2019 Year End Report

Center for Development in Central America
Jubilee House Community, Inc.
The Center for Development in Central America (CDCA) is a project of the Jubilee House Community, Inc. (JHC). The JHC is a non-governmental organization (NGO) that has both 501(c)(3) non-profit status in the United States of America as well as Mission International status granted by the Nicaraguan government.

The CDCA works in four main areas, incorporating appropriate technology into each:

- Sustainable Agriculture
- Sustainable Economic Development
- Health Care and
- Education

We work with and on behalf of the poor, mainly here in Nicaragua. Our goal is to enable communities to become self-sufficient, sustainable, democratic entities. This document is our annual report of the successes and failures of 2019 and our goals and challenges for 2020.
History of the JHC-CDCA

To give you a little bit of background on the CDCA, its work, and the evolution of the projects, let’s begin with the formation of the JHC, Inc.

40 years ago in 1979, the JHC was formed to work with and on behalf of the poor. At that time, we worked in North Carolina. For ten years we created and operated an emergency shelter for refugees of economic crises, a battered women’s shelter, and a winter shelter for street people. We were instrumental in the formation of a rape crisis line, an AIDS hotline, a soup kitchen, and a Habitat for Humanity project. In 1990 we passed these projects over to other organizations to manage and we moved our focus to Central America.

From 1990-93 we explored areas and potential partners in Central America. We decided on Nicaragua, which was then the poorest country in the Western Hemisphere. Even though economic and social development were getting better in Nicaragua, it was and remains the second poorest country (Haiti is the poorest according to Focus Economics)\(^1\). Nicaragua is now the 18th poorest country in the world. Of the

\(^1\)https://www.focus-economics.com/blog/the-poorest-countries-in-the-world
Americas and Caribbean, Nicaragua and Guatemala are tied for 126th ranking in the United Nations’ Human Development Index\(^2,3\).

**25 years ago** in 1994, we moved our work focus to Nicaragua, beginning the CDCA project. We were invited to work in Ciudad Sandino by a Nicaraguan development organization, FUNDECI (Fundación Nicaragüense pro Desarrollo Comunitario Integral).

Ciudad Sandino was part of the city of Managua then, and it was - and continues to be - a densely compacted city of refugees. Starting back in the 1960s when Lake Managua was flooded, the Permanent National Emergency Operation 3 (now named Ciudad Sandino) was founded by moving flood victims onto land that had been depleted from growing cotton unsustainably for years.

In 1972, Ciudad Sandino grew when a devastating earthquake hit and leveled Managua. It continued to grow with an influx of war victims from the insurrection that ended in 1979 and the Contra War from 1979-90.

Four years after we had moved into the area and had begun our work in the rural communities of Ciudad

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Interestingly, Guatemala has a PPP of $7,378 per capita while Nicaragua only has a PPP of $4,790 per capita...Purchasing Power Parity

Sandino, Hurricane Mitch hit (the deadliest hurricane of the 20th century). Yet again, with that disaster in 1998, approximately 12,000 people were relocated, moved to open land on the edge of Ciudad Sandino.

While hard population numbers in Nicaragua are difficult to ascertain due to poverty, Nicaragua has 6.59 million people\(^4\) with a less than 1% growth rate\(^5\). One sixth of the population (1.06 million) live in the department of Managua (the city of Managua is the nation’s capital and is the second largest city in Central America; Guatemala City is the largest). In 2001, Ciudad Sandino became its own municipality separate from the city of Managua, but still part of the department. Ciudad Sandino has about 150,000 people in the city proper and surrounding area. It is the poorest of Nicaragua’s major cities and the most densely populated.

Even though Nicaragua is the largest country (of seven) in Central America, it is 3\(^{rd}\) in population\(^6\). It is a tropical country full of natural resources: water being one of its greatest… it has the largest lakes and the largest aquifer in the region. It has the second largest rain forest in the Western Hemisphere, second only to the Amazon, though like the

\(^4\)https://www.worldometers.info/world-population/nicaragua-population/

\(^5\)https://theodora.com/wfbcurrent/nicaragua/nicaragua_people.html

\(^6\)https://www.worldometers.info/world-population/central-america-population/
Amazon, it is shrinking.

