Greetings,

We are pleased to present PATH’s 2009 annual report. We hope you will enjoy this year’s shorter and more innovative approach to highlighting our recent milestones.

The world is entering a pivotal time in global health. Never before have we seen such tremendous political and financial support. And never before have we faced—indeed, set—such high expectations. In 2015, when progress toward the Millennium Development Goals is assessed, we will clearly see whether the global community had the will and capacity to solve the greatest health challenges.

As we enter a new decade—and, in Seattle, a new home for our headquarters—PATH’s capacity and resolve to meet these challenges is greater than ever. Our achievements are saving lives today and signaling even greater promise for the future.

The strength of our partnerships has been the cornerstone of our progress and impact. Your collaboration and support are central to our work, and we are grateful for your continued commitment to global health. Thank you.

Sincerely,

Christopher J. Elias, MD, MPH
President and CEO

Molly Joel Coye, MD, MPH
Chair, Board of Directors
2009: THE YEAR IN REVIEW

As the first decade of the 21st century comes to a close, PATH and our partners are gaining momentum. We are making demonstrable progress in our effort to improve health for the world’s most vulnerable populations.

The world is witnessing the impact that innovative solutions can achieve on seemingly insurmountable global health problems. Substantial political and financial commitments from governments, foundations, individuals, and the private sector are leading to tangible progress. Countries are gaining ground in the struggle against malaria. Health programs are preventing cervical cancer. Child mortality rates are dropping. Investments in global health are paying off in terms of real lives saved.

Alongside these gains, however, are stark reminders of the complexity of our challenge. Countries with strong national leadership are making progress against the leading killers, but poorer and less-developed countries and communities are experiencing more concentrated burdens of disease and increasing health inequity.

With the most robust pipeline of innovative tools and technologies in our history, PATH and our partners are poised to overcome these inequities. We are an integral part of the global health solutions that are unfolding today. And we are challenging ourselves to come even closer to our vision: a world where innovation ensures that health is within reach for everyone.

New tools move into use

PATH, our partners, and the countries and communities we work with have a tremendous capacity to develop solutions. But it can take years to bring new technologies or program approaches from concept into widespread use. In 2009, we moved many technologies and tools along the “innovation pipeline.” To accelerate their development, we applied strategies—public-private partnerships, user-centered research, refined market and commercial assessments—that moved these solutions ahead as efficiently as possible.

Our Malaria Vaccine Initiative (see inner fold) serves as one example of this approach. To accelerate development of the world’s most promising malaria vaccine, the partnership launched a multicountry trial, pioneered the use of regulatory pathways, and worked with decision-makers to ensure that the vaccine will quickly move into widespread use if proven safe and effective. If regulatory clearance is granted, full availability is possible in five years or so, potentially saving hundreds of thousands of lives.

Solutions go where they’re needed

PATH works to bring existing health solutions to people who need them. Through partnerships with national governments, local community organizations, and the private sector, we identify needs and determine how to extend the reach of health solutions. We then strive to ensure that health systems can deliver the solutions and that policies reinforce their use.

The Prevention of Postpartum Hemorrhage Initiative (POPPHI), described on the inner fold, illustrates how we bring health solutions to hard-to-reach populations. In Mali, the initiative conducted research that led to policy change and dramatically increased access to a proven, lifesaving intervention for excessive bleeding after childbirth. In Mali today, this policy change means mothers are more likely to survive to care for their babies.

Taking solutions to scale

Only in the past few years has the world begun to see new global health interventions make a difference at national or global levels. The “implementation science” for scaling up public health efforts in the poorest countries is still nascent.

One of PATH’s most tangible contributions to these challenges is our ability to bridge gaps in implementation. Across each of our focus areas, we work to find new ways to deliver comprehensive health solutions. Just as important, we bring them into national or regional use, often in collaboration with governments and the private sector.
In 2009, for example, we helped integrate solutions to the deeply intertwined epidemics of HIV and tuberculosis. As this report shows, we built critical, sustainable connections across previously disparate treatment systems in Tanzania. The outcome of this work is a more effective approach to preventing the dual epidemics of HIV and tuberculosis and bringing more comprehensive services to people—49,000 so far—across the country.

