2020
ANNUAL REPORT

WHAT IF WE DIDN'T HAVE TO WAIT?

HEALTH ALLIANCE INTERNATIONAL

A MESSAGE FROM HAI's BOARD CHAIR & EXECUTIVE DIRECTOR

In line with HAI's commitment to support and strengthen local public health leadership, we are proud to announce that HAI will be fully transitioning our global operations and active programs to locally-based, locally-led NGOs in 2021. This transition—unanimously supported by HAI's Board of Directors along with headquarters and in-country leadership—represents a shift away from a pervasive practice in global health that centers decision-making authority and donor relationships outside of the Global South; and, a shift toward local autonomy and equity in global health.

For more than three decades, HAI's partnership model and health system strengthening approach have underscored our commitment to local priority-setting and leadership in global health. When HAI took on our first "district adoption" program in Mozambique in 1987, we worked in solidarity with the newly independent nation's National Health System, demonstrating our unwavering support of local institutions against apartheid-backed insurgents and bringing our resources and expertise to the table as collaborators. Each decade since, we have evolved and grown, letting our values drive us closer to our mission through reinvention of our structure and operations.

What began as a small organization staffed by a handful of Americans working in Mozambique and Seattle, by 2020 had grown into a global organization. Over 90% of our staff are locally-hired public health and nonprofit management professionals leading the highly successful implementation of a diverse portfolio of health promotion, education, and research programs. We are extremely proud of the growth and impact of our mission on human lives, on public health systems, and on the practice of global health.

But, as with the rest of the world, 2020 presented us with an opportunity to reflect on how we adapt to change.

In fact, global health has been changing for some time. Following a long history of parallel, foreign-led interventions that often circumvent local public sector health systems, funders of global health are increasingly looking to local expertise and local systems to help integrate public health interventions and drive impact to achieve universal health coverage. As this change takes place, iNGOs like HAI are being justifiably asked to make the case for maintaining expensive, global systems of operation following years of local capacity building efforts. This is especially true when decision-making authority about how funds are employed is concentrated in headquarters offices, located outside countries of operation.

HAI has spent three decades successfully building collaborative, productive partnerships with our implementing and funding partners who we know see the continued value in our mission, model, and approach. But, we have also spent decades investing resources in our country office staff, building experience and strengthening expertise to successfully manage and implement large, complex grants. Their responsiveness, flexibility, determination, and professionalism shone particularly bright in 2020 as has the quality of their work under HAI's current Country Directors.

With our Côte d'Ivoire program approaching the end of its current funding in 2021, HAI's board and leadership took the opportunity to consider the future of HAI's remaining programs. As a result of much thoughtful consideration and planning, in October 2021, HAI will once again evolve in service of our mission and values. At that time, with the resolute support of our current funders, HAI-Mozambique programs and staff will transfer to **Comité para a Saúde de Moçambique (CSM)** and HAI-Timor-Leste programs and staff will transfer to **Asosiansaun Hamutuk Nasaun Saudavel (HAMNASA).**

Both CSM and HAMNASA are independent, locally-registered NGOs with a board, leadership, and staff that reflects the communities they serve. Both organizations—with years of support from HAI—have the systems and structures required to take on a wide range of funding opportunities. And, importantly, both organizations embrace HAI's public sector collaboration model and health system strengthening approach and will continue to work collaboratively with HAI's existing partners, including Ministries of Health, National Institutes of Health, and the University of Washington.

The future of HAI's values, model, and commitment to global health equity and solidarity is the future of CSM and HAMNASA. And so, in April 2022, HAI will complete its 35-year journey.

While this brings mixed emotions for all of us, we are confident that HAI's 35 year commitment to strengthening public sector health services will live on through CSM and HAMNASA. And we are proud knowing that this transition embraces our values and vision of a more equitable model of global health led by local expertise.

Please join us in celebrating the beginning of what we expect to be a very long, very successful future for both CSM and HAMNASA.

Viva!

