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A Letter from the Executive Director

Dear Friends,

Within our team, I often speak about 2011 being a moment of inflection. That is to say, our work changed trajectory in dramatic and important ways through a concentrated point in time.

This report is designed to provide reflection on what that inflection has translated into for our patients. It is our humble attempt to summarize the sweat, tears, trials, and triumphs behind our progress that you have enabled by investing in us and sharing our immutable belief that we together can realize the right to health for the rural poor in Nepal.

Most notably, we look entirely different. Our release of this 2011 Annual Report was purposefully delayed until mid-2012 because we wanted it to align with the launch of the new www.nyayahealth.org, which speaks more accurately to the growing organization you have supported us to become.

But please know that we act, in all the critical ways, the same. Our reason for existence has never wavered. The word “nyaya” itself is rooted in the philosophy of action, with its translation being “the realization of just systems.” It is that notion that underpins our mission – to realize the right to health by delivering transparent, data-driven health care for Nepal’s rural poor.

What unites us – from patient to partner to board member – is that persistent drive towards delivering a system that honors those that others don’t, and in the process, converting skeptics to believers.

Before reading, please take a moment of pause to reflect on the idea that behind each number, there are impassioned stories of determination, of courage, and of the human desire to bring the dignity and opportunity found in health to loved ones and strangers alike.

We thank you for your incredible support thus far, and invite you to help us shape the many other inflection points that are sure to follow.

With gratitude,

Mark Arnoldy
Executive Director

e | mark@nyayahealth.org
t | @markarnoldy
We feel that Nyaya Health is a standout organization (only 10 of more than 800 organizations we have examined receive this distinction) because they provide health care in a very poor location and hold themselves to unusual standards of transparency.

GiveWell
Our Story

In 2006, then Yale medical student, Jason Andrews and his Nepali wife and filmmaker, Roshani Andrews, traveled to Nepal’s neglected Far-Western region on their honeymoon to document the lives behind the HIV crisis they had heard so much about.

When they arrived, they instead found themselves in a situation of multiple crises in Achham District – where 260,000 people lived without a doctor, infrastructure was destroyed by a 10-year civil war, and families were torn apart by migration of men to India to find work. On March 26th, 2006, Jason emailed his close friends at Yale Medical School, Duncan Maru and Sanjay Basu, saying he felt “wholly compelled but completely adrift” by the devastation he had seen.

At that point, the three could have walked away from the challenges posed by this region everyone else had forgotten. They were told repeatedly that building a durable organization rooted in the philosophy of “nyaya” or “the realization of just systems.”

Their vision began to be realized in 2008, when they attracted. In November 2011, Nyaya Health was distinguished by the rigorous nonprofit evaluator, GiveWell, as a standout organization for its ability to successful programs to achieve real scale quickly throughout the entire country via replication over shared systems.

Our Model

Nyaya Health’s model of change is founded on these three principles.

PARTNER WITH THE GOVERNMENT

We partner with Nepal’s government at all tiers of health infrastructure – hospitals, clinics, and community health workers – because the government provides what we call the “infrastructure for equity.” Only public systems are fundamentally designed to reach the poorest of the poor. Working within that infrastructure also creates a wedge for innovations and successful programs to achieve real scale quickly through the entire country via replication over shared systems.

BUILD DURABILITY THROUGH NEPALI STAFF

To us, long-term durability is found in employing and training local health care providers and non-clinical staff. Our staff within Nepal is 99% Nepali, and over 80% is “hyper-local” – coming from within a 3-district radius of Achham District in Nepal’s neglected Far-Western region.

USE TOOLS OF TRANSPARENCY

Our ultimate aim is to strengthen services and accountability mechanisms so rural Nepalis can receive high-quality and responsive care from their government systems. To achieve that level of accountability, we use powerful tools of transparency layered on top of government systems of management, accounting, and reporting. We publish all financial and budgetary information in line-by-line formats, open impact data, and all clinical and management protocols on our public organizational wiki at wiki.nyayahealth.org

Milestones

Jason Andrews, then a Yale medical student, visits Achham District to discover there are 0 doctors for over 260,000 people. He writes two other Yale colleagues, Duncan Maru and Sanjay Basu, who together become co-founders of NH.

In 2009, NH is invited by Nepal’s Ministry of Health to sign an MOU to partner with and open the previously abandoned Bayalpata.

NH publishes a paper on its open-source model called “Global Health Delivery 2.0” in PLoS Medicine.

NH launches its community health program in partnership with Nepal’s Ministry of Health.

NH opens its first U.S. office in South Boston at the Still Harbor Center for Discernment and Action.

