

# UNLOCKING POTENTIAL



**2024**  
Annual Report



# A Message From Our CEO & Board Chair



**Dr. Christopher Schwabe**  
CEO & President



**Tim Allen**  
Chair, Board of Directors

# Dear friends and colleagues,

We are pleased to present our 2024 Annual Report full of examples of our work that aim to unlock the potential of our communities and our health workforce. Unlocking potential is not merely about discovering hidden talents, but about cultivating a growth mindset. It is a belief that abilities can be developed through effort, learning, and resilience. MCD Global Health (MCD) has a long history of unlocking potential with projects around the world.

From addressing health inequities to developing data-driven solutions, engaging communities, leveraging public-private partnerships, collaborating across sectors, and using innovation and technology, our work in 2024 helped improve the health and well-being of people around the world.

Using virtual learning tools, we're strengthening health workers across the U.S. and improving health service delivery and outcomes. For example, read about how we're improving children's mental and behavioral health, thanks to MCD's ECHO®-based telebehavioral health promotion model for case-based and expert-led learning.

Through our Recovery Jobs for Beginners workshop, people in recovery are using their lived experiences to help fill the behavioral health workforce gap, helping unlock their potential to make a difference in their communities.

In Uganda, we're working with health facilities in prisons and communities to improve how they manage cases of malaria with on-the-job training and mentorship. We're unlocking the potential of our staff in Equatorial Guinea with operational research that is transforming malaria prevention.

In addition to our efforts to train and strengthen the health workforce, we're improving access to care for hard-to-reach groups. For example, our work

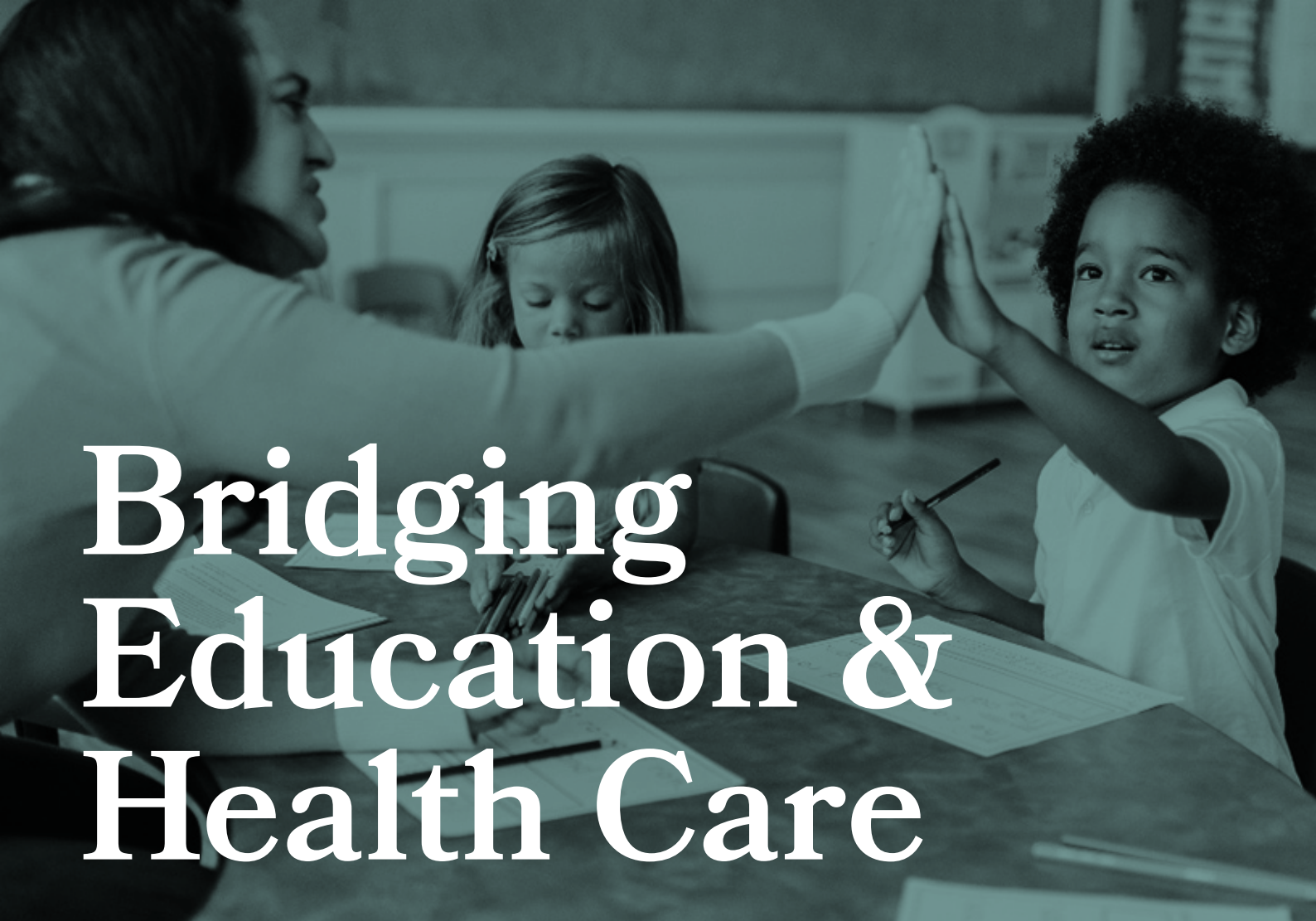
in Niger helps unlock the potential of local health workers to better prevent malaria in pregnancy.

In Equatorial Guinea, we conducted the country's first-ever HPV vaccination campaign for girls, paving the way for them to have a cervical cancer-free future. In Maine, we're training school nurses to improve students' oral health by applying silver diamine fluoride, improving their health and their learning experience.

Unlocking potential is an ongoing effort and requires embracing challenges, learning from failure, and continually striving to turn uncertainty into order and meaning. We're so proud of our team's commitment to the communities we serve around the world.

On behalf of MCD's Board of Directors and Executive Leadership Team, we want to thank MCD's more than 400 employees around the world and our many collaborating public, private, and civil-society partners and donors. It is an honor to be part of the leadership team of such a dynamic and impactful nonprofit organization.

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A photograph of a teacher with long dark hair, seen from the side, reaching out to high-five a young boy with curly hair. A young girl is sitting between them, looking down at a book. They are at a desk with papers and a pencil. The image has a teal overlay.

# Bridging Education & Health Care

Virtual technology brings diverse experts together to improve school-based mental health

## Maine and Massachusetts, U.S.

To design meaningful solutions, you must go straight to the source. That's exactly what MCD Global Health did in June 2024 when, in partnership with the Brookline Center for Community Mental Health School-based Telebehavioral Health Pilot Program, MCD convened a series of listening sessions with school-based professionals. The goal was to hear firsthand what behavioral health challenges were unfolding in schools across the state and what support was needed most.

