10 Years of Walking the Path Together

Dear Friends,

I have been privileged to spend about half of my time in Cap-Haitien in this past year. People from home frequently ask me and other volunteers what we do there. The answer defies an easy sound bite, because, as you can see from this report, the activities and tasks are so varied. I would answer by simply saying that we do whatever we can to help our Haitian neighbors build a functional health care system for their people, and we try to walk together with them on their path to that end. For me, konbit means to walk and work side-by-side toward a shared goal. It means facing challenges together and sharing failures as well as successes. It means being in it together. There are no shortcuts; it is a long journey predicated on a strong relationship.

It has now been 10 years since the first group of volunteers from Maine visited colleagues from the Justinian University Hospital in Cap-Haitien and, after a week of introductions and discussions, agreed to embark on just such a journey together, even though no one among us knew where it would lead at the time or the exact path forward. Speaking as one of those earliest visitors, I can attest to the fact that we found the challenges faced by the Haitian people and our Haitian health colleagues overwhelming, seemingly intractable, and stubbornly resistant to simple answers. Our most modest assumptions about existing resources and functional systems were overly optimistic. Haiti, in fact, has an oft-repeated reputation in the global development world as a place where things simply can’t be accomplished.

Our journey over the last 10 years has had many unanticipated twists and turns and highs and lows. However, we have learned that positive change can happen when it is not imposed on people, but rather when solutions are found together. It happens when our Haitian colleagues - who, after all, are responsible for the provision of health care in Haiti - identify their priorities, what they can do to accomplish them, and what kind of support is needed. Sometimes things can be accomplished simply by doing business differently with some technical support. Other times resources, such as a sterilizer or a new well are needed, in which case we try to procure them together as partners.

This konbit relationship of working together has deepened and evolved over the years and has enabled us to help in a very significant way through the overwhelming and tragic challenges of 2010-11, especially the earthquake and the cholera epidemic. Our efforts, as humble and insufficient to the great task at hand as they sometimes are, are always about supporting the people and capabilities of the public system of care and their partners.

Through your generous involvement and support, Konbit Sante has grown and evolved in its ability to have a real impact. Once an entirely U.S.-based volunteer organization, we now have a very gifted and passionate staff in Haiti, who is supported by both U.S. staff and volunteers.

This annual report focuses on the work and progress made this past fiscal year. You will see that our experience working to address the cholera epidemic in Cap-Haitien has drawn us into the community in a much greater way than any other time in the past while still keeping our commitments to the major health care and training facilities in the area. So many of you have made this work possible through generous gifts of money, time, knowledge, labor, and inspiration. By doing so, each of us has participated in the konbit in the way that we are each able, and for that we are deeply grateful.

We hope that this report will give you a glimpse of the impact that your investment in the people and health care system of Haiti has made, and that you will join together with us and our Haitian partners as we embark on the next ten years of walking this path together.

Sincerely,

Nathan M. Nickerson, RN, DrPH
Executive Director

Yon bon zanmi pi bon pase frè.

A good friend is better than a brother.

Konbit Sante Executive Director, Nathan Nickerson, RN,DrPH (right) records a water sample during the cholera epidemic.

Konbit Sante electrical consultant Josué Limprévil works on a new hand pump at Justinian Hospital.
Treating Our Patients with Understanding, Dignity and Care

Bonjour,

Kонbit Sante began its work 10 years ago helping to improve services at the Justinian Hospital. Although this work continues today and remains important, I am pleased by how our work has shifted to include reaching out into the community, to reach people who may not come through the doors at Justinian or Fort St. Michel Health Center.

The mobile clinic is one of the best ways to reach the poorest people. The people in the community often don’t have any rights or any voice. They die only because of little or no access to health care. When our staff and volunteers go into the community, we step over barriers to reach people. For example, Haitians usually wear their best clothes to go to the hospital; they might refuse to go only because they don’t have anything to wear and are ashamed. One time, a pregnant woman I met at one mobile clinic with pre-eclampsia said she didn’t go to the hospital because she didn’t have sandals.

