



Seed
GLOBAL HEALTH



2023–2024



Annual Report



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Overview

In 2024, stark health disparities persist worldwide, and over half the world—**4.5 billion people**—still do not have access to essential health services.

At Seed, when we think of these 4.5 billion people, we envision first-time mothers facing childbirth complications, children affected by rising malaria rates due to climate change, and elderly grandparents coping with heart disease and diabetes.

The countries of sub-Saharan Africa manage **24 percent of our global disease burden with just three percent of our global health workforce**. And by 2030, Africa’s health worker shortage is projected by [WHO](#) to surpass six million.

Health workers save lives. Yet since 2010, less than seven percent of global health funding has been invested in the health workforce—the people who power our health systems.

At Seed Global Health, we refuse to accept this status quo. For more than ten years, governments have invited us to work with them to strengthen the heart of our health systems—the nurses, midwives, and doctors who provide life-saving care for our families and communities.

Over the past year, we leveraged our track record, built on our strengths, and deepened our commitment to long-term investment in the health workforce as the most effective way to close the equity gap in health care, address the nexus of health and climate change, and guard against future pandemics.



Vision and Mission

Our vision is a **just, equitable, and healthy world**.

Our mission is to **expand access to quality care and improve health outcomes for all**.



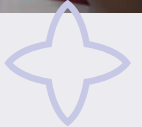
Our Approach

Our approach is context-driven and country-led.

We partner with governments, health professional schools, hospitals, and clinics to educate health workers, strengthen the quality of health services, and support policies that enable health professionals to deliver high-quality services to those in need. To date, we've trained more than 42,000 health workers who work in health facilities serving over 76 million people.

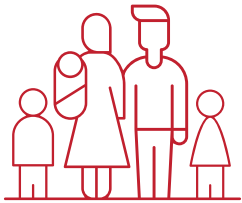
We partner and invest deeply in the health workforce and health systems in four countries: **Malawi, Sierra Leone, Uganda, and Zambia**. We educate and train health workers across the cadres and specialties that are most needed, strengthen the quality of care in our partner health facilities, and improve the national and global policy environments to support health workers.

As one of just a few organizations dedicated to supporting and training Africa's next generation of skilled health professionals, we focus on preparing doctors, nurses, and midwives to deliver critical care within their communities. We work across specialties spanning primary health care, emergency care, and reproductive, maternal, newborn, and child health, driven by the priorities of our partners.



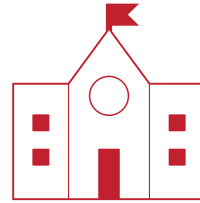
To date, we've trained more than **42,000 health workers** who work in health facilities serving over **76 million people**.

Seed Global Health by the Numbers



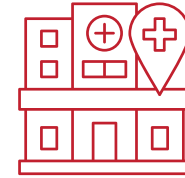
76M

Estimated population served
by our partner sites



11

Academic training sites



7

Clinical training sites



42,000

Health workers trained



75%

Seed-supported visiting faculty are
from neighboring countries in Africa

How We Work

Seed Global Health focuses on health workers because we believe that *people* are the leading levers of change in a health system.

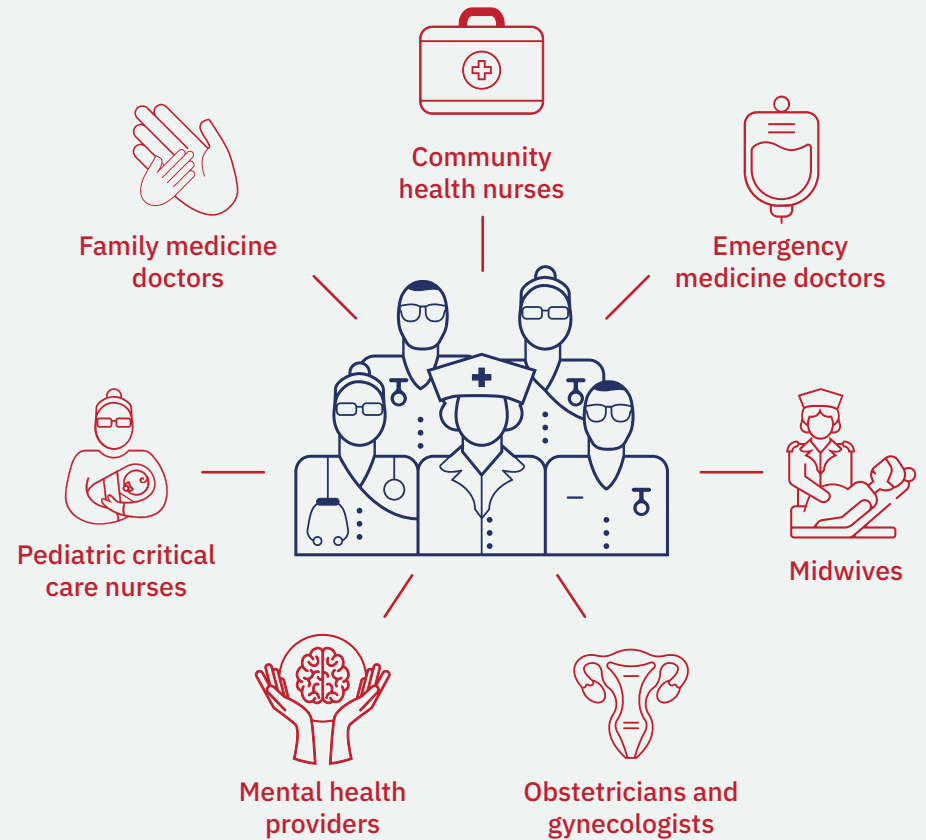
It's the people who identify infectious disease outbreaks when they first occur, use innovations in medical technology to diagnose disease, detect when medicines and supplies in a clinic are low, and hang the bag of blood when a woman is experiencing postpartum hemorrhage.

