MAYA HEALTH ALLIANCE WUQU' KAWOQ

Annual Report 2014

why we work

We work in the most impoverished places to create solutions to the world's most pressing health care needs.

All over the world, health systems are broken. Even where high quality resources exist, the people most in need are locked out.

Against all odds, we work to put resources in their hands, uniting health and culture.

WEPUSH LIMITS.

WHERE OTHERS SAY NO, WE SAY YES.



WE BELIEVE



You should not have to choose between your culture and your health.



You should be able to talk to your doctor in your own language.



Where you were born should not determine if you live or die.



You should not feel locked out of your own health care system.

5

Everyone should have the highest quality health care.



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letter from our executive director

Dear Friends,

We wrap up another exciting year here in Guatemala, one full of reflection as we are cultivated and developed our programs. We advanced our financial plans and program protocols and our team grew and evolved. Thank you, because none of this would be possible without your support!

We are excited to introduce a new addition to our team, our Medical Director, Dr. Waleska Lopez Canu. Waleska is a Guatemalan physician, and has been incredibly instrumental in running our operations on the ground. She received her MD degree from the Autonomous University of Mexico and completed further clinical training at the University of San Carlos of Guatemala. Waleska has worked extensively in Mexico and Guatemala for Ministry of Health programs to expand service coverage to rural areas.We are excited for the future, as with the leadership of Dr. Waleska, our Chief Medical Officer can focus on new opportunities to expand.



Another big welcome goes to Dr. Romina Rosales. She comes to us from Francisco Marroquin University, where she currently works as an Assistant Professor in Pharmacology and Physiology. She is our main physician serving all of our highland primary care clinics. We are able to see and impact so many more patients with her support!

Finally, a million thanks to David Flood and Nora King, two medical students who came down to spend a year with Wuqu' Kawoq, and helped us begin multiple new programs. Thanks to their hard work, we launched a new pilot nutrition program focusing on recuperative chronic malnutrition for children aged 6-24 months. We are excited to see this continue to expand! We also began a pilot education program for diabetics, and welcomed Carol Teleguario who joined the diabetes team. Our midwifery model and curriculum were greatly improved, and Nora trained midwives on postpartum hemorrhage. We hope to bring this model to other communities.

Our complex care program grew in "complexity:" we can now on a larger variety of cases from advanced cancer to intricate surgeries, from rare genetic disorders to severe diabetes. We are reaching more patients than ever before, and offering more options for care.

We celebrated a few milestone events throughout the year. On October 25, we were part of an International Day of Health celebration. We also ran an innovative and successful conference in Antigua. More than 500 people, from more than 100 organizations, came together to talk about the problems facing our organizations today, and how we can overcome them working together.

With such changes this year, we are beyond excited for the year to come. Thank you for your continued support each and every day: your impact is bigger than you can know.

With gratitude,

Anne Kraemer Diaz Executive Director

board of directors

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Pat O'Brien

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Anne Kraemer Diaz

Executive Director Anthropologist Winston-Salem, NC

Peter Rohloff

Medical Director Physician Boston, MA

where we work

4 Departments

12 Towns

>41 Communities

>20,000 Patients



how we work



HEALTH CARE

We create comprehensive solutions to the world's most pressing healthcare needs. Through persistence and creativity we push the limits of what is possible.

<u>₽</u>



The best solutions are not always the obvious ones. Through constant measurements, evaluation, and creative redesign, we ensure that money is well spent and patients are respected.



LANGUAGE & CULTURE

There is no such thing as one size fits all. By adapting to local cultures and using indigenous languages we create an environment where every voice is heard.



ADVOCACY

Local partners shape the direction and scope of our programs, encouraging diversity and inclusion in community health.



our story

our beginnings our accomplishments our goals

2006

2010

4 people became friends (2 linguists, 1 anthropologist, and 1 physician) while studying Kagchikel.

On January 1st, these four friends founded Wuqu' Kawoq and had their first official WK meeting, and started doing home visits.

2007

Storm Agatha struck Guatemala and we expanded to deliver health care to the areas hit the hardest.