## What is Project ECHO®?

The MCD Project ECHO® approach is an extension of the mission and vision set forth by the University of New Mexico's Project ECHO® (Extension for Community Healthcare Outcomes), a lifelong learning and guided practice model that revolutionizes medical education and increases workforce capacity to provide best-practice specialty care and reduce health disparities.

"The stories shared with us were sobering. Students with complex trauma, especially among immigrant communities, escalating anxiety, disordered eating, and school avoidance. At the same time, we heard about a behavioral health workforce facing relentless turnover, long waitlists, and burnout," said Sherri Billings, MCD's associate account manager for Project ECHO® and eLearning.

Educators and clinicians alike called for more than strategies; they asked for connection, culturally



responsive tools, and leadership that values mental health as central to student success. Ensuring student well-being requires strong connections between health care and education. One way to build connections is with the Project ECHO model.

These listening sessions laid the groundwork for the Promoting Behavioral Health ECHO, a virtual learning collaborative designed to strengthen the bridge between schools and health care. Through case-based learning and expert-led discussion, participants came together across roles and regions to explore real-time strategies for supporting student mental health and well-being.

“What emerged wasn’t just training, it was a statewide network of professionals ready to meet students’ needs with renewed skill, collaboration, and purpose,” said Sherri.

### From Building Bridges to Weathering Storms: Expanding Support in Maine

The success of the Promoting Behavioral Health ECHO in Massachusetts made one thing clear: when education and health care professionals are given space to learn from each other, it strengthens the systems that support young people.

But, while one state was identifying gaps and building bridges, another was weathering a storm.

In Maine, the 2023–24 school year was marked by a series of devastating tragedies that rippled through school communities, leaving educators grappling with grief, fear, and exhaustion. To support the healing process and build long-term resilience, MCD partnered with the Maine Department of Education (DOE) to launch another statewide initiative: Promoting Stronger Connections ECHO.

Described by one participant as “a balm for the system,” this series was built to offer real-time, practical support for educators facing the cascading effects of trauma. From managing extreme classroom behaviors to recognizing and responding to secondary trauma, each session blended short, targeted learning segments with open dialogue and shared problem solving. This resulted in a virtual community that not only addressed these current issues, but also helped schools develop trauma-informed practices that can withstand future challenges.

Designed for all school personnel across the state,

especially those most impacted by recent trauma, the series focused on universal strategies to foster connection, stability, and resilience. Through this collaboration, MCD and the Maine DOE ensured that every educator, no matter their role or location, could access high-quality support rooted in fidelity to the ECHO model.

### Story of Impact: From Absenteeism to Hope

The true power of ECHO lies in its ability to turn shared learning into tangible action. In one particularly moving case presented during the Promoting Stronger Connections series, an elementary school counselor shared the story of a 9-year-old student repeating second grade due to extensive absences. After presenting the case during one of the sessions, the counselor returned to school the next day with a renewed perspective and a plan. The student’s class sent a Valentine’s Day gift to his home, helping to re-establish connection.

A special education teacher met with the family and even accompanied them to a testing site. Weekly homework packets began arriving at the student’s home, and an individualized education plan meeting was scheduled. “I have hope about moving forward with this student,” the counselor shared in a follow-up. “The ECHO helped me be patient with the process, and I appreciated the encouragement from everyone.”

This was not an isolated outcome. Across the series, participants described feeling seen, supported, and reinvigorated in their work. With Promoting Behavioral Health ECHO and Promoting Stronger Connections, MCD is helping educators feel seen, supported, and empowered, proving what’s possible when we use technology not just to connect, but to care.

**“MCD is helping educators feel seen, supported, and empowered, proving what’s possible when we use technology not just to connect, but to care.”**

# Enhancing Malaria Diagnostic Skills

A sustainable approach to  
building national capacity

## **Mozambique, Africa**

In Mozambique, malaria persists as a serious health concern, especially among children under 5 and pregnant women. Accurate diagnosis is critical, yet the National Malaria Control Program (NMCP) and diagnostic labs have lacked World Health Organization (WHO)-certified malaria microscopy technicians for five years.

The U.S. President's Malaria Initiative (PMI) Malaria Capacity Strengthening (MCAPS) Program, funded by USAID, together with the NMCP and the National Institute of Health (INS, by its Portuguese acronym), organized advanced refresher training courses for malaria microscopists with high performance and/or whose certifications have expired, followed by two workshops for external competency assessment for malaria microscopists (ECAMM).

This resulted in 13 out of 24 technicians earning their WHO ECAMM certification, making them eligible to become trainers and supervisors and playing critical roles for quality assurance of malaria diagnosis in their country, including coordinating national ECAMM sessions. For the next step, 12 of the certified technicians underwent a training of trainers and supervisors course, and 10 of these

successfully achieved the required competency levels.

These new trainers became involved in conducting malaria diagnostic refresher training opportunities with a total 36 technicians in Nampula, Manica, and Zambézia provinces, strengthening their malaria diagnosis skills; thus, ‘closing the loop.’ As shown in the figure, this entire process is part of MCD’s comprehensive and sustainable approach to building national capacity for improved malaria diagnostic services.

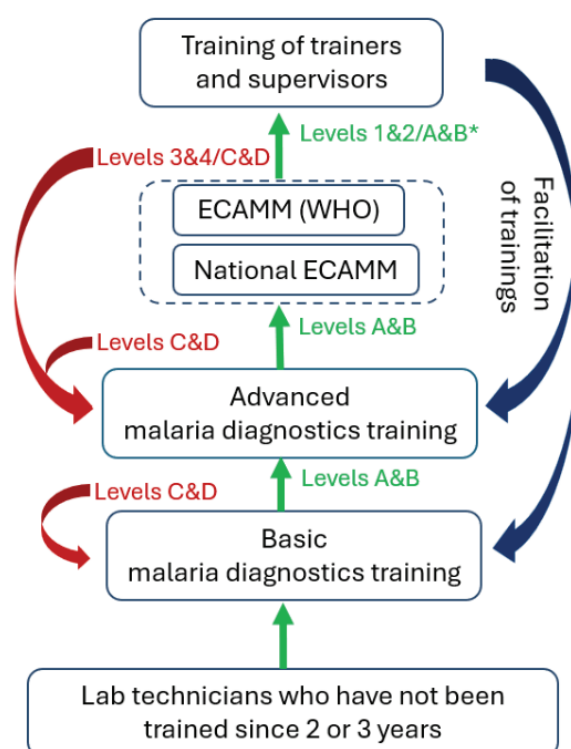
Future plans include a national strategy to further enhance diagnostic quality assurance and establish centers of excellence in key provinces. For Senior Laboratory Technician Gilberto Feliciano Miguel (photo at top right) at Matola District Hospital in Maputo, achieving ECAMM certification has been a game changer.

“ECAMM was an important and impactful experience that significantly elevated my knowledge in malaria microscopy. Prior to this training, I was only able to identify one species of *Plasmodium*, and, consequently, only this single species was reported in my results,” shared Gilberto. “I am now able to identify the four species without any difficulty, and the parasite density results that I issue are reliable. Through this training, I gained tools that I have been using for regular on-the-job training of my colleagues within and outside the field of malaria microscopy.”



