Voices of HOPE
for global health

PROJECT HOPE
FOUNDED IN 1958

2016 ANNUAL REPORT
Dear Supporters, Partners, Colleagues and Friends,

At Project HOPE, 2016 proved to be a critical year in furthering our resolve to save lives, build capacity, be accountable and drive health program innovations around the world. Next year Project HOPE will celebrate its 60th anniversary, and even with our extraordinary track record as a pioneering global health organization, we will never stop fine-tuning our efforts to reach the most vulnerable, especially women and children.

With your support, our lifesaving health programs reached nearly 1.2 million people in more than 30 countries, trained 100,409 health care workers, delivered more than $114 million of donated medical supplies, equipment and medicines, and engaged the support of 2,317 volunteers worldwide.

Health care workers save lives and remain the centerpiece of our global health mission. Whether we are responding to global epidemics such as HIV/AIDS and TB; addressing chronic diseases and preventable deaths in mothers, newborns and young children; or mobilizing emergency medical teams and supplies when disasters strike, we understand that a skilled health care workforce is the foundation of any meaningful global health success. We work every day to enable local health care workers to have the greatest impact on the health of the people they serve.

We also publish the leading health policy journal, Health Affairs, to inform sound decision-making to improve health outcomes in the United States and worldwide.

In this annual report, we invite you to hear the Voices of HOPE directly from health care workers on the front lines of today’s health challenges. Bridget, a community health worker in Malawi, expresses her personal passion about being able to ensure that everyone in her community is tested for HIV/AIDS and begins immediate treatment if necessary. In China, Jian, a long-time nurse educator, speaks about the empowerment of simulation teaching, which now gives her nursing students hands-on practice and confidence that improves patient care. And from Indonesia, Pipin, a midwife, tells of saving the lives of mothers and babies through training she received in a Project HOPE program.

These are just a few of the many Voices of HOPE represented in our 2016 Annual Report.

Of course, these Voices of HOPE would not be heard at all if it were not for our dedicated partners and supporters. It takes a collective and collaborative partnership, working with governments, private organizations and our individual donors, to provide health care workers with the appropriate tools, training and support they need to save lives.

Thank you for being a Voice of HOPE.

Tom Kenyon, M.D., M.P.H.
Chief Executive Officer
Project HOPE
Voices of HOPE in Africa

**Spotlight on Infectious Diseases**

**Mobilizing Communities to Fight HIV**

Mbabu has an unfortunately high rate of HIV infections and HIV-related deaths. Through funding from PEPFAR/USAID, Project HOPE is partnering with Johns Hopkins Center for Communication Programs and Plan International to provide community-based prevention, care and support interventions for those infected, affected and at risk of HIV. The One Community Activity, awarded on December 9, 2015, has already benefited 85,429 orphans and vulnerable children and their caregivers; reached 137,230 individuals through risk reduction education; and provided targeted community-based HIV testing services to 38,910 clients. The success of One Community is founded in training and mobilizing 3,742 community health workers including volunteers to deliver these services. Bridget is one of the community health workers dedicated to reducing the burden of HIV and AIDS in her community and to reaching the UNAIDS 90/90/90* targets by 2020.

My aunt nearly died due to an undiagnosed HIV infection in 2007. She discovered very late what had been causing her recurrent illness and she would have perished if she hadn’t eventually been tested for HIV and started her treatment. My aunt’s gift of life is a constant inspiration to me and is why I have committed myself to bringing HIV testing services to my community and to ensuring that those who test positive get on treatment immediately.

I was trained by the One Community Activity in comprehensive community health work, focusing on delivering health and social services to my own community. I was trained on how to provide HIV testing services and how to facilitate Village Savings and Loan Groups, which offer support to families impacted by this terrible disease. I now mentor 10 community resource persons who help me deliver those lifesaving services. The HIV testing services training I received and the knowledge I have gained is immeasurable because we can now offer testing services in communities where we live and we are able to ensure that every community member who tests positive receives care and support immediately. This is very important to me personally because I am able to make sure that no one suffers the way my aunt did when testing services were not as accessible.

