

### MANAGEMENT SCIENCES for HEALTH © STEADY STRIDES TOWARD SUCCESS



Pr Sekou Bah

### About Management Sciences *for* Health

### Who We Are

Management Sciences for Health (MSH) is a global nonprofit organization that provides governments, health organizations, and the private sector with the strategies, tools, and management support to effectively and efficiently deliver high-functioning health systems.

### Our Mission

We work shoulder to shoulder with countries and communities to save lives and improve the health of the world's poorest and most vulnerable people by building strong, resilient, sustainable health systems.

Amoxicilline

### Our Vision

A world where everyone has the opportunity for a healthy life.

### The Tao *of* Leadership

In the late 1960s, MSH founder Dr. Ron O'Connor was introduced to a poem based on the Tao Te Ching, "The Tao of Leadership," by a Japanese doctor in Nepal with whom he worked, Dr. Noboru Iwamura. Dr. Iwamura embodied the selflessness and humility that inspired Dr. O'Connor and are expressed in the Tao of Leadership. These values still resonate today in our daily work and serve as continuing inspiration to our staff in the many countries where we work.

GO TO THE PEOPLE Live with them Love them Learn from them Start with what they have Build on what they know. But of the best leaders When their task is accomplished The work is done The people will all say WE HAVE DONE IT OURSELVES.



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Mobilizing both new and existing partnerships with governments, the private sector, and local health leaders is helping us take on some of the world's most persistent health challenges..."

### Dear Friends,

As we reflect on the first year of our seven-year organizational strategy, I am so proud to share the progress we are making in each of our five strategic priorities. This strategy is rooted in localization and aims to keep decision making and ownership in the hands of the communities where we work.

Across the globe, we are focusing on priority areas within the realm of health systems strengthening. Central to this strategy is unlocking the incredible potential of our talented staff and partners around the world. By training local health workers, helping pharmacy professionals strengthen their expertise, supporting laboratory professionals, and partnering with the many local communities with which we work, we ensure that their voices are central to decision making. By walking shoulder to shoulder with our partners, we can be at the forefront of innovations that address the true needs on the ground. Mobilizing both new and existing partnerships with governments, the private sector, and local health leaders is helping us take on some of the world's most persistent health challenges, from infectious to noncommunicable diseases, in promising new ways. We are committed to using data to drive better decision making and innovation and to tying our strategy metrics to the Sustainable Development Goals.

These efforts have led us here, to this year's Annual Report, one of the ways we demonstrate our impact. I am honored to share this snapshot of our work, on behalf of my MSH colleagues around the world.

Sincerely.

Marian W. Wentworth

Marian W. Wentworth President and Chief Executive Officer

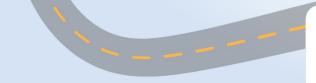
### Making a Moment: Working Behind the Scenes

Advising government officials on

updated regulations and laws



Determining how much medicines will cost and who will pay



MSH | ANNUAL REPORT 2023

MSH works to support lifesaving health interventions across the whole health system. Let's take the example of a health care worker administering a lifesaving treatment or vaccine to a child in a low-income country.

While that might be the image that makes the news, MSH is working behind the scenes, often in less photogenic but equally necessary settings, to make sure that moment happens.

Do the country's laws and regulatory environment allow for new medicines to enter the market? How will it be paid for? Is there a way to transport it and store it at the right temperature? Has the health care worker been properly trained? Is there a system for keeping records, so they know how many treatments have been administered, who has received them, and when to order more? MSH works on all of these aspects of a health system to make sure everyone, everywhere has the opportunity to live a healthy life.



Improving health care worker skills and recordkeeping

Child receives lifesaving treatment

## STEADY STRIDES TOWARD SUCCESS

At MSH, we partner with countries to develop solutions for local health systems challenges to sustain the delivery of equitable and people-centered primary health care. We work in any geography where there is demand for our services from local partners and the potential to catalyze greater health impact.

When we ask our partners and donors how we can help them, they highlight our technical expertise in strengthening health systems and our strong relationships with ministries of health and other local partners. This combination of world-class technical expertise and local relationships is at the heart of our approach and our strategy.



### 01

### Localize Our Efforts

We are building our global presence to move our operations increasingly outside of the US. To do this, we are continuing to establish a local presence in priority countries and ensure that our project design is led by local partners and communities wherever we work. We are also forging innovative country partnerships and developing business models that drive innovation at the local level. Our focus is on strengthening local partner and government capacity across all aspects of health systems.

> Ur commitment to localization and integrated, holistic interventions dramatically impacts the lives and health of the people and communities we serve. Our project teams remain steadfastly engaged with our local partners and governments, ensuring not only that training and mentorship sessions happen but also that supply chains are managed and the capacity of a country's health system continues to grow.

In Afghanistan, the role of female community health workers (CHWs) is exceptionally important to help women access the right guidance and care. Operating at the grassroots level of the health system, CHWs often serve as the first point of contact. A key component of our work in Afghanistan is delivering training and ongoing mentorship to health facility managers and service providers and equipping them with the knowledge and skills they need to bring quality care to underserved populations in their communities. In 2023, we trained and mentored over 2,000 CHWs.

