



2017

ANNUAL REPORT

Curing Neglected Tropical Diseases
(NTDs) and Breaking the Poverty Cycle

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LETTER FROM THE PRESIDENT OF NALA

This has been a very significant year for NALA, and for me personally. This year demonstrated the feasibility and acceptance of our longstanding vision and hopes. For the first time, the goal of eradicating neglected tropical diseases (NTDs) is acknowledged to be not only achievable, but very much dependent on active participation of the community in the process. It has been my view since I started NALA that such involvement is necessary for long lasting control of these diseases. In 2016 the Ethiopian Federal Ministry of Health (FMOH) has not only accepted this goal, but has adopted NALA's model of intervention that emphasizes intense community engagement for health education and WASH into its national NTD control program. Thus, over the last year we have worked hand in hand with the FMOH. NALA's representative is officially assigned to the ministry and all programs of the FMOH regarding NTDs are planned and implemented in coordination with NALA's participation. Moreover, whereas in previous projects the interventions targeted soil transmitted helminthiasis (STH) and schistosomiasis, NALA is now taking part in national plans for control and eradication of all major NTDs. In particular, the collaboration with Sightsavers has brought about a focus on trachoma, an NTD endemic in most areas of Ethiopia and the leading infectious cause of blindness.

These developments would not have been possible without the outstanding leadership and commitment of the NALA team headed by its CEO, Michal Bruck, along with a dedicated staff of both Israeli and Ethiopian individuals. As in any human endeavor, the key to success lies in people, and it is clear that we have been both successful and fortunate to have such a wonderful and dedicated team to have made these achievements possible. In addition, our work would

not have been possible without the consistent support and partnership of the Pears Foundation, American Jewish Joint Distribution Committee (JDC), Organization for Social Services, Health and Development (OSSHD), and an impressive community of volunteers and advisors.

Looking ahead it now seems possible that control and even eradication of NTDs in Ethiopia and eventually in other countries will be achieved, and that NALA will be playing an important role in this effort. In the next year, NALA is also embarking on an exciting new partnership with Merck with the aim of developing an integrated approach to NTD prevention and control in disease hot spots. We are also planning to expand beyond Ethiopia for the first time, with site visits and potential partner meetings planned in Cameroon. Finally, another enticing target is the complete eradication of trachoma from Ethiopia. It is my own personal dream that this becomes the next target for our efforts. This would take place in conjunction with our current activities directed towards other NTDs.

Lastly on a personal note, though it has taken longer than I anticipated to reach this current stage, I am thrilled and extremely gratified to see that what I initially envisioned is being implemented and that it is no longer reliant on my actions alone, but is now mostly dependent and achieved through the wonderful people who have stepped up to carry on what I had started. So, with a clear message that all of us continue and persist in our mission, I wish all of you and your families a healthy and fruitful year.

— *Prof. Zvi Bentwich, M.D.*
President and Founder of NALA

ABOUT NALA

OUR MISSION

Our mission is to break the poverty cycle by eradicating neglected tropical diseases (NTDs) and other diseases of poverty. The NALA holistic approach works towards eliminating the root causes of those diseases, leading to sustainable poverty reduction, and healthier livelihoods by:

1. Assisting national and international actors in designing and implementing programs for controlling NTDs and other diseases of poverty using community engagement and health education to facilitate behavioral change.
2. Researching, developing and testing new NTD control modalities and tools.
3. Advocating for holistic NTD control models with stakeholders and decision makers that promote behavioral change.

OUR APPROACH

Our unique approach is based first and foremost on community engagement. We believe that in order to have a successful and sustainable program, the community itself must lead the way. Our program aims to work with community partners to identify blocks for community health, and to target the different layers within a community that can collaborate to work towards complete elimination of these diseases. The program focuses on three main elements:



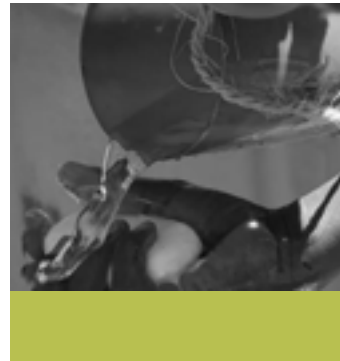
HEALTH EDUCATION

Education is a crucial channel to true behavioral change. NALA's educational program gives local volunteers the tools to teach both school students and the greater community. Through student-centered methodology, NALA empowers individuals to create change.



DRUG ADMINISTRATION

Medical treatment is vital to breaking the transmission of disease, and NALA works with local governments to ensure that vulnerable populations receive the proper medication. NALA further supports drug administration by spearheading public awareness campaigns.



WASH - WATER, SANITATION, HYGIENE

WASH programs give communities access to the infrastructure needed to lead healthier lives. In addition, the increased coordination between the WASH and the NTD sectors helps facilitate more sustained change.

OUR STORY

Professor Zvi Bentwich, MD, was one of the first doctors to address HIV/AIDS in Israel. During his time working in the field, he began to notice a correlation between infection with intestinal parasites and susceptibility to HIV/AIDS, tuberculosis, malaria, and other major diseases. After years of thorough research, he came up with groundbreaking evidence that there is a direct link between the two, and if intestinal parasites are eradicated, then the prevalence of HIV/AIDS infection would drop dramatically as well. After this realization, he decided to reach out to the most vulnerable communities and begin the NTD eradication process as a way to mitigate the impact of HIV/AIDS, and thus NALA was born.

