



At a Glance



Costa Rica

Dominican
Republic

El Salvador

India

Nicaragua

Peru

Ecuador

Uganda

Philippines



CONTENTS

- 4 Who We Are
- 6 Costa Rica
- 10 Dominican Republic
- 14 El Salvador
- 18 India
- 22 Nicaragua
- 26 Peru
- 28 Peru / Huancayo
- 30 Peru / La Merced
- 32 Ecuador
- 36 Uganda
- 40 Philippines
- 44 Volunteer Programs
- 46 Next Steps
- 48 What's Included / Stay Connected

OUR MISSION

To provide access to medical care for underprivileged and medically underserved families around the world.

ACCESS

First and foremost, we look at access to healthcare. In areas where no clinical services are available, we work with the community to build out the necessary infrastructure to improve access.

EDUCATION

Preventative health. We work hard to integrate into our communities to address local needs and launch outreach programs. We build health education programs based on input from the community.

PARTICIPATION

Participation from community members is vital, as we ask the community to work alongside us in improving health in the communities in which we work. We also believe in participation from the global community.



COSTA RICA • Project Alajuelita

Costa Rica is often held up as a role model for developing countries. It has been able to establish and improve social services, such as healthcare and education, and raise poverty levels. However, there still remains a large immigrant population that is not covered under the current system. Young women, often pregnant, travel to Costa Rica seeking work and, for their children, access to Costa Rica's social services. Children are often born in Costa Rica, ensuring their eligibility for school, and then sent back to Nicaragua to live with their grandparents. Mothers stay behind to work, and they are not reunited until the children are around seven years old, when they return to go to school.

The community of Alajuelita, located a short drive from the urban city center of San Jose, is home to nearly 87,000 residents. Many of these residents are uninsured immigrants, and the majority are women and children. Eighty percent of these immigrants live under the poverty line, while over 40% live in extreme poverty. In January of 2005, our clinic was established to provide care to the population of Alajuelita as well as the surrounding rural communities. The centrally located space serves as a FIMRC base within the community for well-child and acute care visits, as well as psychological services. We also work in partnership with a soup kitchen, local organizations, and youth groups to provide health education to the population.



MELISSA, 2016

"I loved my trip to Costa Rica. I was able to learn a lot about medicine in an underserved community, as well as the culture of Costa Rica itself. I am now strongly considering going back for a longer period of time next summer!"

9%

Although difficult to document, it is believed that nearly 9% of the Costa Rican population is comprised of immigrants, many of which are medically underserved.

¹ <http://www.iom.int/cms/en/sites/iom/home/where-we-work/americas/central-and-north-america-and-th/costa-rica.html>



CLINICAL ACCESS

- FIMRC clinic provides primary care services to patients of all ages
- Well child visit program
- Psychological services

HEALTH EDUCATION

- Art and dance therapy
- Diabetes prevention program
- Soup kitchen health education programs

VOLUNTEER PARTICIPATION

- Assist medical staff with clinic operations by conducting patient intake and dispensing medications
- Lead health education sessions in soup kitchen
- Reinforce healthy habits by leading an exercise session

Our mission is to fill the gap for immigrant healthcare, starting with our clinic in San Felipe, Alajuelita. FIMRC addresses the community's most pressing issues by offering primary care services and patient education. The clinic also maintains a psychologist to address mental health issues that often accompany poverty and immigration. FIMRC's holistic approach aims to provide families with the tools necessary to maintain a healthy lifestyle.



VOLUNTEER OPTIONS:

- Global Health Volunteer Program
- Comparative Health Immersion Rotation Program
- Internship Program
- Master's Degree Practicums
- Custom Programs



Program Spotlight

Dance Therapy

Preventative health takes on many different forms at Project Alajuelita.

Community members enjoy an array of art and dance therapy based programs aimed to improve overall mental and physical well-being. March 2016 marked the two year anniversary of dance therapy lessons at Project Alajuelita.

These lessons have ranged from Bhangra, a community dance style originating in Northern India, to traditional ballet. Dance lessons were developed with the goal to improve the mental and physical health of both women and children in the community. Many women suffer from problems connected to obesity, which is a main focus area for FIMRC at Project Alajuelita. The classes are intended to introduce women to lifestyle changes by demonstrating how to exercise in an enjoyable way and to also introduce new methods of stress relief.

DOMINICAN REPUBLIC • Project Restauración

Restauración is a small town located four hours from Santiago. The center slopes up and down, full of brightly painted concrete, with villages spread out through the surrounding forest. Restauración lies in the second-poorest province in the Dominican Republic, a nation where half of the population lives in poverty. The poorest country in the Western Hemisphere, Haiti, is located just 12km away.

While there are five clinics in Restauración's municipality, they all suffer from lack of funding. With the Dominican Republic spending 3% of its public funds on strengthening healthcare, many hospitals and clinics lack sufficient technology and other resources. These clinics are available to documented Dominican citizens only, and funding only considers this population. However, over 70% of patients seen in these municipal clinics are Haitian, with communities like Tilori, a town across the border, relying on Restauración for healthcare. With a population ranging unofficially into the thousands, Haitians living in Tilori face an eight mile trek to the municipal hospital in Restauración when in need of medical care, even though they receive no medical coverage as Haitian citizens and often have to cover the entirety of their medical expenses. This issue alone causes marginalized communities with no health education or medical care to fall through the cracks. This leaves these medical centers struggling to stretch their budgets to fit their reality. FIMRC works to address the gap in medical services as well as health education for both Dominicans and Haitians alike.



MEGAN, 2014

"I am so thankful to [...] go back to Restauración for a second year. The progress [...] is truly astounding and is a testament to all the work that FIMRC and the people of Restauración have done. I'm proud to be part of an organization that creates sustainable communities and inspires people to create better lives for themselves!"

2x

The United Nations Population Fund has reported that 105 of every 1000 teenagers become pregnant in the Dominican Republic, twice the world average.