*Gilberto Feliciano Miguel at microscope.*

In-country capacity for higher quality malaria diagnosis significantly improves how cases of malaria are managed and can reduce the burden of malaria in Mozambican children and families.



# Using Lived Experiences to Help Others in Recovery

Workshop helps those in recovery and Maine's behavioral health workforce thrive

## **Maine, U.S.**

Maine's rural behavioral health workforce faces many challenges, including a lack of training and resources, poor wages, insurance reimbursement practices, and more.

To improve this vital workforce, MCD Global Health's Rural Behavioral Health Workforce Center (RBHWC) offers those with lived experiences to enter the workforce through its virtual and free Recovery Jobs for Beginners workshops. These workshops focus on accelerating a person's entry into and progression in behavioral health careers, designed for people with lived experience, affected others, and allies who live and work in certain counties along Maine's northern border.

So far, 107 participants have completed the workshop since 2022, with 41 in 2024. One participant shares her experience with Recovery Jobs for Beginners.

For Julie Frost (*photo at top right*), who participated in the summer 2022 workshop, it has been life changing. After completing the workshop, she received two certifications in peer support and



landed a job at Spurwink, a Maine organization that provides behavioral health and educational services.

During the workshop, she listened to mentors and professionals who shared their experiences with case presentations and discussions.

“I was inspired and moved that some of the people who held these titles also had lived experiences and were sharing those experiences with the group,” Julie said.

Many who participate in these workshops have lived experiences and are in recovery, such as Julie who began her recovery journey nearly nine years ago.

“I’m a person in recovery from substance use disorder (SUD), multiple substances, and have been sober since January 2021,” Julie shared. “I was diagnosed with major depressive disorder and PTSD, have been in numerous mental health hospitals, rehabilitation detoxes, halfway houses, and even went to jail for over a month at one point ... I’m a person who has been saved by Narcan multiple times. I have been through it all.”

Now, Julie wants to help others who are struggling with mental health conditions, serious mental illnesses, and/or SUD through her new role at Spurwink.

Once a week, she co-facilitates a recovery group for adolescents at a high school in Oxford, Maine. She also works on teams that visit the homes of peers to meet about their recovery journeys.

On top of this, she’s also a



student at Southern Maine Community College working toward an associate’s degree and behavioral health certificate.

“There are a lot of dedicated and professional caring people who do these workshops, and anyone who’s got lived experience can tell when someone is being genuine, and a lot of the people who are doing these workshops are genuine. They really care. It helped inspire me to continue and believe in myself,” Julie said.

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*The Rural Behavioral Health Workforce Center is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$3,080,000 with 0 percentage financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit [HRSA.gov](https://www.hrsa.gov).*

# Equipping School Nurses to Improve Children's Oral Health

Maine nurses trained to apply silver diamine fluoride in schools

**Maine, U.S.** It only takes five minutes. Melinda Nadeau, a registered nurse at Harriet Beecher Stowe Elementary School in Brunswick, Maine, has her pre-K through fifth-grade students brush their teeth and lie down on the bed. Using a head lamp with magnifying glasses, Melinda examines a student's teeth and easily sees the area of concern — a tooth is showing signs of possible decay that is at risk of infection and pain. Expertly, she dries the tooth and then applies silver diamine fluoride (SDF), a topical medication to stop the progression of and prevent further cavities in the affected area.



Immediately, the bacteria that cause decay begins to die. If decay was truly present, then the affected spot will blacken over the next 24 hours. Not having to worry about this cavity or experience pain from an infected tooth allows the student to better focus in and outside of school. Melinda is one of the first school nurses in Maine to apply SDF to students in school.



*Melinda applying SDF to a young student in school.*

“I feel like I’ve done some good. The kids don’t have to suffer, and, instead, they can be in the classroom and learn,” she said. “When your body has an infection, it’s harder to learn and focus. It affects everything. This will change that, and these kids will be able to better focus after SDF treatment and prevent pain.”

Typically, school nurses don’t apply SDF, but thanks to a CareQuest Institute for Oral Health® grant that MCD Global Health received, school nurses can now receive training to apply the SDF treatment to students who need oral health care.

MCD was one of 10 organizations nationwide, and the only one in Maine, to receive the \$125,000 grant that focuses on school-based and school-linked initiatives to improve oral health outcomes.

For Melinda, who has been a nurse for 30 years, a school nurse for 18, and has worked in Brunswick schools for four years, this pilot training program is a “game changer.”

“There are a lot of school nurses in the state that are willing to apply SDF, and I’m hoping through this pilot program that there is a good outcome, and we can move forward with having it in our schools,” she said. “If it wasn’t for the Maine Center for Disease Control and Prevention School Oral Health Program (SOHP), we wouldn’t have any of this.”

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Integrating oral health into children’s primary care as early as possible is vital to ensuring a healthier life into adulthood. In Maine, about half of all children are not receiving any preventive dental care, and even fewer can access care in a traditional dental home.

MCD’s SOHP team has recruited and trained seven school nurses in oral health assessment, SDF application, and follow-up care. The results of this pilot will help determine the feasibility of this model as part of the SOHP and how this strategy can be adopted on a broader scale in more schools.



# Strengthening Malaria Prevention for Pregnant Women

Training the health care workforce

## **Niger, Africa**

Malaria is a leading cause of medical consultations in Niger. Pregnant women and children under 5 are the most vulnerable, with children under 5 accounting for nearly 60% of cases between 2010 and 2019.

For pregnant women, malaria can cause maternal anemia, low birth weight, and increased risks of death for both the mother and baby.

To address this, Niger's national malaria strategy aims to build equitable access to high-quality antenatal care through the five-year U.S. President's Malaria Initiative (PMI) Advancing Health and Malaria Services (AHMS), led by Palladium, with support from MCD Global Health and other consortium partners.

To respond to the strong need of strengthening health care providers' capacities to prevent and manage malaria in pregnant women, the PMI AHMS team trained 183 midwives and gynecologists in Niger's Dosso and Tahoua regions in August 2024. The training was conducted along with Niger's National Malaria Control Program (NMCP) and focused on improving the quality of



care and increasing the coverage of intermittent preventive treatment during pregnancy (IPTp).

The training exceeded expectations by reaching nearly 40% more providers than the original goal. Attendees showed great enthusiasm and recognized the value of improving health care workers' skills in malaria prevention and management. The training included updates on World Health Organization (WHO) guidelines and practical skills, such as proper malaria testing and medication administration.

Abdou Hima, a malaria coordinator in the Tahoua region, said, "Given the low national coverage rate of IPTp3, particularly in the Tahoua region, this training was delivered at a critical time. As trainers and supervisors, we identified gaps in the mastery of biological diagnostic techniques and adherence to the malaria management protocol.