2009 We started a clean water initiative, delivering and installing permanent water filters to communities without access to potable drinking water.

2011 We opened our first referral clinic in Santiago Sacatepéquez, and since then have grown to 11 clinics all over Guatemala

2015

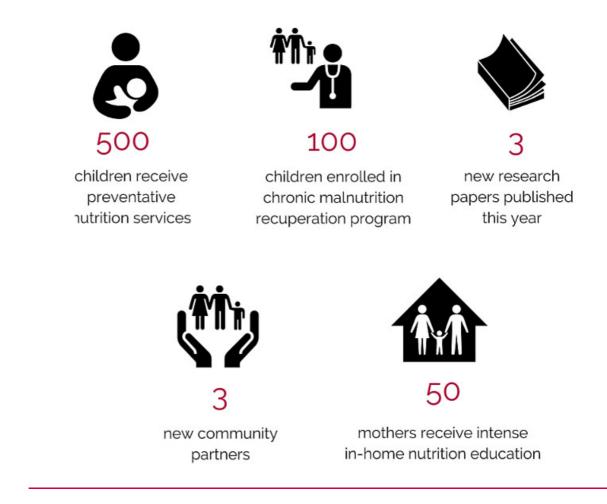
With your help we have grown to 5 major programs in over 41 communities and are serving >20,000 patients

updates from the field

a closer look at the progress made in our programs



We view the production and dissemination of knowledge as essential to the advancement of indigenous health in Guatemala. We maintain a cross-disciplinary, cutting-edge research program that draws from many academic areas including anthropology, implementation science, clinical research, linguistics, and nutrition. We are deeply committed to building local research capacity, so we collaborate with national and international research partners to ensure our research is relevant, visible and useful.



Our nutrition programming rests on the notion that the driving forces of malnutrition are poverty and indigenous marginalization; we invest heavily in culturally and linguistically appropriate education for caregivers, which empowers families and communities to effect generational changes in their approach to child nutrition. Our program also includes universal growth monitoring, micronutrient supplementation, nutrition education, and primary clinical care.









active patients

with controlled diabetes (Hemoglobin A1C<8.0) patients receive Insulin



4%

patients do dialysis from own home in rural areas



65%

ask and receive care in their preferred Maya language



Our approach to chronic diseases is to integrate standard-of-care clinical excellence with culturally and linguistically nuanced approaches to behavior change within rural marginalized Maya communities.

In our clinical programs, we have developed expertise in the management of adult and pediatric chronic diseases such as diabetes, hypertension, heart disease, cancer, kidney disease, epilepsy, rheumatoid arthritis, and other conditions.





children receive preventative nutrition services



100 children enrolled in chronic malnutrition recuperation program



new research papers published this year





mothers receive intense in-home nutrition education

In addition to high-quality cervical cancer screening and prenatal care, we also offer management of sexually transmitted infections, family planning services, and treatment of all cancers that commonly affect women. We know that women have diverse medical needs, so our program also includes providing robust.

We have developed specific expertise in the screening, diagnosis, referral, and treatment of cervical cancer, which is a leading cause of death in Guatemala.

Our obstetrics initiatives focus on reduction of maternal mortality through highquality prenatal care, midwife education, and using technology to make childbirth safer.





midwives trained in treatment of postpartum hemorrhage



\$20,000

grant from One Day's Wages to fund new project in 2015-2016



60

midwives provided with training sessions in three districts

midwives





We have pioneered a comprehensive referral system to bridge the urban-rural divide in Guatemala, allowing us to deliver sophisticated medical care to patients in very remote rural communities.

We have successfully treated many complex conditions, including congenital heart disease, inborn errors of metabolism, end-stage kidney disease, complex surgical cases, cancer, and more.

Our team of case managers all speak Mayan languages and do whatever it takes to overcome the entrenched structural and geographic barriers to health care for indigenous patients.

spotlights

learn more about the volunteers and staff members who make everything possible

volunteer spotlight: david flood

Before collaborating with Wuqu' Kawoq, I'd been working on various health projects in Latin America for about 5 years. However, I hadn't made a long-term commitment.

