

Partnership. Health. Haiti.

IMA's First 50 Years





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October 6, 2010
Newseum
Washington, DC

Fifty years! What began so humbly in 1960 as Interchurch Medical Assistance has not simply survived fifty years. Instead, it has become a thriving, vital, significant contributor to the health of millions. Millions in Haiti. Millions in DR Congo. Millions in Tanzania. And the impact keeps growing in Sudan, India, Togo and many more nations.



Here we've captured a few of the significant events of the past 50 years. These are part of the story, but behind these events are the people—men and women, infants and children—whose lives have been changed because other people—IMA staff, supporters, partners and friends—cared enough to act.

Thank you for caring, and for partnering with IMA to advance health and healing for the hurting and vulnerable.

Rick Santos
President & CEO



A SEED OF AN IDEA

The first flicker of inspiration for IMA came from a note received by Mrs. Bertha “Bert” Marker, Supply Secretary of the New Jersey Annual Conference Woman’s Society and wife of Reverend Charles Marker, pastor of the Princeton Methodist Church. The note, mixed in with supply requests for foreign work, stated, “If you wish to send directly to any missionary or institution under the Woman’s Division, you may do so under a contract which our government has with the government of India, without freight, duty or transportation costs. Our hospitals are in great need of these supplies.”

Bert knew that pharmaceutical companies often had excess inventory due to the nature of inventory control systems at the time, so she convinced her church’s Woman’s Society of Christian Service to solicit corporate donations to ship to Methodist clinics in India. The first shipment, sent to India in 1953, included nearly a ton of donated vitamins – launching the program that would eventually become IMA World Health.

IMA is born (1960)

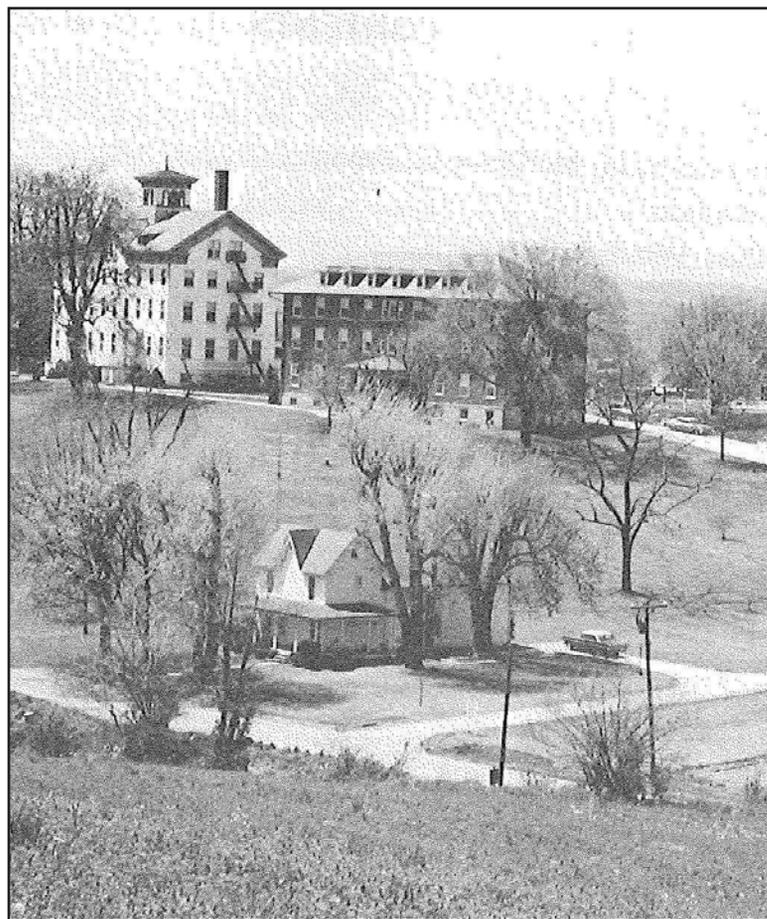
Six years and many shipments later, Bert met with Dr. Harold Brewster, Medical Secretary for the Interdivision Committee for Foreign Work of the

Board of Missions of the Methodist Church. Bert wanted to discuss the expansion of the Woman’s Society program to meet the massive need in the developing world, within both the Methodist Church and other denominations.

