

CAMBODIA

HI was founded in Cambodia in 1992, when we established the first rehabilitation services in refugee camps along the Thai border. Since 1995, our programs there have benefited approximately 830,000 Cambodians. HI's four rehabilitation centers, originally set up to help mine victims, now also treat polio, cerebral palsy and club foot and almost half of all beneficiaries are children. HI also runs the only paraplegic/tetraplegic center in the country and works closely with the Ministry of Education and local authorities to identify vulnerable school-age children who are not attending school to ensure their integration. Our Kampong Cham rehabilitation center has increased its number of beneficiaries four-fold and increased its prostheses production ten-fold helping some 4,000 people with disabilities since 2002.

IRAQ

Since April 2003, Handicap International programs in Iraq have ranged from clearing mines/UXOs and teaching people how to avoid injury through mine risk education to helping Iraqis with disabilities acquire new job skills. Deteriorating security conditions led to the withdrawal of all expatriate staff but we continue to assist our Iraqi colleagues from neighboring Jordan to carry out job training and mine risk education. Our current goal is to train and support 1,620 people. During our first six months of support, HI trained 20 persons with disabilities and educated 500 community members about landmine risks.

NEPAL

HI has been in Nepal, one of the world's poorest and least developed countries, since 2001, to help disabled persons break long-standing cycles of poverty, exclusion and recover from years of civil strife. Since 2005, HI has been working with five permanent rehabilitation centers and three satellite units to train staff and improve services. We also set up mobile camps in very isolated rural areas where people lack the means to travel to centers. In 2007, HI provided 2,246 mobility devices, gave 21,593 physical therapy sessions and supported corrective surgery for hundreds of men, women and children injured by explosive devices, suffering from untreated polio paralysis or club foot and burns or accidents. With surgery and the appropriate mobility devices, many Nepalese are mobile again for the first time and can now go to school or work. With a generous grant from the U.S. government, we are sending senior local staff overseas for technical training and mentoring them upon their return. HI also provides mine risk education and helps run the data surveillance project to track where and how injuries are occurring.

MOZAMBIQUE

Handicap International has been in this impoverished east African country since 1986. We began mine clearance in Inhambane Province in 1997, adding programs in Sofala and Manica Provinces in 2004. In the past nine years we have cleared 1,000 suspected mined areas focusing first on local schools, wells, bridges, access roads and other critical community infrastructure. After four students were killed in Sofala Province by a mine, HI moved quickly into the accident site, cleared 82,900 square meters and returned the land to the local community of 500 families and 200 students – opening new space for agriculture and guaranteeing safe access to schools. A 2008-2010 plan to complete clearance of the three provinces will benefit some 2.3 million inhabitants. In 2007, HI also launched a new sports program for youth with disabilities that includes HIV/Aids prevention education.

AFGHANISTAN

In Afghanistan, where HI has worked since the early '90s, one in every five households is affected by disability. In 2007, HI provided rehabilitation services to some 20,000 individuals living in and around Kandahar and Herat Provinces. We supported disability centers in Herat and Kabul that provided working opportunities, training and referral annually to more than 3,000 persons with disabilities. HI and the NGO Humaniterra built and support a treatment center for third-degree burn victims in Herat. Our landmine/UXO risk education teams in Helmand and Kandahar provinces reached over 200,000 persons living in villages, IDP camps, and nomadic encampments.

For more detailed information on HI programs, visit www.handicap-international.us

A 25-Year Commitment to Make This a Safer, More Inclusive World

Since its founding in 1982, Handicap International (HI) has worked to improve the living conditions of people living in disabling situations in post-conflict or developing countries around the world. Handicap International's eight international sections based in Europe, Canada and the United States support a total of 4,200 field staff. HI partners with local stakeholders in 60 countries to respond to humanitarian emergencies, prevent and treat disabling conditions, fight to eliminate landmines and cluster munitions, and press for the universal recognition of the rights of the disabled through national planning and advocacy. The organization utilizes local resources to work with local partners with whom we share knowledge and build systems to prevent disability, treat those in need, and advocate for inclusive development.

Dear Friend:

This 2007 annual report marks a milestone for Handicap International – our 25th year of assisting people worldwide to overcome disabling situations and reclaim their independence.

In too many countries, disability still leads to despair, loss of social status and poverty. But we are making progress. Look at the photo inside of the father contemplating his sleeping child. His face reflects a universal human desire: to work and care for those we love. HI helps rebuild hope for families like his – with your support.

