MAYA HEALTH ALLIANCE | WUQU' KAWOQ 2019 ANNUAL REPORT

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#### Dear Friends,

I'm thrilled to report that 2019, our 13th year in operation, was another year of exciting progress! In collaboration with a variety of partners, we continued to expand the reach and depth of our work. We served more than 20,000 patients on a \$1.3 million budget across a diverse, complex array of health services, averaging just \$65 per patient.

Highlights included:

- Helping to launch Nútreme, an alliance with major businesses, to promote education and galvanize changes in the government's approach to Guatemala's malnutrition crisis.
- Contributing to the research and understanding of the emerging problem of people in rural Guatemala living with end-stage renal disease (ESRD).
- Joining the Community Health Impact Coalition, a network of leading organizations catalyzing high-impact community health systems.
- Enriching our education for new mothers to highlight the importance of early stimulation like singing and talking in addition to healthy nutrition.

Increasingly, we're recognized as a valuable partner and leader in addressing health challenges in rural Guatemala and beyond. Our Chief Medical Officer, Peter Rohloff, served as a keynote speaker and moderator at a national vice presidential debate on early childhood health sponsored by United Way. And we had the extraordinary honor of being among just four organizations selected for New York Times columnist Nicholas Kristof's Holiday Impact Prize for our outstanding work on testing and treating cervical cancer.

Your support powers our groundbreaking work. I look forward to another year of partnership, innovation, and progress in our shared commitment to make access to quality health care a reality for all people in Guatemala.

#### With gratitude,

Anne Kraemer Díaz, Executive Director

### WUQU'KAWOQ



## ABOUT US

We use innovation, education, language, partnership, and research to break down barriers to good health and wellbeing for all Guatemalans.

We envision a future in which good health and wellbeing in rural Guatemala is not dependent on culture, language, or socio-economic status.



# GOALS



### ACCESS

All Guatemalans have access to high quality health care regardless of language, culture or socio-economic status.

### **NUTRITION**

Families have the knowledge and resources they need for nutritious, balanced diets.

HEALTHY BIRTHS Mothers have the information and support they need for safe and healthy births.

**AUTONOMY** Women have power over their own bodies.

**CARE NAVIGTION** Patients with chronic conditions have the tools and support they need to optimize their health.

# APPROACH



### STRENGTHENING IMPACT THROUGH COLLABORATION

We coordinate efforts and make the best use of existing resources.





### CENTERING LANGUAGE, CULTURE, AND QUALITY

We train the next generation of Guatemalan health providers in community health, with a focus on women and indigenous people who understand the language and culture of those they serve.

### SCALING BEST PRACTICES

We further scientific knowledge through rigorous research to encourage better health outcomes for all of Guatemala.



# 2019 IMPACT

20,000+ patients served 10,000+ home visits Monitoring & care for **2,275** children under five Education & care for **160+** people with diabetes Reproductive health care for **5,000** women 1,500 cervical cancer screenings **5,000+** staff training hours **438** health workers trained Partnerships with **119** NGOs and health centers





### MOBILE CARE: ANOTHER YEAR OF LIFE-SAVING SUCCESS!

Maya women in Guatemala are 10 times more likely to die from childbirth than women in the US, mostly due to the lack of accessible, high-quality, maternal health services.

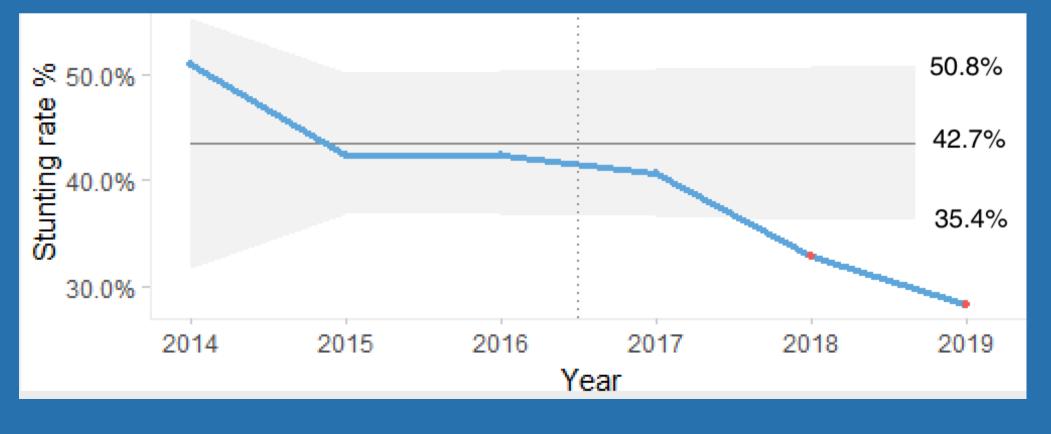
We're changing that with our mobile health "mCare" program, which trains and equips midwives with smartphone technology for prenatal care, along with 24/7 access to medical staff. We also provide care navigation and other support for pregnant women needing emergency care.

