



...saving the greatest number of children's lives at the lowest possible cost



Annual Report 2022



...saving the greatest number of children's lives at the lowest possible cost

2022 Board of Directors

Maureen Black, PhD. (Chair)

Pediatric Psychologist, University of Maryland

Pamela Johnson, PhD (Co-chair)

Executive Vice-President, Voxiva

Anwar Huq, PhD (Treasurer)

Professor, University of Maryland

William B. Greenough, III, M.D. (Secretary)

Professor, Johns Hopkins University (Retired)

Rita Colwell, PhD

Professor, University of Maryland

David A Sack, M.D.

Professor, Johns Hopkins University

Alan R. Schwartz, MD

Professor, JHU (Retired)

Natasha Shah, MS, MPH

Director of Operations, Amgen

Daniel B. Sack, MD

Anesthesiologist (Retired)

The Board met 3 times in 2022 by Zoom

CHF Staff

David Sack, M.D., . Director

Jonathan Sack, Director of Administration

Jo Sack, Public Relations Director, News Editor

Past Trustees & Emeriti

Peter Agre, M.D

Leonard D. Andrew

Geoffrey Arrowsmith

Abdullah Baqui,

Bashir

Mayra Buvinic, Ph.D

Richard Cash, M.D

John Costello

Joseph Deltito, M.D

Hugh Downs

Harold Fleming.

Barry Gaberman

Veena Hammers

Lauren Harrison-White

Norbert Hirschhorn, MD

Norge Jerome, PhD

Irene Jilson, Ph.D

Ronald E. LaPorte, M.D

Beth Lamont

Erick Lensch

Shirley Lindenbaum, PhD

Eric Marler

Zahirah McNatt

Robert Northrup, M.D.

Nate Pierce, M.D.

Geoffrey Place

Charlene Riikonen

Tim Shi, MD

Hazel J. Shorter

Kaye Wachsmuth

Christine George, MD

We especially honor our trustees/directors who have died:

James Bausch

Charles CJ Carpenter, M.D

Clifford Pease, MD.

Katherine Elliot, MD

William T. Mashler

R. Bradley Sack, MD, ScD

David E. Bell

Omand Solandt

David Rogers, M.D.

Amb. Jean Broward Shevlin Gerard

Adaline Satterwaite, M.D.

Bonita Stanton, MD

Message from the Chair

Dear Friends,

We are entering the 39th year of the Child Health Foundation! Over the years we have saved and improved the lives of thousands of children throughout the world through our Small Grants Program. By sharing the lessons that we have learned from our grantees, other communities have benefited and prevented illnesses in their communities.

We were able to support the Small Grants Program through your generous help! When you read about the projects and their successes in this Annual Report, you can see that your contributions have made a huge difference! You will also see that we have new projects in many countries, including this year in the United States.

Inspired by the successes that come from helping people improve their communities, I am sure you will want to continue to help. We at the Child Health Foundation thank you for your generous support! We look forward to being able to improve the lives of children in the years to come!

Warm regards, *Maureen Black*, PhD Chair, Board of Directors



CHILD HEALTH FOUNDATION NEWS was published in December in 2022, as a Holiday Card and was mailed to over 500 readers and contributors. The content of the newsletter informed interested and caring individuals about our activities and the findings of important research. Further, we try to disseminate the latest information concerning children's health and disease prevention for all those who care for and about children. The newsletter can also be viewed on our website and is sent by email upon request.

Child Health Foundation

History

Child Health Foundation was established in 1986 as a non-profit, public charity [501 (c)3] to prevent and treat life-threatening diseases of infants and children in the United States and abroad. We support organizations that are community driven, practical and responsive, strategic and effective and sustainable.

Mission Statement

Our Mission is “*to improve the lives of children in low-income settings across the globe by empowering local communities to creatively solve their most pressing child health challenges.*”

Drawing on decades of public health service, we accomplish this by encouraging communities to develop, evaluate, and implement novel approaches to improving child health, and financially supporting locally established NGO's to execute practical and effective interventions.

Our Vision is to inspire community organizations which promote child health and survival across the globe.

Our Values: We are motivated by the belief that concerned and inspired citizens in low income settings are uniquely suited to respond to the health needs of their next generation.

How We're Making a Lasting Difference

Grants: We have a program called Innovative Small Grants, which allows donors of gifts to have broad geographic impact on a wide spectrum of topic areas, with the Foundation performing the administrative oversight.

Research: We plan and support clinical research to develop new health-care technologies for children affected by disease or disaster, and disseminate and implement proven, effective results through our network worldwide.

Public Education and Outreach: We educate families and communities through our newsletters, website and social media.

Professional Medical Education and Outreach: We promote the transfer of medically effective, scientifically sound, low-cost technologies and the sharing of knowledge among health practitioners and policy makers. And we reach out to communities in emergency need due to catastrophic storms, earthquakes, famine, or epidemics.

