“Many of you may remember the story that compelled me to start Medicines for Humanity...

It is about a young boy in Ecuador that had died for a lack of twenty cents worth of oral rehydration medicine... and about his mother who was completely distraught because she had bought food for the rest of her family instead of medicine for her child... she had made the wrong choice.

But it was not just this little boy... but that millions of children... like this boy... were dying needlessly every year... and millions of parents like this mother were forced into these unimaginable situations... and faced these impossible decisions. I pointed out that the need was urgent... and that we could not afford to wait... and I asked for your help.

So first and foremost... Thanks to each of you for your generous response! Thank you for your ongoing and life-giving support! And thank you for caring so much about these kids! My hat is off in salute to each of you.

We celebrate the beauty of the children around the world... it is especially the neediest of these children... that move our hearts... and what we have done to reduce their suffering and respond to their needs.”

Tim Bilodeau, MFH Founder
A Message from Our Board Chair

We are reaching a significant milestone this year. It will be 25 years since Tim Bilodeau decided to take “the road not taken” and do something about the needless deaths of millions of children each year from preventable causes. Tim implored us to act. He told us, “The house is on fire,” referring to the tens of thousands of children who die with each passing day. He was compelled to fight this injustice and he sent out the call to everyone who believed that every life is precious.

The mission of Medicines for Humanity is very simple and direct. It is to save the lives of children by going to places where there are many dying – where there are high child mortality rates – and providing the basic medicines and health services they need.

When the children and mothers at our sites receive this help, it gives us all a very special feeling. Because they wouldn’t have gotten that help – they wouldn’t have received those treatments – if it weren’t for Medicines for Humanity. We don’t do this alone. We are successful because of the commitment and hard work of our staff, our in-country partners, our Board, and our generous donors.

Twenty-five years later, Tim’s vision and legacy continue through Medicines for Humanity projects around the globe. I am grateful to be part of this and invite you to celebrate our progress together as you read this 25th Anniversary Edition of our Annual Review.

Thank you for your support,

Cordelia “Kirk” Ryan
Medicines for Humanity Board Chair
1996
MFH founder, Tim Bilodeau, is compelled to stop the needless deaths of innocent children from preventable illnesses.

1997
Tim forms Magnificat Global Health to address this injustice.

1998
Magnificat employs a business model called MedShare that purchases medicines for less than 20 cents on the U.S. wholesale dollar from a network of international pharmaceutical suppliers.

1999
The organization begins a 20-year partnership with the Children of God Relief Institute in Kenya to support the health needs of HIV+ children and their families.

2000
MFH collaborates with in-country maternal and child health partners in Haiti, Dominican Republic, Ecuador, and Bolivia.

2001
A partnership begins with the Daughters of Charity in Quisqueya, Dominican Republic (DR) to support a mobile clinic that brings health services to marginalized rural communities.

2002
A second mobile clinic project begins in partnership with the Grey Sisters to serve mothers and children in villages near Consuelo, DR.

2003
The organization is re-named Medicines for Humanity (MFH). Projects are added in Sub-Saharan African countries of Kenya, Uganda and Angola.
2007
MFH begins projects in Guatemala, Jamaica, Peru, and Cameroon.

2008
An MFH project in Chulucanas, Peru empowers community health committees to advocate for access to potable water, and 7 clean water initiatives begin.

MFH provides emergency response funding for the Myanmar Cyclone.

MFH sends medicines valued at $3M for children and mothers in Darfur.

2009
MFH provides humanitarian assistance and emergency relief to Haiti after a devastating 7.0 earthquake hits Port-au-Prince.

2010
MFH employs water, sanitation, and hygiene (WASH) interventions to address water-related illnesses in mothers and children.

2011
MFH helps create a program of small community pharmacies that provide access to medicines in Esquipulas, Guatemala.

MFH starts a training program for Community Health Workers (CHWs) in DR called “La Loma” (The Hill).

2012
The DR Ministry of Health awards government certification for “La Loma” CHW graduates.

New projects are added in Cameroon, Haiti, Guyana, and Rwanda.

Projects teach mothers and caregivers how to grow nutritional home gardens that can also provide household income from agricultural sales.

2013
The DR Ministry of Health awards government certification for “La Loma” CHW graduates.
MFH begins a capacity building program for Sisters from 13 congregations across Haiti to improve provision of health services, in collaboration with the Little Sisters of St. Therese.

MFH integrates Traditional Birth Attendants (TBAs) into health projects to help safe births of babies and prevent maternal deaths during pregnancy and delivery.

MFH emphasizes systematic data collection of maternal and child health (MCH) outcomes to drive effective, quality programs and foster larger impact.

In partnership with the Mother of Mercy Hospital in the Nuba Mountains of Sudan, a civil war zone, MFH helps re-open and sustain six community clinics and provides services to more than 116,000 vulnerable people.