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**SAVING NEWBORNS IN SIERRA LEONE**

- 74 health care workers trained in simple life-saving interventions like Kangaroo Mother Care

**REDUCING SPREAD OF HIV IN NAMIBIA**

- 8,379 patients benefited from a range of HIV care and support interventions

**ADDRESSING DIABETES IN SOUTH AFRICA**

- 167 health care workers trained, 6,099 patients reached with chronic disease prevention and care and 1,920 patients screened for diabetes

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**Voices of HOPE in Africa**

- Boston Scientific Corporation
- CDC Foundation
- Eli Lilly and Company
- Global Fund to Fight AIDS, Tuberculosis and Malaria
- Medtronic Foundation, HealthRise Initiative
- Project HOPE Supporters: USAID

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**Project HOPE’s 2016 Annual Report | 5**
Southeast Asia and the Middle East are culturally and economically diverse regions, yet each faces similar health threats including maternal and child health, childhood cancers, and infectious and chronic diseases. Thanks to the support of our generous donors, Project HOPE has created successful and sustainable program models which can be replicated in multiple settings. One of these initiatives, Indonesia’s Maternal and Child Health Program, trained 1,173 health care workers last year and benefited 26,913 mothers, children, and newborns.

My name is Pipin, and I am a midwife in Toyomerto Village, Indonesia. In September of 2016 I was informed that a woman was in preterm labor and needed immediate assistance. Although the fetal heart rate was good, the membrane had prematurely ruptured. Fortunately, Project HOPE had provided me with much training in integrated antenatal care, normal delivery, and integrated postpartum care. It was during this valuable training that I learned that a prematurely ruptured membrane leaves the baby vulnerable to infection – a dangerous possibility for both mother and baby since infection is one of the leading causes of maternal and infant death in Indonesia.

After consulting with the mother’s family, we rushed her to Puskesmas Kramat Watu medical center and upon arrival administered antibiotics. We closely observed and monitored her labor progress. Happily, a healthy baby boy was delivered safely. After staying at the health center for three days of treatment and observation, both mother and baby were discharged.

I am so thankful to Project HOPE for the maternal and newborn care training that helps health care workers like me to benefit my community. I am so grateful that Project HOPE has given my colleagues and me the education to save lives.

"Project HOPE has given me the knowledge, skills, and confidence to save lives.”
- Pipin, a midwife in Indonesia

Health Care Worker Training Saves Lives

Spotlight on Maternal, Neonatal and Child Health

Trained Midwives Save Lives

www.projecthope.org/midwives

Project HOPE Supporters

Sanofi

Trained Midwives Save Lives

Voices of HOPE in Southeast Asia & the Middle East
In times of disaster, people often cannot get access to the critical health services they need, and that is where Project HOPE steps in – both in the short and long-term.”

Andrea Dunne-Sousa, Director, Americas Region and Global Volunteer Programs

Spotlight on Disasters and Health Crises

HOPE in Disaster-Worn Haiti

Project HOPE sent medical volunteers and nearly $7 million of medicines and supplies to help in Haiti after Hurricane Matthew. Long-term relief includes the construction of a new, centrally located cholera treatment center. Im Schenckhoven, a physician assistant and active Project HOPE volunteer who has worked all over the world for HOPE, joined Project HOPE’s Disaster Relief team in Haiti following Hurricane Matthew.

I was part of the volunteer team that was deployed to Haiti right after Hurricane Matthew dealt another hard blow to this disaster-worn country. This was my third time in Haiti, including 2010 when I helped in the country after the first serious cholera outbreak following the devastating earthquake that same year.

Haiti is a difficult place to work. Ongoing staff shortages and a lack of resources at medical facilities and many challenges in the health system as a whole existed before Hurricane Matthew. When you add in another natural disaster and another possible cholera outbreak, supporting long-term changes that make a positive impact on people’s health in a country like Haiti can be even more challenging.

This is why Project HOPE’s work is so critical. Whether I am in Haiti after a disaster, in Vietnam teaching a basic first responder course, or working with Project HOPE to support U.S. Navy humanitarian missions, I hope I can play a small role in helping Project HOPE reduce illness, injury and suffering.

Volunteering with Project HOPE helps me know and understand people from other countries, better appreciate their problems, and learn from them. Project HOPE also gives me the opportunity to support dedicated, local health care providers and to help them strengthen their health care systems and infrastructure, a critically important mission in the overall effort to fight disease and save lives.
Voices of HOPE in Europe and Eurasia

"Our work has contributed to a 22 percent reduction of TB mortality rates in all five Central Asian countries."

