Dear Friends,

There is hardly any greater joy for me than to see the radiant smiles of young women in the Democratic Republic of Congo, some in college or even mothers themselves, in good health despite being born with HIV. There is hardly any stronger sense of fulfillment for me than to see nurses saving newborn lives because they have been trained and equipped to provide essential care. There are no words that encompass the gratitude I feel towards all of you who have made this work possible. I hope as you read the 2016 Annual Report that you take pride in our collective accomplishment.

We are grateful for your trust and your commitment to our mission. On behalf of Global Strategies and all our partners, thank you for your unwavering support.

Anne-Marie Duliege, M.D.
Global Strategies Chair

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Our Mission
Global Strategies empowers communities in the most neglected areas of the world to improve the lives of women and children through healthcare.

Our Work
Global Strategies invests in long-term relationships with local healthcare workers. We identify excellent local providers, train additional people when needed, and provide them with the tools and resources necessary for them to help their own communities.

Our Strategy
INNOVATE Pioneer programmatic and monitoring solutions that meet the urgent medical needs of our partners and integrate community-based efforts with new technology.

EDUCATE Identify and train local partners to deliver quality healthcare and become leaders in their communities.

CONNECT Link our partners to other local and global organizations to coordinate efforts, efficiently use resources and ensure sustainability.

IMPACT Rigorously evaluate our programs and develop models that can be used globally.

2016 IMPACT Statistics
- 386 staff beneficiaries
- 125,798 healthcare beneficiaries
- 873 education and training beneficiaries
“NoviGuide leads nurses through complete care guidelines to determine the medical needs of each baby.”

Saving a baby’s life is not a mystery. It comes down to education, resources and critical, life-saving guidelines. These guidelines describe how to treat common newborn conditions, such as infection and prematurity. The challenge is that the guidelines are complex and hard to follow without help. To make it easier, we needed to learn more about the people caring for babies—nurses. We asked nurses in low-resource settings two questions to get at the heart of what it is like to deliver care on the frontlines:

1. **What is the scariest part of your job?**

   Nurses told us it is when the baby comes out and is not breathing. This is not only stressful—it is also one of the major causes of neonatal mortality. Nurses must deliver life-saving breaths within 30 seconds. We addressed this fear by making a first-of-its-kind 3D animation showing the steps of neonatal resuscitation with synchronized timing. With this teaching tool, nurses do not have to recall a long-ago training session to save a life.

2. **What is the most annoying aspect of your job?**

   The answer surprised us. It was not the diaper changes or the crying. It was the math. Everything a sick baby needs must be calculated—medications, feeds and IV fluid rates. These calculations depend on multiple variables, such as the baby’s weight, whether the baby is premature and the medication vial size. In the world of tedious and time-consuming dose calculations, Global Strategies saw an opportunity.

   The result is NoviGuide, a tablet-based tool that automates nearly every calculation needed to care for a sick newborn. But it goes one step further. NoviGuide leads nurses through complete care guidelines to determine the medical needs of each baby. It not only calculates proper doses, but ensures that every infant receives the right treatment. After a successful study in South Africa, NoviGuide is now being used in Uganda in collaboration with the University of California San Francisco. Our goal: to make it easier for nurses to deliver the best neonatal care.
From 2014 to 2016, West Africa experienced the largest Ebola outbreak in history. As the virus, fear and rumors spread, Global Strategies’ partners, Mother Paterin College of Health Sciences and the Catholic Health Council, leap into action. And while the outbreak stopped, our partners have not. Today, they are addressing the root causes of the epidemic by working to build a stronger, more resilient healthcare system. Together with the Global AIDS Interfaith Alliance, Global Strategies is working with our partners to provide full scholarships for Liberians pursuing nursing degrees. The decision to pursue a career in nursing following a deadly epidemic that took the lives of many healthcare workers is a real act of courage. Global Strategies is so proud to support this program and recently traveled to Liberia to meet with the nursing scholars. In their own words, they describe their work, aspirations and the impact of the scholarship.

**Why did you choose to become a nurse?**
- I feel that nursing is a calling. I have the “nerves to serve.”
- When I was sick, nurses were very caring. One after the other they would encourage me. I want to give someone else the same assistance that I received. I want to “be there” for another person.
- I really want to help people in the rural areas. There are few health workers in Liberia and I want to be there where I am needed.
- I love to see things fixed and I want to be proud of what I have done.

**On the impact of Ebola:**
- I didn’t back off. If I back off, who will replace me? Who will help those that are sick? Even if I am sick, who will take care of me?
- At the beginning there was fear. I am not scared now. I have been taught how to protect myself.

