

Infrastructure Improvements

Our colleagues in Haiti struggle every day to provide good care in inadequate and ill-equipped facilities. In previous newsletters we have highlighted work to improve the electrical system and quality and quantity of water supply at the Justinian Hospital, the 250-bed regional teaching hospital in Cap-Haitien. Today there are several other projects in various stages of development.

The surge in wounded patients after the January 2010 earthquake called attention to the need to improve **sterilization capacity** in the Justinian Hospital’s operating suites. Konbit Sante’s team of volunteer technicians has almost completed the installation of a large sterilizer donated by Mercy Hospital in Portland. This is a complicated installation requiring water and electrical engineers, an architect, and a lot of hard manual labor. When complete, it will double the hospital’s capacity to quickly sterilize surgical equipment. Architectural changes made at the same time will separate clean and soiled materials areas. This project will be completed in September.

With funding from the World Health Organization (WHO), two old pit latrines behind the hospital — the only **bathroom facilities** for many patients and families — have been demolished and replaced with two, more hygienic, four-stall latrines designed by our volunteer engineers. The grant from WHO also built two four-stall showers for patients and families and repaired the roof on the laundry facilities building that was in danger of collapse.

With funding from MINUSTAH (the UN peacekeeping force) we have assisted the hospital create truck



These old pit latrines have been replaced.



This large-capacity sterilizer will double the hospital’s capacity to quickly sterilize surgical equipment.

access into the back of the hospital and build a storage facility for **solid waste** (everything that comes out of the wards and operating rooms) so it can be properly managed and trucked out of the hospital rather than openly burned on the hospital grounds.

There has been a great deal of progress on the 12-bed inpatient and outpatient **spinal cord rehabilitation unit** that we are building in collaboration with Haiti Hospital Appeal on the campus of the Baptist Convention Hospital in Cap-



Modern showers for patients have been installed on Justinian Hospital grounds.



This new spinal cord rehabilitation unit will provide 12 additional inpatient beds.

Haitien. This is the first facility of its kind in northern Haiti, and grew out of these organizations’ commitment to care for the most severely injured spinal cord patients after the January 2010 earthquake. The building design is a collaborative effort of Portland-area medical architect M.Curt Sachs, AIA, and local architects in Cap-Haitien. This project is funded by a grant from MINUSTAH to Konbit Sante as well as grants from Team Canada Healing Hands and the Swiss Paraplegic Foundation to Haiti Hospital Appeal. ■

Staff Focus: Miguelle Antenor, RN, *Agents de Santé* Supervisor

Miguella Antenor joined the Konbit Sante in-country team in January 2009. Ms. Antenor oversees community activities at Fort St. Michel, supervises

10 *agents de santé*, facilitates 10 mothers’ clubs which focus on family planning, facilitates health meetings in eight communities, and conducts health training for primary school children. On a typical day, Ms. Antenor may travel on foot, by bus, by motorcycle, or even boat to get where she needs to be to conduct a TB clinic, to vaccinate children, to conduct prenatal visits, or to supervise cholera posts in the impoverished communities served by Konbit Sante-supported *agents de santé*.

This work is very challenging, and Ms. Antenor says she is fortunate to have the support of family and friends. Ms. Antenor was born in Limbe, a diverse agricultural part of the North and second largest city in the Northern Department after Cap-Haitien. She was raised in Port-au-Prince and did

her nursing training at the Ecole des Infirmières Notre Dame de la Sagesse school of nursing on the Justinian Hospital campus. She is married and has a 4-year-old daughter.

When asked what’s most satisfying about her work, Ms. Antenor responds that people are accepting behavior change messages. People are washing their hands and treating their drinking water — which they learned at the cholera prevention posts. Contraceptive use has increased among women who participate in mothers’ clubs. And, after a mothers’ meeting recently, one woman collected trash that had accumulated outside their meeting space and threw it away, which shows that people are taking behavior change messages to heart. ■



Nurse Supervisor Miguelle Antenor, on right, practices HemoCure test for anemia with *agent de sante*, Betty Blanc.

HAITIAN PROVERB

Ou bat tanbou epi ou danse ankò.

You beat the drum and you dance again.

This proverb seems apropos as it relates to cholera. You face the epidemic but you don't stop dancing when things are better – you need to keep working to keep it under control.