Nicaragua, like Haiti, has suffered under dictatorships, neoliberalism, and natural disasters. In recent history both countries suffered civil war, revolution, and seeing their hard-fought land reform and rights taken away again. When gains for the poor are made in the country, something always seems to come and yank the rug out from under them again… many times it is natural disasters with no safety nets in place.

Nicaragua also suffers from an unequal distribution of wealth. A small part of its population owns most of its resources. While the middle class in Nicaragua is growing, so is the wealth of the richest families. In 2014, Nicaragua was the first Central American country to have a billionaire, Carlos Pellas. His family and a few other families hold most of the wealth in Nicaragua while 30% of the population lives in poverty (defined as living on $3.20/day) while 8% still live in extreme poverty (less than $1.25/day)\(^7\). The CDCA focuses its work on, and partners with, these poorest people.

From April – September of 2018 Nicaragua experienced political upheaval\(^8\). The U.S. State Department, under the current administration, has sided with those opposing the current Sandinista-led government, which has caused economic harm to the country. The U.S. State Department has kept the travel alert for Nicaragua high for political reasons, not safety reasons\(^9\). The U.S. Congress’ NICA

\(^7\)https://www.wfp.org/countries/nicaragua
\(^8\)For more information about that time, please go to our blog site [jhc-cdca.blogspot.com] and read the blogs from April –December 2018.
\(^9\)Notes take by CLV (Citizen Liaison Volunteer) Belinda Forbes at the Town Hall meeting with Ambassador Kevin Sullivan – with some additional comments by Consular General Tyler Mason
ACT which imposes sanctions on Nicaragua has been hurtful, and all of this has meant that Nicaragua, for two straight years, has had a negative economic growth (2018 -3.8%, 2019 -5% expected) following positive growth of 4.6% and 4.7% in 2016 and 2017.\(^\text{10}\)

The CDCA’s projects suffered in 2018 and 2019 due to the resulting loss of volunteer delegations and only hosting a few individual volunteers. We lost about $100,000 in anticipated annual revenue from delegations, and the clinic lost about $50,000 in donations of medications and supplies each year.

**Sustainable Agriculture/Economic Development**

We began with a group of 12 farmers planting our first organic sesame field in 1994... now this has developed into a cooperative of small Nicaraguan growers. Together with this cooperative, COPROEXNIC, we work with around 3,000 growers. While 8% of the general population lives in extreme poverty, in rural areas around 50% of the population lives in extreme poverty on $1.25/day or less.\(^\text{11}\)

The United Nations is predicting that by 2030, 122 million more people globally will be pushed into extreme poverty. *Germanwatch* reported that in terms of climate vulnerability, Nicaragua has been the 6\(^{th}\) most vulnerable country in the world during the years 1998-2017\(^\text{12}\).

\(^{10}\)https://www.worldbank.org/en/country/nicaragua/overview

\(^{11}\)https://borgenproject.org/poverty-rate-in-nicaragua/

\(^{12}\)https://germanwatch.org/files/Global%20Climate%20Risk%20Index%20202019_2.pdf
Nicaragua experienced a good rainy season overall in 2019; but with the perceived “instability” and the sanctions imposed by the U.S., financing has been restricted. Global Partnerships cut their funding to our farmer co-op from $800,000 to $300,000, but it is worth noting that COPROEXNIC was the ONLY project they funded in Nicaragua at all. With the lack of available financing for COPROEXNIC, member farmers have no choice than to sell to some other buyer.

With that in mind, in 2019 COPROEXNIC rented and certified additional land to plant more sesame, in order to fulfill its contracts with its buyers.

