

Impact Global Health Alliance

2026 IMPACT REPORT



MISSION

We envision a world free of preventable suffering. Our mission is to partner with underserved communities to make a measurable and sustainable improvement in their health and wellbeing.

REAL IMPACT STARTS IN COMMUNITIES. TOGETHER, WE ARE PROVING THAT READILY PREVENTABLE DEATHS CAN BE ELIMINATED—EVEN IN THE MOST REMOTE PLACES.

SOME THINGS NEVER CHANGE

You may have noticed a new look around here. Formerly ***Curamericas Global***, we became **Impact Global Health Alliance** in 2024 to better reflect our growing network of locally led partners. While our name has changed, our commitment to our core values remains the same.

Sustainability
We create lasting benefits through education and long-term partnerships with communities, local organizations and local leaders.

Equity
We prioritize those in greatest need and assert that everyone should have access to quality healthcare, no matter where they live.

Data-driven
We are committed to the use of evidence-based practices to achieve maximum health benefits for impoverished people and communities.

Compassion
We give a helping hand to those who are suffering and dying of readily preventable or treatable conditions.

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

THE HOPE THROUGH HEALTH FOUNDATION

The Hope through Health Foundation Endowment provides long-term, sustainable funding for Impact Global Health Alliance's mission. Built through the generosity of donors, the endowment ensures that our work with mothers and children continues for generations—offering a stable source of support beyond short-term grants and enabling us to invest in lasting partnerships and measurable health outcomes.

"It is my privilege to be able to include Impact Global Health Alliance through their Endowment fund, the Hope through Health Foundation, in my estate planning. I know the money will help save and improve many, many lives all over the world. There is NO organization more deserving. Please join me in including this beautiful not-for-profit in your estate planning."

– Joyce Houser, PhD and the estate of Frank M. Houser, MD



John Wyon, Joyce & Frank Houser, Henry Perry

REACH OF OUR ALLIANCE

According to the Gates Foundation 2025 Goalkeepers report, 2026 is projected to be the first year in this century in which child mortality increases. Impact Global Health Alliance is combating that prediction through our innovative alliance approach. Our core team is purposefully small - just two full-time staff members and a team of consultants. We're buoyed by a cadre of volunteers in the USA and abroad. All work is done on the ground level through local experts and community health heroes, making us a community of mutually supportive organizations – a powerful model unique in our field of work. Today we collaborate through five local implementing partners, including our newest partner Togo - and we're continually looking towards growth. In fact, we have an audacious goal to reach one million moms in the next five years.

OUR COMMUNITY

GUATEMALA

Since 2001 we have partnered with Curamericas Guatemala to serve a population of Indigenous Maya in the remote Cuchumatanes Mountains. We have responded to horrific maternal mortality by combining CBIO+ and Care Groups with Casa Maternas, community-built and operated maternal clinics where women can deliver safely.

KENYA

Since 2017 we have partnered with Kisii Konya Oroiboro Project (KIKOP) to serve a rural population in southwest Kenya. Facing tragically high maternal and child mortality, we combine CBIO+ and Care Groups to create thriving birthing centers and improve household health practices.

HAITI

Since 2020 we have supported the Healthy Mothers, Healthy Children Project (Pwoje Manman ki an sante, timoun ki an sante in Haitian Creole, or MASTAS for short) to serve the urban population of Repatriote, an impoverished settlement of Port-au-Prince, who face multiple health challenges. We are phasing in our work focusing on Care Groups.

BOLIVIA

This is where it all began, in 1983. Through our long-time work with Consejo de Salud Rural Andino (CSRA), the CBIO+ model was born and perfected.



OUR REACH IN 2025



GUATEMALA
19,926



KENYA
40,961



HAITI
2,698

This reach is made possible through our groundbreaking Census-Based, Impact Oriented (CBIO+) Methodology. CBIO+ is a community-based, community-led approach to treat and prevent unnecessary suffering, sickness and death within communities.

