

# PLAN A HEALTH



2020 ANNUAL REPORT

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THE ONLY DOCTOR NEAR ME DOESN'T DO WOMEN'S HEALTH. I'D HAVE TO TRAVEL MORE THAN AN HOUR TO GET TO SOMEONE SO I JUST PUT IT OFF.

Jatina, age 35

# FROM THE DIRECTOR

wo years ago, Plan A Health was founded with the goal of increasing access to reproductive and sexual healthcare in rural communities. Starting a program is no easy task. But in Mississippi, we found a remarkable team of passionate community members, leaders, and advisors willing to dedicate their time to helping us build a program rooted in the priorities and needs of the community. We took a grassroots approach to building this clinic and our focus in our first year was on seeking feedback and guidance to build a clinic and program that will be an active partner of the community, not just an exam room on wheels.

From institutions to organizations to individuals - every conversation has made Plan A stronger. We expanded the program from its initial narrow focus on birth control to a more holistic approach, including sexual health, primary care screenings, and social services. We selected specific counties to concentrate our efforts to address the areas of highest need. We took the spark of an idea and turned it into a fully fledged plan.

We intended to open the mobile unit in our second year but 2020 was not a year for "as planned." The state of Mississippi and the Delta region were hit particularly hard by the COVID-19 pandemic. Plan A, too, had to find our footing in this new world. We used the time to develop flexible operational plans, refine our strategies, and prepare for 2021.

Our conversations in 2019 helped us to define what the Plan A program and clinic should be. Our work in 2020 has made this plan a reality. We met our goals. We raised more than \$500,000, designed and ordered a custom mobile unit, and expanded our team.

This program would not exist without the community members, collaborators, partners, advisors, and donors, who transformed this concept into a program with enormous potential to improve the health of people in underserved communities.

We are excited and grateful to celebrate these milestones and share with you the road forward.

Caroline Weinberg

# **OUR MISSION**

45% of all pregnancies in the United States are unintended.

million cases of sexually transmitted infections are diagnosed annually.

of uninsured women aged 18-44 have never had a gynecological exam.

lan A mobile clinics bring health care directly to underserved communities. with an emphasis on improving sexual and reproductive health. We serve all people, regardless of insurance status, income. or location, and ensure access to affordable, quality, and compassionate care. We focus on:

Family Planning. Women living in rural areas are less likely to receive reproductive health services than those in urban communities. Nearly 45% of all pregnancies in the United States are unintended and rates of unintended pregnancies are almost 20% higher in Mississippi. Plan A takes a patient-centered approach to care, rooted in the principles of reproductive justice. Plan A clinics offer comprehensive contraception counseling and options.

Reproductive Health. Almost one quarter of uninsured women have not had a pap smear in the last 3 years. African American women in Mississippi are diagnosed with and die of cervical cancer at a rate nearly 50% higher than the national average. The state also has one of the lowest rates of HPV vaccination in the country. Plan A clinics provide free pap smears and HPV vaccinations, in addition to breast cancer screenings.

Sexual Health. The state of Mississippi has the third highest rate of STIs in the country. Rates of new diagnoses of HIV have increased recently in certain counties in the state and young adults ages 20-29 account for more than 40% of new diagnoses. Plan A clinics provide HIV and STD testing and treatment and PrEP (HIV prevention).

**Primary care.** More than 45% of adults aged 19-64 are uninsured or underinsured. Rates of diabetes. hypertension, and obesity in Mississippi are among the highest in the country. Consistent primary care is key to preventing serious illness, but many lack access to basic screenings. Plan A clinics provide blood pressure, diabetes, cholesterol, and depression screenings. We work with local clinics to ensure patients receive ongoing care for medical issues.

