



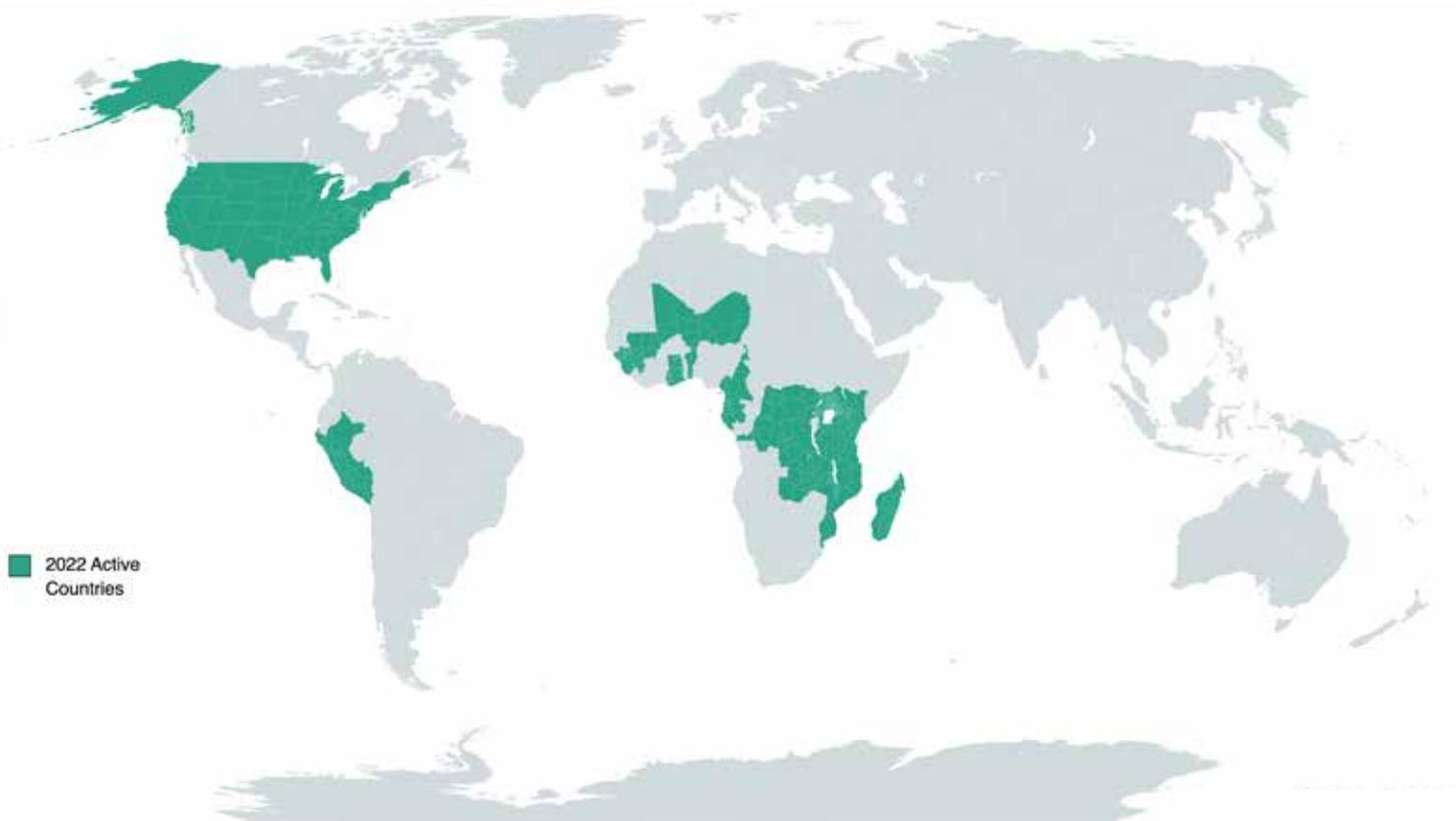
**MCD**  
Global Health



## 2022 Annual Report



[mcd.org](https://mcd.org)



## MCD's Local Roots & Global Reach

Benin  
Cameroon  
Democratic Republic of the Congo  
Equatorial Guinea  
Gabon  
Ghana  
Guinea  
Kenya  
Madagascar  
Malawi

Mali  
Mozambique  
Niger  
Peru  
São Tomé and Príncipe  
Sierra Leone  
Tanzania  
United States  
Uganda  
Zambia



## A Letter from the CEO

Dear friends and colleagues,

The year 2022 marked a new chapter in the organization's 56-year history of bringing our expertise, best-practices, and innovations to help develop quality and responsive public health services for rural, underserved, and at-risk populations around the world.

