

From PATH's board chair and new president

Friends, supporters, colleagues:

On behalf of the board and our entire global team, thank you for your support of PATH in 2019. Because of partners and donors like you, it was another momentous year for our organization and for the pursuit of health equity.

During 2019, PATH expanded access to essential medicines, accelerated the development of new vaccines, and launched a Center of Digital and Data Excellence. We successfully commercialized new medical devices and rapid diagnostics that meet the needs of low -resource settings. And we supported country partners around the world as they advanced equitable health policies, strengthened health systems, and established emergency operations centers.

Last year also saw profound change for PATH, as Steve Davis retired as our president and CEO. Steve was an extraordinary and inspirational leader. During his tenure, he led significant growth in PATH's reach and impact; united our efforts under a single, globally recognized brand; and firmly established PATH as a global voice for health equity. He leaves a weighty legacy and we are grateful for all of his outstanding work.

As Steve departed, we were privileged to secure Nikolaj Gilbert— former global partnerships director for the United Nations Office for Project Services—as our new president and CEO. We are inspired by Nikolaj's vision for the future of global health and development, his extensive cross -sector experience, and his values -driven approach to leadership. We are thrilled to have him on board.

Together, under Nikolaj's leadership, we will continue to advance PATH's mission and improve public health around the world. Once again, on behalf of the board and everyone at PATH, thank you for your continued support and for sharing the journey.

With gratitude,

David P. King

David King



David King
Chair, Board of Directors

Hello, Bonjour, Olá:

My name is Nikolaj Gilbert. It was my honor to join PATH as president and CEO in January 2020. I offer my heartfelt thanks to David and the board for placing their faith in me, to Steve and everyone at PATH for their outstanding contributions to global public health, and to all of you—our donors and partners—for making those contributions possible.

When I first learned about PATH, I was so impressed by its people—their focus on health equity, the scale of their impact, and the breadth and depth of their expertise. Now, after my first six months, my admiration has only grown.

In countries and communities around the world, PATH and our partners are working together to curb COVID -19's awful impact and maintain a whole host of essential efforts—strengthening national and global health systems; controlling and eliminating infectious diseases like HIV, tuberculosis, and malaria; advancing childhood immunization; and more. Of course, no one who knows PATH is surprised by this. For more than 40 years, this organization has been growing and changing to meet the needs of the people it serves.

This is precisely why I wanted to join PATH. As the world faces increasingly complex challenges, we will need increasingly integrated solutions. PATH possesses the end -to -end expertise, cross -sector experience, and global reach required to develop such solutions. In the years ahead, we will become even more equitable, holistic, and agile. We will ready PATH—and ready the world—for the challenges of tomorrow, even as we respond to the challenges of today.

Thank you again to the board, to PATH's dedicated staff, and to all of you, our many partners and donors. Though we face new challenges, we rise together to meet them as one global team.

Thank you, Merci, Obrigado,

A handwritten signature in black ink, appearing to read 'Nikolaj Gilbert', with a stylized, flowing script.

Nikolaj Gilbert



Nikolaj Gilbert
President and CEO



“Together, we are strengthening the country’s health system, so that one day, PATH won’t be needed.”

GUY BOKONGO
Country Lead
Advocacy and Public Policy
Democratic Republic of the Congo

Guy co-organized his country’s largest-ever National Forum on Immunization and Polio Eradication in 2019. The summit led to President Tshisekedi’s powerful and public commitment to immunization as a pillar of universal health coverage.

2019 achievements

PATH accelerated global progress toward health equity in 2019 with new vaccines, faster data systems, affordable devices, equitable policies, and so much more. These are just a few examples that demonstrate the breadth and depth of our impact.