From the beginning, the NALA team noticed a significant gap in how NTDs are targeted. Most efforts relied solely on the mass administration of drugs, but these efforts did not prevent reinfection as many NTDs are spread as a result of inadequate access to clean water, sanitation and hygiene. NALA decided to focus its efforts beyond drug distribution and on intensive community engagement with a focus on WASH improvements and behavior change. NALA began as a small volunteer based organization, working in one community in Ethiopia. Since then, NALA has developed into a thriving organization, working in several regions both on the ground and through assistance to local authorities.



OUR TEAM

PRESIDENT & FOUNDER PROF. ZVI BENTWICH

DIRECTORS RONI AKELE PROF. GALIA SABAR

CEO MICHAL BRUCK

BOARD MEMBERS YOSSI BENVENISTI PROF. MICHAEL KARPLUS EUGENE LEIBOWITZ

DR. MARGALIT LORBER DR. AMI NEUBERGER DR. SHAI PINTOV UZI YISRAELI

PROGRAM OFFICERS NOA AVNI NAOMI CAPLAN DORIN TURGEMAN

RESEARCH COORDINATOR ROBYN TAL

FOUNDING TEAM MEMBER YONAT LISS

ADMINISTRATIVE ASSISTANT ROXANNE HALPER

NALA/JDC PROGRAM MANAGER IN ETHIOPIA TAMAR KORNREICH LIAT RENNERT

STRATEGIC ADVISOR YIRGA GEBREGZIABHER

WASH-NTD COORDINATION YILMA TAMIRU KASSA

FMoH BEHAVIORAL CHANGE & WASH EXPERT MELAKU MULETA

PROJECT COORDINATOR, ADWA GEBREHIWOT DAGNEW

PROJECT COORDINATOR, DEMBIA ZEMICHAEL GIZAW

WASH COORDINATOR, ADWA ZERU GIORGIS KAHSSAY

FINANCE AND ADMINISTRATIVE ASSISTANT, ADDIS ABABA TSEDAY TABOR

PROJECT OFFICER, ADWA ATAY GEBREMEHDIN

HIGHLIGHTS 2017

JANUARY

Joint Indicators for Measuring Trachoma Partners

A joint monitoring and evaluation matrix was created to support all partners working on Trachoma Elimination. The joint monitoring indicators will help the FMOH and trachoma partners to review progress and learn comparatively what strategies should be scaled up.

FEBRUARY

Partnership with Gondar School of Environmental Health

NALA strengthened its partnership with Gondar University School of Environmental Health. The NALA model is now incorporated into the Gondar University curriculum, and a course was created in which 32 students divided into 8 project groups to implement projects in 5 villages for a full year.

MARCH

National WASH-NTD Retreat Organized by NALA

The retreat aimed to launch collaboration both on the strategic and operational levels between the NTD and WASH sectors on the federal and regional levels. Elimination of neglected tropical diseases is highly reliant on access to adequate water and sanitation infrastructure.

APRIL



Materials Developed for School Interventions

Draft manual including visuals, workbooks, and games was developed and shared with partners. The manual will be piloted in the southern region in June, and it will be rolled out in thousands of schools over the next school year.

MAY

Assessment of Health Factors in Rural Communities in Dembia

In Dembia, students from the University of Gondar conducted health surveys in five rural communities. They assessed local and community health factors as well as water quality and environmental conditions. With this info, they will be able to better plan their upcoming interventions in the school and community.

JUNE

President Zvi Bentwich Speaks with Prime Minister of Ethiopia

Zvi Bentwich was invited to a meeting with H.E. Hailemariam Dessalengn, then Prime Minister of Ethiopia, during his visit to Israel. Prof. Bentwich had the opportunity to present on NALA's partnership with the FMOH and achievements towards the elimination of NTDs in Ethiopia.

JULY



Merck to Fund a Project in the Bench Maji Zone

The project will involve intense health education and community mobilization support in Ethiopia's toughest disease hot spots starting in the SNNPR. This three year project will include a strong research element to validate the importance of behavior change in sustainable NTD eradication.

AUGUST

Scientific Advisory Board Convenes for the First Time

An advisory board including medical and academic experts in Israel met to discuss ideas for potential research to be conducted along with the new project in the SNNPR. The proposed research will seek to validate NALA's model and methods.

SEPTEMBER

First Regional NTD-WASH Retreat

The retreat was held in Oromiya region and included 130 representatives from the WASH, NTD and Education sectors from the different zones who will start working collaboratively on disease elimination. Retreats in other regions will take place before the end of the year.

OCTOBER

School-Based Programs Start in Multiple Districts

With the start of the school year, NALA began implementing its school-based programs in Adwa and Dembia. Both programs trained local college students as volunteers to work in the primary schools. In SNNPR, Orbis rolled out NALA's trachoma curriculum to more than 1000 schools in Hadiya and Sidama zones.