Another serious challenge in agriculture over the years has been finding processing plants that will handle the organic crops responsibly, efficiently, and correctly. In 2014 we switched to a peanut processing plant that was superior to the one we had previously been using, but until late 2019 they still processed our organic peanuts last. In early 2019, together with COPROEXNIC, we exported 652,000 pounds of organic peanuts worth $735,953 (down from 2018 by 44% due to late rains that damaged the crops).

*All the crops shipped in 2019, were grown in 2018 (Nicaragua’s harvest time starts in November).*

Years ago, in 2014, after the poorly-operated sesame processing plant being leased by a foreigner from the Nicaraguan government closed, we obtained the lease of the sesame plant and began the laborious task of bringing it up to world-class standards. Throughout
2019 we continued making improvements to the plant as well as employing a staff of 60 people. We now have a three-year lease, which helps with stability.

In 2019, COPROEXNIC continued to work on restructuring its organization for more independence, accountability and efficiency. Regular board meetings and board officer meetings were a large part of its improvement.

Together with COPROEXNIC, we exported 763,500 pounds of organic sesame worth $1,292,189 in value (an increase of 26% from 2018).

We hosted three groups of business people who met with farmers and the cooperative to directly negotiate prices and decide how to go forward with such a lack of financing.

Most small Nicaraguan growers cannot afford all the pesticides and fertilizers that allow for high yields in conventional crops… but if they are certified as organic, which is the way they grow anyway, then they can get a better price, meaning more cash to provide for their families.

A company in Nicaragua, however, continues to buy conventional peanuts and sesame seeds and then sells them to a Mexican company as organic, which hurts our farmers. These conventional crops are flooding the organic market and driving prices down.

Many Nicaraguans who work in the agriculture sector suffer from loss of kidney function, skin disease, and organ failure due to the large amounts of
pesticides and chemical fertilizers dumped on the crops by large conventional growers. Our small organic farmers do not use chemicals, although their water tables are becoming increasingly polluted.

Globally, the crop that traditionally uses the most pesticides and harmful chemicals for the environment and for your health is coffee.

El Porvenir, a coffee cooperative which has grown to include 57 families, received its own export license in 2016. It exported 19,800 pounds of organic coffee (a decrease of 1.5% from 2018) to Their-Bucks Coffee and Building New Hope. The cooperative also has shade-grown and bird-friendly certification.

In 2019 Their-Bucks Coffee approached the CDCA to begin the process of moving their operations over to us as - like many of us – they are getting older and needing to pass on the reins. We have worked with a lawyer in Winston-Salem who is on our Board of Directors and have launched Farmers Shares, marketing the exported coffee through direct subscription sales.

Much of our own efforts in agriculture were in financing, trying to secure enough funds for operation in 2019 and 2020 as well as into the future.

**More Sustainable Economic Development**

Besides ideas, commitment, sweat, and determination, farmers and businesses need capital to get started and to expand. We continue to loan funding through our Vida Fund, mostly to COPROEXNIC, as capital for planting and harvesting; shipping; inspections; organic

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Farmershares.com for ordering El Porvenir coffee, delivered to your door.
certifications; and the sesame processing plant's operating expenses. The Vida Fund offers low-interest loans by recruiting financing from others who are willing to share the risk with the poor. In addition to the Vida Fund, the JHC, Inc., has been able to obtain over a million dollars in financing for our farmers by guaranteeing loans.

We continue to work with a small wood workshop in a village that makes furniture and items like Slightly Twisted Spoons. We continued to work with the Security Collective that provides service at the Health Clinic.

Health Care

Free public health care in Nicaragua is guaranteed in the constitution. The current government has done a better job in health care than any government since we moved here in 1994, BUT with a government that is struggling under a public debt equal to 52.5% of the Gross National Product\(^\text{14}\) and being the second poorest nation in the Americas and Caribbean, Nicaragua does not have the capital needed to bring health care services up to a high standard.

20 years ago, when we first started our clinic in Nueva Vida, the hurricane resettlement camp, we mainly saw acute illnesses, and the demand for health services was high because the government was not engaged with its people, and the area of Ciudad Sandino was totally ignored. Now with the government more active in health care, our foci have adapted to meet the changing needs of the people, with a wide variety of services that aided 18,000 patients in 2019.