Preventing, detecting, and responding to outbreaks

PATH led the implementation of the US Centers for Disease Control and Prevention’s Global Health Security Project in the Democratic Republic of the Congo (DRC), India, Senegal, Tanzania, and Vietnam, enhancing the ability of each country’s health system to prevent, detect, and respond to infectious disease outbreaks. We also designed a mobile emergency operations center — now dedicated to COVID-19 — to support ongoing outbreak response in the DRC and served as a lead partner under the US Agency for International Development’s (USAID’s) Infectious Disease Detection and Surveillance program — hosting the project in Senegal, Tanzania, Uganda, and Vietnam, and supporting implementation in several other countries.

Leading the digital transformation

In 2019, PATH continued driving global digital health transformation. We launched our Center of Digital and Data Excellence, scaled up electronic immunization

registries across 50 percent of Tanzania, helped the DRC establish its first-ever digital health agency, and continued to support the World Health Organization as it develops and implements its global digital health strategy.

Developing and introducing vaccines for all

PATH achieved a host of vaccine milestones in 2019. We helped PNEUMOSIL® — a \$2-per-dose pneumococcal conjugate vaccine — receive World Health Organization prequalification, a critical step in removing the barrier of affordability for countries around the world; supported Pakistan’s introduction of a new typhoid conjugate vaccine reaching nearly 10 million children; began a pivotal Phase 3 clinical study of a polyvalent meningococcal conjugate vaccine capable of targeting all disease-causing meningococcal serogroups in Africa, as well as a Phase 3 efficacy trial of a new non-replicating rotavirus vaccine candidate. PATH’s Center for Vaccine Innovation and Access works on dozens of projects targeting 20 diseases, including

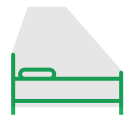


A health worker reviews immunization supply chain data on a tablet in Tanzania. Digital and data systems help strengthen immunization coverage and save valuable time for health workers.

A laboratory technician performs a fluorescent spot test for glucose-6-phosphate dehydrogenase (G6PD) deficiency. After supporting the development of the STANDARD™ G6PD diagnostic, PATH's diagnostics and market dynamics teams are paving the way for its introduction.



PATH/Patrick McKern



11M
long-lasting
insecticidal nets
distributed in Senegal
and The Gambia

diarrheal diseases, meningitis, pneumonia, and malaria.

Controlling and eliminating malaria

After more than 20 years of cross-sector collaboration between PATH and private-sector partners, we supported Ghana, Kenya, and Malawi as they began a phased introduction of RTS,S, the world's first malaria vaccine. We also distributed more than 11 million long-lasting insecticidal nets in Senegal and The Gambia, helped the Zambia Ministry of Health train 4,000 new community health workers, and supported the STANDARD™ G6PD test to achieve expert review panel approval, enabling procurement and expanding access to a critical point-of-care diagnostic for people and communities around the world.

Differentiating services for HIV patients

With USAID support, PATH scaled up differentiated partner notification services in the DRC, Kenya, Ukraine, and Vietnam, offering people newly diagnosed with HIV a suite of options for disclosing their positive status and providing HIV testing services to their partners and families. Our approach proved so successful it was highlighted by thought leaders as the model PEPFAR countries should follow and led to a collaboration with the World Health Organization to develop global guidelines for providing safe partner notification services to sex workers.

“We are passionate about transforming health services, so they reflect what people want and need, including self and community-based care options.”

KIMBERLY GREEN, PhD
Program Leader
HIV and Tuberculosis
Vietnam

Kim and her team helped to design, implement, and scale up differentiated partner notification services in the Democratic Republic of the Congo, Kenya, Ukraine, and Vietnam. In each of these countries, people newly diagnosed with HIV are now offered a suite of options for disclosing their positive status and providing HIV testing services to their partners and families.





The Ellavi Uterine Balloon Tamponade (UBT)—a lifesaving, low-cost medical device to treat postpartum hemorrhage. Prototyped by PATH and commercialized in partnership with Sinapi Biomedical, the UBT is projected to save 169,000 lives by 2030.