NOVEMBER

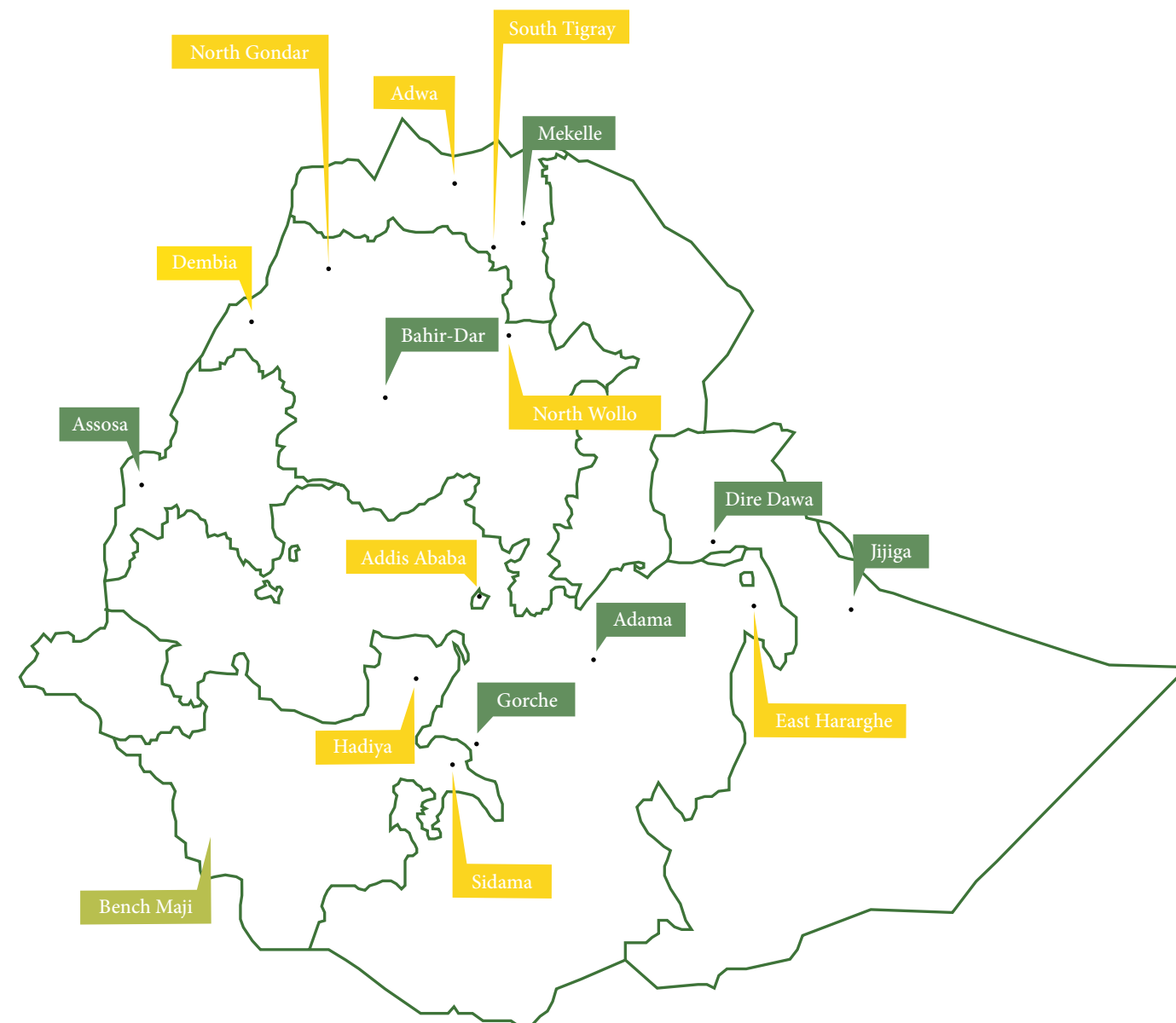
Field Visit to Bench Maji. Beginning of Partnership with Jimma

NALA staff members conducted an initial site visit to their new project area in Bench Maji Zone, SNNPR. This zone is a disease hot spot for several NTDs, including schistosomiasis, intestinal worms, and trachoma. During the visit, the team met with zonal health and education officials, representatives from NGOs, and researchers to learn more about the unique situation there and conducted field visits to local WASH sites and schools.

DECEMBER

Press Conference for Launch of Merck-FMOH-NALA Partnership

NALA officially launched its new partnership with Merck and the Ethiopian Federal Ministry of Health with a joint press conference in Addis Ababa, Ethiopia. The new project will target the disease hot spot of Bench Maji and combine medicine donations from Merck with NALA's behavior change and community participatory approach to prevent reinfection.



PAST PROJECTS

NALA has been working in Ethiopia since 2008. Previous projects include a 5-year project in Mekelle that resulted in the city being declared the first Ethiopian city free of Bilharzia (schistosomiasis). NALA also supported deworming programs through specialized training and created educational materials for use in several areas, including in Tigray, Somali, Amhara, and Oromiya.

PRESENT PROJECTS

NALA now works on the national level in Ethiopia by providing technical assistance to the Federal Ministry of Health as an expert in behavioral change and community engagement. NALA also supports the implementation of projects in four regions of Ethiopia: Tigray, Amhara, Oromiya, and SNNP. More information on our current work is on the following pages.

