# WHO'S THERE?

K / MOH

IntraHealth & Because Health Workers Save Lives.





# Who do you count on for health care?

Probably a nurse or a doctor...or maybe a trained community health worker.



But what if no one is there?





# Or live in one of these 57 countries with a health worker crisis? Or in a rural area where there is no trained health worker for hundreds of miles around?

- Afghanistan
- Angola
- Bangladesh
- Benin
- Bhutan
- Burkina Faso
- Burundi
- Cambodia
- Cameroon
- Central African
   Republic
- Chad

- Comoros
- Congo
- Cote d'Ivoire
- DR Congo
- Djibouti
- El Salvador
- Equatorial Guinea
- Eritrea
- Ethiopia
- Gambia
- Ghana
- Guinea

- Guinea-Bissau
- Haiti
- Honduras
- India
- Indonesia
- Iraq
- Kenya
- Lao People's
- Democratic Republic
- Lesotho
- Liberia
- Madagascar

- Malawi
- Mali
- Mauritania
- Morocco
- Mozambique
- Myanmar
- Nepal
- Nicaragua
- Niger
- Nigeria
- Pakistan
- Papua New Guinea

- Peru
- Rwanda
- Senegal
- Sierra Leone
- Somalia
- Togo
- Uganda
- Tanzania
- Yemen
- Zambia
- Zimbabwe



There's a big gap between who gets health care —

and who doesn't.

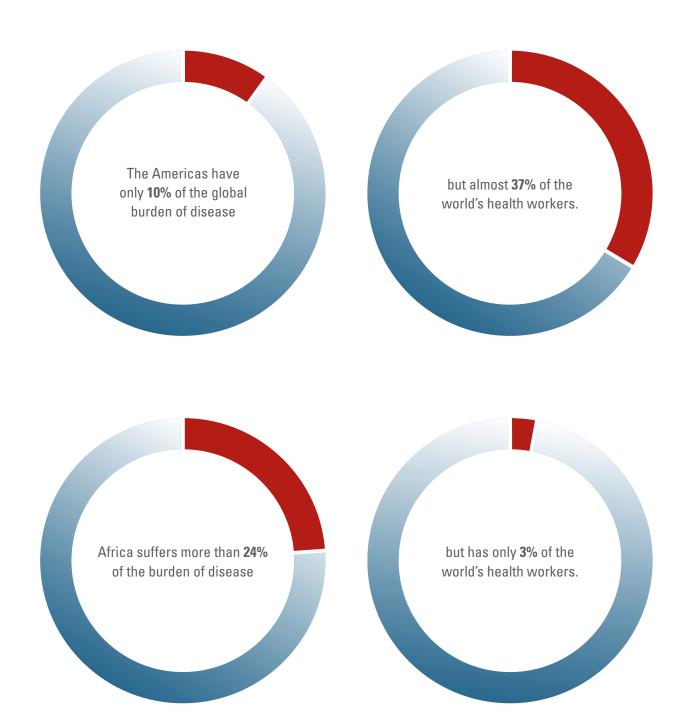


# OUT OF EVERY SEVEN

children born in low-income countries will not survive to age five, in large part because of lack of access to essential health care.

# **Is a health worker there?**The answer depends on where you are.

The world needs more than 4 million new health workers—1 million in Africa alone. The World Health Organization has identified 57 countries with a severe crisis: fewer than 2.3 doctors, nurses, or midwives per 1000 people.



## What happens when no one is there?

Couples often don't get the services they need to plan their families. An estimated 200 million couples want—but have no access to—family planning services.

**Mothers give birth without skilled care.** Every minute, at least one woman dies from complications related to pregnancy or childbirth—that means 529,000 women a year. In low-income countries, only 43% of births are performed by a skilled attendant, compared to 95% in upper-income countries.

**Children are not immunized.** An estimated 24 million children around the world lack access to lifesaving vaccines.

**People living with HIV/AIDS lack adequate treatment and more people become infected.** Only one-third of people in need have access to antiretroviral therapy, access to prevention is still insufficient and most people living with HIV are unaware of their status.

People get malaria, and do not have access to timely and appropriate treatment. Malaria kills more than 1 million people a year, including one child every 30 seconds.

Communities lack information that would keep them healthier. Each year, 1.5 million people, mostly young children, die from dehydration due to diarrhea-related disease. Eighty-eight percent of diarrhea cases worldwide are linked to insufficient hygiene, inadequate sanitation, or unsafe water.



# How do we make sure a health worker is there? Health workers need champions...

- to ensure that they are well-trained.
- to offer incentives to attract them to rural and other underserved areas.
- to provide the right equipment, supplies, and facilities.
- to get them access to a mobile phone, a computer, or other technology.
- to care that they are motivated, supported, and fairly compensated.

So that they can excel in their work.