Mariam Sianozova, Project HOPE's Regional Director, Europe/Eurasia

Spotlight on Infectious Diseases

TB Outreach Gives HOPE, Saves Lives

Migration is a critical factor exacerbating the TB burden and contributing to the development of multidrug-resistant forms of this disease. Nearly seven out of ten migrants diagnosed with TB fail to complete the prescribed treatment for cure due to lack of access to health care and support. In Kazakhstan, Project HOPE, supported by the Global Fund to Fight AIDS, Tuberculosis and Malaria is turning the tide. Partnering with government institutions, other NGOs and civil society, HOPE is removing barriers to access through outreach screenings, awareness campaigns and migrant-friendly treatment facilities. Last year, this outreach impacted 59,576 migrant workers, including Gulnara, a young mother living in Kazakhstan.

In 2003 I came from Russia to Kazakhstan with my husband. I did not plan to stay for long, but fate often changes everything. I divorced and was forced to live in an unfamiliar city with my young child. I found a job and my life began improving. However, in 2010 my documents were stolen. I could not recover them, because I was afraid of deportation. I lived in fear, without documents, earning money where I could.

When the weakness and cough began, I did not know what to do. Then I met Banu. She worked with migrants and encouraged me to be examined for TB. I found out that I had TB. I was so frightened. Banu immediately took me to the TB dispensary and I was put in hospital for treatment. I was in shock, constantly crying. I felt alone. Banu, a social worker with the program, and Banu calmed and supported me, assuring me I would be cured.

While I was in the hospital, the team also helped me apply for a reissue of my documents. I am grateful to Banu, Marina and Project HOPE for the opportunity to be treated free of charge. I now have a firm belief that I will stand up on my feet and my life will be improved.

I want to say to all who are treated, don’t give up, be positive and get treatment without missing a single day. And most important — remember that TB is curable!

Boeing Company
Global Fund to Fight AIDS, Tuberculosis and Malaria
Project HOPE Supporters
USAID
“Today, we’re happy to see more nursing schools integrating simulation teaching into curriculums in China.”

Linda Wei Dong, Senior Program Manager, China

Project HOPE has been partnering with USAID/Office of American Schools and Hospitals Abroad since 2008 to support nursing education in China including a comprehensive simulation lab used for training nurses at the Wuhan University HOPE School of Nursing. The simulation lab has helped nursing students apply knowledge and practice skills in simulated situations before they serve patients; making the school a pioneer in using simulation teaching and a leading nursing school in China. By July 2016, the school had conducted 12 national workshops on simulation teaching for 389 participants from 24 provinces all over China. Jian Yang, a clinical preceptor and senior nurse, who works at Wuhan University Zhongnan Hospital Emergency Department, participated in the simulation teaching method training last year.

Simulation teaching is a relatively new teaching method in China. More nursing and professional schools in China realize the usefulness of simulation teaching and are deciding to set up simulation labs. Last year, I had the opportunity to learn the simulation teaching method. It is very different than the traditional method I learned as it combined theory and clinical settings as well, and is more practical. In addition to practicing clinical skills, students also practice communicating with and comforting patients in simulated situations.

Simulation trainings are also videotaped, allowing students to see what they did right, what went wrong, and where improvements are needed. This type of training is invaluable.

I have also observed a difference in students and new nurses who have participated in simulation training. Working in the emergency department with patients in critical condition can be very stressful for new nurses with little experience. They can be very nervous and then make mistakes, but if they have practiced similar situations in a simulation lab, they have much more confidence to work with patients. This type of training improves the quality of care for patients.
Creating a World Where Everyone Has the Health Care Needed to Reach Life’s Full Potential

THE NEED IS GREAT...

One newborn baby dies every twelve seconds of every day.

45% of all deaths for children under the age of 5 occur in the first 28 days of life.

More than 300,000 women die annually due to pregnancy or childbirth-related complications.

Tuberculosis is the world’s leading infectious disease killer - taking 1.4 million lives in 2015.

Humanitarian and natural disasters continue at an alarming rate across the globe.

