2022 Annual Report

Empowering Communities and Expanding Care:
Advancing the Community Health Toolkit for Scale and Local Sustainability
A Letter to Our Community

In this moment of collective momentum – an inflection point where countries are prioritizing the national implementation of digital health platforms in the wake of COVID-19’s endemic stage – Medic is committed to investing in our people, processes, and technologies, ensuring our communal success in advancing the digital health field.

Three years ago, Medic put forward a bold shift in strategy that relied upon building an open source community with our tools and resources as core components of what is now known as the Community Health Toolkit (CHT). We distributed our expertise to local solution providers, and innovated collaboratively to move the digital health field forward. As we closed year three of this strategic plan – and embarked on our next three-year strategy – we celebrate the milestones and achievements made by our team and the broader community of practice.

As we enter a new chapter under the leadership of Dr. Krishna Jafa, who joined Medic as CEO in early 2022, we are thrilled to share the remarkable strides we have made to-date. With an unwavering commitment to openness, innovation, and impact, we continue to empower and train community health workers to use digital tools – a key enabler in providing exceptional home-based care. Through our deepened accompaniment to ministries of health and ecosystem partners, we have accelerated the path to revolutionize digital health.

Through 2022, we advanced our role as technical steward of the CHT: we released version 4 of the CHT Core Framework, we embarked on a new CHT community accelerator initiative with Bayer Foundation and PATH, we developed the first CHT-based Android app in Nepal; we advanced radical research, innovations, and discoveries; and we moved forward national electronic community health information systems in Kenya, Mali, and Uganda. This progress was made possible by the steadfast collaboration and support of our many in-country and global partners.

We pledged $3 million USD in-kind towards The Global Fund to Fight AIDS, Tuberculosis and Malaria and joined global initiatives such as Africa Frontline First, Million Lives Collective, Transform Health Coalition, and Unlock Aid – uniting our shared commitments to achieve equitable health for all.

We welcomed new teammates, expanding our exceptional and talented global team to live our core values of humanity, openness, solidarity, creativity, and initiative. The future holds exciting prospects as we continue driving growth and value for health systems and community health workers – the individuals who selflessly pursue better health outcomes for their communities.

To our allies, advocates, friends, and partners: we thank you for joining us on this journey. Together, we will shape a healthier, more connected future for communities in need.

In health,
The Medic Team
Transforming Digitized Community Health at National Scale

Under Medic’s stewardship, the Community Health Toolkit (CHT) has flourished as a powerful global good, driving progress in community health alongside our dedicated partners. By nurturing an open community of practice, fostering innovation, and propelling the global digital health ecosystem towards universal health coverage (UHC), we are making higher quality and more equitable care within reach for communities around the world.

As a testament to our efforts, we celebrated significant milestones in scaling government-led national adoption of CHT-enabled community health information systems. Ministries of health assumed leadership and ownership, exemplified by the successful launch of the electronic community health information system (eCHIS) version 2.0 in Kenya, and the triumphant go-live of the latest CHT Core version in Mali.

In 2022, we pushed the boundaries of innovation and product excellence. The launch of CHT Core v4 marked a monumental milestone, introducing horizontal scalability and delivering exceptional performance improvements.

Furthermore, the new architecture allows for easier installation and upgrades, better monitoring and logging, and rapid patching of security vulnerabilities.

Introducing New Architecture to Support Large Scale Deployments

Accelerating Radical Research, Innovations, and Discoveries

With many unique partners, Medic Labs developed a community health worker (CHW) health commodity management workflow and began developing a prototype to facilitate digital payments to CHWs. We leveraged geospatial analysis and mapping techniques to strengthen CHW workforce microplanning and epidemic preparedness, and co-developed a Data Observation Toolkit (DOT) to identify inconsistent or problematic data and address CHW training, skills, and performance gaps. We also launched our first learning and innovation project focused on climate-related health risks. As we stand in solidarity with CHWs, we’re excited about how current Medic Labs efforts could inform CHW professionalization efforts and advance CHWs’ agency as climate change accelerates.

Throughout our 2022 annual report, we invite you to join us as we look back on a year of empowering communities and expanding care – advancing the CHT for national scale and local sustainability.

A key highlight in 2022 was meeting with Medic teammates, partners, and CHWs in Nepal and seeing the deep commitment to our mission as they traverse stunningly beautiful, yet physically challenging, landscapes—often on foot—to reach communities in remote, mountainous villages.

Dr. Krishna Jafa
Chief Executive Officer
Impact
Championing Community Health through Equitable Care

92,346,176
All-time caring activities

22,282,929
2022 caring activities

210,701
Households registered (2022)

41,216
Active users (2022)

5.9M
Households registered (all-time)

99%
WHO Digital Health Interventions supported by the CHT

52
Active CHT-based apps

30
Unique workflows supported by CHT-based apps

Crafting a bold vision and new three-year strategic plan alongside leaders and experts at Medic was enriching and inspiring in equal parts! In 2023 and beyond, I’m excited to witness our tangible impact on human lives as we execute this ambitious plan in solidarity with partners, CHWs, and communities around the world to advance UHC.

