2004 PROGRESS REPORT

discovery
collaboration
community
change
MESSAGE FROM THE PRESIDENT

I am very pleased to share PATH’s 2004 progress report with you. It has been a remarkable year. We achieved major impact in all the focus areas of our work: child and adolescent health, infectious diseases, maternal and reproductive health, and vaccines and immunization. Simultaneously, we forged the partnerships that make 2005 look even more promising.

PATH’s mission is to improve the health of people around the world by advancing technologies, strengthening systems, and encouraging healthy behaviors. While in today’s world change has become a constant, making positive changes in the lives of people in the poorest parts of the globe is a complex process. All three parts of our mission are required to make a real and sustainable difference. New and improved health technologies alone will not solve global health problems. We must also pursue the systems improvement and individual behavior change that support the diffusion of innovation. Bringing these three elements together to create new results is the essence of a catalyst.

Unlike a chemical catalyst, however, which—by definition—is not changed in the process of the reaction it sparks, the talented people who work for and with PATH are constantly learning, improving their skills through discovery, collaboration, and community engagement. It is an honor to serve the global health community. I would like to acknowledge and thank all those who make it possible: our staff, our partners, our donors, and—most of all—the people whose lives we strive to improve.

I hope you enjoy this report on our recent work. We welcome your interest, your ideas, your involvement, and your support.

Sincerely,

Christopher J. Elias, MD, MPH

MESSAGE FROM THE BOARD CHAIR

One of the great pleasures of leading PATH’s board of directors is getting to know the committed staff behind the organization’s efforts and hearing about their progress and recognition. Most important, however, is seeing the impact of PATH’s work on a broad spectrum of health programs around the world.

As I interact with PATH’s partners, I see concrete signs of PATH’s commitment to community organizations and the diverse cultures that enlighten PATH’s work. Whether it’s the integration of a new technology into a national health system or the effect of innovative ideas and education on a small community, I am proud to be a part of the impact PATH achieves.

As this year’s progress report illustrates, PATH is a source of strength and hope. The success of our partners, who have been inspired and encouraged by PATH’s work, tells me that PATH is a true catalyst: an organization that enables families, villages, and nations to change the world.

PATH is grateful to the large family of partners and supporters who have joined together in working for better health in countries and communities around the world. It is our privilege to be the stewards of this global trust.

Sincerely,

Halida Hanum Akhter, MD, MPH, DrPh

Charity Navigator salutes [PATH’s] commitment to prudent fiscal management and congratulates you for receiving a 4-star rating. Receiving Charity Navigator’s highest 4-star rating means that your organization outperformed most other charities in America in its efforts to efficiently manage its finances.

Trent Stamp
Executive Director, Charity Navigator

For the second year in a row, Fast Company magazine named PATH one of the world’s top social entrepreneurs—one of only 25 organizations to receive the honor.
A catalyst is the spark that turns insight into answers. It is the bridge between dreams and plans.

PATH is a catalyst in the fight to reduce the burden of disease in poor countries and bring sustainable solutions to the developing world. We transform familiar ideas and advance new ones, weave collaborations between disparate partners, share ideas, and inspire communities to make healthier choices.

PATH is a catalyst for global health.
Breakthrough to a malaria vaccine

IN SUB-SAHARAN AFRICA, malaria kills more than one million children every year. PATH’s Malaria Vaccine Initiative partnered with GlaxoSmithKline Biologicals and Manhiça Health Research Center in 2004 to carry out the largest pediatric trial of a malaria vaccine ever conducted in Africa. The vaccine reduced the risk of developing severe malaria by 58 percent among very young children. Public awareness of this success has helped change the way scientists and policymakers talk about malaria vaccines.

PATH also carried out a market assessment that told us what people in Africa, Asia, and Latin America need from a malaria vaccine and gave us information about the potential size of public- and private-sector markets. These results are shaping vaccine development and will help us build the case for future investment in a malaria vaccine.

