Pathfinder International believes that reproductive health is a basic human right. When parents can choose the timing of pregnancies and the size of their families, women's lives are improved and children grow up healthier.

Pathfinder International provides women, men, and adolescents throughout the developing world with access to quality family planning and reproductive health information and services. Pathfinder works to halt the spread of HIV/AIDS, to provide care to women suffering from the complications of unsafe abortion, and to advocate for sound reproductive health policies in the U.S. and abroad.

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When Pathfinder International was officially incorporated in 1957—three decades after our founder had begun our work—our mission seemed less complex. Population growth rates in the developing world were high, and few people had access to, or even knew about, family planning. As a result, families were trapped in poverty and women were condemned to poor health or early death caused by constant childbearing. In that climate, Pathfinder was a pioneer in bringing family planning to women and families who lacked access to these basic health services due to cultural, geographic, economic, and political barriers.

Nearly half a century later, as we celebrate our 45th anniversary year, many barriers persist. While considerable progress has been made, reliable access to contraceptives remains a problem for millions of people. At the same time, our understanding of reproductive health needs has evolved. While Pathfinder remains committed to providing family planning services, we now also work to provide young people with adolescent-friendly sexual health services, to treat the consequences of unsafe abortion, to advocate for sound reproductive health policies, and to prevent and treat HIV/AIDS. Of these challenges, the most daunting to emerge is the HIV/AIDS pandemic. An estimated 40 million people age 15 to 49 were living with the disease in 2001, and three million lost their lives to it in that same year.

As Pathfinder’s president, I am proud of Pathfinder’s staff and their remarkable work to address the pandemic. In 2002, we stepped up our commitment to preventing the spread of HIV/AIDS and to alleviating the suffering caused by this deadly disease.

I assure you that while we are working to expand our HIV/AIDS services, we remain steadfast in
our commitment to all of our program priorities. Over the past year, Pathfinder initiated a program in India to increase access to family planning and reproductive health services among young married couples in Bihar, the country’s most populous and impoverished state. Pathfinder also expanded the life-saving postabortion care model we developed in Haiti and Peru to Ecuador, where improved clinical care and contraceptive counseling will save the lives of women seeking treatment for the complications of self-induced or back-alley abortions.

As we conclude our 45th anniversary year and begin looking ahead to our 50th and beyond, we envision a future without AIDS, a future in which all people have the knowledge and services they need to protect their health and make informed, responsible choices about their reproductive lives. We have come a long way, but we still have a long way to go. With your ongoing support, we will bring this vision closer to reality.

Daniel E. Pellegrom
President

Dr. Mohammed Alauddin and Dan Pellegrom
PATHFINDER AROUND THE WORLD

Africa
- Botswana
- Ethiopia
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- Kenya
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- Nigeria
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- Bangladesh
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2002 Accomplishments

Pathfinder International's work over the past year brought family planning and reproductive health services within the reach of women, adolescents, and families in 21 countries throughout Africa, Asia and the Near East, and Latin American and the Caribbean.

Due to the devastating social, economic, and human toll the HIV epidemic continues to take on the developing world, in 2002 Pathfinder heightened its focus on HIV/AIDS programs. Many of Pathfinder’s HIV initiatives are highlighted in this report. However, while it has strengthened its HIV/AIDS prevention and treatment efforts, Pathfinder remains firmly committed to delivering the quality family planning information and services that are central to its mission. Throughout 2002, Pathfinder worked with 105 local partner organizations to prevent and treat the complications of unsafe abortion, to offer adolescents comprehensive sexual health care that meets their needs, to provide the information and services that allow individuals to make responsible choices about their health and family size, and to advocate for policies that make all of these services available to those who need them.

In May, Pathfinder received a $60 million award from the United States Agency for International Development (USAID) to improve non-governmental organizations’ ability to meet primary health care needs in urban and rural areas of Bangladesh. Pathfinder will lead a team of seven partners in this large-scale project, which will provide family planning, emergency contraception, safe delivery and emergency obstetric care, management of childhood illnesses, and postabortion care and will prevent and treat infectious diseases, including tuberculosis, sexually transmitted diseases, and HIV.