Dr. Brewster proposed the idea to several Protestant mission boards and agencies. In response, six agencies—the United Presbyterian Church, Lutheran World Relief, the United Methodist Church, the Reformed Church in America, the National Council of Churches (Division of Foreign Missions) and the United Church Board for World Ministries—met in New York and drafted a plan for an organization that would centralize the collection and dissemination of medical supplies to developing countries. The organization, legally incorporated as a nonprofit in New York on October 21, 1960, was called Interchurch Medical Assistance, Inc.

THE EARLY YEARS (1960-1979)

IMA’s operations officially began in 1961 from its offices at the InterChurch Center on Riverside Drive, New York City. Arthur Wilde served as the first Executive Director from 1961 to 1979. Dr. Brewster served as the first President of the Board of Directors from 1961 to 1963.



An undated photo of Blue Ridge College, now the Brethren Service Center. IMA headquarters is now located in Old Main, the white building pictured at the top of the image.

The Church of the Brethren joined as a member organization in September 1961 and offered space at the Brethren Service Center in New Windsor, Maryland, for the storage of medical supplies. IMA established a warehouse in the Center's former school gym—a decision that would eventually determine the future location of IMA's headquarters.

EFFICIENCY TAKES ROOT

In its early years, IMA served 400 hospitals and numerous clinics in over 70 countries through its member and approved agencies. The high efficiency of IMA's operations started from the very beginning; though its first year budget was under \$21,000, within three months IMA had collected over \$1 million in pharmaceuticals to send overseas. By its second year, IMA's list of member agencies had grown from six to 12, and 80 major corporations donated regularly.



Early version of IMA logo

THE MIDDLE YEARS (1980-1989)

Growth and Momentum

IMA's second Executive Director, Dr. Eugene Grubbs, took the reins in 1980 and served until 1991. A year after Dr. Grubbs' arrival, IMA's headquarters moved from New York to the Brethren Service Center in Maryland to allow for closer contact with the inventory and warehouse staff.

By 1985, IMA had grown to include 14 member agencies and offered assistance to 35 churches and 62 other US-based humanitarian organizations. Contributions to IMA for the 1984-1985 fiscal year were valued at \$11,123,190, and supplies were shipped to 55 countries. By this point, IMA had begun to receive quite a bit of attention for its support of needy clinics in the developing world. The 1985 Annual Report even provided a record of a rare meeting between IMA staff and Mother Teresa.

The Silver Anniversary

IMA officially celebrated its 25th Anniversary in 1986. In its first 25 years, IMA had shipped over \$255 million in supplies to overseas healthcare ministries and relief agencies. Rosemary Bruner, the Director of the Department of Community Affairs from pharmaceu-



IMA staff meets Mother Teresa in 1985.

tical company Hoffman-La Roche—a strong supporter of IMA—spoke at the celebration dinner.

Expanding Our Reach

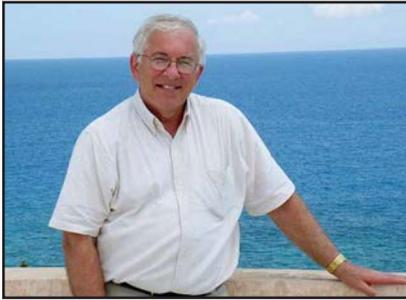
In 1987, Haiti experienced severe political violence, and IMA quickly sent a massive shipment of emergency supplies to aid workers in the field. The number of donor companies rose to 128 and over the course of the year, IMA shipped over \$8 million in medical supplies.