\(^{14}\text{https://tradingeconomics.com/nicaragua/government-debt-to-gdp}\) This 2018 percentage is a 2.1% increase from 2017. In the last ten years Nicaragua’s lowest was 44.6% in 2016. Currently the United States public debt is 106.9% of the GDP (\text{https://tradingeconomics.com/united-states/government-debt-to-gdp})
One of our nurses and two part-time doctors retired in 2018. With the political unrest, we have not been able to hire others to fill those positions as a result of almost no delegations visiting the CDCA and the resulting loss of revenue and donated medications. As a consequence, our remaining staff members have worked harder than ever, stretching themselves thin, seeing 9,971 patients in medical consults (only a 10% decrease from 2018 when we had more staff). We still have a part-time pediatrician, a general physician working 12½ hours per week, and a full-time radiologist. We did have the aid of two volunteer physicians, but only for five days.

Clinic services have expanded over the years to not only include acute care, but also preventive care and chronic care, ever-growing needs in Nicaragua that are not being met elsewhere.

This year, 61% of our part-time pediatrician’s patients were five years old or younger, and of those children, 39% were treated for asthma. We are the only clinic we know of that provides maintenance inhalers as well as rescue inhalers… meaning we not only treat children in a breathing crisis, but also give the medications to keep those crises at a minimum. We also keep nebulizers available in the homes of many of our Nicaraguan volunteers, community-based lay health promoters, who gave 1,905 treatments to asthmatic patients in 2019.

We have a chronic care program with 141 patients. These patients sign a contract with us to attend monthly classes/meetings to learn about exercise, diet, taking medications, and to give each other support. Most have type 2 diabetes and hypertension and make up 21% of all medications that we prescribe and fill; but we also treat Parkinson’s, epilepsy, and thyroid conditions.
We hosted a volunteer dietician who did home visits and helped us teach people about foods good for hypertension and diabetes.

Many of our chronic care patients are home-bound due to age or physical/mental disabilities and we do home visits with them as well as with patients at risk, pregnant women and infants. Last year 925 home visits were made by our general physician with our lay health promoters.

Our staff maintained a Facebook page for community health promotion (Clinica N Vida).

Cervical cancer is the leading cause of death among Nicaraguan women of reproductive age, but easily treatable if caught early through PAPs. In 2019, we sent out 294 PAPs (141% increase) to be evaluated by a private pathologist.

Our family planning program offered free, consistent birth control for 837 women (186% increase) which included 298 implants (250% increase) and 95 IUDs that will last years (791% increase) as well as pills and injections. This is critical with the presence of the Zika virus that can cause birth defects. We also provided protection for 685 men… a 4,892% increase!

Our full-time radiologist provided general care all year, as well as 447 ultrasounds after receiving a donated used machine in August… this was a 161% increase in ultrasounds over 2018. Our only nurse took 457 EKGs (232% increase)!

In our People’s Pharmacy, we gave out treatment and medica-
tions for 18,710 conditions and diseases, a 13% decrease. Our storage area was often empty of medications because we had used up all donated medications, which also means that often times we were JUST treating the most needed disease or condition and not also giving out medications for pain or gastritis, etc.

Last year we spent $54,410 on medications including birth control (a 15% decrease). In addition, we received $8,100 (a decrease of 50%) in donated medications from one delegation and five in-country organizations including one television network, which used our space to provide broad spectrum care for Nueva Vida residents one Saturday.

In 2019 our People’s Laboratory completed 5,645 tests (a 12% decrease) in the clinic for 1,466 patients including 617 HIV tests (which was a 419% increase). In addition to these tests done by our lab technician, we provided approximately 14,000 tests (urine, glucose and pregnancy) done by other medical staff within our clinic.