This work showed that a vaccine many thought could never be developed is absolutely possible.

Discovery is driven by creativity and dedication. PATH supports discovery from its starting point—a well-defined need—to its end—a widely used tool that is effective, affordable, and accessible in low-resource settings.

In 2004, PATH facilitated projects at every stage of discovery: developing and adapting ideas in our own lab and shop; partnering with the private sector to advance good products born in other laboratories; and collaborating with global health organizations, governments, businesses, and community groups. Wherever we could, we helped make discovery happen.
Information is the key

PATH’s many inventions—from health technologies to behavioral interventions—are bringing real change to the fields of immunization, family planning, nutrition, and communicable diseases.

JACK FARIS, PhD
President, Washington Biotechnology & Biomedical Association

PATH’s second year of work on tests that identify infection with cervical cancer—causing types of human papillomavirus (HPV) ended with a new partner and a new line of research. Cervical cancer is preventable, but deadly if not identified in time—and in the developing world, regular Pap smears are not usually an option. A quick and accurate test for the cancer-causing virus would arm women with the information they need to protect themselves against the disease. PATH established an agreement with a private-sector corporation, forming a partnership focused on research for a rapid strip test that can assess samples in less than 20 minutes. This partnership will explore a format for HPV testing that works as simply and effectively as an over-the-counter pregnancy test.
Collaboration harnesses capabilities. Based on complementary skills and shared commitments, it allows PATH and our partners to deepen our understanding and strengthen our collective capacity to effect change. Collaboration brings out the best in individuals and organizations and, in turn, amplifies their impact.

In 2004, PATH cultivated collaborations that are having an impact on global health. Exchanging knowledge and experience with a medley of partners—community groups, governments, universities, policymakers, the private sector—PATH is building connections that achieve lasting change.

Partnering for prevention of cervical cancer

ON COMMUNITY, NATIONAL, AND INTERNATIONAL LEVELS, PATH and our partners in the Alliance for Cervical Cancer Prevention (ACCP) achieved significant gains against cervical cancer, a preventable disease that kills more than 288,000 women each year.

In Peru, PATH enabled health care providers and the ministry of health to strengthen their education and community-involvement activities, which connect women with preventive services. In Kenya, we helped the ministry of health develop a five-year strategy for preventing cervical cancer in up to 20 districts, with the expectation that the strategy will be scaled up nationally over the next decade. And on the global level, the ACCP partners validated simple prevention methods—such as visual inspection and screen-and-treat approaches—and produced technical guidelines endorsed by the World Health Organization.

After five years of collaboration, the ACCP partners have achieved milestones that are saving women’s lives and paving the way for the long-term impact that an HPV vaccine could bring.

“On behalf of Vietnam’s National Expanded Programme on Immunization, I would like to express sincere thanks to PATH for the close cooperation and effective assistance to EPI Vietnam in 2004.”

PROFESSOR DO SI HIEN, PhD
Director, Vietnam National Expanded Programme on Immunization
Research with rigor

HIGH-QUALITY RESEARCH CAN STRENGTHEN project performance and influence both policy and practice. Recognizing the importance of theoretical expertise as well as on-the-ground experience, PATH and the University of Washington collaborated on an innovative project to improve the quality of reproductive health research.

University faculty and PATH staff supported graduate interns who conducted research in PATH projects in Cambodia, China, Ghana, Indonesia, Mozambique, Nepal, Nicaragua, the Philippines, and Thailand. Project outcomes were enriched by the methodological rigor provided by students and faculty, who benefited from access to PATH’s field projects and experience. Graduate students gained practical experience that will support their growth as the next generation of public health leaders. Most important, these activities contributed to research that can improve policies and practices that affect people’s lives.

Advocacy generates support

MICROBICIDES—TOPICAL PRODUCTS that will one day allow women to protect themselves against HIV—could help change the face of the AIDS pandemic. As a unifying force for more than 55 partner groups and 200 endorsing organizations around the world, the Global Campaign for Microbicides is increasing the knowledge and support needed to advance microbicides.