This intervention addressed several challenges, including the misconception that all malaria cases in pregnant women are classified as severe malaria, and weak adherence to treatment protocols based on gestational age, including the introduction of the first-line treatment for malaria, artemisinin-based combination therapies, in the first trimester."

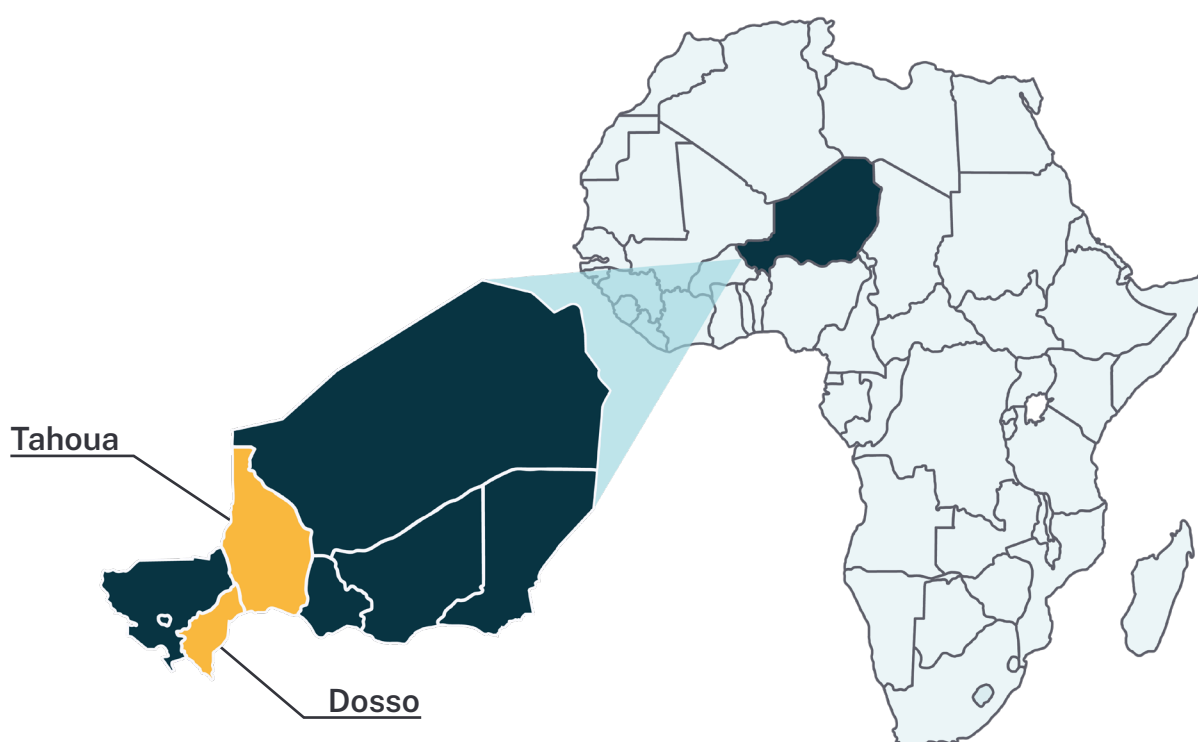
Now, health workers in Niger are better equipped to care for pregnant women, and health facility managers expressed confidence that IPTp3 coverage will align more closely with the WHO-recommended levels.

## What is IPTp?

Intermittent preventive treatment in pregnancy (IPTp) is a strategy to prevent malaria in pregnant women by giving them antimalarial medication at regular intervals during pregnancy, typically starting in the second trimester.

Malaria during pregnancy can lead to serious complications for both the mother and the child, including low birth weight, premature birth, and increased maternal mortality. The WHO recommends that pregnant women in malaria-endemic areas receive at least three doses of IPTp, or IPTp3, during pregnancy.

By strengthening health care workers' knowledge, skills, and capacity, pregnant women across Niger's Dosso and Tahoua regions will receive higher quality malaria health services.



# Strengthening Bioko Island's Workforce



# Growing our team's capacity with training, research, and leadership development

## **Equatorial Guinea, Africa**

2024 marked a transition year for the Bioko Island Malaria Elimination Project (BIMEP) as negotiations with the Government of Equatorial Guinea and private sector funders for the next five-year phase took center stage. During this period, due to reduced funding, MCD Global Health focused on strengthening its staff capacity rather than implementing typical, large-scale malaria control activities.

“After 20 years on Bioko Island, we know our success depends on our workforce. Throughout this transition year, BIMEP invested in our team with revitalized training, scientific engagement, and leadership development,” said Guillermo García, deputy director of MCD’s International Programs.

### **A Fresh Approach to Training**

Implementing indoor residual spraying (IRS) demands extraordinary commitment from field teams. Spray operators carry heavy equipment for hours in protective gear under the hot sun while navigating community engagement challenges, from outright rejection to negotiating schedules with homeowners.

In 2024, the BIMEP overhauled its IRS operations after historical data revealed that long-tenured sprayers often developed lower productivity than newer team members. The BIMEP implemented an open recruitment system, replacing the practice of rehiring familiar staff. This brought fresh energy to the team, as well as stronger adherence to IRS protocols.



## Decentralizing Malaria Case Management Services in Equatorial Guinea: A Capacity Building Approach at the District Level

Julie Buekens<sup>1</sup>, Sandra Djalle Incardona<sup>1</sup>, Maria Consuelo Oki Eburi<sup>1,2</sup>, Wonder P. Phiri<sup>1</sup>, Carlos A. Guerra<sup>1</sup>, Matilde Riloha Rivas<sup>2</sup>, Guillermo A. García<sup>1</sup>  
Affiliations: 1.MCD Global Health, 2.Equatorial Guinea NMCP  
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### INTRODUCTION

- A strategic decentralization initiative was launched in Equatorial Guinea in 2023 to increase capacity at district levels and improve the quality of services in health facilities (HFs).
- For malaria, this initiative is led by the National Malaria Control Program (NMCP) with support from the Bioko Island Malaria Elimination Project (BIMEP).
- The decentralization initiative has three strategies:
  - 1) Training of health workers with updated clinical and lab manuals
  - 2) Monitoring and coaching of in-service practices through OTSS (Outreach Training and Supportive Supervision)
  - 3) Training of district-level trainers and supervisors to bring technical support capacity closer to the HF level.

### METHODS

- November/December 2023: malaria diagnostic and clinical refresher trainings utilizing updated materials, including pre- and post-tests.
- Between 2022 and 2023: quarterly OTSS visits in the 4 districts of Bioko Island (Malabo, Baney, Riaba, Luba), using updated checklists to identify gaps in malaria diagnosis and clinical management, and address them by immediate on-site coaching.
- August 2024: a training of trainers (TOT) on malaria diagnostics with 20 participants from Malabo (10), Baney (6) and Luba (4), selected based on performance in previous trainings or OTSS visits.
  - Training topics: pedagogical skills, preparation and conduct of trainings, use of computers to update material and score participants.
  - Participants were evaluated through theory and practical pre- and post-tests.