Innovative Small Grants

The Innovative Small Grants Program allows donors of gifts to have broad geographic impact on a wide spectrum of topic areas, with the Foundation performing the administrative oversight. An amount of up to \$5,000 is granted, through a competitive procedure conducted by our panel of experts, to investigators of community organizations who submit proposals using our guidelines. All grantees exemplify our mission “to save the greatest number of children’s lives at the lowest possible cost.” **Lessons learned ultimately benefit children everywhere.** We grant as many as we are able, with the funds available, to projects involving the health of infants and children. In 2022 we were able to award eight innovative service projects directed at improving the health and well-being of newborn infants during their first month of life. Because of the COVID involvement, work was delayed in some, others carried on because they were in a hospital facility. They, as well as brief reports from the completed projects of the previous years, are described here. See our website for updates.



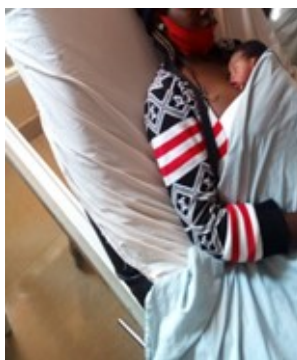
2022 Innovative Small Grants Awards

1. **Health Research and Services Solution (HRSS), Rwanda** Early diagnosis of infants with Sickle Cell Disease
2. **Foyer D’Enfant + Femme, Democratic Republic of the Congo** Using Solar Panels to create electricity for maternity facility
3. **Tanzania Rural Action Support Programme (TRASP)** Improving Male Parents’ participation in infant child care
4. **Women Empowerment Program (WEP), Rwanda** Reinforce Bubble CPAP and Kangaroo Care
5. **Guidance and Counseling Development Association (GCDA), Nigeria** Screen, diagnose, and treat Jaundice
6. **Pamoja Health for Better Children (PHBC), Tanzania** Provide “Helping Babies Breathe” Toolkits
7. **Ultra Primary School Support Organization (UPSSO), Uganda** Educate villagers about Sickle Cell Disease and treatment
8. **Foundation for Tomorrow (F4T), Kenya** Providing care to marginalized Mothers and Infants

2022 Small Grant Reports:

Women Emporment Program, Rwanda:

Their project is Bubble CPAP and Kangaroo care to fight neonatal mortality. They say, “The 25 volunteers we have are those we have had since the project started, They have both knowledge and experience and the training was more of ideas sharing in order to improve more on project activities.”



They assessed the effectiveness of the activities. Data collection has been completed, They reached 80 health posts and 50 health centers and saved the lives of almost 3,000 newborns with CPAP. Most, they say, would have died.

Kangaroo Mother Care was encouraged after the infant reached normal weight.

They continue to train the nurses and community health workers, Important because there are no doctors in the hospital.

They conclude by saying. “This is a technology that is sustainable, cheap and easy to be expended to other communities like ours. We hope that together with CHF, this project will be sustained and continue to save lives of babies.”

Women Health Initiative, Sierra Leone: They write, “After the successful implementation of the *Save Babies Project* in 2020, Child Health Foundation has funded our extended project,

dedicated to improving neonatal care at KOIDU Government Hospital by establishing and training the neonatal audit committee of 6 members for effective neonatal death audit and neonatal reporting, establishing neonatal electronic filing and reporting system, establishing neonatal policies and procedures, training 20 neonatal staff on neonatal nutritional support and psychosocial counseling and providing social support for 50 babies from needy families for better recovery, These new project activities were dedicated to complimenting the previous activities.”

They report that 20 members of the hospital staff have now been trained in 3 days, the objective being to improve the skills of nurses, community health officers, midwives, and doctors in the neonatology, pediatrics, and maternity departments. After the training, trainees reported consistent improvement with an average of 42.8 % in improvement from 51% in the pre-test to 93.8% in the post-test.

“On behalf of the Women Health Initiative team, we are very humbled to say thanks to the Child Health Foundation. We have appreciated your valuable contribution to making a difference in our community.”

Golden Change for Concerned Youth Forum, Nigeria: Improving the hygiene and pre-term



birth management capacity of local pregnant women. They report that they provided targeted technical and capacity development for 15 community health extension workers from 15 primary healthcare centers on preterm birth management, Pneumonia and infection prevention. This resulted in increase in capacity of 15 health personnel in

Kwali area council. They provided 4 portable pulse oximeter for pneumonia diagnosis for 4 Kwali primary healthcare centers:

Increase in water sanitation and hygiene (WASH) capacity of 15 community health extension workers (CHEWs) and 10 traditional birth attendants, Increase in antenatal care for at least 7,000 women and prevention of infections in ten rural PHCs in ten wards resulting in reduction in incidence of neonatal infections and child birth-related infections that may lead to death for at least 13,000 children in rural communities.

Printed and distributed PHCs, SHCs and THs directory to the health facilities within two area councils (Gwagwalada and Kwali) on the types of service rendered, equipment's available for treatment and service to children,

Karwemera United Women Association, Uganda: Preventing transmission of hepatitis B to babies.