Investing in health workers is one of the most versatile and impactful ways to invest in health systems—they are essential to addressing the most pressing challenges we face, from climate change and increasing pandemics, to growing rates of non-communicable diseases and stubbornly high maternal mortality rates.



Health Worker Cadres We Train

Seed brings tailored resources—technical, human, financial, and material—to catalyze the efforts of our in-country partners and drive results. Seed recruits experienced doctors, nurses, and midwives from around the world who embed with our partner institutions for at least one year. Known as Seed “educators,” they partner with health professional schools to develop and strengthen curricula, and provide training and mentorship to student doctors, nurses, and midwives. Seed focuses its efforts on these health worker cadres—doctors, nurses, and midwives—because they provide definitive patient care and work at a critical part of the referral chain that is often overlooked.





Strengthening Emergency Care in Uganda



THE CHALLENGE

Uganda, home to 49 million people and the largest number of refugees in Africa, has a health workforce overstretched by the COVID-19 pandemic, climate shocks, food insecurity, and disease outbreaks like Ebola. The burden of emergency care is worsened by road traffic accidents, which contribute to 48% of trauma cases and a significant proportion of deaths in the country. However, there are only 13 actively practicing emergency doctors in the public health system nationwide and just five percent of hospitals can provide adequate emergency services.

There is a growing body of evidence showing that emergency care is a cost-effective means of saving lives and offers an important entry point to healthcare. This is especially true in communities with barriers to access, where people may seek care only when acutely ill or injured. It is estimated that the global burden of disease that can be addressed by emergency care is a staggering **54% of the annual deaths in low- and middle-income countries.**

In a country of 49 million people, Uganda's public health system has only 13 actively practicing emergency doctors nationwide.

SEED'S RESPONSE

Since 2018, Seed has partnered with the Ugandan government to strengthen the capacity of universities, hospitals, and the health workforce to support the Ministry of Health's strategies to ensure sustainable and resilient emergency care systems.

Together, we created two post-graduate Master of Medicine (MMed) emergency medicine degree programs at Mbarara University of Science and Technology (MUST) and Makerere University, currently the only two emergency medicine programs in the country. To date, MUST and Makerere have graduated 20 emergency medicine doctors, many of whom are practicing in Uganda and the broader region, with many more in the pipeline. Several graduates also have been trained as faculty, which will sustain the MMed programs in the future.

Additionally, Seed and our partners are training hospital-based rapid response teams across the country. Also known as ReACT teams, they are made up of in-service health workers, including doctors, nurses, midwives, anesthetists, clinical officers, and more. The teams are trained to stabilize and manage a range of emergencies, including obstetric emergencies, both within and outside of hospital emergency departments. Seed trains ReACT teams in two ways: 1) virtually through an evidence-based online training platform known as ECHO, and 2) in-person through skills



A ReACT team in Katakwi, Eastern Uganda

courses, including the WHO basic emergency care, basic life support, and trauma courses. The multidisciplinary ReACT teams are trained to prioritize teamwork, emphasize each team member's unique contributions, and ensure the availability of a well-equipped and well-trained team when an emergency arises.

To date, Seed and our partners have **trained more than 11,000 Ugandan health workers** in emergency medicine via the ECHO platform, several of whom are working in emergency response teams at **19 hospitals** across the country.

The Ministry of Health plans to scale ReACT teams to all high-volume facilities in Uganda as resources become available.

“
[Seed is] the greatest partner we have, touching the real lives of people. You touch where it matters most, multiplying that investment several times. Improvement in emergency care saves lives across Uganda: obstetric emergencies, pediatric emergencies, road traffic injuries, and so much more.”

Dr. John Baptist Waniaye,
Commissioner, Emergency Medical Services, Ministry of Health, Uganda





A CLOSER LOOK

Emergency Medicine Mentorship in Uganda

The Emergency Medical Services (EMS) ECHO is a virtual learning platform that connects frontline health workers to subject matter experts to share knowledge, discuss complex cases, and master key skills in the management of emergency patients. The EMS ECHO curriculum was developed by Ugandan emergency care experts in line with the African Emergency Medicine Handbook. Seed played a leading role in the creation and the implementation of the EMS ECHO in Uganda, which is the first virtual learning platform in Africa focused on emergency care.