Over 125 people die every hour due to HIV/AIDS.

45% of all deaths for children under the age of 5 occur in the first 28 days of life.

...BUT YOU PROVIDE HOPE

With your support, Project HOPE is able to address some of the world’s most pressing global health challenges by:

Enabling health care workers to have the greatest positive impact on the health of the people they serve.

Together, you help us deliver key program priorities including:

- Treatment
- Training
- Health Systems Strengthening
- Volunteerism
- Collaboration
- Global Innovation
- Medicine & Supply Donation
- Community Awareness
- Global Health

OUR 2016 GLOBAL IMPACT

In 2016, you made a lasting impact by helping Project HOPE improve health and save lives.

- Nearly 1.2 million people reached with lifesaving health programs
- 100,409 health care workers trained
- More than $114 million of donated medical supplies, equipment and medicines delivered to areas of greatest need
- Nearly 1.2 million people reached with lifesaving health programs
- 2,317 HOPE volunteers supported global health programs

We Don’t Just Respond. We Rebuild.

Disasters and Health Crises programs continue in Haiti, Nepal, Sierra Leone, the Philippines and Macedonia to address immediate medical needs and build long term health care solutions.

THE MULTIPLIER EFFECT

Project HOPE volunteers and staff provide HANDS-ON TRAINING to health care workers so they have the SKILLS AND TOOLS they need to deliver quality care for patients in their own local communities.

The impact of one newly trained doctor, nurse, midwife or health worker can transform a community and save so many lives.

Based on data and statistics sourced from the World Health Organization.

We Don’t Just Respond. We Rebuild.

Disasters and Health Crises programs continue in Haiti, Nepal, Sierra Leone, the Philippines and Macedonia to address immediate medical needs and build long term health care solutions.

Based on data and statistics sourced from the World Health Organization.
Where We Work

July 1, 2015-December 31, 2016

Bosnia  Japan  Poland
China  Kazakhstan  Romania
Czech Republic  Kosovo  Sierra Leone
Dominican Republic  Kyrgyzstan  South Africa
Ecuador  Malawi  Tanzania
Egypt  Mexico  U.A.E.
Haiti  Mozambique  Ukraine
Honduras  Namibia  USA
Hungary  Nepal  Uzbekistan
India  Nigeria  Indonesia
Indonesia  Philippines

Other Places We Helped

Colombia  Gambia  Vietnam
Dominica  Papua New Guinea

Other Health Programs
Volunteer Supported
Medicine, Medical Supplies and Equipment Donations

Reached nearly
1.2 Million
people with lifesaving health programs.

882,159
beneficiaries in Africa
143,496
beneficiaries in Europe
69,222
beneficiaries in China
44,489
beneficiaries in Southeast Asia
29,957
beneficiaries in the Americas

"New mothers feel secure in knowing that their babies are receiving the best care and have the full attention of the clinic’s doctors and nurses."
Yajaira García Valdez, Family and Community Medicine Doctor

"Naming our son Thomas Kenyon Smith after Project HOPE’s CEO is the best way that we know how to express our appreciation and gratitude."
Father of a baby saved by HOPE health care workers in Sierra Leone

"When my baby was born, she wasn’t breathing and the midwife resuscitated her to save her life. I am grateful that my midwife was trained by Project HOPE."
Ani, a 19-year-old mother in Indonesia

"Her parents were crying tears of joy and relief, knowing we were there to provide medicine that would cover their daughter’s Cystic Fibrosis therapy for the rest of the year."
Angel Jordanovski, HOPE’s Program Manager in Macedonia

"Kissing our son Thomas, Ayesha Smith after Project HOPE’s CEO is the best way that we know how to express our appreciation and gratitude."
Father of a baby saved by HOPE health care workers in Sierra Leone

"These is a delightful experience to meet people from Project HOPE. I was grateful to be with those people who care about children with epilepsy and I humbly extend a heartfelt thanks."
Father of a daughter helped by HOPE’s Rainbow Bridge program
"Equity for women in medical research is a MUST. Read why in my new piece in Health Affairs."

tweeted Barbra Streisand September 13, 2016

Project HOPE’s peer-reviewed journal, Health Affairs, continues to be the leading journal of health policy. Last year presented a year of changes in health policy — in the U.S. and abroad — and Health Affairs-covered it all, becoming required reading for an ever-increasing group of health policy experts and consumers.

