

Phiêu and Hiếu participated in the vocational training program. Phiêu is one of the cooks at the school and Hiếu has completed the sewing classes and was one of the women that asked for a microbusiness loan to purchase her own sewing machine. She now makes pants that she sells to the community.
Eamaxít Thị Beo (1940)
Beo is 75 years old. Beo has three sons. Two of them have moved to their wives while her third son, Ké is not married and lives with her. Beo had two daughters, but they both passed away at young age.

Health
When Ké goes to the farm at daytime Beo often feels lonely and sad because she has no one to talk to. Ké often leaves rice and fish at home for his mother to cook for herself. She usually stays at home all day, sometimes listening to the radio for a while.

Beo is old and has pain in her joints. When it’s cold outside she gets pain in her knees, making it difficult to get from one place to another. Whenever she gets sick she tends to rest at home alone and wait until the sickness goes away.

Financial situation
Beo is too old to work. Her sons take turns to give Beo food, but mostly it is Ké’s responsibility. He works at the farm and collects firewood to sell.

DFW Grant Impact
Beo is so grateful for the food program that the DFW Grant has provided. She has enough food to last her throughout the month and she does not feel like she has to bother anyone to help her. When she needs medical care, medicine, or just someone to talk to, our social workers visit with her weekly.
Pinăng Thi Sễ

The single mother Sễ lives with her daughter Đào and her son U’ in a small wooden house she built herself. Her husband left the family in 2013 and never came back. Sễ works hard to raise her children. Sễ lives on a small part of her father’s land. Despite the family’s difficulties, she always smiles brightly.

School

The daughter Đào is in 5th grade. Đào doesn’t have a bicycle so she borrows her aunt’s bicycle to go to school but she would need her own for going to school in 6th grade. The son is in kindergarten. Đào studies well in school, but the teacher said that she is slow in class because she doesn’t understand Vietnamese very well.

Health

Đào has been having headache for more than half a year due to dehydration, a common health issue in the hamlet. Sễ has gingivitis and a lot of tartar. The family usually drinks unboiled mountain water. They can’t afford shampoo so they use clothes detergent to bath and wash hair. U’ had fungal infection in April 2015.

Financial situation

The mother Sễ earns 10,000 - 13,000 VND (46 - 60 US cents) on a daily basis by collecting and selling firewoods, cow dungs, and plastic bottles. She also does common labor when she has a chance, such as painting the walls. After school, her daughter, Đào also helped her with collecting cow dung. The government gave Sễ a goat. She stays at home and take care of her goat because it was the first goat she had. When she goes to the mountain, she often takes the goat with her.

Đào usually collects and sells cow dungs or herbs from the mountain for her own stipends at school.

DFW Grant Impact

Sễ is a participant in the sewing/tailoring vocational training program. She has been a great student and learning quickly. Because Project Backpack program has allowed her children to attend school and receive food, she does not have to worry as much. She is currently employed by one of the trainers’ and now earns $4/ week.