

Tuberculosis Care in the Amazon Rainforest

Tuberculosis (TB) is the deadliest infectious disease, disproportionately affecting people in low- and middle-income countries, where treatment and care are routinely inaccessible.

Early detection is critical to saving lives, but finding cases of TB is challenging in communities like Loreto, a region of 32 Indigenous groups located in the heart of Peru's Amazon rainforest—only accessible by plane or boat.

In mid-November, a team from Socios En Salud (SES), as PIH is known in Peru, traveled in a boat across the Amazon River basin to launch a 10-day campaign to screen people in Loreto for TB. Thanks to your generosity, the health workers



were equipped with ultra-portable, Al-powered digital radiography equipment, enabling them to screen and evaluate patients within minutes even in the most remote areas.

The team wasn't sure how receptive the communities would be, and if they would want to participate. But their presence was expected—weeks before, SES had sent former TB patients to the communities to promote the screenings and register patients.

During the 10-day campaign, the team screened 369 people with your support. For those who tested positive, the plan was to provide them with economic assistance to travel to the nearest health center with TB care available. The intervention in Loreto, made possible by our

generous PIH community, marked a step forward for TB care in the region.

"People were asking when we were coming back because they wanted to bring more family members," shared Milagros Mendoza, project coordinator of SES's TB Program. "They were very grateful."

TOP: Hover Rivera, (left) maintenance assistant for Socios En Salud helps boat worker César Zumaeta load equipment onto the boat before heading across the Amazon River basin to Loreto. *Photo by Monica Mendoza / PIH* MIDDLE: The Vine Trust's Peruvian Esperanza Amazónica Medical Program (PMEAP) boat took 3 PIH colleagues to carry out tuberculosis screening in 18 communities in Loreto. *Photo by Julio López Guevara / PIH*

CEO LETTER



Dr. Sheila Davis, PIH CEO, visits the University of Global Health Equity in Butaro, Rwanda. *Photo by Pacifique Mugemana / PIH*

Dear Friends,

As the new year unfolds, I find myself reflecting on the strength and tenacity of our teams around the world. I'm inspired by their steadfast commitment to providing lifesaving health care to patients while charting new paths to continue bending the arc, despite tremendous global challenges and daily risks in many of the countries where we work.

Our teams have continued to make remarkable improvements in care through innovation, such as deploying mobile food clinics—staffed with clinicians and community health workers—in Haiti, using portable ultrasounds to share real-time sonographic images to cellphones in Mexico, and introducing artificial intelligence-assisted screening for tuberculosis and other conditions in Lesotho. These advancements rely on robust health care systems that we work with local partners to build and strengthen—making care accessible to more patients and communities.

As we make progress and integrate innovations into our model for care delivery across sites, our work and priorities remain simple: provide quality care, create strong health systems, train global health care providers and leaders, and serve as a replicable model for equitable and dignified health care.

We couldn't do any of this work without your support and commitment to PIH. As you read on, I hope you're also inspired by the incredible work you have made possible. Thank you for accompanying us on this journey.

With gratitude,

Dr. Sheila Davis

Chief Executive Officer

DONOR SPOTLIGHT

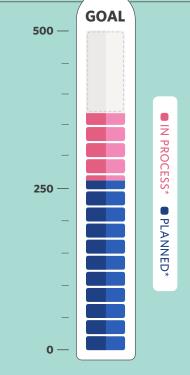
GRAY SIMPSON (they/he) heard about PIH through the VlogBrothers, John and Hank Green. "PIH earns trust, striving to make itself irrelevant by promoting systemic changes that allow communities to care for themselves," they shared.

Simpson seeks to balance donating today and saving for their future. While they already give a sustaining monthly gift, they are also in the process of including PIH in their charitable estate plans.

"I want to live in a world where the tools needed to cure sickness are no longer hoarded, and we all get the care we deserve... I can simultaneously invest in myself, my family, and my neighbors served by PIH around the world."

