The Global State of AIDS

The latest data from UNAIDS show both remarkable global progress and significant challenges in the battle to end AIDS. The problem continues to be massive – with more than 35 million people infected globally and 1.6 million deaths last year – and continues to be concentrated in sub-Saharan Africa, most intensively in southern Africa where GAIA works. Still, the trend lines are all positive, with deaths, new infections, and stigma all in retreat. The best news is that the challenges tend now to be financial and logistical rather than medical, as the toolkit available in this fight continues to grow. For the first time, the goal of an AIDS-free generation – even in Africa – appears to be more than a mirage, provided that our will and commitment see us through.

According to UNAIDS:

**GLOBALLY**

- 35.3 million people are living with HIV
- 17.8 million children have lost a parent to AIDS
- Every hour 50 young women are newly infected with HIV

**IN SUB-SAHARAN AFRICA**

- 1 Million Fewer People Acquired HIV in sub-Saharan Africa between 2001 and 2012
  - 2001: 2.6 million new infections
  - 2012: 1.6 million new infections
- 22% Fewer AIDS-Related Deaths in sub-Saharan Africa between 2001 and 2012
  - 2001: 1.5 million deaths
  - 2012: 1.2 million deaths

**IN MALAWI**

- 41% Decrease in New HIV Infections
  - 2001: 111,104 new infections
  - 2012: 65,828 new infections
- 60% of pregnant Malawian women have access to ARVs
How Far We Have Come

In the early days and years of the AIDS epidemic, we had no idea what we were up against, let alone how to prevent or treat this raging disease. The early heroes of the fight dove into the fire without a hose, looking for victims, hoping only to ease their suffering. GAIA dove in a bit later when the first life-saving breakthroughs were becoming widespread in the U.S., heading to the African inferno armed with educational tools, condoms, and $4 pills to prevent mother-to-child transmission.

Today, though the fire continues to rage (see “The Global State of AIDS”), GAIA’s fire-fighting arsenal is much more complete. Antiretroviral therapy can arrest the HIV virus and, when properly administered, can suppress the viral load to undetectable (even non-infectious) levels. Treatment of HIV-positive pregnant mothers has nearly eliminated the tragedy of HIV-positive newborns. Rapid testing has streamlined the testing-counseling-referral continuum. And on and on. We now enter the fire fully expecting to re-emerge with healthy, hopeful survivors.

This is what makes GAIA’s current work so gratifying. Our actions derive from best practices, with predictably positive outcomes, and a measurable contribution to the global effort to end AIDS. Where the early days were heroically trial-and-error, today’s activity is intentionally evidence-based. While we continue to be trail-blazers in terms of where we work (still very much at the end of the road...well off the healthcare grid), our every step is now certain to get us closer to our goal.

As a result, by eliminating guesswork, our return-on-investment is soaring. Your donations to GAIA are now guaranteed to save children from malaria, mothers from AIDS, and babies from a future as orphans. Our actions, described in detail on these pages, work.

The luxury of predictable effectiveness was not available to our forebears. Here’s to those early heroes and risk-takers, and to the many GAIA supporters who continue to generously give.

With your help, this fire will be extinguished.

**Todd Schafer**
President & CEO
Serving Villages with Support and Care

20 New Villages Greet GAIA with High Demand

Eighty new GAIA Caregivers began their work in 20 new villages in November 2013. Immediately after their training, Caregivers began house-to-house visits. As they answered questions, registered orphans for school support and identified sick villagers for home-based care, word about GAIA spread and excitement grew.

Sarah heard of GAIA’s presence in her village and brought her 12-year-old granddaughter home from working as a house girl in another village. The child will now go back to school thanks to GAIA’s Orphan Care Program. The grandparents of Alfred, a two-year-old AIDS orphan who was recently diagnosed as HIV-positive, received counseling from GAIA Caregivers on tending to the toddler and providing necessary nutrition so that his body can process HIV medication. Evie tested positive for HIV at a GAIA Mobile Health Clinic in June and was registered for home-based care as soon as GAIA Villages launched in her village. After noticing Evie’s severe weight loss, her village’s new Caregivers took her to a hospital where she tested positive for tuberculosis. Evie’s Caregivers are supporting her in adjusting to her medications and coping with side effects, and her strength is improving day by day.