Reimagining primary health care

PATH and the Bill & Melinda Gates Foundation launched the Living Labs initiative in Kenya—a human-centered approach to health care innovation where health care workers and PATH designers and researchers work side-by-side to define challenges and develop solutions. Their focus in 2019? Increasing immunization coverage across sub-Saharan Africa.

Creating innovative devices and diagnostics

PATH and our partners advanced a host of new devices and diagnostics aimed at improving public health. Notable milestones included earning European (CE mark) approval for the Ellavi Uterine Balloon Tamponade—an affordable, lifesaving device used to treat postpartum hemorrhage—and receiving World Health Organization prequalification for the first solar-powered vaccine refrigerators in Senegal and first PATH-derived freeze prevention vaccine carriers in Nepal. We also partnered with the University of Washington to develop a bag-mediated filtration system that captures viruses from sewage—allowing researchers to monitor for polio and other viruses.

Maximizing impact through policy

PATH's advocacy team helped advance global progress toward health equity, directly contributing to the adoption of 33 policies, the enactment of 21 budgets, and the implementation of 23 policies in the DRC, Europe, Kenya, South Africa, Uganda, and the United States. Key policy wins included the passage of Kenya's health research & development policy and an unprecedented commitment to childhood immunization from the president of the DRC. His commitment followed a PATH-coordinated, largest-ever national forum on immunization and polio eradication.

Advancing essential medicines

An estimated 64 percent of deaths from diarrhea among children under age five—nearly 320,000 each year—could be prevented with full coverage of oral rehydration solution (ORS) and zinc, along with other community interventions. PATH played an instrumental role in the World Health Organization's (WHO's) 2019 decision to update its Model List of Essential Medicines (EML) and Model List of Essential Medicines for Children to include co-packaged ORS and zinc as medicine for pediatric diarrhea management—petitioning the WHO EML Secretariat, securing letters



At the AIIMS Hospital human milk bank in New Delhi, India, Pratiksha, a new mother, expresses milk. Anupriya and Varsha, lactation counselors, look on and offer guidance. Pasteurized donor milk offers critical nourishment to newborns.

of support, and conducting a global advocacy campaign.

Feeding the future

In India, PATH supported the establishment of 16 lactation management centers in seven states and worked with the Department of Food and Public Distribution to develop a centralized supply scheme that will supply fortified rice to 15 million people across 15 districts. When taken to full scale, the effort is expected to reach 800 million people.

Mapping the road to equity

Many mothers and babies in low-resource settings still suffer and die from preventable causes. To address these inequities, we must first assess them. Where are the gaps? What is working and what is not? PATH investigated the coverage and impact of nine key health interventions across 81 countries. The data gathered will help point the way toward health equity for more mothers and children.



81

countries assessed
for impact of key
health interventions



“We work with stakeholders at every level—engaging directly, building trust, and communicating in terms that relate.”

RAVDEEP GANDHI
Deputy Director of Marketing
and Field Operations
Tuberculosis Program
India

A driving force behind the Joint Effort for Elimination of Tuberculosis (JEET), Ravdeep builds vital partnerships with government officials, private providers, and institutions across India. JEET is a nationwide expansion of the Private Provider Interface Agency—PATH’s innovative public-private model for expanding access to tuberculosis treatment.

Bringing better health to market

In close collaboration with country and industry partners, PATH continued expanding access to lifesaving medical oxygen—providing technical assistance to India, Indonesia, Kenya, Malawi, and Senegal; working with the UNICEF Supply Division to support technical specification development and country procurement; and supporting Kenya and Malawi in their efforts to eliminate preventable newborn deaths through the integration of oxygen and pulse oximetry. We also began implementation of the Unitaid-funded Tools for Integrated Management of Childhood Illness project, which aims to identify, test, and improve access to affordable pulse oximeters and multimodal devices that help screen and treat critically ill children in India, Kenya, Myanmar, Senegal, and Tanzania.