In the short time since HI opened its U.S. office in early 2006, we have become a vital part of HI's global work, contributing resources for programs operating in difficult conditions in Iraq, Afghanistan and Nepal, assisting Cambodian landmine victims and clearing landmines/unexploded ordnance (UXOs) in Mozambique. Our first annual report shares details of these U.S. supported projects and maps the activities of the HI network worldwide.

Please keep the support coming as HI works with courageous people struggling to live up to their full potential despite disabilities caused by war, landmines or cluster bombs, diseases like polio or HIV/AIDS, accidents, natural disasters, or poverty. And help us remain a powerful voice as a co-winner of the 1997 Nobel Peace Prize in the ongoing campaign to ban landmines and cluster bombs from the planet. Stay with us – your support matters!

Sincerely,

John Lancaster
John Lancaster, Chairman

Wendy Batson
Wendy Batson, Executive Director



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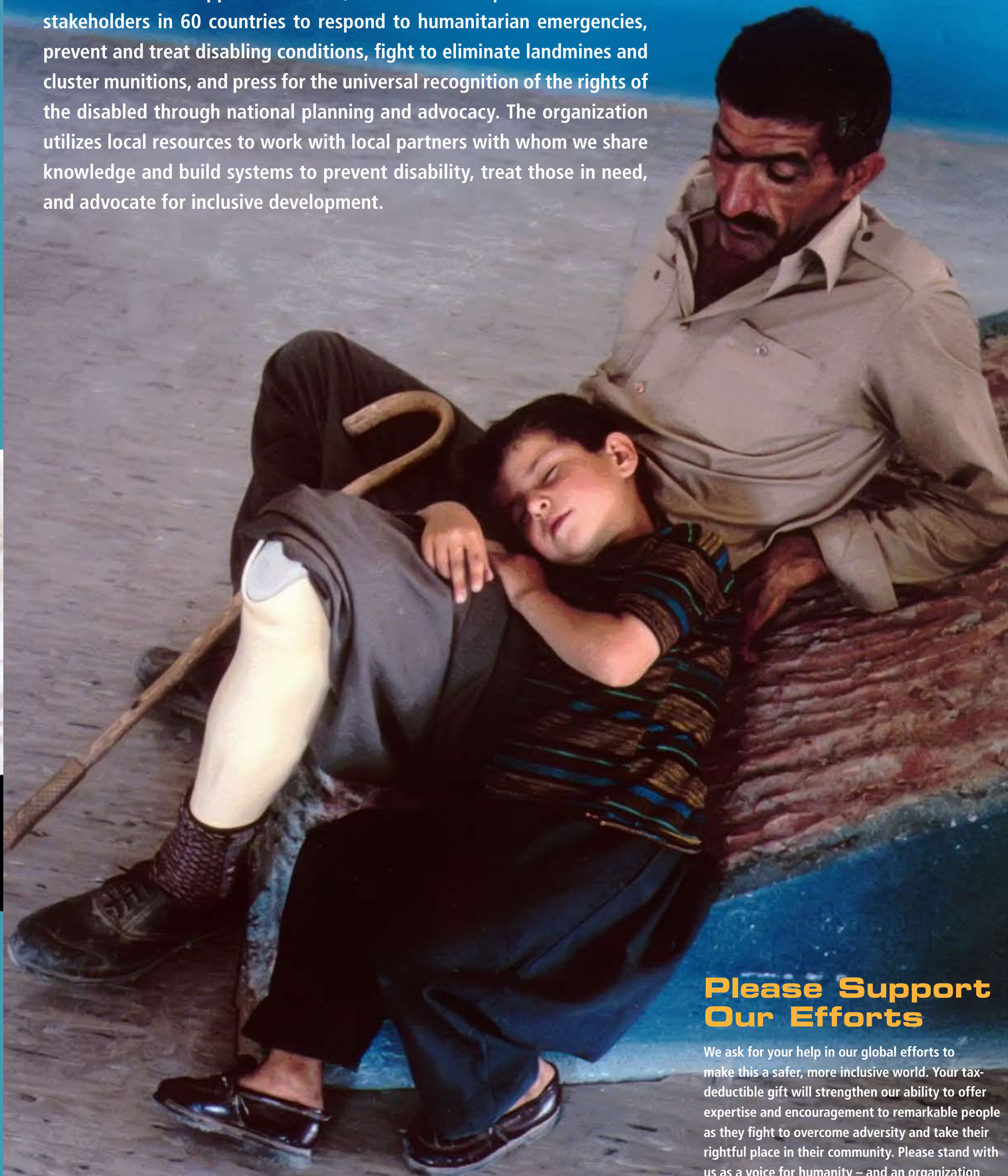