We continued our program with ORPHANetwork to see children twice a year in our dental clinic. The children participate in the feeding centers supported by ORPHANetwork. With the on-going logistical problems of getting children from Nueva Vida to come into the clinic with their parents, we again expanded the service to include children from other cities and feeding centers run by ORPHANetwork and who, like the children in Nueva Vida, are extremely poor. In 2019, our clinic saw children from 22 different feeding centers ranging from 145 kilometers north of us to 115 km south.

Added to that… in 2018 the Public Health Ministry closed all of its own dental services in Ciudad Sandino because of financial cutbacks in public health; which means that our clinic is seeing more and
more adults with more and more complicated problems and, unfortunately, needing more extractions.

We lost our beloved Dr. Inya when she moved to Canada...she had worked with us for eight years developing our dental clinic. We hired Dr. Julio who is equally wonderful.

Our full-time dentist, hygienist, dental assistant, and two volunteer dentists saw 6,571 patients, an 11% increase. 63% of the patients were under the age of 12 years. The dental staff and volunteer dentists performed 10,271 procedures. Of those procedures: 64% were preventive care (cleanings, fluoride, and sealants); 24% were restorative care (fillings) and only 10% were extractions (probably about a third are pulling baby teeth to make way for permanent teeth).

Our dental staff continues to teach patients the importance of good oral hygiene. When they have toothbrushes, etc., our staff hands them out, but with fewer delegations, we have not had the funds or donations to buy them. Besides working within the clinic, our staff also went to the feeding centers and taught 112 classes to a total of 1,510 children.

Two volunteer dentists from South Carolina and a lay hygienist went to El Porvenir for two days. They went home and created a set of upper dentures with a 3D printer and returned to adjust it for one woman who had no teeth.

Our three-mornings-a-week eye glass clinic evaluated 945 patients (a 27% increase from 2018) and gave out 1,070 pairs of glasses. 11% of those glasses were custom-made.

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With the lack of toothbrushes, etc., we were able to give a toothbrush and a tube of toothpaste to only 13% of our patients and dental floss to less than 2%...which is unfortunate.
Pat, our friend and clinic therapist died on the last day of work in December 2018. We were fortunate to have Dr. Dominga step in as a therapist, volunteering three mornings a week and who saw 476 clients in 2019 (a 21% increase). Most of the issues she saw were domestic violence and behavioral issues. She also held tutorials in the local schools.

We also distributed many donated crutches, walkers, and wheel chairs, as well as home care equipment, to 158 disabled patients, which is more than double what we gave in 2018 (a 24% decrease over 2017, however, mostly due to fewer donations).

In health promotion, we have 30 Nicaraguan volunteer lay health promoters in the Nueva Vida barrio and in three nearby rural communities. The promoters attended monthly health education classes.

We continued giving the promoters 500 córdobas a month (about $14.62) as a token of gratitude for their work. These promoters are the ones who have nebulizers and first aid kits in their homes. In 2019 they aided 4,899 children and 4,390 adults from their homes, totaling 9,289 people (a 30% increase from the year before)! They are amazingly good people.

With our health promoter, Jessenia, being out most of the year with her own diabetes and failing kidneys, we were fortunate to have a volunteer social worker, Emir, along with seven other Nicaraguan professionals and interns who worked with our clinic.

We held 107 trainings on various topics: diabetes, hypertension, family planning, oral hygiene, pregnancy, breast feeding, etc., for 3,645 participants.

Our community outreach and health education included the
following groups:

- Continued two pregnant mothers’ support groups which included classes on pregnancy, labor and birth, breastfeeding, as well as family planning;

- Continued the new mothers’ support group with mothers of babies 0 to 1 year old. We also monitor the babies, and the moms have classes on infant care;

- Continued a group of mothers with toddlers ages 1-5 years;

- Continued a group of pre-teen and teen girls to offer them options for the future other than being a teen mother;

- Continued four chronic care monthly support groups;

- Continued a limited support system for HIV positive patients;

- Continued a program for parents of asthmatic children;

- And continued a boys’ group to help them learn focus and responsibility. We divided the boys’ group into two - younger and older boys - for better training and fun.