Our commitment to locally led supply chains, and to ensuring that patients have access to the vital medicines they need, extends to the more than 35 countries where we work, including Ukraine. In a country with one of the highest HIV and tuberculosis (TB) prevalences in



Eastern Europe, our work has helped two manufacturers register antiretrovirals, and by working with a local private logistics company, in spite of interruptions due to war, we helped cover last-mile deliveries of HIV and TB medicines across 16 regions in the country and prompted significant improvements to the warehousing of HIV and AIDS and TB medicines across the country. In addition, through this partnership, we reduced the carbon footprint of medical supply chains more than 10 times.

Supply chain digitalization remains a major priority in Uganda. For years, reliance

on paper-based systems hindered efforts to track medicine stock and improve coordination between suppliers and health facilities. The Ugandan Ministry of Health's national health facility stock status dashboard, launched in 2023 and developed with technical assistance from MSH, aggregates and analyzes central-level stocks. This, in turn, has helped to minimize stock status errors, shrink reporting timelines, prevent drug stockouts and overstocks, and ensure that facilities throughout Uganda are stocked with lifesaving medicines and supplies. For example, the average percentage stockout rate of 41 tracked medicines decreased from 32% at baseline to 11%.

 PROJECT: Assistance for Families and Indigent Afghans to Thrive (AFIAT)
 PARTNERS: Afghan Midwives Association; American College of Nurses and Midwives; Overseas Strategic Consulting; Particip/KIT
 DONOR: US Agency for International Development (USAID)

- PROJECT: Safe, Affordable, and Effective Medicines (SAFEMed) Activity for Ukrainians
- DONOR: US President's Emergency Plan for AIDS Relief (PEPFAR); USAID
- PROJECT: Uganda Strengthening Supply Chain Systems Technical Assistance Activity
- PARTNERS: Uganda Healthcare Federation; Advocates Coalition for Development and Environment
- DONOR: USAID



The need for localization was powerfully captured in a three-minute video by Wawira Munyi, MSH's Senior Principal Technical Advisor for Local Capacity Strengthening in Kenya. Munyi explains the need for country-owned and country-led programming, as well as the dangers of development approaches that fail to understand local contexts and priorities. The video was one of two by MSH to win the Society for International Development's (SID) "Lightning Talks" video competition in 2023 and was screened to hundreds of development professionals worldwide during the 2023 SID-US Annual Conference.

### Focus Our Expertise

People-centered primary health care lies at the heart of our approach. We are supporting local leaders to develop resilient health systems that are prepared for pandemics, disease outbreaks, and climate change. Globally, MSH is investing in pharmaceutical systems, supply chain expertise, and health economics and financing.

Primary health care is critical to ensuring that health care is equitable and meets the needs of individuals and communities. A strong, responsive, and sustainable primary health care system is essential for achieving universal health coverage, maintaining population health, and preventing the spread of infectious diseases while reducing the burden of noncommunicable diseases and health care costs.

To meet the challenges of the 21st century, health systems must be robust and resilient, with people-centered care at their core. In Ethiopia, we are working with health facilities to improve the quality and sustainability of TB services and better support people with TB. Nearly 300 GeneXpert diagnostic machines have been delivered and 1,000 laboratory professionals trained to use and maintain them. People with TB are now being diagnosed more quickly, enabling them to begin treatment without delay. Support and mentoring for health workers are also key to our program, helping them learn about TB and its management and identify ways to improve patient care.

An MSH program in Ukraine further illustrates the value of people-centered care. Engagement with the private sector has improved the availability of medicines to treat chronic conditions and lowered costs to patients. More than 4.5 million Ukrainians have benefited, and copayment costs for medicines have decreased by an average of 85%. As war broke out, the program quickly adapted to ensure that patients could continue to access the medications they needed. This includes shifting to allow paperbased prescriptions and giving internally displaced patients the ability to receive medications without a new prescription from a prescriber. Some pharmacies display stickers (see photo) to let



patients know that they can find affordable medicines there. Additionally, MSH helped develop patient education videos to show how to access prescriptions amid conflict. The program's success in creating a more equitable health system was recognized in 2023, when it was named among the winners of the USAID Health Systems Strengthening Case Competition.

In Tanzania, the government is only too aware of the challenges of antimicrobial resistance (AMR). MSH has supported the Tanzanian government to strengthen and implement a national action plan to tackle this growing threat. We have assisted the government to conduct a national survey of antimicrobial consumption, promote appropriate use, and implement antimicrobial stewardship programs in 10 hospitals. MSH has also supported a committee bringing the human health, agricultural, and environmental sectors together to collaborate on a multisectoral approach to AMR. And, as our current program in Tanzania draws to a close, we have backed a new five-year national action plan that looks to build on the progress made.

- PROJECT: USAID Eliminate TB
- PARTNERS: KNCV Tuberculosis Foundation; Amhara Development Association (ADA); Oromia Development Association (ODA); REACH Ethiopia DONOR: USAID

PROJECT: Safe, Affordable, and Effective Medicines (SAFEMed) Activity for Ukrainians DONOR: US President's Emergency Plan for AIDS Relief (PEPFAR); USAID

- PROJECT: USAID Medicines, Technologies, and Pharmaceutical Services (MTaPS) Program PARTNERS: African Union Development Agency-NEPAD (AUDA-NEPAD); Boston
- University; FHI 360; International Law Institute-Africa Centre for Legal Excellence (ILI); Overseas Strategic Consulting; Results for Development DONOR: USAID



We support countries to strengthen their processes and institutions to make better decisions for better health. Dr. Rabia Sucu, as MSH's principal technical advisor for pharmaceutical policy and governance, has led

the work to institutionalize *Health Technology Assessment (HTA) in Ukraine* (which is the fastest rollout of HTA in any country), in addition to improving policies around pharmaceutical pricing and reimbursement strategies. Dr. Sucu was appointed president of Health Technology Assessment international (HTAi) in 2023 and is dedicated to fostering and advocating for health technology assessments worldwide.