Until now, we were known in the U.S. as MCD Public Health and recognized primarily for our work in non-communicable diseases, workforce development, and telehealth. Similarly, we were known outside the U.S. as MCD International, or MCDI, for our work in infectious disease prevention and control. Starting in 2022, we reintroduced ourselves as MCD Global Health to accentuate our global reach to more than 55 countries around the world as well as all states in the U.S. As MCD Global Health, we seek to emphasize our uniqueness as an international nonprofit organization with local roots that began in Maine and are now also rooted in communities around the world.

This annual report highlights MCD Global Health's efforts at improving public health from the local to the global level. The report features MCD working with local partners to improve the health of rural and underserved communities, such as in Baileyville, Maine, where we are assisting the town and school system in addressing barriers to care, including access to behavioral health care challenges by introducing innovative tele-behavioral health services. It showcases our work in Benin under the U.S. President's Malaria Initiative's Impact Malaria project, where we are assisting health workers and centers in providing group antenatal care to pregnant women and postnatal care to mothers of young children so they are better able to prevent malaria. The report also describes how MCD uses the Project ECHO® collaborative learning model through Zoom-video technology to amplify local expertise within our public health workforce development efforts.

These are only some of the many stories that paint a picture of MCD Global Health's successful contributions to improving the health and well-being of people at the local, state, regional, national, and global levels.

On behalf of MCD's Board of Directors and Executive Team, we take this opportunity to express our gratitude to MCD's more than 400 highly dedicated and accomplished employees around the world as well as our numerous collaborating public, private, and civil-society partners and donors. It is an honor for us to be part of the leadership team of such a dynamic and impactful nonprofit organization with the goal of improving the health and well-being of people, no matter their location or background. ♦



**Dr. Christopher Schwabe**  
*CEO and President*



**Tim Allen**  
*Chair, Board of Directors*

# Workforce Development

## Advancing Careers in Recovery

Living and raising her four children in the same house that she grew up in, Kristen Webster wants to give back to her rural community of Farmington, Maine. She envisions starting a nonprofit that would focus on bringing recovery groups to Farmington to support community members who are in recovery.

Kristen feels more confident about achieving her goal after attending a workshop series and listening to speakers like Doug Dunbar, who formerly worked as a recovery and re-entry workforce specialist at the Eastern Maine Development Corporation. Doug was, and continues to be, a key faculty member involved in the first-ever “Recovery Jobs for Beginners: A Guided Workshop Series” through MCD’s Rural Behavioral Health Workforce Center (RBHWC). Tailored for Maine residents who live in northern border counties, the five-part series is designed to accelerate entry into behavioral health careers.

Valerie Jackson, senior program manager of Workforce Development at MCD, helped facilitate and served as lead faculty at the workshop series. She describes the series as helping the participants “take the first steps” by addressing barriers, offering them resources and connections, giving them one-on-one support, and teaching them vital skills, such as developing action plans and practicing self-care along the way.

Kristen felt as if the workshop series was the right opportunity at the right time and place for her. From college professors to business leaders and those who are in recovery, the workshop included a variety of speakers and facilitators who shared their stories on how they got to where they are now.



No matter where her planned career goals or overall path takes her, Kristen realizes that her mission is all about strengthening the connection to community, connection to friends and family, and connection to yourself and the life you want to live. Through this mindset, she feels as if she is where she needs to be and is enjoying every minute of it.

***“The opposite of addiction is connection – for me, that means being in my community, sharing my story, and being a resource and a place of hope.”***

— Kristen Webster

The RBHWC is an initiative of the Northern Border Region Commission, funded and administered by the U.S. DHHS Health Resources and Services Administration (HRSA), and MCD was one of four awardees that received a three-year grant through HRSA to increase and sustain Maine’s Behavioral Health workforce through partnerships across the health care spectrum, via mentorship and evidence-based training programs, and by addressing barriers to Maine’s rural workforce. ♦



*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 \$1,365,000 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).*

# Building Workforce Capacity on Bioko Island

## Changing the course of one's life through a 20-year malaria project



Long-term projects like MCD's Bioko Island Malaria Elimination Project (BIMEP) have given local communities not only a chance against malaria, but also an opportunity for a healthier and brighter future.

Lucas Ondo Nze Nchama, assistant manager for Vector Control for the BIMEP, who has been with the BIMEP for 13 years, said that the project and MCD have changed him in almost every aspect of his life.

"My involvement in the project and the opportunities it has provided have shaped me both professionally and personally," Lucas shared. "What excites me about my work is the chance to make a substantial and lasting impact on the communities we serve.

After several years of underemployment and a solitary life, Lucas moved to Bioko Island from mainland Equatorial Guinea and joined the BIMEP as a spraying supervisor, starting a long journey and lasting commitment to combating malaria on Bioko Island.

But his journey as part of the BIMEP wasn't always easy. Every community the project worked with throughout the years brought Lucas and his team new and uncharted hurdles. From facing threats and rejections, to overcoming a community's lack of trust in the project's core activities, like indoor residual spraying, these experiences became lessons that prepared Lucas and his team to better address other challenges that lay ahead.