### RESULTS

- Malaria clinical (40 participants) and diagnostic trainings (24 participants) held in Nov and Dec 2023 resulted in increased competency scores, the ranges of post-test scores were 28%-80% and 28%-88%, respectively.
- OTSS lab and clinical scores fluctuated between quarterly rounds of supervisions and improved overall from first to last visit.
- Pre- and post-tests of the 20 participants in the 2024 malaria diagnostic TOT showed improvements in theory knowledge (overall increase by 29%, Fig. 3). Presentation skills were scored in 4 categories: content, format, response to questions, and behavior (i.e., presenting in engaging manner) (Fig. 4).

Figure 1. Lab OTSS global technical scores by district and OTSS round (18 health facilities)

Figure 2. Clinical OTSS global technical scores by district and OTSS round (22 health facilities)

Figure 3. Theory Pre and Post test results of TOT for malaria diagnosis

Figure 4. Evaluation of presentation skills from TOT for malaria diagnosis

### DISCUSSION

- Refresher trainings allowed for the successful identification of the 20 high-performing participants to be trained as trainers through the decentralization initiative.
- OTSS successfully helped to identify gaps, provide on-site technical support, and maintain performance scores despite turnover of HF staff.
- The malaria diagnostic TOT was highly valued by participants since it conveyed precious soft skills to become self-confident and well-organized trainers.
- Overall scores in trainings and OTSS visits remained below 80%, showing that further strengthening is required.

### CONCLUSION

- A comprehensive set of tools (manuals, checklists, evaluation tools etc.) and processes (refresher training, OTSS, TOTs) is now available as a strong basis for further improving malaria case management practices in the country.
- Next steps include a malaria clinical TOT as well as training of malaria OTSS supervisors in each district.
- Increasing highly qualified technical support by staff is not only critical to improve quality of services but also to strengthen the leadership and ownership at decentralized levels.

MCD's Julie Buekens (back right) and Maria Consuelo Oki Eburi (front right) presented a poster, titled, "Decentralizing Malaria Case Management Services in Equatorial Guinea: A Capacity Building Approach at the District Level", at the 2024 American Society of Tropical Medicine and Hygiene (ASTMH) annual meeting.

The transformation also extended to training materials. Management worked with field supervisors to redesign content that emphasized both technical skills and communication techniques essential for community engagement. Change management workshops prepared leadership teams to guide staff through the transition and maintain morale, despite field challenges.

The results were promising: improved intrahousehold coverage, enhanced resilience from the staff, and higher productivity rates in areas that, in years past, had high refusal rates. These improvements strengthened malaria prevention efforts across the island.

## Research in Action: BIMEP's Scientific Contributions

Building scientific capabilities remained a priority for the BIMEP's workforce development in 2024. The team presented 11 studies at the American Society of Tropical Medicine and Hygiene annual meeting in New Orleans, Louisiana, U.S., covering topics from IRS optimization to treatment adherence. Presentations included reconsidering IRS coverage targets using high-resolution historical data, results from the drug efficacy study in the country, training technical staff at the district level to enhance case management and diagnostics, and evaluating communication strategies for malaria health messaging.

The team also published five peer-reviewed articles addressing critical aspects of malaria control, such as leading research in vaccine clinical trials on Bioko Island, identifying mosquito behavior patterns and challenges to current vector control, modifying survey design to investigate adherence to malaria treatment, and adapting Bioko Island's bed net distribution strategy based on historical data.

"These publications not only help advance the knowledge base for malaria control but also provide significant professional development opportunities for our staff," said Guillermo.

This scientific engagement continues to foster practices relying on data within BIMEP with staff increasingly applying research findings to operational decisions.

## Strengthening the BIMEP Leadership Core

Recognizing that effective leadership drives success, the BIMEP also invested in a five-day retreat, themed 'I Trust You,' to close out the year. The program featured workshops on communication, emotional intelligence, and strategic decision making with team-building activities that crossed departmental boundaries.

Beyond skill development, the retreat created opportunities for collective problem solving.



Department leaders identified organizational challenges and developed integrated solutions leveraging their complementary expertise and empathy with one another. The retreat produced concrete action plans addressing both technical improvements and team dynamics that will positively impact future operations.

### Looking Forward

Although the year was considered a transition year, and uncertainty of the BIMEP funding remained, the workforce development initiatives implemented in 2024 positioned the BIMEP for continued success.

The revitalized training approaches, scientific accomplishments, and leadership investments have built a stronger team ready to advance malaria elimination efforts in Equatorial Guinea. Moving forward, the BIMEP will continue monitoring and investing in these initiatives while identifying new opportunities for staff development.

“By maintaining focus on workforce capacity, we ensure our most valuable resource, our people, is ready to meet the evolving challenges of malaria control in Equatorial Guinea,” said Guillermo.

**“By maintaining focus on workforce capacity, we ensure our most valuable resource, our people, is ready to meet the evolving challenges of malaria control in Equatorial Guinea.”**



# Building eLearning Programs to Improve Health Skills and Knowledge

Leading public health eLearning development

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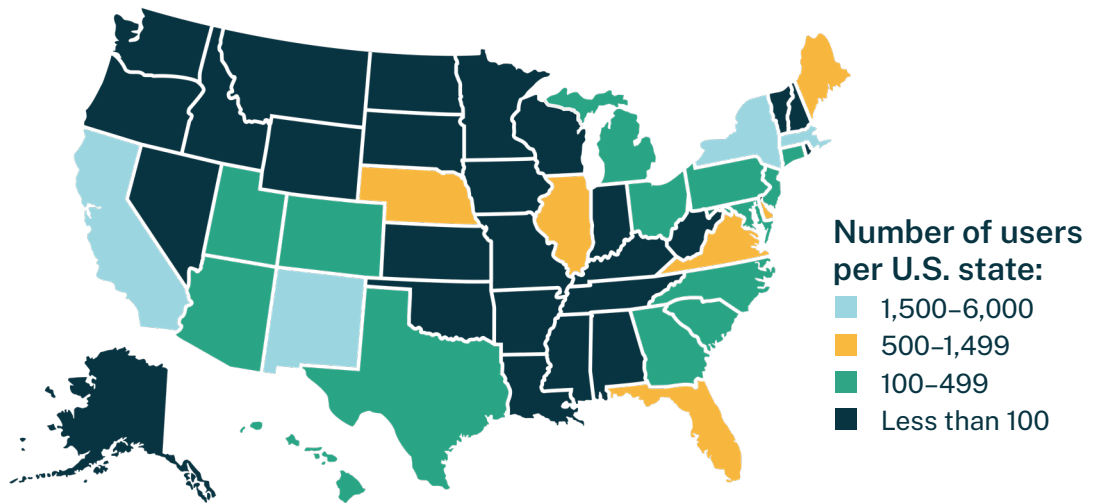
**U.S./Global** Since 2000, the eLearning industry has grown 900%. As astonishing as this growth is, it's not at all surprising because eLearning saves training time and improves employee retention.

