



Curamericas Global
HOPE THROUGH HEALTH

ANNUAL REPORT

2012-2013

On the cover: Trained community health volunteers in Guatemala heading out to conduct health assessments in remote communities in Huehuetenango. Curamericas Global depends greatly on the support of local volunteers who help expand our reach by spreading essential health education and services to hard-to-reach populations.

CURAMERICAS GLOBAL AT A GLANCE

About Curamericas Global

Curamericas Global is a nonprofit public health organization dedicated to improving the overall health and wellbeing of mothers and children in some of the world's most remote communities. We work with local organizations to bring about sustainable changes to the healthcare systems in the communities we serve.

Vision

A world free of suffering from treatable or preventable causes.

Mission

Curamericas Global partners with underserved communities to make measurable and sustainable improvements in their health and wellbeing.

Services

- Recruitment and training of local staff
- Immunizations
- Nutrition education
- Integrated management of childhood illnesses
- Newborn and maternal healthcare
- Family planning education
- HIV prevention education and treatment
- Water and sanitation improvements

Where we work



Over
1,000,000
Beneficiaries
in
31 years

CBIO Methodology

The foundation to Curamericas Global's work abroad is our Community-Based, Impact-Oriented Methodology, characterized by:

- Efficient **identification of disease and death patterns** to tailor effective interventions
- Continuous health status tracking to facilitate program quality improvement and modifications to meet **changing community needs**
- **Home visits** to build trust and reach individuals who might otherwise not receive care
- **Health education and services** offered in central community locations and often coordinated with community events
- **Volunteer Peer Educators** that deliver health messages and services while gathering vital information for program feedback and improvement

**2012-
2013**

Total number of staff: **11**

Total number of volunteers: **27**

Total population served: over **250,000**

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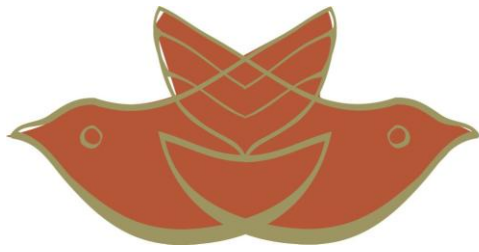
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Curamericas Global
HOPE THROUGH HEALTH

WORDS FROM OUR FOUNDER



“The goal is to achieve, by 2035, under-five mortality rates that are no greater than 20 deaths per 1,000 live births in all countries of the world and in subgroups within those countries. A complete end to death is not feasible, as deaths continue to occur even in the best hospitals in developed countries. The aim is to get global under-five mortality down to a level that is comparable to the rate of developed countries a few decades ago.

Curamericas Global is well-poised to contribute to meeting this. We have been focused on reducing maternal and under-five mortality for the past 31 years. Along the way we have measured how we’ve achieved our goals and recorded best practices. There will be a growing emphasis on showing changes in mortality around the world and there will, out of necessity, be a growing emphasis on community-based services, which is the foundation of Curamericas Global’s methodology. As Curamericas Global focuses on high-impact, community-based interventions that reduce maternal and childhood mortality, the organization will be able to play a significant role in reaching the goal of ending preventable maternal and child deaths by 2035. Achieving this goal will be one of mankind’s most important accomplishments.”

-Henry Perry, Founder of Curamericas Global, after participating in the *Child Survival Call to Action* Conference in Washington, D.C. in June, 2012. The conference was marked by a call-to-action to end preventable maternal and child deaths. The resulting initiative, called “A Promise Renewed: Ending Preventable Maternal and Childhood Deaths by 2035” strives to improve child, maternal and reproductive health throughout the world.



LETTER FROM THE EXECUTIVE DIRECTOR

Dear Friends,

Thirty-one years ago, Curamericas Global was created with the goal of establishing primary healthcare programs that are responsive to local health needs by creating partnerships with the communities themselves. The grassroots approach leads to sustainable and measurable improvements and lives saved. In Liberia, we were able to reduce mortality in children under-five by 60% and save nearly 1,000 lives in a population of 137,000 people!* Today, Curamericas Global is proud to be a leader in international public health, applying innovative strategies to affect sustainable change to healthcare systems in communities in Liberia, Guatemala, Haiti, Bolivia and Kenya.