NH partners with Nepal’s top community and teaching hospital, Bhaktapur Hospital, for program improvement, staff training, and referral care.

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2011 Impact Snapshot

We accomplished more to advance health care for the rural poor in Nepal in 2011 than ever before.

2011 in numbers:

- **30,235** Patients treated at Bayalpata Hospital
- **11,369** Patients cared for through our community health program
- **231%** Growth in funding
- **100%** of our line by line expenditures shared
- **20** New Nepali staff members
- **1st** U.S. office opened
- **3** Academic papers published
- **31st** BROKE GROUND on a surgical center and the region’s 1st microbiology laboratory
- **283,465** People reached with our website, blog, and social media
- **PARTNERED** with Nepal’s top community hospital
Uday Kshatriya, one of Nyaya Health’s eight local Health Assistants, performs a minor procedure at Bayalpata Hospital.

See more at flickr.com/nyayahealth
Bayalpata Hospital was built in 1979, but remained largely abandoned for roughly 30 years before Nyaya Health was invited by the Nepali Government to renovate, operate, and manage the hospital through a unique public-private partnership.

Since opening Bayalpata Hospital in 2009, we have been committed to building the facility as a hub of excellence that is equipped and staffed to serve as both a site of clinical quality and as a robust operations base for all of Nyaya Health’s activities in the country.

Much was accomplished at Bayalpata Hospital in 2011 to bring us very close to realizing that vision.

- **BROKE GROUND** on the 1st surgical center
- **ELECTRIFIED** the campus with 18 solar panels
- **FUNDED** the region’s 1st microbiology laboratory
- **HIRED** 20 new Nepali staff members
- **43,049** Laboratory tests performed
- **483** Ambulance referrals made
- **2487** X-Rays examined
- **30,235** Patients treated
Bayalpata Hospital acts as the hub of Nyaya Health’s operations in Far-Western Nepal. It is home to over 53 Nepali staff members from the clinical, administrative, and community health teams.

See more at flickr.com/nyayahealth.
Nyaya Health’s community health workers (CHWs) accompany patients across the emotional, educational, and literal distance to health in irreplaceable ways.

In 2011, Nyaya Health hired its first Director of Community Health and expanded its Community Health Program (CHP) to cover 7 villages, home to over 17,300 people. Built in formal partnership with the Nepali Government, the CHP was designed to enhance the existing Female Community Health Volunteers program in a set of strategic ways by providing performance-based payments to previously unpaid CHWs to conduct disease surveillance, report household-level data, educate patients, ensure patient referral in critical cases, and provide follow-up for patients requiring long-term care. In 2011, there were 11,369 community health encounters between CHWs and patients taking place hours away from Bayalpata Hospital.
Kamala Koli, Nyaya Health’s Community Health Worker Leader, measures a child for malnutrition in a village two hours walk from Bayalpata Hospital.

See more at flickr.com/nyayahealth
How We Operate

Our operating model is defined by a partnership between U.S.-based staff and a global network of committed board members and volunteers that together act to enable our local Nepali team to deliver health care as effectively as possible. The hallmark features of our model include transparency, efficiency, and a durability achieved by employing local Nepalis to lead health care delivery.

**Transparent:**

**100% Part 1**

We fund all costs for U.S. operations separately through special donors, in-kind gifts, and volunteers so 100% of general donations go directly to Nepal.

**100% Part 2**

We publish 100% of our expenses in the U.S. and Nepal in line-by-line format openly on our organizational wiki to ensure transparency and accountability.

**Wiki**

Our wiki is a low-cost transparent model for replication and collaboration. It includes open data on operations, clinical outcomes, finances, and management protocols.

**Efficient:**

**15,110**

Volunteer hours were provided by members of our international team in the U.S. and within Nepal to keep our operations lean.

**$8.13**

Average cost per patient cared for in Nepal. That’s total organizational costs (including U.S.) divided by our total patient treatments and community health encounters.

**4%**

Spent on management and fundraising. 96% went directly to our Nepal programs.

**Durable:**

**135**

Nepalis employed or provided financial incentives. Over 80% recruited within Nepal’s Far-Western region.

**$105,000**

Invested by the Nepali Government over the last 3 years via a planning process in partnership with the local District Health Office.

**1**

Office in Nepal – not in Kathmandu – but located a 36-hour bus ride away in the country’s neglected Far-Western region on the campus of Bayalpata Hospital.
Nyaya Health is distinguished by a commitment to delivering high-quality health care to the poorest people in Far-Western Nepal, maintaining high standards of transparency and accountability, and building critical feedback loops to continue improving the quality of its own practice while sharing findings with providers around the world.

