MEDICAL IMPACT

IMPACTING LIVES, PRESCRIBING HOPE

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IMPACTING LIVES

3 Introduction

Medical IMPACT is a non-profit, non-governmental organization with no political or religious affiliation, headquartered in Mexico, which appears as a counterbalance to reduce the gap in access to health for populations in situations of vulnerability, isolation or difficult to access in Mexico and the rest of the world.

Medical IMPACT is integrated by doctors, health professionals, graphic designers, accountants, administrators, marketers and other professionals, who share concern to improve the situation of those who every day face the consequences of inequity in access to health services. The organization aims to empower the ideas and actions of people in the field of health sciences, who act as agents of change in the fight for universal health coverage. In order to reach this goal, the organization has developed a series of strategies and action plans based on social participation and volunteering.

PRESCRIBING HOPE

The activities carried out by Medical IMPACT can be summarized as follows: Direct support in the field through groups of volunteers from the various health areas to provide quality health care services free of charge; Teamwork in disaster situations and with limited resources; provide medicines and medical equipment to vulnerable populations; development and implementation of selective prevention campaigns based on a rigorous analysis of the communities to be served.

Our goal is to create a culture of mutual help, prevention and access to comprehensive, equitable and quality health services in order to collaborate and achieve universal health coverage in vulnerable populations, forging a legacy of professionals motivated by the needs of society and empowering patients to receive their human right to health no matter where they are.



Context

The world is constantly growing, in 1950 the United Nations Organization estimated that the world population was 2,600

million people. In 2017 the World Bank reported a world population of approximately 7,530 million, this significant growth has led the world population to more than double in less than 100 years, this happens as a result of progress in health systems; the advance in the use of antibiotics and vaccines; and the standardization of hygiene and drainage practices, which translates into the subsequent increase in life expectancy and reduction of

mortality. To itself, the population is expected to continue its expansion reaching 8,500 million in 2030.

However, this growth does not necessarily occur in an environment of equity. In 2015, a reduction in global extreme poverty was announced to 10%, which,

figure reported to date, still represents a challenge for its eradication as a goal for 2030. Likewise, it is estimated that world population in 2017, just over 732 million people live in low-income countries

although it is the lowest

www.medical-impact.com contact@medical-impact.com and at least 2.972 million in low-middle-income countries, so that approximately 50% of the population worldwide live in

countries where there is no have managed to define goals and strategies for effective growth and development. In terms of health, medium and low-income countries face an enormous challenge, the presence of diseases typical of underdevelopment, as a result of exposure to factors. environmental malnutrition and infectious-contagious diseases; In addition to the noncommunicable diseases typical of the most developed countries and the long-lived population, such as Diabetes Mellitus and Cancer.

In the Global Monitoring Report on Universal Health Coverage 2017, it was reported that slightly more than half of the world's population does not have access to basic health services, while an estimated 100 million people fall into extreme poverty as

> consequence of own health expenses or of a family member.

Figure I. Rate of Universal health coverage by country. < 45 46-61 62-69 70-76 > 77 No data available Does not apply

more generally investments in people, are critical to build human capital and enable sustainable and inclusive economic growth."

"Investments in health. and

Dr. Jim Yong Kim, President of the World Bank. 2017.



Objectives

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- Providing quality humanitarian health care to communities that lack of it as a result of economic barriers, political instability, difficult access, natural disasters and situations of marginalization from different origins, whether natural or caused by humans, under the supervision of qualified medical personnel.
- Provide preventive measures oriented to neglected tropical diseases such as: Tuberculosis, HIV / AIDS and Malaria.
- Support and monitor the communities served.
- Promote health and healthy lifestyles, in addition to advanced medical education in the field.
- Provide high quality continuous medical education to health professionals.
- Stimulate inclusive access to health services
- Develop medical prevention campaigns for those communities that have specific epidemiological needs.
- Encourage good dispensing practices and distribution of medicines, contextualized to the field of social medicine.