Lucas has worked closely with MCD's malaria experts, building his own knowledge, skills, and experience as well as a growing interest, which became evident during a recent Marburg virus outbreak in regions of the country where he was part of the support team.

"I found that my work approach and the way I do things, which I learned at MCD, are useful and efficient when supporting the Marburg response," he said.

Although these experiences and challenges were the core of Lucas' growth while working with the BIMEP, he considers his diploma in health management his biggest success. Attending university didn't seem possible to him, but with the BIMEP came the opportunity to not only expand his operational skills, but also achieve his personal goal.

"I considered myself talented, but due to a lack of resources, I couldn't pursue my goal of attending university. I'm deeply grateful for the financial support to achieve this goal, as well as the flexibility, morale, and motivational support," Lucas said.





Apart from individual professional growth, Lucas has also learned that building partnerships is vital. Ongoing collaborations with the ministries of health and interior and community delegates have been key to the success of the BIMEP's core activities. For example, by collaborating with the Ministry of Interior to use data in identifying optimal areas for intervention strategies, the BIMEP can target efforts, such as distributing mosquito nets in areas with limited access.

“So long as malaria still persists on the island, our mission is far from complete,” he said. “We continue to forge new alliances and maintain our commitment to using data to engage stakeholders in addressing and responding to identified mosquito breeding sites.”

Lucas recognizes that even with significant progress over the 20 years of the BIMEP and an important decline in parasitemia over the last 10 years, Bioko Island still doesn't have full control over malaria in the general population, but the lasting impact of MCD's work to educate and reduce the disease in the region has forever changed Lucas and the history of malaria in Equatorial Guinea. ♦

***“Being part of the BIMEP has allowed me to contribute to the reduction of malaria and enhance the overall health and well-being of the people on Bioko Island.”***

— Lucas Ondo Nze Nchama

# Harm Reduction Hits Home

*One community's approach to destigmatizing Narcan*



Like many who live in Maine, Eleanor Busby went on vacation to the Rangeley Lakes region in the western part of the state where she planned to go hiking and visit a local store. To this

day, she still isn't sure why she decided to pack Naloxone (also known as Narcan) in her knapsack before she left to go to the store.

"As I approached the doorway [of the store], I noticed a man who was staggering and seemed to be talking, but it was garbled. He fell right in front of me," Eleanor described.

"His eyes looked rolled back, and his mouth was open. I was not at all sure what was wrong, but he needed immediate help. I had Narcan and administered the first dose. People were yelling at me, but I kept checking on him. I asked a woman to call 911. There was no response from him, so I administered the second dose, and he roused almost immediately. He sat up and was confused. His wife came on the scene and was concerned that he had overmedicated by accident."

Because of her quick actions and preparedness, she saved the man's life. This was all because she had attended a free Naloxone training in her community provided by Healthy Lincoln County, a program of MCD, which encourages participants to integrate the opioid overdose reversing medication into their standard first aid supplies.

*Healthy Lincoln County (HLC) is a community health program of MCD, providing public health programs in Lincoln County, Maine. HLC supports thriving, healthy communities in Lincoln County by working with our partners to improve the health and well-being of residents of all ages. In 2013, HLC became a program of MCD.*



"The training gave me the tools I needed to help and the knowledge that [Narcan] wouldn't hurt, even if he had not overdosed. The training was simple and clear: You never know when it could be the clerk at your convenience store or a passerby, like me, who could make a real difference," Eleanor said.

In 2022, Healthy Lincoln County distributed more than 250 doses of free Naloxone in the community, offering the training to a variety of community-based organizations. With more than 6,800 overdoses reported in Maine in 2022 alone, programs to increase awareness of, and access to, Naloxone are integral to removing the stigma associated with opioid use disorder.♦



## Capacity Building in Rural Madagascar

### *How local seamstresses are improving women's menstrual health and growing the local economy*

Menstrual health and hygiene are an integral part of MCD's WASH interventions in Madagascar. MCD and our partners trained hundreds of local seamstresses in sanitary pad production and supported them in marketing and sales of these products.

BAKOLINIRINA Deline, 51, and RAZAFINDRAIBE Yvette, 50 (pictured below), have been seamstresses for years in Ifatsy Commune in Vohipeno District on the southeast coast of the island nation of Madagascar. MCD's training and support enabled them to produce sanitary pads and sell them in local markets where hundreds of women and girls can access their affordable sanitary products. The program not only helped address one of the major WASH-related challenges that women and girls have been facing, but also contributed to the local economy and women's empowerment.

After training local seamstresses, MCD's team worked with them to create sales points for washable sanitary napkins. Viviane (pictured right), a local resident in the Commune Vohilany, Fitovinany Region, and advocate for the use of washable sanitary pads, has set up points of sale in her community and sold about 50 sanitary pads in her first two weeks.