Important Topics. Health Affairs explored important themes such as the relationship between food and health, population health disparities, the culture of health, how patients use evidence in their health care decisions, behavioral health, oral health (a Health Affairs first), and the discovery, production and delivery of vaccines, both in the U.S. and worldwide.

High-Impact Study on Vaccines. In the February 2016 issue on vaccines, researcher Sachiko Ozawa reported that every dollar invested in vaccines in low and middle-income countries will yield a return of approximately 16 times the cost, with the return rising to 44 times the cost when considering broader economic and social benefits. This study’s finding spread across the globe with social media shares by UNICEF, Gavi, USAID and Bill Gates. The Gates Foundation also highlighted the Ozawa study results in its 2016 year-end report, as did the World Health Organization’s 2016 Midterm Review of the Global Vaccine Action Plan.

High Profile in Washington. Health Affairs is where, in the words of a POLITICO reporter, “policy wonks kick the tires on big ideas for reforming Medicare, Medicaid and most every aspect of health care in the United States — before those proposals find their way into legislation on the Hill.” Many of these ideas were tried out over the past year on the ever-growing Health Affairs Blog by high-profile policy makers, including Seema Verma, President Trump’s pick for Administrator of the Centers for Medicare and Medicaid Services. When National Institute of Allergy and Infectious Diseases Director Anthony Fauci co-authored a blog with Barbra Streisand in September 2016, titled “A Reprieve For Women: Embracing Inclusive Scientific Research,” they turned to Health Affairs to publish it.

Growing Impact in the U.S. and Globally

In 2016 Health Affairs achieved its highest ever Impact Factor of 5.23 and again earned No. 1 rankings in both the Healthcare Sciences and Services and the Health Policy categories.

In 2016, Health Affairs was cited 29 times in Congressional testimony, 16 times in the Federal Register, and three times in other government news documents.

In 2016 Health Affairs was read in over 230 countries and territories and has more than 250,000 Twitter and almost 13,000 Facebook followers.


Health Affairs Major Funders

Robert Wood Johnson Foundation
Gordon and Betty Moore Foundation
Kresge Foundation
California Health Care Foundation
The John A. Hartford Foundation
Blue Shield of California Foundation

Read the latest on health policy at www.healthaffairs.org

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Innovating to Solve the World’s Greatest Health Challenges

Project HOPE was founded on innovation, developing the world’s first pacemakers, hospital ships and medical clinics to deliver care and elevating health education to the most vulnerable.

Today, our teams, working at the epicenters of the world’s greatest health challenges, still turn to innovation to solve the big health problems they encounter on a daily basis. With just small seed funds, they develop new ideas to ensure better health and save lives around the world.

This year, a team in Tajikistan tested GPS technology to improve TB diagnosis and patient monitoring with the ultimate goal of increasing the success of TB treatment. The team outfitted two vehicles with GPS devices to ensure the most efficient and timely routes were being used to pick up, and ultimately deliver higher quality TB sputum samples for laboratory testing.

In Macedonia, Project HOPE developed custom-made computer software to replace inefficient paper records. The new software provides health care workers easier access to patient records, provides better patient privacy and ultimately increases the quality of health care services. This Project HOPE-owned software can be customized for use throughout Macedonia and in other countries where Project HOPE works to strengthen global health systems data collection capacity and improve patient care.

Other innovative solutions to health problems being tested in the coming year include mobile technology to connect new mothers and health care professionals in the Dominican Republic and Haiti. And in Sierra Leone, a country where infant mortality is one of the worst in the world, HOPE is mobilizing the community to support new mothers with simple interventions to prevent needless newborn deaths.

Project HOPE’s innovation projects are supported by a grant from long-time partner, Eli Lilly and Company.

Annual Global Health Awards

Recognize Exceptional Contributions to Improving Health Worldwide

I’m really proud to have received the Project HOPE Global Health Leadership Award on behalf of AstaZeneca,” said Pascal Soriot, Executive Director and CEO of AstaZeneca. “I believe it recognizes the determination of people from across the company to improve the health and well-being of those in need. It is a determination we share with Project HOPE.