How You Can Help

Konbit Sante depends on the generous donations from individuals and organizations to fund its programs in Haiti. Donations of cash, stocks, or in-kind items are greatly appreciated.

www.healthyhaiti.org

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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 and initiatives 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.



A young child collects untreated water for the family from a community water source.

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Agent de santé teaches hand washing to children and adults in the community.

Cholera in Cap-Haitien: Longer-Term Solutions Needed to Address Underlying Problems

Cholera is a disease of poverty. Spread primarily through drinking water that has been contaminated by human waste, it is found, almost exclusively, in populations that have the poorest access to sanitation and clean drinking water. First detected in Haiti in October 2010, cholera spread rapidly and aggressively through the country because of widespread lack of sanitation and clean water. The disease kills by causing very severe diarrhea that, without aggressive rehydration, can lead quickly to dehydration, shock, or even death within a matter of a few hours. Though cholera spreads easily and quickly, it is relatively uncomplicated to treat and prevent given adequate human resources and basic supplies. The UN reports more than 390,000 cases and approximately 6,000 deaths so far. While estimates vary, researchers have predicted numbers as high as 779,000 cases during the next year country wide. This acute epidemic has become part of Haiti’s landscape for the foreseeable future.

Konbit Sante has been active since the beginning of the epidemic, working with the Ministry of Health and other NGOs to treat the ill and to slow the spread of the disease among the vulnerable population in the hardest-hit communities. As the epidemic was first peaking with more than 600 new cases of cholera a day in Cap-Haitien, our Haitian and Maine-based staff and volunteers worked collaboratively with Médecins Sans Frontières (Doctors Without Borders) and Haiti Hospital Appeal to hire 160 health workers and set up a 200-bed treatment center on

the outskirts of Cap-Haitien when the central 400-bed treatment center was insufficient to meet the need.

After the treatment centers were well-established, Konbit Sante’s primary focus turned to prevention, education, and early community-based intervention. Our In-Country Program Manager, Dr. Youseline Telemaque, was an early leader in developing and coordinating a community-wide campaign that involved mobilizing many people and using all available media (radio, television, community meetings, illustrated literature, and megaphone trucks) to help get the word out. Working with Oxfam UK, Haiti Hospital Appeal, UNICEF, and others, we set up 59 community cholera prevention and early intervention stations where water disinfection tablets, chlorine, water buckets, hand soap, and oral rehydration solution were distributed. One hundred eighteen new health workers were trained to work in the most affected

neighborhoods, and we worked with a local Haitian group, Action Sanitaire, to provide training and outreach in some hard-to-reach communities on the outskirts of Cap-Haitien. Hiring all-Haitian staff to work at treatment centers and the oral rehydration posts, coordinate programs on the ground, and to test water, builds Haitian capacity and competence to deal with a

‘Cholera in Cap-Haitien’ Continued Inside

Letter from the Executive Director

Dear Friends,

Beginning in October 2010, one of the most aggressive and virulent cholera epidemics in our lifetime swept through Haiti. For a second time in less than a year, the health system was rocked by an unprecedented challenge, and we were fortunate to be prepared to mobilize resources to help respond to this deadly epidemic. What strikes me, as I look back on the last nine or ten months, is that the new roles and partnerships forged and strengthened after the January 2010 earthquake were foundational to the effectiveness of our cholera response.

Within two days of the outbreak being identified in the Artibonite region of Haiti between Cap-Haitien and Port-au-Prince, and before Cap-Haitien was directly affected, we began procuring materials that would be needed to fight the epidemic in the North. We purchased 1.5 million water disinfection tablets from the manufacturer in Ireland and coordinated cholera-related supply shipments to Cap-Haitien from partners Direct Relief International and Hope International. We sent an emergency container of materials from our Maine warehouse - materials that would be helpful in treating or preventing cholera, including 125 hospital mattresses. This was well underway before the epidemic reached Cap-Haitien. We began helping the Justinian Hospital prepare the local gymnasium to receive cholera patients for rehydration and treatment as the first cases were diagnosed in Cap-Haitien. This site was soon taken over and managed by Médecins Sans Frontières (Doctors without Borders), which has amazing logistical capabilities for dealing with crises. When it was clear this site would become overwhelmed with patients, Konbit Sante teamed up again with Haiti Hospital Appeal, a partnership forged in the earthquake response, and made plans to open a second large treatment center at their site.