### Our Person-Centered Health Systems Approach



Poor governance, lack of coordination, understaffing, overdemand, and inequitable access are challenges common to health systems worldwide. Even in the highest-resource settings, *health systems can fail to deliver* the care their patients seek. Supporting countries to strengthen their health systems is a central part of our work. Our approach puts person-centered care at the heart of an aspirational framework of seven key elements that together form the foundations for building a health care system designed to meet the needs of those who use it. Each of the elements—governance, information, financing, service delivery, human resources, and medicines and technologies and, crucially, people—is vital, and each supports the others. Good design and management ensure that the elements work together to create robust, resilient, person-centered health systems capable of responding to current and future demands in the face of a changing climate.

Illustration adapted from: de avigny D, Adam T, editors. Systems thinking for health systems strengthening. Geneva: Alliance for Health Policy and Systems Research, WHO; 2009.



### 03

### **Unlock** Our Talent

Central to our strategy is unlocking our global expertise, within MSH and beyond, with both international and local partners.

rom participating in technical forums on the dire need for strengthening laboratory services to recommending and implementing national strategies for eliminating malaria, we continue to advocate and create holistic ways to serve the needs of patients and health systems from all corners of the world.

Robust, resilient laboratory services are essential to universal health coverage, yet in many low- and middle-income countries, they lack the funding, governance, and resources to operate effectively. Early in 2024, with our partners Mott MacDonald and ICF, MSH launched an action report calling on policy makers, international donors, and stakeholders across global health to take a holistic approach to strengthening laboratory systems. A key element of our work in this area is supporting laboratory professionals in Afghanistan, Ethiopia, Indonesia, Madagascar, and other countries to learn to use the GeneXpert molecular testing system for multiple diseases.

In Bangladesh, our work with medicine dispensers has helped enhance the country's pharmaceutical system. By leveraging a methodology initially pioneered by MSH in Tanzania, we played a pivotal role in devising and executing a protocol for accrediting medicine dispensers and shops. This initiative aims to empower health care providers in low- and middle-income countries to enhance patient care delivery. We also supported Good Pharmacy Practice training to improve the provision of safe and quality pharmacy services. A **peer-reviewed study** has now found that pharmacy dispensers who had completed the training had better knowledge and dispensing practices than those who had not. When addressing diseases such as malaria, local approaches can make a valuable contribution to strengthening national capacity. In Nigeria, across eight states, MSH has helped train local health workers in diagnostic practices and to use the National Malaria Data Repository effectively. Electronic tools have been introduced to facilitate data collection in the field. In just three years, we have reached over 15 million people with malaria services.

PROJECT:Better Health Bangladesh (BHB)DONOR:Foreign, Commonwealth & Development Office (FCDO)

PROJECT:US President's Malaria Initiative for States (PMI-S) ProjectPARTNERS:Banyan Global; ThinkWell; Nigerian Interfaith Action AssociationDONOR:USAID; PMI



Our commitment to knowledge sharing can be seen in our efforts to help build an evidence base on successful approaches in the global fight against AMR. In 2023, MSH team members coauthored and published **40 peer-reviewed journal articles**, including topics on gathering data on antimicrobial consumption, use, and stewardship; surveillance; AMR containment; and awareness raising.



### **Demonstrate** with Data

We are seeking to strengthen the ability of governments, the local private sector, local partners, frontline health workers, and communities to use data to drive better decisions and innovations.

> ata are essential for making decisions in global health and are at the heart of our work. We use what we learn from leading-edge data collection and management techniques to develop innovations and improve our project performance and population health.

Data serve many purposes, from identifying needs to monitoring progress and highlighting success. In Kenya, MSH partnered with the Ministry of Health to gather data to inform interventions that would improve the delivery of primary health care services, pointing to areas that would benefit from additional investment. Through a partnership with the World Health Organization in Nigeria, we consolidated available malaria data into a national repository, facilitating the tracking of key performance indicators and analysis to hone our approaches at the state and community levels and inform efforts to reduce the malaria burden across the country. We also partnered with India's National Health Systems Research Centre, a premier think tank for the Ministry of Health, to conduct a series of analyses to inform budget discussions on allocations for mental health, noncommunicable diseases, trauma, tuberculosis, and vector-borne diseases.



73K+ people trained on leadership and management, anticorruption in the pharmaceutical sector, global health security, and COVID-19 preparedness and vaccine training



countries with national AMR



24K+pharmaceutical-sector professionals trained through pharmaceutical systems strengthening webinars/courses



### 05

### Mobilize Our Partners and Funders

MSH is innovating by bringing new partners to the table to address persistent health systems challenges. We are seeking out innovative organizations working in areas relevant to our strategic priorities.