² http://www.who.int/countryfocus/cooperation_strategy/ccsbrief_dom_en.pdf?ua=1



CLINICAL ACCESS

- Support medical brigades in remote communities
- Conduct community based medical visits
- Provide medical supplies and equipment to rural clinics and municipal hospital

HEALTH EDUCATION

- Youth empowerment programs
- Latrine construction program
- Diabetes support group
- Dengue, malaria, and Zika education programs

VOLUNTEER PARTICIPATION

- Lead Chicas Maravillas and Superman classes
- Observe medical care in local hospital and clinics
- Assist with mobile clinics
- Lead a health education table at a community health fair

Our mission is to improve access to medical care and health education in Restauración and the surrounding rural communities by conducting mobile medical clinics and home health visits for patients unable to travel for care. FIMRC also employs region-specific public health and education initiatives including youth empowerment programs, health promoter trainings, diabetes support groups, and school based health education sessions.



VOLUNTEER OPTIONS:

- Global Health Volunteer Program
- Summer International Health Fellowship
- Comparative Health Immersion Rotation Program
- Internship Program
- Master's Degree Practicums
- Custom Programs



Program Spotlight

Diabetes Program

The Diabetes and Hypertension program is a collection of community-based clubs that provide education and support to manage chronic disease in the context of Restauración. Locals meet weekly for classes with FIMRC staff at first, then continue to meet weekly with a local clinic or health representative to keep personal records of their blood pressure, fasting blood sugar, and weight. Participants also attend health education sessions that focus on the importance of a healthy diet and exercise. Each month, a diabetes specialist visits from Santiago to meet with program participants. The Diabetes Program currently operates in Restauración as well as three rural communities including Mariano Cestero, Carrizal, and Valle Nuevo.

EL SALVADOR • Project Las Delicias

El Salvador is a small but crowded country, the most densely populated in Central America. Civil war and natural disasters have wreaked havoc on the healthcare system and the economy. The government is working to repair the damage, but small, rural communities are often some of the last to experience the results of the advances, such as Las Delicias.

Las Delicias sits hidden in the valley of an ominous volcano, located only a short drive from the capital city of San Salvador. This impoverished rural community is surrounded by coffee plantations, sugar cane and cornfields, where many of its residents used to find employment. In recent years, many of these farms have gone out of business, stripping many Las Delicias residents of their jobs. Today, a majority of the community lives in extreme poverty with many of the health issues due in part to malnutrition, as well as lack of education, scarce resources and unfit sanitation (including poor water quality and lack of adequate housing). El Salvador's National Health Service, which most citizens access, is consistently underfunded and overburdened, creating long wait times for basic care. As a result, many residents choose not to use the healthcare system, leaving children particularly vulnerable to poverty related illnesses including diarrhea, malnutrition, and bronchial infections. Working with the Ministry of Health, FIMRC is addressing the effects of the tumultuous past by offering clinical services and community outreach initiatives.



CAIT, 2014

"I went to El Salvador thinking I would make an impact on the lives of people there. As it turns out, although I felt satisfied with my own contribution, I think they made an even bigger impact on mine! I had a wonderful time and the trip was a once in a lifetime experience."

8.7%

Of all of El Salvador's newborns, approximately 8.7% have low birth weight, largely due to inadequate maternal nutrition or prenatal care during pregnancy.

³ http://www.who.int/countryfocus/cooperation_strategy/ccsbrief_slv_es.pdf?ua=1



CLINICAL ACCESS

- FIMRC clinic treats patients of all ages
- Community based medical visits
- Testing and treatment campaigns for parasitic infections

HEALTH EDUCATION

- Adolescent group workshops
- Water sanitation programs
- Prenatal Program and home health visits
- Dental hygiene education

VOLUNTEER PARTICIPATION

- Assist medical staff with clinic operations
- Lead health education session with FIMRC's youth groups
- Assist health promoters with vaccinations campaigns

Our mission is to improve access to health services for the population of Las Delicias and the surrounding rural communities. Through the delivery of medical care ranging from well child visits to prenatal and postpartum attention, FIMRC's clinic provides a spectrum of services for the local population. Our work also includes extensive community outreach efforts that address preventable problems such as malnutrition, gastrointestinal illnesses, respiratory infections, diabetes, and hypertension.



VOLUNTEER OPTIONS:

At this time, there are no volunteer program options for El Salvador; however, we remain dedicated to the community of Las Delicias.



Program Spotlight

Prenatal Program

The local Health Promoter conducts FIMRC's prenatal program in Las Delicias. The program aims to improve the education of expecting mothers, as well as to promote compliance to scheduled prenatal appointments and a safe delivery. Monthly education occurs in the home and is targeted to address important topics pertinent to the month of gestation. In addition, expecting mothers are screened for warning signs, given prenatal vitamins and are invited to ask questions. The women are also seen at FIMRC's clinic for a full checkup. The program continues after the birth of the child, when the Health Promoter continues the home visit model to assure a healthy recovery of the mother and strong development of the newborn.

INDIA • Project Kodaikanal

India as a whole has enjoyed immense economic progress in recent years, ranking among the top 10% of the world's countries in terms of economic growth since 1991. Unfortunately, India's healthcare system has not developed at the same rate. The public healthcare system is underfunded and struggles to bear the weight of its patients' needs, while the private healthcare system is expensive, requiring high out-of-pocket expenditures. One in three of the world's malnourished children live in India, and infectious diseases plague the population. Many of these issues are preventable or easily treatable, but India's impoverished do not have sufficient access to healthcare.

Tucked in the hills of southern India, Kodaikanal has long been considered a retreat from the high temperatures and tropical diseases of the plains. Local tourists have flocked to the small village to enjoy its wooded slopes, waterfalls, and rich flora. This tourism has boosted Kodaikanal's economy, leading to a flood of international investment. However, this growth has further marginalized those on the bottom rung of Indian society, leaving many without the means to support their families, including many in Kodaikanal. FIMRC works with groups within the community to provide healthcare, education and personal economic growth to those left behind by India's broken system.



PADMA, 2015

"Each day brought new friendships. With new doctors, people of all sizes, those who embodied inspiration and dedication along with sweetness and love, and even those that challenge you in every possible way. The friendships made were everlasting and full of memories."