Shreya Bhatt
Chief of Staff

2022 was special to me as it entrenched the spirit of collaboration and passion for creating impact. Teammates demonstrated relentless and unwavering dedication as they diligently led diverse tasks amidst extraordinarily tight timelines.

Robert Mutai
Chief Program Officer
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<th>Countries with active CHT implementations</th>
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**Global Reach of the Community Health Toolkit**

(as of year-end 2022)
Tools

Advancing a Fully Open Platform to Achieve Universal Health Coverage

2022 brought a renewed commitment to quality and scale, ensuring that the tools we create alongside our partners work as designed. Through thoughtful and robust architectural initiatives and product innovation, we advanced the capabilities and performance of the CHT platform.

To support a better user experience and meet the evolving needs of our partners, we completed four major releases of the CHT Core Framework v3.x (3.14, 3.15, 3.16, 3.17) which helped pave the way for a number of scale-enabling improvements in CHT Core v4.

My highlight in 2022 was jumping on a call with one of our francophone partners and working with them to build a feature into the CHT that would significantly reduce the time spent on onboarding new users. It never ceases to amaze me how the code we write has such a profound impact on people’s lives; thousands of kilometers away.

Mokhtar Mial
Software Developer

Version 3.14 brought improved user experience, new date formats that reflect the cultures where we work, improved server-side purging, and an improved login experience. This version also included a feature enabling CHWs to sync their latest reports with confidence and clarity.

With v3.15 and v3.16, Medic delivered the Bulk User API. Prior, user accounts were created one at a time, causing significant bottlenecks as large cohorts of users were onboarded. CHT administrators can now easily create accounts for 1,000+ users with a single click. Version 3.15 also brought faster app loading times, five other improvements, and nine bug fixes.

Version 3.17 included a series of UI/UX changes such as action button labels for all devices and a redesigned search and filter experience. These changes are an important example of UI/UX changes that improves app learnability by providing an experience similar to other Android apps.

Mokhtar Mial
Software Developer

In 2022, I loved to see Medic’s work and values in action during our CHT Round-up calls. Gathered virtually together with our team and our partners across the world, the strength of the CHT community is on full display on these monthly calls. Our commitment makes not only the CHT — but all of Medic and the digital health ecosystem — stronger.

Kaitlyn Neel
Philanthropy Manager

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CHT Core Framework v4

CHT Core 4 is a landmark release with new features, significant scalability improvements through a new software architecture, an upgraded forms engine with new options for form building, and a new server startup progress screen. The new architecture is a significant change to how the CHT is deployed and updated which brings a wide range of benefits and enables more opportunities for improvements in future releases.

V4 notably supports horizontal scalability (scaling out, rather than up) which delivers significant performance improvements marking a new era for the CHT.

Horizontal scalability included in v4 is similar to creating a network of highways - multiple pathways to spread out user traffic. This enables the CHT to support many times more users on a single deployment enabling the next generation of national scale projects. CHT v4 also unlocks more visibility into process monitoring, more efficient logging, removes deprecated code, and simplifies the device installation process.

A New Logo to Embody Medic’s Foundational Beliefs

After over a decade of development on the Core Framework and nearly five years of the CHT accessible to the world, we unveiled our long-awaited visual representation of the toolkit: a new, continuous support logo! This new logo embodies foundational CHT community beliefs; an infinity symbol to represent continuity of care and support; and two people in conversation, linked together, to represent humanity and connectedness.

Diana Bârsan
Principal Software Developer

CHT Core v4 is revolutionizing the landscape of community health technology. One of the most thrilling advancements in CHT Core v4 is the full-fledged support for distributed CouchDB clustering.

This cutting-edge feature enables horizontal scalability, empowering organizations to expand their reach and impact without limitations.
Medic and a group of leading organizations serving last-mile communities launched the CHT as a digital global good and open-source project to support the development of digital health interventions, achieve universal health coverage, and advance global health equity. We iterated on core framework versions 2.x and released versions 3.0 and 3.1.

The CHT Forum was launched to serve as an open space for conversations, collaborative resource development, and free support from the CHT Community of Practice. We released core framework versions 3.2, 3.3, 3.4, 3.5, 3.6, and 3.7.

The CHT Documentation website launched as a comprehensive resource to learn how to design, build, implement, and maintain CHT apps. New resources continue to be added to make app building easier, quicker, and more efficient. We released versions 3.8, 3.9, and 3.10.

The CHT Community Round-up Call series launched to inform the community about recent product releases and future planned initiatives. We released versions 3.11, 3.12, and 3.13 – each of which included new features requested by both our developer community and health workers that use the tools each day.

The CHT Academy launched as the beginnings of a formal, structured, and well-curated onboarding experience for any organization interested in building CHT apps. We released versions 3.14, 3.15, 3.16, 3.17 – including major user experience and user interface changes to improve app usability and functionality – paving the way for the release of CHT Core v4 in November.