In 2004, the Campaign’s advocacy team, based at PATH, contributed to a groundbreaking milestone: a tripling of US federal support for microbicide research in 2005. Along with increased contributions from Canadian and European supporters, these resources are essential to accelerating the scientific process. The Campaign also developed a film—In Women’s Hands—and a traveling museum exhibit—Giving Women Power Over AIDS—that are increasing awareness globally.

Together, the Campaign and its partners are moving microbicides from research to reality.

Surveillance leads to action

PRICE IS ONE OF THE STEEPEST CHALLENGES to the development of a meningitis vaccine that meets the needs of sub-Saharan populations. In 2004, the Meningitis Vaccine Project (MVP)—a collaboration between PATH and the World Health Organization—fostered partnerships to overcome this constraint.

MVP consulted African public health leaders while collecting accurate and timely data about the meningitis burden in Africa. The project brought together a consortium of manufacturers from three corners of the globe and helped build consensus toward a landmark goal: producing 250 million doses of a meningococcal A conjugate vaccine in the next ten years at a target cost of US$0.40 per dose. The consortium produced clinical lots of the vaccine, and a Phase 1 trial is about to begin.

PATH and our partners are making a long-lasting meningitis vaccine an affordable option where it is needed most.
Among friends

THE END OF 2004 MARKED the final stage of PATH’s Entre Amigas project, a two-year effort in an urban area in Managua, Nicaragua, where sexual violence and coercion are a constant threat to young women.

The project focused on strengthening relationships between girls just entering adolescence and their mothers and teachers, so that the girls would have better access to information about reproductive health and life skills. But the young girls who participated in the project provided the clearest vision. They were leaders in the peer education program, contributed to project assessments, and wrote for a nationally televised soap opera that dramatized the problems they face daily. Empowering these young women to take charge of their own development was Entre Amigas’ greatest achievement.

Acting for good health

IN KENYA, MATERNAL MORTALITY rates are high, fertility rates are increasing, and use of family-planning services has started to decline. As part of the AMKENI project, PATH helps communities reverse these trends. We give women the information they need to educate each other about family planning, bring families together to discuss issues that were once taboo, and assist village health committees in coordinating outreach projects that offer services to people who would not otherwise have access.

In 2004, we saw impressive markers of the project’s success: use of family-planning services increased by 78 percent at health facilities in communities with strong behavior change communication activities, and women who were involved with AMKENI had more information about reproductive health, were more likely to use contraception, and were more likely to have been tested for HIV. These changes have enhanced the project’s influence in the region, and 256 new villages have independently adopted healthier practices modeled on AMKENI interventions.
Community at work

PATH HAS WORKED SINCE 2001 TO help workplaces in China offer life-planning skills training and support to young migrant workers who have left their families to seek employment and a better life. Through these programs, young men and women get information about reproductive health, including prevention of HIV infection, and learn other basic skills that help them protect their health and plan for the future. The project also equips employers to build stronger bonds with their young employees.

At Shenzhen, just 1 of 15 sites, the project reached more than 145,000 workers in 2004. At some companies, the successful approach has been integrated into employee orientation and on-the-job training sessions.

Good care at home

IN SOUTH AFRICA, HOME-BASED care kits are highly valued for the relief they offer people who are living with AIDS without access to hospitals or hospices. But problems with production and distribution systems mean that community caregivers may not be able to get kits when they need them.

In 2004, PATH began looking for ways to make the kits more widely available and effective, to improve quality of life for those who give care and those who receive it. The kits contain simple items (bandages, antiseptics, basic medicines) that many families cannot afford to keep at home. Through a national assessment, PATH identified obstacles to reliable supply and defined training needs for caregivers. Our work was the first step in changes that will consistently put the right tools in the right hands.

I am especially impressed with PATH’s work to promote women’s health and access to health care in developing countries. PATH’s efforts to empower young girls and women to understand and take responsibility for their reproductive and sexual health are among the most innovative in the field.