This same year, IMA acknowledged that it was branching out from its roots as a coalition of faith-based groups and began partnering with non-Christian organizations for the first time, striving to have the biggest impact possible. In the October 1987 newsletter, Dr. Grubbs stated with conviction, "Failure to make available to [non-faith-based groups] medical products which would help suffering would be contrary to teachings of the Christian church."

Extraordinary Growth and Recognition

The late 1980s were a great time of growth for IMA; 1988 was a record year for donations, and the organization's member agencies grew to 15 in number. In 1989, IMA distributed a million doses of meningitis vaccine through Church World Service to combat a deadly epidemic in Ethiopia.

IMA donated over \$18.9 million in medicines in 1989 – doubling its total in just two years – and was officially ranked number 95 in the Non-Profit Times' list of the 100 largest US charities. Additionally, *US News and World Report* and *Money Magazine* listed IMA as the second-highest rated charity for diverting the smallest proportion of income to administration or fundraising activities. It was a year of recognition for an organization that was beginning



Paul Derstine, President 1991-2009

to play a much larger role in international medical assistance.

A NEW ERA (1990-1999)

A New Leader with a New Vision

After several months of interim leadership by Dr. Robert Busche, the Board of Directors elected Paul Derstine as IMA's President on De-

ember 12, 1991. At the time, no one knew what a massive impact Derstine would make on the future direction of IMA. For 30 years, IMA had focused primarily on distributing medical supplies to the developing world. Derstine worked with the Board of Directors to develop a new vision for IMA, expanding its operations to include program implementation as well as facilitating targeted health programs in developing countries.

Adaptation in a Changing Landscape

IMA's new vision coincided with sharp changes in the world of medical aid. Thanks to the concerted efforts of the World Council of Churches, in the early 1990s the UN's World Health Organization (WHO) developed a set of guidelines to improve the quality of international pharmaceutical donations. From this point, donations had to be made through approved targeted disease control programs or in compliance with a nation's essential drug list—not based on warehouse inventory and corporate excess alone. As IMA rushed to comply with the changing times, Aldus Hertzler, R. Ph., a consultant pharmacist from Pennsylvania, volunteered to design a new drug classification system and order the reference manual based on the WHO's "List of Essential Drugs." Though the new donation guidelines became a limiting factor for many health care nonprofits, IMA used them to strengthen and hone its services.

A Life-Saving, Game-Changing Development: The IMA Medicine Box®

In 1993, IMA developed and launched the IMA Medicine Box®, one of its most significant programs to date.



Children are treated for River Blindness under the supervision of Dr. George Kassiga. (right)



The Medicine Box® program took IMA in a new direction, which led to a revision in the mission statement to focus on providing both products and services for development programs instead of just supplies.

The IMA Medicine Box®, developed by IMA's Don Padgett, R. Ph., treats up to 1,000 people in a rural clinic for approximately two months. The Medicine Box® program took IMA in a new direction, which led to a revision in the mission statement to focus on providing both products and services for development programs instead of just supplies.

Establishing Roots in Foreign Soil to Target Disease

Following the launch of the IMA Medicine Box®, IMA partnered with several organizations, including the Tanzanian government, Merck & Co., IMA member organizations and many others to develop a program to treat Onchocerciasis (River Blindness) in Tanzania

through the distribution of Mectizan®. This program spurred the establishment of IMA's first field office—in Tanzania—in 1997. Concurrently, Dr. Glen R. Brubaker became the first medical doctor on IMA's staff, and his main role was starting and supporting a program in Tanzania to combat the deadly and disfiguring childhood cancer Burkitt's Lymphoma.



The Burkitt's Lymphoma Treatment Program was established in Tanzania in 2000.



USAID-funded AXxes Project

In 1997, Charles Franzén joined the staff as the Resident Representative for IMA to the Tanzania National Onchocerciasis Task Force, becoming IMA's first in-country representative.