A resident from Mbarara University conducting a demonstration during an ECHO session



Preceptors role-playing during one of the ECHO sessions

Every two weeks, Seed convenes emergency medicine experts from academic institutions, professional associations, emergency care partners, and the Uganda Ministry of Health at a central hub, where they meet virtually with ECHO-registered health providers. The sessions focus on skills building and practical demonstrations.

To complement the virtual sessions, Seed holds in-person training workshops at lower-level health facilities in rural areas where internet access is limited. The professional councils in Uganda, including the Uganda Medical and Dental Practitioners Council and the Uganda Nurses and Midwives Council, have accredited EMS ECHO as a continuous professional development provider. Courses taken through EMS ECHO count towards renewal of practicing licenses.

Introducing ECHO in Zambia

Building on the success of EMS ECHO in Uganda, Seed is also now using the platform with our midwifery education partners in Zambia. ECHO sessions are conducted weekly at Lusaka College of Nursing and Midwifery, with more than 50 virtual participants, including both students and preceptors. Participants are learning a variety of maternal health life-saving techniques, including how to interpret vital signs using maternal early warning signs (MEWS) score charts. MEWS score charts facilitate the timely recognition, diagnosis, and treatment of pregnant women experiencing complications, thus avoiding major morbidity and mortality.





A CLOSER LOOK

Graduates are Bringing Emergency Medicine Home

Through the support of Seed Global Health, Dr. Joseph Emuron completed a Master of Medicine degree in emergency medicine from Uganda's Mbarara University of Science and Technology (MUST). One of just a few physicians in Uganda with an advanced degree in emergency medicine, Dr. Emuron received several prestigious job offers upon graduation.

"Despite the allure of well-organized healthcare settings, I decided to return to Katakwi General Hospital in the Eastern region, where my professional journey had started," said Dr. Emuron.

Katakwi General Hospital serves four small districts in a relatively remote and rural area of Uganda and is located more than 60 kilometers from the nearest regional referral hospital.

"Enabling universal access to high-quality emergency care not only saves lives, but also reduces unnecessary morbidity. My choice to graduate from MUST and return to Katakwi reflects my unwavering dedication to advancing emergency care at the grassroots level and fostering health equity," said Dr. Emuron.

In Katakwi, Dr. Emuron is using his MMed to reinvigorate and strengthen the hospital's emergency medicine services. "Eager to make a meaningful impact, I conducted a baseline assessment of the hospital's emergency care capacity. This assessment revealed critical gaps, including a lack of dedicated emergency management space, limited knowledge and skills in emergency care, and delayed and uncoordinated responses to emergencies," he said.

"[To solve these challenges], I am re-establishing an emergency room within the [hospital], creating a functional triage system, upgrading the resuscitation room, ensuring ambulance access, supporting the delivery of continuous medical education sessions for staff, and establishing a rapid response team."

With a growing pipeline of skilled emergency medicine physicians, such as Dr. Emuron, and a growing network of well-trained and well-resourced emergency response teams at hospitals and high-volume health facilities, Uganda's emergency medicine capabilities are getting stronger every day.



Dr. Joseph Emuron, who completed a Master of Medicine degree in emergency medicine supported by Seed Global Health, working at Katakwi General Hospital



Advancing Reproductive, Maternal, Newborn and Child Health



THE CHALLENGE

Though access to health care has improved and more women in Africa are giving birth in health facilities than ever before, maternal and newborn mortality rates across the region remain unacceptably high. **A woman giving birth in Malawi faces a mortality risk 28 times higher than a woman in the United Kingdom.** Studies show that the presence of a well-trained midwife can prevent 65% of all maternal and newborn deaths and stillbirths.

*Midwives can deliver about **90%** of essential sexual, reproductive, maternal, newborn, and adolescent health interventions across a person's life, yet they account for **less than 10%** of the global workforce. The shortage of midwives poses a significant challenge to maternal and newborn health outcomes globally.*

SEED'S RESPONSE

Over 70% of Seed's partnerships focus on improving the quality of care for women and children. Seed strengthens the pipeline of midwives, nurses, obstetricians, and pediatricians who advance access to respectful, high-quality care for the 14.5 million expecting mothers and their children across the four countries where we work. Working across **ten academic partnerships and nine regional and district hospitals and health centers**, Seed and our partners promote respectful maternity care: the idea that every woman has the right to experience dignified, supportive care throughout her pregnancy, labor, delivery, and postnatal periods.

Seed's approach integrates evidence-based, patient-centered clinical training with learner-centered teaching and mentoring practices. **In Zambia**, this approach was put into action when findings from a midwifery needs

assessment highlighted a lack of student supervision and mentorship in maternity wards as a critical gap in care. This gap aligned with the Ministry of Health's priority to implement a nationwide preceptorship training program. Seed and our partners at Lusaka College of Nursing and Midwifery launched the preceptor program in January 2023, supporting an increase in the number of qualified, trained preceptors in Zambia to 60. These preceptors, spread across seven hospitals and clinics in Lusaka, now provide training to hundreds of midwifery students annually, serving Lusaka's full catchment area of over one million women in hospitals that deliver nearly 38,000 newborns every year. Seed Global Health is working with the Ministry of Health to scale the preceptorship program beyond the current numbers as one part of Seed's larger growth plan for midwifery training in Zambia.