ADRIENNE GERMAIN
President, International Women’s Health Coalition
Improving global health requires shifts on every level—health workers who improve their skills, health systems that incorporate new technologies, governments that adopt timely policies. These changes are anchored in sound evidence, solid expertise, and a passion for better health.

In 2004, PATH encouraged vital changes in health practices and perspectives. Equally important, we provided the guidance and support needed to make these changes take hold on sustainable ground.

**Private-sector successes go mainstream**

PATH HAS A LONG HISTORY OF BUILDING PHARMACISTS’ CAPACITY to help individuals—especially adolescents—manage common reproductive health concerns. In 2004, these activities resulted in increased access to emergency contraception (EC) in both the public and private sectors. Greater access means that women and their partners have a better chance of preventing unintended pregnancy after unprotected intercourse or contraceptive failure.

In Cambodia, strong partnerships with the ministry of health, the pharmacy association, and a social marketing group resulted in the registration of a dedicated EC product for the national market. PATH helped shape policy and laid the groundwork for product registration. We will now help introduce the product and make it available to Cambodian women for the first time.

In Kenya, where EC was not available through the public sector, PATH worked with the ministry of health and other partners to generate support for a five-year supply of 700,000 EC doses for the national family planning program.

**Sound practices, safe injections**

PATH DOESN’T JUST INVENT INJECTION TECHNOLOGIES—we ensure that they are available and that health staff know how to use them correctly.

Under the US President’s Emergency Plan for AIDS Relief, PATH procured needles and syringes to meet the needs of programs in 12 African and Latin American countries, where unreliable or insufficient supplies can prompt health staff to reuse syringes and potentially transmit HIV. We provided decision-makers with information about equipment options, quantified countries’ needs, procured 15 million syringes with built-in safety features, and began to strengthen in-country capacity to sustain the supplies.

In India, where safe injection is also a concern, we helped programs reduce unnecessary injections, promote safe practices, and improve disposal of used needles and syringes. Training more than 5,000 health staff, PATH and its partners helped Andhra Pradesh become the first state in India to introduce syringes that automatically disable after use. Soon after, the Indian government mandated that autodisable syringes be used for all immunizations nationwide.
As countries work to address global poverty, sustainable development, and world health, PATH sets a powerful example with its sustainable, culturally relevant solutions to these challenges. I am proud to work with such a forward-thinking organization.

THE HONORABLE
ADAM SMITH
US House of Representatives,
9th District, Washington

New vaccines combat an age-old virus

PATH ADVANCED MAJOR EFFORTS to control the Japanese encephalitis (JE) virus, a close relative of the West Nile virus and the leading cause of viral encephalitis and disability in Asia.

A PATH-led team with clinical, manufacturing, and regulatory expertise assessed a promising JE vaccine developed in Chengdu, China. After reviewing data from trials that included more than one million children, the team found that the data showed the vaccine to be safe and effective.

PATH began working with the manufacturers—who plan to submit the vaccine for World Health Organization prequalification—to ensure more widespread availability and future supplies.

Recognizing that countries need information and support, PATH developed a JE module for the Advanced Immunization Management e-Learning website (http://aim-e-learning.stanford.edu/) — a tool that PATH and Stanford University developed to help immunization managers determine whether and how new vaccines should be added to their programs.

Stemming the tuberculosis tide in Ukraine

IN UKRAINE, WHERE TUBERCULOSIS INCIDENCE HAS RISEN for the last ten years, HIV and AIDS are poised to fuel the epidemic. To mitigate these effects, PATH and its partners introduced the directly observed treatment, short-course (DOTS) strategy—an approach that has been proven to reduce tuberculosis illness and death.