I’m honored to receive the prestigious Global Health Partner Award from Project HOPE,” said Jiang Zhongyi, President and CEO of Shanghai Children’s Medical Center. “I look forward to continuing to work together with Project HOPE to improve the health and well-being of children in China, address critical global pediatric health issues and improve children’s health worldwide.”

Volunteer of the Year Ann Perez

Ann Perez, a registered nurse from Santa Fe, New Mexico, contributed 1,408 hours of medical humanitarian work to HOPE in 2015, training health care professionals in India and responding to the earthquake disaster in Nepal. "Every volunteer says that they gained more than they contributed to their experience and I concurred," said Perez. "In India, while elevating nursing standards and care, I learned the true meaning of hard work, dedication and generosity. Nepal was just two weeks out of my 26 weeks of work as a HOPE volunteer, but it was a powerful teacher nonetheless." Watch video at www.projecthope.org/annperez

Global Partner Volunteer of the Year Massachusetts General Hospital

Massachusetts General Hospital (MGH) mobilized six medical volunteers to quickly respond to the earthquake in Nepal. "All of the volunteers were experts in disaster response and specialized in emergency medicine, surgery and emergency management. "Their incredible work resulted in more patients receiving the best possible care, lower infection rates and earthquake victims receiving more one-on-one comfort from additional medical support,” said Arlen Craemer, MD, MPH, Director, Global Disaster Response; MGH Center for Global Health, Assistant Professor, Harvard Medical School & Harvard School of Public Health.

Leading the Conversations on TB Control in Central Asia

Project HOPE spearheaded a meeting to address cross-border TB and HIV among migrant workers which was attended by ministries of health in Kazakhstan, Tajikistan and Kyrgyzstan as well as World Health Organization (WHO), International Organization on Migration (IOM), and international and local civil society organizations. HOPE, in partnership with the Republic of Kazakhstan Government, USAID, and the Global Fund to Fight AIDS, Tuberculosis and Malaria also helped organize The International Conference of Integrated TB Control, bringing together hundreds of TB experts and health care professionals with the core goal of implementing integrated, patient-centered TB care in the countries of the Central Asian region. “This was an unprecedented commitment of these three Central Asian countries to collectively address the challenges posed by high TB burden in the Central Asian region” said Mariam Sianozova, Project HOPE’s Regional Director, Europe/ Eurasia. Learn more at www.projecthope.org/TB2016

Namibia National AIDS Conference

Project HOPE attended Namibia’s first HIV/AIDS conference to share information on new HIV/AIDS interventions and to join the call to end AIDS in Namibia by 2030. “We were able to showcase HOPE’s novel approach of targeting the homes and families of people living with HIV for comprehensive health, economic and social services and how this approach has improved the lives of children infected and affected by MCH said Steve Neri, Project HOPE’s Regional Director for Africa.

Project HOPE attended Namibia’s first HIV/AIDS conference to share information on new HIV/AIDS interventions and to join the call to end AIDS in Namibia by 2030. “We were able to showcase HOPE’s novel approach of targeting the homes and families of people living with HIV for comprehensive health, economic and social services and how this approach has improved the lives of children infected and affected by MCH said Steve Neri, Project HOPE’s Regional Director for Africa.
REVENUE AND SUPPORT

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<th>Source</th>
<th>Amount</th>
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<td>Individual giving - unrestricted</td>
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<tr>
<td>Individual giving - permanently</td>
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<tr>
<td>restricted</td>
<td></td>
</tr>
<tr>
<td>Foundations and corporations</td>
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<tr>
<td>Corporate gift-in-kind</td>
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<td>Subscription revenue</td>
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<td>Other income</td>
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<td><strong>Total revenue and support</strong></td>
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EXPENSES AND CHANGES IN NET ASSETS

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<th>Category</th>
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<td>Health education and assistance programs</td>
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<tr>
<td>Health policy programs</td>
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<td><strong>Total program services</strong></td>
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<tr>
<td>Supporting services</td>
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<tr>
<td>Fundraising</td>
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<tr>
<td>Management and general</td>
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<tr>
<td><strong>Total supporting services</strong></td>
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<td><strong>Total expenses</strong></td>
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<td>Changes in unrestricted net assets</td>
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<td>Changes in restricted net assets</td>
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<td>Revaluating changes in net assets</td>
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<td>Net gain (loss) on investments</td>
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<td>Pension Liability adjustment**</td>
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<td><strong>Change in net assets</strong></td>
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<td><strong>Net assets, beginning of fiscal year</strong></td>
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<td><strong>Net assets, end of fiscal year</strong></td>
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*The change in restricted assets can be attributed in large part to the total GIK inventory going down with a smaller portion attributed to a reduction in unrestricted cash.