- We held an average of seven health trainings per month on various topics of diabetes, sexual health, family planning, etc., for groups of up to 27 attendees each.

**Education**

In education, we continue to work in two main areas: educating people here in Nicaragua in technical information, business skills, certification processes, and in health; as well as educating people in the global north, mostly in the U.S., about realities in Nicaragua.

Educating people here is often giving them access to the technologies of the wealthier nations; how to run a business; how to keep track of inventory, etc.; and teaching how to fill out paper work for cer-
tification processes. It is also teaching them about their own bodies and encouraging them to take control of their own health.

We continue to try to broaden the knowledge that people in wealthier countries have about what it means to be poor in Nicaragua - through our quarterly newsletter, blogs, hosting delegations, and doing speaking tours.

Once each quarter, we send out over 15,000 newsletters, with about half going by email. The amazing thing is that over 35% of the emails are now being opened!

We posted 37 blogs in 2019 of short reflections about our work, Nicaragua, poverty, and the world. We added a blog each Friday for Future Fridays that discusses climate change re Nicaragua and the poor as well as many of its permeations.

center for development in central America
http://jhc-cdca.blogspot.com/
https://twitter.com/CDCA_NICA
https://www.instagram.com/cdca_nica/

jhc-cdca.blogspot.com.

Our blog is set up so that when people subscribe a new post goes straight into their email account without having to follow a link. We also posted almost daily on:

Facebook Center for Development in Central America
Twitter (@JHC_CDCA) and
Instagram (jhc_cdca)

We hosted only two delegations in all of 2019…a small medical delegation of six from Alaska (and one Iowan) and a small delegation of 13 friends and family who came to celebrate our year of
anniversaries. We hosted two other individual volunteers. We hosted eight Nicaraguan volunteer interns in the clinic including a therapist who saw patients three times a week all year (she filled the space that Pat Floerke left when she died suddenly at the end of 2018).

In 2017, we were honored to receive Casa Ben Linder from a solidarity group in Managua. The Casa Ben Linder property\(^\text{16}\) was bought by ex-pats during the 1980’s and was dedicated to the memory of Ben Linder, a U.S. engineer who was assassinated by the Contra along with two Nicaraguan compañeros. The Casa’s walls have beautiful revolutionary and historical murals. The JHC received it with the hope of restoring the murals, hosting AirBnB guests, opening a museum, and hosting groups for events and lectures.

Since the U.S. sanctions and the high travel alert impacted tourism and travel through 2018-19, we have struggled to keep Casa Ben Linder viable. We continued to renovate the rooms and grounds as we have had the funds. In 2019 we hosted 36 different events with 985 participants and rented rooms for 404 nights.

We went on two speaking trips that encompassed 17 states in the U.S for 76 presentations. Besides making new contacts and renew-

\(^{16}\)https://www.casabenjaminlinder.org/
Other Accomplishments (and problems)

In 2019, the JHC celebrated 40 years from its beginnings and 25 years working in Nicaragua!

Part of the CDCA staff, working hard in and through Rotary, completed getting water into two rural communities. Becca (legal representative of the CDCA and Director of Sustainable Economic Development) and Mike (our Director of Sustainable Agriculture projects) both won the Paul Harris Award from Rotary while Diana (our Office Administrator) and Sarah (our Public Relations Director) received certificates for all their hard work to get the water project completed.

Of course, much of what we do is fund-raising. We developed three social media fundraisers for Mother’s Day, Giving Tuesday, and the years’ end.

In 2019 we had 13 Nicaraguans working in the Clinic, including two part-time, 10 Nicaraguans working in other aspects of the CDCA’s work, and six international staff. We have nine men on the staff and 20 women.

We continue to have to deal with law suits that pop up every now and then from people who think that they can get money from a foreign non-profit organization; therefore, we end up wasting money on lawyers. Thankfully, the court system consistently rules in favor of our organization.
We did **not lay off any of the existing staff**, even though revenues were tight, which was important, particularly in light of the rise in Nicaraguan unemployment nationally due to losses in business and tourism.