LUCON pre-service students performing a return demonstration on breech delivery at the Matero labor ward skills corner with help from Seed Educator Rhiannon Jarratt



Students' follow-on practice demonstration of neonatal resuscitation as per preceptor demonstration

The Power of Preceptors

Preceptors are experienced doctors, nurses, and midwives who provide supervision during clinical practice and facilitate the application of theory to practice for students. While preceptors are an important component of clinical training in higher-resourced health systems, they are less common in the countries where Seed works. We train in-service doctors, nurses, and midwives in competency-based clinical education principles. Once trained, these preceptors coach and mentor students to apply their classroom knowledge and skills in clinical settings.



A CLOSER LOOK

Transforming Maternal Care Through Midwifery



Preceptorship training on estimated blood loss and postpartum hemorrhage management

In Sierra Leone, the maternal mortality rate remains high, even though more than 86% of births are attended by skilled birth attendants. The country faces challenges delivering high-quality health services, in part due to shortages of health providers. Sierra Leone has only one doctor, and seven nurses and midwives, per 10,000 people.

Recognizing this, in 2019, the Ministry of Health invited Seed Global Health to partner with midwifery schools, hospitals, and other local partners to increase the number of trained midwives and improve the quality of maternal and newborn care.

In just three years, we are seeing our collective impact—from the quality of care patients are receiving, to the teamwork we’re helping to build on maternity wards, to the national policies we’re developing with and for midwives. In April 2024, Sierra Leone’s two schools of midwifery graduated nearly 160 new midwives, with Seed as the leading training partner. This effort is part of the government’s push to reduce maternal mortality by educating and training 4,000 midwives by 2030.

At Makeni Regional Hospital, where Seed is the leading training partner in the maternity unit, we continue to see a steady decrease in the number of maternal deaths. Between January 2023 and December 2023, there was a 60% drop in the number of absolute maternal deaths year-over-year at Makeni Regional Hospital. In Bo, the second largest city in Sierra Leone, there was a 55% drop in the number of absolute maternal deaths.

Key accomplishments this year included the procurement, assembly, and use of postpartum kits in the maternity units of Makeni Regional Hospital and Bo Government Hospital to reduce time to treatment in obstetric emergencies, as well as the re-establishment of a functioning triage system at Bo Government Hospital’s maternity unit.

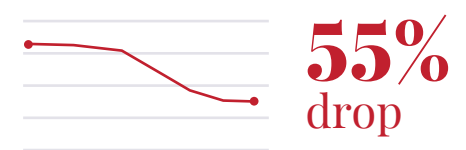
Drop in Absolute Maternal Deaths

January 2023 > December 2023

MAKENI REGIONAL HOSPITAL



BO GOVERNMENT HOSPITAL



In Uganda, the Seed team celebrated Mbale Regional Referral Hospital—a Seed clinical partner site—being named the top performing hospital in Uganda by the Ministry of Health. Seed’s partnership with Mbale Regional Referral Hospital and Busitema University stands out due to our comprehensive support for both the maternity and pediatric units. Seed trains in-service health care workers to provide higher quality care through preceptorship training, quality improvement projects, and ensuring the hospital is well supplied and equipped to treat deliver excellent patient care.

The Ministry of Health’s Commissioner for Maternal Health has publicly acknowledged Seed’s contribution to improving the quality of care at Mbale Regional Referral Hospital as well as the reduction in maternal deaths in the maternity unit through quality improvement initiatives. Also at Busitema University, Seed and partners celebrated the graduation of the program’s first-ever class of 5 pediatricians.



A Mbale College of Health Sciences student participates in a simulation exercise



Seed Global Health
has trained more than
10,000
midwives,
pediatricians,
and OB/GYNs
since 2012.

“

We can see change in the way we are training nursing and midwifery students—but you can’t have real change unless you have partners like Seed Global Health. They are here to help us so we can improve in the way we are training our staff and also training other human resources to offer good service delivery.”

Dr Liyuma Medical Superintendent, Head of Matero Level One Hospital, Lusaka, Zambia



A CLOSER LOOK

Combating Maternal and Child Mortality in Malawi

Malawi has made significant progress in improving health outcomes and is one of the few sub-Saharan African countries to have achieved Millennium Development Goal 4 for child survival by 2015. Despite this success, there are still critical gaps in meeting the growing health needs of the population, and there are severe shortages of trained health professionals across all cadres throughout the country. In addition to a high number of obstetric emergencies, Malawi's health system continues to face high morbidity and mortality rates among children.

In partnership with Kamuzu University of Health Sciences (KUHeS), Seed not only launched a new pediatric critical care nursing specialty program, but also enabled the establishment of a new Master of Medicine degree program, which included supporting a revision of the pediatric and child health curriculum.

Seed also co-led the development of a new skills lab at Queen Elizabeth Central Hospital, which will allow students to receive on-the-spot training as they do their rounds.