2014
No child dies on a Quisqueya batey during the past year due to lack of health services thanks to the mobile clinic.

The CHW model is a key component of MFH projects around the world. Community health education, home visits, and referrals to nearby clinics and hospitals increase dramatically.

2015
MFH begins a capacity building program for Sisters from 13 congregations across Haiti to improve provision of health services, in collaboration with the Little Sisters of St. Therese.

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2016
MFH reaches the new milestone of serving 1 million people annually with critically needed health services.

Hurricane Matthew strikes Haiti. MFH raises funds and provides emergency assistance.

2017
MFH engages in humanitarian and disaster relief health programming to conflict areas in Cameroon.

MFH begins a pilot project in Zambia, working with the Zambian Catholic Conference of Bishops.

2018
MFH receives its first USAID grant through the International Food Relief Partnership (IFRP) for nutrition programming in Haiti.

MFH initiates a pilot project in Malawi, working with Sisters to reduce child and maternal mortality.

In Haiti, MFH expands efforts to build the capacity of 13 congregations and their teams with a focus on Helping Babies Breathe, nutrition and Early Childhood Development.
MFH MILESTONES

2019
USAID awards MFH two IFRP grants for Haiti and Kenya.
MFH pilots a meter for CHWs to measure anemia in women and another tool for health facilities to identify early pneumonia in children.

2020
At the onset of the COVID-19 pandemic, MFH provides personal protective equipment (PPE), medicines and supplies to in-country partners, in addition to COVID-19 training and education.
MFH COVID efforts reach more than 5 million people.
USAID awards IFRP grants to MFH for the Dominican Republic and Haiti.
The small pharmacy program in DR becomes a social enterprise initiative to foster program sustainability and generate income for CHWs.

2021
MFH begins working in Democratic Republic of Congo and expands efforts in Malawi and Zambia.
MFH continues providing COVID-19 support, often being the only support project partners receive.
Another earthquake hits Haiti. MFH raises substantial relief funds and supplies water, food, medicines and tents so that services can continue for vulnerable families. MFH also supports the reconstruction of destroyed health clinics.
MFH begins a partnership to provide electronic medical records to patients and providers in Cameroon and establish virtual provider-patient communication.
MFH begins the SISTERS Project in Haiti to increase MCH clinical and management skills of Sisters and their staff and strengthen MCH services.

2022
MFH launches an interactive, global online education platform called Learning for Humanity to improve the provision of critically needed maternal and child health services and the management of health facilities, even in the most remote communities.
To paraphrase Robert Kennedy’s words with regard to Haiti... Some people see Haiti as it is... where almost one out of ten children do not reach their fifth birthday... and ask, ‘Why?’ We dream of Haiti the way it could be... a place where no child dies because they lack basic healthcare... and ask, ‘Why Not?’

MFH Founder, Tim Bilodeau remarks at 2014 Humanitarian of the Year Dinner

There were natural disasters and many security concerns that made work conditions in Haiti even more challenging during the past year. However, MFH continued to provide critically needed support to our project partners throughout the country.

**SPOTLIGHT: Cité Soleil, Port-au-Prince**

Despite the gang violence that continued to increase danger, the Cite Soleil clinic is one of the only facilities that remains open to serve the population.

46,000
CONSULTATIONS FOR CHILDREN UNDER 5 AND PREGNANT WOMEN

**SPOTLIGHT: Grand Boulage, West Department**

This is the only clinic in the community providing health care and home visits in this rural mountain community.

3,600
CLINICAL CONSULTATIONS

13,000
HOME VISITS

**SPOTLIGHT: MFH Earthquake Response**

On the morning of August 14, 2021, a magnitude 7.2 earthquake struck about 93 miles west of Port-au-Prince, leaving more than 100,000 buildings damaged or destroyed and an estimated 650,000 people in need of assistance. UNICEF estimated that more than half a million children were affected. MFH responded with essential nutrition needs, medications, supplies, medical staff support, and infrastructure support.

100,000+
PEOPLE RECEIVED DIRECT SUPPORT

500,000+
PEOPLE BENEFITED FROM INFRASTRUCTURE SUPPORT

Many of these deaths are compounded by malnutrition.

**Haiti**

63 out of every 1,000 children die before the age of 5 in Haiti

2021-2022
SPOTLIGHT: USAID Food Distribution Projects

This was especially impactful because this food enabled families to have healthy, protein-rich meals, and helped prevent malnutrition among young children by providing essential nutrients, protein and vitamins.

57,000
PEOPLE RECEIVED ESSENTIAL FOOD SUPPLEMENTS

3,500
CHILDREN AGED 6 MONTHS TO 2 YEARS RECEIVED A SPECIAL NUTRITIONAL SUPPLEMENT
Many childhood deaths in the DR are preventable and are primarily due to pneumonia and diarrhea. Additionally, malnutrition affects many young children in low-income communities and weakens their immune system leading to more infections.