## What happens when a health worker is there?

- People know their HIV status, and people living with HIV/AIDS get counseling and help.
- Children are immunized.
- Couples get family planning information and services.
- People learn how to avoid malaria—and get treatment when they need it.
- Everyone knows more about staying healthy, about nutrition, hygiene, and sanitation.
- Babies and children have a greater chance of surviving, and fewer women die during childbirth.

# IN 2010 INTRAHEALTH

worked with ministries of health and other partners to help **10,114** health facilities receive regular supervision and support.

# WITH SUPPORT FROM INTRAHEALTH

Ghana, India, Lesotho, Namibia, Pakistan, Swaziland, Tanzania, and Uganda deployed human resources information systems at the national or subnational level. Ethiopia, Kenya, Lesotho, Swaziland, and Uganda realigned or redistributed their health workforce to better meet priority objectives.

#### THROUGH HEALTH SERVICES SUPPORTED BY INTRAHEALTH IN 2010

118,831 individuals initiated contraceptive use

**354,928** estimated years of family planning protection achieved for couples receiving contraceptive methods

**151,385** births attended by a skilled birth attendant

547,625 individuals counseled, tested, and received their HIV test results

**22,277** HIV-positive individuals received antiretroviral treatment

# SUPPORT FOR HEALTH WORKERS MEANS

that countries invest in rural schooling and better-managed health schools.

a commitment to gender equality, and to protection of the rights of all health workers.

making investments in information technology so records are kept and progress is recorded.

And then we can recruit new health workers to close the worldwide gap.

We can support them to have the needed skills and knowledge to help even more people.

And, if someone asks, who's there?

**WE CAN FINALLY SAY...** 



A health worker is there.

In 2010, IntraHealth supported training for

# 22,245

professional and community health workers.



<b>*************************************</b>
"IntraHealth is committed to improving the health and well-being of people living in the countries and communities where we work. We focus on health workers because we believe that an equitably distributed, skilled, motivated, and productive health workforce is essential to improving global health outcomes."
Pape A. Gaye, President and CEO ·······

#### **Our Vision**

We believe in a world where all people have the best possible opportunity for health and well-being. We aspire to achieve this vision by being a global champion for health workers.

#### **Our Mission**

IntraHealth International empowers health workers to better serve communities in need around the world. We foster local solutions to health care challenges by improving health worker performance, strengthening health systems, harnessing technology, and leveraging partnerships.

#### Because health workers save lives.

## Where We Worked in 2010

**Antigua & Barbuda** 

Armenia

**Barbados** 

Belize

**Botswana** 

Burundi

**Costa Rica** 

**Côte d'Ivoire** 

**DR Congo** 

**El Salvador** 

**Ethiopia** 

Fiji

**Ghana** 

Guatemala

Guinea

India

Kenya

Lesotho

Madagascar

Malawi

Mali

Mozambique

Namibia

**Panama** 

**Pakistan** 

**Rwanda** 

St. Kitts & Nevis

St. Vincent & the Grenadines

Senegal

**South Africa** 

**Southern Sudan** 

**Swaziland** 

**Tanzania** 

**Thailand** 

Togo

**Uganda** 

West Bank/Gaza

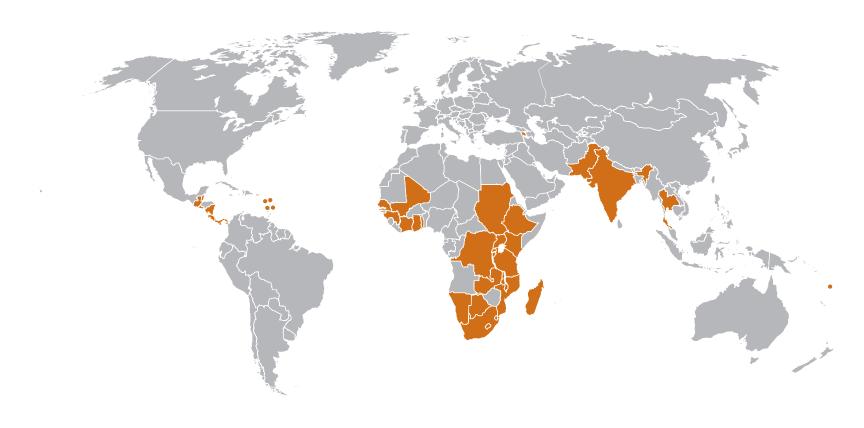
Zambia

Global: CapacityPlus, Extending Service

Delivery (ESD) Project

.....

IntraHealth International has worked in more than 90 countries around the world.