21%

**India alone
accounts for 21% of
the world's global
burden of disease.**

⁴ http://www.who.int/countryfocus/cooperation_strategy/ccsbrief_ind_en.pdf?ua=1



CLINICAL ACCESS

- FIMRC clinic provides primary care and referral services for patients of all ages
- Women's health services offered biweekly at FIMRC clinic
- Support annual surgical clinic for burn victims

HEALTH EDUCATION

- Nutrition and preventative health education in the crèches
- Home health visits to assess standards of living
- Education sessions on respiratory illnesses

VOLUNTEER PARTICIPATION

- Conduct home health visits
- Assist FIMRC physician with crèche check ups, intake and documentation
- Support medical staff in the rural clinic and local hospitals

Our mission is to alleviate the burden on health facilities in the area by providing primary care and women's health services at our clinic. FIMRC lends its support to hospitals in the area as well as to a burn clinic that takes place each year. Additionally, FIMRC works in five crèches, which function as schools, day care centers, and health centers for children between two and five, by providing well child checks, nutritional supplements, and health education sessions for the children, teachers, and parents.



VOLUNTEER OPTIONS:

- Global Health Volunteer Program
- Summer International Health Fellowship
- Comparative Health Immersion Rotation Program
- Internship Program
- Master's Degree Practicums
- Custom Programs



Program Spotlight

Crèche Nutrition Program

FIMRC partners with five crèches, or day care centers, in Kodaikanal.

FIMRC's role is to provide well child checks and nutritional supplements to the children that attend. FIMRC is able to monitor each child's development while in the crèches; however, children often lose weight during summer break mainly due to a lack of knowledge about a healthy diet. The Crèche Nutrition Program was developed to provide nutrition education to the children's families so that healthy meals are also served at home.

The program begins with an education session for the crèche teachers who then lead a nutrition education session for parents and caretakers with the goal that healthy meals be served in the home during school breaks. The development of the children in the program is consistently monitored by FIMRC staff.

NICARAGUA • Project Limón

Nicaragua is fast becoming a study in opposites, as impoverished communities, like Limón, sit forgotten, adjacent to the upscale resorts and surfing sanctuaries that have begun to crop up in the last ten years. Nicaragua has experienced a boom in tourism, making it the second biggest industry in the nation. The country's reputation is improving, leaving behind the chaotic 1980s and slowly transforming itself into a tourist destination. Despite some progress, Nicaragua is still the second poorest nation in the Western Hemisphere, with the incidences of diseases like malaria and tuberculosis growing. Over forty five percent of the population lives under the poverty line, and less than seven percent have health insurance. Geography, socioeconomic status, gender and ethnicity all effect a citizen's access to health services, with marginalized groups bearing the heaviest burden.

Since FIMRC's launch in Limón, tourism has grown due to the close proximity of the Pacific Ocean and the perfect waves, the beauty of green pastures lining the coast and the rise in foreign investment. Unfortunately, infrastructure that directly impacts the health of our patients, such as potable water, has not improved and common health issues persist. Basic services also lack, with FIMRC hosting the only pediatrician and OB/GYN in the region. Many local officials say that the area is on the verge of an immense amount of growth, but the basic infrastructure in the area is comparable to that of an area that sees no tourism or foreign investment.



SAM, 2015

"My time at Project Limon was spent serving, learning, helping, and growing as a student, person, and future professional. I gained a valuable perspective of the challenges that can face the healthcare system in other countries, and particularly in rural communities with limited resources."

15%

880,500 residents of Nicaragua live without sustained access to a clean water source, comprising about 15% of the population.

⁵ http://www.who.int/countryfocus/cooperation_strategy/ccsbrief_nic_es.pdf?ua=1



CLINICAL ACCESS

- FIMRC's clinic provides specialty care to women and children
- In-home prenatal and postpartum check-ups
- Support government health post and medical brigades

HEALTH EDUCATION

- Prenatal Program and home health visits
- Diabetes control and education
- Health education sessions in local schools

VOLUNTEER PARTICIPATION

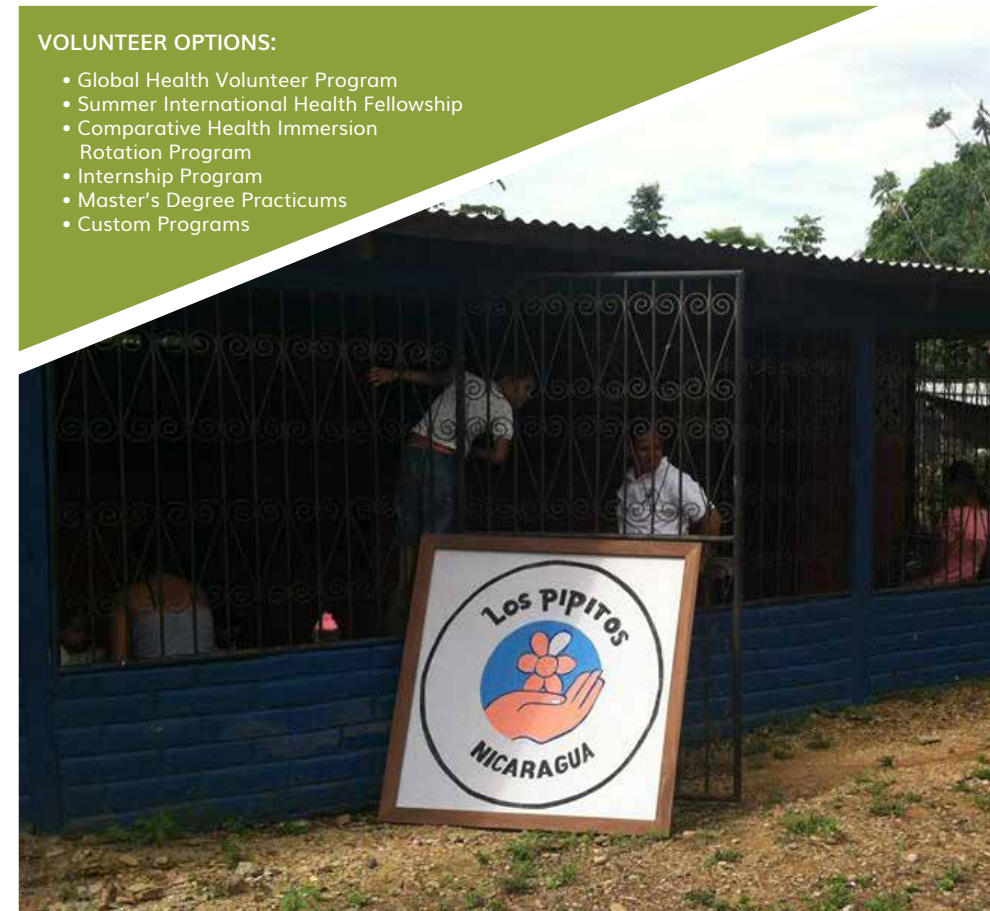
- Assist medical staff with clinic operations from intake to pharmacy
- Conduct home visits for prenatal and diabetes programs
- Perform physical therapy activities with the children at Los Pipitos Development Center