MCD's eLearning Program started in 2014 and now has more than 21,000 users from all 50 U.S. states and 33 countries. MCD's self-paced modules come in a variety of languages on topics ranging from Alzheimer's to COVID-19, noncommunicable diseases, and more.

## How are eLearning modules made?

MCD's eLearning team follows the analysis, design, development, implementation, and evaluation (ADDIE) model when creating modules, which provides a structured framework for developing

## MCD's Online & Virtual Training & Technical Assistance Reach



eLearning content from scratch to finish.

“The public often isn’t aware that eLearning development is an iterative process. It’s not a one-time effort; instead, it involves multiple stages of design, development, testing, feedback, and refinement to ensure the final product meets the learning objectives effectively,” Shiqi Tao, MCD eLearning Program project coordinator, explained.

### Standing Apart from the Rest

MCD developed training modules about the virus, the pandemic, and the vaccine for community health workers (CHWs) in multiple languages right as the COVID-19 pandemic took off in the U.S. in 2020.

In 2024, MCD's eLearning Program produced 36 hours of self-paced content for more than seven U.S. clients, including 38 English modules and 17 Spanish modules.

“We were arguably the only ones providing this critical virtual content to this audience,” Hannah Huggins, MCD eLearning Program manager, said. “I’m proud that our team was able to support CHWs in doing their jobs effectively, which, in turn, positively impacted communities across the nation.”

Being able to tailor training programs for specific audiences is a necessity when producing modules, both in making the material relevant and helpful for them.

For eLearning modules built for training CHWs, the team leverages expertise both from within MCD and externally, for example, with beta-testing feedback from CHWs.

This approach was exemplified in the eLearning team’s 2024 project with the Georgia Department of Public Health to develop a CHW Training Program. The team conducted beta testing with both English- and Spanish-speaking CHWs. Their insights led to refinements in language clarity, navigation, and cultural references, which ensured that the final modules were accessible, engaging, and culturally responsive for diverse learners.

“Our leadership roots from experience,” Lu Osae, MCD eLearning Program project coordinator, said. “We understand the public health context behind the projects we take on far more than the average instructional designer.”

The team hopes to increase their reach by working with new partners nationwide to deliver education to health professionals.

“Not only do we have expertise and knowledge in both learning design and public health, but we also have a passion for making trainings that are impactful and effective,” Hannah said.

**“Not only do we have expertise and knowledge in both learning design and public health, but we also have a passion for making trainings that are impactful and effective.”**

# Saving Lives in Uganda with Improved Malaria Management

Addressing gaps and  
offering solutions

## Uganda, Africa

Malaria is the leading cause of death in Uganda, and, despite intense malaria control efforts, the country is still far from eliminating the disease. Reasons for the continued malaria burden include poor management of malaria cases in health facilities, weaknesses in the supply chain for diagnostic tests and drugs, gaps in health worker capacities, and poor adherence to malaria treatment guidelines.

The U.S. President's Malaria Initiative (PMI) Uganda Malaria Reduction Activity (MRA), funded by USAID, worked to address these gaps through different capacity strengthening activities, as shared in the following stories.

### Strengthening Malaria Management in Prison Health Facilities

In partnership with the regional prisons commander's office and district health teams, MCD





gaps in severe malaria case management and guide mentorship and continuous quality improvement initiatives.

The assessment used a standardized checklist with required steps for high-quality management of patients with severe malaria: from an accurate diagnosis and correct classification of severe malaria to effective management of complications and malaria treatment in line with national guidelines, and until discharge of the patient with instructions for follow-up visits and malaria preventive measures at home.

Global Health conducted integrated supportive supervision and mentorship at 11 prison health facilities across Jinja, Kamuli, and Buyende districts within Uganda's Busoga subregion.

The team visited and assessed the health facilities' performances using standardized supervision checklists and provided on-the-job training and mentorship.

This tailored approach is efficient in strengthening health workers' capacities, according to their specific needs and challenges.

Overall, 45 health workers were trained across 11 facilities. In addition, helpful resources were distributed, including 12 malaria channel boards and counseling guides, 11 malaria in pregnancy guidelines, and surveillance tools.

During these visits, action plans were developed with facility staff to define specific, required follow-up work to continue addressing gaps. These efforts contribute to healthier communities within prison facilities and advance malaria control efforts.

## Improving Severe Malaria Management Through Continuous Quality Improvement

The PMI Uganda MRA partnered with health care facilities and district health teams to conduct a baseline assessment on severe malaria management using artesunate injections at three key sites. The goal was to identify and prioritize

The assessment revealed various gaps, such as incomplete medical histories, poor data registration, and inconsistent adherence to artesunate dosing and injection schedules.

Based on the data, MCD's team used PMI Uganda MRA's continuous quality improvement toolkit for a tailored support and follow-up of 14 health care workers, improving artesunate dosing and documentation practices, and distributing start-up treatment charts to improve care documentation. Such actions helped advance quality malaria care resulting in lives being saved.

These activities also helped facility staff feel supported, which, in turn, improves morale and motivates them to do high-quality work.





## The Hope & Prosperity Resource Center



The Hope & Prosperity Resource Center is dedicated in honor of philanthropists and humanitarians Rodney and Mary Barton Smith. Their legacy of giving to the community of Presque Isle, including the support of this facility, has forever and positively changed the lives of countless residents of Aroostook County and beyond.

The development of a space, that eventually became this facility, was the vision of Mary Barton Smith. The Hope & Prosperity Resource Center was made possible through her commitment to Aroostook County Action Program and her desire to make life better for those experiencing homelessness and housing insecurity. That vision, through the hardworking ACAP team became a reality in 2019, continues in this space today. Mary's steadfast and continued support of this center will ensure the most vulnerable among us have place with a purpose and hope for the future.

*Let's Make Life Better!*

# Expanding Community- based Telehealth Access Points

# Access to care where and when it is needed most

**Maine, U.S.** For those who live in rural communities, the decision of whether or not to go to a doctor's appointment can be complex. Visiting a health care provider may be a full-day event, requiring lost time from work or school and traveling long distances. There are other access-to-care barriers, such as health professional shortages and lack of access to reliable transportation.

MCD Global Health has a long history of improving access to health care through technology. Now, MCD is helping rural communities establish public telehealth access points (TAPs). TAPS are where anchor institutions, such as libraries, community action agencies, and churches, are provided with technology investments, training, and technical assistance to improve access to care for their community members via telehealth.

Bridging the Gap (BTG) is a nonprofit in Maine connecting people with basic needs and community resources. They secured their own funding to purchase telehealth equipment but needed assistance from MCD with deciding what would work best for their needs, equipment ordering and physical setup, and designing workflows and materials to promote their new TAP. With their technology now in place, MCD is assisting BTG connect with area health professionals to increase awareness of their new telehealth equipment.

The Aroostook County Action Program (ACAP) operates the Hope and Prosperity Center in Presque Isle where ACAP coaches work with individuals and families to help them reach their goals.

