



November 2011

VillageReach 2012 Initiatives

In 2012, VillageReach expects to increase the number of its initiatives, adding to existing programs that are continuing from 2011. Financial support goes to helping us further develop our expertise in improving access to quality healthcare for remote, underserved communities by investing in research and development, collaborating with new partners, and conducting programs.

VillageReach's initiatives are funded by a combination of individual donations, foundations, and similarly focused technical organizations in the global health community. All of our supporters share a common goal: to improve the capacity of health systems in developing countries in order to serve the millions of underserved.

In 2012, VillageReach's goal is to raise \$950,000 to support a total organizational budget of \$3.16M. Contributions we receive will enable us to continue achieving impact in our current programs, and help us develop additional expertise and expand our work into new programmatic initiatives. Contributions received will be applied across our various initiatives, covering both direct and indirect costs.

Following is a summary of the scope and support of these initiatives.

Program Initiatives

Malawi – Community-Level
Health System Strengthening Program

2012 Budget: \$408,000

VillageReach has been working at the district level in Malawi since 2008 to improve the health of children less than five years of age by decreasing childhood illness and mortality in the southern region of Malawi. The focus of the program is to strengthen the health system at the community and health center levels by supporting community health workers, implementing cost-effective interventions to reduce malaria and diarrheal diseases, supporting immunization and other preventative health programs, implementing community-based treatment programs, and improving communication between community health workers and health centers. The majority of this program is supported by a single anonymous funder, who provided initial support in 2008, and has continued supporting the program in subsequent years. For more information on this program, visit the Malawi page in the *Where We Work* section of our website

Malawi – ICT to Improve Health Services
for Mothers and Children Program

2012 Budget: \$450,000

We are entering the second year of a multi-year program to increase access to maternal, newborn and child health (MNCH) services by developing an integrated set of information and communications services. The program includes a toll-free case management hotline for maternal and child health advice and referral, and uses mobile phones to send personalized voice and SMS health messages to women regarding their pregnancy and the health needs of their children. VillageReach is also working with the ministry of health to test a facility-based scheduling system for antenatal and postnatal care in order to reduce wait times and improve health center readiness for maternal and neonatal health. This project is supported primarily through an agreement with an international nongovernmental organization. For more information on this program, visit the Malawi page in the *Where We Work* section of our website.

Mozambique –
Dedicated Logistics System Program

2012 Budget*: \$1,400,000

VillageReach is engaged in a multi-year program to improve the performance of the health system in Mozambique, focusing on rural communities that represent over 60% of the country's population. The program, started in January 2010 and run in partnership with the Mozambique Ministry of Health (MISAU), aims to reduce vaccine preventable diseases and improve health system performance by implementing dedicated distribution channels for vaccines and other medical commodities to community health centers. The program is expected to cover eight of ten provinces, with more than 12 million people served. The focus of the program in 2012 is in achieving results for four provinces. Opportunities for expanding into additional provinces will be evaluated in mid-2012. The program is supported by both individual donations and private foundations. An updated report on the program is available in the *Learn More* section of our website.

(Note: this program is expected to extend to 2014 at a minimum. The current estimated program budget is \$5.6M, with a current funding gap of \$3.05M.)

Strategic Initiatives –

VillageReach seeks opportunities to improve its technical capabilities and capacity to strengthen health systems in order to improve the health for rural, underserved communities.

mScan Project –
Digitizing Paper-Based Data Via Mobile Image Technologies

2012 Budget: \$105,000

We are working with the University of Washington Computer Science and Engineering Department to develop and test *mScan*, an android-based mobile phone application. The research is evaluating the potential to automate and make more efficient the collection of data in low-resource field environments by digitizing paper-based data into usable information via low-cost, image-based, mobile technologies. The project leverages the growing supply of lower-cost smartphones to bridge the gap between the mHealth movement, focused on digitizing all content, and the current paper-based systems that prevail in low-income countries. Members of the research team recently spent two weeks in Mozambique testing the new application in the field with our Mozambique DLS program. See the *Press Center* of our website for further details on this initiative.

OpenLMIS –
Logistics Management Information System Initiative

2012 Budget: \$305,000

This is the first year of a two-year initiative to improve the quality and level of collaboration in developing of information technology for health systems, specifically the logistics management information systems that collect and report data on the performance of distribution networks for health systems. OpenLMIS is a community-lead initiative dedicated to furthering collaboration and development of logistics management information systems (LMIS) to support improvements in health system supply chains in low-income countries around the world. The majority of the project is supported by a grant from the Rockefeller Foundation. For more information on this initiative, visit www.openlmis.org