

Breakfast for Global Health

May 21, 2013

“PATH: Innovation in Motion”

ENTRY VIDEO w/Music

Africa by Tom Cohen

SCREEN

BfGH Logo

PERFORMANCE

“Foli”

Flash Mob

SCREEN: Phyllis Campbell Chairman, Pacific Northwest at JP Morgan Chase
PATH Board Member

PHYLLIS: Wasn’t that amazing? Please join me in applauding the talents of these artists and all who assisted in this production. (applause)

And to those of you in the audience, thank you for investing your valuable time to attend the 9th annual breakfast for global health.

That performance, the decor and the food we enjoy today are beautiful and exciting tributes that remind us of the extraordinarily rich cultural heritage and the tremendous contributions and potential of the continent of Africa

Like many of you, much of my attention is paid to matters involving investment. Investments of time. Investments of money. Specifically, we’re interested in what kind of return we obtain from our investments. And that’s a large part of what we’re going to examine and evaluate over the next hour.

In this case, we’re going to look at the investment made by PATH toward achieving its key objective.

SCREEN: Improving the health of people around the world by advancing technologies, strengthening systems and encouraging healthy behaviors.

PHYLLIS: PATH’s mission, shown here, is an investment in people, in cultures, and in simply doing the right thing. But when your mission is global in scope – as this is – it’s possible to become too diversified and therefore diminish effectiveness.

SCREEN: TBD (caregiver and receiver?)

PHYLLIS: That’s one of the great things that distinguishes PATH: The keen focus on advancing technologies, strengthening systems and encouraging

healthy behaviors. This approach – this strategy – has been pursued by PATH for nearly 40 years for a simple reason: It works.

PATH's investment in global health has paid extraordinary dividends in curtailing suffering, saving lives, strengthening communities and redeeming hope.

One spectacular dividend we've been able to celebrate is a triumph in the battle against the spread of Meningitis A – an often-deadly disease that can also cause deafness, epilepsy and other debilitating long-term illnesses.

SCREEN: Vaccine

PHYLLIS: In the past year, we achieved an exciting milestone with MenAfriVac. This is a revolutionary vaccine we developed with our partners at the World Health Organization, the Gates Foundation and the Serum Institute of India. It protects the most vulnerable people in sub-Saharan Africa from Meningitis A.

SCREEN: 100 millionth dose. (Slide #4 from CRDT presentation.)

PHYLLIS: In December, we reached our 100 millionth dose. That means 100 million young people in ten African countries are now protected.

SCREEN: Meningitis belt

| **PHYLLIS:** Thanks to our partners and contributors—the Gates Foundation, WHO and the Serum Institute of India, we now have the very real potential of completely eradicating Meningitis A in the 25 countries of the so-called Meningitis Belt.

SCREEN: Blank

PHYLLIS: Throughout the morning, you'll learn more about dividends and how they were earned.

What I hope most is that you'll come to see that the work accomplished by PATH is inextricably linked to you personally. Every success story you'll hear, every challenge met, every task still being undertaken, is a direct result of your generous participation.

These returns, these rewards, are the evidence of your discernment as well as your generous, caring nature. By supporting PATH, you've chosen a high yield investment. One that has delivered and will continue to deliver for the betterment of all.

Before I introduce our first speaker, I want to give you an idea as to how PATH has evolved and grown over the years...

SCREEN: Map showing global presence

PHYLLIS: PATH now has a formal presence in 22 countries around the world - and has a presence on the ground in more than 70.

SCREEN: Budget then and now (showing growth over the last five years or so)

PHYLLIS: Since its start in 1977 with \$250K, PATH has become a critical player in global health with a budget of \$350 million and nearly 1300 employees, nearly half of whom are located outside the U.S.

SCREEN: Graph of employee increase

PHYLLIS: What's more, PATH is a highly regarded nonprofit organization – ranked among the top-to-watch lists of industry standard-bearers such as Forbes and Charity Navigator.

SCREEN: Innovation Pipeline

PHYLLIS: A longtime innovator in global health – PATH this year has nearly 200 technologies in its development pipeline.

SCREEN: Steve Davis PATH President and CEO

PHYLLIS: And now, I have the pleasure of introducing one of the newer PATH employees – a man dedicated to the power of innovation and its role in tackling global health inequities.

Steve Davis told me that ten years ago, he began attending breakfasts much like this one. He was so moved by what he learned that he joined the board of PATH and today leads its efforts as president and CEO.