Marc Abbyad
Chief Product Officer

It is exciting to see the momentum building within the CHT community, and the impact that it will have. Ministries of health are building and scaling their own digital health apps, while other partners are exploring ways to better support CHWs with machine learning, digital payments, integrations, and interoperability – all possible due to the extensibility of the CHT.
Accompaniment

Accelerating Growth Through Radical Collaboration

For over a decade, Medic has advanced equitable care and strengthened community health systems by building, innovating, applying, and scaling open-source, low-cost digital health tools in collaboration with communities, governments, and implementers.

At this critical moment where countries are prioritizing national digital platforms for community health, now is the time to establish sustainable digital community health systems built for and with CHWs and the people they serve.

We recognize that digital tools can empower frontline workers, make care-providing work and health progress visible, and increase the quality of care being delivered. We work alongside ecosystem partners to support efforts to reimagine CHW programs, demonstrate evidence of their impact on health outcomes, and leverage digital health innovations to advocate for professionalized CHWs (#ProCHW) – salaried, skilled, supervised, and supplied.

Through our stewardship of the CHT, and in partnership with governments and Technical Partners across Asia and Africa, we achieved record advancement in providing last mile health for all.

Last year was a great year for me. With incredible support from the team, I successfully designed a baseline survey system and continuum care for married women reproductive age at the household level. Our community health nurses are reaching more people and providing services via the tool I designed.

Lal Bahadur Kunwar
Service Designer

I am grateful for what we have achieved in 2022 as a team. Personally, I have had the pleasure to work with a dedicated team eager to champion quality healthcare for families, igniting a transformative shift within the healthcare landscape. With its pioneering approach, eCHIS Kenya is poised to revolutionize healthcare delivery, empowering families across the nation to access the quality care they deserve.

Philip Ngari
Senior Project Manager
In Kenya, our approach was solidified during a consultative forum between MoH-Kenya and Medic, held in Nairobi in February 2022. At this forum, we outlined key bottlenecks in realizing the national digitisation strategy and reached an agreement on Medic's contribution as the lead technology partner in this initiative. Building upon our decade-long technical leadership of the CHT, and the CHT's selection as the foundational platform for the Ministry-led eCHIS, we collaborated with MoH-Kenya and key CHT partners to co-create features and functionalities, implementation and product roadmaps, architectural documentation for the technology, and a transition plan for existing Medic-supported, partner-led CHT implementations.

With our partners, we supported 9,588 community-based health workers with CHT-based digital tools in 2022, including Community Health Promoters (CHPs) and Community Health Assistants (CHAs). This cohort of CHWs supported 3.1 million caring activities; 17.1 million caring activities all-time. Through the expected rapid scaling of eCHIS commencing in 2023, we aim to equip over 55,000 CHWs in Kenya with world-class digital tools — a 10 fold increase.

In Uganda, we continue our journey to help the MoH digitize community health, offering advocacy, technical, and capacity building support — building upon our engagement that began 2019. These many years of accomplishment led to the selection of the CHT as a foundational platform for the MoH-led eCHIS in 2021 and piloting of the eCHIS in 2022.

In collaboration with our consortium of partners (Ibid, Global Fund | Living Goods, Malaria Consortium, Rockefeller Foundation, UNCDF, and UNICEF), last year, CHT apps supported 1.5 million CHTs, including more than 2,100 public sector Village Health Teams (VHTs), 30 Health Assistants and over 10,000 private sector CHWs. Through a direct partnership with Malaria Consortium and through two broad consortiums, 1) Intelligent Community Health Systems (iCoHS), funded by The Rockefeller Foundation through UNICEF and led by Living Goods and 2) BRAC with funding from United Nations Capital Development Fund (UNCDF), the eCHIS is primed to scale, reaching up to 20,000 additional VHTs from 2023-2025.

In Uganda, we are where we are now with eCHIS enhancement because of the immense technical support from Medic that has resulted in a lot of progress.”

Mr. John Wanyungu
Deputy Head
Department of Community Health
Ministry of Health, Kenya

Spotlighting Outstanding Achievements: Highlights from Our Global Projects

East Africa

In 2022, our many years of dynamic collaborations enabled us to contribute to and shape the digital health landscape in Kenya, Malawi, Zanzibar (Tanzania), and Uganda. Our deep MoH accompaniment model embeds local ownership and sustainability of digital health tools powered by the CHT through capacity building, thought partnership, and advocacy of critical community health success factors.

In 2022 brought our longstanding partnership with D-Tree to new heights as we co-designed, co-RBIE, and co-published a CHT-based Supervisor Reference app. The app is designed to support supervisors working in Zanzibar to provide quality assurance supervisor activities and access the CHW performance metrics which helps to inform the support and mentorship that supervisors provide to CHWs. Both Medic and D-tree are also currently working on CHT extensibility that will make it easier to incorporate machine learning models into the CHT-based Jamati Afya — which has been deployed at national scale by D-Tree in Zanzibar in partnership with the MoH — as well as other CHT apps. This innovation upon extensibility is expected to guide CHWs in decision making and prioritization of household visits.