A study coauthored by Pathfinder International’s Director of Evaluation Mizanur Rahman and titled “Do Better Family Planning Services Reduce Abortion in Bangladesh?” appeared in the September 29, 2001 issue of The Lancet. The analysis of contraception and abortion in rural Bangladesh found that more accessible and better quality family planning services keep abortion rates down during times of transition to social preference for smaller families. The study demonstrates that effective family planning services can reduce rates of clandestine abortion, which kills 80,000 women each year around the world. The results of this groundbreaking evaluation also were covered by the BBC World Service and Voice of America. The study’s coauthors are Julie DaVanzo, Director of the RAND Center for the Study of the Family in Economic Development, and Abdur Razzaque, Assistant Scientist with the International Centre for Diarrhoeal Disease Research, Bangladesh.
To assist the newly elected legislators of Nigeria's first democratic government in 28 years in deepening their understanding of HIV/AIDS and reproductive health issues, Pathfinder's Nigeria office teamed up with the National Democratic Institute for International Affairs (NDI) to conduct a health awareness program. Through the program, members of the Nigerian National Assembly heard direct testimony from Nigerian citizens living with HIV/AIDS and participated in outreach visits to religious and community leaders throughout the country. The outreach activities also brought legislators into direct contact with constituents at health fairs and open-air markets.

The second annual Sarah Faith Award was presented on May 29, 2002, to the Tarapoto Maternity and Perinatal Health Center. The $25,000 award, which is organized by Pathfinder's Peru office and endowed by Sarah Michalko, supports the work of Peruvian clinics or health care organizations that have overcome extraordinary obstacles to save the life of a woman suffering from the complications of pregnancy, childbirth, or abortion.

In the summer of 2002, Pathfinder launched a redesigned version of its Web site, www.pathfind.org. The new site features country pages, current program data, downloadable documents, and information on advocacy and financial support.

In July 2002, Pamela Onduso, Technical Associate for Adolescent Sexual Reproduction with Pathfinder/Nairobi, delivered the keynote address at the 15th World Council of YMCAs in Oaxtepec, Mexico. Ms. Onduso spoke to the gathering about Pathfinder's efforts to prevent the spread of HIV/AIDS among adolescents and youth in sub-Saharan Africa. That same month, Ms. Onduso also accompanied a delegation of eight young adults from Africa to the XIV International AIDS Conference in Barcelona, Spain. At the conference, the young people met with HIV experts to encourage them to include more youth voices in the design, implementation, and evaluation of HIV programs and policies targeting young people.
A lack of modern drugs and health care services, combined with the social stigma and rejection that can accompany an AIDS diagnosis, makes the future bleak for many Africans living with HIV/AIDS.

Through Pathfinder’s home-based care programs, HIV-positive Africans and their families are finding comfort and the strength to talk openly about HIV/AIDS. Thanks to the work of specially trained volunteers, home-based care programs provide both people living with the disease and the family members who care for them with practical training and emotional support. During home visits, volunteers teach caregivers to provide safe, effective nursing care. For individuals with HIV, home-based care provides palliative care, treatment of opportunistic infections, emotional counseling, contraceptives, and creates strong two-way referral systems with clinics and hospitals. Because AIDS so often robs families of their breadwinners, home-based care also links clients to available health, food aid, and income-generation resources.

By bringing the issue of AIDS into the open, programs like these create opportunities to clarify myths about HIV, to reduce the stigma associated with the disease, to empower those infected and affected by HIV, and to influence peoples’ willingness to know their own HIV status and to change their risky behaviors.

Pathfinder has become a leader in the home-based care of people living with AIDS through its successful programs in Kenya, Ethiopia, and, most recently, Tanzania. To date, Pathfinder’s program in Kenya has trained 21,508 family members to provide home-based care and has proven to be a cost-effective use of resources at $3.59 per client per month.

I found out I was infected with HIV in 2000. I had been living with a girlfriend, and either she gave it to me or I gave it to her. I don't know which. After she died, I suspected I might be infected, but I was reluctant to go to hospital. I didn't want to be found positive.

I came here [to the Mtongwe Bamako Initiative] for help and received counseling and was referred for testing. The result was positive. I took the news well, but my health deteriorated quickly because of the heavy labor I was doing, and I became bedridden shortly after the test. My family can't afford to help me, and because I am very weak now, I can't return to my old work.

Now I'm getting some medicines through the waiver system at the pharmacy at Mtongwe Bamako, but I must take the medicine with food, and I can't always afford food.