Steve's one of those people that makes you scratch your head and wonder, "how does he do it?" In addition to his contributions to PATH, he also serves as chair of the board of trustees for the Fred Hutchinson Cancer Research Center, as a member of the boards of The Seattle Foundation and Global Partnerships and as a member of the Council of Foreign Relations. He is also a senior fellow at the University of Washington School of Law. He has been a keynote speaker around the world – a leading voice for global health and development.

During this first year as President and CEO, Steve has been extraordinarily busy, from speaking at the World Economic Forum in Davos, to consulting leaders at the Clinton Global Initiative to being featured in Forbes magazine.

It's now my honor and privilege to give the stage over to Steve, who'll guide us through PATH's accomplishments and ongoing *innovation in motion*. Ladies and gentlemen, Steve Davis.

SCREEN: Innovation in Motion

NOTE: *Steve walks on in business suit, but wearing big leather tool belt, with hammer, vice grips, etc.*

STEVE: Thank you Phyllis, and thank you ladies and gentleman.

Some of you who know me well might notice something different about my attire. I'm referring, of course to the fact that I don't usually wear a necktie.

(points somewhat quizzically at tool belt) This? I wear this as constant reminder of the first tenet of PATH's mission statement: advancing technologies.

What's important to point out, however, is that by advancing technologies, we don't necessarily mean using only the latest high-tech tools.

(Pulls smart phone from tool belt)

SCREEN: Smart phone with heart monitor app on screen

STEVE: While we certainly embrace the benefits of exciting and useful new technologies, such as mobile health applications, the key to PATH's success has been in innovating more effective uses for any existing technology.

Everyone in the audience can relate to this concept. Take a seemingly simple technology like this (pulls roll of duct tape from tool belt). It was invented – I suppose – to seal heating and air conditioning ductwork. But, since its introduction, people have found innumerable and – one might add – ingenious uses for duct tape.

SCREEN: Humorous illustration of different uses of duct tape: taping baby to wall; cargo taped to top of car; etc.

SCREEN: 2-sided: One side shows hammer driving a nail; other shows hammer breaking down wall.

STEVE: Innovation in motion means using tools effectively and resourcefully. (Pulls out hammer from belt). The same tool can often be used both to build something of value, and to pull apart obstacles to achieving our goals.

SCREEN: Platforms (Slide #6 from CRDT presentation)

Among the things we build figuratively at PATH, are platforms. From these platforms are launched the initiatives, strategies and implementation needed to make progress.

SCREEN: Sure Start

STEVE: The first platform I'll describe has to do with community-based interventions. Among these, one of which we're most proud is called Sure Start.

In India, many communities regard it as bad luck for a woman to acknowledge her pregnancy, so few women seek prenatal care. Their lack of information can lead them to believe they are too poor to obtain what are indeed free and readily available hospital services. The result is countless children dying within a month of birth.

Sure Start works by first acknowledging local beliefs and traditions, and then educating and training health workers within the community. These health workers can more readily build rapport and trust with expectant mothers, sharing knowledge that prepares them for birth and proper care of a newborn.

PATH and Sure Start have reached over 2.5 million women and newborns in India, bringing simple advice that saves babies.

SCREEN: Devices (show antishock garment)

STEVE: Innovation proves its continuing worth in the development and deployment of new life-saving devices.

The blue "wet suit" you see here is an anti-shock garment. It was developed to address the appalling fact that excessive bleeding after childbirth is the most common cause of illness and death among new mothers.

This one-size-fits all neoprene covering applies pressure to the lower part of the body, forcing blood to key organs and keeping the mother alive until emergency obstetric care can be delivered.

SCREEN: Diagnostics (image of lines of people lined up for HPV test)

STEVE: In the United States, even a simple doctor's check up often includes a comprehensive series of tests, utilizing sophisticated laboratories, but in developing nations, this is virtually unknown. This lack of information often leads to incorrect diagnosis.

In response, PATH is investigating and testing an array of inexpensive, portable and easy-to-use diagnostics that can be used at even small, local health centers. With fast, accurate results, the right treatment can be delivered right away.

SCREEN: Drug development

STEVE: In late 2011, PATH began a fruitful affiliation with a Bay Area non-profit drug development company. Together, we're working to discover, develop and deliver safe, effective and affordable new treatments for diseases disproportionately affecting people in developing countries.

We've assembled an experienced and dedicated team to identify the most promising drugs, and are collaborating with companies to manufacture and distribute them, including a sustainable and affordable supply of semisynthetic artemisinin, the most effective malaria treatment available today.