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Our Values

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Medical IMPACT was developed with the primary objective of preserving human rights and ensuring universal access to health under the inescapable premise of maximum benefit without harming the integrity of the person.

Therefore, the members of the organization identify deeply with the scale of values on which Medical IMPACT focuses its actions:

- EMPATHY
- ALTRUISM
- LOYALTY
- EQUALITY
- LEADERSHIP
- AUTHENTICITY

- PERSEVERANCE
- DISCIPLINE
- PROFESSIONALISM
- HONESTY
- HUMILITY



Mission

Our mission is to impact marginalized, forgotten and / or vulnerable populations, through humanitarian service oriented towards wellbeing and integral health.





View

To be an international example through the innovation of health care in conditions of extreme marginalization on the measures that we have previously implemented.

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IMPACT ACTIVITIES

Medical IMPACT develops its activities around four main pillars:

I. PREVENTION CAMPAIGNS

a) Selective implementation of specific prevention campaigns focused mainly on neglected tropical diseases, reproductive and women's health and non-communicable diseases.

2. MEDICAL BRIGADES IN SITUATION OF EXTREME MARGINALIZATION, DIFFICULT ACCESS OR NATURAL DISASTER

- a) Provide primary and specialized medical care to communities of extreme marginalization, difficult access and vulnerable populations or in special situations.
- b) Humanitarian health care, distribution of medicines and supplies and execution of search and rescue brigades during situations of natural disasters.



3. EDUCATION AND RESEARCH

Development **courses** *I* **workshops** on prevention and continuing education for health professionals.

- a) To promote continuous upper secondary education through workshops and talks in order to promote higher education and the study of health sciences.
- b) Preparation of scientific publications focus on basic, clinical and transnational sciences.

4. ADVOCACY IN PROMOTION OF HEALTH

- a) Be a voice that represents vulnerable populations before the international community.
- b) Promote decision-making oriented to the modification of public policies, through the stimulation of political will and parliamentary fronts in order to restore or improve access and reach to health.
- c) Establish synergies with other related organizations to boost the reach of the dissemination of vital information.
- d) Establish forums for interaction between the industry, the academy and the public and / or private institution.



LOGISTICS OF THE BRIGADES

SELECTION	 A bibliographic search is made of the conditions and needs of the community of interest or special request by local authorities.
SCOUTING	• Communication is established with the responsible authorities of the community, in order to go and identify the needs of the population, the most common diseases and the environmental, geographical and conflict conditions.
PLANNING	• Qualified health professionals are recruited depending on the identified needs, in order to provide quality care, as well as an inventory of medicines and medical supplies covering the deficiencies that were observed.
EXECUTION	• The medical brigade is carried out, in which primary medical care and specialized medical attention are provided, according to the needs previously identified in the community. During each brigade, medications are provided completely free of charge.
DATA ANALYSIS	• An epidemiological analysis of the data obtained in the community is carried out.
FOLLOW UP	• A follow-up plan is scheduled for the community, with visits defined according to the situations identified in the previous brigade and the epidemiological analysis. Likewise, the information concluded from the epidemiological studies is used as evidence to propose and / or promote improvements in matters of public policies and infrastructure, as well as the rendering of accounts.

I. MEXICO

- a) Comprehensive medical care focused on the person for remote communities and extreme marginalization papulations of multiple states of the republic, including Puebla, Oaxaca, Morelos, Chiapas, Quintana Roo, Mexico City, Yucatan and State of Mexico, assisting more than 8,000 people since mid-2017.
- **b)** Health to Work Program:

Development and execution of specialized interventions within construction sites for high-risk population, focused on primary care and the prevention of work, cardiovascular and occupational health.



- c) **Political will** before the Senate of the Mexican Republic related to:
 - i. Vaccination.
 - ii. Antimicrobial resistance and Tuberculosis.
 - iii. Regulatory Science.

