Introduction

5.9 million children under 5 will die this year from preventable causes, an average of over 16,000 each day.

These children die because they were born in places where basic maternal and child health services are lacking or simply unaffordable. This is a needless tragedy that makes our actions crucial. These children and their mothers don’t have clean water. They don’t get enough nutrients. They are not immunized. They lack basic protective measures like prenatal care, mosquito nets, and soap. They have no access to basic medicines. Medicines for Humanity focuses on this crisis and works with committed in-country healthcare partners to help save lives.

We believe:

▷ Every child has the right to a healthy life.
▷ Cost-effective, evidence-based, sustainable interventions save the greatest number of lives.
▷ Progress is achieved when we increase the service capacity of in-country health providers and communities.
▷ Mutual respect and partnership are essential for effective collaboration.
▷ Rigorous evaluation and continual improvement of services is integral to accountability.
A Letter From Chairman Tim

Dear Friends,

As many of you know, I experienced a heart attack last year and spent 10 days in the ICU of Tufts Medical Center. During my lengthy and somewhat miraculous recovery, I found myself asking in earnest, “So why was I given this precious gift of time, and what should I do with it?”

One memory acted like a guidepost in my reflection. I once asked Sister Martha, a healthcare leader of one of our partners in Haiti (the Little Sisters of St. Therese, “Who else is supporting your work besides MFH?” The Little Sisters manage 14 clinics and 3 hospitals in the most underserved areas throughout the country and serve a significant portion of the poorest of the poor within Haiti. Sister Marta bowed her head and said quietly, “There is no one else helping us, Tim.”

This unforgettable response made me realize just how crucial the mission of MFH really is and how many lives we impact with each project. In this past year, for example, MFH and our “sister partners” provided more critically needed maternal and child health services than ever before (over 1 million). The words of Sister Marfa echoed in my soul and became for me a relentless call to do more… to find ways to scale up our projects, to strengthen more health systems, and to reach more children.

I believe we are ready to build on our track record of success and develop the resources to scale up our services and to meet these challenges. Medicines for Humanity has a unique model for saving lives around the world. It is cost-effective, emphasizes sustainable interventions, and embraces collaboration with partners who have long term service commitments to their communities.

This year, we added a key person to the MFH staff to foster and strengthen our capacity to grow our work. Margaret Brawley has enthusiastically taken over the reins as MFH Executive Director. With more than 20 years of experience in international public health, including strategic management and technical program expertise, MFH operations are in good hands. Her resourcefulness and determination are a great combination. As Chairman of the Board, I can spend more time than ever before raising awareness, creating service partnerships, and developing fundraising relationships.

In closing let me reaffirm that you… our friends, our supporters, and our partners… remain the key to our efforts to scale up the work of MFH. You have played a central role in our success to date and there is no doubt in my mind that your commitment, creativity, and generosity will be at the center of our journey to the next level.

Clear eyes, full heart... can't lose

Timothy W. Bilodeau
Chairman of the Board
2016 Project Map and Services Provided

Our projects span the globe. We have projects in Africa, Latin America, and the Caribbean. Our program staff has extensive experience living and working in these areas.

Current Projects
Cameroon
Dominican Republic
Guyana
Haiti
Kenya
South Sudan

Previous Projects
Angola
Bolivia
Ecuador
Guatemala
Jamaica
Peru
Rwanda

TOTAL HEALTH SERVICES
1,110,630

Community-Based Services
404,382
Home & pharmacy visits for children under 5 and pregnant women

Clinic-Based Services
205,205
Pediatric patient visits & vaccinations

Perinatal Services
89,807
Prenatal patient visits, deliveries & postnatal patient visits

Nutrition Services
272,249
Nutrition supplements, anti-parasite treatments, vitamin A treatments, nutrition education sessions

Water & Sanitation Services
138,987
Families gained access
Spotlight Feature: Community Health Workers

An Effective, Low Cost, Community-Based Solution for Saving Lives

These gallant, dedicated, and unselfish heroes are rooted in the communities they serve. They provide health education and assessments, deliver health services, and mobilize their communities to help save lives. They establish links and foster collaboration between their communities and nearby clinics. They are catalysts of change.

Community Health Worker Services

**Home Visits** – CHWs educate households with pregnant women, new mothers, and children under five on a variety of health-related topics in order to have the greatest impact on reducing maternal and child mortality.