Now, ACAP also offers telehealth access. Like BTG, ACAP's community members often do not have

their own personal devices to connect to telehealth and rely on public transportation to get to their appointments. With the new TAP at ACAP, these individuals can meet with their providers virtually and spend the rest of their day working toward their life goals.

As the need for TAPs grows, MCD is adjusting to evolving needs. TAPs are often managed by organizations without medical backgrounds, so the support differs from what is provided to health care providers.

"BTG recognized the need for telehealth in their community but lacked familiarity with the associated medical terms and technical processes," said Reid Plimpton, program manager for the Northeast Telehealth Resource Center.

"We also recognized that organizations may have different needs. For instance, telehealth often starts by emailing patients their appointment details. Since many BTG clients did not have email addresses, we focused on helping them with guidance to set up free email accounts."

In the last year, MCD has helped launch nine new TAPs in Maine. MCD continues to support the TAPs at the BTG and ACAP and is helping launch new TAPs in Aroostook County and on Maine's unbridged islands.



# Improving Women and Girls' Health

Historic HPV vaccination and screening and treatment services

## **Equatorial Guinea, Africa**

In 2024, MCD Global Health's Cervical Cancer and Screening Treatment (CCST) project on Bioko Island, Equatorial Guinea, achieved an important milestone by launching the country's first-ever human papillomavirus (HPV) vaccination campaign. This pilot initiative marks significant progress toward cervical cancer prevention on Bioko Island and throughout the country.

### **Pilot HPV Vaccination Campaign**

In May 2024, the CCST project, in partnership with the Ministry of Health and Social Welfare (MOHSW) and funded by Noble Energy EG Ltd (A Chevron Company), successfully conducted a three-day HPV vaccination campaign in Baney Health District. During the campaign, over 750 girls aged 9–13, were vaccinated. About 80% of procured vaccines were administered in this campaign, and no adverse events were reported during the campaign.

This pilot was supported by strategic collaborations with the World Health Organization (WHO) and UNICEF and received a key endorsement from Equatorial Guinea's first lady, Constanca Mangué Nsue Okomo de Obiang. The CCST team leveraged



existing infrastructure and logistics expertise from the Bioko Island Malaria Elimination Project (BIMEP) to ensure smooth implementation.

“We are thrilled to launch this historic vaccination campaign against HPV, a significant step toward safeguarding the health of our young girls,” said Dr. Manuel Ondo, technical director of MCD’s CCST project and a member of the Sexual Reproductive Program at the MOHSW.

### Screening and Treatment Services

Alongside the vaccination campaign, the CCST project continued its screening and treatment services throughout 2024. More than 1,600 women received services across seven health facilities from both continental and insular regions. The CCST provides each woman with a thorough evaluation and appropriate follow-up care. Services include visual inspection using acetic acid (VIA) or Lugol’s iodine (VILI), followed by cold coagulation therapy when precancerous lesions were present.

Additionally, CCST strengthened partnerships with urban health centers across the country, aligning closely with Equatorial Guinea’s national health objectives. This collaboration aims to build sustainable capacity within the health care system.

### Plans for Future Vaccination Campaigns

Insights from the successful HPV vaccination pilot provide valuable information for future vaccination efforts. Expanding the vaccination program to a broader population, including boys, will require additional funding for vaccines. The CCST project



**“We are thrilled to launch this historic vaccination campaign against HPV, a significant step toward safeguarding the health of our young girls.”**

team and the MOHSW are pursuing resources to support this goal, with the aim of eventually incorporating HPV vaccination into the national Expanded Program on Immunization.

The community response during the pilot was positive, indicating public readiness to adopt preventive health measures. Future campaigns will use lessons learned from this pilot to optimize planning and execution.

Through continued collaboration with the Equatorial Guinea government, international partners, and local communities, the CCST project is working toward a comprehensive approach to cervical cancer prevention and treatment, combining vaccination, screening, treatment, and education to improve women’s health outcomes in Equatorial Guinea.



Group of children holding up their vaccination cards after receiving the HPV vaccine in their school on Bioko Island, Equatorial Guinea.

# Local Farms are Transforming Food Security

Improving access to local, nutritious foods for low-income families

## Maine, U.S.

Lincoln County, Maine, is known for its diverse landscapes, showcasing both coastal beauty and rolling hills of farmland. Local farmers have a great relationship with the community, gaining support at the four farmers' markets scattered throughout the county and numerous small roadside farmstands.

In 2023, Healthy Lincoln County (HLC), a program of MCD Global Health, identified a gap where only 30 of the more than 3,000 residents who utilize the Supplemental Nutrition Assistance Program (SNAP) were using their benefits at farmers markets and stands to access local foods and support farmers.

HLC received a \$500,000 grant from the U.S. Department of Agriculture (USDA)'s Farmers Market Promotion Program. This led to hiring a food access coordinator to streamline SNAP booths at the county's farmers markets, assist small farmstands with onboarding SNAP technology, and educate the community about SNAP and other nutrition benefits.

This grant bolsters HLC's ability to strengthen relationships with local farms and farmers markets but also aims to inform community members how to use their SNAP benefits to buy from local farms.



Leifa Gordon handing out vegetable vouchers at the Damariscotta Farmers Market.





“We are excited to leverage this USDA grant to enhance access to fresh, local produce for our community,” said Katie MacDonald, HLC director. “By collaborating with our dedicated farm partners and farmers markets, we aim to break down barriers and ensure that everyone can enjoy the nutritious benefits of locally grown food. This initiative is a significant step forward in our mission to support both our residents and local farmers.”

Because of HLC and other partners’ efforts, SNAP spending nearly tripled since 2023; Maine Harvest Bucks, a nutrition incentive program connected to SNAP spending, increased from \$21 to nearly \$1,400; and the Women, Infants, and Children (WIC) Farmers Market Nutrition Program spending also increased.

In the 2024 season, HLC staff supported the Damariscotta Farmers Market by staffing an information booth to educate shoppers about SNAP and Maine Harvest Bucks, provide customer service and point-of-sale assistance to shoppers using SNAP, and streamline the administrative burden of SNAP reporting and voucher redemption. Future plans involve increasing booth presence at other farmers markets.

**“This initiative is a significant step forward in our mission to support both our residents and local farms.”**



# Five Years of Implementing HIV/AIDS Prevention and Care in Gabon

Successes and challenges: Increasing access to quality services improves HIV/AIDS outcomes

## **Gabon, Africa**

Since 2019, MCD Global Health has led the U.S. Defense HIV/AIDS Prevention Program (DHAPP) in Gabon. The program aims to provide technical support and strengthen capacity through a wide range of activities to improve HIV testing, coverage of antiretroviral treatment (ART) and psychosocial care, and access to viral load testing for clients visiting military health facilities.

To achieve these goals, MCD, along with Gabon's Military Program for the Fight Against HIV/AIDS (PMLS by its French acronym) and Ministry of Health, have organized training courses on HIV prevention, screening, care, and treatment for more than 500 military health workers, provided critical commodities and supported formative supervision to improve HIV services in 14 facilities in Libreville and the interior of the country.