Medical IMPACT also stands as the **main focal point of the Global TB Caucus in Mexico** promoting the Barcelona Declaration among key parliamentarians

Implementation of courses and workshops for the continuing education of health professionals, focused on topics of vital importance for the preservation of life, the use of inclusive language and humane treatment of the patient. The workshops that are currently on the agenda of Medical IMPACT are:

i. Mexican Sign Language for Healthcare Providers: Encourages inclusive language and boosts the ability of health personnel to provide humanistic attention, serving as a guide to reduce the communication gap with patients with hearing disabilities during their medical management.

ii. **Post-partum hemorrhage in primary healthcare:** Instructs the doctor of first contact in the resolution of emergencies related to pregnancy in order to have a positive impact on maternal mortality and morbidity in collaboration with the Geneva Foundation for Medical Education and Research

- iii. **Management of the amputee patient**: the number of patients with atraumatic amputations due to diabetes complications grows larger as diabetes is one of the main public health issues in Mexico, healthcare providers acquire abilities related to the acute and long-term medical care of the amputee.
- Donation of medicines and medical supplies to various institutions within Mexico City, among the most prominent are:
 - i. National Institute of Cancerology (INC)
 - ii. Brimex clinic
 - iii. General Hospital of Mexico (HGM)
 - iv. Escandón Hospital

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2. GUATEMALA

a) Specialized health services through a multidisciplinary team composed of neonatologists, gynecologists, general practitioners, internists, nurses and volunteers, providing person-centered health care to more than 1,500 patients in the communities surrounding Escuintla in collaboration with Embrace Medical Missions International.

3. CUBA

a) Priority medicine donation and delivery in collaboration with the Greek Orthodox Church of Mexico.

4. KENYA

a) Preparation of multi-country prevention campaigns in collaboration with WISER International for communities in Kenya, focused on women's health and sexually transmitted diseases, which were specially designed for the understanding and education of girls and adolescents.

5. SIERRA LEONA

- a) Opening and registration as a Non-Governmental Organization with the relevant authorities of the Medical IMPACT Sierra Leone Chapter, in order to expand the organization's reach to the continent with the highest percentage of marginalization, focused on providing preventive medical care to neglected tropical diseases, Tuberculosis, Malaria and HIV.
- b) Establishment of a multidisciplinary team, responsible for carrying out the logistics and implementation of projects for communities in the city of Freetown.
- c) Alliance with the Ministry of Health and Health of Sierra Leone in favor of the realization of international medical brigades.



Partnerships with the

Private Sector

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WE SUPPORT

Every business has direct or indirect contact with health, therefore Medical IMPACT actively seeks for strategic alliances and partnerships to increase outreach and maximize impact. Some examples are:

I. Grupo Bausau & CIMBRA

Background: Grupo Bausau offers construction of big structures, among other services and solutions.

Construction workers in Mexico are at high risk of contracting diseases and to suffer traumatic injuries, also, by working for long hours and most of the week with a low salary, they cannot afford

Problematic: Ausentism, presentism, low productivity and high health-related costs are identified. Scouting of working areas from our team detect hygiene and ortophaedic related issues.

Solution: Deploy specialized brigades during working hours inside of the construction site composed of Nutritionists, Medical Professionals, Physical Therapists, collecting cuantitative data.

Deliverable: Report containing all attention provided, free medication given and indicators, followed by specialized recommendations to positively impact the vulnerable population.

2. DOC.COM

Background: Doc.com offers telemedicine services through a mobile platform targeted to metropoli citizens.

Problematic: 9.4 million Mexicans lack or have difficult access to healthcare services and could benefit from using the platform.

Solution: Pilot and test the platform with vulnerable populations, testing for usability, adaptability, mobility and connectivity, providing the service entirely for free for the selected populations.

Deliverable: Cuali-Cuantitative report, branding and product placement content, social responsibility.