Our mission is to improve pediatric and women's healthcare in the area by providing medical care at our clinic. Working in tandem with the Las Salinas Health Post, we complement the primary care services offered to the community by employing an OB/GYN and pediatrician to provide specialty services. We are also working to bring down the high child illness and mortality rates by instituting preventative health measures and extensive outreach efforts including prenatal home visits, health education sessions, as well as physical therapy for children with developmental disabilities.



VOLUNTEER OPTIONS:

- Global Health Volunteer Program
- Summer International Health Fellowship
- Comparative Health Immersion Rotation Program
- Internship Program
- Master's Degree Practicum
- Custom Programs



Program Spotlight

Los Pipitos Developmental Program

The Los Pipitos Developmental Program aims to provide support to children with disabilities as well as their families. Program participants meet at the therapy center two to three times per week for physical therapy and additional stimulating activities depending on each child's specific needs. FIMRC regularly performs developmental exams on all pediatric patients to determine if placement in the program is needed. The children currently in the program have shown marked improvement in functional skills and FIMRC aims to increase participation to at least 40 children and 20 mothers weekly. With the assistance of FIMRC clinical staff and Global Health Volunteers, Los Pipitos patients are able to receive high quality care and individualized attention.

PERU • Projects Huancayo & La Merced

Culturally rich and vibrant with many contrasting regions, Peru is a diverse mix of coastal towns, urban city centers, and mountainous jungles. As such, the face of healthcare looks drastically different in each location. Project Peru is unique in that FIMRC operates in two distinct areas – Huancayo and La Merced. Huancayo is located in Peru's central highlands, about eight hours from the capital city of Lima and is the fifth largest city in the country. Huancayo's vibrant culture makes it a popular tourist destination, yet common issues such as overcrowding and lack of access still plague the local population. In contrast, Project La Merced is located in the Amazon basin about 9 hours from Lima and has a population of over 150,000. La Merced is known as the gateway to the indigenous populations of the Ashaninka, Yanetsha, and Amuesha, communities rich in native languages and culture. Despite the recent construction of a new tropical medicine hospital, many communities still lack access to care.

In Peru, the varied terrain, cultures and resources provide both opportunities and challenges to economic development, education and healthcare and our work is directly influenced by these differences. Indigenous populations have held on to native languages and cultural practices, making patient care and community outreach efforts more complex. Traditional medicine is often the preferred choice of healthcare, and when the native populations seek treatment, it tends to be because their condition has worsened and they are in need of immediate and more advanced care. FIMRC works to address the complexity of working in such environments by employing a partnership model with the goal of increasing access to quality medical care as well as to execute health initiatives aimed at increasing awareness and education of significant health issues in the area.



