While we could not possibly have predicted how the past year would unfold, Global Health Action's (GHA) program model allowed us to continue providing critical services around the globe. Our customized trainings, webinars, and coaching services fully transitioned to a video conferencing format and incorporated a host of other online support tools, based on the specific needs and access of each program participant.

Additionally, GHA’s network of local health and development professionals around the world continued to provide on-the-ground training, technical support, and direct services for vulnerable populations.

In the face of the global pandemic and resulting economic challenges, GHA’s program alumni and current program participants turned to GHA for up-to-date information about COVID-19 as well as continued training to design and implement projects to address the specific health needs of their communities. With your support, we met the challenge!

Thank you for being a part of the Global Health Action movement. Together, we are transforming the lives of women, children, and adolescents and building stronger, more resilient communities.

Wendy Jolley-Kabi
President & CEO

ABOUT GHA GHA engages with communities around the world to drive transformational change for the health and well-being of all people by focusing on women, children, and adolescents. Through partnerships with government agencies, faith communities, and civil society organizations, GHA’s programs strengthen community-centered health systems and build community capacity for addressing barriers to health. Since 1972, GHA’s work has impacted over 69 million people in 97 countries.
HEALTHY MOTHERS, HEALTHY BABIES

In Haiti, 70% of births occur at home due to limited access to health facilities. In rural communities this increases to 90% where many homes are three or more hours away from the nearest hospital. To address this gap, GHA provided ongoing monthly trainings, supervision, birthing kit supplies, and support to 56 Traditional Birth Attendants (TBAs) in the rural Petit-Goâve commune of Haiti. These frontline health workers improved basic health services for expectant mothers and made clinical referrals for women at risk of complications and women experiencing difficult deliveries.

In FY21, this project supported:

- 630 Live Births at Home
- 253 Health facility referrals
- 1,914 Post Natal Visits

TRANSFORMATION FOR HEALTH

GHA provided over 1,000 hours of training and coaching in leadership, management, governance, and program development to 24 East African organizations and faith-based health facilities, leading to increased direct services to vulnerable populations. Additionally, GHA continued to strengthen the GHA East Africa Network for collaborative responses to immediate and emergent local challenges.

Direct outcomes included distributing 25,000+ Personal Protective Equipment items, providing food to 1,500+ households for 6 months, expanding a health center’s services to three additional counties, and opening a new maternity ward.

UNIVERSAL HEALTH COVERAGE

As a member of the Universal Health Coverage (UHC) Civil Society Engagement Mechanism, GHA continued to advocate for UHC in Kenya and Uganda by supporting local organizations in developing advocacy plans. Through the GHA alumni network, GHA connected civil society organizations to national governmental bodies to ensure women help inform the policies that most affect them.
After an almost 10 year process of community-based research, advocacy, and supply chain study, GHA celebrates the addition of 7.1% chlorhexidine digluconate (CHX), a life-saving medicine to prevent newborn umbilical cord sepsis, to the National List of Essential Medicines for Haiti.

**Why This Matters**

The neonatal, infant, child, and maternal mortality rates in Haiti are the highest in the Western Hemisphere. According to the WHO, more than 80% of all global neonatal deaths are caused by preterm birth complications, newborn infections, and birth asphyxia. Ensuring optimal umbilical cord care during the first week of life is a crucial strategy to prevent life-threatening sepsis and avert preventable neonatal deaths.

**Haiti and CHX**

As a result of GHA’s USAID-funded Healthy Mothers|Healthy Babies work in Petit-Goâve, GHA partnered with the University of Illinois at Chicago’s College of Nursing (UIC) to conduct a community-based research study in 2012 regarding the use and uptake of CHX for cord care. Supported by Little by Little, these studies were conducted through GHA’s network of CHWs, traditional birth attendants, nurses, and physicians and in relationship with the local Ministry of Health (MSPP) office and the national Methodist Church of Haiti’s (EMH) Health Committee.

In 2017, USAID cut funding for CHX introduction and GHA stepped in on a shoestring budget to get the job done. Through GHA’s advocacy, partnerships locally and globally, and submission in 2017 of the formal request for the addition of CHX, the drug was added to the National List of Essential Medicines, published in 2021. GlaxoSmithKline (GSK) also released their formula for CHX to low-and middle-income country manufacturers for local development.

GHA is committed to continuing advocacy for the acceptance and implementation of CHX in the Haiti National Operational Neonatal Plan and local manufacturing of this medicine. Our goal is to ensure CHX is affordable and accessible to the families who advocated for its use in their communities. This victory provides the path forward!

A special thank you to UIC, Little by Little, & GSK.
**Finance Statement**

**Total Income: $678,518**  
**Total Expenses: $372,451**

- **Investment Income**: 13.4%
- **Contributions/Grants**: 86.6%
- **Management | General**: 20.5%
- **Fundraising**: 2.2%
- **Program Services**: 77.2%

**Net Assets: $837,264**
- Net Assets, beginning of year: $2,808,355
- Net Assets, end of year: $3,645,619
- Change in Net Assets: $837,264

**Thank You to All of Our Donors!**

A special thank you to our **Albert Schweitzer Society** members who contributed a minimum of $1,000 in undesignated support between July 1, 2020 and June 30, 2021:

- The Angie and William Hoyt Fund of the Community Foundation for Greater Atlanta
- Richard Barber
- Barbara E. Campbell
- Robin and Wheatley Davis
- Lea Ann Hudson
- Laurie Jeffay
- Betty J. Letzig
- Stan Moor
- Julie D. Staggs, EdD
- David and Melody Wilder Wilson
- Bill and Judy Vogel
- David and Nancy Brooks Jones/The D.W. & Ruth Brooks Fund
- The Goddard School Decatur
- Northside United Methodist Church

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