I have received some income-generation training here, and I hope to get a micro-loan soon to start a small grocery stall, or maybe a poultry farm, when I'm feeling better. I also want to take home-based care training when I'm better so that I can help others with AIDS.

Already I talk [at community gatherings organized by the Mtongwe Bamako Initiative] about my status to protect others. It's the best thing I can do. If I didn't testify, no one would know I have the disease just by looking at me. If I don't do this, who will help when all of us are sick? 
Young people in Uganda play a card game that teaches them about HIV/AIDS.

A lack of modern drugs and health care services, combined with the social stigma and rejection that can accompany an AIDS diagnosis, makes the future bleak for many Africans living with HIV/AIDS.
Preventing HIV Among Vulnerable Groups

The spread of HIV can be slowed by changing the behaviors of people who are most at risk of contracting the disease and transmitting it to others. However, for a homeless adolescent or a woman who must resort to commercial sex work to feed her children, HIV is a distant concern compared to day-to-day survival.

The best strategies for preventing HIV transmission among vulnerable groups like adolescents, sex workers and their clients, truck drivers, and injecting drug users include convincing people to be monogamous and to use condoms consistently. Treating sexually transmitted infections that make HIV transmission more likely also helps to prevent the disease among vulnerable groups.

Pathfinder’s HIV prevention efforts for young people focus on delaying the start of sexual activity, providing adolescent-friendly health services, promoting consistent condom use, training peer educators to provide accurate information, and using the media to promote changes to risky behaviors. Pathfinder also provides adolescents with job and life skills training, which helps to prevent HIV transmission because adolescents who are able to support themselves are less likely to be victimized or to engage in commercial sex work to survive.

To decrease HIV among commercial sex workers, Pathfinder trains peer educators to teach condom-use negotiation skills, provides brothel-based health care that includes treatment of sexually transmitted infections and voluntary HIV counseling and testing, and supports the creation of commercial sex worker associations that advocate for the legal and human rights of sex workers. Pathfinder’s HIV programs for transport workers target truckers, bus drivers, train drivers, boat crews, and all of their sexual partners with interventions that include education, counseling, and condom promotion. When working with injecting drug users, Pathfinder trains community-based workers and peer counselors to teach harm reduction skills like using clean needles and condoms.

Pathfinder’s HIV prevention programs reach vulnerable groups in Botswana, Brazil, Ethiopia, Ghana, India, Kenya, Mozambique, Nigeria, South Africa, Tanzania, and Uganda.

Jussara Rodrigues Santana

A 17-year-old client of the Pathfinder-supported Harm-Reduction for Drug Users Project in Salvador, Brazil.

I never went to school. When I was a child I just wanted to play and have fun with my group. I lived out in the streets and didn’t take care of my life. These days I’m working selling acarajé (white-bean dough fried in palm oil) in the streets, but only at night and on weekends. There’s not much to do here, not many options, which is why it’s difficult to get out of drugs.

When I first saw the harm reduction van coming to the neighborhood, I didn’t come right away. I looked from a distance, and when I saw the women showing a chart about sexually transmitted diseases, I got closer to see better. I think this project has helped me to avoid bad diseases. Before, I didn’t care about these things, really. I only knew a little about AIDS from television. After I learned about sexually transmitted diseases, I started to take better care of myself. The people at the project referred me to a doctor. I always use condoms now, which I get for free from the project. My girlfriends and I watch each other to see if any of us get soft and start doing things that are unsafe. I was able to stop using crack, and it’s been almost five months. I would like to get out of drugs completely, study, get a job, and have a better life.
The best strategies for preventing HIV transmission among vulnerable groups like adolescents, sex workers and their clients, truck drivers, and injecting drug users include convincing people to be monogamous and to use condoms consistently.
Preventing Mother-to-Child Transmission of HIV

Over the past year, 600,000 infants were infected with HIV at birth, and 90 percent of these infections occurred in sub-Saharan Africa. Women with HIV/AIDS can transmit the disease to their children during pregnancy, delivery, or breastfeeding. While mother-to-child transmission of HIV has been all but eliminated in developed countries, due to the poor state of health care services in the developing world, between 25 and 30 percent of HIV-positive mothers in poor countries infect their infants with the disease.