Zanzibar

In the spirit of radical collaboration and openness, with Abwenzi Pa Za Umoyo (Partners in Health-Malawi), Medic coordinated the release of the full application source code of YendaNafe, a first of its kind “Integrated CHT App” that is free for all to access and replicate.

An offline-first tool with real time capability, YendaNafe, locally interpreted as “walk with us”, enables faster, better, and more equitable care, in addition to real time data collection and aggregation. The app links CHWs to primary and secondary clinical teams to more effectively screen patients, provide ongoing care, and refer people in communities who require facility-based care.

YendaNafe use cases include antenatal and postnatal care, immunization follow-ups, as well as screening, referrals, and follow-ups for malnutrition, childhood illnesses, Human Immunodeficiency Virus (HIV), Tuberculosis (TB), and Noncommunicable Diseases (NCDs).

This commitment to open sharing of proven best practices, studied workflows, and established integrations grounded in WHO protocols on care delivery will allow partners to adapt the app for their own specific needs and innovation upon its strong foundation to support their country’s context-specific interventions — critically reducing the time and financial resources needed to build an app of this maturity from scratch.
West Africa
In West Africa, after several years of deep partnership and systems-strengthening with ministries of health and in-country partners like Muso and UNICEF in Mali and Médecins Sans Frontières in Niger, the governments of Mali and Niger launched two new CHT-equipped health worker programs. Medic was selected to deploy the CHT and provide technical support, training, and ongoing maintenance to operationalize each government’s CHIS.

Asia
Last year, Medic supported International Care Ministries (ICM) in the Philippines as they developed the Community Health Champion (CHAMP) App. The app was used by 1,283 health workers to provide antenatal and postnatal care, as well as family planning services.

In 2022, we also celebrated ten years of work in Nepal – continuing the longest-continually running digital community health implementation in the world. Driven by a shared vision to transform the care system serving millions of people across the country, we worked closely with the Ministry of Health and Population (MoHP), provincial governments, and municipalities to harness technology for community health systems strengthening, expand the reach of the CHT-based mHealth program, and advocate for increased digital health allocation in respective budgets.

Mali
Our work in Mali is a result of years of collaboration alongside our longstanding partner Muso, supporting health workers and supervisors and partnering on key innovation projects focused on equity and precision care. In 2022, we built the government’s capacity for sustainable ownership by training 10 MoH app developers on the CHT, completed all internal testing, leveraged a national training-of-trainers model for cascading onboarding of health workers, and upgraded the app to CHT Core v4.

Niger
In Niger, we continued building our relationship with the MoH, with the CHT identified as a national tool of choice for community health in 2022. Medic delivered the first phase of the MoH-led digitalization of the community health system, which includes building workflows to support assessment of children under five (malaria, pneumonia and malnutrition) and training MoH personnel.

Nepal
The SMS-based program supported 12,156 Female Community Health Volunteers (FCHVs) as they coordinated 229,000 moments of high-quality maternal and child care across 7 provinces, 24 districts, and over 130 municipalities (1.4 million caring activities all-time).

We also completed an astounding 58 two-day health facility and municipality-level review meetings, securing 56 three-year partnership agreements. More than 2,000 health workers and 300 municipal stakeholders participated, representing 4,775 FCHVs across the respective municipalities.

Medic’s partnership with the federal government is built upon more than a decade of collaboration, trust, and goodwill – establishing a strong foundation and shared vision to advance health outcomes for all Nepalis. We closed the year primed to sign a new five-year MOU with the Ministry, further establishing Medic as a strategic, national mHealth partner.

Innovation and Advancement Upon a Proven Model
Building upon the success of the SMS mHealth program, in 2022, Medic collaborated with the federal government’s Nursing and Social Security Division (NSSD) to design, test, and pilot their first Android app for digitized community health delivery. The CHT Android app was piloted with 26 community health nurses (CHNs) in Bardibas and Bhaktapur Districts near Kathmandu – a translation of the SMS-based model for non-clinical FCHVs to an advanced Android app model for a clinically skilled cadre of community health nurses. This milestone marks the beginning of a new, elevated chapter in Medic’s decade-long engagement with Nepal’s mHealth program.

As the pilot expands to a third district and new maternal and child health services, newly onboarded CHT Technical Partner SunyaEk was engaged to build new workflows (family planning and ANC) based on Ministry guidelines, complimenting the original workflow.

We appreciate the support provided by Medic in digitizing the community health nursing program and for their continued support.

Nursing and Social Security Division, Department of Health Services, Ministry of Health and Population, Nepal
Community

Empowering a Global Ecosystem of Local Innovators

As technical stewards of the CHT, we exist to democratize access to a proven open-source public good, an affordable resource for low- and middle-income countries and the most under-served communities. Our investment in local expertise ensures that our tools are built and owned by those closest to the work, fostering sustainable technical ecosystems and empowering communities to drive their own health outcomes.