Turning back tuberculosis

PATH improved tuberculosis (TB) services across the entire care cascade by expanding the use of cutting-edge digital technologies. In India, we piloted the use of artificial intelligence to streamline chest X-ray readings, enabling quicker diagnosis and treatment initiation. In Tanzania, we co-developed a mobile phone application that enabled almost 229,900 people

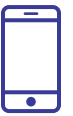
to self-screen for TB. In Ukraine, we rolled out use of a smart pill box that reminds patients to take their medication and notifies providers if doses are missed—the approach helped patients achieve 90 percent treatment completion.

Eliminating neglected tropical diseases

In India, PATH supported national and state efforts to eliminate lymphatic filariasis and visceral leishmaniasis, providing technical expertise, standing up data collection and surveillance systems, and streamlining treatment supply chains. In the state of Uttar Pradesh, we reduced the disease burden and case fatalities from acute encephalitis syndrome, a neurological disease that primarily affects children from economically disadvantaged households.

Curbing noncommunicable disease

In Vietnam, PATH successfully phased out the Communities for Healthy Hearts project—an innovative health care delivery model that improved hypertension management for hard-to-reach populations—and launched an exciting follow-on project: transforming noncommunicable disease response nationwide by scaling up access to preventive services.



229K
people equipped to
self-screen for TB with
a mobile phone app



Volunteer health worker Hoang Puy Tuc takes a blood pressure reading as part of the Communities for Healthy Hearts project, which raised awareness and provided information on hypertension.

Clinical trial monitoring

PATH is committed to ensuring that the clinical trials we sponsor, fund, or otherwise support are registered in a publicly available clinical trial registry, in accordance with international standards established by the World Health Organization. PATH reports progress toward this commitment annually. Monitoring results as of November 1, 2019, are summarized as follows:

- Of the 40 clinical trials initiated on or after September 1, 2016 (when PATH's policy took effect), all were registered in a [WHO Network primary registry](#).
- 13 of the 40 clinical trials were 12 months past primary study completion, of which:
 - 9 had summary results submitted to a trial registry; and
 - 4 had yet to have summary results submitted.
- 5 of the 40 clinical trials were 24 months past study completion, of which:
 - 4 had manuscripts submitted for peer-reviewed journal publication; and
 - 1 had yet to have a manuscript submitted.

Reducing the cost of cleaning

PATH is continuing to advance the introduction of electrochlorinators into health systems in Ghana, Mozambique, and Uganda. This simple device— which produces chlorine from salt, water, and electricity— plays a critical role in system strengthening by expanding access to an essential, low-cost disinfectant. In 2019, we completed a validation study of 40 on-site electrochlorinator prototype units in 24 health facilities.

Expanding access to contraception

In 2019, the DMPA-SC Access Collaborative facilitated contraceptive introduction in seven countries, providing technical assistance, scale-up planning, and implementation support for a range of contraceptive options. The collaborative also facilitated participation across countries by exchanging information, results, and lessons learned; troubleshooting challenges; and accelerating the adoption of best practices.



Fiona Walugembe, PATH's reproductive health project director in Uganda, examines DMPA-SC supply. Since the start of the DMPA-SC Access Collaborative, more than 7,000 women have self-injected the three-month contraceptive.

2019 financial summary

Revenue (in thousands)	
Foundations	\$166,509
US government	71,817
Other governments, nongovernmental organizations (NGOs), multilaterals	46,732
Investments	10,379
Individuals/other	4,632
Corporations	3,426
TOTAL REVENUE	\$303,495

Expenses (in thousands)	
Program-related:	
Global health programs	\$ 95,446
Essential medicines	47,666
Technology, analytics, and market innovation	22,383
Other	5,692
Program development	2,618
Subawards to program partners	81,120
Subtotal program-related	\$254,925
Administrative	\$ 36,989
Fundraising	2,535
TOTAL EXPENSES	\$294,449