Dr. Paul Farmer
Connecting and Advocating

In 2011, we brought our work to the world in a variety of new ways. Here are the insights behind how we made health in Far-Western Nepal, a once neglected idea, visible to the world (directly, over 283,000 times).

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Our Boards

Nyaya Health is a U.S.-based 501c3 organization that partners with a sister Nepali-registered non-governmental organization by the same name, and thus the organization is governed by both an international and local pair of Boards. This structure allows us to receive focused organizational guidance and support from experienced professionals at multiple levels across the organization.

US Board of Directors

Duncan Maru, MD, PhD  
Ryan Schwarz, MD, MBA  
Dan Schwarz, MD, MPH  
Bibhav Acharya, MD  
Jason Andrews, MD, SM, DTM&H  
Jeff Kaplan  
Harvard Medical School  
Harvard Medical School  
Harvard Medical School  
UCSF School of Medicine  
Harvard Medical School  
Deerfield Management

US Board of Advisors

Paul Farmer, MD, PhD  
Bijay Acharya, MD  
Chhitij Bashyal, MPA  
Eric Stowe  
Jhapat Thapa, MBBS  
Josh Bowman, JD  
Ruma Rajbhandari, MD, MPH  
Dr. Sanjay Basu MD, PhD  
Partners in Health  
Harvard Medical School  
Harvard Medical School  
University of California, San Francisco (UCSF) School of Medicine  
Harvard Medical School  
Harvard Medical School  
Deerfield Management

Nepal Board of Directors

Name  
Bishnu Acharya  
Ashwata Pokhrel, MPH  
Bijay Acharya, MD  
Bhumika Piya  
Elen Shrestha  
Suraj Gurung  
Position  
President  
Vice-President  
Secretary  
Treasurer  
Member  
Member

Nepal Board of Advisors

Name  
Kul Chandra Gautam  
Dr. Madan Upadhyay  
Dr. Prativa Pandey  
Birendra Bahadur Basnet  
Shushmita Malla  
Affiliation  
UN and UNICEF  
Institute of Medicine  
CIWEC Clinic  
Buddha Air  
GIZ
Our Team

Our team is a tech-savvy, globally collaborative one, working together efficiently in unique ways enabled by technologies like our organizational wiki, a donated Google apps email and calendar platform, project management via Asana, Skype-enabled calling, and a file sharing information system via Dropbox. The result is a partnership between U.S.-based staff and a global network of volunteers that together act to support our local Nepali team in delivering health care as effectively and transparently as possible.

Global Team:

Our global team is lean in cost, but not in commitment. Outside of our full-time Executive Director, Nyaya Health’s volunteer team donated a total of 15,110 hours in 2011 through consistent and clear support to drive our funding, communications, partnerships, administration, and data programs.

Our global team is comprised of:

+ 1 full-time Executive Director
+ 6 member Board of Directors
+ 30 global volunteers
+ Partnered external workforces in Finance, Legal, and Human Resources

Nepal Team:

Our Nepal team is not only “local” because it is comprised of 99% Nepalis but because over 80% of those team members are truly local, recruited from within Nepal's neglected Far-Western region. This approach has made us one of the largest employers in the entire region outside the civil service sector.

Our Nepal team is composed of:

+ 1 Country Director
+ 1 Administrator in Kathmandu
+ 48 hospital-based clinical and administrative staff
+ 7 Community Health Worker Leaders
+ 73 Community Health Workers
Naresh Sunar
Night Watchman.
See more at flickr.com/nyayahealth
Partners

Partnership is a core component of our operating philosophy, and thus our team is constantly at work building strategic and reliable partnerships internationally and within Nepal to advance our mission. Thank you to the individuals and organizations that partnered with us in 2011.

**International**

**FUNDING**
- Borgny Ween & Knut Skyberg
- Cents of Relief
- Elmo Foundation
- EquityEditors Association
- Google Matching Gifts
- Greatergood.org
- Help Nepal Network
- MEMC Foundation
- Nick Simons Foundation
- Nuru Project
- One Day’s Wages
- Philanthroper
- Plato Malozemoff Foundation
- Pro Victimis Foundation
- Prusoff Foundation
- T & J Meyer Family Foundation
- The Hollies
- The Shelley and Donald Rubin Foundation
- Walk for Nepal
- Watsi

**IN-KIND**
- Abbott Laboratories
- Google Adwords
- Insourse Services
- NTEN
- PBworks
- QBC Diagnostics
- Quidel Corporation
- Salesforce Foundation
- Sherin & Lodgen
- Skydda
- Sun Edison
- Suzanne Wallen
- TEDMED
- The Management Center
- UpToDate
- World Scopes
- in3corp
- unbounce.com

