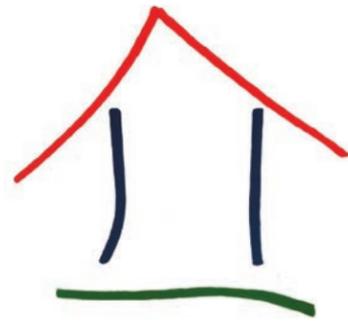


**TI KAY, HAITI**  
Prospectus - 2014





Ti Kay (pronounced *Tee-Kye*) means “Little House” in Haitian Kreyol. TB was traditionally the “malady of the little house,” where those with the disease were quarantined. In Haiti, it has become the disease of those with the littlest of houses, or no house at all.

Ti Kay provides a volunteer medical doctor and supplemental nursing care to individuals with tuberculosis, all while ensuring that this care is free for inpatients and outpatients alike.

The overarching goal of Ti Kay is to support the Haitian health care system as it provides access to care for patients with TB or HIV.

## *What is Ti Kay?*

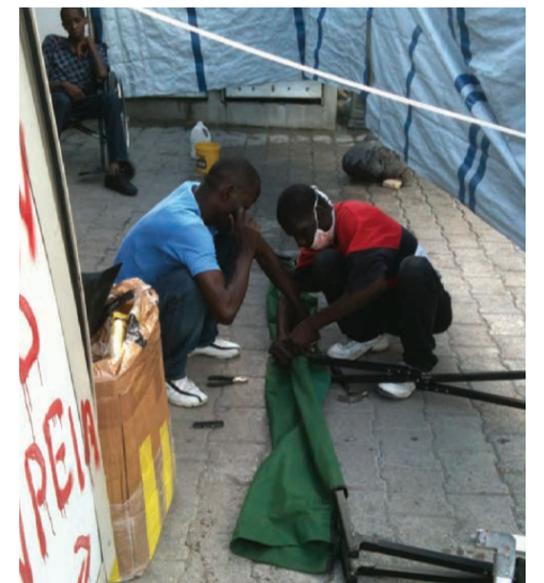
Ti Kay Inc is a medical non-profit organization that aims to treat, and hence prevent, tuberculosis (TB) and HIV.



**Foundations:** Ti Kay began after the 2010 earthquake in Haiti when a Haitian nurse and a US doctor (Megan Coffee) established an inpatient program for the care of TB patients in January 2010. Since then, the TB Clinic treated over 3,000 patients, with the assistance of up to 40 Haitian nurses and other staff in addition to over 100 expatriate volunteers.

**All patients were seen, regardless of their condition or their ability to pay.** No other inpatient facility existed in Port-au-Prince for these adults critically ill with TB. **Many were in critical condition; in the US, they would have been admitted to an intensive care unit.** Patients who were admitted to the inpatient ward typically required oxygen to breathe while their body fought the infection in their lungs, or required intravenous fluids and feeding tubes. These patients were often so unstable that they required 24-hour nursing care. Others needed close monitoring and assistance to take their medications.

**Haiti has the highest per capita tuberculosis (TB) burden in the Western hemisphere (3 in 1000 per year).** After HIV/AIDS, TB is the country’s greatest infectious cause of mortality in both youth and adults. Rates of TB detection have risen with increased testing, since the 2010 earthquake that devastated Haiti and left 1.5 to 1.8 million people homeless. Displaced individuals initially lived in crowded housing or tents. Many patients lived on less than two dollars a day. TB is spread through the air from one person to another in crowded environments, and reactivated in times of insufficient nutrition or concurrent illness.



## Next Steps

**In 2014, the TB inpatient ward was required to close for post-earthquake reconstruction. Another hospital has generously offered a building for the TB Clinic to reopen. We are currently fundraising to meet the additional funding needs this requires.**

**Continuity is lifesaving.** Throughout this period, outpatients (the majority of patients) were able to follow up and receive medications at their original clinic.

We continue to follow-up with our patients. We are working to ensure they and future patients have access to the support they need.

Maintaining continuous care is crucial. **TB treatment cures most patients in 6 months.** Some patients lapse and do not take medications daily. Their TB can become fatal or develop drug resistance.