I'm pleased to share our 2012-2013 Annual Report. As you will see later in this report, this past year we expanded our programs in Africa and Latin America, forged new partnerships with international and local organizations, and broadened our volunteer program. Thanks to additional funding secured from organizations such as Ronald McDonald House Charities, we are now in a better position than ever to provide lifesaving services and education to some of the world's most underserved communities.

Within the pages of this report is included a synopsis of our programs abroad. As can be noted, our programs in Liberia and Guatemala continued to provide vital services and education to populations in need. In addition, we have partnered with Carolina for Kibera to implement programs in Kenya focusing on HIV education and treatment, as well as child and maternal health.

The information you'll find here reflects our ongoing commitment to remain transparent and open in communication with our donors. By maintaining complete transparency, we hope to ensure confidence in our supporters that their donations are used responsibly to benefit the communities we serve. In addition to this report, the complete audited financial statements are available for viewing on our website at www.curamericas.org.

Curamericas Global is forever grateful for the generous support of our sponsors, volunteers and local communities that help us achieve our mission to make sustainable improvements in the health and wellbeing of the world's most underserved communities.



Sincerely,

Andrew Herrera
Executive Director

* Capps, J., Warren, N., and Ballah, J. *Nehnwaa Child Survival Project Final Evaluation Report*. Curamericas Global, 2013



Curamericas Global
HOPE THROUGH HEALTH

CURAMERICAS GLOBAL

Curamericas Global is a non-profit organization located in Raleigh, North Carolina. The organization was founded in 1983 by Dr. Henry Perry, III and Dr. Alice Weldon with the goal of establishing primary healthcare programs that are responsive to the needs of the community while building the capacity of local health service providers. Curamericas Global's projects in Bolivia, Guatemala, Haiti, Liberia, Kenya and Mexico have consistently exceeded project goals, **servicing over 1,000,000 beneficiaries in 31 years.**

Our Vision: A world free of suffering from treatable or preventable causes.

Our Mission: Curamericas Global partners with underserved communities to make measurable and sustainable improvements in their health and wellbeing.



Our Core Values

Compassion – Giving a helping hand to those who are suffering and dying from readily preventable or treatable conditions.

Equity – Prioritizing those in greatest need and asserting that everyone should have access to health care, leading Curamericas Global to work in remote and often forgotten places.

Empowerment – Assisting individuals, communities and local organizations to contribute to their community's health and wellbeing.

Sustainability – Creating lasting benefits through education and long-term partnerships with communities, local implementing organizations, and local leaders.

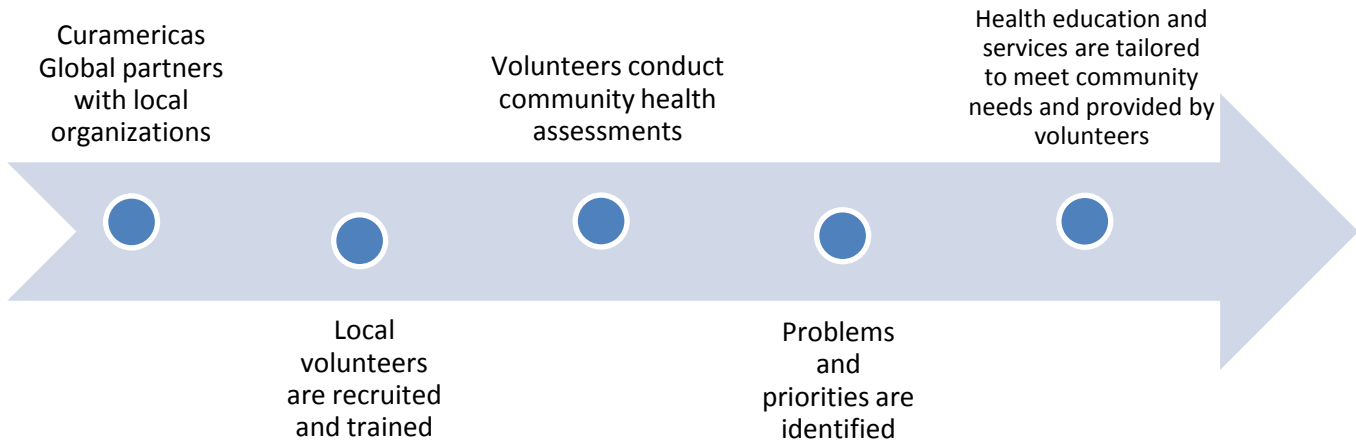
Data Driven – Commitment to use of evidence-based practices to achieve maximum health benefits for impoverished people and to demonstrate that these benefits have been achieved.