SCREEN: Vaccines

STEVE: Vaccination may be the most effective public health intervention of all time, and that's especially true today in developing countries, where families can't find or afford health care when they get sick. Our work ranges from conducting clinical trials that build evidence of a vaccine's effectiveness to ensuring that the vaccine arrives safely at its final destination.

SCREEN: Innovation in Motion

STEVE: The transformative innovations coming from these platforms are making a real difference. PATH is reaching hundreds of thousands to *millions* of lives.

Let's look at just a few examples...

SCREEN: Photo of Sayana Press (Depo Provera in Uniject)

STEVE: This year saw the introduction of delivery of the contraceptive depo provera in our renowned Uniject device.

SCREEN: Sub-Saharan woman looking at camera

STEVE: Planning a family is key to ensuring a healthy life for women and their families around the world. In sub-Saharan Africa, a woman's lifetime risk of dying as a result of pregnancy is one in twenty-two. But about a third of those deaths can be avoided with access to family planning methods.

SCREEN: Woman receiving injection at rural clinic.

STEVE: Injectable contraceptives are increasingly popular with women around the globe. But among the biggest challenges is access. Many poor women simply cannot get to the clinics that offer contraception.

SCREEN: Pfizer logo with image of Sayana Press; picture of health worker administering injection

STEVE: To address this challenge, PATH partnered with Pfizer to create Sayana Press, an injectable contraceptive, delivered in our Uniject injection device.

Because the prefilled Sayana Press is easy to use, less-skilled health workers can administer them. Not just in clinics, but also in nearby community locations, or even in homes. This pilot project will ultimately provide 12 million units of Sayana Press.

STEVE: Much like a successful business is mindful of meeting the needs of its customers, we at PATH seek the best ways to identify and meet the health needs of developing nations. What does the country most need to make sure the solution gets to the person who needs it most?

I hope I'm making a convincing case for the fact that transformative innovation pays off in eliminating a great deal of suffering in the world. When we target a problem, we make a big difference for the better.

This year, we have another target. But unlike maladies such as Meningitis A, this is one every one of us is familiar with and has suffered from. As adults, we don't like to talk much about it, but kids don't seem to have the same inhibition.

SCREEN: Full motion or screen grab of opening scene from "Parenthood," with kids singing "[The Diarrhea Song](#)."

STEVE: We don't have to sing about it, but it's certainly time we talked about it.

SCREEN: Stopwatch

STEVE: Simple diarrhea – the squirts, the runs, jelly belly – is something most of us associate with mild food poisoning. But in the undeveloped world, diarrhea is a child killer of monstrous proportions.

Each year, diarrhea takes the lives of about 760,000 children, making it the second biggest child killer in the world. More than HIV/Aids and tuberculosis combined. That's over 2,000 children every day. Think about that. In just the short time since the beginning of today presentation, over 20 children have died from diarrheal disease.

There's hope. This video will show you how PATH is pursuing way to change that brutal statistic.

VIDEO

STEVE: You've heard me talking a lot about transformative innovation and the tools that make that possible. I just happen to have a few of those tools handy.

(Reaches in tool belt and pulls out a bottle of water.) Water. More to point, clean water. Water than doesn't make you sick. You obtain clean water by improving sanitation – building toilets for people who literally don't have a pot to poop in.

(Reaches in tool belt and pulls out bar of soap.) What goes well with water? Soap. A review of more than thirty studies found that hand washing with soap cuts the incidence of diarrhea by nearly half.

(Reaches in tool belt and pulls out bottle of zinc tablets.) Here's something else that goes well with water. These inexpensive zinc tablets are the core element of Oral Rehydration Therapy, or ORT and it cures diarrheal disease.

(Pulls drug vial from tool belt.) This little bottle contains rotavirus vaccine. Rotavirus is a nasty bug that causes more than a third of child deaths due to diarrhea. It can't be treated with antibiotics or other drugs. Immunization offers the best hope for preventing severe rotavirus, and it's estimated it could save nearly 2.4 million lives by 2030.

(Reaches into tool belt and comes up empty-handed). Oh...it turns out that another effective tool in the battle against childhood diarrhea doesn't happen to fit in my tool belt...it's breast-feeding.

It's important to point out that the major effectiveness of these tools derives not from using each alone, but in bringing as many as possible simultaneously to bear against the problem. Often, our biggest impediment is getting the treatment to the children who are suffering.