> e are leveraging our extensive relationships with governments, foundations, local private entities, and others to mobilize resources for new ideas that are making a difference in their countries and to their health.

As a country's economy grows, international donor financing for disease elimination programs decreases. Governments must then find funding for such programs themselves and ensure that resources are used efficiently. A key element of our support for countries' efforts to eliminate TB is *building partnerships* to bolster government-led contracting and bring nongovernmental organizations and the private sector together to expand access to testing, treatment, and prevention. In India, we have worked across five states with the National Tuberculosis Elimination Programme to reduce the time taken for contracts to be executed and invoices to be paid, while in Bangladesh, we assisted the National Tuberculosis Control Programme and the local government in promoting the benefits of health services contracting to key stakeholders. Our work with Kenya's National Tuberculosis, Leprosy and Lung Disease Program produced a financial roadmap and tools for county TB coordinators to use in securing domestic financing for critical services.

Tackling the root causes of climate change is vital, but so, too, is mitigating the challenges emerging in a warming world. One such challenge is increasing burdens of vectorborne diseases such as *chikungunya*, which could affect an additional one billion people by 2030. Vaccines for chikungunya are being developed, and MSH has been gathering evidence to inform planning for equitable global access to any vaccine that is approved. Our work has identified three essential factors for vaccine introduction: a strengthened evidence base for decision making, increased public and political awareness, and vaccine affordability and sustainable financing.

Since 2023, MSH has taken on a leadership role advocating for increased attention to health systems strengthening (HSS) in US global health funding. In our role as cochair of the Global Health Council's HSS Roundtable, we authored a first-of-its-kind nongovernmental organization sign-on letter to Congress in



support of continued prioritization of HSS. The letter garnered 28 cosigners from across the global health sector, and we were successful in our efforts to see language spotlighting HSS included in the FY2024 foreign assistance budget.

MSH also joined with our peer organizations to advocate for Congress to renew the critical PEPFAR program. We worked to inform policymakers of the tremendous impact that MSH's PEPFARfunded programs have had over the years and amplified the voices of our colleagues in Ukraine in an **op-ed published in STAT**. Congress has renewed PEPFAR for one year, and we will continue to push for a longer-term renewal.

USAID initiated the use of CommCare mobile application in Madagascar back in 2017, partnering with MSH and Dimagi (see photo). Positive outcomes led to its expansion, and presently, the application boasts more than 4,300 users and is the sole platform nationally recognized as an electronic community health information system, encompassing care, surveillance, and reporting. It seamlessly integrates data into the national health information management system.



PROJECT:USAID Health Systems for Tuberculosis (HS4TB)PARTNERS:Nathan Associates; Open DevelopmentDONOR:USAID

- PROJECT: Accessible Continuum of Care and Essential Services Sustained (ACCESS) Program
- PARTNERS: American Academy of Pediatrics; American College of Nurse-Midwives; Action Socio-sanitaire Organisation Secours; Catholic Relief Services; Dimagi, Inc.; Johns Hopkins Bloomberg School of Public

DONOR: USAID



Strengthening Supply Chain and Pharmaceutical Systems for Sustained Health Impact Leadership

MSH is designated by USAID as a winner of the Global Health Supply Chain <u>NextGen Comprehensive Technical Assistance (NextGen</u> <u>Comprehensive TA</u>; 2024–2035) contract. MSH and its consortium partners will work with USAID to provide countries with technical assistance on their health supply chain needs for the next ten years and develop the capacity of local systems, networks, institutions, and individuals to sustainably manage supply chains and strengthen local pharmaceutical systems. We will also advise governments as they shift from providing supply chain and pharmaceutical services themselves to overseeing private-sector innovations and efficiencies. The award signifies MSH's critical role within NextGen Comprehensive TA, marking a significant step forward in global health advancement.

 AWARD:
 USAID NextGen Comprehensive Technical Assistance

 (NextGen Comprehensive TA) for Health Supply Chain and

 Pharmaceutical Management

 DONOR:
 USAID

 DURATION: Ten years

15

### 2023 and Beyond

We are pleased to have received many new awards in 2023 and early 2024. The following is a selection of new projects that will enable us to continue to impact health globally.

### Strengthening Primary Health Care Systems in **Ghana** and **Rwanda**

PROJECT: **Primary Health Care Performance Management Activity** DONOR: Bill & Melinda Gates Foundation DURATION: Three years

With funding from the Bill & Melinda Gates Foundation, MSH is expanding its work in Africa to improve health outcomes. In Ghana and Rwanda, we will empower district health management teams to strengthen primary health care performance through four main components: utilization of data dashboards; implementation of a strategic, action-planning process; use of catalytic funding; and continuation of cross-district collaboration and learning. Through this cycle, the multiyear program will promote locally driven and sustainable primary health care performance management.



### Mobilizing Emergency Preparedness and Response Efforts in **Ethiopia**

#### PROJECT: Ethiopia Health Resilience Activity DONOR: USAID DURATION: Five years

In partnership with the Ethiopian Red Cross Society, MSH will engage the whole of society to build strong, community-led emergency preparedness and response plans. We will help mitigate the impact of public health emergencies by empowering local teams to detect, prepare for, and respond to these life-threatening events. This will help to achieve our 90-90 goal, where 90% of epidemics in supported areas are controlled to meet acceptable mortality rates and 90% of health facilities maintain essential services during emergencies.