That same year, IMA launched its first targeted program in Haiti. Partnering with the U.S. Centers for Disease Control, the Haitian Ministry of Health and Hôpital Sacré Coeur in the North Department of Haiti, IMA created a program to combat the crippling Neglected Tropical Disease Lymphatic Filariasis (elephantiasis). Today, thanks to the success of this program, IMA is leading mass drug administration programs in Haiti that treat over five million people a year with full coverage planned by the end of 2011.

THE NEW MILLENNIUM (2000-2009)

Accelerated Growth through New International Programs

At the turn of the millennium, IMA continued powering ahead with

new projects and strong partnerships. The Burkitt's Lymphoma Treatment Program, which would treat more than 3,200 children in its first eight years, was established in Tanzania in 2000. IMA also received a \$25 million grant from USAID to help strengthen the health zone system in the Democratic Republic of the Congo — under a program known as SANRU III, a program that would grow, develop and eventually provide basic health services for more than 10 million Congolese people.

In 2003, IMA partnered with Pfizer, Inc. to provide Diflucan® to HIV/AIDS patients—a new program that led to the expansion of the Tanzania office. IMA also supported long term recovery efforts after the devastating tsunami in south India, as well as providing 600 Medicine Boxes® to Indonesia, Sri Lanka and Thailand in 2004. It also started a de-worming program aimed at treating more than one million school-aged children in Nicaragua.

In 2006, building on its earlier work, IMA led a consortium of organizations in the \$40 million USAID-funded AXxes Project to bring basic health services to over eight million people in the Democratic Republic of the Congo.

By 2006, more than 10 million people in 48 countries had been helped by the IMA Medicine Box® program. The following year, IMA collaborated with the Bonds Meadow Rotary Club to launch another major life-saving project — the Safe Motherhood Kit™ program.

Safe Motherhood Kits™ provide clean and sterile supplies to create safe birthing conditions for mothers and their newborns in areas where infection and complications put lives at serious risk.

In 2008, IMA was selected by Southern Sudan's Ministry of Health to establish basic health services for two of their largest states, with a total population of over two million people.

National Leaders in Efficiency

All this growth did not go unnoticed. In 2009, *Forbes* magazine named IMA one of the "20 Most Efficient" nonprofits in the USA for the second consecutive year, while Charity Navigator gave IMA its top rating (four stars) for efficiency for the fifth straight year.

After seventeen dynamic years of strong leadership through times of great change and challenge, Executive Director and President Paul Derstine retired. Throughout his years of service, IMA's staff grew from four employees to nearly 95 in six countries. Derstine was succeeded by current IMA President and CEO, Richard L. "Rick" Santos.

50 YEARS OF SERVICE (2010)

The Haiti Earthquake

IMA's 50th year has proven to be one of the most significant and memo-

orable. Within months of taking the helm, Rick Santos was working in Haiti when the devastating January earthquake struck, laying cities to waste and leaving hundreds of thousands dead and millions in great need. Santos, along with IMA colleagues Dr. Sarla Chand and Ann Varghese, was trapped in the rubble of the collapsed Hotel Montana for more than two days before being rescued.

Tragedy had never struck so close to home—despite maintaining staff in poverty-stricken and war-torn nations like Sudan, IMA had been very blessed. This time IMA mourned the loss of Rev. Samuel W. Dixon, Jr., a longtime member of IMA's board of directors, as well as a friend and colleague. Rev. Dixon was also in the Hotel Montana at the time of the earthquake and passed away as a result of his injuries.

Despite nearly losing their lives for IMA's work, every staff member involved in the Haiti earthquake is still with the organization, tangibly demonstrating the determination of this organization and the people who care about its mission so deeply.

To respond to the ensuing crisis in



Rescue workers tend to Dr. Sarla Chand after she was rescued in Haiti.

Haiti, IMA combined efforts with the Haitian Ministry of Health to develop a new project—the Healthy Kids Kits program, which provides children in Haiti with personal hygiene supplies to help prevent illness in the unsanitary conditions of a post-disaster area.