PIH's Legacy Society, Tom's Circle, honors co-founder Tom White. Members name PIH in their charitable estate plans, sustaining PIH's critical work for generations to come. Help us get to 500 new Tom's Circle members by making a legacy gift today.

Contact giftplanning@pih.org, 857-880-5717, or visit PIH.org/legacy-challenge to learn more.



YOUR IMPACT IN HAITI



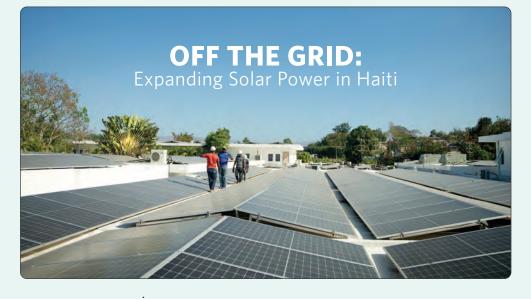
The team at
HUM has completed
the installation
of more than
2,280 solar panels



194 clinicians
from 10 specialties
have graduated
from HUM's
residency program
since it began
in 2013



6,596 patients
enrolled in
malnutrition
programs
last year



ABOVE: Colleagues from PIH and Build Health International check the solar panels on the roof of Hôpital Universitaire de Mirebalais in Haiti. Photo by Mélissa Jeanty / PIH Zanmi Lasante, as PIH is known in Haiti, partnered with Build Health International to expand and improve the solar power system atop Hôpital Universitaire de Mirebalais (HUM) to ensure energy self-sufficiency as political instability and widespread violence have made fuel and power supplies unreliable.

The new system more than doubles HUM's current solar production capacity. Thanks to the generosity of our donors and partners, the hospital will not be completely dependent on unpredictable fuel-powered generators or the unstable national grid.

Mobile Malnutrition Clinics **ALLEVIATING HUNGER**

In Haiti, the worsening food crisis has left the population facing the heaviest burden of hunger and malnutrition in the Western Hemisphere. With your help, PIH seeks to curb this deadly trend.

A collaboration between PIH Canada and Zanmi Lasante (ZL), as PIH is known in Haiti, deploys mobile food clinics to communities with the highest burdens of hunger to identify malnourished children earlier, delivering treatment before health problems turn fatal.

The year before the mobile clinics were launched, 18 children died of malnutrition at ZL-supported Hôpital Saint-Nicolas in St. Marc. From April 2022 through March 2023, however, not a single child died of



Photo by Francesco DeFlaviis / PIH

malnutrition in St. Marc. Your support made this possible.

These days, it's become more difficult to navigate the mobile clinics into communities, with gangs blocking roadways and violence preventing access to towns. Still, the nutrition teams remain dedicated to providing care to the community with aid from our global PIH family.



Tech Innovations Strengthening Our Work

PIH TURNS TO TECH TO EXPAND ACCESS TO CARE

With the support of generous people like you, PIH is using advanced technology and innovations to model how affordable, scalable technology can aid global health, expand access, and pave the way for a healthier, more connected future.



1. THERE'S AN APP FOR THAT

PIH turned to mobile apps to help manage patient data at the community level. In Rwanda, Malawi, and Mexico, health care workers use an app, either mUzima or CommCare, to securely store patient data. Both apps work offline, making them usable in areas with spotty or nonexistent internet, and sync to OpenMRS, centralizing patient information.

ABOVE: Ramatu Jalloh, community health worker supervisor in Sierra Leone, tracks a home visit with a patient on her smartphone. *Photo by Caitlin Kleiboer / PIH*

2. CARE VIA CHATBOT

As COVID-19 emerged and patients were delaying routine care, PIH turned to telehealth. In Peru, PIH developed seven chatbots to provide services across clinical areas, from mental health to chronic disease management. These chatbots enabled PIH to conduct screenings virtually and connect patients with care, such as virtual therapy sessions or medications delivered to their door.