**INSTITUTIONAL**
- Alpert Medical School at Brown University
- Brigham and Women’s Hospital
- Center for Surgery and Public Health
- Children’s Hospital of Boston
- Gradian Health Systems
- Harvard Business School
- Insourse Services, Inc
- Board Fellows Program
- Non-Resident Nepali Association USA
- Norwegian Medical Association
- Partners Healthcare
- Partners in Health
- Still Harbor
- The Giving Common of the Boston Foundation
- The Praxis Network
- Tufts University MD/MPH
- Yale University

**Nepal**

**FUNDING**
- ChangeFusion Nepal
- Daya Foundation
- Deerwalk Institute of Technology
- Youth for Nepal

**IN-KIND**
- Buddha Air
- CIWEC Clinic
- Dhulikhel Hospital
- District Health Office, Achham
- Indian Embassy

**INSTITUTIONAL**
- America Nepal Medical Foundation
- CIM Program at GIZ
- Dhulikhel Hospital
- Gangotri Rural Development Forum
- Geta Eye Hospital
- Gham Power
- National Center for AIDS and STD Control
- Nepal Ministry of Health and Population (MOHP)
- Nepalgunj Medical College
- Patan Academy of Health Sciences
- TEAM Hospital
- The Alternative Energy Promotion Center
Our Financial Principles

2011 brought a large increase in support from around the world, and as a result, our funding grew by 231%. But our commitment to our core financial principles that have earned us a reputation as one of the most transparent and efficient organizations in Nepal has remained unchanged.

100% x 2:
We present our finances with unrivaled transparency, reporting 100% of line-by-line expenditures from both our U.S. and Nepal operations on a monthly basis via our organizational wiki. We do that because we take our role as stewards of our funders investment very seriously, and we have nothing to hide in how we use their investments to bring health care to those in rural Nepal.

Focused:
Our core focus as an organization is to deliver transparent, data-driven care to Nepal's rural poor, not to be an accounting firm. Thus, we secured a pro bono partnership with a renowned accounting organization so that we can stay focused on doing what we do best, while they help us excel in financial management by building and operating systems in the U.S. and Nepal.

Efficient:
We use money well, with 96% of our money going directly to our Nepal programs. Over 45% of that funding supports the retention of long-term, local Nepali staff that in turn invest in local economies. In 2011, our total organizational expenses (including costs in the U.S.) were $340,486.19, and we provided 41,889 patient treatments and community health encounters. That means it costs us $8.13 on average per patient cared for in Nepal.

Diversified Investment:
We have always believed sharing investment responsibility with a diverse set of partners is the key to sustaining our work over the long-term. From the beginning, our public-private partnership has attracted investment from Nepal's Ministry of Health, and our transparency and efficiency have attracted a balanced set of commitments from individuals, corporations, academic partnerships, and foundations.
Statement of Activities

2011 Revenue

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual Gifts</td>
<td>$254,072.72</td>
</tr>
<tr>
<td>Foundations and Partner Organizations</td>
<td>$226,456.12</td>
</tr>
<tr>
<td>Nepali Government</td>
<td>$38,663.24</td>
</tr>
<tr>
<td>Corporate Gifts</td>
<td>$33,139.92</td>
</tr>
<tr>
<td>Total Financial</td>
<td>$552,332.00</td>
</tr>
<tr>
<td>In-Kind Gifts</td>
<td>$170,022.00</td>
</tr>
<tr>
<td>Total</td>
<td>$722,354.00</td>
</tr>
</tbody>
</table>

2011 Expenditures

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital-based Programs</td>
<td>$259,170.91</td>
</tr>
<tr>
<td>Health Facilities &amp; Infrastructure</td>
<td>$43,474.80</td>
</tr>
<tr>
<td>Community Health</td>
<td>$22,834.30</td>
</tr>
<tr>
<td>Management &amp; Administration</td>
<td>$5,462.00</td>
</tr>
<tr>
<td>Fundraising</td>
<td>$9,544.18</td>
</tr>
<tr>
<td>Total</td>
<td>$340,486.19</td>
</tr>
</tbody>
</table>

Starting on January 1st, 2012, the Nyaya Health team made a commitment to fund its organizational growth in the U.S. separately via special donors, in-kind gifts, and volunteers to guarantee that 100% of general donations go directly to work in Nepal.
Sunita Kumal
1 of Nyaya Health's 7 Community Health Worker Leaders recording data from a Community Health Worker.

See more at flickr.com/nyayahaalth
Thank you to our incredible partners and the 369 individuals who made a total of 659 investments in delivering transparent, data-driven health care in rural Nepal in 2011.