“This project has attracted the attention of very many community women including pregnant and those who expect to become pregnant. The radio program has made diverse communities to hear about our project and many pregnant mothers always come to test for hepatitis B.”

They have tested so far 802 pregnant women and only 17 were found positive. Eleven of the 802 have delivered and have been immunized within 24 hours. All these babies are Hep B negative. The pregnant women who tested positive were referred to major hospitals for treatment. They are following up 6 of these so that when they deliver, their children could be tested and vaccinated.

Better Health Care Organization, South Sudan: To address neonatal mortality through life-saving chlor-



hexidine gel equipped into safe delivery kit for cord infection (*Safe in a box*) for home births through community distribution.

1.10 Community health workers trained on the Safe Birth in a Box

2. 10 health workers in ten health facilities trained on safe birth in box, chlorhexidine cord application monitoring and supervision

3. 1000, chlorhexidine gel procured and integrated into birthing kit to make Safe birth in Box

4. 10 community mobilization and awareness session conducted on Safe birth in box and chlorhexidine
5. 500 mothers identified and registered to benefit from the safe birth. 400 newborn benefited from the chlorhexidine application.
6. Monthly data collection on the outcome of the Safe Birth in a Box and chlorhexidine cord application on entering it in excel sheet for analysis.

Peace Initiative of Internally Displaced Women's Association, Uganda

Reaching out to the most vulnerable children and mothers in Moroto and Kotido district with the most



sustainable technologies in reducing rate of sepsis for babies within one month. They report: "The Change teams identified the key drivers of new born babies' sepsis from nomadic groups as: mobile settlement, beliefs in local medicine, love for cattle on expense of new

born babies, ignorance, hostility and bad culture practices among others that has made this place unreachable for health workers and other development actors.

Therefore, it was paramount to open up this place with knowledge and local innovations such designed training session/ health education, provision of hygiene and sanitation portable items, and formation of ambassadors of new born babies' protection against

deadly sepsis in new born babies. And to reduce infectious cultural practices such as use of herbs, initiating food in one month babies, conduct deliveries by TBAs," All of this was started.

Nursing Student in India

A young woman in Kolkata, India was granted funds to begin nursing studies from Dr. Ann Kaiser Stearns, Baltimore. Ann had adopted 2 babies from Calcutta several years ago and she and the girls, now both educated, employed and married, have wanted to keep in touch with their heritage by helping in some way with a sustainable contribution. This is the fourth nurse they



The International Centre for Diarrheal Disease Research, Bangladesh (icddr,b), Dhaka, has been a partner of Child Health Foundation since our inception in 1986. Currently our office makes it possible for Americans to donate tax-deductible dollars to the Centre and we organize the Center Fund committee's meetings.

The Centre Fund is a program which assists the icddr,b in raising funds which insure continued vital contributions to health. In 1994, we initiated the Centre Fund effort in the United States and since then have been assisting in the effort to raise endowment and ensure careful stewardship, monitoring the way it is invested. Members of the committee are: William B. Greenough, Rita Colwell, Norman D'Cruz, Nancy Cheng, Thomas Barry, Munir Alam, David Sack, David Weisbrod, Amol Khisty, Tahmeed Ahmed, and Syed Monjurul Islam.

At the end of **2022**, the total endowment was valued at \$15,232,030 (**\$18,208,414 at the end of 2021**) and is managed by TIAA of St. Louis, Missouri.



Financial Statement

Year Ending December 31, 2022

Revenue and other support

| | |
|---------------------------|-----------|
| Board Contributions | \$ 35,575 |
| Corporate contributions | 35 |
| Individual contributions | 36,504 |
| Charitable Campaigns | 416 |
| Contributions for icddr,b | 2,881 |

Total support and revenue **\$ 75,411**

Expenses

| | |
|------------------------------------|-----------|
| Program services/ Grant allocation | \$ 83,509 |
| General and administrative | 7,763 |

Total expenses **\$ 91,272**

Change in net assets **\$ (15,861)**

Net assets—beginning of year **\$ 109,260**

Net assets—end of year **\$ 93,399**

Child Health Foundation
110 E. Ridgely Road
Timonium, MD 21093

Phone (410) 992-5512
Email: contact@childhealthfoundation.org



...saving the greatest number of children's lives at the lowest possible cost

We at Child Health Foundation want to thank you for any donations you have made in the past. We have observed that some people don't realize that their contribution, besides giving them a warm feeling for knowing that they have saved children's lives and made them happier, also improves their own and their children's lives. You see, research done in regions where disease is prevalent helps to prevent those organisms from spreading. Furthermore, it gives local medical practitioners the expertise to combat emerging infections when they do escape.

Everyone also benefits from our efforts to educate the general public about low-cost ways to prevent and treat common childhood diseases and promote better nutrition. So stay with us, read our literature, and please support us financially.

You can send your tax-deductible contribution in any amount to the address above or give by credit card on our website. Thank you.

Visit our Website at www.childhealthfoundation.org