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Please Support Our Efforts

We ask for your help in our global efforts to make this a safer, more inclusive world. Your tax-deductible gift will strengthen our ability to offer expertise and encouragement to remarkable people as they fight to overcome adversity and take their rightful place in their community. Please stand with us as a voice for humanity – and an organization that takes direct action in 60 countries around the globe. Thank you for caring!

Handicap International's Worldwide Presence

Rehabilitation

Development of prosthesis-fitting and rehabilitation services, support for medical, social, and educational programs; training of rehabilitation staff (including initial & ongoing training, and training of managers).

Mine Action

Operations to reduce the risk and impact of antipersonnel mines, cluster bombs, and other explosive devices; development and management of technical mine clearance operations, cleaning up battlefields and identifying, measuring, and marking suspect sites; organizing and training local teams for mine clearance and other prevention and cleaning-up operations; following up and organizing campaigns to raise awareness among people in danger from landmines; conducting surveys of the social and economic impact of landmines on communities; establishing databases and maps of contaminated areas; providing assistance to the victims of landmines and other explosive devices.

Public Health

Development of community health services, primary and secondary prevention, patient education, prevention of road accidents and disabling pathologies, primary health care, treatment and prevention of AIDS, nutrition; psychological support for populations suffering psychological distress (in particular refugees, displaced people and victims of conflicts), and mental health.

Inclusion

Vocational inclusion focusing on micro-credit/income-generating activities, business employment, vocational training; social inclusion focusing on family and community life; inclusive education providing formal/non-formal schooling for children and adolescents; specialized education if necessary; integration of people with disabilities into development projects; greater civic involvement for people with disabilities; accessibility of the physical environment; access to sport, leisure and culture.

Emergency Relief

Management and distribution of humanitarian aid covering basic requirements; help for refugees and displaced persons, erection of temporary shelters and support for voluntary repatriation; accessibility of water and sanitation; help and support for people with disabilities and other vulnerable groups; victim assistance; preventive health care and community care and rehabilitation in the camps; restoration and building of accessible community housing and infrastructures; disaster-related risk reduction.