The changes that have taken place for Sarah, Alfred, Evie, their families and their communities in only a few months are profound…and these are only the very first of the many lives that GAIA Villages and its Caregivers will better over the coming 3 years.

Approximately 22,000 villagers will be served by 80 Caregivers in GAIA’s new villages.

Entering a Village: Learning the Needs of the Communities We Serve

How Do We Enter a New Village?

1. Identify areas of great need
2. Ensure there is no duplication of services
3. Obtain approval from the village chiefs
4. Conduct a Needs Assessment among randomly selected villagers
5. Approach villages and ask to nominate 8 trusted women, who are interviewed. 4 women are chosen as GAIA Caregivers in each village
6. Train new Caregivers, employing GAIA Coordinators as facilitators
7. LAUNCH SERVICES!

In each new village, Community Caregivers will:
- Conduct HIV and health education workshops
- Provide at-home care for villagers who are ill
- Help people to receive testing and treatment for HIV, TB, and malaria
- Register and monitor orphans and at-risk children in our Orphan Care Program
- Organize youth clubs

2013 FINDINGS:
- Population between 15 and 45 has been hardest hit, reducing productivity
- Early marriage increases HIV risk
- Stigma remains a problem: Only 35% of those surveyed thought they could openly discuss HIV
The GAIA Villages Program Proves to Increase Health Literacy and HIV Testing Rates

GAIA completed service in 40 villages in 2013, 20 in April and 20 more in October, and began service in 20 new villages in November 2013. The 3-year GAIA Villages intervention has impacted 156 villages in southern Malawi to date.

The 20 villages in the Mabuka area of Mulanje District in April were the first to be included in an impact study measuring changes in villagers’ health, health knowledge, and health seeking behaviors. Villagers were interviewed before, during and after program operation. GAIA compiled the first comprehensive impact report from a full three-year cycle, tracking progress towards 4 key goals of the Villages program:

- Improve school outcomes
- Stem the spread of communicable disease
- Decrease HIV stigma and slow the number of new AIDS orphans
- Empower those individuals with HIV to live positively

In our GAIA Villages:

- 1 in 4 households fostered orphans and at the end of the intervention 87% of fostered orphans were in school
- The portion of women with comprehensive knowledge of HIV/AIDS prevention, transmission and treatment increased by 20% in 3 years
- 96% of women reported they had been tested for HIV
- 6 in 10 women reported contraceptive use after being educated by GAIA

These profound improvements reinforce the changes GAIA Caregivers see taking place in their villages every day. GAIA’s Home-Based Care Program was hailed as one of the best in the country in 2013, and 32% of our critically ill villagers were nursed back to health and discharged healthy, 11% were provided palliative end-of-life care and 56% remain in treatment.

On advice from GAIA, 2,090 villagers reported being tested for HIV, and as people revealed their results, GAIA was able to connect them to much needed care.

Chief Abraham is a stronger leader and more effective manager thanks to her experience with GAIA. She is reinvigorated and armed with the knowledge and confidence to support, educate and care for her villagers after GAIA has moved on to assist other communities like hers.
One Education: Two Lives Transformed

Anthony is working hard and is on track to earn his diploma and graduate from high school. His path has not been easy.

Anthony has lived in Njema village with his grandmother since losing his father to AIDS and his mother to deteriorating mental health. GAIA helped Anthony with school supplies, school uniforms, a blanket and food in times of need. And when Anthony achieved admission to Zomba Catholic School, GAIA helped the family pay school fees when no one else could. With this support, Anthony was able to stay in the loving and supportive care of his grandmother and to achieve success in his studies.

Anthony’s grandmother says of GAIA’s support: “It’s like they are paying for my life because without this, I could have suffered and died with stress and anxiety.” Anthony himself says he is grateful for his blessings and hopes that other orphans will receive assistance so that they might have a good future like him.

“Many NGO’s come into Malawi. GAIA is the only one I have seen that does what it promises.”