Seed is accompanying the Ministry of Health, the District Health Office of Blantyre, and KUHeS in operationalizing the country's first-ever midwifery-led ward, housed at Limbe Health Center in Blantyre. At the ward, Seed has worked together with our academic and clinical partners to improve the quality of care for the leading causes of maternal and neonatal deaths. One way that Seed has accelerated these efforts is through the identification and implementation of multiple quality improvement projects to improve the safety, effectiveness, and experience of care at the ward to target critical issues such as access to ultrasounds and distribution of vaccines for pregnant mothers.

In partnership with Kamuzu University of Health Sciences (KUHeS), Seed launched a new pediatric critical care nursing specialty program to support the Ministry of Health's plan to provide quality care to critically ill children by training 50 critical care nurse practitioners.



Mirriam Shaba, a Seed midwife preceptor, presenting findings from maternal and child health quality improvement projects at the Midwifery Led Ward at Limbe Health Center



Investing in Primary Health Care: An Evidence-Based Approach



THE CHALLENGE

Research shows that countries with strong primary health care systems centered on family medicine doctors, have better patient outcomes, increased patient satisfaction, and lower costs. Investing in primary health care is more essential now than ever as non-communicable diseases, such as diabetes, heart disease, lung disease, and cancer are on the rise across sub-Saharan Africa, and have become the single leading contributor to mortality rates.

Family medicine doctors are an incredibly versatile investment for health systems facing human and financial resource challenges. A family medicine doctor is trained to diagnose and treat about 70 percent of patient cases that might present in a community health clinic, and to refer only the more advanced cases to specialists in referral hospitals. Family medicine doctors provide comprehensive care close to patients' homes and create greater efficiency in overstretched health systems.

Diabetes, heart disease, lung disease, and cancer are on the rise across sub-Saharan Africa.

SEED'S RESPONSE

Upon invitation by their ministries of health, Seed has worked with universities, hospitals, and public health facilities in Malawi and Zambia to create and develop the country's first-ever family medicine programs at the Kamuzu University of Health Sciences and the University of Zambia College of Public Health, respectively.

At the University of Zambia, Seed and partners have supported the establishment and rapid growth of a Master of Medicine degree program in family medicine. Since the program's inception, UNZA has seen a sharp increase in enrollment in the master's program from two students in 2019 to 30 students in 2024. Additionally, UNZA has created two full-time faculty positions—staffed by two of the first graduates of the family medicine master's degree program—and is exploring creating two additional part-time faculty positions. This is an incredibly promising step toward the program becoming self-sustaining.



Doctors and medical students at Matero doing a return demonstration of the CPR drill



UNZA family medicine faculty and students attend first-year orientation in January 2024

“

We want to appreciate the whole team from Seed Global Health...**We have met the Ministry of Health goal for The University of Zambia to have 20 family medicine physicians in training.** In 2019 we sat with Seed Global Health and what we are seeing today...[are] the fruits of the work plan we made. We would like to extend our heartfelt gratitude as a School of Public Health to the Seed Global Health team for continuously supporting this program that you have developed in partnership with us. You are not only supporting the teaching in the program, but also the facilities which are appropriate for the learners.”

Dr Hikabasa Halwiindi, Dean, The University of Zambia School of Public Health





A CLOSER LOOK

Primary Health Care in Malawi

In Malawi, Seed has been working with the government and health institutions to build a primary health care system centered on integrated care and family medicine to better reach Malawi's predominantly rural population. In partnership with Kamuzu University of Health Sciences (KUHeS), Seed trains family medicine doctors, who conduct their clinical practice rotations at the Mangochi District Hospital in Malawi's southern region, which serves a population of more than 1.2 million people. Family medicine doctors play an essential role in providing a wide variety of services for patients of all ages and genders in near and distant communities, creating a strong and integrated web of clinicians throughout the country.

The KUHeS family medicine program in Malawi has graduated eight students. The Ministry of Health aims to place two family medicine doctors in each of Malawi's 29 district health offices. This growing pipeline of family medicine doctors will strengthen primary health care delivery in communities around the country.



Family medicine students at Kamuzu University of Health Sciences (KUHeS) present on their clinical partnership work

The Ministry of Health has also asked Seed to support efforts to take its newly-minted National Health Sector Strategic Plan III—designed around a novel One Plan, One Budget, One Report approach—from concept to reality by implementing its new proposed package of integrated health services for primary care in two pilot districts, and assessing how they do or do not meet patient needs. Learnings from this project will inform how Malawi can provide integrated, patient-centered primary health care services at scale. Additionally, Seed is partnering with Saint John of God College of Health Sciences and Hospital to advocate for mental health services to be fully integrated into the Ministry of Health's new strategic plan.

Seed is partnering with Malawi's Ministry of Health to determine how best to scale integrated primary health care across the country.





Building Resilient Health Systems in the Face of Climate Change



THE CHALLENGE

Strong health systems are countries' main line of defense against pandemics and other health emergencies, including the growing threat of climate change. A skilled health workforce can identify infectious disease outbreaks when they first occur and knows best what interventions and investments are needed to save the most lives in the fastest way possible.