COMMUNITY-BASED, IMPACT-ORIENTED METHODOLOGY (CBIO)

The CBIO methodology focuses on building a **partnership with communities** to ensure that the major health problems in the community are identified and that everyone, especially those most in need, receives **essential health services and education**. That means going beyond providing services at local health facilities and routinely visiting homes, often by foot.

Curamericas Global works with local organizations at all of our program sites to establish Care Groups, led by one paid staff member who guides and supervises **10-15 volunteer peer educators**. By training volunteers who then educate their neighbors, project staff members are able to **expand the reach and intensity** of their health promotion at a lower cost.



*Left: Community Health Volunteers in Guatemala record health statistics at an assigned household. Above: Volunteers providing adolescents with HIV prevention education. Curamericas Global recognizes that **active community participation** is vital to achieving and sustaining meaningful health outcomes. We rely greatly on the work of volunteers who help to ensure that our programs reach even the most remote communities.*



LIBERIA

Curamericas Global's **Nehnwaa Child Survival Project** just completed its fifth and final year, with the goal of **reducing the under-five mortality rate** by addressing the principle causes.



137,000 People 120 Communities

Main Project Interventions:

- Maternal and newborn care
- Treatment of pneumonia, measles & diarrhea
- Immunizations
- HIV education and treatment
- Water and sanitation improvements



A Community Health Volunteer educates a group of young mothers on the recognition and treatment of diarrhea, one of the main causes of childhood death in Liberia.

63% Reduction in child mortality

95% increase
in proper treatment of fever for children under age two

50% increase
in women who had at least 4 prenatal visits while pregnant

60% increase
in the number of births attended by skilled personnel

52% increase
in the number of infants who received essential newborn care

*All data is from: Capps, J., Warren, N., and Ballah, J. *Nehnwaa Child Survival Project Final Evaluation Report*. Curamericas Global, 2013.

**For more detailed information on our programs in Liberia, see p. 15



LIBERIA (cont.)

The Community Case Management (CCM) of Childhood Illness Project in Liberia focuses on the provision of **care and treatment of under-five children** as well as the **training of healthcare trainers**.

Master Trainers in Liberia after completing their initial training. Master Trainers educate Community Health Volunteers who spread the program throughout target populations.



A Community Health Volunteer(CHV) educates a young man in Liberia on malaria prevention. CHVs play a critical role in reaching remote populations.

Over
47,000
Community Members
educated on prevention of malaria, diarrhea
and pneumonia

Number of Children Treated		
Malaria 3,208	Pneumonia 4,397	Diarrhea 6,250

*All data is from: Warren, Nancy. *RMHC CCM Progress Report*. Curamericas Global, 2013.



HAITI

In 2012, an estimated 2.1% of the adult population in Haiti was infected with HIV/AIDS.* Curamericas Global’s partnership in Haiti focused primarily on HIV/AIDS education and prevention. **We trained 24 Team Leaders and 180 Peer Educators** to spread knowledge on HIV prevention and treatment to remote communities.