Assets (in thousands)	
Cash and cash equivalents	\$ 26,554
Invested grant funds	177,558
Contributions and awards receivable	43,347
Other	17,541
TOTAL ASSETS	\$265,000

Liabilities and net assets (in thousands)	
Total liabilities	\$223,056
Net assets:	
Without donor restrictions	\$ 21,320
With donor restrictions	20,624
Total net assets	\$ 41,944
TOTAL LIABILITIES AND NET ASSETS	\$265,000

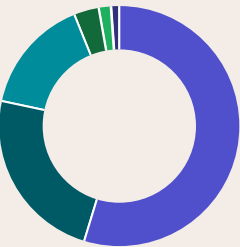
*Use of funds includes direct expenses and funds subawarded to partners.

Figures are presented in US dollars.

Notes: The above financial summary is based on 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](#).

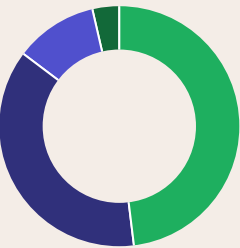
PATH is an international, nonprofit, nongovernmental organization. Our mission is to advance health equity through innovation and partnerships. Contributions to PATH are tax-exempt under US IRS code 501(c)(3).

Sources of revenue



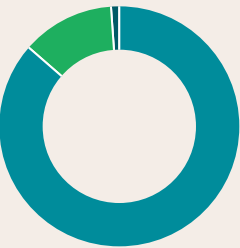
- 54.9% Foundations
- 23.7% US government
- 15.4% Other governments, NGOs, multilaterals
- 3.4% Investments
- 1.5% Individuals/other
- 1.1% Corporations

Use of funds*



- 48.3% Global health programs
- 37.0% Essential medicines
- 11.2% Technology, analytics, and market innovation
- 3.5% Other

Expense allocation



- 86.6% Program-related
- 12.5% Administrative
- 0.9% Fundraising

Moving humanity forward—together

The following list of supporters includes those who gave \$1,000 or more in funding to PATH through grants, donations, and in-kind contributions in 2019. We are deeply grateful to you all—for your generous investment and collaboration, for your commitment to improving public health, and for sharing the journey to health equity.

Interested in joining our global team? [Become a supporter today.](#)

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European Commission
Federal Ministry for Economic Cooperation and Development, Germany
Gavi, the Vaccine Alliance
The Global Fund to Fight AIDS, Tuberculosis and Malaria

Global Health Innovative Technology Fund
Grand Challenges Canada
Livelihoods and Food Security Trust Fund
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Stop TB Partnership
UK Department for International Development
UK Department of Health and Social Care
Unitaid
United Nations Development Programme
United Nations Office for Project Services
United Nations Population Fund
US Agency for International Development
US Centers for Disease Control and Prevention
US Department of Defense
World Health Organization

Nongovernmental and health organizations and universities

BEMPU Health
Global Impact
HarvestPlus
The Nature Conservancy
NCD Alliance
Pacific Northwest Enterprise Risk Forum

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President and CEO

Steve Davis, MA, JD
President and CEO

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Chief Operating Officer

Erica Sessle, MPhil, MPH
Chief of Staff

Roxanne Spiegel
Interim General Counsel

“My time at PATH has been one of my life’s great privileges. I am proud to leave behind an organization committed to challenging old assumptions and pushing tirelessly for health equity.”

STEVE DAVIS
Former President and CEO
PATH

Under Steve’s leadership, PATH improved health for hundreds of millions of people; developed and/or introduced a wave of innovative products, including new vaccines, drugs, diagnostics, devices, and digital tools; created centers of excellence in vaccines, malaria, digital health, and primary health care; and united the organization under a single, globally recognized brand.

Thank you, Steve, for your passion, for your leadership, and for moving humanity forward.



For a full list of PATH’s global leadership team, please visit path.org/leadership/.



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