According to the World Health Organization, 1 in 4 deaths are already attributable to preventable environmental causes. A recent World Economic Forum report shows that climate change is likely to cause up to an additional 14.5M deaths by 2050. Due to the rapidly evolving nature of this crisis and delays in research and analysis, this data is likely a severe underestimate of the reality.

Climate change is predicted to cause up to an additional 14.5M deaths by 2050.

SEED'S RESPONSE

For the majority of frontline health workers, the emergence of climate sensitive diseases is not in the distant future: it's something their patients are experiencing right now. In all four of Seed's partner countries, Seed addresses this challenge by training and supporting the next generation of professional health workers and policy leaders—both to respond in case of climate-driven emergencies like floods, droughts, and pandemics as well as to build long-term climate-resilient policies and systems. Although the approach to managing climate change's impact on health systems will be unique in each country, the growing threats are clear: strengthening climate-resilient health systems is essential to saving and improving lives.

In all four of Seed's partner countries, as climate change drives increasing rates of floods, droughts, and pandemics, Seed is prepared to support both the immediate and long-term health effects.



A CLOSER LOOK

Providing Support During Health Emergencies



The Seed Global Health team in Zambia presents personal protective equipment, disinfectants and other cholera prevention materials to cholera treatment centers in Lusaka

Seed joined with partners to respond and provide essential health services in the wake of Malawi's worst cholera outbreak in history, a direct result of cyclones Ana and Freddy and Tropical Storm Gombe. Seed's support included training nearly 200 health workers on cholera case management, providing generator fuel and a vehicle to transport patients and supplies, and ensuring the continuation of routine health services.

In Zambia, Seed and partners, specifically family medicine faculty and recent graduates, were called upon by the Ministry of Health to treat communities and support health workers battling the country's worst cholera outbreak in decades. Alongside the surge in cholera cases, the Ministry of Health also asked Seed to provide technical assistance to formulate a response plan for a severe drought affecting Zambia, placing millions at high-risk of health complications and leading to an increase in malaria cases.

Our Global Reach

Together with our partners, Seed Global Health is addressing an urgent need for bold, long-term investments that will save lives today while educating and expanding tomorrow's global health workforce.

We leverage our position as a globally-engaged NGO to advocate for more funding and investments for everyone working on these issues—not just Seed. We connect our country-level partners with global decision makers, leading international training institutions, donors and philanthropists, and media, enabling them to advocate for and make progress on their health priorities.

In addition to deepening our work at the country-level, Seed is advancing a global agenda to support and invest in resilient health systems as our CEO Dr. Vanessa Kerry carries the role of **Special Envoy for Climate Change and Health at the World Health Organization**. We are leveraging this platform to advocate for more recognition of and investment in strong health systems and the health workforce for mitigation, adaptation and climate resilience.

Seed continues to champion investing in a robust global health workforce. Last year, we made substantial contributions to advancing this cause. Seed was an organizing partner in the inaugural Health Day at UN's 28th annual climate conference (COP28), supporting our partner countries' ministries of health to participate in a high-level climate and health dialogue, fostering dialogue and action to meet the adaptation and resilience challenges from climate change. Seed also advocated for countries to sign onto the COP28 UAE Declaration on Climate and Health, endorsing wide recognition that the **climate crisis is a health crisis**. This recognition will mobilize stronger, more pragmatic, and more effective action to improve health, strengthen economic growth, reduce equity gaps, protect security, and ensure we create a more balanced and sustainable future.

Moreover, our commitment to advocacy remains steadfast. Our team members published twelve peer-reviewed articles in more than nine academic and research journals, spanning various fields of public health and healthcare, enriching their expertise to better support our mission. Through these efforts, Seed continues to amplify its voice and influence, driving forward the imperative of a fit-for-purpose health workforce on a global scale.

“

When people's lives are at stake, there is no such thing as being too ambitious. Donors, governments, and policymakers need to **collaborate across sectors** to meaningfully target the social and economic determinants of health.”

Dr. Vanessa Kerry, CEO
quoted in Think Global Health

Seed in
the Media



THE LANCET



STAT



Think Global Health

Chicago Tribune

Newsweek

The Daily Telegraph



Our Team

Seed Global Health is a people-centered organization: to achieve our mission, we must put our people—our dedicated and talented staff—first. We are a dynamic group of doctors, nurses, midwives, social scientists, public health leaders, drivers, evaluators, communicators, finance experts, and administrators who hail from more than **15 countries**. This year, the Seed team grew to **63 staff**, and also celebrated the addition of our first chief operating officer, Andrew Musoke, and our new chief program and innovation officer, Martin Msukwa.