# 2023 and Bevond

### Traceability of Health Supplies in Uganda

 PROJECT:
 Traceability of Health Supplies Proof of Concept using Global

 Standards in Health Supply Chain

 DONOR:
 The Global Fund

 DURATION:
 14 months

### Expanding upon our ongoing work in the Uganda Strengthening Supply Chain Systems Technical Assistance

program to digitalize the public health supply chain, we will build on existing relationships with the Government of Uganda and local partnerships to support the development of a roadmap that will institutionalize end-to-end visibility, tracking, and traceability of health commodities within the country.



### Prioritizing Health System Resilience in Rwanda

### PROJECT: Ireme DONOR: USAID DURATION: Five years

For nearly 20 years, MSH has been working in Rwanda to help the country achieve its mission of providing universal access to equitable, high-quality care. To realize this vision, we will build on our partnership with the government to help the country overcome the cultural, financial, and technical challenges that persist. MSH will work with partner organizations, including two Rwandan partners, to help improve cost efficiency and resource allocation; strengthen leadership, management, and governance skills across the health system; and increase accountability, data use, and professional development opportunities to strengthen and retain the health workforce.



# 2023 and Beyond

### Combating TB through an Integrated Approach in **Indonesia**

PROJECT: **Bersama Menuju Eliminasi dan Bebas dari TB (BEBAS-TB)** DONOR: USAID DURATION: Five years

With Indonesia having the second highest TB burden in the world, MSH is committed to helping the country control and eliminate this deadly disease. For the next five years, we will provide strategic leadership and technical support to help strengthen TB case prevention, detection, and treatment services, focusing primarily on the high-burden provinces of North Sumatra, West Java, Central Java, and East Java. By enabling evidence-based decision making and increasing community engagement in TB activities, we will help the country establish a resilient, decentralized health care system.



### Addressing Persistent Health System Challenges in Benin

PROJECT: Benin Health Systems Strengthening Activity (HSSA) DONOR: USAID DURATION: Five years

MSH will build on its longstanding partnership with the Government of Benin and our recent *Integrated Health Services Activity (IHSA)* to help the country make locally driven, systemic changes that strengthen the health system. Through IHSA (2018–2023), MSH strengthened the delivery of high-impact malaria, family planning, maternal and child health, and gender-based violence services in the public sector. Results included increasing the percentage of pregnant women



attending at least four antenatal care consultations with a qualified provider from 26% to 44% and treating 66,000+ children under five with malaria treatment. Our new project in Benin will work with a group of primarily local partners and a women-led, all-Beninese team to strengthen leadership, management, accountability, and governance across the health sector while also bolstering efforts to improve and empower the health workforce. We will help foster innovative solutions to address ongoing health challenges, focusing on digital advancements such as eLearning and advocating for private-sector investments.

### Spreading the Message

he past year has seen MSH maintain its strong presence at global conferences and events. Our experts shared insights on strengthening supply chains at the South African Production and Inventory Control Society (SAPICS) 2023 annual conference and discussed TB prevention and treatment at the Union World Conference on Lung Health 2023.

MSH and partners also held an in-person discussion on universal health coverage (UHC), "Shaping the Future of UHC: Perspectives from Health Workers and Communities," and convened an expert panel on malaria, "From Data to Action: How Information Is Helping Us Fight Malaria." Other high-level events MSH contributed to include the Women Deliver 2023 conference, the American Society of Tropical Medicine and Hygiene's (ASTMH) Annual Meeting 2023, and the People that Deliver (PtD) Global Indaba 2024. In early 2024, MSH hosted over 150 colleagues across 19 country teams in Kigali, Rwanda, for our Global Leadership Conference. Based on the theme "Local Roots, Global Impact," the conference helped drive home the message that forming strong country and global connections is key to achieving positive health outcomes. As a result, we are taking steps to strengthen country governance and shared services, enable locally led business development, improve clarity and communication around compensation, and promote knowledge exchange and learning across MSH. MSH was honored to have the Rwandan Minister of Health, Dr. Sabin Nsanzimana, provide an inspiring keynote speech to kick off the conference.



Ensuring that the needs of women and girls are at the heart of health systems has the potential to shift power structures, improve the quality of care, and ensure that services are culturally and socially responsive. At Women Deliver 2023, MSH and our partners hosted an evening reception, codesigned with women and health care providers, where we shared stories of providing person-centered care. From cocreating group antenatal care with indigenous women in Guatemala and first-time parents in urban slums of Bangladesh to engaging parents and caregivers to care for their newborns in the health facility and at home in rural Madagascar, our approaches incorporate self-care, culturally appropriate rituals, and peer support and are based on a foundation of human rights, respect, dignity, and accountability.



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We are proud of the local communities who are our partners. They lead the way, building out their health systems, grappling with all the classic challenges of time, finances, and infrastructure, but they persevere. Every day, the determination of these local partners spurs MSH on." Dear

### MSH Partners, Donors, and Colleagues,

As the Chair of the MSH Board, I am honored to share this report on MSH's considerable achievements in 2023. Our heartfelt thanks go out to our generous donors, international and local partners, hardworking staff, and everyone in the global health community who supports our vital work.