- Villager in Mulanje District

Anthony is graduating high school with the support of GAIA’s Orphan Care Program.
Connecting Rural Communities with Quality Care

GAIA Mobile Clinics Close the Gap on Healthcare Service Delivery

With over 80% of Malawi’s population living in rural areas, sick villagers must walk many hours to the nearest health center. GAIA’s Elizabeth Taylor Mobile Health Clinics close the service gap, providing free healthcare within an hour’s walk for villagers living in the Mulanje district. In 2013, GAIA’s three GAIA Elizabeth Taylor Mobile Health Clinics saw an average of 375 patients per day. Operating 5 days a week, the clinics offer service for villagers from early in the morning until the last patient waiting is seen.

After 6 years of successful clinic operation in southern Malawi, the numbers of villagers coming for care at each clinic every week is stabilizing. More people are coming in for preventative care, rather than waiting until they are very sick. As a result the clinicians are able to spend more time with each patient, checking weight, blood pressure, and other key indicators of health. Patients like Steven (see next page), suffering from chronic conditions like hypertension, receive high quality care for free and are transported for further care when necessary.

In 2013:
> GAIA clinicians provided 1,510 family planning visits to help prevent unintended pregnancies.
> Another 2,632 patients learned their HIV status.
> 9,953 children under the age of 5 were treated for malaria
> Each month, 440 HIV positive patients received antibiotics to prevent HIV co-infections.

Malawian women die from pregnancy or birth complications in their lifetime

1-in-36

GAIA’s clinics provide free healthcare within an hour’s walk for the villagers of Mulanje district.

 Offering these villagers access to quality healthcare and linking them to follow up care and treatment helps stem the spread of communicable disease, reduces illness and death and improves health for whole communities.

GAIA secured funding from The Elizabeth Taylor AIDS Foundation to launch 2 new clinics in January 2014 so that Malawian villagers living in Mulanje District are within one hour’s walk of free, quality healthcare in their communities once per week, every week.

Malawian women who want to use modern family planning don’t have access to it

45% of married women in Mulanje use modern family planning

GAIA’s 3 Elizabeth Taylor Mobile Health Clinics saw an average of 375 patients a day in 2013.
Mobile Clinic’s Emergency Transport Saves Lives

Every Friday in Mbewa community center, Edina, a 40-year-old woman and GAIA Mobile Clinic volunteer, sweeps and cleans the facility and explains to the patients the order in which they will be seen. First the critically ill and children under 5, generally the most vulnerable, followed by the men and the women. The clinic stop looks like a pediatrician’s office, except that there is no electricity, running water or suitable shelter. There are many young children with runny noses and vacant stares. They are quiet compared to their American counterparts.

Ten men, most over fifty, patiently await their turn. One is Steven Chinangwa. He visits the clinic because of the quality of care and the proximity to his home. The nurse’s aide tries to take his blood pressure but finds the monitor cannot detect it. She takes the 81-year-old man to the physician’s assistant, who finds that Steven’s blood pressure is so high it cannot be read. He is having a stroke.

The physician’s assistant and the aide escort Steven outside to where the driver has backed up the ambulance. The waiting clients’ laughing and talking stop as they catch on to the seriousness with which the staff attends to Steven. A stretcher is lifted out of the ambulance but Steven does not want to lie down. The staff helps him step up into the vehicle. A woman volunteers to accompany him but Steven does not want this; he wants his wife. The patient and Edina, the clinic volunteer, drive off to the hospital, hoping to find his wife on the way.

Most of our work at mobile clinic stops is with malaria patients, people living with HIV, and children being treated for childhood illnesses. But sometimes a life-threatening condition like Steven’s demands an urgent response. The GAIA team is trained to respond instantly, competently, and respectfully to whatever is handed them. And so Steven is transported to the district hospital in safety and comfort. Even when over two hundred patients wait to be seen, our mobile clinic crew stay on the scene until each one is served. And sometimes we save a life.

Mphatso Phiri, Clinical Officer, and Caroline Bonogwe, Nurse Aide, take Steven’s blood pressure.