She also collaborates with health centers to support women in menstrual health management. The pads she produces are sold at a low cost to meet the purchasing power of the communities, and Viviane is now improving her products to meet different customer needs. ♦



In 2022, MCD implemented a UNICEF-funded water, sanitation, and hygiene (WASH) project aimed at improving sanitation and hygiene in three regions of Madagascar, contributing to the implementation of the national WASH policy of the Ministry of Water, Sanitation and Hygiene. At the end of the year, the program declared 498 villages open defecation free (ODF) and enabled more than 512,000 people to access improved sanitation and hygiene services and more than 40,000 people to access basic drinking water services in communities. Through village savings and loans associations, the program has supported more than 16,000 households in small-scale businesses or income-generating activities.



# Amplifying Local Expertise to Better Serve Vulnerable Communities

## Aging, Community, and Equity

The long-term impacts of COVID-19 continue to ripple through rural communities, challenging health care providers, educators, and families. MCD's Collaborative for Advancing Rural Excellence and Equity (CARE2) program supports rural communities in Maine, New Hampshire, Vermont, and New York's northern-most counties who are tackling these emerging and complex issues.

CARE2 offers a variety of Project Extension for Community Healthcare Outcomes® (ECHO®) programs that bring together experts to share knowledge and build capacity with the goal of improving care for underserved people. One of these programs is MCD's Project ECHO® on Aging, Community, and Equity (PEACE) that focuses on pandemic-related issues, connecting experts from across the region to tackle topics, such as cognitive decline, dementia, depression, and isolation of older adults during COVID-19.

"We want to do it all, and everyone is figuring it out as we go. There is no blueprint for much of what we are dealing with right now," said Jody Wolford-Tucker, Ph.D., executive director of Hospice Volunteers of Hancock County in Downeast Maine. Jody participated in the PEACE ECHO® along with others who work with older adults. "The timing is perfect," she said. "The topics have been right-on in terms of compelling issues we are facing in our service to older adults and those facing life-

***"I really liked the format. Hear from the teachers first, then the [health care] professionals. Teachers see kids in a different setting than [health care] professionals, and this lens is critical for surviving the day to day."***

*— Testimonial from an ECHO® participant.*

limiting journeys, let alone the compounding effects of the pandemic."

The PEACE ECHO® sessions are person-centered learning communities and reach stakeholders from diverse backgrounds, reinforcing the need for collaboration and coordination within communities.

"I have been exposed to many other thought-leaders throughout New England who have a wealth of experience and knowledge related to health care access and equity," said Melinda Lovering, director of Health Partnerships at Androscoggin Home Healthcare and Hospice. "I've learned from the presenters, but also the participants each month, who offer unique insights, comments, and encouragement to problem-solve together."



## About Project ECHO®

MCD is a replicating partner of the University of New Mexico Health Sciences Center's Project ECHO®, sharing in their mission to demonopolize knowledge and amplify the capacity to provide best practice care for underserved people around the world. MCD's successful implementation of the ECHO® model has brought together several growing virtual communities of practice. Project ECHO® is a method for participants to become more confident in their practice, aware of resources, and connected to their community, as well as better able to realize improved outcomes for those in their care.

## Improving Children's Behavioral Health

In collaboration with the Maine Center for Disease Control and Prevention (CDC)'s Pediatric and Behavioral Health Partnership (MPBHP), MCD has led the implementation of Project ECHO® to enhance MPBHP's mission of meeting the behavioral health crisis within its population of children and adolescents.

MCD launched a monthly Pediatric Psychiatry ECHO® in spring of 2022. Leveraging the abilities of both organizations' teams, MCD assembled a panel of pediatric behavioral health specialists, developed a curriculum relevant to the challenges that primary care providers face, and discussed recommendations and resources around complex behavioral health cases in dynamic settings.

Encouraged by the collaborative nature of the ECHO® process, its flexibility, and the critical need for solutions to meet the mental health crisis in Maine's schools, MCD's team implemented a four-part ECHO® in fall of 2022 for school-based health centers. Bringing on new collaborators, MCD worked closely with the Maine CDC and the National Alliance on Mental Illness to create a curriculum that focused on mental health screenings for all students and best practices in suicide prevention.♦

## Project ECHO® Results

**121**  
total individuals participated in the Pediatric Behavioral Health Project ECHO® over the 12 sessions held in 2022.

**86**  
individuals from 56 organizations participated in the Substance Use Disorder ECHO® over the four weekly sessions held in June 2022.

**89**  
individuals from 48 organizations participated in the Project ECHO®: Aging, Community, and Equity over the eight monthly sessions held in 2022.

*"I always learn so much from the case presentation and discussion that follows. The case discussed highlighted so many complex social factors impacting a teen's well-being and how they show up in our office. It was a good reminder that, as PCPs, we are not alone in their care and that there are resources we can connect with for support."*

— Testimonial from an ECHO® participant.