Anne Evens

Anne Evens, Board Chair

James Pfeiffer

James Pfeiffer, Executive Director

PARTNERS

GOVERNMENT PARTNERS

Ministry of Health and Public Hygiene (MSHP) - Côte d'Ivoire

Ministry of Health - Mozambique

Ministry of Health - Timor-Leste

Ministry of Social Solidarity and Inclusion - Timor-Leste

National Department of Health - South Africa

Provincial/Regional Directorates of Health

- Manica, Sofala, Gaza, Tete & Maputo Provinces in Mozambique
- Gbêkê, Bounkani-Gontougo, Poro-Tchologo-Bagoué, Hambôl, Indénié-Djuablin, & Worodougou-Béré Regions in Côte d'Ivoire

National HIV/AIDS Program (PNLS) - Côte d'Ivoire

National Institute of Health - Mozambique

National Institute of Health - Timor-Leste

National Institute of Public Health (INSP) - Côte d'Ivoire

Beira Operations Research Center (CIOB) - Mozambique

Nucleos Provinciais de Pesquisa - Mozambique

Secretary of State for Equality and Inclusion - Timor-Leste

ADVOCACY PARTNERS

American Public Health Association (APHA), International Health Section

Community Alliance for Global Justice

Community of Practitioners on Accountability and Social Action in Health (COPASAH)

Doctors for Global Health

Global 99

Health Workers 4 All Coalition

People's Health Movement

Washington Fair Trade Coalition

Washington Physicians for Social Responsibility

Yemen Relief and Reconstruction Fund

OTHER PARTNERS

Catalpa International

Fat Rat Films/WHO

CIVIL SOCIETY PARTNERS

AIBEF Korhogo

AIDSCOM Djébonoua

Asosiansaun Hamutuk Nasaun Saudavel (HAMNASA)

Association Saint Camille de Lellis

Bouaké Eveil

Centre de Solidarité Action Social (CSAS)

ChildFund International

CMS Flamboyant

Comité Para a Saúde de Moçambique (CSM)

CS Bethesda Abengourou

CSU Komborodougou

Dispensaire Baptiste de Torgokaha

Dispensaire Sainte Marie

Génération Femme du Troisième Millénaire

Hôpital Baptiste de Ferkéssedougou

Institut de Recherche et d'Actions en Afrique (IRAA)

Jeunesse Evangélique pour la Lutte Contre le SIDA

Mozambican Federation of Gynecology and Obstetrics (AMOG)

Mozambican Pediatricians Association (AMOPE)

Notre Grenier

Parent Trust for Washington Children

PRONTO International

Protection Infantile Mobile d'Abengourou

Rénaissance Santé Bouaké (RSB)

Somali Health Board

Washington Global Health Alliance

Wopilésanga

UNIVERSITY PARTNERS

University of Washington, School of Public Health, School of Medicine, School of Nursing

Catholic University of Mozambique (UCM)

Johns Hopkins University

Muhimbili University of Health & Allied Sciences

Université Alassane Ouattara

University of Eduardo Mondlane

University of KwaZulu-Natal

University of New Mexico Health Sciences Center, Project ECHO

FUNDERS

Ajuda de Desenvolvimento de Povo para Povo (ADPP-Mozambique)

Center for Disaster Philanthropy

Direct Relief

Doris Duke Charitable Foundation

DT Global [flow through from the Government of Australia – Department of Foreign Affairs and Trade]

Global to Local Health Initiative

International Training and Education Center for Health (I-TECH) [flow through from Health Resources and Services Administration (HRSA)]

JSI Research & Training Institute [flow through from USAID]

Moonee Valley City Council

National Institutes of Health [via University of Washington and University of KwaZulu-Natal]

Partnership for Human Development - ABT Associates [flow through from the Government of Australia – Department of Foreign Affairs and Trade]

UNOPS

US Agency for International Development (USAID)

US Centers for Disease Control and Prevention (CDC)

Vital Strategies [flow through funding from Bloomberg Philantrhopoies]

World Health Organization

COVER PHOTO: Shopkeepers and transport workers in sixteen of Mozambique's busiest markets and transit centers received training to serve as COVID-19 prevention "activistas." The joint HAI-MOH health promotion campaign reached over 400,000 Mozambicans with COVID-19 prevention information in under 3 months.