As of December 2022, 16 technical partners are part of the global CHT network, including: Andela, Beehyv, D-tree International, Gild Digital, ICM Philippines, Ilara Health, I-TECH, JKUAT Digital Health Applied Research Center (DHARC), Living Goods, Muso, Palladium, Swiss TPH, Totohealth, Triggerise, SunyaEK, and Visortech.

Supporting CHT Technical Partners to Scale

In Uganda, Guild Digital partnered with the United Nations High Commissioner of Refugees (UNHCR) and other stakeholders to build and deploy a CHT-based Community Health Management Information System. The Android app was customized for community health service delivery in a refugee setting with an aim of helping to improve the health status of refugees and other displaced persons. The app supports public sector CHWs (Village Health Teams or simply VHTs) – who themselves are refugees – to provide effective, home-based essential care. The app was piloted in Kyaka II Refugee Settlement with 27 VHTs for three months, serving as a sufficient proof of concept that led to UNHCR commissioning it for scale. By the end of December 2022, the app had been successfully deployed in two refugee settings, Kyaka II and Kiyandongo, with over 400 VHTs trained and currently using the app to support the delivery of community health services.

Following the pilot of a customized version of the Kenya COVID-19 Tracker app, JKUAT DHARC successfully showcased the value of using digital tools to support community-based screening for COVID-19 and TB, and subsequent linkage to care. Through funding by FIND, the JKUAT DHARC team partnered with MoH-Kenya to develop a CHT-based tool that supports health care providers working in both community and facility settings to screen and test for COVID-19 and TB and refer suspected cases to health care facilities. In Q4 2022, the updated app was deployed in four counties (Kajiado, Machakos, Mombasa, and Nairobi), with more than 1,100 CHPs, supervisors, and lab technologists trained and using the app to screen and refer cases.

In 2022, Palladium Kenya worked closely with the CHT community and other stakeholders to automate the setup process of AfyaSTAT – an integrated mobile app powered by the CHT. This process helped to make the AfyaSTAT deployment process seamless and this led to Centre For Health Solutions - Kenya and other service delivery partners scaling AfyaSTAT to additional health care facilities. As of year-end, AfyaSTAT was deployed in 289 health facilities with 850 health care providers trained and using the app to support community and facility based HIV testing services.

“Community Empowering a Global Ecosystem of Local Innovators

The UNHCR Uganda CHMIS app has the potential to improve the health status of the refugees and its key focus on pregnancy and under-5 care are paramount as these are the most at risk.

Ocan Geoffrey, Public Health Officer, Medical Teams International

“Community Empowering a Global Ecosystem of Local Innovators

The JKUAT DHARC team used the bulk user upload feature to create user accounts and sharing. “It was impossible to create individual user accounts for 1,100 users, the bulk user upload feature helped to make the process smooth and faster.”

Philip Oyier- Lecturer JKUAT (Study Technical Lead)
Innovation

Incubating New Discoveries to Advance Community Health

Medic Labs, our innovation hub, is a collaboration platform for digital health actors to prototype, test, refine, and deploy innovations through human-centered design – with and for CHWs and their supervisors. By harnessing the power of innovation and collaboration, we are building powerful, open-source tools for community health systems and imagining new ways CHWs can provide optimal home-based care.

With unwavering determination, we will continue to push boundaries and redefine possibilities to create a healthier and more connected world.

Mourice Barasa
Research Officer, Monitoring & Data systems

Last year was really special to me because I got the opportunity to formally move into a new role that I had really been looking forward to. In my role, just like the others, there is a lot of room for one’s creativity to play out with our partners.

Investing in Community Preparedness and Resilience: ClimateXHealth

We launched our first learning and innovation project with the University of Washington's Center for Health and the Global Environment and Scope Impact, focused on climate-related health risks. To understand CHWs' current awareness and the effects in their communities, we began assessing their knowledge, attitudes, practices, and behaviors. To enable community actors across sectors to become resilient, we are co-creating – with CHWs – a diagnostic, response, and resilience tool among other stress testing tools.

This is a new area for Medic as we develop predictive algorithms, informed by the Intergovernmental Panel on Climate Change risk framework, to guide preparation and responses to specific health risks as they relate to a given climate hazard, vulnerability factors that make the hazard more or less damaging, and exposures. As we stand in solidarity with CHWs, we're excited about how current Medic Labs efforts could inform CHW professionalization efforts and advance CHWs' agency as climate change accelerates.

Empowering CHWs: Salaries, Skills, Supervision, Supplies

As a founding member of the Community Health Impact Coalition, Medic works in solidarity to ensure all CHWs are salaried, skilled, supervised, and supplied. To advance these aims, we developed a CHW health commodity management workflow with InSupply and VillageReach (also piloted by Lwala Community Alliance in Kenya) and began developing a prototype to facilitate digital payments to CHWs with D-Tree.