At our mobile clinic, the patients meet the same doctors and nurses who are working at the hospital. These doctors and nurses make the patients comfortable by showing them they are receiving good care. Above all, they show them that the doctors and nurses from the hospital care about them enough to visit them in their community.

Another important reason to go into the community is that the staff at the hospital is not well aware about the life of a patient. When they treat a patient at the mobile clinic, they see his or her reality – the poverty and the dirty environment that the patients live in. This experience increases their compassion for how they welcome and treat them at the hospital. One doctor recently told me that he just didn’t know how hard it was for a patient.

At the mobile clinic we step over another barrier – cost. There the care is completely free – consultation, basic lab testing, drugs and education. At the hospitals, care is expensive for the patients even with financial support from the government and charitable organizations. How could you ask someone to pay 25 Gourde (about 60 cents) for consultation when this person doesn’t have 5 Gourde (12 cents) to pay the tap-tap to go to the health center? Or when this person doesn’t have anything to eat or to wear?

Often their only hope is praying to God when they get sick. Once this person is treated at the mobile clinic, he’s open to listen and practice the educational training the nurse or doctor demonstrated. Once he learns, he can become a leader to train his family members and neighbors.

It is not possible for me to fully describe for you the people we treat, but I hope this gives you even some small insight into their lives. When you read in the annual report about our outreach in the community, including the mobile clinic, I hope you can envision how we seek to treat our patients with understanding, dignity and care as we try to improve their health system.

Youseline Télémaque, MD
In-Country Program Manager
Cap-Haitien, Haiti
Highlights of 2011

Konbit Sante’s mission is to support and strengthen the health system in Cap-Haitien. A functional health system includes adequate and well-trained staff, essential supplies and equipment, quality curative and preventive services, adequate and functional infrastructure, effective management and leadership, and the capacity to address public health crises and natural disasters. Ideally, a health system is made up of all the interconnected component parts functioning together effectively to promote, restore, and maintain the health of a community. Indeed, these areas are the focus for our konbit, and in these highlights we share with you some of the areas where there has been progress during the past year.

Addressing a Public Health Crisis
Nearly 10 months after the earthquake that killed or displaced hundreds of thousands of people, a cholera epidemic swept the country bringing death and illness to thousands more. Our established relationships, relatively small size, and dexterity allowed us to respond to the epidemic quickly and effectively. We partnered with the Haitian Ministry of Health, Haiti Hospital Appeal, and Médecins Sans Frontières (Doctors without Borders) to build, staff, and supervise a 200-bed cholera treatment center on the outskirts of Cap-Haitien. Shortly thereafter we collaborated with these partners, and Oxfam Great Britain and the International Organization of Migration (IOM), to establish 59 cholera early treatment and prevention posts in neighborhoods all over Cap-Haitien. These posts provided early and widespread access to simple water disinfection options, clean water receptacles, soap, instruction, and systems for immediate transport to treatment centers for the gravely ill. The impact was dramatic. These actions, in consort with many partners, helped slow the progression of the deadly disease and lower the mortality rate to below 2% from more than 13% during the earliest days of the outbreak.

Developing Human Resources
Konbit Sante now supports the salaries of 33 strategically placed Haitian professionals, most serving in key positions within the government health system (see page 7 for a complete listing). Eighteen U.S. health care professionals made 26 trips to Cap-Haitien during the year at their own expense, providing trainings on subjects ranging from post-partum family planning counseling to treatment protocols for diabetic patients to proper use of EKGs for pediatric patients. Konbit Sante supported a one-week American Pediatric Association clinical update training for pediatrician Dr. Rony Saint Fleur in Atlanta this year, and he has been sharing his insights with the residents in training in pediatrics at Justinian University Hospital.