** The pension liability loss is due to decline in interest rates and market value.

Project HOPE's complete audited financial statements with an unqualified opinion by McGladrey LLP are available on request.

Management Report

Last year was an important year for Project HOPE as we defined a new strategy to support a strong and sustainable programmatic and financial model that would enable us to achieve more positive impact and to save more lives and improve health for the most vulnerable.

Project HOPE's leadership team, with support and guidance from our Board of Directors, strategically repurposed ourselves as an international development and relief organization by making a pivot in the way we deliver Gifts-in-Kind (GIK) and by reducing our reliance on GIK-related, non-cash revenues. This organizational and structural change allows HOPE to more effectively and efficiently address the world's greatest public health challenges while still responding to emergencies and disasters around the world. This intentional shift in GIK approach will be visible in our reduced total revenue levels, as related to GIK value, in 2016 and beyond.

To streamline our financial operations, the management team made the decision to change our July 1 to June 30 fiscal year to a calendar year based fiscal year. Because of this change, our 2016 annual report is based on an 18-month time cycle, ending December 31, 2016; therefore we are not able to offer a year-over-year comparison in this report.

During that 18-month time cycle, revenues totaled more than $192 million in cash, donated medicines and medical supplies, and volunteer support.

Project HOPE continues to maximize programmatic impact of its resources by directing more than 90 percent of total expenses to health programs that address the world’s greatest health challenges and save lives through the development of the health workforce.

HOPE’s management prepared and is responsible for the integrity of the financial statements, as well as other financial information presented. We continue to be good stewards of donor resources, with a focus on compliance, and we will remain vigilant in ensuring that the entrusted resources are used thoughtfully to maximize positive impact to our beneficiaries.

We thank you for your continued support of our vision of a world where everyone has the health care needed to reach their life’s fullest potential.

M. Miriam Wardak
Vice President, Management and Operations and Chief Administration Officer
As Chairman of the Board of Directors, I have a profound belief in the mission of Project HOPE. We have witnessed the transformative power of the faces on health care workers, who are now able to give better care to mothers, children and families, with more confidence and skill, because of the continued support and for being a Voice of HOPE throughout the world.

Thank you to our 2016 Donors

Foundation and corporations, foundations and individuals have contributed at least US$10,000 to HOPE every day by financially supporting our lifesaving programs. Project HOPE proudly recognizes the following donors for giving $50,000 or more in fiscal year 2016. Visit www.projecthope.org/2016supporters for a full list of our 2016 supporters.
“THANK YOU for the lifesaving work that you do!”

- Mr. Darrin Geary

“There are so many requests for help, but seeing the way you manage your work is inspiring and encouraging.”

- Linda Rudick

“Project HOPE was my first charity as a young woman 50 years ago. I’m happy to see you are still helping those needing your services.”

- Linda F. Casalino

“I am grateful for your faithfulness and dedication to our patients and the health of so many.”

- Mr. Darrin Geary

“I want you to know that your work is inspiring and encouraging!”

- Mary Colby

“Thank you for your part in restoring the heart, hope, and health of so many.”

- Barry G. Blumenstein

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- Mr. Darrin Geary

“THANK YOU for the lifesaving work that you do!”

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“The Alumni Association rekindled relationships with the Brazilian faculty and former HOPE nurses living in Brazil, and made a donation of anatomical models to be used in nursing schools. The $5,000 donation of models to each nursing school was distributed from the Lee Olive Harrison Basic Nursing Skills Education Fund, an alumni fund established through a bequest to support basic nursing education.”

- Mary Colby

“The Dorothy Aeschliman Nursing Education Fund was also established this year, to honor alumna Dorothy Aeschliman’s distinguished career with Project HOPE that began with the first voyage of the SS HOPE. This fund will support nursing education for nurses around the globe by securing a bridge from HOPE’s historic past into its vital future.”