FUTURE PROJECTS

In 2018, NALA will develop an integrated approach to NTD prevention and control to be tested in the disease hot spot of Bench Maji zone. Additionally, NALA plans to establish a stronger research base for its work through partnerships with internationally-recognized research institutes. Furthermore, NALA actively seeks to expand its work beyond Ethiopia and is currently assessing opportunities to start a project in Cameroon.



CURRENT PROJECTS: ADWA

BACKGROUND

The Bill and Melinda Gates Foundation awarded NALA with a one-year Grand Challenges and Explorations Grant to implement a program in Adwa, Ethiopia in 2015. The grant provided one-year support for innovative public health solutions, used to pilot the NALA model in Adwa, with the goal of achieving zero-prevalence STH and schistosomiasis in the district. In the first phase, the program was led by an Israeli coordinator and supported by an international volunteer team. Then in 2016, the project transitioned to locally employed staff by our implementing partner OSSHD (Organization for Social Services, Health and Development), with continued support from NALA. The transition to local staff has driven down costs and enabled the project to have deeper reach within the community.

WORK IN ACTION

NALA's work in Adwa has engaged the community in all stages of the project and at all levels of implementation. The project has successfully empowered community members (i.e. school employees, health workers, students, parents, etc.), to become the lead actors in improving health on the individual and community level.

The community-led model in Adwa utilizes both local women's networks and schools to reach the people most at risk for disease. The local team leads several workshops for local women's networks in both the rural and urban areas (see Highlight on next page). Additionally, the local team recruits and trains community volunteers from Adwa Teacher's College. These volunteers came from predominantly rural communities in Northern Ethiopia and are likely to become teachers in similar communities. These volunteers are trained and extensively mentored by our team. Each volunteer is then matched to a school where they work with the health clubs to implement a

health education and disease prevention program that also targets students' families.

UPCOMING PLANS

In 2018, NALA will continue to expand its reach into the community by training religious leaders from local mosques and churches. High-risk schools will also be targeted for more intensive interventions, and the team will support small student-led WASH projects. As the Adwa project enters its final phase, NALA will ensure the increasing reach and gradual transfer of responsibility to the community. In this way, the impacts will be sustained.

ACHIEVEMENTS

The project has seen marked reduction in disease prevalence in target schools, with an average decrease of 64% prevalence of intestinal worms among students.

In 2017, the NALA-OSSHD team in Adwa...

- Trained over 150 women from the Women's Development Army in hygiene and disease prevention
- Mentored 33 volunteers from Adwa's Teaching College - These volunteers were then matched to a school where they implement the health education program
- Trained more than 150 school principals and staff and advocated to them on the importance of WASH and health education
- Empowered more than 1300 health club members from 39 schools (average of 35 health club students per school) through intensive health education training and tasking with them to lead on educating their peers
- Facilitated the health education of 20,000 students in the 39 schools who were taught by the trained health club students

IN FOCUS: EMPOWERING WOMEN

BACKGROUND

Ethiopia suffers one of the highest burdens of neglected tropical diseases (NTDs) in Africa, including such diseases as intestinal worms (STH), blinding trachoma, and schistosomiasis. These diseases are prevalent in rural and high-poverty communities with the least access to clean water, sanitation, and hygiene (WASH) services. They mainly impact women and children, trapping them in a cycle of disease and poverty.

For this reason, women play a crucial role in promoting health in their families and their communities. In Ethiopia especially, women lead efforts to enact healthy changes in their communities through a network of health extension workers and community-level volunteers (Women's Development Army) who make regular rounds to their neighbors. NALA utilizes these networks to further the reach of the behavioral change interventions.

In 2017, the NALA-OSSHD project in Adwa trained



over 150 volunteers from the Women's Development Army (WDA) in disease prevention and hygiene. These women represented both urban and rural areas and were directly trained on how to teach their communities about hygiene, disease prevention, and mobilizing to improve WASH conditions. They reach hundreds more people through their house-to-house visits.

In the final project year, the team plans to continue to mentor the women and train additional networks. With the tools gained from the NALA training, these women are now able to pass on this information and help spark local behavioral change. As a result of these interventions, disease prevalence of intestinal worms and schistosomiasis will decrease in both the rural and urban areas, leading to better livelihoods and poverty reduction in Adwa.





CURRENT PROJECT: ETHIOPIAN FMoH AND TRACHOMA PARTNERS

BACKGROUND

As a result of NALA's successful work in selected communities, the Ethiopian Federal Ministry of Health (FMoH) invited NALA to provide technical assistance to the National NTD Eradication Program in 2016. The FMoH has acknowledged NALA's unique model and its sustainable impact on communities and has requested support in 1) designing the behavioral change approach; 2) creating and rolling out a set of tools to support community engagement and mobilization; 3) preparing and introducing programs in coordination with WASH partners and other stakeholders, and 4) supporting monitoring and evaluation. The project started in late 2016 and by the end of 2017 over 2000 schools in multiple communities have started using NALA materials.