# **Financial Report**

Statement of Activities and Change in Net Assets for the Year Ended June 30, 2010

	2010			2009
	<u>Unrestricted</u>	Temporarily	<u>Total</u>	<u>Total</u>
		<u>Restricted</u>		
Revenue				
Contributions and Grants				
U.S. Government grants	\$74,015,571	\$-	\$74,015,571	\$70,028,524
Non-U.S. Government grants		3,993,495	3,993,495	2,950,489
Contributions	94,609		94,609	27,495
Contributed services and materials	5,108,883		5,108,883	13,246,266
Interest Income	1,369		1,369	1,013
Net assets released from donor restrictions	<u>1,935,319</u>	(1.935,319)		
Total Revenue	<u>81,155,751</u>	<u>2,058,176</u>	83,213,927	86,253,787
Expenses				
Program Services	<u>67,527,129</u>		<u>67,527,179</u>	71,587,247
Supporting Services:				
General and Administrative	12,506,300		12,506,300	11,650,491
Fundraising	83,532		83,532	119,871
Bid and Proposal	<u>1,017,540</u>		<u>1,017,540</u>	<u>1,216,973</u>
Total Supporting Services	<u>13,607,372</u>		<u>13,607,372</u>	12,987,335
Total Expenses	81,134,551		81,134,551	<u>84,574,582</u>
Change in net assets	21,200	2,058,176	2,079,376	1,679,205
Net assets at beginning of year	<u>1,263,396</u>	2,624,969	3,888,365	<u>2,209,160</u>
Net assets at end of year	<u>\$ 1,284,596</u>	<u>\$4,683,145</u>	<u>\$5,967,741</u>	<u>\$3,888,365</u>

## **Our Donors and Supporters**

US Agency for International Development (USAID)

US Centers for Disease Control and Prevention (CDC)

Bill & Melinda Gates Foundation

Global Fund to Fight AIDS, Tuberculosis and Malaria

David and Lucile Packard Foundation

William and Flora Hewlett Foundation

Pfizer, Inc.

**Tides Foundation** 

Office of the UN High Commissioner for Refugees (UNHCR)

World Health Organization (WHO)

Individual contributors

**EIN:** 5500825466 | **NC SECC:** 3722 | **NC CFC:** 12285



#### **IntraHealth Board of Directors**

#### **Barry Eveland (chair)**

IBM Senior State Executive for North Carolina, retired

#### **Peggy Bentley, PhD**

Professor of Nutrition and Associate Dean for Global Health, University of North Carolina (UNC) Gillings School of Global Public Health

#### **Walter Davenport, CPA**

Cherry, Bekaert & Holland, retired

#### **Magatte Diop, MBA**

President, Peacock Investments

#### Pape Amadou Gaye, MBA

President and CEO, IntraHealth International

#### **Duff Gillespie, PhD**

Senior Scholar and Professor, Bill & Melinda Gates Institute for Population and Reproductive Health, Johns Hopkins Bloomberg School of Public Health

#### Anu Kumar, PhD, MPH

Executive Vice President, Ipas

#### **Cheri Lovell, MDiv**

Owner, Lovell Consulting Services

#### **Josh Nesbit**

Executive Director and Co-Founder, Medic Mobile

#### Khama Rogo, MD, PhD

Lead Health Sector Specialist, the World Bank

#### Beth Traynham, MS, CPA

Partner, Hughes, Pittman & Gupton, L.L.P.

#### **Louise Winstanly, LLB, MS**

Adjunct Assistant Professor, UNC Gillings School of Global Public Health

#### **IntraHealth Executive Team**

#### Pape Amadou Gaye, MBA

President and CEO

#### **Maureen Corbett, MIA**

Vice President of Programs

#### Rebecca Kohler, MPH

Vice President of Strategic Development and Communications

#### **Maurice Middleberg**

Vice President of Global Policy and Director, CapacityPlus

#### **Mary C. Scott**

Vice President of Operations

## **Global Health Advisory Committee**

Brenda Brown Schoonover (chair)

Marcia Angle

Preston Brown

Michael Cotter

Fred Hutchison

Bob Ingram

Rich Katz

Linda Kornberg

David Lindquist

Cheri Lovell (member, IntraHealth

Board of Directors)

Bruce Lowery

Julie Lowery

Patricia McCarthy

Joan Siefert Rose

Bill Shore

Bryan Skelton

Dhiren Thakker

## **Join our Community**

There are many ways to get involved. Global health is a global priority and your voice, your knowledge, your partnership can make a real difference in empowering health workers.

Visit www.intrahealth.org to find out more.

Data sources: World Health Organization (WHO), GAVI Alliance, Global Health Council, United Nations Population Fund (UNFPA).

**DONATION ENVELOPE** 



**Chapel Hill, NC |** 6340 Quadrangle Drive, Suite 200 | Chapel Hill, NC 27517 | **Tel**: 919-313-9100 **Washington, DC |** 1776 | St. NW, Suite 650 | Washington, DC 20006 | **Tel**: 202-407-9432