## Zambian Nurse Midwife Helps Pregnant Women Prevent Malaria

It is a sunny day at St. Mary's Hospital, a rural hospital in Zambia's Copperbelt Province. Mable Chewe is spending her day with a small group of St. Mary's staff working her way through a checklist designed to help health workers provide the highest standard of quality care to pregnant women. While the checklist is clear and helpful, Mable knows that a friendly, warm approach can make all the difference when working with pregnant women to protect them from malaria.

Mable was born and raised in Zambia where she grew up helping care for younger children. This set the stage for her future role in helping others, especially women and children.

“When I look at a pregnant woman and think of the life of the unborn child, and when I think about the effects of malaria on pregnancy, mother, and fetus, I am deeply moved to do the best I can to help pregnant women protect themselves from malaria.”



As part of the U.S. President's Malaria Initiative (PMI) Impact Malaria project, Mable participated in training in 2018 on the outreach training and supportive supervision (OTSS) approach, provided by MCD, that has been a U.S. PMI partner of more than 15 years, to improve quality of malaria diagnosis, and later, quality of care. OTSS assessments are conducted by trained laboratory, clinical, and midwifery supervisors on a regular basis and measure changes in health facility staff performance over time.

Reflecting on how she felt before participating in the training, she shared that she “felt inadequate, had limited knowledge, and lacked confidence” but now feels “enlightened.”

***Zambia carries 2% of the global malaria case burden and 5.2% of the case burden in eastern and southern Africa.***

Malaria is the number one cause of hospitalization in Zambia and a major cause of morbidity and mortality, particularly in pregnant women and young children. Recent surges of malaria in sub-Saharan Africa have made Mable's role more important than ever.

The OTSS approach originated from the U.S. PMI Improving Malaria Diagnostics project by the Zambia National Malaria Control Centre, in partnership with MCD. The structure of OTSS allows supervisors to provide ongoing support for staff through regular mentoring and on-the-job training. Staff then receive feedback with action points agreed upon for the next visit.

“I was very excited that I had acquired the knowledge and skill I needed most to personally contribute to the elimination of malaria,” she said. “The training has helped me to, most importantly, provide technical leadership and guidance to the



malaria clinical and nursing staff in the implementation and monitoring of malaria in pregnancy program.”

Mable uses the OTSS approach to observe other nurse midwives as they offer advice and resources on preventing malaria in pregnancy, screen pregnant women for malaria symptoms, and perform malaria rapid tests.

She has learned that making patients feel comfortable is part of a holistic approach in providing high-quality care. Her warm, friendly style helps make the antenatal clinics inviting, which is key to her success.

“I get to know patients individually, learning where they work, their hobbies, and what other challenges they have at home,” she said. “Their first impression will come from the waiting area, so we make sure it is clean. I strive to make patients feel valued and special as they are much more likely to come back.”

Despite recent increases in malaria cases, Mable remains optimistic. “A future without malaria sounds ambitious, but of course, why not be optimistic? If we continue our campaign and work, then it is absolutely possible we could eliminate malaria.”♦

**“We have many reasons to be hopeful: Communities and partners are more engaged in the elimination of malaria with strong political commitment and getting everyone on board from the community to higher levels of care.”**

— Mable Chewe

# Connecting Health Facilities to Patients through Quality Telehealth Programs



Opportunities for telehealth expanded significantly across the Northeast in 2022 with some of the largest telehealth utilization numbers across the U.S.

During this time, MCD's Northeast Telehealth Resource Center (NETRC) team served 677 clients with technical assistance and reached 6,347 stakeholders through training activities, including both virtual and in-person. The NETRC team helped health systems, hospitals, clinics, providers, policy makers, and others tackle policy and reimbursement, innovative use cases and workflows, digital health strategy, and more to promote successful launch and expansion of telehealth programs.

The eighth annual Northeast Regional Telehealth Conference was held in September 2022, reaching more than 125 stakeholders from across the region and beyond. Additional NETRC training

events included co-hosting a multi-part webinar series on tele-behavioral health for vulnerable populations, serving as subject-matter experts on a peer-learning group hosted by the Reproductive Health National Training Center for Title X grantees, and delivering a breakout session focused on telehealth innovation at the National Network of Public Health Institutes' 2022 conference.

The NETRC also developed new resources based on needs identified by regional stakeholders that can be found in the virtual Telehealth Classroom. These include a course focused on Advancing Quality in Telehealth, developed in collaboration with regional and national quality experts; a best-practice video on how to conduct physical exams via telehealth, developed in partnership with colleagues from MaineHealth; and toolkits for e-Consults, community health workers, and school-based telebehavioral health. ♦



# Screening and Treating Women for Cervical Cancer

*Reducing the burden of a preventable and curable disease in Equatorial Guinea*

Catalina Mitogo Bielo lives in the capital city Malabo, Equatorial Guinea, on Bioko Island. In 2017, the Malabo Cervical Cancer Screening and Treatment (CCST) project's clinic opened to provide women with the first cervical cancer screening and treatment services available in Equatorial Guinea. Catalina heard about the importance of getting tested for cervical cancer and, upon the clinic's opening, decided to make an appointment.