WASH-NTD COORDINATION

Rural and marginalized populations with the least access to clean water, sanitation, and hygiene (WASH) services also bear the highest burden of NTDs. Unfortunately, the WASH and health sectors often function independently, but increased coordination could sustainably improve the health and prosperity of people living in poverty. To increase coordination across sectors, NALA organized a WASH-NTD Capacity Building retreat in March. Participants included federal and regional representatives from the health sector, WASH sector, and partner NGOs. Since then, NALA has held regional workshops to further coordination and is currently working on creating a WASH-NTD Coordination Toolkit with the World Health Organization (WHO) to be used by the government on multiple levels.

TRACHOMA

The NALA-JDC team also supports the British organization Sightsavers in providing technical assistance to four NGOs working to eliminate trachoma from Ethiopia. As part of this mission, NALA has developed comprehensive educational materials to be used in primary schools with a focus on facewashing and environmental cleanliness. Special attention was given to training the teachers and student club coordinators on how to use interactive methods and behavioral change techniques to better engage the students. As trachoma prevalence is highest between the ages of 1-9, NALA also worked with the organization Early Starters to develop special material suitable for young children. NALA's educational materials are currently being used by the NGO Orbis in the SNNP region and by Light for the World in Tigray.

UPCOMING PLANS

In 2018, NALA will hire and train WASH-NTD coordinators at the regional level to support intersectoral coordination. NALA also plans to develop integrated educational materials that target schistosomiasis, intestinal worms (STH), and trachoma with an emphasis on behavioral change techniques. Previously, separate educational materials were used for these diseases. NALA will also work on developing tools to increase engagement with the community, including the Women's Development Army and other groups.

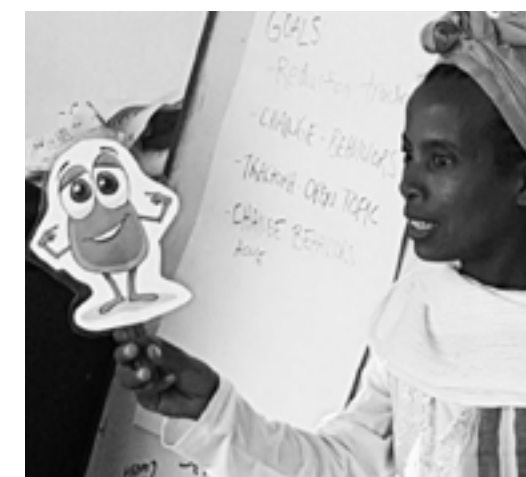
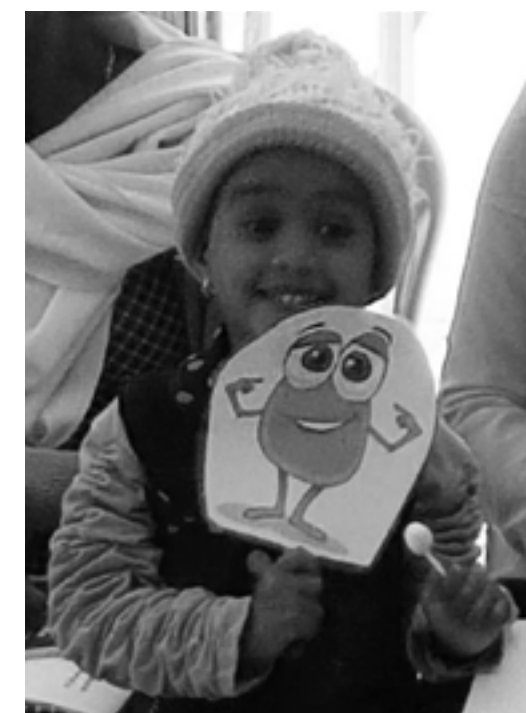
IN FOCUS: ENGAGING YOUNG CHILDREN

A new program is being piloted in the Tigray region that focuses on trachoma health education for children under six years of age. Most trachoma prevention programs are geared toward children ages 7 and above. However, children between the ages of 1-9 are at the highest risk for the early stages of trachoma. This disease can lead to vision problems and blindness later in life. For this reason, NALA teamed up with Early Starters International to fill the gap and develop unique strategies for kindergarten and first grade students.

Early Starters is an NGO that specializes in early childhood education and has extensive experience in training community members, developing age-appropriate materials, and creating child friendly environments. They provided support to NALA by developing a special curriculum for kindergarten and 1st grade students that used the cartoon character "Toto" to teach about trachoma prevention. The students formed an emotional connection to Toto, who would always say and do the wrong things. The students would have to correct Toto, learning proper hygiene by teaching him the correct behaviors to prevent disease.

Early Starters also led training workshops for school staff and community members on how to best teach younger children and use Toto in their classrooms and homes. These workshops emphasized using interactive methods and games. Parents were taught to encourage face-washing in the home by looking in the mirror with their child and Toto to see if the child's face is dirty.

A pilot test of the material was carried out in collaboration with Light for the World- NALA's partner in the Tigray region. The workshops received positive feedback, and NALA plans to continue and expand the collaboration in 2018.