More than anything, that's what I achieved through my volunteer experience - the forging of bonds with staff, patients, and community members that has compelled me to work with Wuqu' Kawoq beyond my original yearlong commitment.

> The biggest surprise for me, as a person training to be a physician, had to do with what was similar and what was different about medical care in Guatemala and the U.S. What was the same was that in Guatemala, as in the U.S., you can get just about anything you want for your patient – medicines, vaccines, lab tests, complex surgeries — if you know where to look. What was different was how "particular" medical care here is, in the sense that a good provider needs to have a deep understanding of the country's culture and medical system.

volunteer spotlight: nora king

I was attracted to volunteering with Wuqu' Kawoq because of its commitment to providing quality health care to marginalized communities. My "big-picture" goal was to learn how ideas about social justice in health care can be put to practice—something that I learned more about every day I was in Guatemala.

My colleagues' dedication to our patients' health and wellness—their long hours, compassion and enthusiasm —have shown me what it takes to practice what we preach.

The team has invited me to stay involved over the next few years developing an exciting new research project expanding my work with midwives. Eventually, I would like to work in Guatemala as a teacher and physician, serving indigenous communities and advocating for midwives.



staff spotlight: sandy mux

Sandy is a nurse at Wuqu' Kawoq, who has been working with the diabetes and women's health programs for two years. She works in many locations in Guatemala, including Paya, Tecpán, Paquip, Chichimuch, Santiago Sacatepéquez, and her hometown of Comalapa.

During a typical week of her job, she works in the diabetes clinic in Santiago Sacatepéquez where she meets with patients and examines their blood sugar and blood pressure, and often educates them about important ways to control their condition, such as daily exercise and a medication regimen.

In places such as Paya and Chichimuch, Sandy meets with women to assist them with family planning and prenatal care, which are two areas in which education is severely lacking in rural areas. With appropriate education, women are better able to control their pregnancies and provide proper care and nutrition for their babies

In places such as Paquip, she spends her time meeting with patients in either the clinic or in their homes, where she is able to sit down and talk with her patients one on one for a greater length of time. This time is devoted to understanding the patient's progress, answering concerns, and building a solid relationship of trust and respect.

In most of her visits, Sandy speaks Kaqchikel with her patients. By speaking in their preferred tongue, patients are more comfortable voicing their medical concerns. This allows health workers like Sandy to deliver the best care possible to ensure a better prognosis and future for their patients.





staff spotlight: waleska lopez

"Don't forget you are Guatemalan. We are from a country that is suffering, but we are Guatemalans."

Dr. Waleska Lopez works as our medical director, serving as a physician and program manager on the ground in Guatemala. She sees patients nearly every day of the week and manages a team of health workers who run health programs in Chichimuch, Paya, Paquip, Tecpán, and Solola. she is one of only 35 doctors in the community of Tecpán, which houses 83,000 residents.

Her role with Maya Health Alliance is an invaluable one. She works as one of the only 35 doctors in the community of Tecpán, which houses 83,000 residents.

Dr. Waleska's compassion and motivation to work towards health equality in rural areas stems from the time she was 2 years old. The civil war in Guatemala had broken out, individuals working for indigenous rights were being threatened, and indigenous people were seen as little more than slaves to the powerful elite. As she and her family fled to Mexico.





During the next 22 years of her life, Waleska worked low-income jobs to help support her family. During high-school and junior high she studied hard - her dream has always been to become a doctor- but also traveled up to 16 every weekend to sell woven textiles in northern cities.. At the age of 18, she became one of 80 students to be accepted to medical school In Mexico City. (More than 3,000 applied.)

Her mother continually reminded her growing up, "Don't forget you are Guatemalan. We are from a country that is suffering, but we are Guatemalans." After completing school and obtaining her medical license, Waleska returned to Guatemala. dedicated to bringing high quality health care to the indigenous population - and that is exactly what she has done.

Wuqu' Kawoq - Maya Health Alliance

Beller.

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