We believe that our strength and ability to challenge the status quo is rooted in the diversity of our experiences and perspectives; in our commitment to learn from each other, from our partners, and from the work we do together. Our strength also stems from the power of people to

upend and change systems and power structures that impede progress and drive. For the first time since the COVID-19 pandemic, Seed staff gathered together in Lusaka, Zambia in November 2023. The retreat brought together our dedicated team from across the globe to reconnect, reflect, and strategize for the future. This rare, but essential opportunity gave our team space to celebrate the past, recognize our achievements, and honor the resilience that has defined our organization. Importantly, it provided an opportunity to advance our [new strategic plan](#) and foster collaborative discussions and brainstorming sessions that enriched our vision for the years ahead. We departed Zambia with a renewed sense of purpose and direction to create a healthier, more resilient world for generations to come.

2023–24 Board of Trustees

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Letter from the CEO & COO

Dear Friends and Colleagues,

It is with pride and our deepest gratitude that we present Seed Global Health's 2023-2024 Annual Report to you—our community of supporters, collaborators, and champions.

Over the last year, Seed developed a new strategic plan to guide our efforts with our partners through 2030 and beyond. We simultaneously strengthened our team, expanded partnerships and programs, and **trained an additional 6,914 health workers**, who are on the frontline saving lives each and every day.

Against the backdrop of increased pressures that have challenged our work—the deadly effects of climate change, heightened geopolitical instability, immense need across our communities—the **Seed team has risen to the occasion to meet each new challenge** with momentum, strong work ethic, and compassion.

We will continue to support our partner countries—Malawi, Sierra Leone, Uganda, and Zambia—in their long-term, national goals to build a skilled health workforce who can

provide high quality patient care and save lives. We will continue to respond with resources and expertise when our ministry and institutional colleagues call on us: **addressing historic disease outbreaks, mobilizing equipment and supplies, offering strategic guidance, and advocating for global investment** into national plans. And we will engage our global community to invest in strong health systems and the health workers who can meet the accelerating challenges we face today to ensure better health for all.

None of this could have been accomplished without your commitment to Seed Global Health and to bettering health care and health equity for all. Together, we can ensure good health and its powerful impact is available to all. **Thank you for your support and collaboration.** We are endlessly grateful.