CURRENT PROJECT: DEMBIA



BACKGROUND

In 2015, the American Jewish Joint Distribution Committee (JDC) approached NALA to partner with them on a project in rural Dembia district in Amhara, Ethiopia. Dembia is a hot spot for intestinal worms due to water-related risks, such as the community's high reliance on natural water sources and frequent flooding. The project aims to promote community engagement and increase the impact of WASH projects there. Since 2017, the project has been coordinated by the head of the Department of Environmental Health & Safety at the University of Gondar. Students enrolled in a one-year project management course at the University of Gondar carry out the community-based interventions.

WORK IN ACTION

Over the last year, 32 college volunteers from the University of Gondar divided into five project groups that focused on specific rural communities in Dembia. First, they conducted a health survey on the target communities to better assess individual and community health issues, such as water quality, sanitation, and the prevalence of intestinal worms. Deworming drugs were



then administered to infected children. The college volunteers received intensive training on how to teach and engage school children and other community members. In the schools, the volunteers led a hygiene campaign, supported health education, and constructed handwashing stations. For the community, they led workshops on handwashing, environmental sanitation, and disease prevention.

UPCOMING PLANS

In 2018, the project aims to deepens its impact in rural Dembia and continue the transfer of project ownership to the community.

ACHIEVEMENTS

- A survey of disease prevalence in target communities showed that 87% of school children tested had intestinal worms. A follow-up survey showed a substantial reduction in disease prevalence to 46%.
- A coordination committee was established to sustain improvements and continue to promote hygiene and sanitation in the local community. The committee includes religious leaders, health extension workers, teachers, agricultural development agents, and community leaders.
- New banners and leaflets were designed for distribution to local schools and community groups.



NEW PARTNERSHIP: TARGETING DISEASE HOT SPOTS

BACKGROUND

Last year, the Ethiopian Federal Ministry of Health (FMOH) requested special attention and implementation support for hot spots in which the disease burden is especially high. Following this request, NALA partnered with Merck, a global leader in the pharmaceutical industry, to launch an intensive health education and community mobilization project in one of Ethiopia's toughest disease hot spot areas, the Bench Maji zone.

The project includes several elements. The first is to provide support for the Federal Ministry of Health in creating a behavioral change and WASH strategy for the elimination of NTDs. The second is dedicated support for trachoma elimination partners with

launching community mobilization and WASH campaigns. Both these elements were launched last October with the support of Sightsavers and in partnership with the JDC.

OFFICIAL LAUNCH

The official launch of the NALA-Merck- Ethiopian Federal Ministry of Health (FMOH) Collaboration took place on December 13 in the presence of the Israeli Ambassador, NALA's collaborating partners in Ethiopia and representatives from the World Health Organization (WHO). The atmosphere was vibrant as the group pledged to take on the challenge of tackling schistosomiasis in the Bench Maji zone, an area selected by the FMOH due to very high disease prevalence.

As Merck celebrates the 10 year anniversary of its Praziquantel Donation Program, it became clear that a second step of deterring reinfection was necessary, and NALA's model of health education and community involvement fills this gap. Our partners from the WHO called this a groundbreaking project and hoped that other pharmaceutical companies would follow suit.





NEW PROJECT: BENCH MAJI

OVERVIEW

As part of the new partnership between NALA, the Ethiopian Federal Ministry of Health, and Merck, NALA plans to launch a new project in one of the most high-need regions in Ethiopia and develop best practices to be rolled out nationally. Bench Maji is considered one of Ethiopia's toughest disease hot spots with all districts in the zone being endemic for schistosomiasis, STH, trachoma and onchocerciasis. In addition, 9 out of the 11 wereda are also endemic for lymphatic filariasis (LF). Special attention and implementation support will be given to the seven districts in which the disease burden is especially high. These hot spots will serve as pilot sites for implementing effective educational approaches and interventions that promote behavioral change within the community. The best practices will then be scaled up to the entire country.

PLANNED INTERVENTIONS

NALA will complement the mass drug administration (MDA) campaigns in the zone by designing and implementing interventions to mobilize the community and promote behavioral change. These interventions include implementing a school-based health education program, training and mentoring different groups in the community such as the Women's Development Army and local community leaders, and supporting community projects to improve WASH conditions. NALA will focus on developing an integrated approach to NTD prevention and control and work toward developing strategies that target all three diseases simultaneously: schistosomiasis, trachoma, and soil-transmitted helminthiasis (STH). The project in Bench Maji will serve as the pilot location for testing the new tools, which will be modified as needed and later rolled out to high-need districts throughout Ethiopia.

UNIQUE CHALLENGES

Bench Maji Zone poses unique challenges to



program implementation. The zone is predominantly rural with many pastoralist (semi-nomadic) communities. Several languages are spoken in the zone- Bench is spoken by 44.54%, 21.36% speak Me'en, 12.5% speak Amharic, and the rest speak other local languages. The level of education is low, with 81% of eligible children enrolled in primary school, and only 12% in secondary schools. In some districts, more than a quarter of young children are not enrolled in school. Additionally, the area of Bench Maji has many natural water sources, which are highly used by the populace. These water sources are likely contaminated and pose a risk for disease transmission. Shoe-wearing is also not common in some areas, further increasing the risk for disease.