In 2019, our midwives attended to 49 cases with serious complications before and after birth. All of the mothers and children survived, reflecting substantial improvement over typical maternal and infant mortality rates in the region.



### BOLSTERING NUTRITION IN THE CRITICAL EARLY YEARS

Guatemala has one of the highest rates of childhood stunting in the world. Nearly half of all children under five are malnourished, and rates reach as high as 90% in some rural, indigenous communities. Malnutrition is among our key focus areas, with 1,500 children receiving treatment in the nutrition program each year. Our nutrition strategy focuses on education, empowerment, gardening, and food supplements to support children during the first two years of life. As our experience in the Boca Costa region illustrates, we have repeatedly shown that it is possible to reduce rates of chronic malnutrition at a community level by 20% to 40% within 2-3 years. These dramatic reductions in malnutrition also yield improved cognitive outcomes and lowered future health risks.



#### **Reducing Stunting: Boca Costa, Suchitepequez** (N=332)



# TEAM

### ANNE KRAEMER DÍAZ Executive Director

WALESKA LÓPEZ CANÚ Medical Director

PETER ROHLOFF Chief Medical Officer



# STAFF

Our staff of 60+ is 90% women 84% indigenous Maya



### BOARD

**President:** BRENT HENDERSON, Assistant Professor, Gainesville, FL

**Secretary:** PATRICK JENNINGS, Health Care Consultant, San Francisco, CA

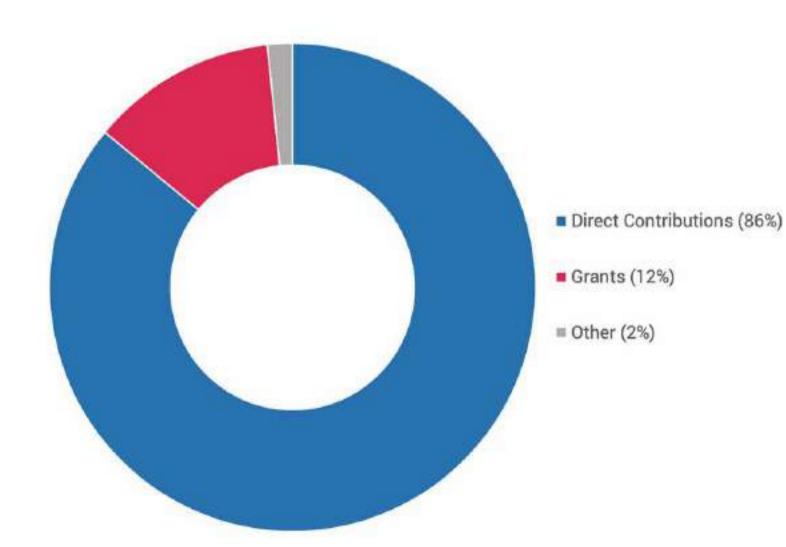
**Treasurer:** RUSSELL ROHLOFF, Engineer, Bethel, VT

Members: KARA ANDRADE, PhD Candidate, American University School of Communication; CHRIS DAVIES, Property Manager, San Francisco, CA; MARK DOERR, Attorney, New York, NY; CLAIRE MELVIN, Attorney, New York, NY; TOM MELVIN, Financial Analyst, New York, NY; VALERIE ROTH, Physician, Chicago, IL



## FINANCIALS

2019 Revenue \$1.55 M



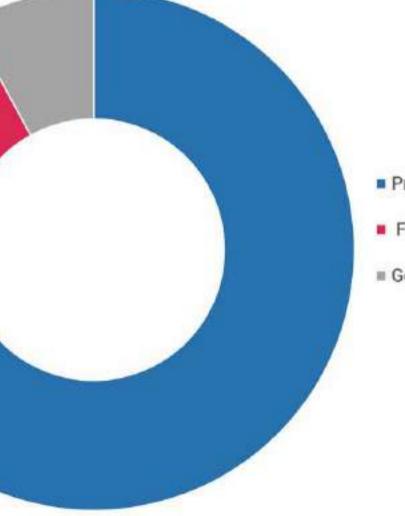
Program Expenses: \$1,049,600

Women's Health (30%)

Nutrition & Child Health (22%)

Implementation Science (18%)

#### 2019 Expenses \$1.28 M



- Program Expenses (82%)
- Fundraising (10%)
- General & Admin (8%)