With warmest wishes,
Vanessa & Andrew



Vanessa Kerry, MD, MSc
CEO and Co-Founder

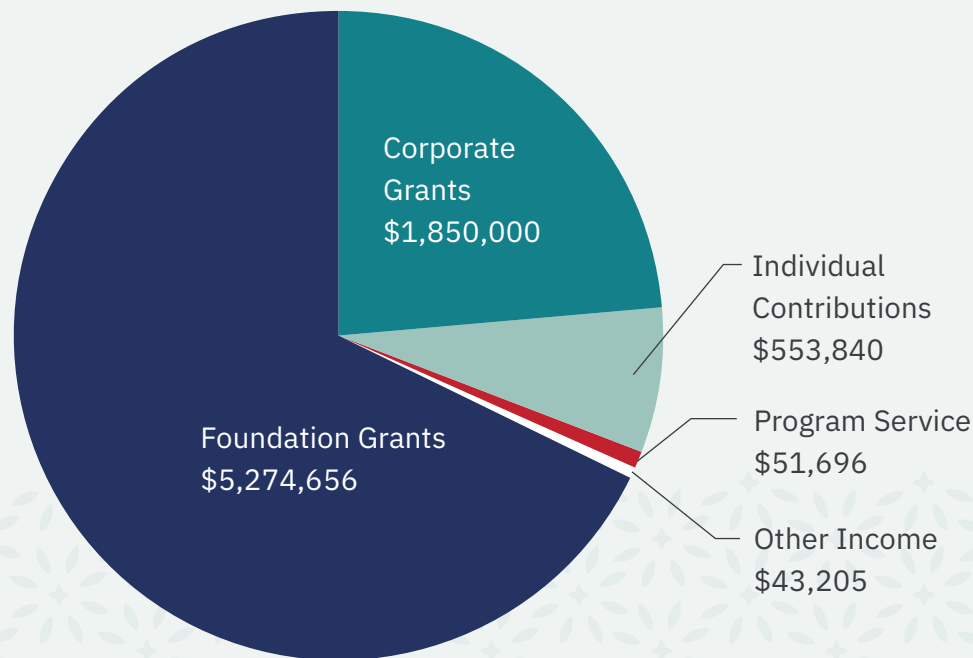


Andrew C. Musoke
Chief Operating Officer

Financials at a Glance

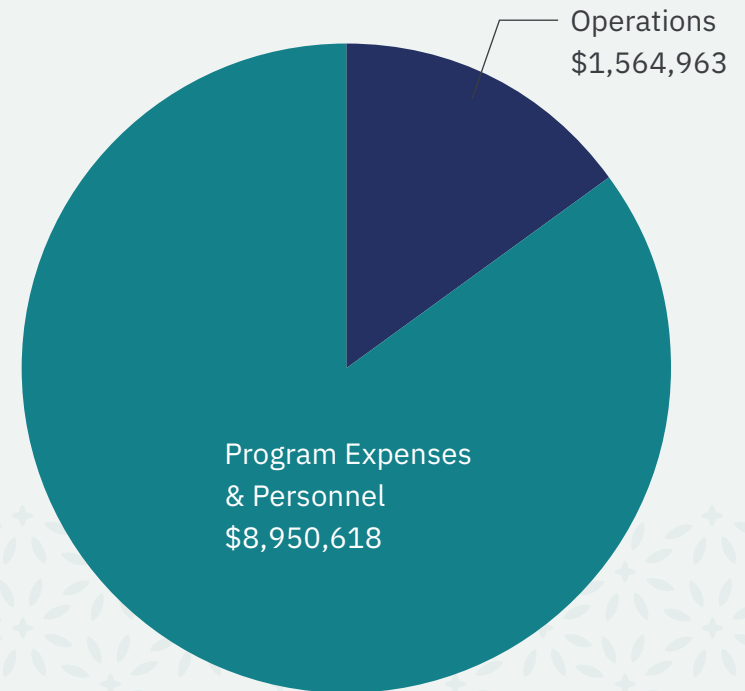
As a philanthropically-funded, mission-driven organization, Seed Global Health is committed to transparency and accountability. We are a 501(c)3 nonprofit, EIN 45-3064098 with a 4/4 Charity Navigator rating. Below, please find our estimated revenue and expenditures for fiscal year 2023 and our latest audited financials and 990s [here](#).¹

FY24 Revenue through March 31, 2024



Total Revenue²: \$7,773,397

FY24 Expenditures through March 31, 2024



Total Expenditures: \$10,515,581

¹ The FY24 figures provided in the charts are provisional and will be finalized at the time of Seed's FY24 annual audit in 2025.

² In accordance with GAAP standards for nonprofits, the full value of a multi-year award is recognized in the year it is awarded. As a result, in some years the annual revenue may appear lower than expenses, as Seed is utilizing funding from a previous year's revenue to fund its annual expense budget.

Our Programmatic Partners

Malawi

- Ministry of Health of Malawi
- GAIA Global Health
- Blantyre District Health Office—Limbe Health Centre
- Kamazu University of Health Sciences
- Mangochi District Hospital
- Mercy James Center for Pediatric Surgery and Intensive Care
- Nurses and Midwives Council of Malawi
- Queen Elizabeth Central Hospital
- St. John of God Hospitaler
- Zomba Mental Hospital



Uganda

- Ministry of Health of Uganda
- Ministry of Education and Sports
- Busitema University
- Lira University
- Makerere University
- Mbale Regional Referral Hospital
- Mulago National Referral Hospital
- Muni University
- MUST (Mbarara University of Science and Technology)
- National Council for Higher Education



Sierra Leone

- Ministry of Health of Sierra Leone
- Bo Government Hospital
- Makeni Regional Hospital
- School of Midwifery Bo
- School of Midwifery Makeni



Zambia

- Ministry of Health of Zambia
- Association of Family Physicians Zambia
- Lusaka College of Nursing
- Midwives Association of Zambia
- University of Zambia



Philanthropic Partners

Seed's work would not be possible without the loyal and generous philanthropic partners who support us. Our philanthropic partners include foundations, corporations, and generous individuals and families who believe in quality health care for all people. Together we share a common vision of a just, equitable, and healthy world.

Foundations and Corporate Supporters

- Anonymous (2)
- Abbott Fund
- Bancel Philanthropies
- Bank of America
- The Charles Engelhard Foundation
- CRI Foundation
- Drue and HJ Heinz II Foundation
- The ELMA Foundation
- Finepoint Capital
- Foundation S
- The Godley Family Foundation
- Heinz Family Foundation
- Hobson/Lucas Family Foundation
- Income Research & Management
- Izumi Foundation
- Moderna Foundation
- National Academy of Medicine
- Pfizer Foundation
- Providence-Saint Joseph Health
- Risk Pool Fund
- Schooner Foundation
- Serum Life Sciences
- Takeda Pharmaceuticals
- Three Cairns Group
- Vitol Foundation
- Wagner Foundation
- Wellsprings Family Foundation
- The Wyss Medical Foundation

Individual and Family Supporters

- Deborah Ashner
- Peter and Mary Barrett
- Susan and Paisley Boney
- Harry Chen and Anne D. Lezak
- Michael and Linda Frieze
- Tamar and Ken Frieze
- Julie and Phil Gordon
- Ann and Graham Gund
- John and Ann Hall
- Jill and Harry Kargman
- John F. Kerry
- Joel Lamstein
- Michael and Jodi Masdea
- Anjan and Kayuri Mukherjee
- Emily Neal
- Rebecca Nordhaus
- Deborah and Joseph Robbins
- Kate Lubin and Glen Sutton
- Mike Tokatlyan
- David Osborne and Amy Walburn



Malawi

Area 10, Plot 10/185, Off Zomba Street, Bua Road,
P.O. Box 30111, Capital City, Lilongwe 3

Sierra Leone

10B Murray Town Road, Congo Cross, Freetown

Uganda

Plot 31, Bukoto Crescent, Kampala, Naguru

United States

50 Milk Street, 16th floor, Boston, MA 02109

Zambia

Zambia Plot 15584/1 Katimamulilo Road,
Sunshare Tower, 8th Floor Suite 804, Lusaka

SeedGlobalHealth.org