- Annette White

“Throughout 2016, the Alumni Association continued to provide strong Voices of HOPE to volunteers and staff around the globe by securing a bridge from HOPE’s historic past into its vital future.”

- Annette White

“The Carter Hall Conference Center, located on the grounds of Project HOPE’s headquarters in Vienna, Va., offers a peaceful venue for groups to meet in the gorgeous Shenandoah Valley. Owned and operated by Project HOPE, revenue generated from conferences and meetings held at historic Carter Hall helps support Project HOPE’s lifesaving programs worldwide and offers another opportunity to introduce HOPE’s mission to new audiences.”

- Annette White

“HOPE’s lifesaving programs and spread impact underserved populations around the world, the NEXTGen leadership board is proud to support Project HOPE’s mission to provide sustainable global health solutions. Our goal is to ensure the legacy of Project HOPE in the Amanda Higgins, PharmD, Project HOPE Committee Chair, Lambda Kappa Sigma Fraternity. Last year, 32 chapters of the organization raised $25,680 to support HOPE’s lifesaving programs and spread Project HOPE’s mission of enabling health care workers to have the greatest positive impact on the people they serve.”

- Annette White

“Lambda Kappa Sigma (KIS), an international professional pharmacy fraternity, adopted Project HOPE as its official National Philanthropy in 1964 and has been supporting HOPE ever since. This pharmacists, our goal is to improve the health of our patients. Every day, we strive to make a difference through education to our patients and other health care professionals. Project HOPE has a long history of doing just this with people all over the world. We are honored to be a part of that mission,” said Dr. Amanda Higgins, PharmD, Project HOPE Committee Chair, Lambda Kappa Sigma Fraternity. Last year, 32 chapters of the organization raised $25,680 to support HOPE’s lifesaving programs and spread Project HOPE’s mission of enabling health care workers to have the greatest positive impact on the people they serve.”

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- Mary Colby
Legacy of HOPE Society

We are honored to recognize the generosity and leadership of our Legacy of HOPE Society members who are committed to being Voices of HOPE for many years to come. The individuals listed below share the common bond of providing people around the globe with better health reflected in their decision to remember Project HOPE in their estate plans. For more information about legacy giving options, visit projecthope.org or contact our Legacy Giving Office at 800-544-4673, ext. 472 or via email at giftplanning@projecthope.org.

Iner Abrahamson
Ms. Peggy Ahlgren
Louis F. Albrecht
Margaret Anderson
Ms. Beverly Anderson
Mr. and Mrs. Dorman C. Anderson
Ms. A. M. Austin, CRNA (Ret)
Cynthia M. Babott
John T. and Donna Bailey
Mary Balfour

Mr. and Mrs. Carl B. Ballengee
Mrs. Mary Ann-Ballengee
Dr. and Mrs. John D. Bannister
Margaret Anderson
Louis R. Albrecht
Ms. Peggy Ahlgren
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Ms. Beverley Anderson
Margaret Anderson

Mr. and Mrs. Dale A. Eickman
Mrs. Lois D. Edelfelt
Mrs. Margaret Eaton
Mr. and Mrs. Jesse C. Dutra
Mrs. Margaret Eaton

Mrs. Virginia W. Beach
Louise M. Berman
Ms. Judi Biren
Janice E. Bittner

Mrs. Virginia L. Escher
E. Marsha Elixon, R.N.
Mr. and Mrs. Dale A. Eickman
Mrs. Lois D. Edelfelt
Mrs. Margaret Eaton
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Ms. Beverley Anderson
Margaret Anderson
Generous donors act as the Voices of HOPE every day with financial backing that supports our lifesaving programs. Project HOPE recognizes support totaling $5,000 or more in fiscal year 2016. For more information on how you can support Project HOPE’s global health programming, visit projecthope.org or call 1-800-544-HOPE (4673).
Every year, Project HOPE receives financial support from corporations, foundations, organizations, government, and bilateral donors. This support is essential to our work around the world, and we are proud to recognize those who contributed $5,000 or more in Fiscal Year 2016. To learn more about partnering with Project HOPE, visit projecthope.org/about/partnerships.