PLANS FOR 2018

The three-year project will be rolled out to districts in the zone gradually. First NALA will test its newly-developed materials in a pastoralist district with a high disease prevalence. By Fall 2018, more districts will be added for interventions. These districts will serve as the basis of a formal research project to better assess the impact of NALA's interventions on disease prevalence. Through practical experience and evidence-based research, NALA will be able to develop more effective tools and best practices.

IN FOCUS: INTERNATIONAL EXPOSURE

In 2017, NALA expanded its presence as a technical expert by participating in international forums and working groups alongside recognized leaders in the public health field. Below is a summary of some of these activities:

NEGLECTED TROPICAL DISEASES NGO NETWORK (NNN)

In September, NALA's CEO Michal Bruck presented at the 2017 conference for the Neglected Tropical Disease NGO Network in Senegal. The NNN is a global forum of NGOs working in more than 100 countries that aim to control and eliminate NTDs. Michal presented on the integration of interventions for different NTDs along with Nebiyu Negussu from the Ethiopian Federal Ministry of Health and Willemijn Zaadnoordijk from Merck Global.

To enhance collaboration beyond the annual conference, NALA joined the WASH-NTD Working Group of the NNN. This working group aims to communicate learnings from the field through the collection of case studies and research that demonstrates the positive impacts of WASH-NTD Coordination. The working group will present its findings during the next NNN conference in September 2018.

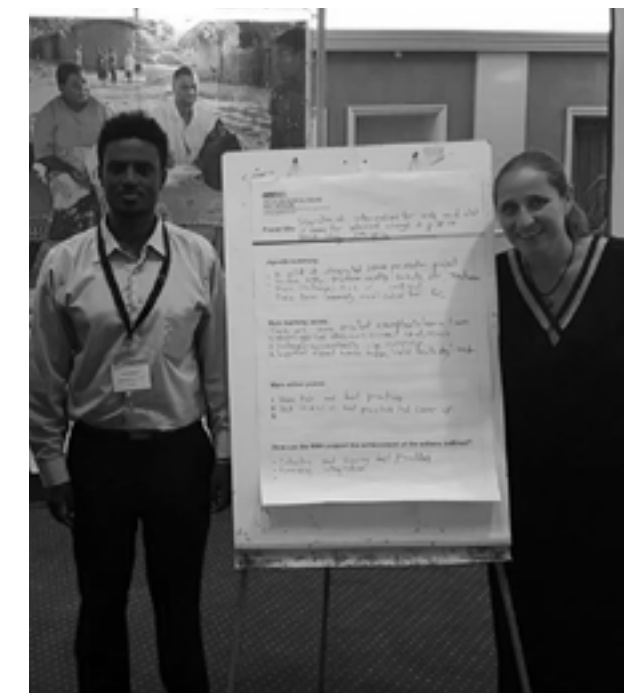
GLOBAL SCHISTOSOMIASIS ALLIANCE (GSA)

In 2017, NALA was invited to join the Behaviour Change and Health Education (BCHE) Working Group of the Global Schistosomiasis Alliance (GSA) in recognition of our extensive work and technical experience in this area. The GSA is a platform that brings together policy makers, social scientists, and implementers from the public and private sector to discuss existing work in the field and develop best practices toward the elimination of schistosomiasis. The BCHE working group specifically