Our number of on-line recurring donations increased by 20%! This has been critical in being able to continue to serve the poor in spite of the high U.S. travel alert and few delegations coming. Our donor base increased by 5% over 2018! **We thank all of you who have helped.**

We continue a PayPal account that will accept €uros and GBP.  
http://jhc-cdca.org/paypal-euro-donations/

We continue being listed as an eligible charity on Amazon Smile. For sales designated to the Jubilee House Community by shoppers, Amazon gives 0.5% of the purchase price to our work. We receive about $85-125 per quarter from Amazon Smile.  
(For more information: www.smile.amazon.com)

**Goals for 2020**

**In Sustainable Agriculture and Economic Development** (several of these goals overlap):

- To assist COPROEXNIC in bringing the quality of the sesame processing plant up to world-class export standards (on-going and needs funding) All sesame processed and shipped was accepted into the U.S.A., Canada, and the European Union this year.

- To assist COPROEXNIC in restructuring its organization for even more independence, accountability, and efficiency (in process)

- To expand peanut production (done)
To add a peanut processing plant (pending $400,000 needed)
To sell organic coffee through Farmer Shares (done)
To expand the coffee market through Farmer Shares (in process)

In Health Care:

► To finish the construction of the training area of the clinic’s third building that is still unfinished because, with permission from donors, we had to instead put all funds toward clinic operations, and we had no delegations coming with folks to help with the physical labor (in-process and has the funding)
► To finish the radiology rooms in the third building (in process and has the funding)
► To continue to upgrade equipment and supplies including: ultrasound machine, x-ray system, lab, and exam rooms (in-process)
► To expand and renovate the laboratory area to meet the new Ministry of Health regulations (in-process and needing funding)
► To help address sanitation problems in Nueva Vida (awaiting funding)
► To increase giving to the clinic
► To recruit people to put the clinic and the work of the CDCA in their wills to help the clinic continue into the future
► To recruit retirees to donate using their IRA Required Minimum Distribution option
► To convert to more sustainable energy options, first in the clinic, followed by the CDCA’s office and the industrial park (awaiting funding)
► To not only sustain funding for the current clinic staff but to also raise enough consistent funds to once again hire an ob/gyn and a nurse (awaiting funding)
To raise funding through the Pat Floerke Memorial Fund to hire Dr. Dominga Soto who volunteered through 2019 (done)

To expand the Girls’ Group (*Las Lobas*) and locate a new leader (in-process)

**In Education:**

- To continue to broaden our speaking tours (in process)
- To explore the possibility of offering Medical Spanish Immersion Trips
- To continue to renovate Casa Ben Linder for housing guests as well as teaching others about the history of the Revolution and Contra War (in process and awaiting funding)
- To hire a coordinator for Casa Ben Linder (in process)
- To rent part of Casa Ben Linder for education and to bring in some steady income (done)
- To increase the number of blogs that are posted (in process)
- To inform people of the realities of Nicaragua, and how wealthier nations oppress Nicaragua
- To continue to reassure prospective delegations that despite the politically-driven high travel alert by the U.S. State Department, Nicaragua is safe

**Other Goals:**

⇒ To explore and implement ways to lessen the work load of the staff members who are 65 years old and older (in process)
⇒ To increase our operating receipts by 100% (help is needed)
⇒ To increase volunteer donations by 100% (help is needed)
⇒ To develop a method for raising funds within Nicaragua
⇒ To broaden our donor base globally (help is needed)
As we continue to work with and in response to communities and their needs, our goals will change and develop and new goals will be added.

**We need your help.**

The CDCA has much to do and little to do it with. We need you to continue your support. As you can see in the following information, our biggest source of income is from individuals.