We also leveraged geospatial analysis and mapping techniques to strengthen CHW workforce microplanning and epidemic preparedness with Humanitarian Open Street Map Team, Muso, Open Mapping Hub, and Partners in Health.

Low trust in CHW generated data arises from inconsistent or problematic (IoP) data that are not timely, complete, or correct. To identify IoP data and address CHW training, skills, and performance gaps, Medic co-developed the Data Observation Toolkit (DOT) with BRAC, DataKind, Ministry of Health of Uganda, and Muso. DOT is a CHT-enabled engine, web user interface, and dashboard.

Differentiated service delivery (DSD) for people living with HIV necessitates effective community outreach, but facility-based electronic medical records (EMRs) are not portable. To enable community-based nurses to see, act upon, and make real-time updates on key DSD elements such as viral loads, prescription refills, and commodity management, we co-developed the Community-based ART Retention and Suppression (CARES) App with I-TECH and Lighthouse Trust. CARES is an offline-first, point-of-contact electronic medical record (EMR)-like app that syncs with facility-based EMR systems.

With global WACh Center, I-TECH, Kenyatta National Hospital, and University of Nairobi, we started CHV-NEO, a National Institutes of Health-funded study to design and test a two-way SMS messaging program connecting pregnant women and new mothers with CHWs and integrate it into the Kenyan health system. A combination of automated and interactive messages will focus on mothers of preterm, low birth weight, and other high-risk neonates.

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Differentiated service delivery (DSD) for people living with HIV necessitates effective community outreach, but facility-based electronic medical records (EMRs) are not portable. To enable community-based nurses to see, act upon, and make real-time updates on key DSD elements such as viral loads, prescription refills, and commodity management, we co-developed the Community-based ART Retention and Suppression (CARES) App with I-TECH and Lighthouse Trust. CARES is an offline-first, point-of-contact electronic medical record (EMR)-like app that syncs with facility-based EMR systems.

With global WACh Center, I-TECH, Kenyatta National Hospital, and University of Nairobi, we started CHV-NEO, a National Institutes of Health-funded study to design and test a two-way SMS messaging program connecting pregnant women and new mothers with CHWs and integrate it into the Kenyan health system. A combination of automated and interactive messages will focus on mothers of preterm, low birth weight, and other high-risk neonates.
From Dakar to Kathmandu to Washington, D.C.; from Kampala to Nairobi to New York City, Medic teammates around the world resumed in-person gatherings. While appreciating the incredible value and ease of virtual meetings, we rekindled the joy of face-to-face interactions with one another and our esteemed partners. With renewed vigor, we immersed ourselves in national and international events, and visited active project sites in Africa and Asia. For nearly half of our team, this was the first time ever meeting a colleague in person. This return to safe and thoughtful travel strengthened the bonds previously forged through computer screens and allowed us to celebrate our shared values of humanity and genuine connection.

Our journey forward has been enriched by the arrival of exceptional individuals. We welcomed new leadership with Chief Executive Officer Krishna Jafa, Chief Program Officer Robert Mutai, and Director of Community Nekesa Were; new board members Wambui Kinya and Dykki Settle, and new, brilliant teammates across all of our functional teams. Together, we are united as an unstoppable force for good, centered on our shared commitment to transform digitized community health.

2022 was a significant year for me. I had a major personal growth and I felt moved by how the Medic team showed humanity and support during this period as well as patience when I returned. I will always relate this beautiful life experience to my time at Medic.

— Lorena Rodriguez
Quality Assurance Engineer

My highlight in 2022 was witnessing how my role supports Medic’s mission. I loved seeing how my skills in financial planning and analysis bolstered support to all functional teams who through their field experience reached the hardest-to-reach communities — feeling the essence of Medic’s values and impact as we champion for UHC 2030.

— Ashim Shrestha
Finance and Administrative Manager
Connection
We believe that a strong sense of connection is the foundation of a thriving workplace.

Last year, we witnessed a profound impact on our team as they forged deeper bonds with our mission and with each other.

• Virtual retreats, monthly Town Halls, quarterly All-Hands, and intra-departmental gatherings facilitated stronger teammate connection.
• A CHW Virtual Solidarity Walk in hub offices enhanced mission connection.
• Team French classes and coffee/chai catch-ups promoted cultural connection.
• Attendance at global conferences, meet-ups, and events bolstered industry-wide connection.

Care
We believe that a diverse and inclusive work environment, where everyone is treated with dignity and respect, is the bedrock of a flourishing global team.

Keeping humanity at our core, teammates achieved professional growth without sacrificing work/life balance.