I. UNITED NATIONS

- a) Active participation before the United Nations in New York in:
 - i. Active Members of the Civil Society Engagement Mechanism (CSEM) of UHC2030 in preparation for the Unite Nations High Level Meeting (UNHLM) on Universal Health Coverage (UHC).
 - ii. Active Members of the Mayor Groups and other Stakeholders (MGoS) Advocacy Task Force & Voluntary National Review (VNR) Task Force in preparation for the High-Level Political Forum (HLPF) in 2019
 - iii. Participation in the Civil Society Hearing on the UNHLM on UHC in the UN General Assembly.
 - iv. United United Nations High Level Meeting (High Level Meeting of the United Nations or UNHLM) on the Fight to End Tuberculosis (Trusteeship Council) in the Multistakeholder Panel.
 - v. Active Members of the United Nations Global COMPACT
 - vi. Leave Noone Behind UNHLM on TB SIDE EVENT
 - vii. UNHLM SIDE EVENT (UNHQ Conference Room 4) Acceleration on the Elimination of TB in Indonesia and the Middle East by the Ministers of Health of Indonesia, India, Maldives Islands, Stop TB Partnership Indonesia & Stop TB Partnership.

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2. UNITED NATIONS

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b) Active participation before the United Nations in New York in:

- i. Participation in the executive inauguration of the "Safe Birth Even Here" campaign of UNFPA, Siemens and Johnson & Johnson
- ii. Interactive Civil Society Hearing on the UNHLM on the Fight to End Tuberculosis (Interactive Audience of the Civil Society on the UNHLM in the fight against Tuberculosis), Conference Room I, UNHQ.
- iii. Participation with UNAIDS and LAC Platform in the followup webinar on the UNHLM of the 73th UNGA.
- Active collaboration in the development of the Zero Draft of the political declaration on the fight against tuberculosis (A / RES / 73/3)
- v. Participation with UNAIDS, WHO, UNFPA & UNICEF in the Non-State Actor Consultation on the Global Action Plan for Healthy Lives and Well-being



7. RESEARCH

Medical IMPACT recognizes the importance of the creation and dissemination of knowledge as one of the most important measures to potentiate the reach of health, which is why research is part of the organization's primary activities, focus on infectiology, public health and tropical diseases.

Outstanding Scientific Publications:

- Solano-Gálvez, S.G.; Abadi-Chiriti, J.; Gutiérrez-Velez, L.; Rodríguez-Puente, E.; Konstat-Korzenny, E.; Álvarez-Hernández, D.-A.; Franyuti-Kelly, G.; Gutiérrez-Kobeh, L.; Vázquez-López, R. Apoptosis: Activation and Inhibition in Health and Disease. Med. Sci. 2018, 6, 54. https://www.mdpi.com/2076-3271/6/3/54
- 2. Abraham Zavala-Garcia I*, Roberto Briceño-Mena I, Lesly Romero-Beltran I, Giorgio Alberto Franyuti Kelly2, Jose Ceron-Espinosa3 and Maria R Gonzalez Losa. Focal Epithelial Hyperplasia Prevalence in an Endemic Population, Molecular Association of HPV-13 to Asymptomatic Patients and Comparison Between Three Elementary Schools of Different Income Levels. DOI: 10.4172/2476-1966.1000133
- 3. Hernandez DAA, Rivera AS. Yaws essentials: What health professionals should know about yaws. Heighpubs Otolaryngol and Rhinol. 2017; 1: 037-040. DOI: 10.29328/journal.hor.1001007
- Solano-Gálvez, S.G.; Tovar-Torres, S.M.; Tron-Gómez, M.S.; Weiser-Smeke, A.E.; Álvarez-Hernández, D.A.; Franyuti-Kelly, G.A.; Tapia-Moreno, M.; Ibarra, A.; Gutiérrez-Kobeh, L.; Vázquez-López, R. Human Dendritic Cells: Ontogeny and Their Subsets in Health and Disease. Med. Sci. 2018, 6, 88.
- Giorgio F, Edric G, Deidre LG, Antonio Z, Carlos VL, et al. (2018) Ebola's Fatal Hemorrhagic Fever from Discovery to Vaccine. J Trop Dis 6: 267. doi: 10.4172/2329-891X.1000267