Percentage of Mobile Health Clinic Patients Testing HIV-Positive 2008-2013

<table>
<thead>
<tr>
<th>Year</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rate</td>
<td>23%</td>
<td>19%</td>
<td>18%</td>
<td>17%</td>
<td>14%</td>
<td>14%</td>
</tr>
</tbody>
</table>

Southern Regional Prevalence: 14.5%

National Prevalence: 10.8%
The Rev. Dr. William W. Rankin Medical Warehouse Opens Its Doors

Dr. Bill Rankin attended an opening ceremony to mark the opening of The Rev. Dr. William W. Rankin Medical Warehouse in July 2013. GAIA is now able to purchase medications and supplies in bulk and store them safely in a temperature controlled environment. The warehouse holds a 3-month supply of medication, which then stocks our GAIA Mobile Health Clinic inventory. In this way we can ensure that our clients have reliable access to needed medication, an important benefit given that shortages of routinely used medications are common in Malawi.

The structure was built with funds from the Miller Endowment for Outreach at The Parish of St. Matthew, Pacific Palisades, California, in honor of Bill Rankin’s 12 years of service as GAIA’s President and CEO.

GAIA’s clinics treat a variety of illnesses and also provide growth monitoring, family-planning services and prenatal care, in addition to HIV testing.

Honoring Henry Beni & Alan Becker

To pay tribute to the memories of GAIA Mobile Clinic staffer Henry Beni, who died unexpectedly in 2012, and GAIA-U.S. Founding Trustee Alan Becker, GAIA has dedicated two mobile clinic stops in their names. These stops are Machokola to honor Henry Beni and Chimwaza to honor Alan Becker.
Building Healthcare Capacity

Deployed GAIA Scholars Make a National Impact

ZAMIWE CHIPETA
October ’11 Graduate
Since graduation Zamiwe has served on the faculty at Nkomha College of Nursing in Lilongwe District, where she herself first attended nursing school. Zamiwe enjoys teaching community nursing, community midwifery, and clinical skills to nurse midwife technician students.

Numbers of Deployed Scholars by District

Deployed Scholars in the districts of Malawi:

<table>
<thead>
<tr>
<th>Region</th>
<th>Scholars</th>
</tr>
</thead>
<tbody>
<tr>
<td>Northern Region</td>
<td>18</td>
</tr>
<tr>
<td>Central Region</td>
<td>50</td>
</tr>
<tr>
<td>Southern Region</td>
<td>84</td>
</tr>
</tbody>
</table>

In 2013, 152 GAIA scholars were deployed in 24 of Malawi’s 28 Malawi districts.

By supporting Clinical Instructors at Malawi’s largest nursing college, offering continuing education for faculty members, and graduating future nursing faculty, GAIA is improving quality of nursing education.

By deploying nurses to rural districts and sponsoring students who are committed to working in the public sector for 5 years, GAIA is improving access to quality healthcare nationwide.

In 2013, GAIA inaugurated 106 new nurses into the Scholars program and trained 94 nursing faculty and care providers in ART, BEMONC, and triage to improve health of Malawians.

97% of GAIA Scholars have upheld their public service commitment. GAIA Scholars are working in rural health centers, hospitals, and training colleges throughout the country and 26% of newly deployed Registered Nurse Midwives at government facilities in 2013 were GAIA sponsored.

97% of 2013 graduates completed their bachelors program on time in 4 years.

COLLETRIDA NG’AMBA
October ’10 Graduate
Colletrida has worked at Nchteu District hospital for the past 2 years. She is the charge nurse of the maternity ward and she enjoys delivering new babies and coordinating family planning activities for the whole district.

ZIONE MCHIKAYA
October ’12 Graduate
Zione works at Nsanje District Hospital as the charge nurse of the female ward, managing 5 nurse midwife technicians and 9 ward attendants. Committed to staying current in her profession, Zione has attended a number of in-service trainings in antiretroviral therapy, family planning and clinical mentorship.