**We need:**

- Monthly pledges
  (if giving online: [https://donatenow.networkforgood.org/jhc-cdca](https://donatenow.networkforgood.org/jhc-cdca))
- Nurture capital with long time horizons invested in the Vida Fund (people to loan at least $5,000 for a minimum of five years, at 0% - 5% interest)
- Churches and other religious and non-religious groups to include us and increase their pledge in their international mission budgets or project budgets
- Donors to check if their employers will match their giving to us as a 501(c)(3) U.S. charity
- Gifts in honor (for birthdays, weddings, graduations, etc.), and in memory
- Putting the JHC-CDCA as a charity in your will
- Giving donations of stock
- For retirees, giving to the JHC as an IRA Required Minimum Distribution option
- Have a Birthday Fundraiser on Facebook if you use Facebook
• Support for those businesses that buy from the cooperatives

• People to come up with creative ways to help
  www.jhc-cdca.org/creative.html

• Prayers for the work, the staff, and the people with whom we work in partnership

Please remember: All of these statistics and numbers are people… mamas, daddies, grandparents, sons, daughters, friends, co-workers.

Also remember we are ALL extremely grateful for all you do to help them.

**Thank You!**

We need you. *Will you continue to help?*

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**2019 In-Kind Donations ($28,636)**
## JHC, Inc. 2019 Financial Summary

### BUDGETED EXPENDITURES:

#### Sustainable Economic Development
- **Agricultural Projects**: $64,304.31
- **Cooperative Development and Other**: $1,021.17
- **Salaries**: $12,918.00

#### Health Projects
- **Nueva Vida Clinic Operations**: $47,772.45
- **Medicine and Laboratory Expenses**: $48,551.55
- **Clinic Salaries and Benefits General**: $92,171.46
- **Dental Program**: $5,645.82
- **Clinic Salaries and Benefits Dental**: $38,272.80
- **Eye Clinic**: $1,194.19
- **Community Outreach and Referrals**: $8,322.27
- **Clinic Construction**: $3,557.27

#### Education
- **Projects**: $21,526.42
- **Salaries and Benefits**: $21,518.82

#### Expenses of Volunteers
- **Relief and Reconstruction**: $133,973.41
- **International Travel**: $7,430.01

#### Support Expenses
- **Center Operation/Utilities**: $55,193.43
- **Salaries and Benefits-Program Center**: $58,203.81
- **Vehicles/Logistical Support**: $26,670.33
- **Administration/Office**: $17,521.77
- **Salaries and Benefits-Administration**: $24,028.75
- **Security Services**: $17,231.79
- **Fundraising**: $8,404.63
- **Health expenses**: $13,392.41
- **Loan Repayments**: $27,931.57
- **Miscellaneous**: $1,886.20

**TOTAL BUDGETED EXPENDITURES**: $771,597.52

### BUDGETED RECEIPTS:

- **Individual Contributions**: $315,298.88
- **Religious Organizations**: $49,837.24
- **Other Groups**: $191,145.38
- **Foundations**: $62,596.04
- **Volunteer Delegations**: $31,084.40
- **U.S. Fundraising Events**: $18,120.21
- **Health Clinic Patients**: $8,390.00
- **Payments-Revolving Loan Fund**: $11,590.00
- **Nicaraguan Business Partnerships**: $1,999.87
- **Interest, Reimbursement, Misc**: $17,389.00
- **Loans Received**: $25,361.15

**TOTAL BUDGETED RECEIPTS**: $731,589.00

Balance carried over from 2018: $75,482.60

**TOTAL RECEIPTS**: $807,071.60

These do not reflect in-kind donations received or expended.
Jubilee House Community, Inc.
Center for Development in Central America

U.S. Legal address:
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Monroe, NC 28112-9449

NEW 2020

U.S. address for donations:
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Rock Hill, SC 29732

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VOIP: 828-202-6869 (with voice mail)

Office in Nicaragua:
Jubilee House Community / CDCA
de km.11 Carr. Nueva a León, 1.6 km. Abajo
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Phone: 011-505-2269-8001 (no voice mail)

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