Building on progress

PATH is ready to build on these and other achievements in 2010 and beyond. The next five years will be critical to reaching the global health community’s ambitious goals. Working with our partners and supporters, we can move closer to achieving these milestones and improving the lives of people around the world.

THANK YOU FOR SHARING OUR VISION

Our donors are essential supporters of our vision of a world where health is within reach for all. In 2009, individual donors and family foundations contributed more than $1.4 million of flexible “innovation funding,” including gifts to PATH’s Catalyst Fund and Fund for Health Technologies. Such funding allowed us to:

• Carry out 37 activities that helped us launch and pursue new initiatives. From establishing oral rehydration therapy corners in Kenya to testing mobile handheld devices as a tracking tool for tuberculosis, this support pushed our work forward in every area of need.

• Leverage six major grants for projects focused on areas such as vaccines and childhood immunization, diagnostic technologies, and better feeding practices for infants and young children.

• Meet strategic priorities, including new systems for understanding (and increasing) the impact of our work; critical support to our programs in Nicaragua and China and for HIV, maternal and child health, and malaria; and high-visibility international collaborations that increase our scope and range.

In 2009, Charity Navigator awarded PATH four stars for financial stewardship for the fifth year running, an honor accorded to fewer than 4 percent of rated charities. Last year 89 cents of every dollar we spent was put to work in direct support of PATH’s programs.

At the start of a new decade, we can imagine for the first time a world without malaria, where children no longer die for lack of basic health care, where women are empowered to protect their own health and the health of their families. Thank you for your contribution. And thank you for sharing our vision.

In 2009, more than 300 people joined us from our online communities to support the reestablishment of oral rehydration corners in clinics throughout Kenya, giving children effective treatment for one of the country’s most dangerous childhood killers: severe diarrheal disease.

Photo: PATH/Evan Simpson.
2009 financial summary (audited)

**REVENUE (in thousands)**

- Foundations and corporations: $160,213
- US Government: 56,800
- Other governments, nongovernmental organizations (NGOs), multilaterals: 20,271
- Individuals/other: 14,713
- Investments: 4,595
- **Total revenue**: $256,592

**EXPENSES (in thousands)**

**Program services**

- PROGRAMS:
  - Emerging and epidemic diseases: $25,116
  - Health technologies: 13,297
  - Maternal and child health and nutrition: 10,195
  - Reproductive health: 19,696
  - Vaccines and immunization: 32,234
- Subtotal programs: 100,538
- Program subawards: $125,472
- **Subtotal program services**: $226,010

**Support services**

- Management and general: 24,078
- Bid and proposal: 2,109
- Fundraising: 1,258
- **Subtotal support services**: 27,445
- **Total expenses**: $253,455

**Assets and liabilities**

**ASSETS (in thousands)**

- Grants receivable: $459,288
- Invested grant funds: 292,808
- Cash and cash equivalents: 72,521
- Other: 25,217
- **Total assets**: $849,834

**NET ASSETS AND LIABILITIES (in thousands)**

- Net assets:
  - Grant funds temporarily restricted: $787,828
  - Unrestricted assets: 17,476
  - Permanently restricted assets: 3,365
  - **Total net assets**: 808,669
- **Current liabilities**: 41,165
- **Total net assets and liabilities**: $849,834

**Sources of revenue**

- 62.5% Foundations and corporations
- 22.1% US Government
- 7.9% Other governments, NGOs, multilaterals
- 5.7% Individuals/other
- 1.8% Investments

**Expense allocation**

- 89.2% Program services
- 9.5% Management and general
- 0.8% Bid and proposal
- 0.5% Fundraising

**Use of funds**

- 32.1% Vaccines and immunization
- 25.0% Emerging and epidemic diseases
- 19.6% Reproductive health
- 13.2% Health technologies
- 10.1% Maternal and child health and nutrition

Figures are presented in US dollars.