HOW IT WORKS

The CBIO+ approach follows a continuous, community-driven cycle:

1. Establish relationships with communities and engage participation
2. Conduct a community census to determine health priorities
3. Prioritize health problems and focus efforts
4. Monitor and evaluate results
5. Update census, reassess priorities, and refocus efforts

KENYA

96%
OF WOMEN RECEIVED POSTPARTUM CARE WITHIN 72 HOURS OF DELIVERY

TYPICALLY, ONLY 34% OF WOMEN IN THIS AREA DO

98%
OF PROGRAM MOTHERS CAN IDENTIFY DANGER SIGNS THROUGHOUT PREGNANCY, DELIVERY, AND POSTPARTUM

VS. 16% AT BASELINE

95%
OF PROGRAM MOTHERS REPORT HAVING HANDWASHING STATIONS AT HOME

COMPARED TO 5% IN OTHER COMMUNITIES

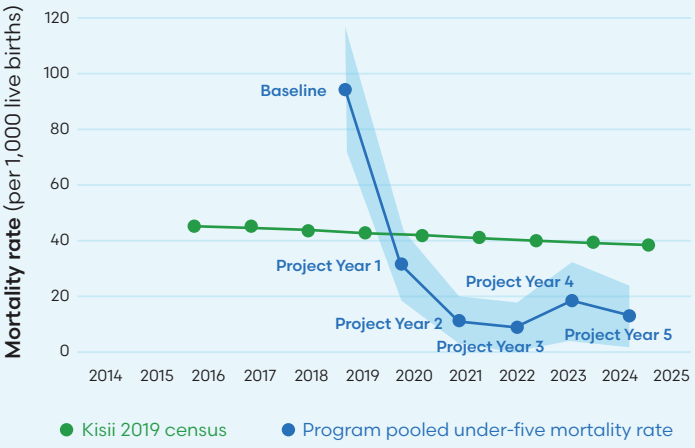
100%
OF BIRTHS TOOK PLACE IN A HEALTH FACILITY

COMPARED TO AN AVERAGE OF 66%

Numbers from a recently-released report on our work with KIKOP in Kenya prove that community engagement is the key to reducing deaths in mothers and children under five years old. This study looked at death rates in our project areas and found that while both maternal and under-five mortality rates started well above the national and county averages, rates rapidly decreased and remained low following project implementation.

TRENDS IN UNDER-FIVE MORTALITY

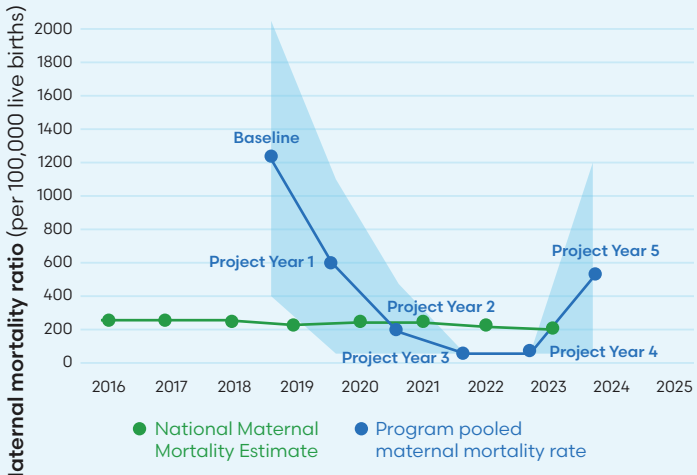
Pooled program estimates compared with external sources



*Program estimates were pooled across the three catchment areas. Shaded bands indicate 95% confidence intervals.

TRENDS IN MATERNAL MORTALITY

Pooled program estimates compared with external sources



*Program estimates were pooled across the three catchment areas. Shaded bands indicate 95% confidence intervals.

"Source: Miaomiao Long, Mortality Trends Assessment of a Community-Based Primary Health Care Program Implementation in Rural Kisii County, Kenya (2017–2024), MSPH Capstone, Johns Hopkins Bloomberg School of Public Health, 2025."



A GRANDMOTHER'S SECOND CHANCE

Six years ago, a tiny baby girl was left in the arms of her grandmother, Ruth, in rural western Kenya. The child's mother, who had been living with HIV, passed away when the baby was just one month old.

Ruth had not cared for a newborn in decades, and she felt utterly unprepared. Nights were long and sleepless as she worried about feeding, hygiene, and whether the fragile infant would survive. "I prayed for strength," she recalls. "I didn't know what to do, but I knew I couldn't give up."