Patients may not initially trust the medical system or may have to choose between eating and paying for transportation to medical appointments. Ti Kay works to address the realities patients face so that patients are able to overcome TB.

Drug adherence is particularly important for HIV positive patients. Over 25% of TB patients at the clinic were HIV+. About 4 new patients a week were diagnosed and rapidly enrolled in an HIV clinic and started on HIV medications. Most hospitalized TB patients were HIV infected, as they were slower to heal from TB and opportunistic infections. In partnership with HIV clinics in the area, Ti Kay supported multifaceted programs to ensure patients received the health care they needed for HIV and TB.



## Core services provided to Ti Kay patients

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| Oxygen  | Ti Kay maintains a constant supply of oxygen for outpatients. Most patients would not otherwise have access to oxygen that they need for breathing. Patients, when they were hospitalized, were monitored around the clock to determine their evolving oxygen needs. Supplemental oxygen is titrated as needed. Some patients are supplied with oxygen and monitored at home, through tanks or machines coupled with generators given the need for continuous electricity.   |
| Training the Trainers   | Ti Kay has trained healthcare workers to provide types of care needed - but not usually available - in Haiti. These services include respiratory and oxygen therapy, physical therapy, nutrition, as well as basic critical care nursing. Training has been through apprenticeship and a curriculum designed for basic respiratory and physical therapy training. Ti Kay seeks to train more Haitian physicians at the new facility.   |
| Supportive Care:<br><br>Medication<br>&<br>Nutrition                      | Critically ill patients rely on care for all their needs. Some may have no family or friends to help them. Often, the stigma of HIV prevents others from helping. Ti Kay provides free medications for HIV, TB and other chronic diseases. Lack of adequate nutrition is often an issue with many of our clients. Some come to our clinic weighing as little as 60 pounds. Since good nutrition is a basic requirement for good health, Ti Kay provides hot meals daily. Clinic staff encourage patients with severe malnutrition to eat and help to dispel myths believed by some that fasting will lead to improved health. We attempt to maintain the dignity of those who feel they have nothing by also providing clean clothing and sheets.  |
| HIV Case Management:<br><br>Medication,<br>Coordination<br>&<br>Nutrition | <p>HIV counselors and community workers provide counseling and support for newly diagnosed HIV patients. They also provide education about treatment and how to prevent the spread of HIV. Counselors educate patients about informing partners of their status and explain issues of medication resistance, all in ways that are accessible to patients with little formal schooling.</p> <p>Treating HIV and TB involves treating a myriad of diseases. Medications to treat opportunistic infections such as thrush, which makes eating painful, are provided free for patients, as well as drugs for cryptococcal meningitis and PCP.</p> <p>Robust follow-up and counseling keep patients from falling through the cracks. Counselors meet, call, and visit new and old patients to ensure medication adherence. All patients, when diagnosed or discharged from the hospital, are taken to their homes by a health worker. In so doing, the health care worker develops a relationship with family and friends who provide support to the patient and becomes invaluable if the health care worker needs to return because of lapsed adherence by the patient.</p> |