88,910

Adults educated on HIV

22,759

Women tested for HIV

14,779

Children educated on prevention of HIV through abstinence



48,665 People
133 Communities

A Team Leader teaches a group of Peer Educators about HIV prevention. Peer Educators spread their knowledge throughout their communities, reaching remote populations with limited access to health services.

*“HIV and AIDS Estimates (2012).” *UNAIDS*. Accessed 6/24/2014.
<<http://www.unaids.org/en/Regionscountries/Countries/Haiti/>>

**All other data is from: Sidibe, Bakary, and Leah McManus. *Managed Preventive HIV Service for Women in Haiti: Final Report*. Curamericas Global, 2013.

***For more information on our programs in Haiti, see p. 16

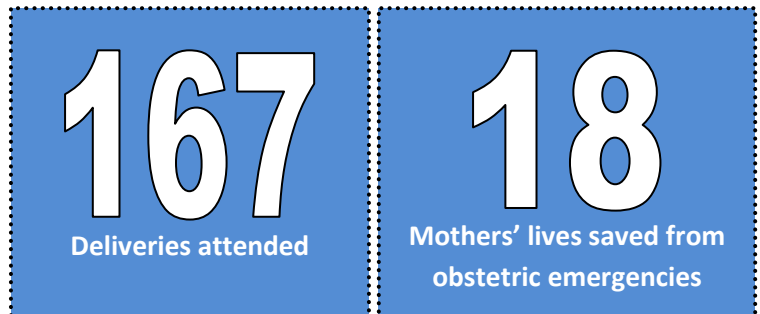


GUATEMALA

Since 2011, Curamericas Global has worked with our partner Curamericas Guatemala on the **CBIO Child Survival Project in Huehuetenango, Guatemala**, with the goal of reducing child mortality in Guatemala. The program provides health services through **home visits and clinics**, as well as **education and outreach** through staff and volunteers.



Community Facilitator in San Sebastián Coatlán – Volunteers from the community help Curamericas Global reach remote populations by conducting home visits.



Main Project Interventions:

- Diarrheal prevention and treatment
- Immunizations
- Nutrition education
- Pneumonia
- Maternal and newborn care
- Education on family planning



*All data is from: Stollak, Ira. *RMHC CCM Progress Report*. Curamericas Global, 2013.

**For more information on our programs in Guatemala, see p. 16



KENYA

HIV Prevention and Treatment

The population in Nairobi displays some of the **lowest knowledge of AIDS in Kenya**. This year, Curamericas Global partnered with Carolina for Kibera on a project that aims to **improve the knowledge and treatment of HIV** in Kibera, the largest slum by area in the world, located in Nairobi, Kenya.



Hygiene and Sanitation

Kibera suffers from some of the **highest child mortality rates** in the world, many of which are due to easily preventable diarrheal disease. Curamericas Global is working to improve the knowledge of **hygiene and sanitation** and to **strengthen the local healthcare system**.

30

Trainer of Trainers

recruited and prepared

19

Implementing Staff

trained

A local Curamericas' staff member holds an educational workshop for newly recruited Trainer of Trainers. Upon program completion, participants will prepare local volunteers to assist in program implementation in Kibera.





VOLUNTEER PROGRAM

History

The Volunteer Program has been an integral part of Curamericas Global since our inception. **Volunteer expeditions** to Mexico, Guatemala, Liberia, and Bolivia have provided support to our program sites while serving as rewarding experiences for participants. Curamericas Global also works with volunteers in our Raleigh office, providing **internships for college and high school students** who receive important work experience while also supporting the mission of our organization.

28 Volunteers

4,166 Volunteer Hours



Volunteers work to build an addition to a clinic in Bolivia. Volunteers help support our programs abroad and our headquarters in Raleigh, NC.