Through a local outreach program led by our partners, Ruth was invited to join community health sessions. There, she learned how to feed the baby safely, maintain hygiene, and recognize early signs of illness. Community health volunteers visited regularly, offering encouragement and practical help when she felt overwhelmed.

"They taught me step by step," she says. "Now I teach others."

Today, that once-fragile infant is a healthy, energetic six-year-old who runs and plays freely in the yard. Ruth smiles as she watches her granddaughter chase butterflies near their garden.

"She is my joy," she says softly. "Without the support I received, I don't know what would have happened."

Stories like Ruth's remind us that when caregivers are equipped with knowledge and steady support, they not only nurture life—they strengthen entire communities.

GUATEMALA

99%
OF WOMEN REPORT RESPECTFUL CARE AT CASA MATERNA

VS. 51% AT HOME OR OTHER FACILITIES

2,106
HOME VISITS WERE COMPLETED TO PREGNANT AND POSTPARTUM WOMEN AND CHILDREN 0-24 MONTHS

1,276
CHILDREN UNDER TWO YEARS OLD WERE SERVED IN THE PAST CALENDAR YEAR

52
COMMUNITIES SERVED BY OUR PROGRAMS

"MY BIRTH EXPERIENCE WAS BEAUTIFUL"



María is a young mother living in the western highlands of Guatemala, an extremely rural and remote area mostly inhabited by Indigenous Mayan peoples. Home births are the norm in this environment, but unattended home births come with a high risk – the area has one of the highest maternal mortality rates in the world.

Rather than a home birth, María chose to have her baby at one of our birthing centers, a Casa Materna, where women can access safe, medically sound, and culturally sensitive maternal care. Our Casa Maternas utilize nurses, volunteers, and women's care groups to provide education, outreach, and comprehensive maternal health services; each one is strategically located within three miles of the communities they serve.

As a first-time mother, María was undoubtedly nervous about her delivery, but says that "thanks to this support, I felt calm, safe, and confident."

"The nurses always respected my decisions," says María. "Thanks to what the nurses taught me, my birth experience was beautiful."

HEAR MARIA'S FULL INTERVIEW HERE

We offer more than just a safe place to give birth – each mother who utilizes one of our birthing centers receives a postpartum visit within 48 hours of the birth of her baby, and throughout her pregnancy, every pregnant woman receives at least three prenatal visits. These little actions have a big impact – in our project areas, maternal mortality has decreased 63%, and infant mortality has been reduced by 35%.

Your support of Impact Global Health Alliance can help more mothers experience the beauty of safe birth.

HAITI

91%
ATTENDANCE AT CARE GROUP MEETINGS BY CARE GROUP VOLUNTEERS

↑ UP FROM 53% IN 2023

90%
ATTENDANCE BY NEIGHBOR WOMEN AT NEIGHBOR WOMEN MEETINGS

↑ UP FROM 69% IN 2023

276
MOTHERS IN CARE GROUPS

Mothers of children 0-5 + pregnant women

↑ UP FROM 205 IN 2024 AND 140 IN 2023

11
CARE GROUP LESSONS

including transmission, treatment and prevention of cholera, pneumonia, tuberculosis, and parasitic infections; improved feeding practices for young children; safe feces disposal; dangers of unsafe abortion; recognition of danger signs in pregnancy and postpartum.

CARE GROUP TESTIMONIALS



"MASTAS has changed my life. I have learned so many skills from MASTAS like how to cook, how to wash the dishes properly. I have learned how to wash fruits and vegetables. Bottom line, MASTAS has taught me how to take care of myself, my family and keep my environment clean. I noticed that the children in the communities where MASTAS works get sick less, their mortality rate has completely decreased. For me, the project must continue so that we can reach more people in the community."

Lemène Félix, Mother Educator



"I participated in all the health lessons held at the MASTAS. For me, MASTAS is a wonderful project, because it has taught me important things, like how to breastfeed my child and how to prepare well-balanced meals so that the child can be well-nourished. MASTAS taught me how to perform oral rehydration, basically, how to properly manage the water to prevent diarrhea. MASTAS taught me how to educate children about their health. I tell the children to wash their hands after using the toilet, so they do not get sick. I hope the MASTAS program grows so that it can reach more people in the community, so less people will get sick in the community."