“I am immensely proud of the leadership that Konbit Sante staff in Haiti displayed as the epidemic reached Cap-Haitien.”

Nathan M. Nickerson, RN, DrPH, Executive Director, Konbit Sante

This eventually became a three-way partnership between Médecins Sans Frontières, Haiti Hospital Appeal, and Konbit Sante, in close coordination with the Haitian Ministry of Health.

As treatment capacity for the most ill was being geared up, it became clear that unless aggressive prevention and early rehydration were available in the communities, there

‘Letter from the Executive Director’ Continued Inside

Cholera in Cap-Haitien continued

deadly illness that will last a long time after many of the international relief organizations have left.

The impact was dramatic. Providing early and widespread access to simple water disinfection options, clean water receptacles, soap, education about how to use them, and systems for immediate transport to treatment centers for the gravely ill dramatically slowed the progression of the deadly disease and lowered the mortality rate to below 2% from more than 13% during the earliest days of the outbreak.

Responsibility for ongoing community education is now being transitioned to “cholera brigades” managed by the Ministry of Health, which will continue to provide basic education about cholera prevention and distribute life-saving materials to households. The Justinian Hospital will eventually become the site of the ongoing cholera treatment center for the area, and the site we have helped to support will be maintained at the ready should there be another large surge.

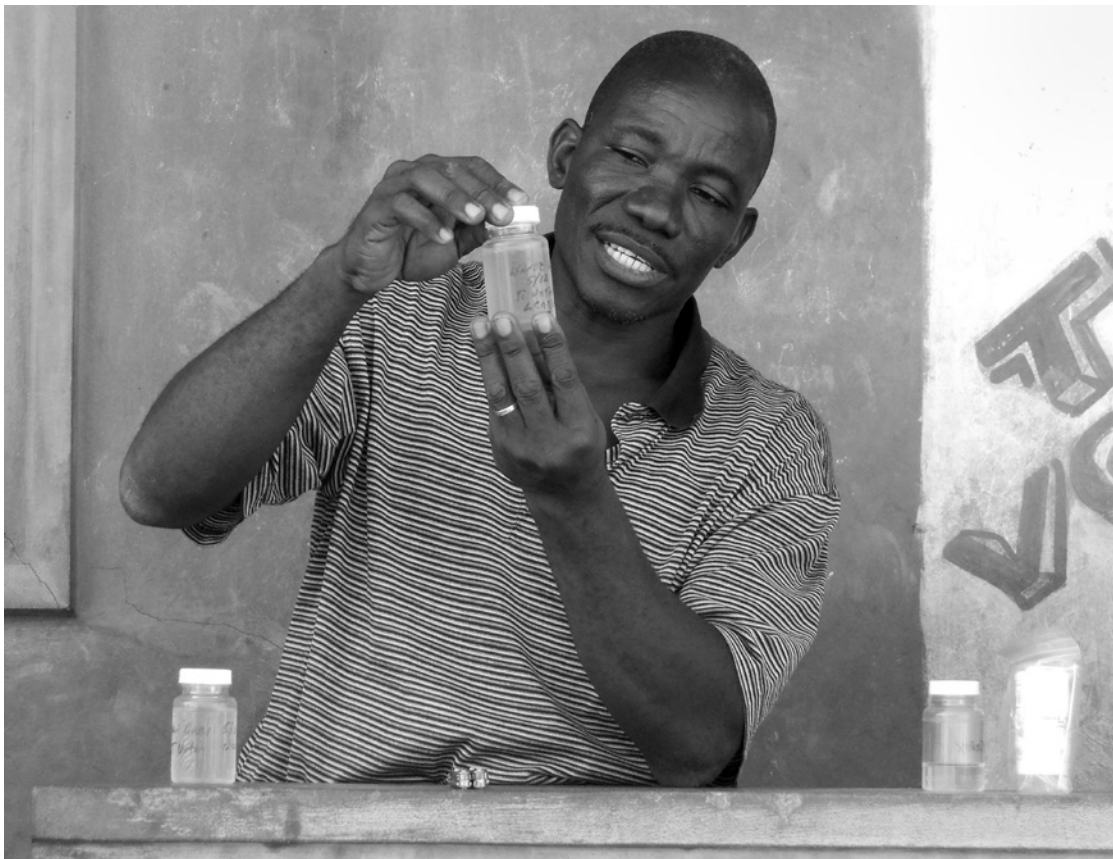
There will be a need for ongoing support, but it is good news whenever the Haitian health system grows in its capacity to address such problems and the ongoing work can be institutionalized within it. Konbit Sante and Haiti Hospital Appeal are actively applying for funds to continue to provide support to the Ministry of Health so that the transition is smooth