Volunteer Work

International Volunteers participate in:

- Direct medical care
- Community outreach
- Construction of health infrastructure
- Training of partner staff
- Operational and graduate research

Office interns perform:

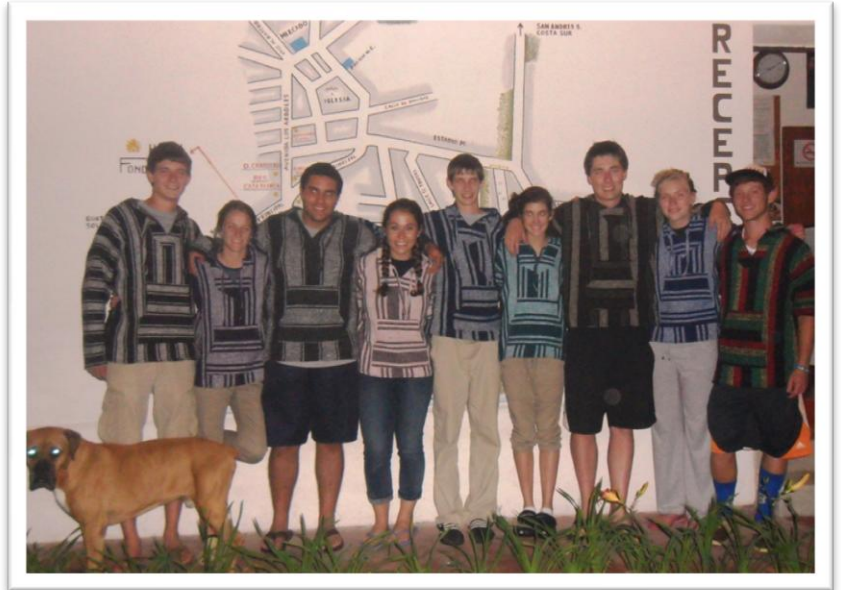
- Research, data entry and analysis
- Creation of educational tools
- French and Spanish language translations
- General administrative duties

Nancy Warren while volunteering in Liberia – An important and unique aspect of Curamericas' Volunteer Program is cultural exchange between international volunteers and the communities of our program sites, providing an enriching and mutually beneficial experience for both parties.



VOLUNTEERS 2012-2013

Curamericas Global greatly appreciates the **support of our volunteers** who have given their time and talents to benefit the thousands of children and families whom we serve at our project sites. This past year, volunteers went to Guatemala and Liberia and worked on improving existing health facilities, building the foundation for a new Casa Materna, and conducting project research.



In 2012-13, volunteers like these high school students from Fayetteville Academy helped to improve health facilities in Guatemala and provide healthcare services to remote communities.

International Volunteers:

- Amber Hill
- Nancy Warren
- Amanda Klinck
- Anni Kaschko
- Liz Allen
- Jason Lambden
- Kate Cassidy
- Winston Pantelakos
- Ernesto Graham
- Peyton Gibson
- Jeff Morrison
- David Vaughan
- Jack Legg
- Ande McCauley
- Brooks Keener
- Rocio Ochiltree
- Holden Ammons

Headquarters Volunteers:

- Sandra and Buzz Hartford
- Sarah Mohamed
- Lauren Heafy
- Essee Oruma
- Ali Niang
- Leah Gardner
- Mirza Halim
- Casey McCormick
- Olivia Bell

Thank You!



A CLOSER LOOK AT CURAMERICAS GLOBAL'S PROGRAMS ABROAD

LIBERIA

Nehnwaa Child Survival Project

Liberia's civil war devastated its civil society, infrastructure and healthcare system, resulting in appalling rates of child and maternal mortality and morbidity. Curamericas Global's Nehnwaa Child Survival Project just completed its fifth and final year of operations in collaboration with the Ganta United Methodist Hospital in Nimba County. The project **reduced the under-five mortality rate by addressing the principle causes** – obstetric complications, neonatal conditions, malaria, pneumonia, diarrheal disease, measles and HIV. The project met its goal of **reducing child mortality by 60%** through community-based programs that address the principal causes of death among mothers and children.