To strengthen the capacity of community-based staff, we provided continuing education and refresher courses, developed new community education tools, developed and published a referral guide for human services in the Cap-Haitien area, and supplied essential materials to all agents de santé (community health workers) in the area, with support from Development Alternatives International (DAI) and the United States Agency for International Development (USAID) Office of Transitional Initiatives. With funding from the United Nations Development Programme (UNDP), we also sponsored a three-month certification course for 25 new agents de santé, most of whom had jobs awaiting them upon completion.

Expanding Health Care Services
This year, Konbit Sante expanded support for several health care services, both facility- and community-based. In collaboration with the Haitian diabetes organization Fondation Haïtienne de Diabète et de Maladies Cardiovasculaires (FHADIMAC), and Maine Medical Center, and with support from the International Diabetes Federation, we have improved...
Program Updates

diabetes care for 150 patients at the Justinian Hospital. Work continues to introduce family planning options to women immediately after birth, and we are now able to offer greater access to long-term contraception options at Fort St. Michel Health Center with support from the Westwind Foundation. This year we also focused on strengthening community-based services, initiating weekly mobile medical clinics to deliver primary care to pregnant women and children in the poorest neighborhoods in Cap-Haitien. Our work with traditional birth attendants continues with the introduction of a pilot project to set up a system of designated drivers who transport women to the hospital in case of obstetrical emergency. Both of these programs are done in collaboration with Haiti Hospital Appeal and with funding support from Direct Relief International. Also in the community, we continued support for the psychosocial and primary care outreach of Action Sanitaire, a Haitian volunteer health care group.

Improving Infrastructure
Konbit Sante’s 2011 infrastructure work focused on physical plant projects designed to respond to the health emergencies that struck Haiti in 2010 and 2011. Six volunteer infrastructure experts traveled from Maine to assist with many of the projects. With cholera spreading rapidly in the community, we and our partners at Justinian University Hospital redoubled our effort to improve infection control in the hospital. We constructed a third well at the hospital with support from the United Nations Develop Programme; built new showers and toilets for patients and their caregivers, and renovated the hospital laundry area with support from the World Health Organization; completed construction of a solid waste management building at Justinian Hospital with support from the United Nations Stabilization Mission in Haiti (MINUSTAH); and installed a large sterilizer in the operating suite at the hospital with funds raised after the earthquake. We also collaborated with Haiti Hospital Appeal to complete the construction of a 20-bed rehabilitation facility at the Baptist Convention Hospital. This beautiful facility, initiated in response to the needs of earthquake victims and funded by MINUSTAH, Team Canada Healing Hands, and the Swiss Paraplegic Foundation, is the only facility of its kind in Northern Haiti, and will continue to serve victims of injury and trauma into the future.

Coordinating Supplies and Equipment
During 2011, we shipped two containers from Maine and coordinated the shipment of many others. To read more about our work to strengthen the medical supply chain in Cap-Haitien, please read the program update on page 6.

We hope you can see from this brief overview that 2011 has been a productive year. Looking forward to 2012, some new initiatives pending funding include creating a teleconferencing capability at Justinian Hospital, conducting more mobile clinics, and renovating and expanding the facility at Fort St. Michel Health Center which will dramatically improve the conditions for the community-oriented programs in TB, family planning, vaccinations, women’s health and pediatrics. Regardless of what new projects we undertake in a given year, we continue to support the basic building blocks for a stronger health system in Cap-Haitien. And we could not do that work without the help of all our partners, including you, our donors.
Supply Chain

An Effective Procurement System – It’s Not Just About Sending Supplies

Over the years, Haitian caregivers have repeatedly told us that they lack adequate and reliable access to essential medicines and supplies needed to provide high quality care. The scarcity includes everything from the most basic sanitation supplies (chlorine, mops), to medicines, to office furniture, to appropriate medical equipment, to the consumable supplies needed for medical equipment to be useful (x-ray film and developer), to rudimentary supplies (gauze, tape, IV needles), and to linens and drapes. This constant lack of medicines and supplies is one of the most limiting and demoralizing issues health workers in Haiti face.