**Notes:** The above financial summary is an excerpt from PATH’s audited financial statements, which are audited by the firm Clark Nuber P.S. Full copies are available on our website at www.path.org.

PATH is an international, nonprofit, nongovernmental organization. Our mission is to improve the health of people around the world by advancing technologies, strengthening systems, and encouraging healthy behaviors. Contributions to PATH are tax-exempt under US IRS code 501(c)(3).
WE ENVISION A WORLD WHERE INNOVATION ENSURES THAT HEALTH IS WITHIN REACH FOR EVERYONE

New technology prevents vaccine freeze damage

PATH’s scientists have developed a formulation method that protects a variety of childhood vaccines from freezing, thus widening access to vaccines and health care in poor countries. In Italy, voksen vaccines are being developed, and adapting freezing technology in the public domain, and transformed it from being a commercial vaccine product.

New meningitis vaccine claims regulatory hurdle

Back in February, PATH/WHO/UNICEF/USAID initiative (MVSI) was launched to accelerate development of a meningitis A vaccine. The initiative also includes a vaccine for meningitis C and an enhanced conjugate vaccine against meningitis A, C, and W-135. This project explores approaches that protect vaccines from heat damage. The world needs the MENCON vaccine, which provides broad coverage and enhances existing vaccines.

Combined HIV-TB services reach across Tanzania

About half of Tanzanians diagnosed with tuberculosis (TB) are also infected with HIV. Unfortunately, approaches for treating AIDS and TB have traditionally been separate. Patients often lose opportunities to be diagnosed or treated for both infections, and those who avoid both services suffer—just as providing HIV tests for people with TB or TB tests for people with HIV—were simpler in theory than they are on the ground. PATH is helping to solve this challenge. Last year our team trained more than 2,000 health workers in TB and HIV’s effects control. The project expanded to 30 districts—a third of the country—and improved services for more than 40,000 people. The model is strengthening Tanzania’s health system and demonstrating that high-quality TB–HIV services can be provided and scaled-up in low-resource settings.

India vaccinates millions of children against polio

PATH helped countries across Asia include Cambodia, China, the Democratic People’s Republic of Korea, India, Nepal, and Laos—reduce the toll of this debilitating viral infection. In India, the project has reached 70 million children in 2009 and more than 800 million children over the past 5 years.

Malaria vaccine candidate enters pivotal trials

2009 was a landmark year for funding the world’s most promising malaria vaccine candidate, the RTS,S malaria vaccine. This vaccine was designed by the World Health Organization (WHO) and its partners, and PATH’s overall goal is to deliver a malaria vaccine to the world’s poorest children by 2015. PATH’s work is directed at ensuring that the vaccine—if approved for use—will be available to anyone who needs it as rapidly as possible. This is just one of many activities aimed at ensuring the vaccine—if approved for use—will be available to those who need it as rapidly as possible.

Malaria control interventions save lives

Janet Napolitano, U.S. Secretary of Homeland Security, PATH’s Board of Directors, and PATH’s Partnership for Advancing Technology in Global Health (PATTCH) Coalition launched. PATH’s programs include rotavirus vaccine, vitamin A, anti-malaria therapy, and HIV and tuberculosis treatment. PATH programs: PATH and our many partners are reducing infant and maternal deaths and increasing the use of health services in Kenya’s Western Province. PATH’s malaria control program works to control and eliminate this devastating disease.

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EXECUTIVE AND PROGRAM LEADERSHIP

Board of Directors

PATH’s board members are public health and business leaders from the countries we serve, Europe, and the United States. The board provides governance and fiduciary oversight, sets policy, and assesses PATH’s overall performance.

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We are grateful to all of our supporters. This list includes institutions that contributed $1,000 or more in donations or in-kind contributions to PATH.

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In addition, more than 1,500 individuals contributed flexible funds for PATH innovations.