3. DIGITIZING HEALTH RECORDS

In many of PIH's clinics, patient records were once handwritten, often getting lost, damaged, or misinterpreted. Now, we use a system called OpenMRS, an open-source electronic medical records platform founded by PIH and the Regenstrief Institute in 2004. PIH uses the system in 10 countries to track everything that happens when a patient receives care.



4. USING AI TO SCREEN FOR DISEASE

In Lesotho, PIH is using artificial intelligence to accelerate tuberculosis screenings, improving early detection, treatment, and care, as well as detecting other conditions like heart failure and cancer. With the help of AI, PIH has completed over 700 screenings each month, tripling the number of TB cases detected at our clinics.

5. AN ULTRASOUND, ON A CELLPHONE

As an alternative to large and costly traditional ultrasound machines, handheld ultrasounds were developed about a decade ago—streaming realtime sonographic images by connecting to a phone. PIH uses handheld ultrasounds in several communities, including the Sierra Madre region of Chiapas, Mexico, enabling greater access to diagnostic imagery and informed care.

BELOW: PIH staff in Mexico receive training on how to use a handheld ultrasound, reviewing the image live on their phone. Photo by Paola Rodríguez / PIH



Liberia UPDATE

PRETERM BABY RECEIVES CRUCIAL CARE IN LIBERIA NICU

When Linda Depoyou gave birth to her son, Godsent Yeoh, he weighed only 1.3 pounds. With help from our incredible community, he was immediately transferred to the neonatal intensive care unit (NICU) at PIH-supported J.J. Dossen Memorial Hospital in Liberia.

Depoyou herself was suffering from malnutrition, with very little milk to feed the baby. During their stay in the NICU, your support allowed her to be enrolled in PIH's social support program and fed hot daily meals.

Alongside her treatment, Depoyou was introduced to the kangaroo mother care approach, a practice that involves direct, skin-to-skin contact—utilized by clinicians to decrease the deaths of premature newborns, especially in countries like Liberia where incubators and reliable electricity are hard to come by.



Photo by Sam Zota / PIH

Depoyou was worried when her baby was born at such a low weight. However, after three months in the care of the NICU team, Godsent and his mom gained enough weight to go home, healthy and grateful for the care that you made possible.

Annual Report 2023



WITH YOUR SUPPORT, OUR TEAMS CONDUCTED 121.311

MENTAL HEALTH
PATIENT VISITS
GLOBALLY

YOUR
CONTRIBUTIONS
HELPED OUR
TEAM PERFORM
28.412

TESTS TO SCREEN PATIENTS WITH SUSPECTED TB



Photo by Thomas Patterson



SEE YOUR IMPACT IN THE FULL 2023 ANNUAL REPORT

To read more online, scan QR Code or visit PIH.org/AnnualReport2023



Our *Favorite* Moments from 2023

It's been a packed year. Headlines highlighted escalating violence in Haiti, cholera spikes in Malawi, and damaging climate-related weather extremes across the globe. But there was good news: medical education programs launched, major health policy breakthroughs, and reduced rates of maternal mortality. Through it all, we persevered with your support, providing top-notch health care to people who need it most.



See the stories, videos, and social posts we were most excited about in 2023.

PIH.org/FavoriteStories2023



WE WANT TO HEAR



Please scan the QR code above or visit PIH.org/de-survey2024 to share your thoughts on your supporter experience and help us continue to improve.

Charity : Navigator

TOP: Photo by Diego Diaz / PIH BOTTOM: Photo by Asher Habinshuti / PIH

IN THIS

COVER
TB Care in the
Amazon Rainforest

INSIDE

CEO Letter • Tom's Circle • Haiti Update • Care in Liberia NICU Tech Innovations Strengthening Our Work • 2023 Annual Report

BACK 2023 Favorite Moments

YOUR WINTER IN PARTNERSHIP NEWSLETTER INSIDE

NONPROFIT ORG
U.S. POSTAGE
PAID
BOSTON, MA

800 Boylston Street, Suite 300 Boston, MA 02199 PIH.org