In 2004, PATH improved techniques for tuberculosis detection and treatment monitoring—including smear microscopy, culturing techniques, and drug sensitivity testing—by training lab workers in quality-control measures and preparing a cadre of trainers to expand training to other regions. PATH also developed guidelines on laboratory procedures for diagnosing tuberculosis in general labs. Now endorsed by the government, these guidelines are the only comprehensive, ready-to-use resource on this topic in the country.

By implementing these and a host of complementary activities, PATH and our partners are slowing the spread of tuberculosis in Ukraine.

Supervision improves success

Working with the Government of Andhra Pradesh, PATH and in-country partners strengthened immunization services by using supportive supervision to improve the performance of health care staff.

Before PATH’s involvement, immunization staff had access to supplies and occasional training, but actual performance was often poor—particularly when it came to handling used needles, discarding medical waste, and storing vaccines properly within the cold chain. Focusing on essential immunization activities, such as introducing hepatitis B vaccine, PATH observed service delivery in 18 of 23 districts and developed a strategy for addressing common problems. The result was a supportive—rather than punitive—approach to providing on-the-job guidance, better staff orientations, and tools that help staff ensure the high quality of their work on an ongoing basis.

After introducing the supportive-supervision approach at nearly 1,000 health centers, districts such as Medak have seen the proportion of well-performing centers grow from 7 to 59 percent in a single year. The government is now building on these successes.
PATH is an international, nongovernmental, nonprofit organization. Contributions to PATH are tax-deductible under U.S. IRS code 501(c)(3).

Financial summary (unaudited)
(for the 12-month period ending December 31, 2004)

Revenues
- Foundations $59,153,880
- US Government 13,789,498
- Other governments, multilaterals, and global alliances 10,918,756
- Investments/other 3,451,342
- Individuals 512,013
- Total revenues 87,825,489

Expenses
- Programs 38,262,734
- Program subawards 36,624,043
- Fundraising 309,957
- Management 12,129,277
- Total expenses 87,326,011

Notes:
- Revenues are recognized as net assets released from deferred program revenues that cover current-year expenditures.
- Total revenue includes other miscellaneous revenues and does not include revenues that cover current-year expenditures.
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- Total revenue includes other miscellaneous revenues and does not include revenues that cover current-year expenditures.

Sources of revenue
- Foundations 67.4%
- US Government 15.7%
- Other governments, multilaterals, and global alliances 12.4%
- Investments/other 3.9%
- Individuals 0.6%

Use of funds, by program categories (programs)
- Maternal and reproductive health 19.5%
- Vaccines and immunization 47.2%
- Infectious diseases 22.1%
- Child and adolescent health 11.2%

Expense allocation
- Fundraising 0.3%
- Programs and subawards 85.8%
- Management 13.9%

Notes:
- Revenues are recognized as net assets released from deferred program revenues that cover current-year expenditures.
- Total revenue includes other miscellaneous revenues and does not include revenues that cover current-year expenditures.
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- Total revenue includes other miscellaneous revenues and does not include revenues that cover current-year expenditures.

PATH Associates
We recognize individual donors who contribute $1,000 or more annually as “PATH Associates” for their generous support of PATH’s mission.

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John and Debbie Wilson
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Margot and Paul Zimmerman
Mr. and Mrs. Lee Zurer
Anonymous (5)

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- Bob and Daphne Phillipson
- Jeff and Janea Pinoe
- Jennifer A. Redwitz

PATH’s endowment fund
Named for one of PATH’s founders, the Gordon W. Perkin Endowment is vital to PATH’s continued growth and impact.

Restricted grants and contracts currently provide 99 percent of PATH’s funding. The investment income generated by the endowment fund will offer a reliable source of unrestricted funds that foster innovative ways to meet global health needs, enable PATH to meet co-funding requirements on major grants, and strengthen the organization’s infrastructure.

Over the past two years, the endowment has shown promising growth, thanks to a $1.5 million challenge grant awarded by the Andrew W. Mellon Foundation that matches all endowment contributions dollar for dollar.