**Health Education & Referrals** – CHWs provide education about young child nutrition, breastfeeding, malaria, vaccines, preventable diseases, pneumonia, diarrhea, and other water borne diseases, pre and postnatal care, danger signs during pregnancy, and appropriate birthing practices to pregnant women. They also make referrals to local health centers.

**Postnatal Care** – CHWs ensure new mothers are recovering well from birth and to check on the newborn baby. They teach them about postpartum danger signs, breastfeeding, newborn care, and danger signs for newborn illness.

**Preventative Services & Treatment** – In some of our projects, CHWs are trained to provide basic treatments for malaria, pneumonia, and diarrhea during home visits.

Why Vulnerable Communities Need Community Health Workers

- Families live long distances from health centers
- Transportation is costly
- Fear of stigmatization and lack of confidentiality from health centers staff
- Lack of knowledge about disease prevention
- They monitor vulnerable households and provide community-based health services
- They create a personal connection to community health services that is encouraging and motivational
Community Health Workers Are Valued Partners

- We equip them with knowledge, tools, and means to foster social and behavioral change within their communities
- We value them for their commitment and drive
- We address their needs and economic requirements so they can provide their services to their communities
- We give them the education and support they need to develop sustainable income generating activities that benefit themselves and their communities

MFH Community Health Worker Programs Are Tailored to Meet the Needs of Each Community

Components are collaboratively developed, based on culture, need, policies, and the health care system. Some elements common to each Medicines for Humanity community health worker program include:

- Program development in collaboration with the community
- Community identification and recruitment of personnel
- Training for 2-10 weeks and regular refresher training
- Supplies and equipment (education materials, job aids, medicines, first aid kits, reporting tools, weather gear for travel, etc.)
- Practical supervision and monitoring
- Economic empowerment programs

CHW Programs Are Designed for Long-Term Sustainability

Remuneration to community health workers varies depending on the country, the context and the nature of the project.

In most MFH projects, community health workers receive small stipends as recognition for their work. These stipends and salaries are not always sustainable, so we have developed a variety of economic strengthening activities (ESAs) to ensure that community health workers remain motivated and projects are sustainable even after they end. Examples include:

- Creation of savings and lending communities
- Assistance in growing cash crops
- Rearing small animals
- Initiating “moto-taxi” businesses
- Milling machines for transforming agricultural products
The Banana Tree and Its Branches

Noel Iphelie has been a traditional birth attendant in the Port-au-Prince, Haiti community of Rivière Froide for several years. Before receiving the training for Traditional Birth Attendants (TBAs) made possible by Medicines for Humanity in collaboration with the Little Sisters of St. Therese, Noel never realized that encouraging women to visit the clinic could make such a difference to the survival rate of babies and their mothers.

Noel has been amazed at the impact this training and new information has had on healthy pregnancies and clean birthing practices has had. In the past, she didn’t tell women in her community about going to the clinic for prenatal care or delivery. She believed the women didn’t want to hear about it. This program has taught her about the importance of prenatal care, and how to talk about this with women in the community. Now, because of trained TBA’s like Noel, more and more women are receptive and seek care, often in part to her referrals and guidance. Noel has also learned how to assess pregnant women for danger signs such as swollen ankles and anemia. In such cases, Noel ensures the mother delivers the baby at the clinic.

The TBA training program is led by Sr. Martha from the Rivière Froide clinic. Noel is particularly grateful for the monthly TBA meetings with Sr. Martha because they help her learn new skills, such as tying a baby’s umbilical cord after birth and using clean instruments, as well as learning better ways to educate women in the community. It is through regular engagement that Sr. Martha supports and encourages TBAs like Noel and works with them to ensure that all women receive appropriate care. The TBAs say Sr. Martha is like the trunk of a banana tree and that the TBAs are the branches. There is one “base” who provides the support and education, and many “branches” who spread the “fruit” out into the community.
Growing Strong Babies and Strong Mothers

Lettica Hernandez lives in Yabonico, part of Las Matas de Farfán, a rural area in the western Dominican Republic province of San Juan. The region is known for its fertile soil and agricultural production, as well as several Major League Baseball players, but there is also great poverty and high child mortality. When Lettica became pregnant with her second child, she visited a local clinic where a doctor explained that her pregnancy was at risk due to anemia. She required iron supplements, but the clinic had no available supply. The doctor was concerned about her baby’s birth weight and ability to survive.