The Justinian Hospital will eventually become the site of the ongoing cholera treatment center for the area, and the site we have helped to support will be maintained at the ready should there be another large surge.

and services are uninterrupted for the community.

Because the underlying infrastructure conditions — lack of clean municipal water and wastewater treatment — have not changed, Konbit Sante health

workers and volunteers are moving ahead with a program to evaluate water contamination levels at sites where people go to collect drinking water. With a generous donation of 1,200 Colilert water contamination testing kits from IDEXX Laboratories, we are now able to detect the presence of coliforms and E.coli as indicators of pathogens including Vibrio cholera. We have been fortunate to receive a donation from *MaineLine: Haiti*, a collaboration of Maine businesses, to further our potable water and sanitation work in the communities. There are many technologies for disinfecting water (e.g. chlorine, filters, solar, etc), but we plan to work closely with people in the communities to arrive at solutions that are feasible, acceptable, and sustainable. This work is particularly important as increases in cholera cases have begun with the onset of spring rains. We will update you as our infrastructure and public health expert volunteers continue their work. ■



Konbit Sante staff member, Edy Joseph, teaches drinking water testing techniques in the community.



Cholera patients are treated in a tent during the first wave of the cholera epidemic.

Executive Director continued

would never be enough treatment centers to take care of the seriously ill. I am immensely proud of the leadership that Konbit Sante staff in Haiti displayed as the epidemic reached Cap-Haitien. Dr. Youseline Telemaque, a longtime Konbit Sante employee who had just become our In-Country Program Manager, was the organizing and galvanizing force behind the earliest community outreach activities. Working with the Ministry of Health, Médecins Sans Frontières, Haiti Hospital Appeal, Oxfam UK, and eventually with UNICEF, International Organization for Migration (IOM), USAID, and others, many lives were saved.

Through all this we continue to

make progress in many other areas. This newsletter provides an update on our programs and initiatives in community health and health facilities infrastructure improvements, but there is more to tell than will fit in this newsletter. For example, the diabetes project at the Justinian Hospital continues and is progressing well; we are working with Washington University in St. Louis and Medicines & Food for Kids to study strategies for prevention of severe malnutrition in babies; the wound care initiative has made a big difference in patient care at the Justinian Hospital; and the women’s health obstetrical emergency program training is under way.

Through this challenging period I

have again been struck by the courage and generosity of so many. I am truly thankful for the many volunteers who bring so much talent and energy to this effort; for our staff in Haiti and the U.S. who work tirelessly and with such passion; for partner organizations who share our vision and in whom we place our trust and who have trusted us; and in the broader community of support that makes all of this work possible. This is what the spirit of *konbit* is - working together for a common purpose. For us, that purpose is a healthier future for the people of Haiti. Sincerely,

Nathan M. Nickerson, RN, DrPH

Agents de Santé

The First Critical Link between Impoverished Communities and the Health System

Every day in Cap-Haitien, people become sick or die from diseases that are either easily preventable or treatable if diagnosed early enough — diseases and conditions including cholera, tuberculosis (TB), and obstetrical complications. Hiring and providing ongoing support for community health workers, or *agents*



Agent de santé Nesly St-Preux sets out on foot for a day of work in his community.

de santé in French, is the backbone of Konbit Sante’s efforts to help the Ministry of Health provide a comprehensive package of prevention and basic health services to address health problems like these in the community. These first-line health agents offer education and services to people in their homes or at gathering places or rally posts such as churches

community and church educational meetings are well attended. He is an impressive motivational speaker and has excellent record-keeping skills. His compassionate yet straightforward manner is respected by families and by women in particular. To facilitate travel in the rugged neighborhoods where they work, Obas championed the acquisition of Konbit Sante bicycles several years ago and more recently the acquisition of a motor bike.