Angeline Albert, member of Neighbor Women's Group

BOLIVIA



Bolivian-owned and operated CSRA is our longest standing partner - we've been working together since 1983! CSRA recently reached 5,000 adolescents through peer advocacy work to combat violence against Indigenous youth. They also serve as expert trainers, building lessons for our Haitian partners. They are an integral part of implementing the Alliance vision to support new partners.

VOLUNTEER WITH US

A powerful aspect of our work is our volunteer program, which has sent hundreds of volunteers to our projects to teach and to learn in return. Get involved by emailing info@impactglobalhealthalliance.org.

"[My volunteer trip] was a life-changing experience that deeply affirmed my passion for maternal-child health and strengthened my commitment to serving underserved communities. This experience not only confirmed my love and admiration for children and women, but it also taught me a lot about the kind of nurse I want to become. The memories, lessons and friendships I made will stay with me for a lifetime."

- Sophia Barnum, Duke School of Nursing volunteer



LOOKING AHEAD

GUATEMALA

Expanding culturally-informed maternal care

Curamericas Guatemala hopes to expand its culturally-informed motherhood support course to more health facilities, NGOs, and communities in Guatemala and beyond. The program has already trained more than 200 health professionals, community leaders, and program managers in humanized, culturally respectful maternal care.

As it grows, the course has the potential to transform maternal care in low-resource settings—supporting safer birth experiences and better outcomes for mothers and newborns.

200+

HEALTH PROFESSIONALS WILL BE TRAINED

HAITI

Expanding home-based care to more families

In 2026, our partner MASTAS will begin offering a home-based health counseling program to an additional 510 households in a neighboring area of Repatriote, Haiti.

Through regular visits, MASTAS Community Health Workers will provide practical health counseling to prevent illness and improve nutrition, carry out basic health checks, and help families seek timely care for urgent conditions such as severe illness or malnutrition.

510

HOUSEHOLDS WILL BE REACHED

KENYA

Launching community-driven maternal and child health support

In Kenya, KIKOP is preparing to launch CBIO+ in high-need communities with elevated rates of adolescent pregnancy and child illness. The project will reach an additional 15,000 people with maternal and child health support through community mobilization, home-based counseling from local health volunteers, and mother-to-mother education and support groups.

By strengthening trusted, community-based systems, KIKOP aims to reduce readily preventable maternal and child deaths and improve access to care.

15,000

PEOPLE WILL BE REACHED

YOUR SUPPORT IS POWERFUL

Millions of children will not see their fifth birthday due to preventable and treatable illnesses like pneumonia and diarrhea. We all know that good health directly affects education, income and family and community wellbeing, so Impact Global Health Alliance works hard to build sustainable community-based solutions to address the most pressing health needs of today and the future.

Impact Global Health Alliance depends on the support of individuals and organizations to provide lifesaving healthcare services and health education where they are needed most. By becoming a supporter you are joining a group of compassionate and forward-thinking individuals who are dedicated to ending the unnecessary death of the world's most vulnerable population, mothers and children.

$30	$175	$5,000	$10,000	$25,000
Supports one Community Health Worker to serve her neighbors for one year	Ensures health for five mothers and their families for one year	Supports 20 Community Health Promoters for one year	Provides a professional nurse for one year	Provides solar power panels, batteries and installation for one health facility

WAYS TO GIVE

Online
Donate at **impactglobalhealthalliance.org**

Scan to Donate

By Mail
Make your check or money order payable to:
Impact Global Health Alliance
PO BOX 1090
Holly Springs, NC 27540

Leave a legacy
With guidance from your advisor, you can include Impact Global Health Alliance in your will or trust, creating a meaningful gift that supports families for generations to come.

