

Global Health Partnerships



Mission Statement

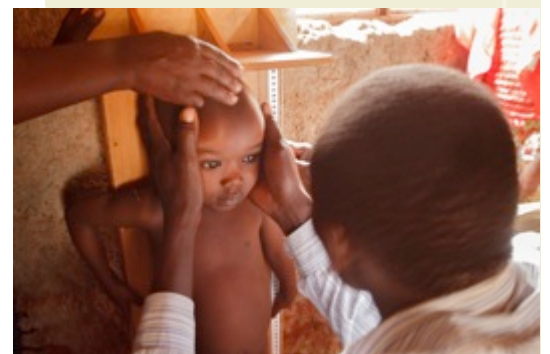
Global Health Partnerships (GHP) is a non-profit organization of medical professionals and other volunteers who work in developing countries as partners with local community organizations and health care providers to improve the health and well being of the poor and marginalized throughout the



Governance

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Year in Review

Global Health Partnerships (GHP) has been providing health care and humanitarian aid in Kenya since September 2007. The Kenya project, called **the Kisesini Community Health Project**, consists of the Kisesini clinic (Dispensary) and the community projects that focus primarily on village-based maternal and child health. The project serves a population of approximately 50,000 and our service population seems to grow every year. This report covers the GHP fiscal year of July 1, 2013 – June 30, 2014.



History of GHP in Kenya

The clinic in Kisesini was started by a Kenyan women's basket weaving co-op. The women saved some of their basket income to construct a rudimentary building in the village of Kisesini. GHP raised the funds to complete the facility and purchase the equipment and supplies. As planned, the clinic was designated a Government of Kenya (GOK) facility. GOK can only provide

for the salaries of the RN staff and only some basic medicine and supplies. GHP arranged the training of a network of lay **Community Health Workers (CHWs)** who work in their villages to improve child health. GHP purchases additional essential medicine and supplies, continues to train CHWs, and sends medical teams twice a year to do volunteer work and teaching. Because of the talent and kindness of the nursing staff, and the fact that GHP supports maternity care, keeps the pharmacy stocked, and provides emergency medical transportation, this clinic is the best in eastern Kenya. GHP is the perfect partnership including the Kenyan Health Ministry, the wonderful Kenyan nurses who deliver care full time, the University of New Mexico School of Medicine and the medical students who study and serve at the clinic.

Clinical Services at the Kisesini Clinic

Three nurses who receive a government salary provide the primary care services, including normal vaginal deliveries, at the Kisesini Clinic. Nicholas Mutuku is the nurse-in-charge and the volunteer coordinator of GHP projects. The other two nurses are Vincent Makau and Theresia Waeni Makau. During the 2013-2014



fiscal year there were a total of 13,247 patient visits, which is an increase from the 11,506 in the previous fiscal year. There were 82 vaginal deliveries of 86 newborn infants, an increase from 50 deliveries the previous year. An additional 13 women received care during labor but required transport for complications. During the fiscal year there were 445 visits of pregnant women receiving prenatal care compared to 320 the previous year. There were 346 dental patients compared to 381 the previous year. Demand for all services is increasing.

GHP purchases the lab supplies and pays the salary of a lab technician of approximately \$250 monthly. GHP has funded emergency transport of patients using the GHP ambulance to a district hospital for a higher-level care until March 2014 when the Machakos County government provided an ambulance and an EMT. The GHP vehicle is now used for emergency patient transport from remote villages to Kisesini (with the government ambulance transporting to the hospital), and for pickup and delivery of medication/supplies and village outreach clinics. The cost of maintaining the vehicle (a Toyota Land Cruiser, modified to serve as an ambulance) is the largest maintenance expense category for the GHP fiscal year.



Maternity Center Opens A Dream of Many Years Comes True



For many years the women of Kisesini and beyond have wanted a place to safely deliver their babies. After years of planning the project took shape under the supervision of head nurse Nicholas Mutuku. The new maternity center became operational in March 2014 with a grand



dedication celebration. A kitchen has been built, and Traditional Birth Attendants (TBAs), have been hired to provide 27/7 support and meals for the maternity patients. GHP pays the extra



salary costs for weekend coverage by the government

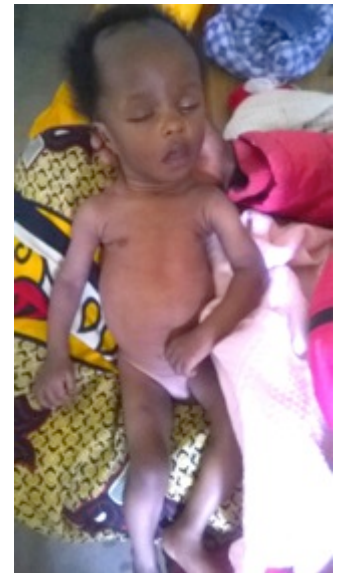


nurses (approximately \$75 per weekend). What better way to celebrate the new maternity center than the birth of twins? Thanks to the dedication of the nursing staff, every woman near Kisesini can not only be monitored during pregnancy, but can receive expert medical assistance during and after delivery.