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| Home Services            | A hospital is not just a building. The services provided within the hospital can be extended into communities. Patients with chronic disease or who cannot be in the hospital have home oxygen, nursing care, physical therapy, and counseling through Ti Kay. Those who trained to provide inpatient services train outpatient providers.   |
| Patient Adherence System | <p>The Patient Adherence System presents an innovative approach to supporting patients struggling to take their daily medications. The system incorporates the thoughtful work of counselors and recent patients. These ex-patients, who often were once reluctant to take medications themselves, call new patients to check in and discuss concerns. Patients may stop prioritizing their medications once they start to feel better - or they may think the drugs are working too slowly. Peer influence, buttressed by the work of trained counselors, allows us to ensure patients are taking their medications properly.</p> <p>The tracking of patient appointments is done through a database created by Ti Kay volunteers. Through this database we are able to quickly generate lists of patients who miss appointments and provide the list to patient callers or role models. When these patients cannot be reached over the telephone or do not come for an appointment, the clinic has outreach counselors who go to patients' homes to provide counseling and ensure continuation of the patient's treatment.</p> |
| Volunteer Involvement    | <p>Ti Kay has an active volunteer program comprised of both onsite and remote volunteers.</p> <p>Medical volunteers assist in direct patient care and the training of local nurses and support staff.</p> <p>Non-medical volunteers help patients with eating, walking, toileting, and other activities of daily living including physical therapy services. Physical therapy is a crucial part of recovery from TB yet it is virtually unheard of in Haiti. Patients are taken for walks and shown manageable exercise regimens designed to prevent deep vein thrombosis and deconditioning. Non-medical volunteers have made this a core clinic service and have brought this vital treatment into the purview of the local health system.</p> <p>Remote volunteers assist in grant writing, management of supplies, IT support, accounting, fundraising, and more.</p> <p>All volunteers are self funded.</p>   |
| Patient Travel           | Our patients come from many different areas in Haiti and one must travel a great distance to attend clinic appointments where they receive life-saving medication. The expense of this travel is a barrier to many patients who receive care on a continual basis. As part of the clinic program, transportation costs are covered, ensuring the patient is able to return to clinic for their next visit.   |

## Ti Kay Schools Program

Ti Kay's Schools Program was established to address the educational barriers faced by children with TB or HIV and those having a parent incapacitated by or lost to these diseases. Schools in Haiti cost \$300 per year or more, a nearly insurmountable cost for many in Haiti. For these children, school becomes a dream. Our schools' program makes this dream a reality for children or families affected by HIV or TB.

Ti Kay provides funding directly to schools for school fees, and also assists with exam fees, uniforms, and transportation. Our team assists with meals and provides counseling to students faced with hardships coping with their own or a family member's illness.



Through treatment and the Patient Adherence Program, Ti Kay saw 85% of TB patients complete their treatment on time. We also work with patients who have initiated treatment elsewhere and returned closer to home to complete their treatment.



## Ti Kay Allocation of Funds and Annual Budget



Our mission is to provide free medical care for all our patients. Our budget is designed to support this goal. In 2013, 97% of the resources were spent on patient care. The allocation of funds at Ti Kay falls into the following categories:

### **Inpatient Ward**

97% of the money spent on the inpatient ward was spent directly on patient care.

- 48% was spent on oxygen, 16% was spent on medications, 16% on patient services such as physical therapy, patient aides, counseling and 24 hour oxygen monitoring, 10% on medical supplies and tests (labs and x-rays), and 7% on patient nutrition.
- The remaining 3% of inpatient funds were spent on office supplies (1%) and other expenses (2%) such as sanitation, tarps, power cords and laundry soap.

### **Outpatient Care**

29% of the total budget was spent on outpatient care and the support of TB treatment completion.

- 70% of this money was spent on outpatient services such as counseling, medication

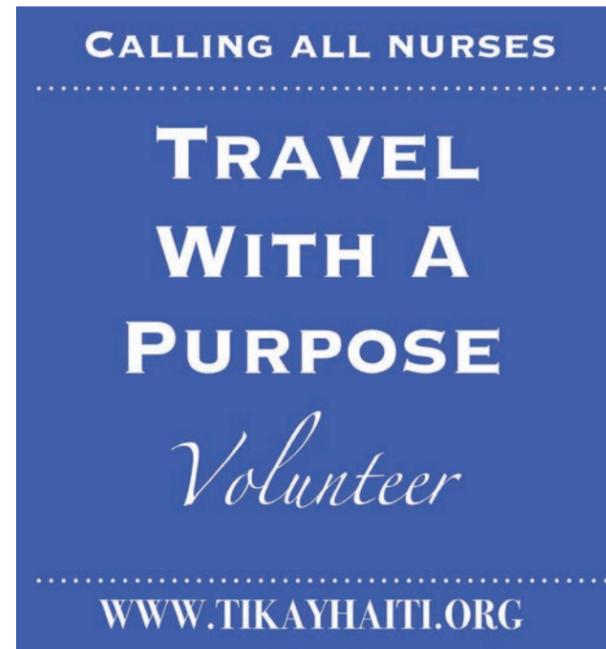
adherence support and followup care services.