"At first, I found it uncomfortable, but then I thought about my health and the test was free, so I decided to be screened. My results were good, and this motivated me to keep my appointments and encourage my friends and family to also be screened," she said.

Now, Catalina works for the CCST project as a nurse assistant and is eager to learn more about how to help women in her community with early detection and treatment while still prioritizing her health.

"I keep all of my appointments and even more so now that I am part of the team," she remarked.

Cervical cancer is preventable and curable if detected early and managed effectively; however, it is the fourth most common form of cancer among women worldwide with the highest burden in sub-Saharan Africa countries.

To decrease the prevalence of this disease, MCD has worked throughout Equatorial Guinea since 2016 to reach and provide women with vital screening and treatment services through its CCST project, funded by Noble Energy EG, a Chevron company. This is the only cervical cancer screening program available in Equatorial Guinea.

**4,443 women in Equatorial Guinea reached with cervical cancer screening and treatment services.**



In 2022, the project experienced a vast increase in the number of women seen since the beginning of the pandemic, reaching 4,443 women in Equatorial Guinea with these vital services, surpassing the goal of 3,000 women.

A key to success was a national campaign in May 2022 that provided outreach and care for women living in districts located in the peri-urban regions of the country where such screenings are limited. A total of 1,178 women were screened with this strategy, 98% of whom needed and received treatment.

This project uses the single-visit, 'screen-and-treat' approach, which is critical in reducing the burden of cervical cancer in low-resource countries. In addition, the CCST project team conducted outreach training, and supportive supervision (OTSS) visits with 15 existing staff members at five health facilities.♦

# Expanding Access to Tele-behavioral Health Care in Rural Areas

*Washington County, Maine, launches community-driven solutions*



Charlotte Grass, a school-based community health worker and service navigator at East Range II School in Topsfield, Maine, aims to improve the health of the school's students in different ways, some of which may be surprising: she began a garden program with the PreK classroom, starting with winter sowing.

"They had a choice of starting zinnias, marigolds, or impatiens, which will be planted in the flower beds around the flagpole and flower bed under the East Range II Elementary sign," Charlotte said. "It is my hope that this program will build self-confidence in our students and encourage school spirit, along with creating a way for students to build healthy relationships with nature."

Charlotte believes these activities encourage positivity in those who are already using child therapy services through a local health provider, Aroostook Mental Health Services, and encourages other students to use the therapy services available to them.

Being a school-based community health navigator means working with students on different types of projects and activities, building trust and relationships with them and their families, and reducing stigma and making it easier for families to take advantage of services now available for their children.

With assistance and support from MCD and funds acquired from a \$500,000 challenge grant from Point32Health Foundation, the nearby town of Baileyville has led the area in making progress toward improving the health, wellness, and quality of life for its residents.

Much of this work started in response to a growing need. In early 2022, Woodland Elementary and Jr/Sr High School launched a successful pilot tele-behavioral health program, followed by an award from the Pull



Up Fund that allowed the program to expand to all four schools in the AOS 90 school district, and added community health worker and service navigators, like Charlotte, at each of the schools. More telehealth equipment was deployed, and in fall 2022, school nurses were trained on how to use the equipment to increase access for and connect students with care, whether that connection was to the one school nurse that serves all four schools or with the students' established health care providers, all without needing to leave the school building.

“We do see kids reaching out for help. They’re asking to see their provider. They’re asking for their teletherapy sessions,” said Patricia Metta, superintendent of the AOS 90 school district. “We see them talking to people, and we do believe that, eventually, that will lessen their anxiety. We are seeing kids come to school more. Attendance has really improved.”

This is one part of a bigger initiative aiming to improve the health, wellness, and quality of life in small rural towns through service, advocacy, and community involvement.

East Range II is one of four schools in AOS 90, serving five towns and eight unincorporated territories, with a combined population of less than 5,000 people, in rural Washington County. The initiative started in Baileyville, Maine, and expanded to others across the AOS 90 school district. With these early successes, organizers are growing hope and are preparing to engage and support more local community-led initiatives to improve health and well-being. ♦



### Our Approach

Engaging local policy and decision makers is part of the process and motivates municipalities and residents to take on leadership roles, as well as showing care and understanding about meeting the needs of communities through such work. MCD’s approach to local engagement and leadership is the key to building sustainable communities in rural Maine and beyond.



***“We have to help each other, that's why the group was created.”***

*— 35 y/o pregnant woman at Tori-Gare Health Center, Atlantique, Benin*

## Bringing Women Together with Group Antenatal Care in Benin

The U.S. President’s Malaria Initiative (PMI) Impact Malaria project, funded by the United States Agency for International Development (USAID), supported an assessment of group antenatal care (G-ANC) in Benin as an innovative service delivery model to improve the coverage of prevention of malaria in pregnancy. For this rigorous assessment, 20 health centers in three health zones of Benin’s Atlantique Department were selected to offer G-ANC while 20 were selected as controls and continued to deliver individual antenatal care only.