SCREEN: Dr. Alfred Ochola (O cho la)

STEVE: As you have seen, PATH relies on a network of people and organizations of remarkable diversity. What brings them all together is a shared dedication to tackling global health inequities. Certainly among the most dedicated of those people is the person I would like to invite up to the stage now.

He holds one of the most meaningful job titles I've ever read: Technical Advisor for Child Survival and Development, for the East African nation of Kenya.

Dr. Alfred Ochola leads an initiative to control diarrheal disease in the country's western province. He works with the government and partners in Nairobi to ensure that supportive national policies are in place for diarrheal disease control. His passion is preventing and treating diarrhea in children.

When it comes to this disease, Dr. Ochola doesn't just see numbers. He sees the suffering, and the urgent need for us to help end it.

With six children of his own, Dr. Ochola knows the pain parents feel when their children are suffering. He has directly seen the severe effects of diarrhea when treatment isn't readily available.

This lack of treatment creates a community where children are too often overlooked. They need a voice...an advocate to provide hope, dignity and healing. Please welcome the man who is committed to being that voice, Dr. Alfred Ochola.

SCREEN: Photo of Jane Wamalwa

DR. OCHOLA: Thank you, Steve. Thank you ladies and gentlemen.

Many people's definition of a doctor is a person who treats diseases and injuries. But, where I come from in Kenya, much of a doctor's time and effort is instead spent struggling to overcome economic and societal obstacles. These are barriers that stand stubbornly between those who are suffering and the treatment they deserve.

These are barriers erected by poverty, by a harsh environment, by taboos and customs, by apprehensions regarding modern medical treatment and by negative attitudes toward women and children.

I start and end each day with a prayer. A petitionary prayer that asks that these barriers be broached, and a prayer of gratitude when they are.

I'd like to tell you a story about how such prayers can be answered. When education and resources are met with a person of compassion, heartfelt dedication and raw courage. Obstacles fall. Lives are saved.

This is Jane Wamalwa.

In her community, diarrhea meant that a child had been cursed and the only way to remove the curse was to pay a traditional healer to administer special herbs. When the child vomited, Jane was told it was a good sign — the curse was leaving the child's body. What Jane didn't know, at the time, was the vomiting was actually causing death due to dehydration.

Three small mounds in a cornfield near Jane's house mark the locations of her children's' graves.

SCREEN: Shots of graves

DR. OCHOLA: The first to die was her five-year-old little boy. The following year, Jane lost a second child. This time her 18-month-old son. When her baby daughter fell ill two years later, she felt powerless to stop it. She watched in despair as her third child succumbed to diarrheal disease. Her family blamed her and her husband beat her for giving birth to sickly children.

How do you reach parents like Jane with information and strategies to avert such tragic and needless loss? She didn't know that after working on her farm, she should wash her hands before breastfeeding her children. She'd never heard about treating dehydration caused by diarrhea with oral rehydration solution or zinc tablets.

SCREEN: Photo of community training

DR. OCHOLA: Thanks to PATH-trained community health workers and PATH-sponsored radio programs, Jane learned that she was sadly misinformed about the causes of diarrhea and the best ways to treat it. She began to hear about the importance of treating the family's drinking water. Community health workers taught her ways to improve her family's hygiene and sanitation practices.

By the time she gave birth again, she knew exactly what to do to protect her newborn daughter.

Selected by village leaders and trained by PATH, Jane is now a community health worker fighting against diarrhea to heal her community. Her deeply personal understanding of the disease's consequences makes her a powerful

ambassador for the tools and techniques that can save children's lives, not the least of which was that of her healthy, now 11-year-old daughter.

SCREEN: Photo of Jane with other mom/friends

Trained and equipped with knowledge to fuel her passion for saving lives, Jane has become a trusted source of information and hope in her community, telling friends and neighbors, "You know me. I lost my children to diarrhea. Now I am informed and I will share what I know with you." It has become her calling.

STEVE: Thank you so very much for the moving and inspiring story, Dr. Ochola. And please accept our utmost gratitude for your selfless and tireless efforts.

Dr. Alfred Ochola, ladies and gentlemen. (Applause as Dr. Ochola leaves stage.)

STEVE: I want to point out something fundamental about Dr. Ochola's story that illustrates a key characteristic of PATH's transformative innovation: We move the innovative solutions to the people who need them. There is no other organization doing this. Education, medicine, technology...we bring the most effective combination of tools directly to the individuals who will benefit. We do that by leveraging PATH's strengths and collaborating with community members, governments and businesses. It's a strategy that works.