A Celebration of Health and Healing in the Past, Present and Future

This year, IMA is celebrating 50 years of tireless service and unfaltering adherence to its mission of advancing health and healing in developing nations. Since 1960, IMA has shipped

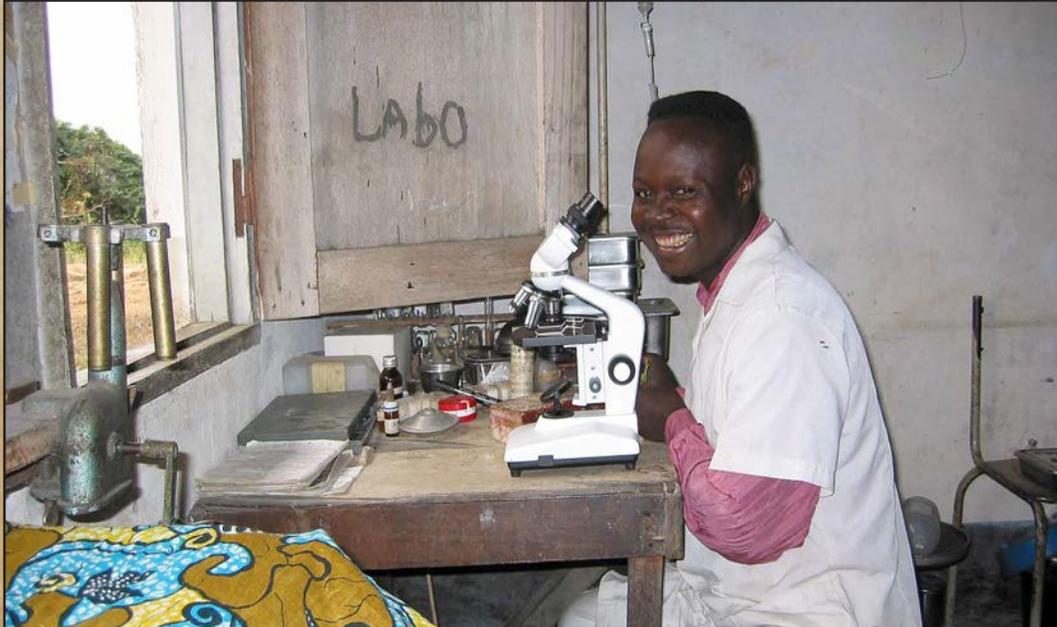
over \$1 billion worth of medicines and launched many successful international health care programs that have saved and improved the lives of millions of people the world over.

IMA's unique history of building strong partnerships with faith-based organizations, governments, corporations and individuals has built a strong foundation to continue doing the work the world desperately needs in the next 50 years and beyond.

50 years in photos









IMA World Health would like to thank the following sponsors for their generous contributions to our 50th Anniversary event.



BLUE WATER MEDIA®
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We would also like to thank our member agencies for their ongoing partnership and support of IMA World Health.

Adventist Development and Relief Agency International
American Baptist Churches USA, International Ministries
Church of the Brethren

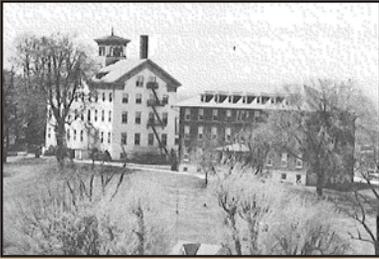
Christian Church (Disciples of Christ), Week of Compassion
Church World Service

Episcopal Relief and Development
Lutheran World Relief

Mennonite Central Committee

Presbyterian Church (USA) International Health Ministries
United Church of Christ Wider Church Ministries

The United Methodist Church, General Board of Global Ministries
Vellore Christian Medical College Board (USA), Inc.



Our Mission:

To advance health and healing to vulnerable and marginalized people the world over.