We are proud of the local communities who are our partners. They lead the way, building out their health systems, grappling with all the classic challenges of time, finances, and infrastructure, but they persevere. Every day, the determination of these local partners spurs MSH on. Every day, their innovative ideas make us see things differently. And every day, they inspire us and give us reason for hope.

Headlines don't always tell the whole story of the hard work it takes to build a healthier, more equitable world. From regulatory environments to supply chains to leadership development, MSH is relentless in its commitment to the building blocks of strong health systems to affect millions of lives for the better. One year into our seven-year organizational strategy, the clarity of this commitment is evident.

As you can see in our statement of revenue and this 2023 report, our donors share this vision. The result is a stable financial footing for the organization, with effective program delivery and exciting new business developments. In short, there are plenty of reasons for optimism.

On behalf of my fellow Board members, thank you for your unwavering support that makes this all possible. I hope you share my excitement about what we can continue to accomplish together.

Yours,

John Isaacson Chair of the Board of Directors

### Statement of Revenue and Health Area funding

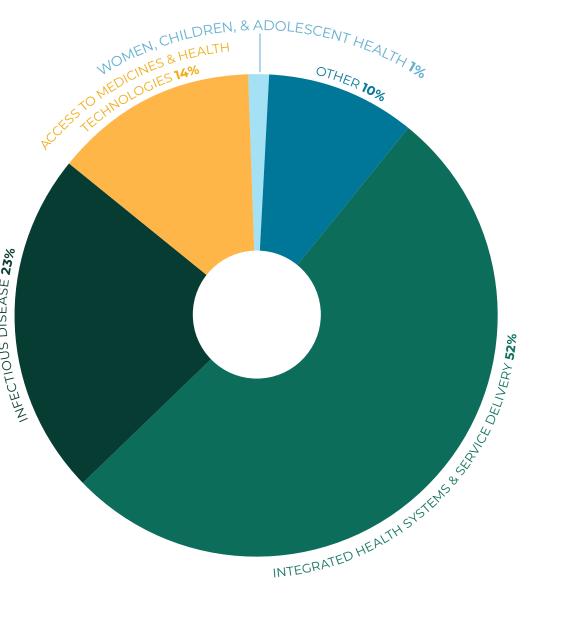
Year ending June 30, 2023, drawn from financial statements