*All data is from: Capps, J., Warren, N., and Ballah, J. *Nehnwaa Child Survival Project Final Evaluation Report*. Curamericas Global, 2013.

Community Case Management

The Community Case Management (CCM) of Childhood Illness Project in Liberia focuses on the provision of **care and treatment of under-five children** as well as the **training of healthcare trainers**. The CCM Project trained administrators and healthcare workers to be certified as Master Trainers. The Master Trainers then trained general Community Health Volunteers (gCHVs) in CCM for childhood illness at the community level. After the training, gCHVs were equipped with CCM kits composed of the means necessary to diagnose and treat cases of malaria, diarrhea and pneumonia in children under age five.

Key Accomplishments

- Over **35 staff trained**
- **120 general Community Health Volunteers** established and trained
- **128 Traditional Midwives** trained
- Over **1,700 Care Group Volunteers** trained
- Increase from **2% to 97%** in the **proper treatment** of fever for children under two years old
- **Increase from 25%-75% of women** who had at least 4 antenatal visits while pregnant
- Increase in number of births attended by skilled personnel **from 22.7% to 82.5%**
- Number of infants who received essential newborn care rose **from 34% to 85.9%**
- **58.1% increase** in mothers who received post-partum visit from trained health worker

Key Accomplishments

- **3,208 children** treated for malaria
- **4,397 children** treated for pneumonia
- **6,250 children** treated for diarrhea
- Educated **65,447 community members** on prevention of malaria, diarrhea and pneumonia
- **15 Master Trainers** trained

*All data is from: *RMHC CCM Progress Report*. Curamericas Global, 2013.



HAITI

HIV Prevention and Education

In 2012, an estimated 2.1% of the adult population in Haiti was infected with HIV/AIDS. Curamericas Global's partnership in Haiti was our first project to focus primarily on HIV/AIDS education and prevention. Using the CBIO, Haitian peer educators were assigned to districts where they led educational sessions for adults and youth, in addition to providing follow-up with individuals who have been infected with HIV or other STDs. Despite challenges presented by the 2010 earthquake, over the course of the three years the project was implemented, most goals and objectives were exceeded.

*All data is from: Sidibe, Bakary, Leah McManus. *Managed Preventive HIV Service for Women in Haiti: Final Report*. Curamericas Global, 2013.

Key Accomplishments

- Recruitment, training and deployment of **180 community-selected Peer Educators** and **24 Team Leaders**
- **88,910 adults and 14,779 youth** educated on HIV prevention
- **22,759 sexually active women tested for HIV**
- **46% of HIV-positive pregnant women** enrolled in Prevention of Mother to Child Treatment
- **100% of suspected victims** of sexual violence offered assistance and referrals to proper services

GUATEMALA

CBIO Child Survival Project

Guatemala's health statistics are among the worst in Latin America. Within our project area, the infant, child and maternal mortality rates are among the highest in Guatemala. Since 2011, Curamericas Global has worked with our partner Curamericas Guatemala on the CBIO Child Survival Project in Huehuetenango, Guatemala with the goal of reducing child mortality in Guatemala. The project has been incredibly successful and has seen a marked increase in the number of **children who receive vaccinations** as well as mothers with young infants who attend **health education classes**.

*All data is from: Author. *RMHC CCM Progress Report*. Curamericas Global, 2013.

Key Accomplishments

- **484 local community health educators trained** in provision of maternal health services
- **3 new Casa Maternas** constructed
- **18 maternal lives** saved from obstetric emergencies
- Neonatal mortality **reduced by 44%**
- Number of children who received treatment for diarrhea **increased from 43% to 83%**
- Rise in percentage of mothers receiving health education from **8% to 96%**
- Percentage of women who received postpartum care increased from **22% to 76%**



LOOKING AHEAD

Bolivia

Curamericas Global is excited to **continue our partnership in Bolivia with the Andean Rural Health Council (CSRA)**, one of Bolivia's leading national NGOs. Through this partnership, we hope to improve the abilities and potential of both organizations through a mutual exchange of ideas and strategies pertinent to the implementation of public health programs in the developing world. We also look forward to partnering with the CSRA in researching and applying for future funding opportunities.