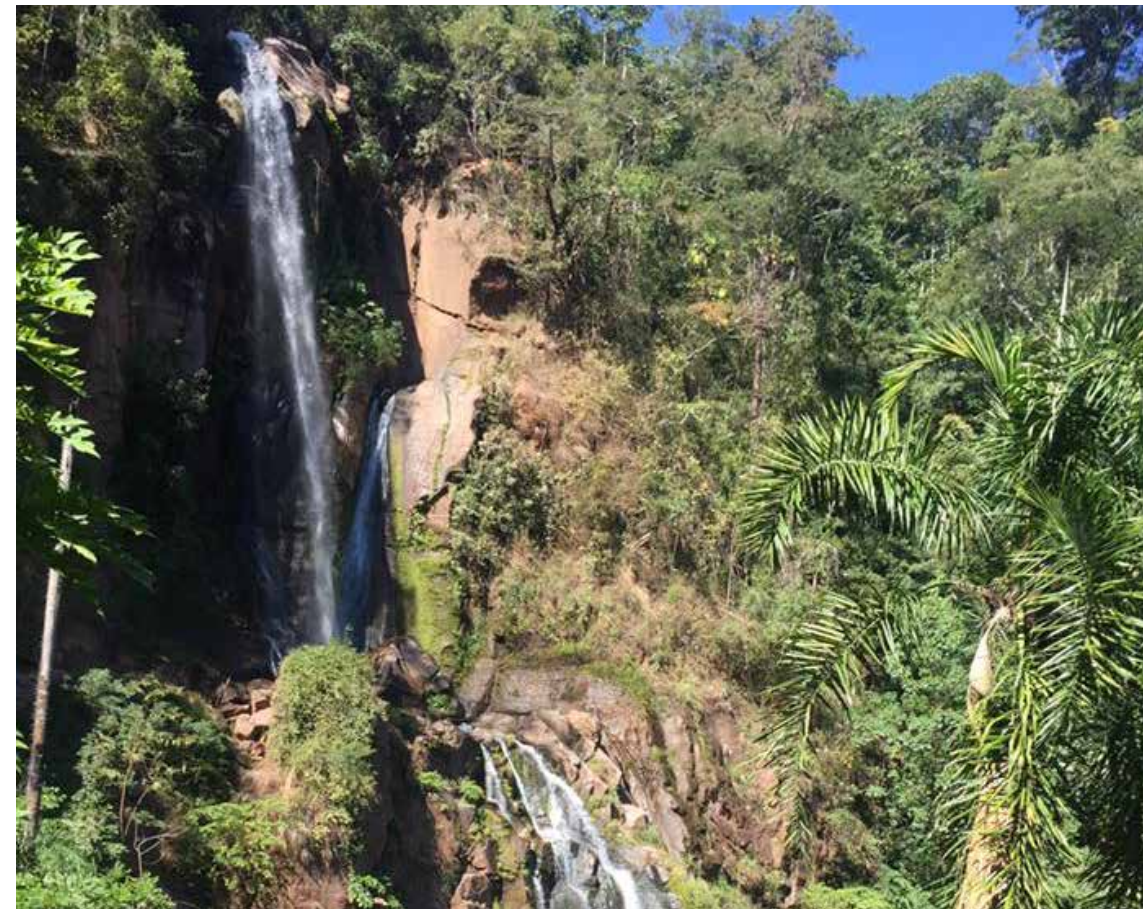
BRYCE, 2016

"The program encourages a mixture of service, professionalism, adventure and self-development. It is an excellent opportunity for the volunteer to serve, assess their career interests, and explore the world."

45.9%

Peru has made a concerted effort to increase the percentage of citizens who have medical coverage. However, 45.9% of Peruvians still do not have any form of medical insurance.

⁶ http://www.who.int/countryfocus/cooperation_strategy/ccsbrief_per_en.pdf?ua=1



CLINICAL ACCESS

- Support local medical partners
- Glucose and blood pressure screenings in remote communities
- Fluoride treatments in local schools

HEALTH EDUCATION

- Dale La Mano (Orphanage Education Program)
- Nutrition Program
- Reproductive health education sessions with youth in area schools

VOLUNTEER PARTICIPATION

- Provide glucose and blood pressure screenings
- Assist with patient intake at Sapallanga Health Center
- Lead education session with local orphanage partner

Project Huancayo

Our mission is to provide health education and offer support through collaborations with hospitals, clinics, schools, orphanages and other local organizations. Through these partnerships, we are able to address underserved communities and the health issues, both major and ignored, that afflict them. These partnerships also afford volunteers the unique opportunity to gain exposure in public hospitals and clinics.



VOLUNTEER OPTIONS:

- Global Health Volunteer Program
- Summer International Health Fellowship
- Comparative Health Immersion Rotation Program
- Internship Program
- Master's Degree Practicum
- Custom Programs



Program Spotlight

Dale La Mano

The 'Dale la Mano' program focuses on providing health education to children ages 5 to 13. 'Dale La Mano' (Lend A Hand) encompasses four main and crucial components including: health education, financial management, emotional support and environment health. FIMRC staff and volunteers give weekly sessions, using participatory education techniques, allowing the children to learn in a fun environment. The program takes one full year to complete and currently takes place at FIMRC's three main orphanage partners - Castilla y León Children's Home, Gelicich Orphanage and Sicaya Orphanage. In the future, field staff plan to expand the program to reach children in orphanages surrounding Huancayo as well as at our project site in La Merced.

Project La Merced

Our mission is to raise awareness of public health issues and to improve access to preventative care and education. Through collaboration with medical facilities and other area partners, Project La Merced takes a holistic approach to improving health in the area. We provide free health screenings, offer economic empowerment and meditation sessions, as well as lead efforts to improve access to running water in native communities.

CLINICAL ACCESS

- Support Hospital La Merced and San Ramon Health Post
- Health campaigns in native communities
- Fluoride treatments in schools

HEALTH EDUCATION

- Yoga and meditation sessions
- Nutrition counseling during community health campaigns
- Reproductive health education sessions with youth in area schools

VOLUNTEER PARTICIPATION

- Assist with patient intake and development exams with local health center partners
- Provide blood pressure and glucose readings during health campaigns
- Assist with developmental activities at San Ramon special needs school



VOLUNTEER OPTIONS:

- Global Health Volunteer Program
- Summer International Health Fellowship
- Comparative Health Immersion Rotation Program
- Internship Program
- Master's Degree Practicum
- Custom Programs



Program Spotlight

WASH Program

The WASH (Water, Sanitation, and Hygiene) Program currently takes place in the native community of Belen. FIMRC aims to decrease the rates of waterborne and preventable illnesses through education on sanitary practices as well as improved access to safe water. Efforts include improving the current sanitation facilities for the Belen Day Care Center, bringing running water to the center, and also improving WASH knowledge among day care center staff, students, and community members. FIMRC volunteers and staff frequently lead sessions on hand washing, water treatment, proper water storage, as well as prevention of parasitic infections. In the future, we hope to expand WASH programming to additional native communities surrounding La Merced.

ECUADOR • Project Anconcito

Located two hours west of Guayaquil, Ecuador's largest city, sits the coastal town of Anconcito. Although only a short drive from the popular destination of Salinas, known for its pristine beaches, upscale resorts, and ideal surfing conditions, Anconcito is relatively unknown and is served by only one small clinic. As a result, problems such as malnutrition, chronic illnesses, and teenage pregnancy are becoming more prevalent.

Ecuador currently offers universal healthcare to its population, and its "National Plan for Good Living" (Plan Nacional Para el Buen Vivir) has promised to implement policies that promote the prevention of disease and foster healthy lifestyles. Although the population of Anconcito has access to a government clinic, wait times have increased, services are limited, and there are no options for emergency medical care after hours. With an understaffed facility and limited access to health education, the population continues to face high rates of type 2 diabetes, respiratory infections, diarrhea due to improper food and water sanitation, malnutrition, unplanned pregnancies, and substance abuse. FIMRC has conducted a community wide needs assessment to further understand the health issues presented in the community. Based on the findings of the needs assessment, and in partnership with the local government and health center in Anconcito, FIMRC aims to bring improved access to health education to the community and also hopes to work directly with the current facility to improve patient access to high quality care.