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Management & General\$32,821Fundraising\$3TOTAL\$168,625Revenue in Excess of Operating\$3,569Expenses\$3,569Foreign Currency Adjustments(\$2,784)Realized Loss on Investments(\$1,100)NET CHANGE IN ASSETS\$1,880STATEMENT OF FINANCIAL POSITION\$18,929Investments\$15,236Grants & Contracts Receivables\$8,391Unbilled Receivables\$11,776Other Receivables\$1,150Prepaid Expenses\$5,370Other Current Assets\$678Property & Equipment\$215	TOTAL	\$172,195
Fundraising\$3TOTAL\$168,625Revenue in Excess of Operating\$3,569Expenses\$3,569Foreign Currency Adjustments(\$2,784)Realized Loss on Investments(\$5)Unrealized Loss on Investments(\$1,100)NET CHANGE IN ASSETS\$1,880STATEMENT OF FINANCIAL POSITION\$18,929Investments\$15,236Grants & Contracts Receivables\$8,391Unbilled Receivables\$11,776Other Receivables\$1,150Prepaid Expenses\$5,370Other Current Assets\$678Property & Equipment\$215	Program Expense	\$135,801
TOTAL\$168,625Revenue in Excess of Operating\$3,569ExpensesForeign Currency Adjustments(\$2,784)Realized Loss on Investments(\$5)Unrealized Loss on Investments(\$1,100)NET CHANGE IN ASSETS\$1,880STATEMENT OF FINANCIAL POSITION\$18,929Investments\$15,236Grants & Contracts Receivables\$8,391Unbilled Receivables\$11,776Other Receivables\$1,150Prepaid Expenses\$5,370Other Current Assets\$678Property & Equipment\$215	Management & General	\$32,821
Revenue in Excess of Operating\$3,569ExpensesForeign Currency Adjustments(\$2,784)Realized Loss on Investments(\$5)Unrealized Loss on Investments(\$1,100)NET CHANGE IN ASSETS\$1,880STATEMENT OF FINANCIAL POSITIONStatementsCash & Equivalents\$18,929Investments\$15,236Grants & Contracts Receivables\$8,391Unbilled Receivables\$11,176Other Receivables\$1,150Prepaid Expenses\$5,370Other Current Assets\$678Property & Equipment\$215	Fundraising	\$3
ExpensesForeign Currency Adjustments(\$2,784)Realized Loss on Investments(\$5)Unrealized Loss on Investments(\$1,100)NET CHANGE IN ASSETS\$1,880STATEMENT OF FINANCIAL POSITIONCash & Equivalents\$18,929Investments\$15,236Grants & Contracts Receivables\$8,391Unbilled Receivables\$11,776Other Receivables\$1,150Prepaid Expenses\$5,370Other Current Assets\$678Property & Equipment\$215	TOTAL	\$168,625
Foreign Currency Adjustments(\$2,784)Realized Loss on Investments(\$5)Unrealized Loss on Investments(\$1,100)NET CHANGE IN ASSETS\$1,880STATEMENT OF FINANCIAL POSITIONStatementsCash & Equivalents\$18,929Investments\$15,236Grants & Contracts Receivables\$8,391Unbilled Receivables\$11,776Other Receivables\$1,150Prepaid Expenses\$5,370Other Current Assets\$678Property & Equipment\$215	Revenue in Excess of Operati	ng \$3,569
Realized Loss on Investments(\$5)Unrealized Loss on Investments(\$1,100)NET CHANGE IN ASSETS\$1,880STATEMENT OF FINANCIAL POSITIONCash & Equivalents\$18,929Investments\$15,236Grants & Contracts Receivables\$8,391Unbilled Receivables\$11,776Other Receivables\$1,150Prepaid Expenses\$5,370Other Current Assets\$678Property & Equipment\$215	Expenses	
Unrealized Loss on Investments(\$1,100)NET CHANGE IN ASSETS\$1,880STATEMENT OF FINANCIAL POSITIONCash & Equivalents\$18,929Investments\$15,236Grants & Contracts Receivables\$8,391Unbilled Receivables\$11,776Other Receivables\$1,150Prepaid Expenses\$5,370Other Current Assets\$678Property & Equipment\$215	Foreign Currency Adjustment	cs (\$2,784)
NET CHANGE IN ASSETS\$1,880STATEMENT OF FINANCIAL POSITIONCash & Equivalents\$18,929Investments\$15,236Grants & Contracts Receivables\$8,391Unbilled Receivables\$11,776Other Receivables\$1,150Prepaid Expenses\$5,370Other Current Assets\$678Property & Equipment\$215	Realized Loss on Investments	(\$5)
STATEMENT OF FINANCIAL POSITIONCash & Equivalents\$18,929Investments\$15,236Grants & Contracts Receivables\$8,391Unbilled Receivables\$11,776Other Receivables\$1,150Prepaid Expenses\$5,370Other Current Assets\$678Property & Equipment\$215	Unrealized Loss on Investmer	nts (\$1,100)
Cash & Equivalents\$18,929Investments\$15,236Grants & Contracts Receivables\$8,391Unbilled Receivables\$11,776Other Receivables\$1,150Prepaid Expenses\$5,370Other Current Assets\$678Property & Equipment\$215	NET CHANGE IN ASSETS	\$1,880
Investments\$15,236Grants & Contracts Receivables\$8,391Unbilled Receivables\$11,776Other Receivables\$1,150Prepaid Expenses\$5,370Other Current Assets\$678Property & Equipment\$215	STATEMENT OF FINANCIAL	
Grants & Contracts Receivables\$8,391Unbilled Receivables\$11,776Other Receivables\$1,150Prepaid Expenses\$5,370Other Current Assets\$678Property & Equipment\$215	Cash & Equivalents	\$18,929
Unbilled Receivables\$11,776Other Receivables\$1,150Prepaid Expenses\$5,370Other Current Assets\$678Property & Equipment\$215	Investments	\$15,236
Other Receivables\$1,150Prepaid Expenses\$5,370Other Current Assets\$678Property & Equipment\$215	Grants & Contracts Receivab	les \$8,391
Prepaid Expenses\$5,370Other Current Assets\$678Property & Equipment\$215	Unbilled Receivables	\$11,776
Other Current Assets\$678Property & Equipment\$215	Other Receivables	\$1,150
Property & Equipment \$215	Prepaid Expenses	\$5,370
	Other Current Assets	\$678
Right of Use Assets \$10,055	Property & Equipment	\$215
	Right of Use Assets	\$10,055

TOTAL ASSETS

Liabilities

Net Assets



# INFECTIOUS DISEASE 23%

\$71,800

\$33,855

\$37,945

### Sources of Support

For Fiscal Year 2023

### FOUNDATIONS & CORPORATIONS

Abt Associates Amazon Smile The Bill & Melinda Gates Foundation David and Katherine Moore Family Foundation Foundation for Innovative New Diagnostics (FIND) Friends of Europe Health Systems Consult Ltd (HSCL) ICF Incorporated, LLC The James M. & Cathleen D. Stone Foundation Jerry and Diane Cunningham Fund Joint Medical Stores Melody Palmer Trust Pfizer SAS (Colombia)

### GOVERNMENT & INTERNATIONAL AGENCIES

Centers for Disease Control and Prevention (US)

The George Institute for Global Health

The Global Fund to Fight AIDS, Tuberculosis and Malaria

International Bank for Reconstruction and Development (World Bank Group)

Ministry of Public Health and Population (Haiti)

The Registered Trustees of Joint ME (Uganda) UNICEF

US Agency for International Development World Health Organization

### NONGOVERNMENTAL ORGANIZATIONS, HEALTH ORGANIZATIONS, & UNIVERSITIES

Abercrombie House America's Charities Catholic Relief Services International Committee of the Red Cross Jhpiego PATH Population Services International

### **INDIVIDUALS**

Katherine Boles Peter Buijs Gordon Comstock Chuck and Carol Dockendorff Family Robert E. Hallagan John and Consuelo Isaacson Katherine Luzuriaga, MD John H. Masterson Latanya Mapp W. Gyude Moore Bernard Nahlen, MD Dan Schwarz, MD, and Jafet Arrieta, MD Irene and Nathan Idicheria Tiller Marian W. Wentworth and David Nice