97% of 2013 graduates completed their bachelors program on time in 4 years.
Training the Next Generation of Nurses

The critical shortage of nurses in Malawi proves to be a challenge when training new nurses. GAIA has collaborated with Kamuzu College of Nursing (KCN), the largest nursing college in the country, to improve the quality of clinical teaching for nursing students. In 2013, the GAIA Malawi Nurse Education Project supported the hire of two Clinical Instructors to provide supervision and teaching of students. GAIA also developed and implemented a Clinical Teaching Training to equip educators with strategies to provide quality clinical teaching in Malawi. Seventeen nurse educators from 11 nursing colleges around the country attended the training, and 4 of the nurse educators trained were former GAIA Nursing Scholars. We are very proud of their commitment to educate the next generation of nurses in Malawi!

Nurse Midwife Technicians: The Backbone of the Malawian Healthcare System

They are trained in general nursing and midwifery. They work in a variety of health facilities often managing care in rural health centers. They are the backbone of the Malawian healthcare system, making up 80% of all nurses working in the public sector. They are Nurse Midwife Technicians (NMTs), and in 2013 GAIA and USAID expanded our partnership to include this cadre of nurses into the GAIA Nursing Scholarship Program. In July we welcomed 84 NMT students at Holy Family College of Nursing and Midwifery in southern Malawi. Co-Founder Dr. Bill Rankin and Dr. Sally Rankin attended the inauguration, along with representatives from the Ministry of Health, USAID, and CHAM (Christian Health Association of Malawi). The nurses will graduate in 2016 and will be deployed for 5 years to Malawian public health centers and hospitals where their skills are needed most.
NURSING

A new cohort of GAIA Nursing Scholars was inaugurated at Kamuzu College of Nursing (KCN) in February 2013.

On Friday, December 6th, the GAIA Malawi Nurse Education Project awarded 3 scholarships to masters students in nursing at Kamuzu College of Nursing in Lilongwe. After completion of their studies, these nurses will be prepared to provide advanced clinical services and become leaders in the nursing profession in Malawi. GAIA wishes Chikondi, Mtisunge, and Bertha all the best during their studies and congratulations on being selected as GAIA Scholars!

Nursing Scholar Gives Thanks for GAIA

“I would like to share what GAIA has done for me. I lost my dad in 2006 and I stayed two years at home because of school fee problems. When I was selected to come to Kamuzu College of Nursing I was worried as to where I could get school fees from since my sister who was paying fees for me after my dad’s death could not afford to do that. She is a primary school teacher and gets very little salary. After being chosen as a GAIA Scholar all my problems were attended to since I manage to buy stationary, groceries and I can even get [school] fees from GAIA. I would like to thank GAIA for all these because without this scholarship I would have been at home by now.”

- Chikondi Thondoya, 3rd Year GAIA Scholar

GAIA Masters Scholarships Awarded

On Friday, December 6th, the GAIA Malawi Nurse Education Project awarded 3 scholarships to masters students in nursing at Kamuzu College of Nursing in Lilongwe. After completion of their studies, these nurses will be prepared to provide advanced clinical services and become leaders in the nursing profession in Malawi. GAIA wishes Chikondi, Mtisunge, and Bertha all the best during their studies and congratulations on being selected as GAIA Scholars!

“Through no fault of their own, the orphans find themselves deprived of parents and facing a scary and grim future. To alleviate their current suffering in any way makes me happy.”

- Mindy, Pediatric Nurse and GAIA donor

Chikondi Chimbatata (left) is studying child health nursing, Mtisunge Gondwe (middle) is studying child health nursing, and Bertha Mgodi (right) is studying community health nursing.
Partnering for Good

GAIA has partnered with a variety of organizations to further our work in Malawi. We are working under a Memorandum of Understanding with the Ministry of Health in Malawi, committed to mutual support in our efforts to serve the residents of Mulanje District. Our Nursing Scholarship and Training Program works with the Nursing Education Partnership Initiative (NEPI) of Columbia University to ensure the production of sufficient numbers of well-trained graduates and to strengthen the capacity of nursing educational institutions. Jhpiego, affiliated with Johns Hopkins University, has shared its model for training nurses in emergency obstetrical care. We have partnered with Save the Children and the Malawi Ministry of Health to educate clinicians in life-saving pediatric techniques. We collaborated with The Microloan Foundation (a U.K.-based charity) to administer loans to former GAIA microfinance clients so they can continue to access financial services. We work with PSI to source and distribute mosquito nets. We learn from our partners and gain access to valuable services and goods as these collaborations expand the capacity of what we can accomplish.