**On the scholarship opportunity:**
- I almost dropped out of the program because my father was ill and my mother couldn’t afford the school fees, but because of Global Strategies I am back in school.
- The scholarship inspired me to study hard, to do my best and exceed criteria.
- The scholarship is helping me fulfill my dreams.
For nearly eight years, Global Strategies has been working to improve the care of children with disabilities. Most recently, our work has taken us to rural India where we have built a program to identify people with disabilities, train local physical therapists, and create residential camps where parents can meet each other and learn skills to help their children. We discussed the project with Dr. Mitul Kapadia, director of the Physical Medicine and Rehabilitation program at the University of California San Francisco Benioff Children’s Hospital.

**When we think of global health, we do not always think of rehabilitation medicine. Why is this so important?**

One billion people, 15% of the global population, live with a disability that limits their participation in family and community life. Furthermore, 80% of people living with disabilities live in developing countries. In global health, we focus a lot of attention on saving lives. Implied in that idea is a certain quality of life, but that quality is by no means guaranteed. When I see a disabled child learn to walk on her own or communicate with his parents, I see a life that has become more through rehabilitation.

**Tell us about where the project is located and the people working on it.**

The project is located in rural India in the state of Karnataka. Just as with other Global Strategies initiatives, our impact comes through partnering with local groups. Our partner, the Swami Vivekananda Youth Movement, has built up trust and relationships that have made this project possible. To address the enormous stigma around disability, we trained a local person who speaks Kannada and can navigate the cultural landscape. Her name is Poornima and she is the face of the project. There were no physical therapists in this area before we trained her. When I visited the project and heard Poornima introduce herself to parents as a physical therapist, it gave me immense pride.

**What’s the biggest change you have seen since the project began?**

The idea that one can recover from an illness or injury is built into our culture. In American sports, for instance, discussion of an injury is nearly always followed by a timeline for recovery. I have seen that idea begin to take hold in Karnataka. It is not that patients can always regain full function, but that one’s abilities after an illness or injury are not fixed. That progress can be made gives enormous hope to parents of disabled children.
Last year, Global Strategies and our partner HEAL Africa in the Democratic Republic of Congo celebrated the 10th Anniversary of the Children’s AIDS Program. The clinic that began in 2006 with six children now serves more than 600. It remains the only center for children affected by HIV in the eastern Congo. But the clinic is not the only thing that has grown. Children who began the program as eight and nine year olds are now completing high school. A few have even gone off to university. Still others now have children of their own. “When I first met Dr. Vindu and the teenagers and young adults in the program, I thought the biggest challenge was making sure we had enough medicine”, says Global Strategies program coordinator Jean Armas. “Dr. Vindu has taught me that creating social bonds among teenagers is equally important to the health of her patients.” Or as Dr. Vindu herself puts it, “Teenagers need something to do.”

We are following Dr. Vindu’s advice. We have shifted our strategy from one where psychosocial activities for teenagers are secondary to one where they are treated as fundamental to the program and its success. Next to the pharmacy, young adults learn crafts, do art projects and meet one another. Teenagers even knit hats for newborns being treated in Global Strategies’ neonatal program next door. With the clinic as a medical home, Dr. Vindu and her staff can reinforce health messages such as the importance of taking antiretroviral medications, not missing appointments and preventing the further spread of HIV.
President’s Message

During my training in global health I would sit with my classmates listening to lectures on the diseases that affect the world’s poorest people. Each disease was presented as a separate problem, with its cause, symptoms, diagnosis and treatment. When I lived in the eastern Congo for more than a year working side-by-side with our partners and caring for patients, I acutely felt the disconnect between my classroom education and the conditions I experienced in the field. Our partners lacked many of the technologies needed to identify and treat diseases, and their patients had challenges well beyond those I was taught in medical school. The people we treated were often refugees, survivors of gender-based violence or orphans—people without a voice and very little support. Like so many of us who have traveled to these places, I returned with more questions than answers. Even to this day, many solutions still remain undiscovered. But for me, one thing was abundantly clear—in order to really make a difference in the lives of these at-risk communities, the local medical professionals had to lead the charge. These local doctors, nurses and community healthcare workers are the reason Global Strategies can celebrate the 10-year anniversary of the Children’s AIDS Program or save newborn lives in Liberia.

As you read through this year’s annual report, I hope you are inspired by the local people making a difference, people with immense compassion and courage who see their work serving their communities as a calling. When I spoke with a nurse in Liberia about visiting babies in their homes after they leave the hospital, she told me that she loved this work simply because “I would stay up at night worrying about the little ones and now I can see how they are doing.”

Our work is to empower these dedicated healthcare workers, not only with financial support but with training, opportunities and even customized tools. We could not do this work without you. Your gifts, time and support make this all possible.

Thank you.

Joshua Bress, M.D.