

Report to our contributors

The spark for innovation

“What does it take?” is a question we hear a lot at PATH. What does it take to develop a vaccine that could end epidemic meningitis? To convince new mothers to break tradition and give birth in a hospital? To reinvent the world’s most common staple food?

What does it take to transform the world?

It takes contributors like you—who believe in innovation and its impact on health around the globe.



THE POWER OF YOUR CONTRIBUTIONS

Each year brings new milestones in global health, and each year we share those victories with the individuals, foundations, and corporations who support our work. Through gifts to the Catalyst Fund and other major gifts, our contributors enable us to innovate—to respond boldly to new challenges and ideas. As a result, we see real change for families, communities, and countries.

The stories below demonstrate the transformative power of your support.

Securing healthy childhoods in India

Five-month-old Gauri Shankar’s eyes open wide with surprise as the nurse midwife squeezes oral polio drops into his mouth, and he wails at the pinch of the shot that will protect him from diphtheria, tetanus, and pertussis. His mother rocks him, but she isn’t worried. “We’ve learned about the importance of vaccinations and how they protect our children,” she says.



Until PATH arrived in the Indian state of Madhya Pradesh, only 36 percent of children were fully immunized—the rest were vulnerable to diseases ranging from measles to tuberculosis. Challenging terrain, a shortage of trained health workers, and weak vaccine management systems made it difficult to improve the situation.

Every step along the immunization chain needed to be strengthened,

which meant a significant commitment of funds. PATH’s Catalyst Fund helped start the work—and, just as important, leverage additional support from a major foundation. This blend of public and private support funded much-needed improvements in Madhya Pradesh, from vaccine storage and distribution to health worker training. Today, every village in the project area holds monthly immunization sessions, and mobile “forest health camps” reach children in even the most remote areas.

In three years, 3 million people have taken advantage of the new immunization services, and the percentage of fully immunized children has jumped to 67 percent. The local immunization program is now strong enough to sustain the effort on its own. Thanks to our donors, the future is more secure for the children of Madhya Pradesh.

Overview of Catalyst Fund allocations in 2011

The Catalyst Fund is PATH’s primary source of funding for innovation at PATH, channeling private support across the spectrum of health needs and into all areas of our work: health technologies, emerging and epidemic diseases, maternal and child health, reproductive health, and vaccines and immunization. In 2011, the Catalyst Fund provided critical support to the projects described below.

DIARRHEAL DISEASE CONTROL IN THE MEKONG REGION. Diarrhea claims the lives of 40,000 children in Cambodia, Laos, Myanmar, and Vietnam every year. PATH is leading an initiative to develop national disease control policies and training for health workers to prevent these deaths. Introduction of new interventions, such as rotavirus vaccine and zinc treatment, will complement current approaches.

EVALUATING COMMUNITY-BASED APPROACHES TO IMPROVING DETECTION OF TUBERCULOSIS. Which community-based activities can increase the number of people tested and treated for tuberculosis? An evaluation in Tanzania found that training pharmacists and traditional healers to refer people with symptoms to health centers is particularly successful. This knowledge will be used to design future interventions to reduce the impact of tuberculosis on poor communities.

HEALTH SYSTEMS STRENGTHENING SUPPORT FOR COUNTRY AND GLOBAL PROGRAMS. With the support of our contributors, PATH strengthened public health systems in Cambodia, Ghana, India, Kenya, Myanmar, and Senegal to reach more people with critical health care. Areas of focus included immunization, cervical cancer screening, and neonatal resuscitation.

EVALUATION OF UKRAINE BREAST CANCER ASSISTANCE PROJECT: TEN-YEAR FOLLOW-UP. In Ukraine, we assessed the long-term sustainability of a project to strengthen breast cancer services. Training curricula, some clinical practices, and peer-support

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Uniject: Helping women to plan and survive childbirth

One of PATH's goals is to advance simple health technologies that can reach right into the homes of people far from medical care. That's why we developed the Uniject™ injection system—a needle attached to a tiny bubble, prefilled with a single dose of medicine. The system is easy for even minimally trained health workers to use. Gifts

PATH/Cabe Blenczycki



from our contributors are allowing us to explore the use of new drugs in Uniject, with great potential for women in the developing world.

One such use is for delivery of lifesaving oxytocin, a drug that prevents uncontrolled bleeding during and after labor. In 2011, PATH carried out a field study in South America on the use of oxytocin in Uniject, and six Latin American countries registered the drug for use in the device.

Now the Uniject system may dramatically expand access to family planning for women in poor countries—with a little help from our donors. The injectable contraceptive depo-subQ provera 104™ has been adapted for delivery using Uniject, and PATH and our partners have been preparing for its introduction.

When production was almost halted because of a gap in funding, a large gift to PATH provided the necessary jumpstart. "Thanks to that gift, PATH had the flexibility to commit the cornerstone funding for the purchase of a trial run of the product, catalyzing movement on the critical steps to introduction," says Sara Tiffit, a senior program officer at PATH.

Within four years, millions of women in sub-Saharan Africa and Asia should have access to depo-subQ in Uniject, giving them more control over the number and timing of their children—and a better chance at a healthy life.

Uniject is a trademark of BD. Depo-subQ provera 104 is a trademark of Pfizer.