• Deep prioritization of professional growth: 18% of teammates received a promotion for their advancement within Medic!
• Emphasis on anti-harassment and discrimination: all teammates completed external training on harassment and discrimination prevention as a supplement to Medic's global policies.
• Enhancement of base compensation structure: we conducted a global compensation benchmarking study and implemented a transparent, 16-level structure to ensure equity, fairness, and continuous security for all teammates.
• Commitment to a conducive work environment: we extensively reviewed our organizational policies, including harmonizing policies across hubs to ensure equity; enhancing time off eligibility; adopting gender-inclusive parental leave, and other family-friendly provisions.

Our Team at a Glance

<table>
<thead>
<tr>
<th>Total Teammates</th>
<th>Countries</th>
<th>Time Zones</th>
<th>New Hires in 2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>93</td>
<td>18</td>
<td>14</td>
<td>19</td>
</tr>
</tbody>
</table>

80% of Medic teammates identify as persons of color.
60% of our CXO team identify as women.
65% of Medic teammates live in countries where the CHT is used.
46% of our Leadership Team identify as women.
Ecosystem

Community Growth: Building an Inclusive Health Ecosystem

Our team diligently supported partners with technological solutions that enable accessible health care for all – including vulnerable populations, underserved communities, geographically remote villages, and regions in need of improved primary healthcare systems.

In 2022, we partnered with Bayer Foundation and PATH to launch the CHT Entrepreneurship Accelerator (CHTEA), a dedicated fund supporting four Africa-based organizations with early stage accompaniment and technical mentorship. CHTEA will provide a cohort experience for onboarding and learning to burgeoning community members as they establish themselves as skilled CHT app builders, fueling local ownership and future growth of impactful healthcare solutions.

We advocated for the #ProCHW movement in the global ecosystem and announced our $3M USD in-kind commitment to The Global Fund's 7th Replenishment. This transformative contribution amplifies our dedication to advancing equitable health for all, leaving an indelible mark on the path to progress. We remained an active member of the Community, Health Impact Coalition, deepened our engagement as a founding member of Unlock Aid, and joined the Million Lives Collective and Transform Health Coalition. We are grateful to each global stakeholder for their shared commitment to equitable health for all. Together, we boldly pave the way towards a future where every individual has access to the healthcare they deserve.

Visiting our inspiring teammates in Nepal, Kenya, and Senegal and meeting our incredible partners at convenings in New York City, Berlin, and Geneva brought the importance of our work into keen focus for me in 2022. I am continuously motivated by our deeply dedicated team and steadfast partners who hold a shared vision of health for everyone, everywhere, always.

Emily Michael
Chief Development Officer

We hosted a Skoll World Forum Ecosystem event: Building & Sustaining Public Health Infrastructure through Digital Global Goods. Chief Executive Officer Dr. Krishna Jafa was joined by Dr. Sitenei of MoH Kenya, Kanishka Katara from Living Goods, and Tara Herrick at PATH, in a panel hosted by Medic board member Wambui Kinya. The group discussed enabling inclusive innovation as a path to strengthening local capacity to create, implement, and scale country-based digital health solutions – such as the CHT.

Our team gave a lightning talk at a White House Office of Science and Technology Policy event discussing International Models of Innovation in Community Health. Aligning with the United States Executive Branch number one recommendation for digital community health, we committed to continuing to build tools with CHWs and those they serve – ensuring the voice of the user is present throughout the design process.

We fostered new partnerships with CircleIT and FLIT Invest to collaborate with private sector role models, in our joint pursuit of improved health access and global development. With CircleIT, we were able to unlock hundreds of donated smartphones for use in Kenya and with FLIT we partnered to bring attention and awareness around global health equity, affordable healthcare, and expanding access to quality healthcare in emerging economies.

Emily Michael, Chief Development Officer, Medic

Implementation and Technical Partners

- Amref Health Africa
- Beehyv
- BRAC
- Catholic Medical Mission Board (CMMB)
- DataKind
- Dimagi
- D-tree International
- East Bali Poverty Project
- Guild Digital
- HealthRight International
- Ilara Health
- Integrate Health
- International Care Ministries (ICM)
- International Training and Education Center for Health (I-TECH)
- Jhpiego
- John Snow Inc. (JSI)
- Jomo Kenyatta University Of Agriculture And Technology (JKUAT)
- Last Mile Health
- Living Goods
- Lwala Community Alliance
- Malaria Consortium
- Médecins Sans Frontières (MSF)
- Muso
- Ona
- Palladium
- Partners In Health (PIH)
- Rural Health Collaborative
- Safari Doctors
- SunyaEk
- Totohealth
- UNICEF
- University of Washington
- Visortech Solutions
- Village Health Works
- Ministry of Health, Kenya
- Ministry of Health and Public Hygiene, Mali
- Ministry of Public Health, Niger
- Ministry of Health, Uganda
- Ministry of Health and Population, Nepal
Coalitions for Impact

- Africa Frontline First (AFF)
- Community Health Impact Coalition (CHIC)
- Digital Public Goods Alliance (DPGA)
- Fast Forward
- Intelligent Community Health Systems (iCoHS)
- Innovations in Healthcare
- Million Lives Collective
- Transform Health Coalition
- Unlock Aid