Goals and ongoing projects

- I. Consultative Status of the Economic and Social Council (ECOSOC)
- 2. Active participation in the high-level meetings of Universal Health Coverage of the United Nations in 2019
- 3. Establishment of the Medical IMPACT Chapter in Guatemala, Haiti and Kenya.
- 4. Implementation of multiple inclusive courses and workshops of vital importance to preserve human rights and guarantee access to health
- 5. Linkage and strategic alliance with industry, academia and public institutions establishing close and fruitful ties for the good of the communities assisted with broad social responsibility



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Financing

0

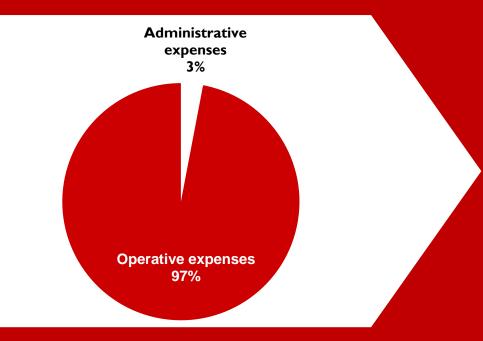
Medical IMPACT works hand in hand with private institutions, public institutions, and other NGOs that have the same objective, support vulnerable communities and obtain resources through the implementation of:

- I. Courses and workshops
- 2. Specialized implementations requested by the industry and / or the public institution
- 3. Financing with cause
- 4. Marketing with cause
- 5. Corporative volunteering

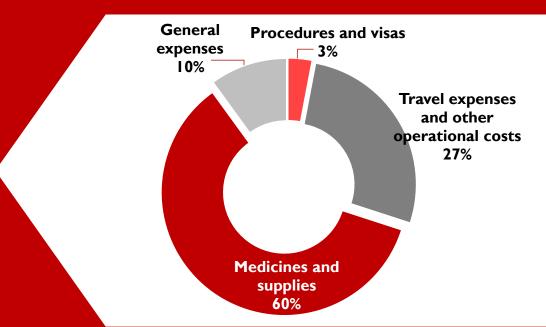
Principles and Good Practice of Humanitarian Donorship.

In accordance to the **Principles and Good Practice of Humanitarian Donorship** acquire internationally according to the June 2018 High Level Meeting of the United Nations in New York, Medical IMPACT is committed to proportionate humanitarian attention guide by the centrality of saving lives with impartiality, neutrality, autonomy and independence, in agreement with the Sustainable Development Goals.

Administrative Costs



Costs of implementation



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Donations

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The donations that the organization receives are classified in three modalities:

1. In kind: medicines or medical supplies that are not expired, in good quality and sealed.

In case of obtaining medicines or supplies expired or with violated seals, these are separated and delivered to SINGREM A. C. for **proper destruction and reporting.**

- 2. **Volunteering:** any health professional who has the availability, aptitude and approval of the organization to participate in the brigades or other activities within the organization will be welcome, however, the possibility of calling other professionals is not closed to participate.
- 3. **Economical:** donations will be deposited to the Banorte account of IMPACT OUTREACH A. C. only.



Medicines and medical supplies donated during 2018

INCAN

HESCANDÓN

ORVACA

CLBA

HOSPITAL GENERAL DE

MÉXICO

2270

medicines and medical supplies donated in 2018 to institutions.

CLÍNICA BRIMEX

3854 medicines given

Medical assistance and drugs granted to communities in 2018

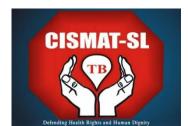


Allies

Currently, Medical IMPACT has the formal collaboration with:

AMERICAS TB COALITION













ΙΝΥΙΤΛΕ



Junima



















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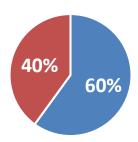
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Gender Representation



Female Male







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