### BOARD OF DIRECTORS

John Isaacson Chair of the Board of Directors; Chair and Founder, Isaacson, Miller

Peter Buijs Former Chief Financial Officer, CARE USA

Dr. Ahmed Mushtaque Raza Chowdhury Professor of Population and Family Health, Columbia University; Former Vice Chair and Executive Director, BRAC

Beth deHamel Chief Financial Officer and Vice President of Operations, Conrad N. Hilton Foundation

Charles J. Dockendorff Former Executive Vice President and Chief Financial Officer, Covidien

Nankhonde Kasonde-van den Broek Lead Consultant, Nankhonde Kasonde Consultancy; Founder and CEO, ZANGA African Metrics Latanya Mapp President and CEO, Rockefeller Philanthropy Advisors; Former President and CEO, Global Fund for Women

John H. Masterson Former Senior Vice President and General Counsel, Covidien

W. Gyude Moore Visiting Fellow, Center for Global Development; Former Minister of Public Works and Deputy Chief of Staff to President Ellen Johnson-Sirleaf in Liberia

Dr. Bernard Nahlen Director, Eck Institute for Global Health, University of Notre Dame

Dr. Leslye Obiora Former Minister of Mines and Steel Development for the Federal Republic of Nigeria

Dr. Magda Robalo President and Co-founder, The Institute for Global Health and Development of Guinea-Bissau

July 2024

### LEADERSHIP TEAM

Marian W. Wentworth President and Chief Executive Officer

Francis Aboagye-Nyame Program Director, The Medicines, Technologies, and Pharmaceutical Services (MTaPS) Program

Dr. Aday E. Adetosoye Vice President of the Global Health Programs Delivery Group

Matthew Gemeda Associate Vice President, Internal Audit

Jeanne Haught Chief People & Culture Officer (interim)

David Humphries Chief Communications & External Affairs Officer Dana Sandstrom Keating Vice President, Strategy, Business Development & Partnerships

Dr. Kamiar Khajavi Project Director, Health Systems for Tuberculosis

Gordon Kihuguru Chief Financial Officer and Vice President

Erica Martin Chief of Staff

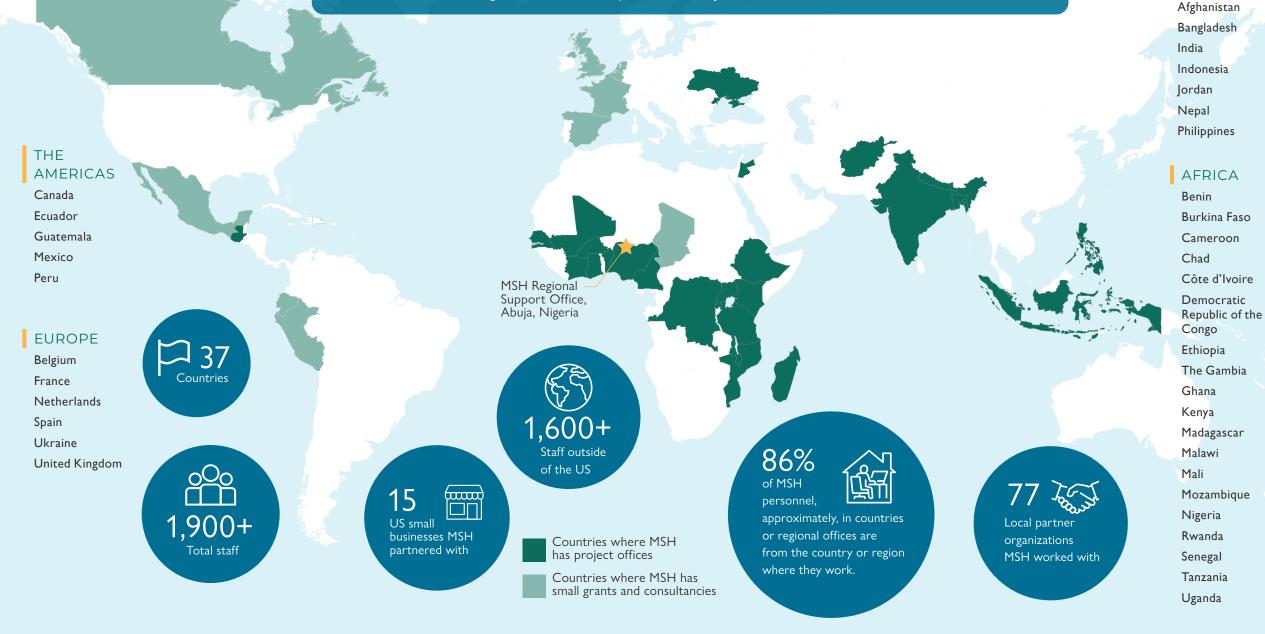
Colleen McGuffin Chief Programs Officer and Executive Vice President

Dr. Dan Schwarz Vice President, Global Health Systems Innovation

Paul M. Zimmerman Vice President and General Counsel

### Where We Work in 2024

Since our founding in 1971, MSH has improved health systems in more than 150 countries\* worldwide.



ASIA & THE



For more information on MSH, please visit us at www.msh.org.



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