Fortunately, around this same time, Medicines for Humanity added the Yabonico clinic to the group of clinics it was supporting throughout the region, due to a grant from the Major League Baseball Players Trust. This support made it possible for the clinic to add a nutritionist to its staff and obtain nutritional supplements that are essential for strong babies and strong mothers.

The nutritionist began a program for malnourished and anemic women and Lettica was enrolled. She received the supplements she needed and went to monthly nutrition meetings. She received prenatal care and learned how to start a home garden where she began to grow nutritious vegetables for herself and her family.

After 3 months, Lettica noticed a difference in her energy level and her anemia has been significantly reduced. She is looking forward to giving birth to a healthy child and to preparing meals for her family that will help them to stay healthy.

NOTE: The name Lettica Hernandez has been used out of respect for confidentiality.
Stories From Our Maternal/Child Health Projects

Stronger Than Witchcraft

Salimatou lives in the Northwest region of Cameroon. She and her husband want a large family, but it had been very difficult for them to achieve that dream.

Salimatou has lost 3 children, all of whom were born with low birth weights below 5 ½ pounds. She never received care during her pregnancies. Her husband, Amidou, believed witchcraft caused the deaths. Recently, Salimatou gave birth to a healthy baby girl. This time was different. A health worker from her community named Ita visited one day and began to teach her how to take care of herself and her baby during pregnancy. He prodded Salimatou to visit the Sisters of St. Francis health facility to get checked and receive care. She went three times. The doctors and nurses encouraged her to deliver at the clinic because this could help save the life of her baby, as well as her own. She followed the advice and delivered a healthy baby girl with a good birth weight.

Her husband cried out that day, “I could never imagine that my child could be this healthy. The care my wife received is stronger than witchcraft!” There is no stronger evidence of the power of community-based healthcare and the difference it can make.

NOTE: The names in this story have been changed out of respect for confidentiality.

Northwest Region
CAMEROON

30% Reduction of child under 5 deaths
A New Baby Boy

Odeng Stella is 32 years old. She lives in South Kordofan, Sudan, in the middle of a civil war. Her oldest child is six. She gave birth to two other children, but they each died immediately after they were born. Then, two months ago, she gave birth to a healthy baby boy. She explains how it happened.

“About a year and a half ago, two women came to visit me. They told me they were health workers from the clinic. It had been closed for five years since the war started, but it had re-opened. These women taught me what to eat to stay strong. They taught me about malaria and gave me a mosquito net under which to sleep.

The community health workers visited me often and they told me to go to the clinic if I got sick. I asked them how all this help was possible and they told me about an organization called Medicines for Humanity.

This time when I became pregnant, the health workers took me to the clinic. The nurses examined me and gave me vitamins for me and my baby. They said I was ‘at risk.’ I was scared, but they said that they could help and assigned me a birth attendant. The birth attendant visited my home twice a month during my pregnancy. She made sure the baby and I received what we needed and she also helped me to give birth. I am full of thanksgiving and joy for my new baby boy.”

NOTE: The name Odeng Stella has been used out of respect for confidentiality.
Haiti Hurricane Matthew Relief Efforts

In the early morning hours of October 4, 2016, Hurricane Matthew, a Category 4 storm, battered Haiti. The worst damage and highest death toll were sustained in the southwestern parts of the country.

Dusson St. Jean
MFH Haiti Country Coordinator
Four days later, we received the following email from Dusson St. Jean, our Haiti Project Coordinator:

Saturday, October 8 – “Here, as the communication is being restored, we are exploring the gravity of the devastation. It is a total disaster here. Trees, plantations gone, houses destroyed or severely damaged, roads washed away, bridges collapsed, and so far, we are near to 300 deaths and climbing. The situation is more chaotic than when we first thought.”

– Dusson

In the next days, the assessment of the damage and its impact became clearer:

Wednesday, October 12 – “6 of our clinics were impacted by the hurricane. One of the clinics is near the town of Jeremie, one is a little east of Jeremie, one is near the town of Les Cayes, one is east of Les Cayes in Aquin, one is near Jacmel, and the last is Riviere Froide. There was flooding in all of these clinics and some supplies were lost. The communities in all of these areas lost houses from wind damage or flooding. The clinic near Jeremie has structural damage. The roof was completely taken off and the building structure is very unstable. The sisters who operate the clinic have moved out of the building and are now providing services out of the police station. These sisters will need a completely new building because the one that has been destroyed is beyond repair.”