Volunteer
Join hundreds of others who volunteer from home or abroad on special projects each year. We need your expertise, talent and time. Learn more by contacting **info@impactglobalhealthalliance.org**

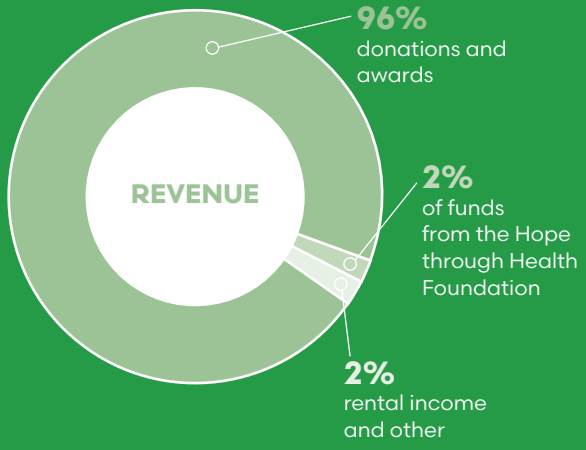
On behalf of the thousands of mothers we work with each year, thank you for making this important work possible.

2025 FINANCIALS

Our 2025 financial statements reflect a substantial unrestricted contribution received late in the year. Because these funds were received near year-end, they were not fully deployed during the reporting period. We are investing and stewarding these resources carefully to support long-term organizational strength and sustained impact for women and children globally.

REVENUE

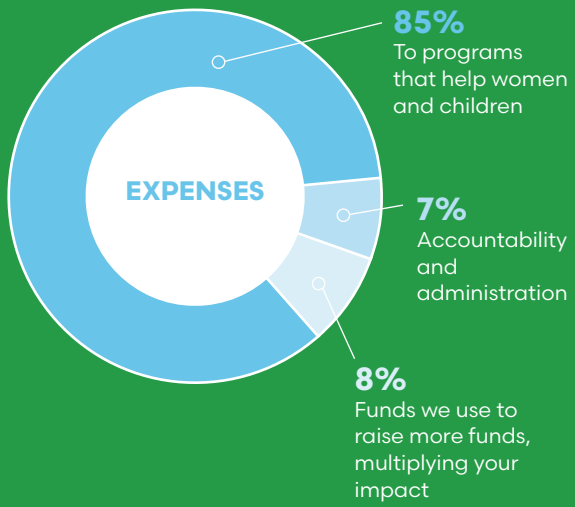
Donations	**$3,364,233**
Hope through Health Endowment	**$80,954**
Rental income & other	**$76,009**
Total	**$3,521,196**



EXPENSES

Admin	**$77,697.89**
Fundraising	**$84,761.61**
Programs	**$918,012.14**
Total	**$1,080,471.64**

*Unaudited Preliminary Financials 12/31/2025.



Platinum Transparency 2026
Candid.

2025 HIGHLIGHTS

GLOBAL AWARD RECOGNITION

Selected as a winner of the Action for Women's Health Award funded by Pivotal—out of 4,000 applicants, we were among the top 2% recognized for advancing women's health and power globally.

HIGH-IMPACT RECOGNITION

Recognized for the third time by the University of Pennsylvania's Center for High-Impact Philanthropy for demonstrating exceptional effectiveness and measurable social impact.

STRONG FINANCIAL GROWTH

As of December 31, 2025, Hope Through Health Endowment assets reached $3.78M—reflecting 20% growth over the previous year.

OUR SUPPORTERS

Impact Global Health Alliance *(Formerly Curamericas Global, Inc)* is a 501(c)(3) organization. Gifts are tax-deductible to the full extent allowable under the law.

Global Health Champions
$25,000+

Anonymous
Joyce Houser, Peachtree Corners, GA
Lucy and John "Wes" Jones, Fayetteville, NC
Beth and William Snyder, Waynesville, NC
Hope through Health Foundation, Raleigh, NC