And it's a strategy that, today, we pledge to apply full-force to the scourge of diarrheal disease [and its partner in death, pneumonia](#).

SCREEN: Photo of Jane

STEVE: Today, and each day forward, we remember that we work for Jane and the hundreds of thousands like her. Today, PATH declares its commitment to children, mothers and families around the globe – shaping how innovations are delivered to those who need them to live healthier lives

Our goal: We will bring to an end the inequities that cause millions of children under the age of five to die from diarrheal disease [and pneumonia](#).

SCREEN: VISION. To a world where innovation ensures that health is within reach for everyone.

To a world in which no mother should have to bury a child because of something we could help prevent or treat.

STEVE: We know the tools we need to use to achieve this goal. Our job now is to link supply, distribution, clinical use and advocacy to deliver the tools “the last mile,” directly where they will have the biggest impact.

SCREEN: Map highlighting India, Cambodia and Ethiopia.

We’re starting in countries such as India, Cambodia and Ethiopia, where the disease burden is high, PATH’s capacity is strong and where there is local government interest in innovative delivery models.

What’s absolutely required to put them to work is your generous financial support. An investment of \$20 million will ensure that PATH can leverage its full innovation capacity and greatly increase the chance that a child can reach his or her fifth birthday.

SCREEN: Save 2 million lives by 2015 (WHO logo)

The World Health Organization estimates that by simultaneously tackling both diarrhea and pneumonia, we as a global community can save two million lives by 2015. PATH will play a critical leadership role in this global effort.

Now, to show you how you can help, I’m going to enlist the assistance of PATH board member and CEO at McKinstry, Dean Allen.

SCREEN: Dean Allen, Path Board of Directors. CEO, McKinstry

(Dean walks on wearing tool belt too.)

DEAN: (Acknowledging tool belt) Among other things, I’m a plumber. I know the advantage of having and using the right tool. Steve and Dr. Ochola have done a marvelous job of showing you how transformative innovation, combined with the right tools, can make a spectacular difference in world health.

(Reaches into tool kit and pulls out a checkbook or roll of currency.)

DEAN: What they haven’t talked enough about is what, ultimately, brings strength to those tools. Which is, of course, your generous contribution.

Now, many partners and donors like to specify that their contributions go to a specific program – a specific tool, if you will. But as you’ve learned this morning, one program is not effective in solving complex diseases. What’s required is a strategy that consistently has access to all the tools in the tool belt.

Those being the facts, another tool we have in our belt is PATH's Catalyst Fund. This is our primary source of innovation funding – the money that allows us to support new initiatives, leverage major grants and meet critical organizational needs. The Catalyst Fund sparks some of our largest and most effective programs. Your gift to the Catalyst Fund is an investment that will deliver a return in the form of hundreds of thousands, perhaps millions of lives saved.

To make sure your gift can make the most impact, we have more than PATH donors who have committed \$ to the Breakfast Challenge. This challenge will match any contribution of \$1,000 or more made at today's event.

SCREEN: \$1000 in text, doubled.

DEAN: That's right. Make any contribution of \$1000 or more before you leave today, and it will be doubled, thanks to PATH's Challenge donors. When's the last time you got a 100% return on your investment, instantly?

If you would like to use an even better tool for a bigger impact, I would recommend that you become a member of PATH's Catalyst Circle. You can do this by making a yearly gift of \$1,000 or more for five years. That amount, by the way, will also be matched, for all five years!

Table captains, please hand out the response card and assist those at your tables. I'll now join my guests. Thank you everyone.

Performance – “Thank you” from Africa Dance/Drums

SCREEN: Dean Allen, Path Board of Directors. CEO, McKinstry

DEAN: (Pulls check book from tool belt again and waves it) I certainly don't want to interrupt anyone from "using their tool," but I just wanted to emphasize once again what a terrific investment your contribution is to what has to be among the most worthwhile and rewarding efforts anywhere on the planet.

Together, we can make a difference. Working together, we can make a lasting impact. Together, we can do it. Together, we can make the world a better place.

On behalf of everyone at PATH, I thank you, most sincerely.

SCREEN Sponsors

I'd also like to extend a special note of thanks to our sponsors (list) and special guests (list, including Phyllis Campbell and Doctor Alfred Ochola).

And to everyone who assisted in producing today's event, thank you.

Guests are encouraged to linger and visit the exhibits, which are now open.

SCREEN

EXIT VIDEO w/Music

Africa by Tom Cohen