OLIVIA, 2016

"Future FIMRC volunteers will be able to continue assisting the government clinic with school visits and promoting health and nutrition through charlas [education sessions] at the schools. Thank you for all of the laughter.. memories, and lessons Anconcito."

26%

Percent of Ecuadorian children under the age of 5 affected by stunting from chronic malnutrition. In rural areas, the rate is 31%.

⁷ <https://www.wfp.org/countries/ecuador/overview>



CLINICAL ACCESS

- Support local health post that provides primary care and dental services
- Conduct home visits in the community alongside Ecuadorian doctors and nurses

HEALTH EDUCATION

- Chicas Maravillas and Superman (Youth Empowerment Programs)
- Nutrition education sessions in local schools
- Health promoter trainings for local volunteers

VOLUNTEER PARTICIPATION

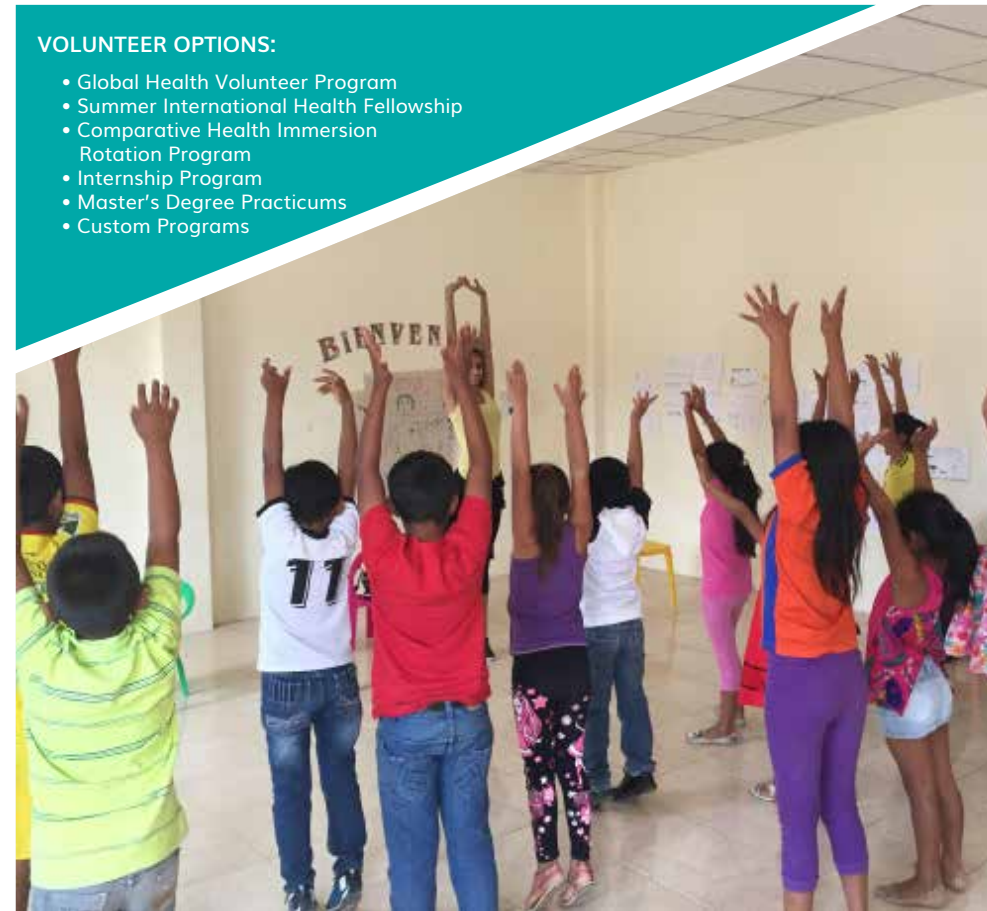
- Assist staff with patient intake and pharmacy operations at the government clinic
- Lead health education sessions in a local school
- Attend home health visits with local medical professionals

Our mission in Anconcito is to reduce the high rates of preventable diseases by improving the population's access to health education, increasing access to specialty and after hours health services, as well as working with the current health post to improve wait times and quality of care. Also, in partnership with government leaders, local volunteers, educators, and community members, we have expanded access to education through our youth empowerment programs, home health visits, nutrition sessions, and health promoter trainings.



VOLUNTEER OPTIONS:

- Global Health Volunteer Program
- Summer International Health Fellowship
- Comparative Health Immersion Rotation Program
- Internship Program
- Master's Degree Practicums
- Custom Programs



Program Spotlight

Youth Empowerment

Wonder Girls, known as 'Chicas Maravillas' and Club Superman are two youth empowerment programs that seek to improve basic health and reproductive knowledge for girls and boys ages 8 - 12. Program participants progress through an eight session curriculum that focuses on personal and dental hygiene, nutrition, HIV/AIDs, and reproductive health. The program was created in 2013 at Project Restauración, Dominican Republic where over 300 participants have graduated from the program. Now in its pilot phase at Project Anconcito, over 50 children from the local community are participating in the program. We are hopeful, that with the assistance of our Global Health Volunteers, we will be able to expand our reach to additional schools in the area.

UGANDA • Project Bududa

Project Bududa looks up on Mount Elgon, an extinct volcano that traverses Uganda and Kenya's border. With fertile volcanic soil, agriculture is the backbone of this district, a livelihood in the area that can barely feed a family let alone bring in a substantial income. Most of the residents make an average annual income of only 200 US dollars. Many do not have sufficient access to healthcare, by virtue of both their location and the significant personal expense required to travel to a clinic. According to the World Bank, out-of-pocket expenditures account for over 30% of all healthcare spending in the country. There are huge inequalities in outcome between different regions and economic classes.

