



**INNOVATIONS IN
HEALTHCARE™**

Care 2 Communities: Building Sustainable Primary Healthcare Through Community Health Innovation

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The Challenge

Haiti's rural healthcare system faces profound access barriers. Ministry of Health facilities struggle with inadequate infrastructure, limited staffing, and minimal community engagement, leaving underserved populations with few options for quality care.

Care 2 Communities (C2C), a social enterprise operating in northern and northeastern Haiti, partners with the Ministry of Health to rehabilitate abandoned and underperforming public clinics and deliver comprehensive primary healthcare services—including consultations, laboratory testing, and medications, all managed using electronic medical records. Yet despite establishing basic digital tools across multiple clinics, C2C encountered critical operational barriers: staff recorded patient information redundantly across paper and digital systems, clinical managers lacked real-time performance visibility, patient satisfaction data collection remained paper-based and slow, and Haiti's unstable internet infrastructure complicated digital health adoption.

These challenges, compounded by traditional funders' reluctance to support primary healthcare innovations that they deem not innovative or new, leave organizations like C2C with limited funding options for testing and refining new care delivery approaches.

The Partnership

In 2019, C2C joined the Innovations in Healthcare (liH) network, through which liH provided ongoing strategic support, peer learning opportunities, and increased visibility—including regular invitations to the liH Annual Forum. That same year, through its engagement with liH, C2C was encouraged and invited to apply to the Global Health Innovation Grant (GHIG) program.

GHIG's risk tolerance for early-stage innovations, flexibility for learning and adaptation, and emphasis on supporting local implementers in the Global South aligned closely with C2C's mission and operating context. Over five funding cycles (GHIG4 in 2019, GHIG5 in 2020, GHIG6 in 2021, GHIG7 in 2022, and GHIG8 in 2022), C2C leveraged liH's platform and direct support—alongside GHIG funding and implementation partnership—to open new clinics, integrate quality improvement initiatives, implement pediatric acute respiratory infection and vaccination programs, and expand healthcare worker training. This support enabled C2C to strengthen the quality of primary and preventive health services, including maternal and neonatal care, pediatric care, and treatment of communicable diseases (ARI, scabies, impetigo) and noncommunicable conditions (diabetes, hypertension).



Transformative Results

Building Community Health Infrastructure

GHIG funding transformed C2C from a clinic-centered organization into a comprehensive primary healthcare system combining facility-based care with extensive community outreach. The community health workforce expanded from 2 to 25 professionals across eight clinics—a twelve-fold increase that enabled C2C to fully vaccinate over 1,200 children in 2025, reaching families in remote areas with limited health access.

C2C developed an innovative staffing model pairing skilled community health nurses with dedicated community health workers, ensuring clinical expertise at every community interaction. This approach proved crucial in Haiti, where community health infrastructure remains significantly underdeveloped. The teams conduct postnatal visits, monitor malnourished children at home, follow up with patients who miss appointments, screen for acute respiratory infections in schools, and address neglected infectious diseases often overlooked in Haiti's fragmented health system.

Their community cardiovascular screenings—testing residents for hypertension and connecting those with elevated blood pressure to clinic-based chronic disease management—attracted World Health Organization attention for potential partnership based on C2C's success in engaging and retaining hypertension patients.

Digital Health Leadership

With GHIG support, C2C became a leader in digital health adoption in rural Haiti. The organization implemented OpenMRS electronic medical records in all eight clinics, transforming patient documentation in a country still reliant on paper systems. CommCare mobile data collection tools allowed community health workers to record activities in real time despite poor infrastructure, while TeamViewer provides remote technical support, eliminating the need for staff to travel long distances to resolve issues at distant clinics.

C2C is currently migrating to cloud-based servers and integrating CommCare with OpenMRS, creating seamless data flow between community health efforts and clinics. This digital transformation has proved especially valuable during civil unrest, enabling C2C to maintain operations and ensure quality care even when in-person supervision was limited.

Clinical Quality and Workforce Development

The establishment of a GHIG-funded medical director position significantly enhanced clinical quality and workforce development. C2C expanded its medical residency program from one to 23-25 residents annually across medicine, nursing, and laboratory technology. The medical director developed C2C's first standardized primary healthcare protocol addressing prescription inconsistencies among doctors at different facilities due to a lack of national guidelines.

Through systematic chart reviews, residents improved their accuracy from 60-75% at entry to over 90% by graduation, ensuring they graduate with solid

foundations in evidence-based medicine and documentation skills. Comprehensive standard operating procedures for clinical practice and infection control established quality benchmarks for all clinical staff.



C2C baby examined; Photo credit C2C

Infrastructure Resilience

In 2020-2021, as gangs controlled 60% (and currently controlling 85%) of the capital and disrupted fuel supplies, GHIG funding enabled solar panel installation at all eight clinics. This strategic investment ensured reliable power for laboratory equipment and vaccine refrigeration, allowing clinics to operate despite roadblocks and supply chain disruptions. The solar infrastructure lowered long-term operational costs while enhancing financial sustainability and demonstrating how targeted investments can maintain vital health services even when external systems fail.

Financial Sustainability

Beyond technical innovations, C2C developed a robust approach to financial sustainability that positions the organization for long-term impact. The organization operates on a hybrid financing model that strategically reduces donor dependency while maintaining accessibility for underserved populations. C2C's eight clinics generate over \$75,000 monthly from modest patient fees, enabling 75-90% cost recovery. C2C's collaboration with the Haitian government significantly strengthens the organization's operations by providing essential commodities and financial support for various clinical staff members. This

partnership has empowered C2C to generate revenue, which now accounts for 40% of its annual budget. Additionally, C2C operates a resident program that supplements government salaries with housing and stipends, making positions more attractive while controlling costs. As a result, the organization enjoys greater operational independence and the flexibility to adapt its programs, ultimately enhancing its ability to serve the community effectively.



Lessons Learned



Flexibility Enables Innovation

Trust-based funding that emphasizes supporting the innovation process, rather than demanding predetermined outcomes, enabled C2C to take calculated risks and build context-specific solutions.



Technology + Capacity Building

Digital health systems developed with GHIG support continue to improve efficiency and quality long after grant funding concluded, validating investment in both technology and people.



Local Implementer Support

Supporting organizations in the Global South with genuine operational flexibility and accompaniment creates sustainable impact that outlasts initial funding.



Permission to Iterate

Giving organizations space to experiment, permission to learn from setbacks, and partnership that walks alongside them through the messy process of creating meaningful change.

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About Innovations in Healthcare

[Innovations in Healthcare](#) is a nonprofit organization hosted by Duke University and founded in 2011 by Duke Health, McKinsey & Company, and the World Economic Forum. Our mission is to increase access to quality, affordable healthcare worldwide by scaling leading innovations. We work with over 100 healthcare entrepreneurs in more than 90 countries and provide capacity-building training and consulting to healthcare systems throughout the world. We work closely with our partner, the Duke Global Health Innovation Center, toward our shared vision of a world where innovation improves health for all. By combining academic excellence and global engagement to improve health, we improve access to quality, affordable healthcare worldwide.