Hamels School in Namunda Village

GAIA is collaborating with the Hamels Foundation on its initiative to build a school in Namunda village in southern Malawi (a former GAIA village). In 2013, Malawian contract crews broke ground on the school’s construction. GAIA serves as the Foundation’s on-the-ground representative in Malawi, providing in-country supervision and monitoring for the project which will build a 640 student primary school (grades 1-8) as well as housing for teachers. Construction of two 4-classroom school blocks and 4 teacher’s houses was completed in 2013. Two additional school blocks will be completed in the first half of 2014, together with 12 more teacher houses and additional support buildings.

Open Arms Malawi

GAIA has been a proud partner and supporter of Open Arms Malawi for over a decade. Open Arms provides medical care, shelter, food, and love to hundreds of orphaned children in the Blantyre District. In 2013, GAIA provided Open Arms support for its feeding program.
Renowned Physicians Celebrated in Launch of Campaign to Save Lives in Malawi

Friends and fans of two beloved GAIA leaders -- Dr. Charles Wilson and Dr. J. Donald Thomas -- rallied to support the launch of the special Campaign to Strengthen Health Care and Save Lives in Malawi. Responding to the need for accessible, quality medical care for preventable diseases, trustees, volunteers, and staff held events and special receptions to reach the midpoint goal of a total $2 million campaign to:

• Purchase, equip and staff 2 new mobile health clinics. Each mobile clinic annually provides more than 35,000 client visits to remote villages.

• Educate 100 young nursing students, mostly orphaned women, to specialize in midwifery and thus bolster Malawi’s health services.

On February 5, colleagues and friends of Dr. Charles B. Wilson, GAIA’s Co-Founder and Chairman Emeritus, gathered in San Francisco to honor Dr. Wilson who is acclaimed worldwide for his extraordinary skills as a neurosurgeon and brain tumor researcher. Attending were Wilson Mobile Health Clinic co-chairs Sharon Levy and Judy Nadel, Dr. Brian Andrews, author of the Wilson biography, Cherokee Neurosurgeon, Dr. Ernest Bates, Ellen Magnin Newman and others.

Two hundred friends and supporters gathered in Pasadena on November 24 to raise funds for the Don Thomas Family Mobile Health Clinic to honor one of Pasadena’s most highly regarded physicians and philanthropists and his departed wife, Mary, who took many visitors to Malawi. Dr. Drew Pinsky, television and radio host, regaled guests as the evening’s emcee. Trustee Jim Hayes and Agnes Grohs served as Campaign and Event Chair respectively. Dozens of volunteers ensured an exciting and packed program of jazz, modern dance, Malawian music, tributes and silent auction of works by premier artists.

USAID also extends GAIA’s cooperative agreement to support the cost of 100 nursing scholarships. Funds raised will be matched dollar for dollar by USAID. Students will be enrolled in 3- and 4-year nursing programs specializing in midwifery, skills desperately needed in a country with one of the world’s highest maternal and infant mortality rates.

Benefits in San Francisco and Haverford Raise Funds for 20 New GAIA Villages

GAIA’s new 20 village launch was made possible in large part with the support of attendees at GAIA’s 2013 benefits in San Francisco, CA and Haverford, PA.

Two hundred guests attended the May 20 event, “GAIA at the San Francisco Decorator Showcase.” Guests enjoyed wine and appetizers while touring a beautiful San Francisco home, each room decorated by a different designer. On November 3, GAIA held a benefit at the Haverford, PA home of Louise and Harry Hill and welcomed over 120 guests. This event was highlighted by presentations from renowned sports announcer Jack Whitaker and sociologist Dr. Susan Watkins.

We are grateful for the hard work of event chairs Alice Pidgeon and Gordon Keen, the event committees and volunteers in organizing these wonderful events.
Meet Our Malawi Staff

Meet three of our 47 Malawi staff members who are working hard to run GAIA’s programs on the ground.

Winnie Gunde is the accounts assistant at the Limbe office and works in the finance department.

Austin Gondwe is a driver for GAIA projects.