DONORS

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Ian Warthin
Julie West*
Margot Willett
Rosa Williams
Judy Woodman
Tracy Woodman
Liza Xanthopoulos*
& many friends of HAI who wish to remain anonymous

* Indicates Viva! Circle Member in 2020

FINANCIAL HIGHLIGHTS

Statement of Activities

for years ended December 31, 2020, 2019, & 2018

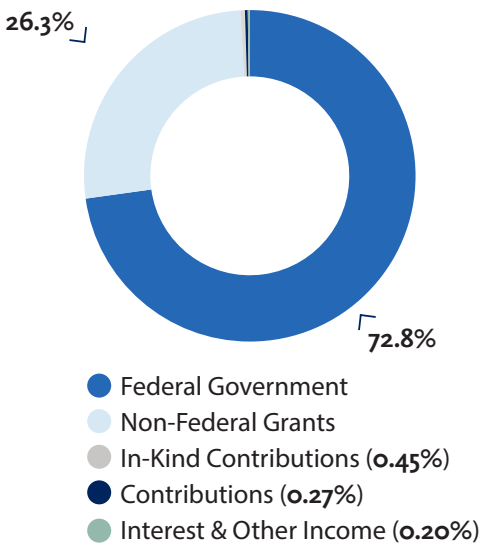
REVENUES *(Cash Support)*	**FY 2020***	**FY 2019***	**FY 2018***
Federal Government	**8,533,376**	10,600,261	8,495,676
Non-Federal grants	**3,079,781**	3,856,715	4,006,312
In-kind contributions	**53,000**	3,529,346	19,102
Contributions	**31,916**	250,140	14,457
Interest & Other Income	**23,162**	31,564	15,350
Total Revenue	**11,721,235**	18,268,026	12,550,887

EXPENSES			
Program Services	**10,548,200**	16,712,653	11,106,081
Management and General	**1,216,519**	1,464,756	1,475,205
Fundraising	**14,680**	13,577	2,718
Total Expenses	**11,779,399**	18,190,986	12,584,004

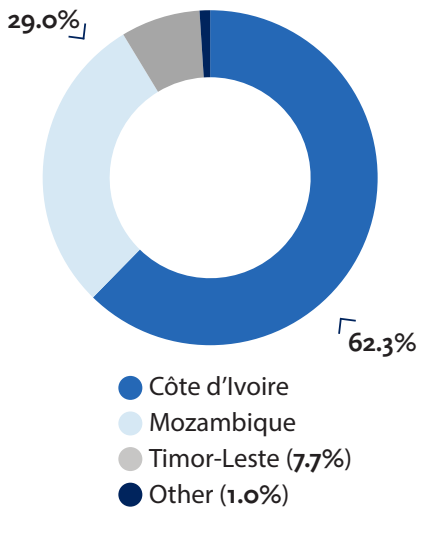
NET ASSETS			
Net Assets - Beginning of Year	**833,597**	778,453	811,570
Net Assets - End of Year	**775,433**	833,597	778,453
Net Income/(Loss)	**(58,164)**	55,144	(33,117)

* All figures in US Dollars
HAI is an international , nongovernmental, nonprofit organization.
Contributions to HAI are tax-exempt under U.S. IRS code 501(c)(3).
Full copies of HAI's audited financials are available on request.

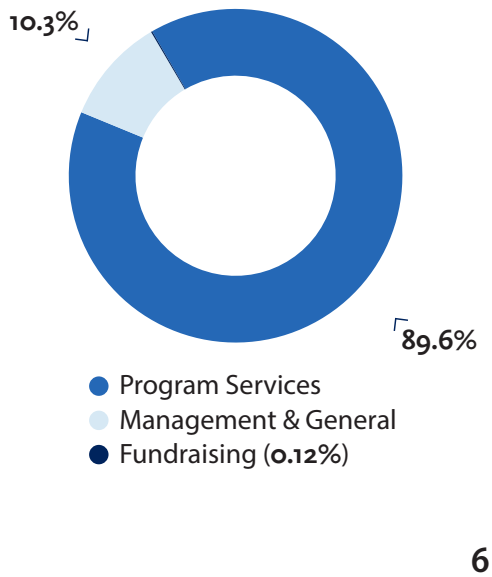
Funding by Revenue Source



Revenue by Location



Expenses by Allocation



ABOVE: An active member of Timor-Leste's COVID-19 response team, HAI worked in partnership with the Ministry of Health and partner organizations to develop and disseminate COVID-19 prevention information targeted at pregnant women and families with newborns.

HEALTH ALLIANCE INTERNATIONAL

DEPARTMENT OF GLOBAL HEALTH

UNIVERSITY *of* WASHINGTON

www.HealthAllianceInternational.org