Antenatal care guidelines in Benin recommend attending at least four consultations during pregnancy while allowing women to receive three or more doses of intermittent preventive treatment of malaria in pregnancy (IPTp); insecticide-treated bed nets are also offered. Instead of individual consultations, the G-ANC approach brings pregnant women with similar due dates together for a series of five facilitated meetings.

During G-ANC, they take each other's vital signs, receive skilled check-ups and directly

observed treatment to prevent malaria, and share their experiences and concerns in a safe space. In all, 2,319 women joined 267 G-ANC groups in 2022.

“What’s good about the group is that when we come, [the midwives] make us feel welcome, teach us a lot of things,” said a 33-year-old pregnant woman at Togoudo Health Center in Atlantique Department. “When a person is lacking something, or a person has a problem at home that they don't know how they are going to handle, you can say what it is, and we are going to talk with you about it.”

“The name of my [G-ANC] group is ayidoté (the awakening of consciousness). At first, I had difficulty taking the [malaria prevention] medication, but as I began to follow the meetings, the teachings, I began to make an effort to take the medication,” said a 20-year-old pregnant woman at the Tori-Gare Health Center.

Equipped with such knowledge, women who participated felt more confident asking questions about malaria prevention, more

able to notice danger signs that could cause complications or death during childbirth, and spread the word about antenatal care to others. Compared to women who had individual antenatal care, those who participated in G-ANC were statistically more likely to have attended four or more consultations and received at least three doses of IPTp.

“What I am happy about in the advent [of group antenatal care] is that before, when we would come for an antenatal care weigh-in appointment, the caregivers wouldn't explain much to us,” said a 29-year-old pregnant woman at the Kpanroun Health Center. “We had no understanding of anything. But now with the G-ANC group, they teach us things like why we need prenatal consultations or why do the weigh-in. They give us details on things.”♦



**“What’s good about the group is that when we come, they make us feel welcome, teach us a lot of things, and when a person is lacking something or has a problem at home that they don’t know how they are going to handle it, you can say what it is and we are going to talk with you about it.”**

— 33 y/o woman who recently delivered at Togoudo Health Center, Atlantique, Benin

# Supporting and Improving Care for People Living with HIV in Gabon

UNAIDS set new targets for the 2021–2026 global HIV/AIDS strategy, calling for 95% of all people living with HIV to know their status, 95% of all people who know their status receive treatment, and 95% of people with HIV who are receiving treatment have viral suppression by 2025.

In Gabon, HIV/AIDS is a public health priority, with a national prevalence of 3% among adults aged 15–49 years old and an incidence rate of 1.15 per 1,000 population. Recent data estimate that 47,000 adults and children in Gabon are people living with HIV (PLHIV), of whom 34,000 (72%) know their status and 25,000 (53%) have access to treatment (UNAIDS 2021).

Gabon is committed to supporting and improving policies, systems, practices, and care for PLHIV. Using UNAIDS’s targets as their guide, Gabon’s military health facilities launched their country’s first index case testing approach to increase the number of PLHIV who know their HIV status, with support initiated through the U.S. Department of Defense HIV/AIDS Prevention Program (DHAPP).

To support implementation, MCD developed a training manual, hosted a training, and established a system of ongoing outreach training and supportive supervision (OTSS). Such efforts have made the Military HIV/AIDS Program a pioneer in this strategic approach at the national level in Gabon.

“The value of index testing lies in the fact that it not only breaks the chain of contamination, but also identifies people with infection and then leads them to treatment. Through motivational counseling, we need to provide our clients with realistic scenarios so that they can be assured of their care, such as free testing or guarantees regarding their social situations,” said Captain BIGNOUMBA Zita, psychologist and index testing focal point at a hospital in Libreville.



The Ministry of Health’s National Program for the Control of Sexually Transmitted Infections (PNLIST) has established several policies and practices to support HIV prevention and care, including adopting the “Test and Treat” policy, increasing HIV testing at all points-of-care facilities, offering free antiretroviral treatment and integrated service delivery for PLHIV, and rolling out of the first line medication, Dolutegravir, as endorsed by the World Health Organization.

“From my experience, index testing is a good approach that allows people with HIV to be diagnosed/tested. The strength is that it is a strategy to bring hidden people out of the shadows and enlighten them about HIV/AIDS. My suggestion as a health provider working on index testing would be to explore strategies to make peer educators more credible to our clients for a more effective fight against HIV/AIDS,” said Chief Sergeant Major MBOMBE Cédric, HIV/AIDS peer educator and focal point in Port-Gentil. ♦

**What is index case testing?**

A WHO-endorsed approach in which close contacts of an individual with a confirmed HIV-infection (the ‘index’ case) are offered HIV counseling and testing services with strict adherence to best practices of confidentiality and ethical care. Individuals identified with HIV are then referred for treatment and follow-up. It is an efficient strategy with a higher probability of identifying more PLHIV.