Many Haitian health facilities largely rely on donations of materials that may or may not meet their most critical needs. It is what we call a push system, in which donors decide what might be useful and the recipients accept what is sent. Although well intentioned, the supplies often do not match the critical needs and take up valuable storage space. In the worst-case scenario, goods are totally inappropriate to the setting and contribute more to recipients’ solid waste management problem than to any improvement in care.

Konbit Sante’s supply chain initiative has taken incremental but concrete steps toward developing a pull system in which essential materials and supplies are identified, procured, shipped, and well managed upon delivery.

Konbit Sante employs three staff members in Haiti who focus on working with the Justinian Hospital and the Ministry of Health. Their job is to establish an inventory system where none existed, to develop the logistics and skills to move materials into the country through customs, to equip a storage depot, and to build strong relationships with donors. The supply chain has many links; without a doubt the strongest link is the Haitian staff at Konbit Sante who face enormous challenges on a daily basis to deliver access to medicines and equipment to patients most in need.

Improvements in Ordering

During this past year, Konbit Sante coordinated more than two dozen large shipments of medicines, medical supplies and equipment. Our warehouse in Portland, Maine, donated generously by J. B. Brown & Sons, was reorganized with assistance from a wide network of local volunteers. Each box of supplies sent was sorted, counted and labeled. Before sending supplies, staff in Maine sent a catalogue of available items to our staff in Haiti who requested only the items they knew would be useful. Additionally, when Administrator Jose Raymour and Program Manager Dr. Youseline Téléméaque visited Maine this past spring, they identified and prioritized needed supplies in our warehouse for shipment. Upon their return to Haiti, they finalized an agreement with the World Food Program, who has graciously agreed to provide additional space for storage and staging supplies until they can be distributed and absorbed appropriately.

What was in the containers from Maine? There were more than 3300 clean birthing kits, along with handmade bags and toys assembled by women from all over the world through Craft Hope. There were materials for the agents de santé (community health workers) including tarps, rain gear, and projectors for presentations. Laptops, desktop computers, uninterruptible power supplies, and servers were sent for health administration. Justinian Hospital received x-ray and anesthesia machines, three pumps and electrical supplies for wells, two washing machines, a dryer, and a 150KW diesel generator, among many other things.

Hope International Development Agency (HIDA), Direct Relief International, and other partners collaborated with Konbit Sante to offer additional assistance and needed supplies. When the cholera epidemic began, these partners responded immediately to get critical supplies. And for a second year, Direct Relief pre-positioned supplies for civil authorities to use in the event of a hurricane or other natural disaster.

Responding to Cholera

Cholera spread like wildfire around Cap-Haitien within days of the first reported cases in Haiti in October 2010. Konbit Sante and our partners mobilized quickly to meet the additional and immediate demands from the epidemic on this fragile supply chain. Cholera is relatively simple to treat once a patient is diagnosed and transported to receive care, but a number of items are essential for treatment. For

Ou we sa ou genyen, ou pa konn sa ou rete.

You know what you’ve got, but you don’t know what’s coming.
instance, a single cholera patient can require 14 liters of IV fluids in a single day. At the peak of the epidemic we were distributing up to 5000 doses of oral rehydration salts a day to symptomatic patients.

Konbit Sante had to learn in real time how to acquire and deliver items we had never needed to purchase before. Thanks to many of you, we were able to immediately purchase water testing kits and 1.4 million Aquatabs (for water purification) directly from the manufacturer in Ireland. Each tablet makes five gallons of water safe to drink. However, the transportation of Aquatabs in that quantity is controlled by EPA restrictions, so their transport is heavily restricted. We rerouted them through a number of airports, airlifting them in, giving us access to new routes that we continue to utilize. With our partners at Haiti Hospital Appeal, we purchased truckloads of bottled chlorine and drove them across the border from the Dominican Republic.