PATH/Patrick Mcken

Tackling the "deadly duo" in Cambodia

Concerned about the high toll of pneumonia and diarrheal disease in Cambodia—a duo responsible for 40 percent of child deaths—PATH devised a unique solution: a two-in-one approach to controlling the two diseases. This kind of integration has huge potential to change lives, but it's a new strategy for the country. With help from our donors, we launched a pilot project to demonstrate its potential. Now we're watching the project expand to national scope.

Heng Chivann



The key to saving kids in Cambodia is up-to-date prevention practices, training for health workers, and easier access to lifesaving treatments. We helped the government of Cambodia draft a policy that incorporates all three elements. Then we tested the approach in one province—a chance to refine it and prove its potential. In practice, this meant training health workers and volunteers to recognize and treat both diseases and to teach parents to do the same.

The training made perfect sense to Yeksim Chea, who is vice chief of the village of Duan Tom and a village health volunteer. "If parents knew the signs of these illnesses and when to bring their children to the health center," she says,

"many children would not have to die." At mothers' classes, Yeksim now teaches these danger signs as well as nutrition, hygiene, and home care. She also distributes oral rehydration solution and zinc to parents whose children have diarrhea, saving them precious time.

The integrated approach works: fewer children are arriving at local hospitals with severe dehydration or pneumonia. Now Cambodia's Ministry of Health is partnering with PATH and UNICEF to take it nationwide, with plans to reach more than 1.6 million children by 2014.

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groups had spread well beyond project regions, and other practices continued locally—suggesting that some interventions are better accepted and hold more power for change.

WOMEN'S REPRODUCTIVE HEALTH IN NICARAGUA. Partner violence against women in Nicaragua endangers their lives and their reproductive health. PATH is assisting the Nicaraguan Ministry of Health to coordinate community-level violence-prevention strategies in two regions—including awareness training for health workers, screening of pregnant women, and reporting and monitoring of suspected violence.

DECISION-MAKING FRAMEWORKS FOR ADOPTING HEALTH TECHNOLOGY INNOVATIONS. Our research in Cambodia, Ethiopia, and Zambia revealed that governments in developing countries tend to adopt new health innovations ad hoc. With this understanding, PATH has proposed a new model to encourage governments to develop strategic plans for evaluating and adopting new products that address the health system as a whole.

BUILDING CAPACITY FOR EARLY DETECTION AND TREATMENT OF BREAST CANCER. This pilot project is improving access to breast cancer screening and diagnosis in the Pacasmayo district of Peru, where women often present with advanced breast cancer because of a lack of early screening. Midwives have been trained to perform clinical breast exams and refer women with suspected masses for evaluation by newly trained physicians.

TRAINING THE NEXT GENERATION OF GLOBAL HEALTH PROFESSIONALS. To help draw the best minds in science and public health to service in global health and development, PATH offers internships to students from around the world who are aiming for careers in public health, international relations, bioengineering, and other relevant fields. In 2011, 30 interns assisted with research analyses or field surveys, gaining direct experience and providing skilled support for our projects.

HUMAN MILK BANKING IN SOUTH AFRICA. Donated breast milk provides critical nutrients to vulnerable infants whose mothers have died or are unable to breastfeed. PATH promoted the adoption of human milk banking in South Africa, and the model is now part of a national strategy to promote breastfeeding to support and save young lives. PATH is now developing a simplified milk banking system for resource-poor countries.

FEEDING BUDDIES: A STRATEGY TO PROMOTE SAFE INFANT BREASTFEEDING FOR HIV-POSITIVE MOTHERS. In its final year of Catalyst Fund support, this project saw widespread success with its strategy to partner HIV-positive mothers in South Africa with "feeding buddies" who support the women in following safe breastfeeding practices to protect their infants' health. The South African Department of Health now endorses "feeding buddies," and the US Centers for Disease Control and Prevention regards it as a best practice.

INTEGRATING GENDER ACROSS PATH'S WORK. Evidence suggests that reinforcing equity, addressing harmful gender norms, and improving women's access to health services are some of the most potent ways to strengthen health outcomes for women and men. In the third year of support, this project is finding ways to address gender barriers and achieve gender equity through PATH's project planning, implementation, monitoring, and evaluation.

PROVIDING WORK-ABROAD OPPORTUNITIES FOR NEW PROFESSIONALS. As an international organization working in more than 70 countries, PATH values "cross-seeding" of staff. The Catalyst Fund supports an initiative that gives newer staff the opportunity to relocate out of their "home projects" for short periods of time and into new PATH projects where they provide and learn needed skills. In 2011, this initiative funded nine exchanges between China, Kenya, Nicaragua, Peru, the Philippines, Thailand, the United States, and Vietnam.

ONWARD GRANT PROGRAM. To stimulate innovation, PATH awards teams that have made outstanding progress a small grant to advance their work. Awards from 2011 include one to the Meningitis Vaccine Project team for developing and introducing a vaccine with the potential to end meningitis epidemics in sub-Saharan Africa and another to the director of the Global Health Technologies Coalition for doubling the coalition's membership and expanding its influence as a platform for engaging policymakers in US and international government agencies, the US Congress, and the White House.



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