Community Leaders
$5,000 - $24,999

Karen Barkman, Fayetteville, NC
Becton, Dickinson and Company, Franklin Lakes, NJ
Rachel and David Bell, Raleigh, NC
Brenda and Rick Booth, Fayetteville, NC
Rosanne Brandt, Charlotte, NC
Nancy and Thomas Cannon, Winston-Salem, NC
Centenary United Methodist Church - Winston-Salem, Winston-Salem, NC
Duke School of Nursing, Durham, NC
Beth and Robert Fields, Durham, NC
First United Methodist Church - Waynesville, Waynesville, NC
Florida United Methodist Foundation, Lakeland, FL
Haiti Outreach Ministries, Matthews, NC
Haymount United Methodist Church, Fayetteville, NC
JoAnn and David Heiser, Fuquay-Varina, NC
Amanda and John Henson, Falmouth, ME
Andrew Herrera and Laura Zeiger, Wonder Lake, IL
Elizabeth and Jordan Jones, Durham, NC
Tina and Christopher Jones, Raleigh, NC
Elizabeth Keeney, Fayetteville, NC
Mary Etta and Robert King, Jr., Winston-Salem, NC
Sally and James Kocher, Chapel Hill, NC
Sara Lewis, Clyde, NC
Patricia "Tricia" and David Markoff, Waynesville, NC
Mirlene and Henry Perry, Durham, NC
United Solar Initiative, Durham, NC
Mary Jane and David Williams, Cary, NC

Impact Advocates
$1,000 - $4,999

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Joy Anderson, Richardson, TX
Marcia Angle, Durham, NC
Elizabeth Barricklow, McGrady, NC
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Olivia Carrescia, New York, NY
Rosalea and Peter Carttar, Lawrence, KS
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Carolyn Checkley, Raleigh, NC
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Danielle and Chris Clement, Burlington, VT
Kristine Donohoo, Waynesville, NC
Carly Eckert, Chapel Hill, NC
Jill Fainter, Nashville, TN
Katie Foley, North Augusta, SC
Insperity Greater Houston Golf Charity, The Woodlands, TX
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Kathryn and Bryan Jones, Hickory, NC
Pat and Marshall Jones, Raleigh, NC
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Lynn and John Matheson, Asheville, NC
Lucille and Edward McCarthy, Baltimore, MD
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Meredith College (Michelle Hartman), Raleigh, NC
Patricia Mintz, Oakland, CA
Patricia and James Mitchell, Dallas, TX
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Caroline and Daniel Ojeda, Milwaukee, WI
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Marva Richey, Raleigh, NC
Susan and Wayne Richter, Virginia Beach, VA
Rotary Club of West Raleigh, Raleigh, NC
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Danielle Sutherland
Eric Swedberg, Roanoke, TX
The Apple Lane Foundation, New York, NY
Rosanne and Eli Tiller, Chapel Hill, NC
Linda Velonis, Santa Monica, CA
Alice Weldon, Asheville, NC
White Plains United Methodist Church, Cary, NC
Colleen and David Zeiger, Wonder Lake, IL

Health Partners
$101 - $999

Stacy Arechavala, Altamonte Springs, FL
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Kathleen Austin, Durham NC
Emilie and Roland Barnhardt, Winston-Salem, NC
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Croom Beatty
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Cindy Hosseini, Raleigh, NC
Falesha Houston and Jacob Weston, Raleigh, NC
Jill and Allan Hovis, Raleigh, NC
Elizabeth Ironside, Carrboro, NC
Karen Jones, Fayetteville, NC
Nicole Jones, Cary, NC
Johnson & Johnson Foundation Matching Grants Program, Andover, MA
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Paula Katz, San Francisco, CA
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Hannah Kiritsy, Newton, MA
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Pamela and George Leight, Lansing, NC
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Susan and William Lineberry, Greensboro, NC
Chad Logan, Clayton, NC
Kirsten Lundeen, Grand Rapids, MI
Doug MacDonald, Lincoln, VT
Laurie and David Martin, Charlotte, NC
Dawn and Mark Melrose, Waynesville, NC
Rachel McCleary, Camden, ME
Amy McCullough, Baltimore, MD
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Barbara McGauvran, San Antonio, TX
Wanda Molnar, Chapel Hill, NC
Ashley Montague and William Yoder, Raleigh, NC
Ann and Gordon Moshman, Omaha, NE
Joseph Muffoletto, Ocala, FL
Okemos Community Church, Okemos, MI
Jessie O'Dell, Greensboro, NC
Roberta Ouellette, Raleigh, NC

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Jennifer Weaver, Richmond, VA
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Carey and Peter Westgate, Raleigh, NC
Eileen Williams, Cary, NC
Deborah Williamson and David Garr, Durham, NC
L. George Wilson, Raleigh, NC
Leslie Zalles, Georgetown, TX

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Adam Austin, Raleigh, NC
Michael Austin, Brookfield, IL
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