# **OUR TEAM**

#### **STAFF**



**Dr. Andrea Collins**Collaborating
Physician



**Max McKinney** Finance Director



**Toria Shaw**Nurse Practitioner



**Juliet Thomas**Community
Health Worker



Caroline Weinberg Executive Director

#### **BOARD OF DIRECTORS**

#### **Gretchen Borchelt** National Women's

# Law Center Dr. Pamela

#### Payne Foster Institute for Rural Health Research, University of Alabama

#### Jackie Sanders Hawkins

Delta Community Solutions

#### **Richard Levin**

Seavest Investment Group term begins 2021)

#### **Melanie Richards**

Glossier (term begins 2021)

#### **Diana Salas**

National Latina Institute for Reproductive Health

#### Dr. Ivana Thompson

Vanderbilt University School of Medicine

#### **Sharon Weinberg**

Blue Leaf Ventures (term ends 2021)

#### **Mollie Williams**

The Family Van

# **BOARD OF ADVISORS**

# **Robin Boyles**Delta Health Center

#### **Michelle Colon** SHERo Mississippi

## SITERO MISSISSIPE

**Juanita Davis**Jackson Medical
Mall Foundation

### Gloria Dickerson

We2Gether

#### **Jitoria Jones**

University of Mississippi Medical Center

#### **Leandro Mena**

University of Mississippi Medical Center

#### **Cedric Sturdevant**

PIER Outreach

#### Wengora Thompson

CVS Health

# RESEARCH & EVALUATION TEAM

# **Dr. Vincent Mendy** Jackson State

University

# Jane Seymour IBIS Reproductive

Health

#### **Rachel Nation**

Mailman School of Public Health

#### Renee Iglesias

Mailman School of Public Health

#### Jessica Havens

Mailman School of Public Health

#### **VOLUNTEERS**

# Sadie Cruz Satoshi Endo Landon Hopper Jenny Hsieh Pranav Ponnaluri Maria Pyaterneva Zoe Reich Courtney Smith

# **ACHIEVEMENTS**

150+ community members collaborated with us to build a program that centered on the priorities of the community.

4()+ community organizations helped us to develop a program that would effectively address gaps in care.

October 2018. Plan A Health incorporated as a nonprofit on October 8, 2018.

December 2018. We had our first meeting in Mississippi.

February-July 2019. Throughout 2019, we hosted focus groups and interviews with community members and organizations to develop the program. These conversations helped us to determine what services we would offer, what kind of mobile unit we would design, and how we would approach care.

May 2019. We had our first meeting of the board of directors.

November 2019. Our board of directors and board of advisors gathered in Jackson, MS for a strategic planning meeting.

March 2020. We received our 501c3 nonprofit status from the IRS.

June 2020. We reached the target funding to purchase our custom built mobile clinic and set our launch for April 2021.

September 2020. New members joined our team: a community health worker and financial director.

October 2020. We partnered with the mayor of Louise, MS to establish a permanent brick-andmortar clinic and office in the Delta.

November 2020. The build begins! As construction began on the clinic itself, the Plan A team worked to create partnerships and collaborations with local facilities. organizations, and community leaders in advance of our April launch.



MISSISSIPPI'S PUBLICLY-SUPPORTED **FAMILY PLANNING CENTERS ARE UNABLE TO MEET 61% OF WOMEN'S NEEDS** FOR CONTRACEPTIVE SERVICES.

Mississippi Center for Health Policy

# **2021 FUTURE PLANS**

2,000 Patients. Plan A's mobile clinic will open its doors in April 2021 and expect to see 2,000 patients in our first year, providing reproductive and sexual health services and primary care screenings free of charge to underserved communities.

#### 20 Community health events.

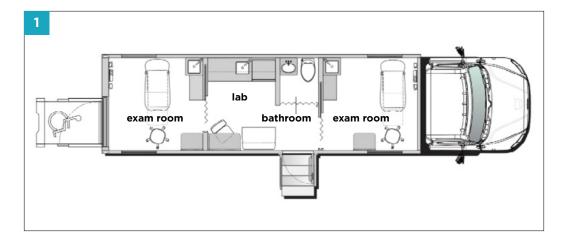
We plan to host community health events in collaboration with community partners. These events will follow best practices during the pandemic while providing essential care services to our communities.

**40 Towns.** Our mobile clinic will primarily serve small towns in the Delta with no existing providers.

**30,000 Miles.** Our clinic will serve 5 counties, traveling more than 30.000 miles as we deliver care to uninsured and underinsured residents of the region.