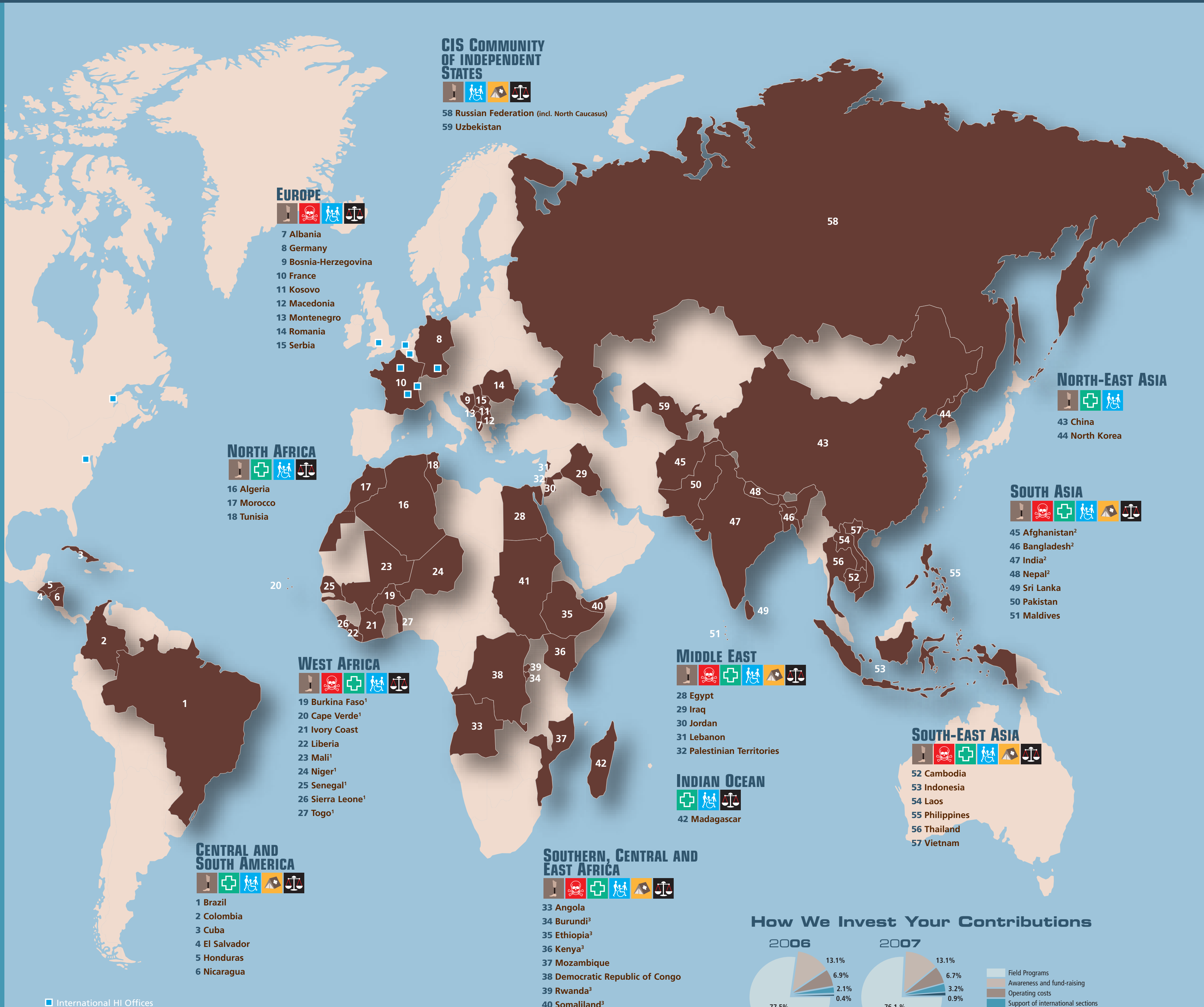
Disability Rights and Policies

Development of civil society (by supporting local associations promoting these rights), support for defining policies (at local, national and international level); encouraging dialogue between public authorities and civil society; information, raising awareness and education to promote social recognition and enforcement of rights; defining global operational strategies to enable access to rights; using a community approach to disabilities as part of development.

1 - Programs supported through the Central and West Africa Regional Coordination (CWARC), based in Ouagadougou, Burkina Faso.

2 - Programs supported through the the South Asia Regional Coordination (SARC), based in New Delhi, India.

3 - Programs supported by support services based in Nairobi, Kenya.

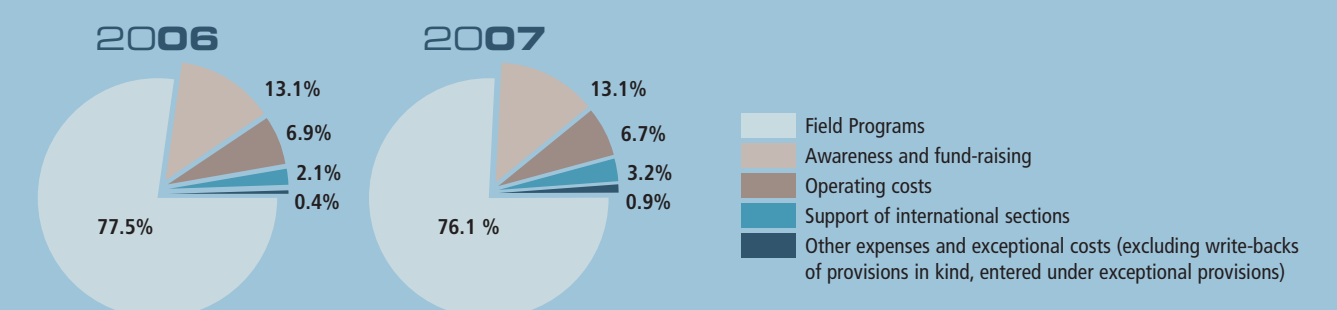


Countries where programs were started in 2007: None.

Countries where programs closed in 2007: Guinea-Bissau and Romania.

The borders and names of the countries shown on this map do not imply any recognition on the part of Handicap International of the status of the territories.

How We Invest Your Contributions



To view the complete 2007 audit and 990s of Handicap International's US office, please go to www.handicap-international.us.