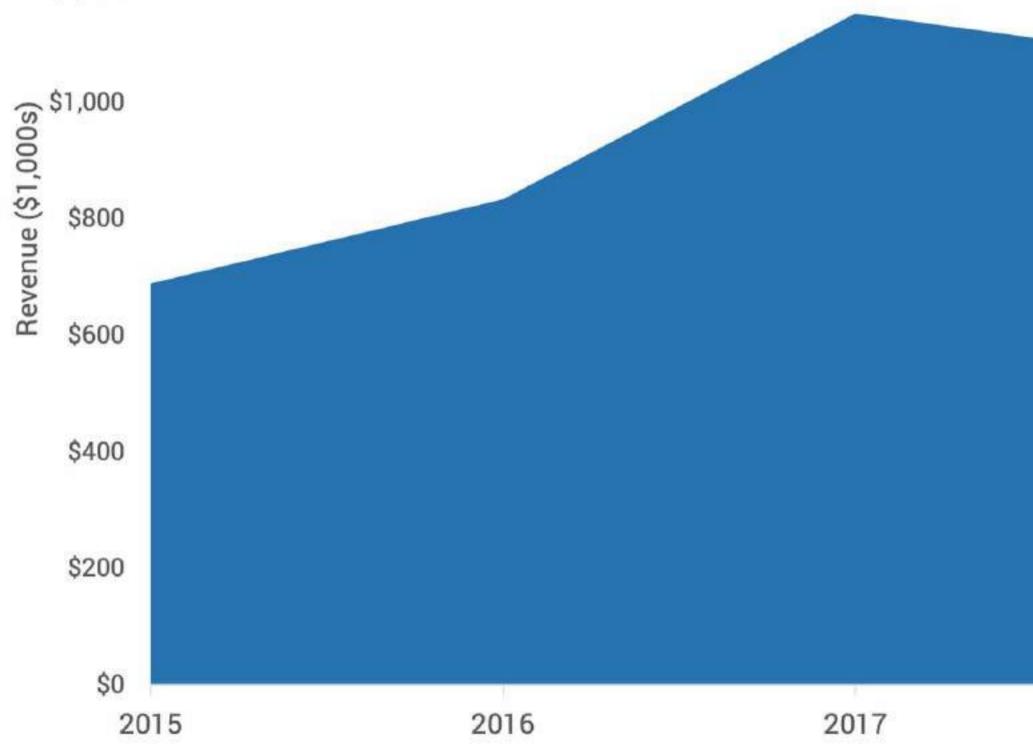
e Primary Care (18%)

Chronic Disease & Complex Care (12%) \$1,600

### FIVE YEARS OF REVENUE GROWTH

\$1,400

\$1,200



#### 2019

2018

# REFLECTIONS

As 2019 comes to a close, we celebrate Maya Health's amazing women staff. Vesting women with power over their lives and bodies has always been at the core of our work. Our stellar staff provide just a few examples of how women help their communities thrive.

Women like Glenda, a registered nurse who brings compassionate care to Maya Health patients in Boca Costa. She refused to accept that she could not pursue an education as a girl and supported herself through a degree in primary education, and then nursing. And Martina, who works with Maya Health on water filtration projects. After surviving a series of devastating sexual attacks as a young woman, she managed with her mother's help to find a way to earn a living and continue her education. And Andrea, who manages our internationally-recognized nutrition program and community gardens. And Merida, who helps women facing critical illnesses brave Guatemala City's intimidating hospitals.

We are so grateful to have these remarkable women on our team!





# HIGHLIGHTS



#### **KIDNEY DISEASE WORKSHOP**

We hosted the first workshop in Guatemala to investigate the growing problem of chronic kidney disease (CKD). Leading national experts shared their research and laid the foundation for future collaborations, including a study to better understand and address the emerging concern of CKD across Guatemala.

#### **REDUCING MATERNAL MORTALITY**

We convened partners for a symposium to advance maternal mortality reduction in rural, indigenous communities. Participants shared obstetric care delivery models developed in Guatemala and explored approaches for improving patient-centered maternity care, including smartphone-based technology.



#### **CENA DE SABORES UNIDOS**

We were the featured honoree at the United Way's annual culinary competition and gala. Funds raised helped support our work fighting chronic malnutrition in dozens of rural communities. Our comprehensive approach combines monitoring, education, gardening, empowerment, and nutritional supports. Cnop K, Martinez B, Austad KE. Resistant dermatomyositis in a rural indigenous Maya woman. BMJ Case Rep. 2019 Feb 21;12(2):e223886. doi: 10.1136/bcr-2017-223886

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