Expanding Programs in Africa

Sierra Leone has some of the poorest health indicators in the world, with life expectancy at 47 years, an infant mortality rate of 89 per 1,000 live births, an under-five mortality rate of 140 per 1,000 live births, and a maternal mortality ratio of 857 per 100,000 births.* Curamericas Global will partner with a prominent local hospital to **strengthen their primary health care department and increase their ability to implement a community-based primary health care project**. Ultimately, Curamericas Global aims to reduce maternal and child mortality in Sierra Leone by improving community outreach to remote populations.

Volunteer Program

In the coming year, Curamericas looks forward to **expanding our volunteer program**. We plan to continue to coordinate volunteer experiences for groups from all across the nation, including churches, universities and high schools. Curamericas plans to **return to Bolivia with volunteers** as part of our renewed partnership with the CSRA. In addition, we are also excited to **extend our internship program** to include students from local high schools.

Liberia

Curamericas looks forward to **continuing to support the Ganta United Methodist Hospital** and to **building upon the success of the Child Survival Project in Liberia**. We are dedicated to providing long-term support and ensuring future sustainability at all of our project sites. In the coming year, we hope to continue to provide **staff trainings** and to build upon relationships with stakeholders.

*Sierra Leone Demographic Health Survey (SLDHS), 2008.



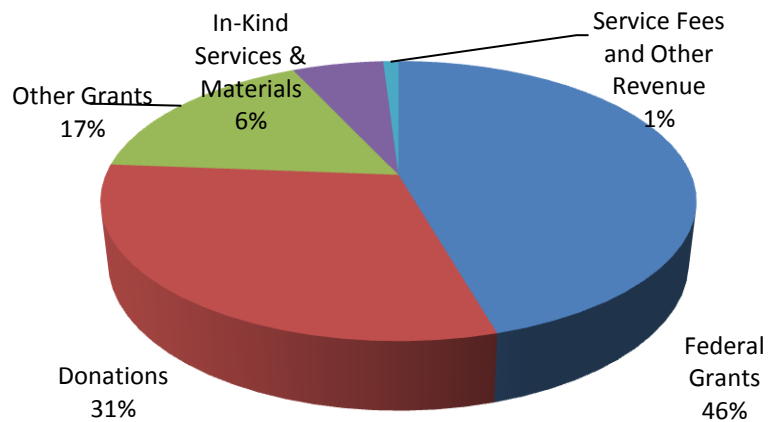
FINANCES

Curamericas Global receives funding from a wide variety of sources. In 2012-2013, **over 30% of our revenue came from donations** and less than half from federal grants. Curamericas Global also received funding from non-federal grants and other sources.

The vast majority of Curamericas Global’s budget is allocated to program expenses, with **more than 80% of our resources** directed to running our programs abroad. The remaining expenses are mostly managerial, with a small portion directed toward fundraising efforts.

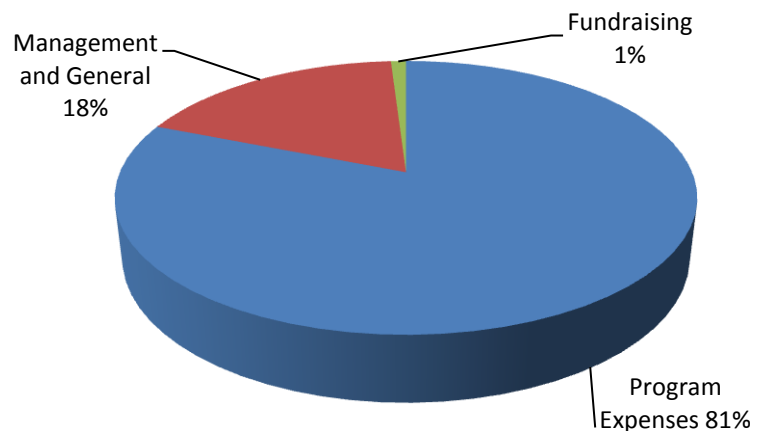
Support and Revenue*

Donations.....	\$591,098
Federal Grants.....	\$888,725
Other Grants.....	\$329,492
Service Fees.....	\$843
In-Kind Services and Materials....	\$121,692
Other Revenue.....	\$6,865
Total Support and Revenue.....	\$1,931,850