Pathfinder’s comprehensive approach to preventing mother-to-child transmission improves the quality of prenatal, delivery, and postnatal care to minimize risk at all stages. Pathfinder prevents mother-to-child transmission by providing women with voluntary HIV counseling and testing, access to organized support services within the community, comprehensive antenatal care, counseling on safer infant feeding options, and antiretroviral therapy, if available. Pathfinder also trains health care workers to provide quality labor and delivery care that minimizes the risk that a baby will be exposed to HIV at birth. For HIV-positive women who choose to breastfeed their newborns, Pathfinder-trained community workers offer home-based support of exclusive, short-term breastfeeding to minimize the risk of transmission. Safeguarding breastfeeding is important because breastmilk protects babies from deadly childhood diseases, and if a large number of women were to give up the practice, more infants would die from childhood illnesses than would have been infected with HIV.

Pathfinder’s approach also focuses on supporting the mother, and not just on ensuring the survival of the baby. Additional elements of support for HIV-positive mothers may include micro-credit and business skills training to help women improve their economic status, as well as nutrition counseling and nutritional support.

In 2002, Pathfinder launched a groundbreaking program to prevent mother-to-child transmission in Kenya, a country where more than 1.4 million adult women are living with HIV.

Most people here are aware of HIV/AIDS, but the awareness is not deep enough to facilitate positive change in behavior. People are not able to connect their risky behaviors with HIV infection, and by the time they do, it is already too late. As a result, AIDS is disrupting farm productivity in the area because so many adults are sick. Many children are being left orphans, and babies are being born with the disease.

Two out of every ten pregnant women who visit the clinic here know that they are infected with HIV. The actual number is much higher since very few have been tested. Many women cannot figure out how a mother transmits the virus to her baby. They think that the mother’s blood is mixed with the baby’s during pregnancy, hence the infection. Others think that a baby can only be infected if the mother has sex with an infected man while pregnant. These distortions make my work very complicated.

The project is still new, but I expect that our efforts to prevent mother-to-child transmission will make a difference in the community. The community will become aware that a mother can transmit the virus to her baby during feeding. Mothers will see the need to attend the antenatal clinic in order to get proper services, detect any risks, and learn their HIV status. These services also will provide a good entry point for prevention, care, and support services that target not only the women, but their partners and families as well.

Rose Nelly Ochieng

A community nurse working to prevent mother-to-child transmission of HIV in the Uasin Gishu District of Kenya.
Over the past year, 600,000 infants were infected with HIV at birth, and 90 percent of these infections occurred in sub-Saharan Africa.
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In 1998, Pathfinder embarked on the first major fundraising campaign in its history. The Fund for the Future is a ten-year effort to raise $50 million to:

- Support program growth today
- Launch new country programs in the future
- Build an endowment for the future security of Pathfinder

The response to this effort has been strong and heartfelt. As of June 30, 2002, the campaign has raised more than $38.5 million.
Legacies for Pathfinder International

With the promise of vital support for Pathfinder’s programs in years to come, planned and deferred gifts provide a foundation for Pathfinder’s future work. In recognition of the importance of these gifts, Pathfinder has formed an honorary group titled Pathfinders: Legacies for Pathfinder International.

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Paula K. Ivey & Snowden Henry  
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Robert T. Kean  
Marilyn Keegan  
Barbara O. Keeton  
R. K. Keiser  
Steven Keleti  
Sara Altick Keller & Jack Keller  
Winifred M. Kelley  
Katherine A. Kendall  
Dr. Patricia C. Kensch  
Diane Kercheck  
Chelse R. Kesselheim  
Morris S. Kessler  
Rita S. Kester & W. Daniel Horton  
Peg Keyle  
Catharine S. Kidd  
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Ray King  
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Keith Kohen & Elizabeth H. Koh  
Marjorie Kolding & Ralph Kolding  
Md  
Cynthia A. Kondon  
Dr. John J. Kondon  
Annellese F. Korner-Kalman  
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Working Assets Matching Gifts Program

This list reflects gifts received between July 1, 2001 and June 30, 2002.
Chief Financial Officer’s Report

Pathfinder International depends upon the interest and contributions of individuals, corporations, and foundations to support our service programs and advocacy, and to supplement governmental funding where restrictions or match requirements make it necessary. Your support is critical to our continued success, and we thank you for it.

