# 2025 Annual Report



Health Equity International



## *Dear Friends,*

The past year tested all of us at Health Equity International and St. Boniface Hospital in unprecedented ways. But it also reminded us of the **unshakeable foundation beneath our feet**.

The loss of our USAID grant and our shelter and stabilization program in 2025 were profoundly difficult existential moments for our organization. But what happened next reaffirmed everything we believe about **the power of community and shared purpose**.

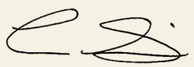
You stood up. Our staff stood up. Our partners stood up. And together, we kept St. Boniface Hospital's doors open while continuing to improve the quality and reach of our care.

In the following pages, you will learn more about how we **adapted, innovated, and cared for thousands of patients across more than a dozen world-class services**. Along the way, I'm excited for you to meet patients like Chèry, who had a healthy pregnancy with a little help from our maternal support groups. You'll also meet staff members like Dr. Jules, who works tirelessly to keep raising the bar for his patients.

Today, we stand more firmly in our guiding principles than ever before. We lead with compassion and the deepest respect for humanity and personhood. We reject despair and refuse to let setbacks define us. And we will never give up on the people we serve, no matter what.

Your support, partnership, and unwavering faith in our work have helped us find our way forward, step by step. From all of us at Health Equity International and St. Boniface Hospital, thank you.

Kenbe fèm,



**Conor Shapiro**

*President and CEO*
*Health Equity International*



# What We Do

## Health Equity International provides essential health and support services for those in need.

We run St. Boniface Hospital, the largest healthcare provider in southern Haiti. We built this special place from the ground up, in partnership with the community we serve.

Every service is designed to meet and evolve with our patients' needs. Our doors are always open, and no one is ever turned away for any reason.

Medical professionals come from across the country to learn and expand their skills. And, our community health programs help people get care without needing to travel far.

Health Equity International believes good health helps everyone reach their full potential. Through quality, dignified, compassionate services, we are building a healthier world.




# By the Numbers

## St. Boniface Hospital provided uninterrupted, high-quality, and affordable healthcare to every patient in need.

Throughout the year, the humanitarian crisis continued to make it extraordinarily difficult to access and provide care. But despite immense challenges, our heroic staff worked tirelessly to keep our doors open and every service running.

**102,169**
Outpatient visits

**3,433**
Surgical procedures

**9,030**
Inpatient admissions

**1,352**
C-sections

**3,077**
Births

**5,925**
Emergency room visits

**1,045**
NICU admissions

**74**
Young medical professionals trained

# Patient Care




# Maternal, Neonatal, and Child Health

## Improving Outcomes

St. Boniface Hospital continues to improve health outcomes for women and children in our care despite mounting difficulties from Haiti's ongoing humanitarian crisis.

The crises forced more healthcare facilities across Haiti to close in 2025. With each passing month, it has become harder and harder for Haitians to find even the most basic care.

As a result, **we have seen more patients arriving at St. Boniface Hospital with complex and urgent needs**. This trend has been particularly pronounced with women who come to deliver their babies, 90% of whom come from outside of our catchment area.

Over the past five years of crisis, the volume of women with high-risk pregnancies has steadily increased, from 34% in 2020 to a staggering 52% in 2025. C-section rates have also steadily climbed, from 42% to 45% over the same period.

Yet despite these challenges, **our maternal and neonatal mortality rates remain low**, our patients are experiencing fewer complications during deliveries, and more women than ever before are attending prenatal appointments.

While many complex factors contribute to these positive health outcomes, we believe our maternal support groups and home visit program are a key part of helping perinatal women and their children stay well.

*Left: Hospital staff assist a young patient recovering from surgery.*

## Healthy at Every Stage

Maternal support groups **empower pregnant and postpartum women with the knowledge they need** to keep themselves and their babies healthy before, during, and after delivery.

Sessions are held at St. Boniface Hospital, 2-3 times per month, for approximately 30-50 patients per session. In 2025, we were proud to hold 25 sessions for 1,238 total attendees.

Each session is facilitated by a social worker, nurse-midwife, or community health nurse, leveraging their years of experience. Topics include spotting warning signs of gestational diabetes, preparing for childbirth, breastfeeding techniques, and more. Attendees are encouraged to ask questions and speak with facilitators or other maternal health staff members about any concerns or issues.