## National vs. DHAPP Project Achievements Toward the 95-95-95 Goal

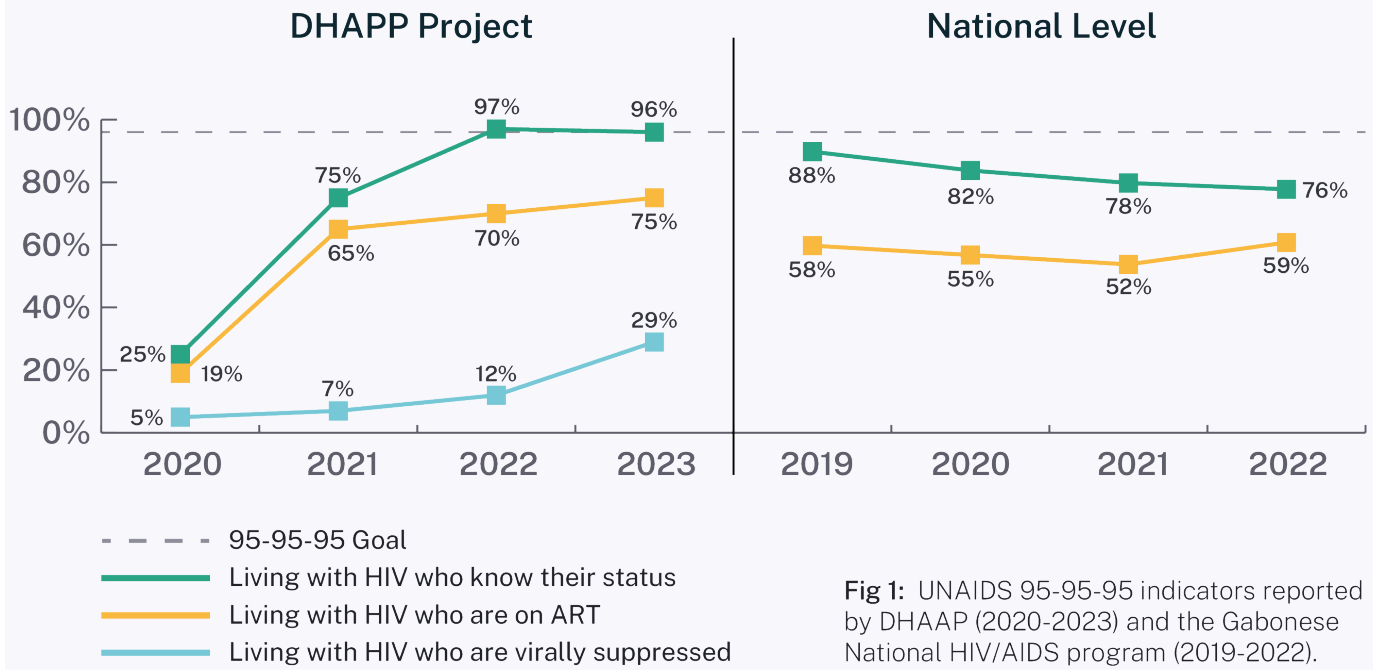


Fig 1: UNAIDS 95-95-95 indicators reported by DHAAP (2020-2023) and the Gabonese National HIV/AIDS program (2019-2022).

Thanks to the project team's efforts, the three key HIV indicators have substantially increased in the targeted population: exceeding the first UNAIDS objective of 95% of people living with HIV (PLHIV) knowing their status and closing gaps between the other two UNAIDS objectives of 95% PLHIV being on ART and 95% of those ones being virally suppressed.

Compared with the nearly unchanged HIV indicators at the national level, this shows how a comprehensive program can effectively contribute to improved HIV/AIDS outcomes.

MCD's DHAPP Project Director Luc Armel NKALA MFOULOU is no stranger to managing and implementing different initiatives to prevent HIV/AIDS in Gabon. With a master's degree in molecular physiopathology and nearly a decade of experience working on HIV projects, he uses his knowledge and skills to ensure success in delivering high-quality HIV/AIDS prevention, testing, care, and treatment services.

In terms of meeting these universal goals, Luc Armel believes that the World Health Organization (WHO) and UNAIDS' guidelines on HIV prevention are effective when properly implemented, such as using male condoms correctly during intercourse, being screened for HIV often to receive treatment if positive, and others.

"It's important to guarantee safe access to harm reduction programs for intravenous drug users and others. If prevention approaches were understood and adhered to, the number of new HIV infections would decrease in the future," Luc Armel said. "As a native Gabonese, I'm proud to contribute to the fight against HIV/AIDS in my country."

**"As a native Gabonese, I'm proud to contribute to the fight against HIV/AIDS in my country."**

## Successful provision of commodities to improve access:

- 229,000 male condoms distributed, and group or individual sessions offered to raise awareness about preventing HIV/AIDS.
- Around 24,500 HIV rapid diagnostic tests (RDTs) used for screening purposes, and the index case screening strategy implemented for the first time in Gabon military health facilities.
- 1,040 Xpert-HIV-1 cartridges made available, free of charge, to PLHIV undergoing treatment at military facilities.

# Financial Summary

## Statement of Activity

\* = in thousands

### Public Support & Other Revenue\*

International Programs	17,032	51.5%
U.S. Programs	15,658	47.4%
Other Revenues	277	0.8%
Investment Income	45	0.1%
Contributions	42	0.1%
<b>TOTAL</b>	<b>\$33,055</b>	<b>100%</b>



### Expenses\*

International Programs	12,957	38.2%
U.S. Programs	14,335	42.3%
General & Administrative	6,556	19.3%
Other Expenses	65	0.2%
<b>TOTAL</b>	<b>\$33,913</b>	<b>100%</b>
<b>OPERATING GAIN (LOSS)</b>	<b>(\$858)</b>	



## Consolidated Balance Sheet

\* = in thousands

### Assets\*

Cash	1,617
Accounts Receivable	35
Grants Receivable	7,792
Property & Equipment, net	67
Investments	1,398
Other	1,333
<b>TOTAL</b>	<b>\$12,242</b>

### Liabilities\*

Accounts Payable & Accrued Expenses	5,181
Deferred Grant Revenue	2,390
Debt	900
Other Liabilities	873
<b>TOTAL</b>	<b>\$9,343</b>

### Net Assets\*

Without Donor Restrictions	2,640
With Donor Restrictions	258
<b>TOTAL NET ASSETS</b>	<b>\$2,899</b>
<b>TOTAL LIABILITIES &amp; NET ASSETS</b>	<b>\$12,242</b>

## A NOTE FROM THE DIRECTOR OF FINANCE

**Heather M. Metten**  
Director of Finance

**“MCD Global Health posted a \$858,000 operating loss. Despite the operating loss in 2024, MCD ended with a current ratio of 1.3 and is below our peer benchmark in general and administrative as a percentage of total expenses at 19.3%.”**

# Improving the health and well-being of people around the world

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