We are happy to report that we have received our first grant from the Centers for Disease Control and Prevention to fund our efforts to prevent mother-to-child transmission of HIV/AIDS in Kenya. This demonstrates our ongoing commitment to diversifying our funding sources, whether private or governmental. We are determined to make each dollar count, and we seek to leverage every available resource. As illustrated here, our financial priority is to support direct services and field operations with a minimum of administrative overhead.

The decentralization of project management ensures that effective internal controls operate in the field, close to the action. Pathfinder strives to build strong financial controls at home and abroad as we forge effective and enduring partnerships with local institutions.

The financial information presented here is drawn from the unaudited financial statements of Pathfinder International, which were prepared in conformity with generally accepted accounting principles. We expect to receive the unqualified opinion of our independent public accountants, PricewaterhouseCoopers, LLP, in their report to the Board of Directors to be issued in late October. Copies of the audited financial statements will be available after that time upon written request to our headquarters office.

Beverly Morris Armstrong,
Vice President, Finance and Administration

Pathfinder International Condensed Financial Information
for the year ended June 30, 2002

<table>
<thead>
<tr>
<th>OPERATING SUPPORT AND REVENUE:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions</td>
<td>3,981,015</td>
</tr>
<tr>
<td>Contributions in-kind</td>
<td>2,364,703</td>
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<tr>
<td>Grants and contracts</td>
<td>43,226,898</td>
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<tr>
<td>Other investment income</td>
<td>100,000</td>
</tr>
<tr>
<td><strong>Total operating support and revenue</strong></td>
<td><strong>49,672,616</strong></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>OPERATING EXPENSES AND CHANGES IN NET ASSETS:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Program services</td>
<td>40,552,323</td>
</tr>
<tr>
<td>Fundraising</td>
<td>820,959</td>
</tr>
<tr>
<td>Management and general</td>
<td>6,518,920</td>
</tr>
<tr>
<td><strong>Total operating expenses</strong></td>
<td><strong>47,892,202</strong></td>
</tr>
<tr>
<td>Surplus of operating support and revenue over operating expenses</td>
<td>1,780,414</td>
</tr>
<tr>
<td>Non-operating activity</td>
<td>(728,598)</td>
</tr>
<tr>
<td><strong>Increase in net assets</strong></td>
<td><strong>1,051,816</strong></td>
</tr>
<tr>
<td>Net assets, beginning of year</td>
<td>13,243,334</td>
</tr>
<tr>
<td><strong>Net assets, end of year</strong></td>
<td><strong>14,295,150</strong></td>
</tr>
</tbody>
</table>
**Fiscal Year 2002 Total Expenses**

- **Management and General**
  - $6,518,920
  - 14%

- **Program Services (Direct Support, Technical Assistance, and Subgrants)**
  - $40,552,323
  - 84%

- **Fundraising**
  - $820,959
  - 2%

**Fiscal Year 2002 Total Expenses by Region**

- **Asia**
  - 30%
- **Africa**
  - 28%
- **Near East**
  - 27%
- **Latin America**
  - 15%
Pathfinder Welcomes New Board Chair

In fiscal year 2002, Mary B. Hewlett was appointed Chair of the Board of Directors. Ms. Hewlett is a long-time advocate for reproductive rights who has proved to be a crucial member of Pathfinder’s board during her 18-year tenure. Ms. Hewlett served as president of the Boston Children’s Service Association for over a decade. She continues to serve on the board of The Home for Little Wanderers, an agency created in 1999 by the merger of The New England Home for Little Wanderers and Boston Children’s Services, one of the oldest child welfare agencies in the nation.

Pathfinder also thanks outgoing Board Chair Paul H. Todd, Jr. for his strong leadership in determining Pathfinder’s strategic direction. Mr. Todd has an extensive history in supporting family planning issues. As a U.S. Congressman from Michigan in 1965, he wrote the first legislation authorizing the use of U.S. funds for international family planning services. Mr. Todd now serves as an emeritus director of Pathfinder’s board.

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Friend of Pathfinder Mary Helen Thompson and Hank Foster

David Burns; Frances Moseley, Vice President of Resource Development; and Dr. Oladapo Ladipo

Pathfinder International’s Board of Directors
Traveller, there is no path. Paths are made by walking.

Caminante, no hay camino, se hace camino al andar.

– Antonio Machado