"I have been attending maternity support groups since I was 3 months pregnant," says 28-year-old Chèry. She rapidly lists off everything she learned: how to eat well so her baby stays well-nourished in the womb, the benefits of breastfeeding, and even what to wear to the hospital for delivery. However, one of the most important things she learned was how to prepare her mind and body for labor. "The midwives taught me how to have good mental fortitude when I give birth, so that I don't lose strength, so that my delivery can go well. **I felt good when my delivery went well.**"

Chèry has encouraged many other women in her life to attend maternal support groups, so they can keep themselves and their babies healthy and safe. "I highly recommend the quality of care provided by HSB hospital," she says. **"For me, it is the best place a mother can get care."**

*Right: Chèry cradles her newborn baby.*

# *"For me, it is the best place a mother can get care."*



## Intensive Care for Little Patients

Baby Atsou Ruth was born more than a month premature at a hospital in Petit-Goâve, a city on the coast of Haiti's southern peninsula. She needed intensive care, and **the only fully functional neonatal intensive care unit (NICU) in the region is at St. Boniface Hospital**. Her parents, Angelo and Roodny, bundled her up and made the long, rocky trek to our doors.

Atsou Ruth is one of 1,045 babies admitted to our NICU in 2025. Overall admissions increased 8% compared to 2024, and we cared for as many as 50 babies at any one time—a staggeringly high volume. More than 40% of the babies were born prematurely, like Atsou Ruth.

Despite the high volume of critically ill patients, we continued to lower our already-low neonatal mortality rate thanks to a combination of **rigorous infection-prevention practices, highly skilled and dedicated staff, and ongoing training**.

One of these trainings was a refresher course for nurses on the benefits of breastmilk for infants in the NICU. In this training, our nurses reviewed how to provide lactation support for mothers, how to encourage breastfeeding, different ways we feed babies in the NICU, and how breastfeeding can support infants' overall health. After the training, our nursing team has been able to provide important information and logistical support for mothers interested in breastfeeding, and helped more mothers try this important feeding method with their children.

## Protecting the Future of Haiti

We cared for a *lot* of children in 2025. **In total, we saw 8,460 pediatric visits at our outpatient clinic, and an additional 1,000 visits to our emergency room**. We also saw 351 admissions to our pediatric inpatient department, 68% of whom were under 5 years old.

"When I saw my child was not well, I decided to bring him to the hospital because he had a headache, the flu, and a fever," says Roseme. "I chose to bring him here because this is where I work, and where I would find good care, because I always see them providing good care."

As a member of our housekeeping team, Roseme herself is an integral part of making every patient's stay a comfortable, dignified experience. So when her three-year-old son Franck became unwell, **it was an easy decision to bring him to St. Boniface**.

Roseme spent seven days in our pediatric service with Franck as he slowly recovered from the flu. She appreciated how the care she and our staff give each patient was returned to her when she needed it. And she was relieved that once she and Franck went home, **he went right back playing happily—just as every child deserves**.





*Top: Angelo checks in on Atsou Ruth.*
*Bottom: Roseme and Franck in the pediatrics ward.*

# *Infectious Disease*

## A Safe Place to Recover

Providing dignified care is essential in every service at St. Boniface Hospital, but is especially critical in our Infectious Disease Center.

Patients living with highly contagious conditions like tuberculosis often face intense shame and stigma, which sometimes causes patients to hide their symptoms and not seek care. We've worked hard to make our Infectious Disease Center a **warm, welcoming, and comfortable environment** for patients during their recovery.

In 2025, we admitted 98 patients with tuberculosis to the center for inpatient care. In total, we had 121 patients actively enrolled in our tuberculosis treatment program.

Recovering from tuberculosis can take six to nine months or more, and requires adhering to a very strict medication regimen. Our treatment program helps us accompany patients on this journey with regular checkups, medication deliveries, and more. **No one should have to walk the long road to recovery alone and unguided**. By accompanying our patients every step of the way, we demonstrate that compassion is essential to providing quality care.