Uganda has a highly fragmented and decentralized system of government, leading to little coherency in the healthcare system, and many districts have little or no access to resources for public hospitals or clinics. Many issues plaguing the country are solvable with education and increased funding, with a focus on preventative measures and consistent monitoring. FIMRC aims to address these issues through the operation of our clinic. It is a hub for the delivery of acute and preventative healthcare to the underserved Ugandan community. Health education is unique at Project Bududa in that community members themselves are heavily involved in the dissemination of educational information. The work relies on Community Health Educators (CHEs), who travel to educate villagers on health care concerns.



KARA, 2016

"My experience in Uganda was unlike any that I've ever had. I learned a new sense of appreciation, respect, compassion, knowledge and wisdom that can only be learned from another culture. It was such an amazing month."

22

The difference between infant mortality rates from 2010 to 2006, which has dropped from 76 to 54 per 1000 live births.

⁸ http://www.who.int/countryfocus/cooperation_strategy/ccsbrief_uga_en.pdf?ua=1



CLINICAL ACCESS

- FIMRC clinic provides care to patients of all ages
- Promotion of proper pre and post natal care through the region's only antenatal clinic and maternity ward
- HIV testing and counseling
- Malaria testing

HEALTH EDUCATION

- Community Health Educator's (CHE's) deliver relevant health information to patients in hard to reach areas
- Health education sessions in the clinic waiting area

VOLUNTEER PARTICIPATION

- Assist medical staff at each station, from patient intake to exit interview
- Accompany CHEs on home health visits and postnatal check ups
- Learn how to test for malaria in the clinic laboratory

Our mission is to reduce the burden of accessing healthcare for the nearly 15,000 residents of Bumwalukani and outlying communities. We help fill the gaps left by the Uganda government by working with the Ministry of Health, local Community Health Educators (CHEs) and a large clinic staff. The FIMRC clinic is equipped to provide high quality care to over 2,500 patients monthly. Our CHEs also organize extensive health education and outreach programs that aim to curb the spread of common endemic diseases and include our OVC Program, Maternal and Child Health Program, and Post Test Club.



VOLUNTEER OPTIONS:

- Global Health Volunteer Program
- Summer International Health Fellowship
- Comparative Health Immersion Rotation Program
- Internship Program
- Master's Degree Practicums
- Custom Programs



Program Spotlight:

OVC Program

Children who are HIV positive and have lost one or more parents are evaluated for enrollment into our Orphans and Vulnerable Children (OVC) Program. Each child in our OVC Program is assigned a trained guardian who will mentor the caretakers of the child and act as a link between the FIMRC Health Center and the OVCs and their families. These guardians promote medication adherence, teach children the importance of taking antiretroviral medications daily, how to maintain healthy habits and provide moral support. The OVCs, ages 2–14, meet for monthly "Activity Days" for games, health education, and bonding while the caregivers meet regularly to receive refresher courses and trainings to ensure high quality care.

PHILIPPINES • Project Cavite

Located just 13km outside of Metro Manila, Cavite's landscape is painted by mountain ranges, lowlands, and shoreline fronting Manila Bay. It is a diverse province that is experiencing one of the largest growth rates in the country, both in relation to infrastructure and population. Many of the health issues faced in Cavite are a direct result of increased access to modern conveniences while still lacking education and resources for health knowledge. Non-communicable diseases are becoming more pervasive in the province, with increased rates of diabetes, cardiovascular disease and obesity.

The Philippines has gone through a major transition in their healthcare system in the past several decades. They now have a decentralized healthcare system aimed at improving services offered. However, the reality on the ground is much different than the original intentions set out in the restructure. While there is more of a focus on public and preventative health programs, a fragmented system has caused many to fall between the cracks. FIMRC seeks to address the issue by working with the province of Cavite and the University of the Philippines to empower the community through health education and community development programs. The project site is unique for FIMRC in that we are working with five different municipalities within Cavite through our partners and Community Organizers. The ultimate goal is to increase knowledge, community involvement and the way in which the government delivers services in the area.



THERESE, 2016

"I was able to shadow doctors, help in a pharmacy, and observe the status of healthcare in the Philippines that I wouldn't have been able to do in the United States and I'm grateful for the experience."

2x

Between 1997 and 2005, the number of diabetes patients has more than doubled. That number only continues to increase.

⁹ http://www.wpro.who.int/asia_pacific_observatory/Philippines_Health_System_Review.pdf



CLINICAL ACCESS

- Work with local midwives and health care providers to increase capacity
- Work with University of Philippines to provide support in rural clinics
- Promote PhilHealth in the local communities

HEALTH EDUCATION

- Work with Barangay Health Workers to train community members
- Diabetes prevention and hypertension control
- Train midwives on computer skills for Department of Health reporting

VOLUNTEER PARTICIPATION

- Assist residents and doctors in rural health clinics
- Assist Barangay Health Workers with blood pressure and glucose screenings

Our mission is to increase public awareness about services available in the province and improve health education. We strive to work in conjunction with the communities, the local government, and the University of Philippines to develop programs and strong community leaders to increase knowledge. We also aim to promote the implementation of healthy habits through increased access to services and resources to make the necessary changes to improve health outcomes.



VOLUNTEER OPTIONS:

- Global Health Volunteer Program
- Summer International Health Fellowship
- Comparative Health Immersion Rotation Program
- Internship Program
- Master's Degree Practicum
- Custom Programs



Program Spotlight

PhilPEN Health Screenings

An initiative of the Filipino government and local health care providers is the prevention of diabetes and other non-communicable diseases. In partnership with the University of the Philippines and the provincial government, FIMRC is working with team members on the ground to screen community members of five municipalities and implement a prevention and control strategy. After the final analysis of screening has taken place, each community will develop their own educational and monitoring plan for those identified with uncontrolled diabetes or hypertension. Some communities are already ahead of the game due to increased awareness from the program and have asked for assistance on healthy lifestyle changes. We recently launched Zumba as an answer to community requests!

OUR VOLUNTEER OPTIONS

There are many ways to get involved with FIMRC! Volunteer abroad at one of our sites, initiate a chapter, or fundraise in support of our clinics. Your participation is central to the overall success of FIMRC's mission of promoting health worldwide. Below is a list of locations as well as specialized programs. No matter the path you choose, you can make an impact and gain valuable experience.