The primary contributing factor to the higher mortality rate in the rural areas is the lack of access to basic medical care and medications. These communities are typically far from health facilities. Families often can’t afford to pay for transportation to get sick children to a nearby hospital or clinic, which means they often won’t go unless it’s an emergency.

**SPOTLIGHT: Quisqueya mobile clinic**

The mobile clinic with a staff of 5 travels to 26 rural communities each month. The clinic provides exams by a doctor and nutrition services by the nurse. If needed, patients receive medications prescribed by the doctor right after each consultation. The project supports 15 Community Health Workers (CHWs) who provide home visits and community health education on a regular basis. These home visits specifically target pregnant women, postnatal women, newborn babies, and families with children under five.

**SPOTLIGHT: Small pharmacies**

The rural communities surrounding Quisqueya are home to low income families. Often when children got sick, it was difficult to obtain the medicines needed due to high costs and long distances to pharmacies. MFH’s small pharmacy program trained neighborhood CHWs and supplied basic medicines for small home pharmacies. Not only did these pharmacies ensure access to affordable medications, they provided a source of income to supplement the stipends of CHWs and allowed them to continue to provide home visits, health education, and referrals to nearby health facilities.

“Our success gives us cause for optimism. We have demonstrated our ability to save these children... We remain steadfastly dedicated to doing so.”

MFH Founder Tim Bilodeau remarks about the DR at the 2012 Humanitarian of the Year Dinner
**SPOTLIGHT: USAID food distribution program**

This project specifically targets pregnant and lactating women, malnourished children, or children at risk for malnutrition and families through the distribution of Harvest Lentil Pro and Enov’Mum. These specialty food products have protein, vitamins, and minerals that prevent malnutrition and ensure proper growth of the baby during pregnancy.

- **7,050** children under 5 received Harvest Lentil Pro
- **3,000+** women received Enov’Mum
- **10,000** consultations for children under 5 & pregnant women
- **1,500** women received nutrition supplements and instruction
- **50+%** reduction in babies born with low birth weights

**SPOTLIGHT: Elias Piña**

Elias Piña is considered the poorest province in the DR with the country’s most underdeveloped economy and with 83.2% of its population living in extreme poverty. Here, the child mortality rate is significantly higher than most of the other regions in the DR. In FY 2021 we completed the Elias Piña “Strong Mothers, Strong Babies” project to reduce the number of babies born with low birth weights. Community Wealth Workers educated women about nutrition, breastfeeding, and how to grow nutritious produce in home gardens.

**MFH in the DR**
Strengthening and transforming community health services in Cameroon, and providing emergency health services to conflict-affected communities.

**SPOTLIGHT: Community Health Worker (CHW) Training**
This included training for treating displaced persons (IDPs) who have experienced trauma resulting from conflict situations.

- **320+** CHWS TRAINED
- **25,004** HOUSEHOLDS SERVED
- **46,908** HOME VISITS
- **8,439** ANTENATAL CARE VISITS

**SPOTLIGHT: Innovative Patient Transport**
The conflict has affected the capability of partners to transport patients. An innovative moto-taxi/motorbike ambulance was introduced. It is free of charge and its versatility, ease of use and adaptability is a game-changer.

"A small group of people, Medicines for Humanity and our healthcare partners in Cameroon, are successfully transforming healthcare in Cameroon to save not only the lives of today’s children... but the lives of tomorrow’s children as well."

MFH Founder, Tim Bilodeau, 2013 Humanitarian of the Year Dinner
SPOTLIGHT: Support for Internally Displaced Mothers and Children

Focus was on the most vulnerable, particularly single mothers caring for many children. Many also received support for small business initiatives to help them sustain their families.

12,567
IDPS RECEIVED
FOOD AND NON-FOOD ITEMS
In Zambia, we are building community partnerships in poor, vulnerable communities. An integral part of project activities has involved reaching out to traditional village leaders to leverage community resources and bring about systemic change. This approach has fostered community ownership, even to the extent that local laws have been passed that support and underscore program goals.

**SPOTLIGHT: Community Health Services**

- **2,889** deliveries by skilled birth attendants
- **4,474** perinatal visits
- **20,012** pediatric exams

**SPOTLIGHT: Community Health Worker (CHW) Training**

This encompasses building health care knowledge and skills, establishing and growing home gardens, and economic strengthening activities.

- **91** CHWs trained
- **17,270** home visits
- **8,673** mothers received MCH education
When I started MFH it was pretty lonely on what I would call my ‘Road Not Taken’... but I am not alone any more... and I want to thank each and every one of you for your commitment and generosity to bring needed health services to the world’s most vulnerable children.”