In addition to postpartum home visits, *agents de santé* vaccinate children, screen for tuberculosis, educate community members about hygiene and family planning, and refer pregnant women to clinics for prenatal visits.

Konbit Sante currently supports the salaries of 14 *agents de santé* with funding from MSH/ USAID and other donors. In 2010 alone, these *agents de santé* ensured that 284 children under one year of age received complete vaccinations, that nearly 3,000 women obtained a modern form of contraception, and that 248 pregnant women had at least one prenatal visit to a health clinic.

Agents de santé have also played a critical role in Konbit Sante’s response to the cholera epidemic. Since the outbreak in October 2010, they have been at the forefront of prevention and

of Konbit Sante’s public health team, organized a visit to Cap-Haitien with several other team members to conduct a survey of local providers’ services which has become the basis for the first Directory of Health & Social Services in Cap-Haitien, published in June 2011. The *agents de santé* also requested patient educational materials with pictorials in order to provide consistent, basic information about common problems encountered in the field: diarrheal illness, oral rehydration recipes, prenatal problems, childhood illnesses, breastfeeding, and tuberculosis. The pictorial, laminated materials are important due to low literacy rate and the need to have something durable to take into the field. Funding from Development Alternatives International/USAID Office of Transitional Initiatives provided resources to print the guide and to create the educational materials. The same grant also funded two-week refresher training classes for Obas and the other *agents de santé* to keep them up to date about cholera and new methods of disease prevention, and it supplied important materials and equipment such as new baby weighing scales. Konbit Sante is pleased to be currently providing full 3-month certification training for 25 more *agents de santé*, funded by the United Nations Development Programme. Most of these new agents will have positions with health organizations in the greater Cap-Haitien area upon successful completion of the course.

“The *agents de santé* are a growing cadre of hard working, motivated community health workers who are committed to helping the people in impoverished neighborhoods, some of which are built on refuse on the outskirts of Cap-Haitien,” says Dr. Carol Kuhn. “They are eager learners, motivational speakers, and proud community leaders/educators.” While they are often discouraged because they cannot provide all the needed resources to help their patients because of poverty, lack of potable

“Obas is highly respected in his community. He is well accepted by his neighbors and his opinion is valued.”

Tezita Negussie, Konbit Sante’s U.S.-based Program Specialist

and schools. They identify people who may be ill, for instance with TB, refer them for care, and then support them during their treatment. Prenatal and postpartum visits by health workers provide women with the knowledge and help they need to keep themselves and their babies healthy.

On a recent trip to Cap-Haitien, Tezita Negussie, Konbit Sante’s U.S.-based Program Specialist, accompanied *agent de santé* Jean-Claude Obas on postpartum home visits in two of the poorest neighborhoods in the city. The women Obas visited live far from the nearest health facility in one- or two-room dwellings without electricity, water, or sanitation. During his visits with new mothers, Obas checked on the mothers’ health as well as the babies’ health, stressing the importance of breastfeeding and immunization, and referring each mom and baby to a health clinic for checkups.

“Obas is highly respected in his community,” says Negussie. “He is well accepted by his neighbors and his opinion is valued.” His home visits and

early treatment efforts — educating the public about risk factors and distributing water treatment supplies, soap, and oral rehydration solutions. Thanks in large part to the work of the *agents de santé*, cases of cholera in Cap-Haitien have declined substantially. Unfortunately, with the onset of the rainy season, cholera cases are increasing again, underlining the need for continuing support of the oral rehydration posts.

Guidance and support for the *agents de santé* comes from Konbit Sante’s public health team which includes staff as well as medical and public health professionals from Maine, Boston, and Toronto who donate their time, knowledge, and skills to develop effective public health programs. Last year *agents de santé* requested a guide of local organizations that provide health services that they can use for referrals in the neighborhoods. Until that time, there was no such information. To accomplish this, Dr. Carol Kuhn, a family medicine physician from Belfast, Maine, head



Dr. Carol Kuhn and Jean-Claude Obas practice treatment of infant airway obstruction and infant CPR.

water, poor hygiene and sanitation, they engage their patients and communities with enthusiasm.



Jean-Claude Obas makes a home visit in the community.