Philanthropic Partners

- Anonymous
- Amazon Web Services (AWS)
- Bayer Foundation
- Bohemian Foundation
- Mr. Bruce F. Campbell
- CircleIT
- Crown Family Philanthropies
- Digital Square at PATH
- Dovetail Impact Foundation
- The ELMA Foundation
- Fast Forward
- FLIT Invest
- Google Chrome Advanced Web App Fund
- Google.org
- The Greater Houston Community Foundation
- The Horace H. Goldsmith Foundation
- Johnson & Johnson
- Merrill Schneider Foundation
- Mulago Foundation
- Network For Good
- Panorama Global
- The Pfizer Foundation
- The Ray & Tye Noorda Foundation
- Rippleworks, Inc.
- Rockefeller Foundation
- Sall Family Foundation
- Silicon Valley Community Foundation
- Skoll Foundation
- University of Washington
- The Wireless Alliance

Medic Board of Directors

Greg Ennis (Board Chair, Outgoing)
Managing Director
Peninsula Ventures

Raffi Krikorian (Board Chair, Incoming)
Chief Technology Officer &
Managing Director
Emerson Collective

Brittany Hume Charm
VP, Strategic Partnerships
The Health Initiative

Dyikki Settle
Chief Digital Officer and Co-Lead of the
Center of Digital and Data Excellence
PATH

Josh Nesbit
Co-Founder, Widespread Care
Co-Founder & Former Chief Executive Officer
Medic

Amy Norris
Chief Legal Counsel
Clif Bar & Company

Robin Bruce
President
Dovetail Impact Foundation

Wambui Kinya
Regional Managing Director
EMEA Elephant Ventures
## Financials

### Balance Sheet (USD)

**As of December 31, 2022**

**Assets**

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash</td>
<td>2,593,359</td>
</tr>
<tr>
<td>Contracts Receivable</td>
<td>148,153</td>
</tr>
<tr>
<td>Pledges Receivable</td>
<td>500,000</td>
</tr>
<tr>
<td>Prepaid Expenses and Other Current Assets</td>
<td>226,575</td>
</tr>
<tr>
<td>Inventory</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total Current Assets</strong></td>
<td>3,468,087</td>
</tr>
<tr>
<td>Property &amp; Equipment, Net</td>
<td>62,922</td>
</tr>
<tr>
<td>Deferred Tax Asset</td>
<td>62,060</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td><strong>3,593,069</strong></td>
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</tbody>
</table>

**Liabilities and Net Assets**

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts Payable and Accrued Expenses</td>
<td>97,301</td>
</tr>
<tr>
<td>Accrued Benefits</td>
<td>71,099</td>
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<tr>
<td>Accrued Taxes</td>
<td>24,852</td>
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<tr>
<td>Deferred Revenue</td>
<td>39,511</td>
</tr>
<tr>
<td><strong>Total Liabilities</strong></td>
<td><strong>232,763</strong></td>
</tr>
<tr>
<td>Without Donor Restrictions</td>
<td>1,523,600</td>
</tr>
<tr>
<td>With Donor Restrictions</td>
<td>1,236,706</td>
</tr>
<tr>
<td>Time Restrictions</td>
<td>600,000</td>
</tr>
<tr>
<td>Purpose Restrictions</td>
<td>1,236,706</td>
</tr>
<tr>
<td>Total Net Assets with Donor Restrictions</td>
<td>1,836,706</td>
</tr>
<tr>
<td><strong>Total Net Assets</strong></td>
<td><strong>3,360,306</strong></td>
</tr>
<tr>
<td><strong>Total Liabilities &amp; Net Assets</strong></td>
<td><strong>3,593,069</strong></td>
</tr>
</tbody>
</table>

### Statement of Activities (USD)

**As of December 31, 2022**

**Support and Revenue:**

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants and Contributions</td>
<td>3,396,623</td>
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<tr>
<td>Contract Revenue</td>
<td>1,445,040</td>
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<tr>
<td>Other Income</td>
<td>10,916</td>
</tr>
<tr>
<td><strong>Total Revenues and Support From Operations</strong></td>
<td><strong>4,852,579</strong></td>
</tr>
</tbody>
</table>

**Expenses**

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Services</td>
<td>6,477,732</td>
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<tr>
<td>Management and General</td>
<td>1,045,371</td>
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<tr>
<td>Fundraising</td>
<td>522,684</td>
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<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>8,045,787</strong></td>
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</tbody>
</table>

**Total Change in Net Assets From Operations**

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>(3,193,208)</td>
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</tbody>
</table>

**Nonoperating Activity:**

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tax Benefit (Nepal)</td>
<td>3,762</td>
</tr>
</tbody>
</table>

**Total Changes in Net Assets**

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>(3,189,446)</td>
</tr>
</tbody>
</table>

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### Get in Touch

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**Kathmandu Hub**

Chakupat, Lalitpur, Nepal

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