# 2022 Results

**296**

**Naloxone kits distributed** to community organizations and individuals through the Healthy Lincoln County Program in Maine.

**2,319**

**women were seen for group antenatal care** at a health center in Benin through the U.S. President's Malaria Initiative Impact Malaria project.

**4,443**

**women reached** in Equatorial Guinea with vital screening and treatment services through the Cervical Cancer Screening and Treatment Project.

**40,874**

**households sprayed protecting 152,472 individuals** on Bioko Island, Equatorial Guinea, as part of the Bioko Island Malaria Elimination Project.

**380**

**students** in Washington County, Maine, now have access to health care via telehealth right from their school.

**35,902**

**long-lasting insecticidal nets distributed** through fixed-point distributions and 5,941 through antenatal care visits through the Bioko Island Malaria Elimination Project in Equatorial Guinea.

**125**

**people living with HIV** were offered index testing and 80 of their contacts were tested in Gabon through the U.S. Department of Defense HIV/AIDS Prevention Program.

**512,000**

**people gained access to improved sanitation and hygiene services** through the UNICEF-funded water, sanitation, and hygiene program led by MCD in Madagascar.

**549**

**private health providers received training and post-training follow-up** on a high-impact intervention package in the realm of reproductive, maternal, newborn, and child health from the Private Sector Health Partnership Activity in Benin.

**677**

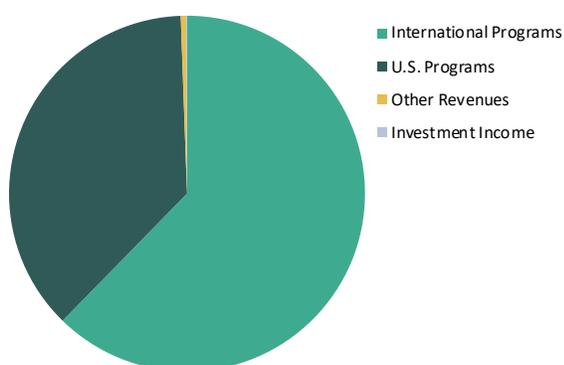
**clients served** with technical assistance by the Northeast Telehealth Resource Center.

# Financial Summary

## Statement of Activity

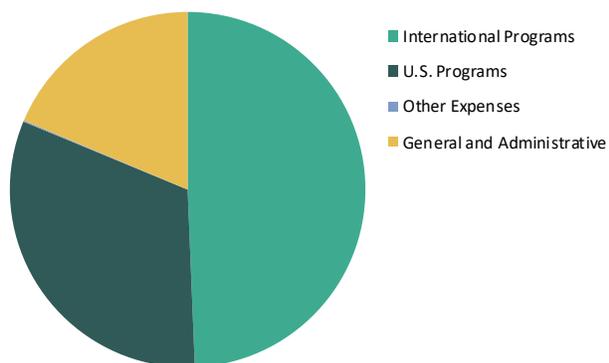
### Public Support & Other Revenue\*

International Programs	20,386	62.0%
U.S. Programs	12,140	36.9%
Other Revenues	163	0.5%
Investment Income	22	0.1%
Contributions	149	0.5%
<b>Total</b>	<b>\$32,860</b>	<b>100%</b>



### Expenses\*

International Programs	16,850	49.4%
U.S. Programs	10,892	31.9%
Other Expenses	36	0.1%
General & Administrative	6,364	18.6%
<b>Total</b>	<b>\$34,144</b>	<b>100%</b>



Expenses taken from statement of functional expenses. A complete copy of financial statements audited by BerryDunn, LLC is available upon request from: Medical Care Development Inc., 105 Second St., Suite 2A, Hallowell, ME 04347

## A Note from the Director of Finance

MCD Inc. posted a \$1.28M operating loss in 2022 due to unanticipated delays with large projects with continued investments in organizational strengthening. Despite the operating loss in 2022, MCD ended 2022 with a current ratio of 1.6, no long-term debt, and financial assets on hand of 139 days.

### Heather M. Metten, Director of Finance

## Consolidated Balance Sheet

### Assets:

Cash	4,614
Accounts Receivable	39
Grants Receivable	8,611
Property & Equipment, net	170
Investments	1,059
Other	1,445
<b>Total Assets</b>	<b>\$15,939</b>

### Liabilities:

Accounts Payable and Accrued Expenses	5,139
Deferred Grant Revenue	4,044
Debt	-
Other Liabilities	1,103
<b>Total Liabilities</b>	<b>\$10,286</b>

### Net Assets:

Without donor restrictions	5,348
With donor restrictions	304
<b>Total Net Assets</b>	<b>5,652</b>
<b>Total Liabilities and Net Assets</b>	<b>\$15,939</b>

\* = in thousands

**Improving the health  
and well-being of people  
around the world.**



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