Anna Mviha is a senior nurse on the Mkanda Mobile Clinic.

GAIA Thanks All Its Staff and Trustees for Their Extraordinary Efforts!

2013 Staff & Trustees

Malawi Senior Staff*

Jones Laviwa
Country Director

Adalerini Manyungwa Nkhata
Finance & Administration Manager

Alice Bvumbwe
Senior Projects Officer

*GAIA currently employs 47 Malawi-based staff

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Flora Chithila

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Ellen Schell

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FINANCIAL OVERVIEW

In 2013, GAIA’s cash-basis income (after restricted transfers) totaled $2,968,188 and expenses totaled $2,911,028 (unaudited). GAIA has an annual accrual basis independent audit each fiscal year. The 2013 audit report will be available online later in 2014.

GAIA Accomplishments 2013

<table>
<thead>
<tr>
<th>GAIA Villages Program</th>
<th>Community Development</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>GAIA Villages in operation</td>
<td>80</td>
</tr>
<tr>
<td></td>
<td>Community Caregivers working in villages</td>
<td>310</td>
</tr>
<tr>
<td></td>
<td>Youth served through youth clubs</td>
<td>2,255</td>
</tr>
<tr>
<td></td>
<td>Bed nets distributed</td>
<td>1,289</td>
</tr>
<tr>
<td>Orphan Care</td>
<td>Orphans supported</td>
<td>3,828</td>
</tr>
<tr>
<td>HIV Prevention</td>
<td>Villagers referred for HIV testing</td>
<td>2,081</td>
</tr>
<tr>
<td></td>
<td>Percentage of villagers tested HIV+ (of those voluntarily revealing results)</td>
<td>22%</td>
</tr>
<tr>
<td></td>
<td>Villagers reached with HIV prevention messages</td>
<td>55,000+</td>
</tr>
<tr>
<td>Home Based Care (HBC)</td>
<td>Number of patients under care</td>
<td>525</td>
</tr>
<tr>
<td></td>
<td>Total number of patients nursed back to health (discharges)</td>
<td>151</td>
</tr>
<tr>
<td></td>
<td>Patients provided with end of life care (deaths)</td>
<td>55</td>
</tr>
<tr>
<td></td>
<td>Patients continuing in care</td>
<td>319</td>
</tr>
</tbody>
</table>

| GAIA Elizabeth Taylor Mobile Health Clinics | Mobile clinics in operation | 3 |
|                                          | Client visits for illness | 88,518 |
|                                          | Client visits for child/infant growth monitoring | 17,199 |
|                                          | Clients tested for HIV | 2,632 |
|                                          | Percentage of clients tested HIV+ | 14% |
|                                          | Clients treated for malaria | 18,515 |

<table>
<thead>
<tr>
<th>Nursing Education Program</th>
<th>Nursing Scholars Program</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Students under sponsorship in 2013</td>
<td>253</td>
</tr>
<tr>
<td></td>
<td>Graduates since program inception. 38 scholars who graduated in December 2013 were not yet deployed by year’s end</td>
<td>195</td>
</tr>
<tr>
<td></td>
<td>Scholars deployed at government health facilities and nursing colleges</td>
<td>152</td>
</tr>
<tr>
<td></td>
<td>Practicing nurses and nursing faculty trained in antiretroviral therapy since October 2010</td>
<td>269</td>
</tr>
<tr>
<td></td>
<td>Practicing nurses and nursing faculty trained in triage since October 2010</td>
<td>168</td>
</tr>
<tr>
<td></td>
<td>Practicing nurses and nursing faculty trained in basic emergency obstetric and neonatal care since October 2010</td>
<td>39</td>
</tr>
<tr>
<td></td>
<td>Practicing nurses and nursing faculty trained in clinical instruction since October 2010</td>
<td>17</td>
</tr>
</tbody>
</table>
We are grateful to all our wonderful volunteers who have worked tirelessly on behalf of GAIA.

Thank you.

The mission of Global AIDS Interfaith Alliance (GAIA) is to provide basic health services, targeting prevention, care, and support in communities affected by HIV, AIDS, TB and malaria in Africa.