Additional special supplies to help treat cholera patients included more than 10,000 liters of IV fluid, 125 mattresses for a cholera treatment center, pallets of cleaning and disinfection supplies (donated by Clean-O-Rama), water test kits, gloves, masks, soap, oral rehydration salts, and many other critical items. Médecins Sans Frontières, Oxfam, and UNICEF also provided essential supplies to support our efforts.

Despite all the progress made, there is still much to do during the coming year. Current plans include the development of a computerized inventory capacity, and expansion of the reach and impact of the supply chain beyond the hospital. Our ongoing goal, in supply chain management as well as in all of our initiatives, is to work together to eliminate the barriers that prevent so many people from receiving quality health and human services with the dignity and respect they deserve.

Workers unload part of the 1.4 million water disinfection tablets purchased and delivered by Konbit Sante to combat cholera.
Responding to the 2010 Earthquake

The Earthquake Response Fund was created in early 2010 to address both immediate relief needs and much longer-term response efforts. The immediate relief efforts — a response to the flood of victims fleeing to Cap-Haitian from the epicenter of the earthquake — included providing food, water, medical supplies, transportation, and medical care to victims. Konbit Sante’s longer-term response efforts, planned for implementation over a three-year period, include many steps to strengthen the fragile health system in the Northern Department of Haiti to better respond to future crises.

We did not know at the time of last year’s annual report that the cholera outbreak was imminent. This huge public health crisis led to our decision to modify our original three-year plan for the earthquake fund to address cholera treatment and education.

The pie chart below depicts how two-thirds of the total funds have been expended to date. The remaining one-third is committed to be expended in the current fiscal year in accordance with its intended purpose to strengthen the health system. In this third and final year of drawing on the fund, a major portion is slated to augment a capital building project to improve capacity at the Fort St. Michel Health Center.

Net Income: $145,338

Total Income: $1,344,532

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undesignated Donations and Other</td>
<td>23.9%</td>
<td>$321,209</td>
</tr>
<tr>
<td>Restricted Donations</td>
<td>16.8%</td>
<td>$227,317</td>
</tr>
<tr>
<td>In-kind Contributions</td>
<td>42.4%</td>
<td>$570,570</td>
</tr>
<tr>
<td>Foundation and Grants</td>
<td>12.2%</td>
<td>$146,411</td>
</tr>
</tbody>
</table>

Total Expenses: $1,199,194

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supply Chain</td>
<td>26.5%</td>
<td>$318,015</td>
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<tr>
<td>Hospital Based Programs</td>
<td>9.2%</td>
<td>$109,843</td>
</tr>
<tr>
<td>Community Based Programs</td>
<td>13.8%</td>
<td>$165,687</td>
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<tr>
<td>New Spinal Cord Rehab Facility</td>
<td>23.0%</td>
<td>$276,303</td>
</tr>
<tr>
<td>Infrastructure &amp; Facility Improvements</td>
<td>7.0%</td>
<td>$83,889</td>
</tr>
<tr>
<td>Cholera Response</td>
<td>12.2%</td>
<td>$146,411</td>
</tr>
<tr>
<td>Administration Expenses</td>
<td>8.3%</td>
<td>$99,046</td>
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<tr>
<td>Logistics and Transportation</td>
<td>10.1%</td>
<td>$132,132</td>
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<tr>
<td>Immediate Response, Medical Care and Food for Victims</td>
<td>37.4%</td>
<td>$118,966</td>
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<tr>
<td>Salaries</td>
<td>18.4%</td>
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<tr>
<td>Community Health Outreach</td>
<td>8.1%</td>
<td>$25,524</td>
</tr>
<tr>
<td>Materials &amp; Supplies</td>
<td>10.1%</td>
<td>$32,069</td>
</tr>
</tbody>
</table>

Konbit Sante is committed to being accountable to our donors, supporters and, above all, to the people of Haiti. If you have questions, please contact us directly. Thank you again to all who contributed to this fund in time of such great need.