## Saving HIV/AIDS Care

"This situation really traumatizes people," says HIV peer educator Erika* as she reflects on how foreign aid cuts threaten HIV funding and treatment resources in Haiti. "If the program ends, there will be many, many people who will have

*Right: Recovering for tuberculosis can take months, but we accompany our patients every step of the way.*

***No one should have to walk the long road to recovery alone and unguided.***



difficulty staying alive, because the medication is life."

When our USAID grant was cancelled, we suddenly lost a substantial portion of our HIV/AIDS funding. Shortly thereafter, the U.S. government threatened to cut funding for the President's Emergency Plan for AIDS Relief (PEPFAR). Global foreign aid declined.

For Erika and the 1,298 other patients currently enrolled in our HIV/AIDS program, these sudden and unpredictable shifts in funding are a matter of life and death.

**Despite ongoing uncertainties, our HIV/AIDS treatment and support program continues to save lives** because our generous community rose to support it.

Erika is an important part of this program. As a peer educator, she meets with newly-diagnosed patients and helps them understand how to take their medications and stay well.

Her effectiveness comes from her own lived experience: she herself has been a patient in our program for more than two decades. "What makes me proud of my work is that I have a lot of people who were in denial, who did not accept that they were HIV-positive, and by connecting with me, I'm like a light for them. **They become encouraged, they take the medication, they are living just like I am**."

Through our program, patients who test positive for HIV receive a custom treatment plan and lifesaving antiretroviral medications. Erika makes sure every patient leaves knowing when and how to take these medications, and reassures them that they can live a full, healthy life if they adhere to treatment. Patients also receive regular checkups, nutrition support, and psychosocial support. If a patient can't travel to the hospital for regular care or to refill their medications, our community health team goes to them. In 2025, we conducted 3,551 of these home visits for HIV+ patients in need.

"There has been a lot of progress," says Erika. "There were places where people used to point fingers at people who had HIV. Now ... it's minimal. Due to the medications, someone comes to know that if they take it, they'll live. **I think it's been a beautiful change**."

*Below: Antiretroviral medications to treat HIV/AIDS.*



# *Emergency Care*

## Ready for Every Case

Seven-year-old Slandine lies surrounded by a blue netting in our emergency room. The netting is critical to help keep her wounds clean as they heal, away from dust and debris. She was severely burned by boiling water while her mother, Nata, was cooking. Nata has been by her daughter's side every day since they arrived. **Little by little, Slandine is healing.**

In the next bed, 10-year-old Kenley breathes deeply into an oxygen mask. He has been recovering from a lung infection for nearly two weeks. He and his father had to travel for more than an hour and a half to get here from their home on the coast of Haiti's southern peninsula. His father has not left his son's bedside.

*Top: Slandine recovers with Nata at her side. Bottom: Kenley breathes with the help of medical oxygen.*

In 2025, we saw 5,925 visits to our emergency room, 18% of which were pediatric visits like Slandine and Kenley. The vast majority of visits were for adult patients, like Karline.

Karline was at home when she suddenly felt short of breath. Her children rushed her to St. Boniface Hospital's emergency room, where she lost consciousness.

Our staff jumped into action as her condition began to deteriorate. The team put Karline on oxygen and began administering medications to stabilize her. After running tests, we found Karline was experiencing complications from previously undiagnosed diabetes. From there, we were able to **create an action plan not just for Karline's immediate emergency but also for her long-term care**.

Over the next nine days, our staff was able to lower Karline's blood sugar and started her on a new medication regimen to help keep it under control. We also enrolled her in our **non-communicable disease clinic**, where patients receive routine checkups, ongoing support including nutritional and movement guidance, and access to events such as our annual World Diabetes Day event every November.

**Karline's children were relieved when their mother was ready to be released.** They told us that if they had not run to St. Boniface Hospital for care, Karline would have lost her life. We were glad to see Karline return home with her beloved family and will be here to help her, 24/7, whenever she is in need.

> **18% of ER visits in 2025 were for children.**





# Internal Medicine

## Above and Beyond

Our internal medicine service provides adult inpatient care for everything from noncommunicable diseases to gastrointestinal problems.

Joseph* is one of 801 patients who were admitted to the department in 2025. Joseph was diagnosed with malaria at another hospital. **But as his condition deteriorated, he was transferred to St. Boniface Hospital for more intensive care.**

When he arrived, Joseph was suffering from body aches, fever, and delirium. He was immediately placed on oxygen and given fluids. After conducting tests, our team began giving him a medication used to treat severe malaria. He was also placed under a mosquito net to prevent his illness from spreading.