Community-Based Services

Child Nutrition

Malnutrition (undernutrition) is an important underlying cause for many childhood deaths, and results in growth, neurological and development problems of the surviving children. GHP initiated a therapeutic feeding project to treat malnutrition. This community-based program provides treatment in the child's home, rather than in a hospital or a centralized therapeutic feeding center. The treatment uses Plumpy'nut® (a fortified peanut-based product) for the most severely affected children, and Unimix® (a fortified corn-soy flour blend) or PlumpySup for those less severely affected. During the fiscal year a total of 28 malnourished children received care in the therapeutic feeding program, compared to 79 the previous year. 10 children were treated with Plumpy'nut for severe malnutrition. Five of the children



recovered completely, 3 were lost to follow-up, and 2 are continuing the program. 18 children were treated with Plumpy'sup or Unimix for moderate malnutrition; 10 recovered completely, 7 were lost to follow-up, and 1 is continuing the program.



GHP has been distributing food relief to families that are most in need. During the past year 20 families received a monthly food ration of corn and beans. The cost is approximately \$750 per month (\$42 per family per month). These families are extremely poor and wracked with health problems. The families are personally interviewed and followed by the nursing



staff at the Kisesini Health Center. They are very grateful for the chance to raise and educate their children.

GHP also has implemented a project for *prevention* of child malnutrition. Four CHWs in Syokisinga sublocation received additional training in child nutrition and household hygiene. They have been conducting education sessions for mothers of young children starting during pregnancy and continuing until the children reach 24 months of age. The University of New Mexico is conducting a study of the effectiveness of this project to prevent child malnutrition.



Improving Newborn Infant Care

In Kenya the child mortality rate (the number of children who die before 5 years of age per 1,000 live births) has been high, but there has been considerable improvement over the past few years. However, there has been very little progress made on the death rate of young infants during the first month of life (known as the neonatal period). About one third of child (under-5) deaths occur during the neonatal period, and most of



those neonatal deaths are in the first week of life. GHP has implemented a project of home visits by CHWs for newborn infants, as recommended by UNICEF for low-income countries like Kenya. In March, 2011 a training program was for 20 community health workers (CHWs) was conducted to establish the newborn home visitation project for the villages of the GHP catchment area. The CHWs visit the newborn infants 3 times during the first week of



life, taking their temperature, counting their breathing rate, looking for early signs of infection so that prompt treatment can be arranged. The 20 CHWs have been visiting about 700 newborn infants each year, and over 90% of the infants have been visited at least twice. In March 2014 the CHW

leaders under

GHP/UNM supervision trained an additional 10 CHWs. This program has made a huge difference in the survival rates of newborn infants. The nursing staff at the Kisesini Health Center are able to capture more infants at risk during the

outreach clinics that take health care to families who are so remote they would otherwise never see a nurse. The researching medical students from UNM are studying the results of these new projects in a scientific way. So far these programs seem to be saving newborn lives.

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Village Outreach

Outreach clinics deliver preventive health care services to the more remote villages of the catchment area where access to care is limited for many families. GHP supports



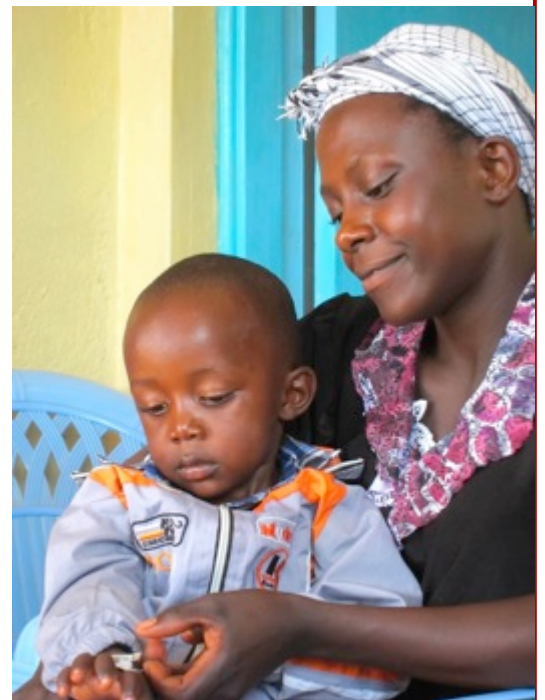
weekend outreach clinics that focus on maternal and child health including immunizations for children, family planning services, prenatal care, and treatment of child malnutrition. The GHP outreach clinics are conducted on two weekends each month and are staffed by the Kenya nurses and coordinated by the community health workers. The services provided include immunizations, vitamin A supplements for children, deworming, and growth and nutrition assessment. Women are provided with family planning