HEAR FROM OUR VOLUNTEERS

"

I loved the whole trip! I felt like I was able to do a lot in only a week. I liked that we were able to work every day, but were still immersed in the culture by living in our homestays.

"

Melissa,
Costa Rica 2015

"

The diversity of the mission work set up through FIMRC gives countless opportunities. I was able to play with the children, participate in health promoter classes, and shadow in the local hospital.

"

Ellen,
Dominican Republic
2016

"

The clinical experience was extremely beneficial. Dr. Arun's knowledge and love of teaching made him such a pleasure to work with and I learned so much.

"

Veronica,
India 2016

"

At first, I was intimidated to travel alone to another country but the FIMRC staff takes such good care of their volunteers and made it one of the best trips I have ever been on.

"

Darya,
Nicaragua 2015

"

I've been through several volunteer programs and this was one of the most enriching and rewarding experiences I've ever had.

"

Angie,
Peru 2015



GLOBAL HEALTH VOLUNTEER PROGRAM

Our international volunteers are the heart of FIMRC; without you we could not provide the level of individualized care and heartfelt community interaction we maintain at our clinic sites. Short-term and long-term opportunities are available at all of our project sites!

Dominican Republic • **Nicaragua** • **Costa Rica** • **Peru** • **Ecuador** • **Uganda** • **India** • **Philippines**



SUMMER INTERNATIONAL HEALTH FELLOWSHIP

SIHF is a four to eight week immersion and service program designed for undergraduate students, recent graduates interested in medical professions, Physician Assistant students, and 1st or 2nd year medical students. The program provides an intensive daily clinical experience and community outreach opportunities based on current programming at each of the participating project sites.

Dominican Republic • **Nicaragua** • **Peru** • **Ecuador** • **Uganda** • **India** • **Philippines**



INTERNSHIP PROGRAM

The FIMRC Internship Program provides the most driven individuals with an opportunity to gain hands-on experience developing innovative and sustainable solutions to a variety of global health challenges. Two types of internships are offered based on length of stay. As a FIMRC Ambassador, you commit to 3 to 6 months on site while Fellows commit to 7 months to 1 year (or more!) on site.

Dominican Republic • **Nicaragua** • **Costa Rica** • **Peru** • **Ecuador** • **Uganda** • **India** • **Philippines** • **HQ**



COMPARATIVE HEALTH IMMERSION ROTATION PROGRAM

Our Comparative Health Immersion Rotation Program (CHIRP) is a program for medical students and residents alike – the experience is tailored to your level of experience and the requirements of your school or rotation program. The program provides exposure to clinical activities and preventative health initiatives, but varies depending on the main health issues and program structure in-country.

Dominican Republic • Nicaragua • Costa Rica • Peru • Ecuador • Uganda • India • Philippines



MASTER'S DEGREE PRACTICUMS

Are you an MPH student looking to fill a practicum requirement? We love to work with graduate students to fulfill academic requirements while also making a tangible contribution! Our team works one-on-one with students and institutions to arrange rotations according to the specific requirements of each academic program.

Dominican Republic • Nicaragua • Costa Rica • Peru • Ecuador • Uganda • India • Philippines • HQ



GLOBAL HEALTH NURSING FELLOWSHIP

GHN is a program for nursing professionals looking for an immersive experience into rural healthcare. It is tailored to the participant's experience, interests, and educational goals. Participants will gain exposure to international healthcare services, and continue to improve skills and abilities. This experience may qualify for continuing education hours.

Nicaragua



CUSTOM PROGRAMS

FIMRC is happy to work with university professionals as well as individuals to design custom programs to meet academic and personal requirements. Our goal is to create unique programs that meet all academic objectives through providing an authentic and enriching experience.

Dominican Republic • Nicaragua • Costa Rica • Peru • Ecuador • Uganda • India • Philippines • HQ

NEXT STEPS:

1

Contact missions@fimrc.org with your preferred location and travel dates to determine if we have availability

2

Upon confirmation of availability, you will receive a Welcome Letter (via email) that walks you through the official enrollment process

3

Begin to complete your volunteer profile and fundraise for your volunteer experience

4

Ensure that your profile and payment are complete by your enrollment deadline

5

Receive your Pre-Departure Packet

6

ENJOY YOUR TRIP!

WHAT'S INCLUDED

The cost of your program includes the program donation that supports our project sites, housing, meals, as well as on-site and airport transportation. Excursions and trips for non-volunteer related activities, as well as the associated costs, are not included.

SAFETY

At all of our project sites, we arrange transportation and housing to maximize safety. We work with our project staff to ensure that they are trained on safety measures and that you receive orientation upon arrival in-country. We require medical evacuation insurance. We constantly update our safety protocol to ensure that we are doing our best to keep you safe. We work tirelessly to ensure that you have a safe and comfortable experience. Safety is our priority!

FUNDRAISING

All volunteers receive access to FIMRC's custom fundraising platform. Through your very own FIMRC account, you can raise funds in support of your volunteer trip. This is a great way to include family and friends and allow them to contribute to your work in a tangible manner.

REFUND POLICY

We operate on an innovative model of financial sustainability supported by the Global Health Volunteer Program. In order to ensure the vitality of all projects, program donations and/or housing/transport fees submitted to FIMRC cannot be refunded. However, we will happily apply any received donations or fees towards a future experience at one of our project sites or towards the account of another volunteer of your choice.

STAY CONNECTED

FIMRC offers many great opportunities to stay connected and involved in our work across the globe including an extensive Alumni and Chapter network.

Chaptership Program

The Chaptership Program extends to over 70 chapters in the United States, Australia and Canada. Our Chapters travel, fundraise, and volunteer in their local communities. For more information about joining or starting a chapter in your area, visit www.fimrc.org/chapters.

Alumni Program

Returned volunteers are invited to join FIMRC's alumni network that includes over 4,000 world travelers who are passionate about FIMRC's mission! Visit www.fimrc.org/alumni for more information.





Join the Movement.