Joseph spent two weeks recovering in the department and was astounded that **he didn't have to pay a dime**. He also couldn't believe he received three nutritious meals a day, and that he didn't have to find and purchase his own oxygen or medications—something that's common at many other hospitals in Haiti. Before he left, he vowed to **always come to St. Boniface Hospital any time he needs care** and to spread the word about the quality care he received here.

> **Internal medicine patients are often shocked they can receive so much care at SBH, without having to pay anything at all.**

**Name changed to protect patient's privacy*

# Surgery

## Difficult Choices, Quality Care

"One of the biggest challenges we faced this year was the issue of medicine, and the supplies we need to operate at our standard," says Dr. Pierre Abdias Jules, St. Boniface Hospital's Chief of Surgery.

Finding and transporting essential resources has become extraordinarily difficult in Haiti. Most medicine and supplies enter the country through gang-controlled Port-au-Prince. **Every hospital in the country, including ours, has faced shortages and stockouts.** "It has forced us to look for other solutions," Dr. Jules says. His team has worked hard to conserve, sterilize, and reuse as many tools as possible. They have also adjusted how they schedule patients to ensure they always have the resources to care for emergencies.





*Top: Working in the internal medicine department. Bottom: Performing surgery.*

**Of the 3,433 total procedures the surgical team performed in 2025, 58% of them were emergencies**. Dr. Jules says diabetic foot issues are among the most common emergency procedures.

Diabetes can be tough for patients to manage in Haiti. Insulin can be difficult to keep cold at home, where refrigeration is scarce. Blood sugar testing strips are hard to find. And the cost of traveling to a healthcare facility can be more than most families can afford. Because of these and other factors, we frequently see patients experiencing severe complications from diabetes in our emergency room, surgical center, and internal medicine departments.

Dr. Jules remembers one such patient, who had sepsis from a severe diabetic foot infection and life-threatening acidosis. After evaluating the situation, Dr. Jules and his team amputated the patient's foot. This is a life-changing procedure, and it can be difficult for patients to cope. But Dr. Jules and his team were inspired by this patient's determination. **"With patience, he was able to finally return home, which was encouraging to the staff,"** Dr. Jules says.

When thinking about the future, Dr. Jules wants to keep moving his team forward. He wants to offer even more kinds of surgical procedures for patients in need, and continuously improve how they care for patients and their loved ones. He also wants to make sure his staff continues learning and growing, to always be the best they can be.

"I would like to thank the supporters," Dr. Jules says. **"Despite the difficult times, we will continue to provide care to the best of our ability and to those in need."**

**The surgery team provided 1,640 consultations in 2025.**

*Right: Dr. Pierre Abdias Jules*

*"We will continue to provide care to the best of our ability and to those in need."*



## A Race Against Time

Thirteen-year-old Wadnerson fell while playing soccer with his friends. He suddenly couldn't eat or even go to the bathroom.

His father, Mr. Rousselin, took him to two different hospitals near their home at the tip of Haiti's southern peninsula. Neither place had the resources to help. **Doctors recommended they go to St. Boniface Hospital**, but the journey would take more than four hours on rough, mountainous roads. Wadnerson's stomach was now swelling, and the pain was becoming unbearable. The pair had no choice—they had to make the trip, or Wadnerson might die.

By the time father and son arrived, Wadnerson's condition was dire. Our ER staff found he was suffering from a complete intestinal blockage and rushed him to our surgical center. **Because we have surgeons available around the clock**, our team was able to operate on Wadnerson right away to resolve the obstruction. Soon, he was recovering in our post-op ward.

"After the operation, everything went well," Mr. Rousselin said. "I congratulate the hospital for all of the care they gave Wadnerson. **And I will ask God to bless them and protect them, because a thank you is not enough.**"



*Right: Wadnerson was happy to finally go home.*

# *Spinal Cord Injury Rehabilitation*

## Independence and Support

Jean Ricot has been working as a rehabilitation specialist at St. Boniface Hospital's spinal cord injury (SCI) center since 2011. He was instrumental in helping dozens of patients regain their mobility and independence after Haiti's devastating 2010 earthquake. He says, "**I chose this profession because I have always loved helping people in need.** I have a love and a need to help people with disabilities."