Earthquake Response Fund Expenditures: $316,923
(from January 14, 2010, through August 31, 2011)
## Konbit Sante Statements of Financial Position

### As of August 31, 2011 and 2010

<table>
<thead>
<tr>
<th>Assets</th>
<th>08/31/2011*</th>
<th>08/31/2010**</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Assets</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and equivalents</td>
<td>$508,532</td>
<td>$622,313</td>
<td>($113,781)</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>177,202</td>
<td>55,660</td>
<td>121,542</td>
</tr>
<tr>
<td>Prepaid expenses &amp; refundable deposits</td>
<td>14,880</td>
<td>14,266</td>
<td>614</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td>$700,614</td>
<td>$679,409</td>
<td>$21,205</td>
</tr>
</tbody>
</table>

| Liabilities and Net Assets | | | |
| Liabilities | | | |
| Accounts payable and accrued expenses | $33,411 | $16,157 | $17,254 |
| **Total Liabilities** | 33,411 | 16,157 | 17,254 |
| Net Assets | | | |
| Temporarily restricted net assets | 286,145 | 427,532 | (141,387) |
| Unrestricted net assets | 381,059 | 235,720 | 145,339 |
| **Total Net Assets** | $667,203 | $663,252 | $3,951 |
| **Total Liabilities and Net Assets** | $700,614 | $679,409 | $21,205 |

## Konbit Sante Statements of Activities

for the Twelve Months Ending August 31, 2011 and 2010

<table>
<thead>
<tr>
<th>Change in Unrestricted Net Assets</th>
<th>2011*</th>
<th>2010**</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenues:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Undesignated donations</td>
<td>$314,029</td>
<td>$270,031</td>
</tr>
<tr>
<td>Restricted donations</td>
<td>227,317</td>
<td>164,654</td>
</tr>
<tr>
<td>In-kind contributions</td>
<td>225,436</td>
<td>252,768</td>
</tr>
<tr>
<td>Grants</td>
<td>570,570</td>
<td>162,881</td>
</tr>
<tr>
<td>Other</td>
<td>7,180</td>
<td>37,630</td>
</tr>
<tr>
<td><strong>Total Revenues</strong></td>
<td>1,344,532</td>
<td>887,964</td>
</tr>
</tbody>
</table>

| Expenses: | | |
| Salaries | 347,407 | 286,344 |
| Benefits and taxes | 33,084 | 21,918 |
| Rent and utilities | 40,141 | 50,104 |
| Supplies and equipment | 325,323 | 289,498 |
| Postage | 643 | 1,767 |
| Travel | 63,053 | 115,563 |
| Improvements to Haitian assets | 347,103 | 18,911 |
| Marketing, fundraising, development | 23,404 | 17,721 |
| Other | 6,780 | 13,491 |
| **Total Expenses** | 1,199,194 | 815,317 |

| Transferred to temporarily restricted net assets | | |
| Increase (Decrease) in Unrestricted Net Assets | 145,338 | 47,647 |

| Change in Temporarily Restricted Net Assets | | |
| Contributions | 505,019 | 555,466 |
| Net assets released from restriction | (666,406) | (204,093) |
| **Increase (Decrease) in Temporarily Restricted Net Assets** | (141,387) | 351,373 |

| Change in Permanently Restricted Net Assets | | |
| | 0 | 0 |

| Increase (Decrease) in Net Assets | | |
| Net Assets at Beginning of Period | 663,252 | 264,242 |
| Net Assets at End of Period | 3,951 | 399,100 |

*Unaudited Numbers **Audited Numbers

## Foundation Grants

Konbit Sante wishes to express appreciation for grant and funding support from the following organizations:

- Direct Relief International
- DAI (Development Alternatives International/USAID Office of Transitional Initiatives)
- Francis Hollis Brain Foundation
- GlobalGiving
- Hope International Development Agency
- International Diabetes Federation
- International Organization for Migration (IOM)
- MaineLine Haiti
- Oxfam Great Britain
- Rotary International
- SG Foundation
- United Nations Development Program (UNDP)
- United Nations Stabilization Mission in Haiti (MINUSTAH)
- United States Agency for International Development (USAID/MSH/SDSH PROJECT)
- Westwind Foundation
- World Health Organization (WHO)

## Major In-Kind Donors

We would like to thank our major in-kind donors who provide office and warehouse space, medical equipment and supplies, outreach, and educational opportunities for our Haitian colleagues. Additional thanks to the many musicians who have performed at events to benefit Konbit Sante.

- Amitek Hispaniola
- Back Bay Builders, Inc.
- Clean-O-Rama
- City of Portland
- Direct Relief International
- J.B. Brown & Sons
- Hope International Development Agency
- Leslie Wagner, Photographer
- Maine Medical Center
- Maine Street Events
- Maine Video Systems
- Médecins Sans Frontières
- Mercy Hospital
- Mercy Diabetes Center
- Michigan State University
- Northern Data Systems
- Martin’s Point Health Care
- Partners for World Health
- PortTIX
- Southern Maine Medical Center
- UNICEF
- WGME-13
- World Food Program
- XPress Copy

We also wish to thank the many schools, churches, event spaces and individuals who generously responded to the needs in Haiti by supporting our work.
Donations

Because of limited space, we are sorry not to recognize all who have generously supported Konbit Sante during the year. A complete listing can be found at www.healthyhaiti.org.

$10,000 or more
Dermatology Associates
John Emery
European Academy of Dermatology and Venereology
Kathleen Lannan
Nightingale Code Foundation
Dr. J. Michael and Wendy Taylor
University of Colorado

$5,000-$9,999
American College of Surgeons
Isaac Deutsch
Robert Deutsch
Ekedahl Family Foundation
Dr. Terence Harrist
Dr. Steve and Polly Larned
Edward Miller
Daniel Raymond Nickerson Foundation
Raymond and Doris Nickerson

$1,000-$4,999
Lisa and Payson Adams
Dr. Warren and Heidi Alpern
Leighton Arenas
Dr. John and Georgia Bancroft
Prudence Barry
Patricia Beville
Peter Monroe and Jill Bock
Ruth Burdett
Gail and Peter Cinelli
McLane Church
Mary Clark
Michael Curry
Dr. Brad and Debbie Cushing
Cyber Grants, Inc.
Dr. John and Diane Devlin
Donna Doughten
David Elwell
Dr. Matt Liang and Diane Garthwaite
Stuart Goodwin
Susan Henderson
Dr. Samuel Broaddus and Sandra Jensen
Sarah Joughin
F. Stephen and Angie Larned
Dr. Ann Lemire
Victoria Loring
Maine Community Foundation
Maine Medical Center
John Mayer
Don and Marilyn McDowell
Susan and Frank McGinty
Michael Ryan and Mary Lou McGregor
John Shoos and Lisa Merchant
Marjorie and James Moody, Jr.
Caroline Schmidt and Ceylon Mooney
Peter Mostow
Jeff and Elaine Musich
Carol and Gino Nalli
Nathan and Nancy Nickerson
Dr. Hugh Phelps
Christy Comeau-Pierce
Hugh Tozer and Kathryn Reid
Robert Ford Haitian Orphanage and School Foundation
Dr. Malcolm and Sue Rogers
Bob Roswell
Anne and William Russell
Jenny Potter Scheu and John Ryan
Dr. Ralph Saintfort
Eleanor Baker and Tom Saturley
Meike Schieff
David and Beverly Sherman
Greg and Marilyn Sinnett
David Mention and Dorothy Streett
Dr. Richard and Louise Sullivan
Dr. Billy and Sheri Traverse
Marguerite Togher
Drs. Charles de Sieyes and Carol Ward
Katharine Watson
Waynflete School
Woodard & Curran