- A little over 2% was spent on outpatient nutrition. We were fortunate to have the majority of our outpatient food donated by Feed My Starving Children, enabling us to keep food costs low while providing good nutrition to our patients to aid in their healing.
- 10% was used to fund the Patient Caller Medication Adherence Program, which provides support for patients who are further along in their treatment to support newer patients through their journey. This aids with medication adherence as well as providing a community of support to new patients.
- 16% was spent on transportation to allow patients to get to and from the clinic for appointments.
- 1.5% was spent on medical services and supplies for outpatients.
- Less than 1% was spent on the schools program and other needs.

### **Administrative Fees**

Approximately 3% of the total budget was spent in administrative fees. Banking and transaction fees are the majority of these costs (94.4%). These expenses are unavoidable due to the poor infrastructure that exists in Port-au-Prince. The remaining 0.6% was used to offset modest housing costs for nurses who had been volunteering their services for over a year.

**No money from grants or donations to Ti Kay in 2013 was used to pay expatriate salaries.** Aside from the purchase of specific computers and electronics that could only be made in the US, the money generated by Ti Kay is spent in Haiti on Haitians. Patients at the TB clinic receive care, free of charge, in the form of oxygen, food, medications, medical tests and treatment support.



The commitment of Ti Kay to treat TB and HIV as effectively as possible is reflected in the decision of its volunteers and contributors to live and work locally in Haiti, often under austere conditions.

International volunteers provide their own funding, living simply - often in tents - and take public transportation. Volunteers are able to establish a level of trust with patients, as these living conditions enable them to learn Kreyol and participate more intimately in the Haitian community.

This commitment ensures that the maximum amount of resources are directed to the people who need them immediately, and that funds are neither misdirected nor diluted.

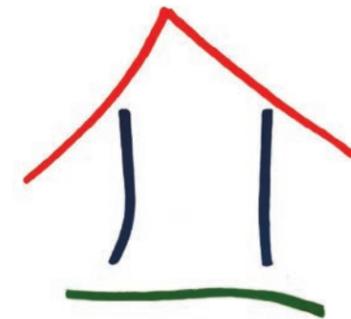
**Ti Kay is proud to function as a piece, not a separate entity, of the Haitian healthcare system. Ti Kay volunteers provide training to Haitians who are working in the public health system. This participation and cooperation helps to ensure that the country's health delivery system functions more effectively and efficiently. Ti Kay also contributed directly to the local economy by purchasing food from local caterers and street vendors. These economic inputs increase the sustainability of the Haitian economy.**





Megan Coffee, MD, PhD (DPhil) completed her undergraduate studies at Harvard, going on to receive a PhD (DPhil) from Oxford in Mathematical Models of Infectious Disease (HIV) Transmission and an MD from Harvard, and is board certified in internal medicine and infectious diseases. Dr. Coffee volunteers her services running the clinic, and works alongside sixteen Haitian nurses who are the backbone of the clinic's operations. The clinic's contributors are recruited from the local population and trained by Dr. Coffee, many of whom are former patients who have recovered from TB or HIV-associated illnesses and want to help their community. Indeed, the Haitian nurses and service providers at the clinic are proud to be making a difference for their country.

Ti Kay is committed to building the best possible health care systems while ensuring equal accessibility to care. We provide maximum support to patients, so that they have success within these systems.



*“When I started taking the medications, I wasn't really into it, I didn't believe in it. I told one of the doctors, 'I don't think I'll be able to stand, no...I don't think I'll be able to walk.' And the doctor told me, 'If you take your medications, you don't have to be afraid. You'll stand, you'll walk, you'll do everything you used to do.' And that was when I began to believe, and I took my medications every day, and lo and behold, I stood, I walked. And since that day, I haven't been afraid of anything.” - A Ti Kay Patient*

Ti Kay, Inc. is a 501(c)3 organization. All donations are tax-deductible in the United States.

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For Donations:

<http://www.tikayhaiti.org/donate.html>

For all other inquiries and mailings:

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