Over the past 15 years, Jean has provided thousands of physical and occupational therapy sessions for hundreds of patients with SCIs or patients who are recovering from strokes, surgery, or injuries. In 2025, he and our team of physical therapy and rehabilitation specialists conducted 3,716 physical and occupational therapy sessions for SCI inpatients, and an additional 712 sessions for patients recovering from other conditions.

**At the end of 2025, we had 159 active beneficiaries in our SCI program.** Some of these patients, such as Galacxon, live at the center and receive daily support for their long-term recovery. In the summer of 2024, Galacxon was climbing a tree to pick a passion fruit when he fell and was severely injured. After receiving initial care in our emergency room and SCI center, we transferred Galacxon to Hospital Bernard Mevs in Port-au-Prince for neurosurgery. Galacxon then returned to St. Boniface for long-term rehabilitation and support. "I can't move my limbs, but I have things I couldn't do before that I can do now—like transferring from my bed to my wheelchair. **I'm very satisfied with the care I've received at the SCI Center. My health is good, and mentally, I accept myself.**"

*“I chose this profession because I have always loved helping people in need.”*




Jean is also proud of the progress Galacxon has made and the impact he has on his patients. He says, “What makes me most proud is when a patient is unable to do anything with his body, and with the therapy he receives, he can resume his activities. **I am happy to participate in helping the hospital provide care to the community and to other people from other places.**”

## Greater Mobility

“I climbed a mango tree to pick a mango. When I was climbing down, my foot slipped, and I fell,” says 13-year-old Jameson. “I was afraid to tell anyone because I didn’t want to get in trouble. But after a while, I started to feel pain in my lower back, and I felt that my feet became heavy. I couldn’t lift them.”

Jameson comes from a community called Chantal, towards the end of Haiti’s southern peninsula. For a long time, he didn’t have a wheelchair to help him get around. His father would carry him from place to place—a situation that is all too common for many Haitians with disabilities. Assistive devices, especially those that are properly sized and adjusted to the user’s specifications, can be very difficult to find. They also wear out quickly on Haiti’s rough terrain.



*Left: Jean and Galacxon in a rehabilitation session.*
*Right: Jameson in his new wheelchair.*

For more than 13 years, St. Boniface Hospital's SCI team and our friends at Hope Health Action have been working to provide **quality, properly-fitted assistive devices** to as many patients as we can.

Jameson is one of the youngest patients to receive a wheelchair from Hope Health Action. Our staff carefully adjusted every aspect of the chair to meet Jameson's height and needs. Proper fitting helps ensure the chair moves as it's supposed to and also protects the user from falls, nerve damage, pressure sores, and other injuries.

Today, Jameson is overjoyed with his newfound independence. "When I needed to move around, my father used to lift me up," he says. **"Now, with this wheelchair, I can get around and go where I want by myself."**




# *Community Health*

## Closing the Gaps

The community health team had a problem. For several months, their supply of essential childhood vaccines was inconsistent because of countrywide stockouts. They were also seeing fewer children coming to rally posts for important vaccine doses. Several of the vaccines we give, such as the polio and rotavirus vaccines, require multiple doses over time. Completing the full vaccine schedule is extremely important to protecting children—and everyone in the communities we serve—from dangerous illnesses.

The team devised a plan after our supply chain team moved mountains to replenish their supplies. **With a little effort, they knew they could catch children up on their missed vaccine doses.**

*Left: Vaccinating children is a critical part of our community health work.*

First, our community health workers (CHWs) included reminders about upcoming posts at church and during cultural events. Next, they made home visits to every family with a child missing a vaccine dose to personally invite them to the next rally post. Finally, they used a megaphone to broadcast information about the rally post the day before it was set to occur.

**The strategy worked.** Over the next several months, CHWs were able to catch children up on missed doses. By the end of the year, 483 children throughout the communities we serve completed their full vaccine schedule—an important step on their lifeline health journey.

> **CHWs also give out vitamins to help children grow healthy and strong.**

## From Doubt to Role Model

*Ti Fwaye* ("Little Hearth"), our free community nutrition program, has continued to make a difference in communities with high rates of pediatric malnutrition.