$500-$999
Anonymous
Cushman Anthony
Dr. Peter and Jackie Bates

Dr. Mark Battista
John and Dorothy Bradford
Dr. Leonard and Susan Brennan
Amy and Seth Bruning
Serge Budzyn
Burness Communications
McLane Church
Theresa Cole
Eunice Cox
Gregg Lipton and Sara Crisp
Brian Dean Curran
Joseph deKay
Martha Dewing
Steve Douglas
James and Kathryn Elkins
Falmouth Middle School
First Congregational Church of South Portland
Dr. Moritz Hansen and Suzanne Fox
Peter and Linda Gammons
Gorham Savings Bank
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Dr. Claire Lambert
Dr. Nanny-Co Lathrop

Thanks to the following for their generous and timely support:

Funds collected for earthquake response paid for Manuchca Alcime, RN, to come to Maine to train with wound care nurses at Maine Medical Center.

Infrastructure volunteer and board chairman Hugh Tozer (left) talks to Justinian Hospital employees about how to use the new washers and dryer.

Nursing School Director Angelina Laine, RN, MPH, poses with two nursing students who receive an award from Konbit Sante for their outstanding scholarship.
Thank You

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Daniel Zilkha

Volunteers Who Traveled
Our special appreciation to those who have generously volunteered their time to travel at their expense to Haiti between September 1, 2010 and August 31, 2011.
Warren Alpern, MD
Lindsay Angelow
Marietta Atienza, RN
Jeff Benson, MD
Sam Broadus, MD
Judy Carl
Dean Curran
John Devlin, MD
Eva Lathrop, MD
Ann Lemire, MD
Carol Kuhn, MD
Bob MacKinnon
Karen Merritt
Kim Moody RN, PhD
Jeff Musich
Nan Nickerson, RN, ANP
Mac Rogers, MD
Curt Sachs
John Sommer, MD
Ralph Saintfort, MD
Kim Simonian, MPH
Eunice Wilcox, RN
John Wilcox
Wendy Taylor
Hugh Tozer

Under a new initiative at Justinian Hospital managed by Konbit Sante, patients receive care for diabetes. Here a patient is tested for blood glucose level.

Infrastructure volunteer Bob MacKinnon works on installing the new sterilizer at Justinian Hospital.

With funds from the World Health Organization, Konbit Sante built new showers and toilets on the campus of Justinian Hospital.
Our Mission

To support the development of a sustainable health care system to meet the needs of the Cap-Haitien community with maximum local direction and support.

Since 2001, Konbit Sante staff and volunteers have worked in collaboration with the Haitian Ministry of Health and other partners to build local capacity in all aspects of the health system – from door-to-door community outreach programs, to strengthening community health centers, to improving care at the regional referral hospital. In Haitian Creole, a konbit is a traditional Haitian method of working together to till your friends' fields as well as your own – working together toward a common goal. The word sante means health.

To learn more about Konbit Sante-supported programs in community outreach and disease prevention, pediatrics, women’s health, procurement and management of medical equipment and supplies, improvement of water quality at the regional referral hospital and more, please visit www.healthyhaiti.org.

Yon sél dwét pa manje kalalou.

You can’t eat okra with just one finger. That is, it takes people working together to get the job done.

Stay informed – To keep abreast of ongoing developments from Konbit Sante please sign up for email updates at www.healthyhaiti.org. And follow us on Facebook!

To receive our annual report and newsletters by email, please contact us at info@konbitsante.org or 207-347-6733.

We welcome the opportunity to lessen our environmental footprint and to put even more of your donation dollars to work in Haiti.