SUPPORTERS
PATH is grateful to the foundations, government funding agencies, corporations, and individuals that made our work possible in 2004. This support is truly appreciated and vital to our continued success.

To diversify our funding base, PATH seeks support from a variety of private foundations and government agencies, and we are working to build relationships with a small but growing group of individual supporters. Although individual donations represent a relatively small percentage of our budget, they are key to PATH’s continued ability to innovate.

*Deceased.
Please contact us to report any errors or omissions.
Collaboration and partnerships are essential to the success and sustainability of our work. PATH collaborates extensively with international agencies, government ministries, other nongovernmental organizations, foundations, and local groups in the communities we serve. We also form unique agreements with the private sector, ensuring that our technologies and strategies are available where they are needed most.

Due to the nature of these collaborations, it is impossible to capture all of our 2004 partners and their locations on these pages. We are deeply grateful to all who are working with PATH and others to improve global health.

SUPPORTERS

Raymond A. and Joyce Wall in memory of Kathleen M. Tripp
Diane Ritter
R. Thomas Robinson and Carla Murray in memory of Kathleen M. Tripp
Stanley L. and Dottie Rodbell
Catherine M. Roth
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Pamela Starr in honor of Joyce Erickson
Craig Stephens
Scott C. and Colleen Stronmatt
Lillian Surko in honor of Joyce Erickson
Richard B. Thovilson
Richard and Marilyn Tibury
Dennis Tomes and Brad Stainer
Kathleen M. Tripp*1
W.H. and Ginger Van Ry Family
Gilbert G. VanGuilder
Daryl S. Vhugen
Hart Wagner

*Deceased.

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PATH honors the memory of George M. Lhamon, who passed away on March 11, 2005. Mr. Lhamon was the first member of PATH’s Leadership Council and a founding member of PATH Associates, a group of individuals who provide unrestricted contributions of $1,000 or more that are essential to PATH’s ability to innovate. Mr. Lhamon’s enthusiasm and dedication to PATH encouraged many others to participate. He will be missed.

PARTNERS

International organizations

Familiar no Brasil
Sociedade Civil Bem-Estar
Instituto Promundo
PATH Canada
Viridae Clinical Sciences, Inc.
PATH Canada
Micronutrient Initiative
Food BioTek Corporation
Canada
China

Burkina Faso
Ministry of Health
World Health Organization, Multi-Disease Surveillance Center Ouagadougou

Cameroon
Battambang Provincial Health Department
Cambridian Women for Peace and Development
Kampong Cham Provincial Health Department
Kampong Chhnang Provincial Health Department
Ministry of Health, Center for Disease Control
Ministry of Health, National Immunization Program
Municipal Health Department
National Center for HIVAIDS, Dermatology, and STD
National Pediatric Hospital
National Tuberculosis Program
Pharmacy Association of Cambodia
Shihanoukville Provincial Health Department
University of Health Sciences Pharmacy Faculty

Canada
Canadian AIDS Society
FoodBioTek Corporation
Microbiovitro Initiative
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Virdas Clinical Sciences, Inc.

Chad
Ministry of Health

Chile
Instituto Chileno de Medicina Reproductiva

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Cancer Institute, Chinese Academy of Medical Science

Center for Public Nutrition and Development
China Family Planning Association
Chinese Center for Disease Control and Prevention
National Vaccine and Serum Institute
Shanghai Military Medical University
Synovate
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Yuman Reproductive Health Research Association
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Colombia
Academia Colombiana de Salud Pública y Seguridad Social
Colombia Academy of Public Health
Napoleon Franco y Cia
Unión de Arcoiris

Congo
Ecole de Sante Publique de Kinshasa

Côte d’Ivoire
Ministry of Health
World Health Organization, Regional Office for Africa, West African Block

Denmark
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Eritrea
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Ministry of Education
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PATH

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PATH operates 18 offices in 13 countries. Each year our projects bring innovative solutions to more than 100 countries. We work to meet the needs of geographically and culturally diverse populations around the world.

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