In these communities, CHWs identify caregivers of children who are thriving and train them to lead peer support groups, teach good cooking practices, and provide advice on proper feeding and nutrition to caregivers of malnourished children. **These *Ti Fwaye* learning groups help women empower one another and encourage skill sharing**. CHWs provide ongoing follow-up care and nutrition supplements, checkups to see if children are gaining and maintaining their weight, and additional support as needed. In 2025, we held 24 *Ti Fwaye* sessions for 322 adult participants and 292 children.

Mirlande was struggling silently. Two of her children—Slyedens, a 3.5-year-old boy, and Bedjina, a 23-month-old girl—were showing clear signs of malnutrition. Although CHWs encouraged her to enroll her children in *Ti Fwaye*, Mirlande hesitated. She worried about being judged, "People will say I don't take care of my children," she said. She convinced herself her children's weakness was only temporary.

Her lack of confidence and fear of stigma held her back, despite repeated counseling. But things changed when CHWs organized an education session that explained the importance of nutrients for child development, the dangers of untreated malnutrition, and the successes of other mothers who had joined the program. As her children grew weaker, Mirlande's doubts began to give way. The words of the health staff touched her heart, and she finally enrolled her children in *Ti Fwaye*.

Within weeks, **Mirlande saw a remarkable difference as both of her children carefully gained weight**. Their faces grew brighter, and they regained the energy to play again. What began with hesitation for Mirlande became a turning point.

**Today, Mirlande has transformed regret into advocacy. Once hesitant and doubtful, she is now a proud voice in her community**, encouraging other mothers to seek care without fear or shame. Her story illustrates how education, trust, and supportive follow-up can empower caregivers to overcome stigma, embrace lifesaving services, and ultimately become role models for others.

## Jaden Mwen

**"This activity fosters a very intense joy,"** reports Nurse Lubin Francise, who helps support our *Jaden Mwen* ("my garden") community gardening initiative.

We created *Jaden Mwen* to help combat food insecurity in the communities we serve, prevent pediatric malnutrition, and give women income-generating skills to support their families.

But this project has become more than just a way to grow food for home and





*Top: Putting the finishing touches on today's Ti Fwaye meal.*
*Bottom: Time to eat!*

to sell at market. For participants, their gardens—and the agricultural skills they've gained—are a source of immense pride.

In 2025, **participants created more than 50 gardens in nearly a dozen communities**. Crops are chosen for their nutritional value but also their ability to withstand Haiti's harsh climate and periods of intense drought. This year, plants included okra, cucumber, bell pepper, eggplant, swiss chard, spinach, cabbage, leek, tomato, and chili peppers. Participants have been particularly enthusiastic about cultivating leafy greens like spinach and swiss chard as a way to combat food insecurity and enhance their household diets.

At each meeting, participants learn skills such as sewing seeds, transplanting seedlings, preventing pests and diseases, creating and organizing beds, managing water, composting, and more. In late summer, *Jaden Mwen* hit a new milestone with the creation of *Jaden Lakou*: a community garden and nursery. This larger communal garden is now where instructors demonstrate techniques, and where community members can practice their skills. Participants help maintain this garden together and use the seedlings in the home gardens they've been growing. *Jaden Mwen* is no longer just about individual effort: it's now a group effort where **everyone takes ownership and helps lift the community out of food insecurity**.

"Participants showed a real interest in applying the techniques they learned," reports Miss Francise. "They express great joy in using many of the techniques used to create their gardens."

*Right: Participants love cooking with the leafy greens they grow.*

## *"This activity fosters a very intense joy."*



# Training and Capacity Building



# Residency Programs

## The Next Generation

One of the most important lessons Kerrine has learned during her social service residency at St. Boniface Hospital is **how to connect with her patients interpersonally**.

"I had a patient I was caring for who had high blood sugar, and afterwards, the sugar returned to normal," she recalls. "A few days later, as I was passing through the hospital courtyard, I heard someone calling out ot me, saying "miss, miss!" When I responded, she said "my blood sugar went down, it's normal." Another time again, she called me and said "miss, my blood sugar went down, yes, it's normal." I kept wondering why she kept telling me this. Then someone reminded me that this was a patient I had cared for when her sugar was high. She wasn't a stranger to me when she called me to talk to her. **She was keeping me updated on her health each time. That made me happy.**"

Kerrine is one of 53 social service residents we hosted at St. Boniface Hospital in 2025—26 nurses, 24 doctors, two pharmacists, and one biologist. We also hosted 21 specialty residents in our maternity, surgery, emergency, and pediatric services.