– Dusson

Living conditions for the storm refugees became even more difficult as sanitation and clean water became increasingly challenging. Cholera and other diarrheal disease outbreaks became prevalent.

Thanks to the generosity of our donors, Medicines for Humanity was able to respond to this disaster and send critically needed medicines and supplies to ease the suffering.

We were able to provide:

- Clinical supplies for healthcare workers to treat patients
- Over 500,000 tablets of Aquatabs to purify unclean water
- Over 35,000 packets of oral rehydration salts to treat children with diarrheal disease
- Fever reducing medicine to treat more than 5,000 people
- Antibiotics for about 5,000 patients
- Medication for skin infections that resulted because of unclean water and bad hygiene for 5,000 people
- 660 water filters to purify water in households encompassing 3,300 people
- Laundry and bathing soap for 5,000 people
- Water and sanitation health promotion and education sessions
An investment with Medicines for Humanity means an investment that creates long-lasting change. All our initiatives aim to strengthen health care systems, build capacity of partners and health care workers, and empower communities to improve their health. Join us in making a difference.

$50 can provide 5 trained birth attendants with clean birthing kits

$150 can provide a community health worker with a monthly stipend and training materials

$200 can treat 4 children with malnutrition (with vitamins and food supplements)

$500 can provide 125 children with life-saving medications for respiratory illness, diarrhea, or malaria

$750 can provide 30 malnourished pregnant women with nutritional supplements and vitamins

$1,000 can help 10 community health workers start an economic strengthening activity

$2,000 can provide 5 health care providers with a five-day clinical skills training course

Donate now:

Online at [www.medicinesforhumanity.org](http://www.medicinesforhumanity.org)

Or via check mailed to:
Medicines for Humanity
800 Hingham Street
Suite 200 North
Rockland, MA 02370

Please consider a recurring donation. Details are available online at [www.medicinesforhumanity.org/donate](http://www.medicinesforhumanity.org/donate)

#5 for humanity

Raise 5 fingers. Tag 5 people. Donate 5 dollars. That is the slogan for a new social media awareness and fundraising campaign called #5 for Humanity that was launched in 2016. Hundreds of people posted photos of their hands raised in solidarity, made donations to help save lives, and tagged friends to do the same. #5 for Humanity is an annual event that takes place during May, the fifth month of the year that also celebrates Mother’s Day. Please visit our Facebook page and join us by making a pledge to fight child mortality.
A Message from our Executive Director

When I think about why I do this work, the thread that holds me constant is my inherent belief that by working together we can make a deep-seated change. This inspires my personal journey of action. As an individual, I am one cog in the wheel, but I am also a part of something bigger. Together we turn the wheel that gives us the power to improve things for the greater good and our fellow human beings.

It was my great pleasure to join the Medicines for Humanity team this past year – a team committed to making a difference for vulnerable children around the world. Our mission at MFH is no small endeavor. Reducing child mortality in impoverished communities and saving the lives of children cannot be done alone. It is the collaboration, partnership and support that carries us on. Our partners, our funders, and people like you, are what makes this vision a reality. Steve Jobs once said, “The ones who are crazy enough to think that they can change the world, are the ones who do.”

I want to acknowledge and thank all those who are mindful, conscientious drivers of change – our partners including international non-profits, communities of religious women, government representatives, local implementing organizations, the Catholic Church, academic institutions; our funders – foundations, grantors, individual donors – no matter how large or small – every penny makes a difference; our supporters – those who champion this work and spread the word, colleagues who collaborate and provide advice, fellow child health advocates; and finally the Board of Directors and the dedicated staff of MFH who work tirelessly and passionately for our mission.

Are we crazy to think that we can change the world? Together, I believe that we can.

With gratitude,

Margaret E. Brawley, MPH
Executive Director
For more information about Medicines for Humanity, please contact Margaret Brawley, Executive Director at mbrawley@medicinesforhumanity.org.

Medicines for Humanity is a 501(c)(3) non-profit organization, headquartered in the United States.