services (Depoprovera injections and birth control pills). Pregnant women are seen for prenatal care. The cost of each outreach clinic is approximately \$80. This is one of our best health care bargains.



GHP has developed a plan to increase the number of skilled birth attendant deliveries in the Kisesini clinic area by incorporating the help of Traditional Birth Attendants (TBAs). The TBAs are paid a “per diem,” to cover transportation and meal expenses, of 200 Kenya Shillings (\$2.50) per day to bring their pregnant clients who are in labor to the health facility. As the deliveries are assisted by a skilled birth attendant, the experienced nurses, the TBAs have a chance to further their own learning. During the first 12

months of this project there was a 113% increase in the number of skilled attendant births and this has continued to increase. The ongoing costs to GHP for this program are approximately \$200 per month, with a very good return on our investment.



Dental Care in Kisesini



In rural Kenya access to dental care is very limited and expensive, out of reach for the poor. The pain and suffering from untreated toothaches and dental abscesses are common. GHP has supported a weekend dental clinic in Kisesini in order to meet this need. GHP purchased dental equipment and supplies and has

arranged for a Kenyan dentist to conduct the dental clinics. Hundreds of patients have been treated with often life-saving care. Many of the patients have long-neglected dental problems, and many tooth extractions have been performed. All patients are given instructions in preventive oral health and provided with free medications as needed, toothbrushes and toothpaste.

Head Nurse Nicholas has instituted a preventative dental program in the elementary and secondary schools in the Kisesini area. Thousands of children have been instructed in dental hygiene and



given the materials to comply. At follow-up, Nicholas and nurse Theresa hope to supply enough dental materials that the students can carry the hygiene message home to their entire families.

UNM Medical Students Research the Results of Our Projects



Every spring second year students from the University of New Mexico School of Medicine travel to Kisesini to do research on the efficacy of the projects that GHP initiates and supports. The opportunity to scientifically study the effect GHP's projects have on the health of the community is invaluable. Dr. Angelo Tomedi, president of GHP and a member of the faculty of the UNM department of Family and

Community Medicine, supervises the research. The students are continuing with ongoing research projects as well as starting some new projects. Both the UNM and the Kenyan Health Ministry's human research review boards must approve all research projects. The University provides financial support for

these projects in the form of grants.

Many research papers have been and are awaiting publication in medical

and public health journals. Some of these projects include a study of the feasibility and effectiveness of supplementation with locally available foods in the prevention of child malnutrition in Kenya, published in Public Health Nutrition. This study demonstrated that

the distribution of locally available foods by GHP during the time of a drought significantly improved child weight gain and decreased acute malnutrition in Kenyan children. The students have also looked closely at a strategy to increase the number of deliveries with a skilled birth attendant in Kenya, as published in International Journal of Gynaecology and Obstetrics. The early results of the Community Health Worker home visitation project to prevent neonatal deaths in Kenya has been published in the Journal of Tropical Pediatrics.

In general the student research program, as partnered with the nurses at the Kisesini Health Center, and approved by both UNM and the Kenyan Health Ministry has been a learning/teaching victory for all involved. And it certainly helps GHP direct our health care dollar in the most effective directions.



2014 Financial Review

Revenue:

Contributions	\$94,324.86
Grants	\$18,000.00
Investment	
Income	<u>\$128.37</u>
	\$112,453.23

Expenses:

Program	
Expenses	\$121,805.96 *
Fundraising	\$4,840.34
Managerial	
expenses	<u>\$1,137.45</u> **
	\$127,783.75

*Includes construction of new maternity center

**Managerial expenses account for only .8% of total expenses and 1% of total revenue for the fiscal year.



Global Health Partnerships
PO Box 4385
Albuquerque, New Mexico 87196
ghp-usa.org

GHP is a 501(c)(3) non-profit
organization

Our dream is to expand the services we support at our clinic in Kisesini. We want every mother, child, and family within our service area to enjoy the best possible health. 100% of your donations go toward this dream.