They also eagerly welcome training provided by Konbit Sante volunteers that reinforces and expands on the Ministry of Health curriculum, and often includes presentations of data that the *agents de santé* themselves collected. They have learned the importance of record keeping, quality control of lab testing, informed consent, referral systems and follow up mechanisms. According to Kuhn, “The *agents de santé* value and respond to this respectful feedback with a sense of pride. I continue to be inspired and humbled by the enthusiasm, commitment, and indefatigable optimism

of the expanding network of Konbit Sante-supported *agents de santé*,” says Kuhn.

The work of Konbit Sante program staff and volunteers culminate in added support to *agents de santé* like Obas, who, in turn provide needed help to their neighbors. Obas can now use the referral guide to help post-partum mothers receive additional services. Because of the refreshers training, he can feel confident that the information and services that he is offering is the most up to date. The public health initiatives are a good example of the *konbit* that we aspire to in our work. Many people — the *agents de santé*, volunteers, staff, external funders, the Ministry of Health — all work together with the common goal of improving the health outcomes of the community. ■

Briefs

Dr. Youseline Telemaque Becomes In-Country Program Manager

Dr. Youseline Telemaque, formerly head of our Women’s Health team, has become Konbit Sante’s In-Country Program Manager. Upon assuming the new responsibilities, Dr. Telemaque had to deal immediately with the cholera epidemic in Cap-Haitien. She has been widely acknowledged for her superb leadership and early and aggressive action in addressing this scourge. We are very pleased and proud to have her be the face of Konbit Sante day-in and day-out in the community and with other partners here. Dr. Telemaque and her colleague, Jose Raymour, Konbit Sante Administrator, were recently in Maine to meet with U.S. staff and partners and to participate in strategic planning meetings. Congratulations go to outgoing Program Manager, Emmanuela Beliard, on her new position as Coordinator of Training and External Cooperation for Hospital Sacre Coeur in Milot.

Birthing Kits Donated from Southern California to Maine

Each day, birth attendants in Cap-Haitien communities deliver babies in their homes or the mother’s homes. Health workers provide them with safe birthing kits — simple packages containing a bar of soap, an alcohol wipe, Purell, clean latex gloves, clear plastic sheeting, clean string, and a small receiving blanket — in order to reduce unintentional complications during home deliveries. Through the efforts of Craft Hope (crafthope.com) and those who joined them in their efforts, Konbit Sante has received more than 2000 kits from groups as far away as Australia and as close to home as Maine. Our sincere thanks to you all — to individuals, families, friends, church groups, craft groups, and scout troops — for your time and generosity. The



Dr. Youseline Telemaque talks to students at the Friends School of Portland about life in Haiti during a recent visit to Maine.

four pallets of kits have just arrived in Cap-Haitien and will be put to immediate use.

Donated Truck Sought for Transport of People and Materials

Reliable transportation is sought for transport of volunteers, medical staff, and materials in Haiti. The ideal truck would be a low-mileage, 4-wheel drive, 4-door, extended cab, and Japanese made (because they are easiest to service in Haiti). A diesel is preferable, but we understand those are difficult to find in the U.S. We would not let the perfect be the enemy of the good, however, and would be very happy to discuss any other appropriate possibilities. (info@konbitsante.org)

300 Participate in the 2nd Maine Walks for Haiti June 4

On a beautiful Saturday morning, more than 300 people participated in the second walk/run around Portland’s Back Cove. Special thanks to premiere and lead sponsors Dermatology Associates, IDEXX, Maine Medical Center, Terence Harrist, MD, and WGME 13. Our great appreciation to Nicholas M. Mavadones, Jr., Mayor of Portland for lending his support to our Sister Cities partnership with Cap-Haitien and for reading the City Council resolution declaring June 4, 2011 Maine Walks for Haiti day. Special thanks to anchor Gregg Lagerquist of WGME 13 for emceeing the event. To singer/songwriter Gifrants; the Lucien family of storytellers and entertainers — Charlot, Malaika, and Sebastien; and DJ Harold Similien for great entertainment during the morning and early afternoon. To in-kind donors Allen Screen and Digital, CocaCola, Hannaford, Jim Lucas, Marc Motors, and Leslie Wagner Photography for their generosity. And to the event organizers, the many volunteers, and all the runners/walkers who made the day a success that raised \$25,000. Thanks to you all.



Konbit Sante board members John Shoos (with banner) and Charlot Lucien (with Haitian flag) lead the 2011 walk.