In Haiti, clinicians must complete a year of service in a hospital affiliated with the Haitian Ministry of Health. St. Boniface Hospital is one of the most sought-after "social service" sites in the country because we see a greater range of cases than most other care facilities. When they leave St. Boniface, **residents take the skills they've learned to other hospitals across Haiti, elevating the level of care provided throughout the country**.

While social service doctors like Kerrine spend an entire year with us and rotate through every service we offer, specialty residents operate on a different schedule. These residents are skilled clinicians who want to specialize in one particular area of medicine. Speciality residents only spend a month or so at St. Boniface before going to another hospital in the country to continue their training.

We want every medical resident to leave us not just with the skills to provide high-quality care, but also with the ability to **infuse empathy and compassion into everything they do**. For Kerrine, this has made a huge difference. She says, "I learned a lot from the hospital, especially regarding interpersonal relationships, the way they guide you, the way they help you in the work you're doing. **I see that this is a good hospital doing great work, a hospital that sees people's health above all else.**"



*Left: SBH also trains nurses who are still in school, providing them with practical experience as they continue their classroom studies.*
*Right: Socials service residents like Kerrine learn at SBH every year.*

## *"This is a good hospital doing great work."*



# *REPARE*

## Fix, Repair, Calibrate

Self-reliance is a key factor in how St. Boniface Hospital has been able to weather so many of Haiti's crises. **Fostering our own in-house expertise helps us fix problems faster and easier** than if we waited for external help to arrive. And when help is needed in any of our hospital services, Chief Biomedical Engineering Officer Alix Ilophene is often the first person to call.

Alix runs our biomedical equipment repair program, known as REPARE (*Reparasyon Pou Amelyore Ekipman Medikal*). In 2025, he completed 268 work orders: 129 for repairs, 124 for routine maintenance, and 15 for equipment calibration. The most common items needing repair were vital sign monitors, scales, and autoclaves—equipment our clinicians use every day.

As for maintenance, our oxygen concentrators and **oxygen production system kept Alix and our facilities team busy all year**. In August, the team was happy to get some extra support from our friend Evenel at The Dalton Foundation. Evenel taught Alix and our facilities team how to properly repair, clean, and maintain our complex new oxygen production system. Evenel also reviewed proper protocols for starting up and shutting down the system, recording maintenance logs, and more. **Today, the oxygen system creates enough oxygen for the entire hospital, as well as some to share with other healthcare facilities.**

# *Solar Power*

## Sustainable Energy

In June 2025, we switched on our new solar grid—a major milestone in ensuring reliable, sustainable energy for critical medical services. Created with our partners at Build Health International and 121 Consulting, we now have a field of 748 solar panels to supplement the existing 780 panels on the hospital's roof.

By relying on solar power rather than fuel-dependent generators, **we have significantly reduced our vulnerability to fuel shortages and skyrocketing energy costs**. This energy independence allows the hospital to maintain consistent operations, allocate resources more efficiently, and focus on patient care, even amid the ongoing challenges of fuel scarcity and high prices in the region.






*Top: Participants in our oxygen system repair training. Bottom: SBH's new solar grid.*

# Donor Roll



Generous donors like you helped make everything in this report possible—and so much more. With your support, we were able to keep every service at St. Boniface Hospital fully operational despite profound challenges from Haiti's ongoing crises and the loss of USAID. You made a difference for hundreds of thousands of people. You helped us save lives.

**This list of donors represents individuals and organizations that made contributions during our Fiscal Year 2025 (July 1, 2024-June 30, 2025).** Gifts given after the end of our fiscal year will be recognized in our next annual report.

**On behalf of all of our staff and patients, thank you.**

## Fiscal Year 2025 Donors

### $100,000+

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## DONOR ROLL

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We are deeply grateful to the hundreds of donors in this category who helped us provide safe, accessible, and sustainable health services in southern Haiti. On behalf of all of us at HEI, thank you for your generosity.