#### BUILDING **A MOBILE** CLINIC

1 Our mobile unit started with this floor plan. The custom truck features two **OB-GYN** exam rooms, a bathroom. and a lab space.



- 2 Exam Room 1
- 3 Exam room 2 includes a wheelchair lift, ensuring that healthcare is accessible to all.
- 4 In the lab area, our team will perform screenings including tests for HIV, STDs, and blood sugar level.
- 5 The clinic's bathroom includes a cabinet pass through for patients to discreetly leave samples at the lab area.
- 6 The 35-foot truck will serve towns in five counties, bringing care directly to underserved communities. It will feature a mural by local artist Sam McCain.







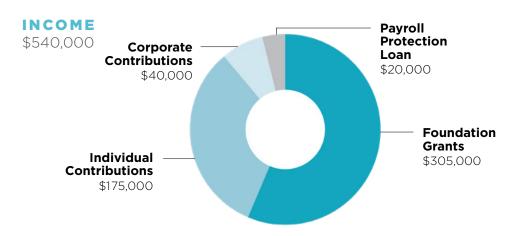


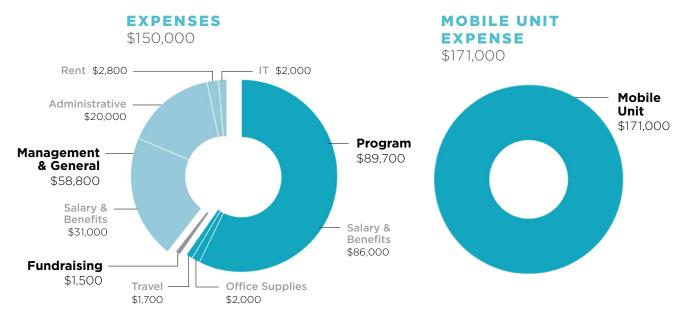


# **FINANCIALS**

n 2020, we set out to raise the funds for our single biggest expense: our custom-built mobile clinic. Thanks to the generosity of our supporters, we were able to raise more than \$550,000, covering both the cost of the clinic and operating expenses in this early stage. As we open our doors in 2021, our financial sustainability plans include grants from state and federal agencies, direct service reimbursements, and the continued support of individuals and foundations. Together, we can keep these essential services free for all who need them.

Finalized financial statements for Plan A Health, Inc will be available in June, following our annual audit and completion of our 990. The breakdown of revenue and expense may change slightly when that process is completed.





## **DONORS**

e offer our thanks to our donors at every level.

Every single dollar helps us to bring healthcare to underserved communities. We are so grateful—whether it is \$5 or \$50,000—your support got us on the road and will keep us there for years to come.

#### Founder's Circle: \$25,000 and above

Carrie Denning Jackson
Cohen-Kramarsky Family Fund
Roberta & Steve Denning
Jill Lafer
Tamer Fund for Social Ventures
Tikkun Olam Foundation
Women's Foundation of Mississippi
Anonymous

#### Driver's Circle: \$10,000 and above

AL Mailman Foundation
Chris Blum, Seven Bridges Advisors
Rabbi Robert & Gina Levine, Congregation
Rodeph Sholom
Margot Lurie Zimmerman
Anonymous

#### \$1,000 and above

Kim Coopersmith
Ruth & Peter Goldstein
Jamie Gorelick & Richard Waldhorn
Carol & Richard Hochman
Jewish Communal Fund
Diane L. Max
Katarina Mesarovich
Kazie Metzger
Laura & David Ross
Judy & Donald Smith
Peter Weinberg & Alexandra Lamm
Anonymous



I DON'T HAVE A CAR SO EVEN WHEN THE DOCTOR IS FREE, I CAN'T AFFORD TO GET THERE. WHEN I NEED TO GO, I WAKE UP AT 6 AND STAND ON THE ROAD WAITING FOR SOMEONE TO BE GOING IN THE RIGHT DIRECTION. AFTER THE APPOINTMENT, I WAIT AT THE CLINIC FOR SOMEONE HEADING MY WAY HOME.





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