Expenses

Program Expenses.....	\$1,495,877
Support Services:	
Management and General	\$337,111
Fundraising.....	\$24,257
Total Expenses.....	\$1,857,245



Net Assets for FY 2012-13.....\$74,605



FUNDERS

Curamericas Global's work is made possible by the support of our many funders and partners. We work with national and local governments, international and local nongovernmental organizations, faith-based organizations, and community and private organizations.

We are incredibly grateful for the generous support received from the following organizations:

- Apple Lane Foundation
- Cardinal Gibbons High School
- Central United Methodist Church of Laurinburg, NC
- C. Freeman Heath Sunday School Class
- Christ United Methodist Church of Plano, TX
- Columbus United Methodist Church
- Cumberland Community Foundation
- Do Unto Others
- Fayetteville Academy
- First Church of Round Hill
- First United Methodist Church of Oak Ridge, TN
- Florida United Methodist Foundation, Inc.
- Global Public Service Academies
- GoodSearch
- Grace United Methodist Church
- Green Valley Community Church
- Haymount United Methodist Church
- Independent Charities of America
- International Business Machines Corporation
- Lawrence United Methodist Church
- Madison Horizons Rotary Club
- Mellow Mushroom
- Meridian Street United Methodist Church
- Mount Olivet United Methodist Church
- Okemos Community Church
- Philadelphia Electric Company Foundation
- Resurrection Medical Center
- Ronald McDonald House Charities
- Takeda Pharmaceuticals North America
- Top of the Hill Restaurant and Brewery
- Towson United Methodist Church
- Triplett United Methodist Church
- United States Agency for International Development
- United States Center for Disease Control and Prevention
- University of North Carolina Student Activities Fund Office
- Vanguard Charitable Endowment Program
- Vitamin Angels
- Western North Carolina United Methodist Conference
- Weyerhaeuser Family Foundation



Curamericas Global
HOPE THROUGH HEALTH

THANK YOU!

Curamericas Global is grateful for the generous contributions and support of our donors, without whom we could not provide health services to improve the lives of men, women and children across the globe.

Curamericas Global appreciates each of our partners, local staff and health workers who work tirelessly to improve child and maternal health in the communities in which we work.



Trained Community Health Volunteers in Guatemala - With the help of volunteers like these, Curamericas Global is able to reach remote communities and provide education and services to populations who might never receive them otherwise.

Interested in supporting Curamericas?

Visit us at www.curamericas.org to learn how you can help!

Curamericas Global accepts donations through our monthly giving program which allows gifts to be received through electronic funds transfers. We also accept donations of stock and property, and limited gifts-in-kind, such as air miles, cars, boats, and land.

We welcome new volunteers to continue to strengthen our efforts to bring health care and health education to so many who need it. For more information on becoming a volunteer with Curamericas Global, contact us at info@curamericas.org.



LEADERSHIP

Board of Directors

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Elizabeth Jordan-Bell, MPH, RD
Washington, DC

Nathan Robison
La Paz, Bolivia

Andrew Herrera
Ex-officio

Members of the Board of Directors and local Curamericas' staff celebrating the breaking of ground for a new Casa Materna in Pett, Santa Eulalia, Guatemala.



Staff

Andrew Herrera
Executive Director

Florence Amadi
Program Manager – Africa

Barbara Muffoletto
Development Associate

Jane Thibodeau
Administrative Assistant