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# Financials



**Health Equity International ended Fiscal Year 2025 (July 1, 2024-June 30, 2025) in a strong financial position.**

Generous support from our partners and supporters helped us close an unprecedented funding gap resulting from the sudden dissolution of USAID. Together, we navigated Haiti's ongoing humanitarian crisis, complex procurement challenges, and a rapidly changing foreign aid landscape. And together, our community helped us deliver comprehensive, dignified healthcare to every patient in need.

**We are deeply grateful to everyone who made this work possible.**

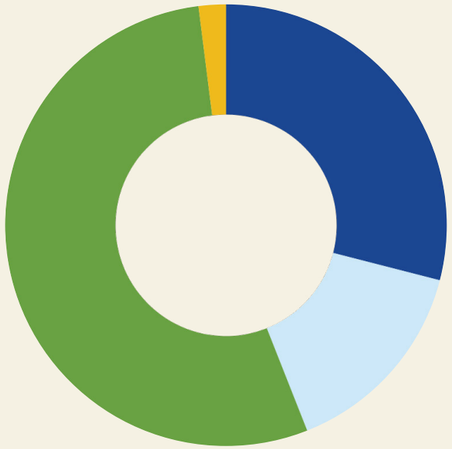
# *Statements of Financial Position* | Ending June 30

| ASSETS | 2025 | 2024 |
|---|---|---|
| **Current Assets** | | |
| Cash | $4,261,735 | $1,988,889 |
| Accounts receivable, net | $993,154 | $2,148,130 |
| Contributions receivable, current | $2,750 | $336,584 |
| Inventory | $939,504 | $782,067 |
| Prepaid expenses and other assets | $135,250 | $171,821 |
| **Total Current Assets** | **$6,332,393** | **$5,427,491** |
| **Property and Equipment, Net** | **$4,711,933** | **$5,079,057** |
| **Other Assets** | | |
| Contributions receivable, net of current portion | — | — |
| Investments | $3,231,244 | $3,206,394 |
| Operating Lease right-of-use assets | $64,361 | $155,303 |
| **Total Assets** | **$14,339,931** | **$13,868,245** |

| LIABILITIES AND NET ASSETS | 2025 | 2024 |
|---|---|---|
| **Current Liabilities** | | |
| Lines of Credit | $495,221 | $1,100,000 |
| Accounts Payable and Accrued Expenses | $1,846,083 | $2,830,328 |
| Operating lease liabilities, current | $24,788 | $105,646 |
| **Total Current Liabilities** | **$2,366,092** | **$4,035,974** |
| Operating lease liabilities, net of current portion | $25,170 | $19,619 |
| **Total Liabilities** | **$2,391,262** | **$4,055,593** |
| **Net Assets** | | |
| Without Donor Restrictions | $10,975,251 | $8,524,318 |
| With Donor Restrictions | $973,418 | $1,288,334 |
| **Total Net Assets** | **$11,948,669** | **$9,812,652** |
| **Total Liability and Net Assets** | **$14,339,931** | **$13,868,245** |

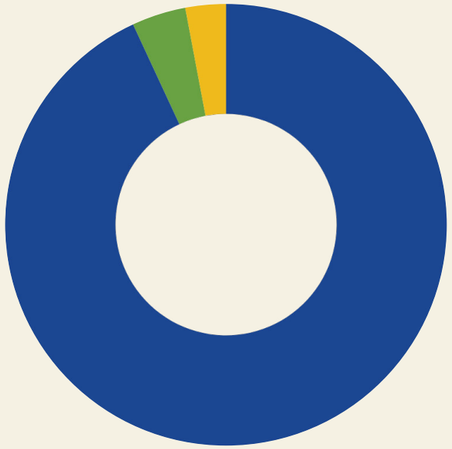
## *2025 Total Revenues*

| | |
|---|---|
| Individuals & Corporate | $5,483,529 |
| Foundations | $2,827,738 |
| Government | $10,171,223 |
| Investment Income | $324,187 |
| **Total Revenues** | **$18,806,677** |



## *2025 Total Expenses*

| | |
|---|---|
| Program Expenses | $15,305,404 |
| Administrative Expenses | $576,516 |
| Fundraising Expenses | $429,115 |
| **Total Expenses** | **$16,311,035** |



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