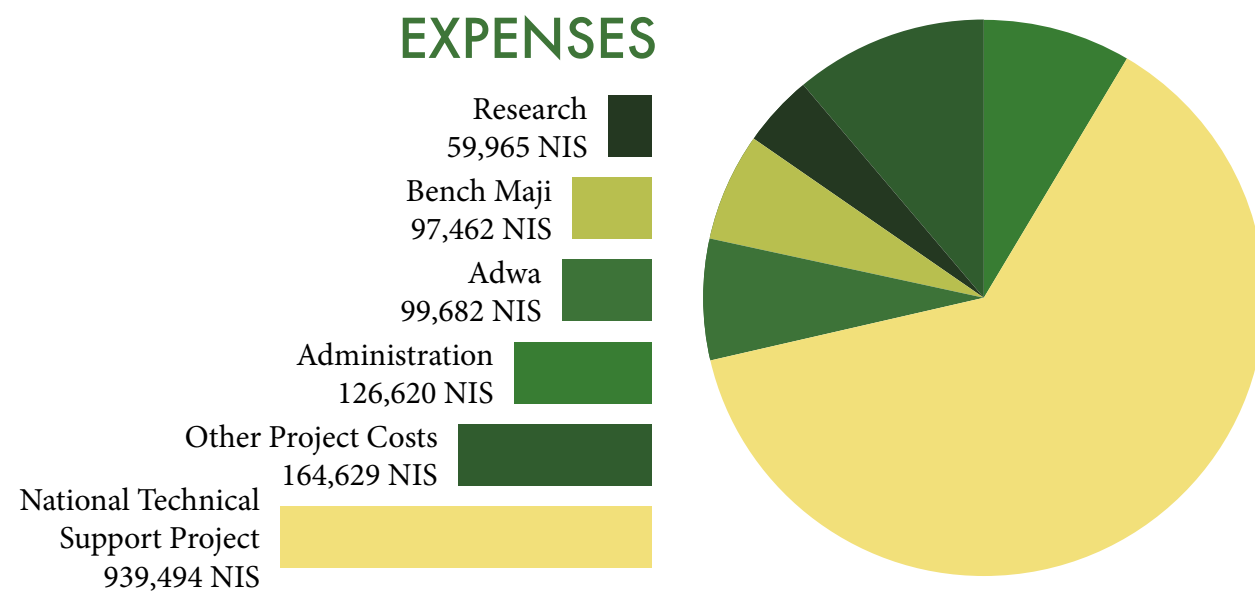
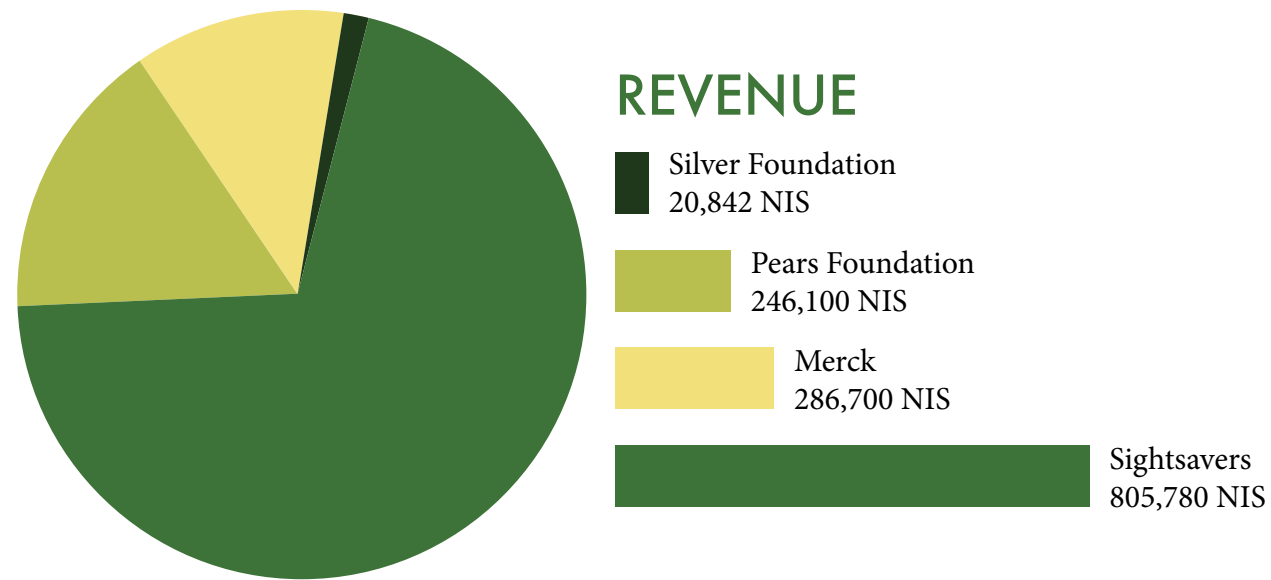
recognizes the importance of behavior change and health education to schistosomiasis control and seeks to strengthen and advocate for their inclusion in national NTD control programs.

OLAM

NALA is also a member of OLAM, a coalition of Jewish and Israeli organizations that support global service and international development. In June, NALA representatives attended OLAM's annual conference, wherein Program Manager Liat Rennert received an award for her demonstrated dedication to the field.



FINANCIALS



COST-EFFECTIVE AND HIGH-IMPACT WORK

Over the last three years, NALA has streamlined its financial policies and reporting while maintaining a high standard of accountability. As the organization has expanded its projects and budget, it has successfully kept administrative costs below 10%. Additionally, NALA's extensive community of volunteers have donated hundreds of valuable hours of work, which has helped to keep costs low and impacts high.

SUPPORT US

GET INVOLVED

NALA relies on the contribution of our generous donors, volunteers, and supporters to improve the lives of millions by eliminating neglected tropical diseases (NTDs) and poverty.

- Contact us to learn more about what we do and how you can make a direct impact on global health.
- Sign up for our newsletter through our website to keep up-to-date with us!
- If you would like to donate to us and help communities gain access to basic water and sanitation infrastructure, please visit www.nalafoundation.org/donate-1

OUR PARTNERS AND SUPPORTERS

NALA maintains partnerships with several community-based and international organizations, including but not limited to, the World Health Organization, Sightsavers, Light for the World, Orbis International, the Carter Center, and the Fred Hollows Foundation, and closely collaborates with the American Jewish Joint Distribution Committee.

NALA also cooperates with a range of other partners locally and internationally that are not listed.

The work NALA does would not be possible without the generous contributions of our supporters: Pears Foundation, who has been with NALA since the inception, Sightsavers and Merck Global, both of whom make our work with the Ethiopian FMOH possible, Silver Family Foundation, who support multiple medical interventions in East Africa, and private donors.



QUOTE

“I come from a small village. There is no well in the village and water for all uses is taken from the river. This means people bathe, drink, and wash clothes from the same river. When I went home for Christmas break, I made my family start boiling water before they drink it. It was a struggle because it is hard work, but it is important. When I go back home next time, I plan to sit with my village community and explain how they can keep themselves safe “

- **Seifu, college volunteer**

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