MFH Founder, Tim Bilodeau, 2015 Humanitarian of the Year Dinner

**SPOTLIGHT: Nutrition Assistance**

Sustainable initiatives included provision of seeds for home gardens, grain milling stations, and chicks for raising poultry.

280 MALNOURISHED CHILDREN & MOTHERS SERVED

**SPOTLIGHT: Bore Holes**

New wells were dug, and clean water sources became available where once there had been none.

5,344 PEOPLE HAVE ACCESS TO CLEAN WATER FOR THE FIRST TIME
In 2020, MFH began partnering on a pilot project to improve MCH outcomes for vulnerable women and children in Ciferano, in the Eastern region of the country. After only two years, we are clearly making a difference. Here are some of the outcomes from this past year.

**Democratic Republic of Congo (DRC)**

The mortality rate for Children Under 5 in the DRC is the **fifth highest** in the world.

---

**SPOTLIGHT: MFH impact on child mortality**

**Children Under 5 Outcomes**

- **-13%** Malnourished Children
- **-15%** Child Deaths
- **-9%** Children with Diarrhea

**SPOTLIGHT: MFH impact on maternal health**

**Maternal Health**

- **+40%** Safe Deliveries at Health Facilities
- **+38%** Prenatal Care
- **+36%** Postnatal Care
“This is one of the most painful memories that still haunts me from my previous work in the Congo. The culture of the people of Bukavu doesn’t allow people to cry when a newborn baby dies. This is because the death of a newborn is very common. As soon as babies die, they are quickly buried, the graves are not marked, and none of the ceremonies that are carried out for older children or adults take place. To some extent it is considered a taboo for the mother to mourn. She is encouraged to try having another child with the hope that the baby may be lucky the next time around and survive.”

— MFH Program Director Kenneth Muko
MFH maternal and child health services in Malawi have centered around the St. Joseph Health Centre in Chiphwanya. This is a large rural area where child mortality is high. For the past two years, we have been addressing some of the key proximal causes of maternal and child deaths in the area together with the committed and able leadership at the health center. The results are very encouraging.

**SPOTLIGHT: Community health services**

- **2,465** home visits
- **50** households received water purification tablets

**SPOTLIGHT: Malnutrition**

- **79** children & mothers treated
- **3,278** children under 5 received anti-parasite treatments

“We celebrate the beauty of the children around the world... It is especially the neediest of these children... that move our hearts... and what we have done to reduce their suffering and respond to their needs.”

MFH Founder, Tim Bilodeau remarks at the 2016 Humanitarian of the Year Dinner
SPOTLIGHT: Maternal & child health

1,155 PERINATAL VISITS

1,615 WOMEN RECEIVED MCH EDUCATION

6,540 VACCINE DOSES ADMINISTERED

MFH in Malawi
SPOTLIGHT: Learning for Humanity 2021

Our in-country healthcare partners around the world face many challenges providing services to vulnerable populations in remote areas. Among them is the opportunity and ability to receive more training and build skills to increase their capacity for saving lives. Often times they cannot spend time away attending classes, or they lack the resources to pay for travel and accommodations. This is why Medicines for Humanity developed an online learning platform to provide the education and training our partners tell us they need.

This past year, MFH piloted an interactive, cooperative, self-paced e-learning experience tailored to the specific needs of healthcare providers serving marginalized communities around the world, the majority of whom are Catholic Sisters. We call it Learning for Humanity.

Capstone Project Success Stories

“I was able to create an income-generating activity to fund my pharmacy. The community has access to medicines they couldn’t afford before.”

– Sr. Lilian Makena, Community Health Worker, Kenya

“Now my staff has a clearer understanding of their roles and responsibilities because of the employee manual I developed, and services to our patients have improved.”

– Sr. Knowledge Ndlovu, Nurse, Papua New Guinea

“Our fundraising requests for our mobile clinic are more credible and effective because I can share the operating plan that I learned how to create.”

– Sr. Marilyn Minter, Mobile Clinic Manager, Jacmel, Haiti

100+ PARTICIPANTS COMPLETED COURSES
**Self-paced learning**

**Accessible via the Internet on any device at any time**

**Curriculum covers a variety of management and leadership topics**

**Facilitators serve as course guides**

**Video and animated content**

**Live sessions with experts**

**Engagement with others taking the courses**

**Discussion boards**

**Chat rooms**

**Capstone projects**
### Cameroon

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### Democratic Republic of Congo

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### Dominican Republic

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### Haiti

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### Malawi

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### Zambia

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Medicines for Humanity has earned a Platinum Seal of Transparency rating from CANDID, a world renowned and trusted source of non-profit information. This designation underscores Medicines for Humanity’s commitment to providing donors and funders accurate and relevant information to assist in evaluating the organization’s performance and potential.

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Henz Hanzala, Zambia