



**North Star
Alliance**

ANNUAL OVERVIEW

2012



OLIVER SIMIYU
CLINICAL OFFICER
MAAI MAHIU, KENYA

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MESSAGE FROM THE EXECUTIVE DIRECTOR



**LUKE
DISNEY**

It was another busy year for North Star Alliance (North Star). We saw donations and other sources of income grow by 50%, six new Roadside Wellness Centres (RWCs) open, including our first in West Africa, 40 new team members join the organisation, and our patient visits increase by over 10%.

At the operating level, we added four new RWCs in our Southern Africa Region as part of our partnership with the Southern African Development Community (SADC) and placed our first RWC in Mozambique, in partnership with the Ministry of Transport, the World Food Programme, FHI 360 and USAID. In East Africa, we strengthened our cooperation with the Ministry of Public Health and Sanitation in Kenya, which now lists two of our seven RWCs in the country as official government sites. One of these sites, the Mlolongo RWC in Athi River District, has become the first North Star RWC to provide HIV and tuberculosis treatment on site. Finally, in West Africa, we were proud to open our first RWC in Farafenni, the Gambia. Thanks to the expanding operations across Africa, we had approximately 220,000 patient visits at our clinics in 2012. Over 40% of these were from key populations, including truck drivers and sex workers.

As a leader in building strategic partnerships between public, private and humanitarian organisations, developing new and existing partnerships is a core part of our operating model. In 2012, we were proud to bring new partners into this network as well as grow our support among a number of important existing partners. At the Head Office level, this included securing new support from the Ministry of Foreign Affairs of the Kingdom of the Netherlands; taking important technological steps forward with in-kind support from ORTEC, Just-BI and CISCO Systems; and establishing a new partnership with Trafigura Foundation, which will help to build key capacities in the Netherlands. In East Africa, we embarked on an exciting partnership with the Elizabeth Glaser Pediatric AIDS Foundation that will support our seven RWCs in Kenya.

In Southern Africa, we signed an agreement with Wits Reproductive Health and HIV Institute that will see us establish five new RWCs in South Africa in 2013. Together, these partnerships have enabled us to lay the foundations for expansion that will provide transparent, standardised and monitored health care to a growing number of traditionally hard-to-reach people across Africa.

Behind the scenes we formally changed the management structure to more accurately reflect the operational reality. Paul Matthew and Eva Mwai were appointed Regional Directors for Southern and Eastern Africa, respectively. The three of us now form what will be known as the Board of Directors. We will be held accountable by the Supervisory Board in a formal two-tier governance structure, which is in line with best practices in terms of transparency and good governance.

As we enter what looks to be a promising year of growth at North Star, I would like to recognise the invaluable efforts of our staff, working on the front line of healthcare delivery, as well as those working at the Regional and Head Office level, for their dedication and hard work. I would also like to thank each of our partners for their support, dedication and for the on-going enthusiasm they show for our work. It is this energy that drives our team to continuously strive to be more effective, efficient, and most importantly, innovative in their work to promote and secure global health.

Thank you for your continued support.

A stylized, handwritten signature in black ink, consisting of several loops and a long horizontal stroke at the end.

Luke Disney
EXECUTIVE DIRECTOR, NORTH STAR ALLIANCE



GEERHARD DE VRIES

Looking back on 2012, we can see that North Star continues to sustain its steady growth and improvement. Donations and other forms of financial support were up from the previous year, while costs were kept in line. Further, North Star continued to attract new support from both the public and private sectors, despite the significant cuts being made on both sides of the fence. Whether you call it social entrepreneurship or modern humanitarianism, North Star is clearly a shining example of a new breed of organisation combining professional management structures, solid quantitative and qualitative performance measures, and innovating financing models, to improve the lives of millions in Africa.

Naturally, as the organisation continues to grow in size, so do its achievements, which, in turn, are earning it more and more international recognition. We are particularly pleased to note that Paul Matthew, North Star's Regional Director for Southern Africa, received the Schwab Foundation 2012 Award for Social Entrepreneur of the Year in Africa.

In addition to the growth in patient visits we were also pleased to see the management team's relentless dedication to quality and process improvement continued unabatedly. In this respect, we feel that the changes to the management structure were timely and appropriate in order to ensure clear and efficient areas of focus and lines of communication within the organisation. The informal two-region (East and Southern Africa) structure has now been officially consecrated, with Utrecht remaining the group Head Office.

The changes have also extended to the Supervisory Board level. After six years of working with Council of Strategic Partners, composed of representatives of the six core partner organisations, in 2012 North Star made the decision to implement an independent Supervisory Board. Over the next three years, up to seven new Supervisory

Board members representing a diversity of regional and occupational insights will be recruited to stand guarantee for the good governance of North Star. In the interim, a care-taker Supervisory Board consisting of three members of the previous Council of Strategic Partners has been appointed to guide the process and ensure continuity. The three current board members will resign their positions (one per year) over the three-year period.

Finally, we have decided to do away with the "core partner" distinction. As of 2013, we will officially recognise all organisations making contributions to North Star above the defined time/resource thresholds as "Alliance Members". The support North Star has received from the more than 70 organisations over the last six years has made us who we are, and the Board of Directors and the Supervisory Board felt that it was important to recognise the full breadth and depth of these unique contributions.

These changes have been formalised in a new set of Articles of Association signed on 15 December 2012 at the North Star Head Office in Utrecht. Alliance Members will receive additional information in the course of 2013.

I wish to thank the Board of Management, the entire North Star team and all our many partners and friends for all their efforts in 2012. I look forward to an exciting and fruitful cooperation in 2013.

A handwritten signature in black ink, appearing to read 'G. de Vries', written over a horizontal line.

Geerhard de Vries

SUPERVISORY BOARD CHAIR, NORTH STAR ALLIANCE



North S

OUR MISSION IS TO PROVIDE SUSTAINABLE ACCESS TO HIGH QUALITY HEALTH SERVICES FOR MOBILE POPULATIONS AND RELATED COMMUNITIES

North Star Alliance brings health services to hard-to-reach people across Africa in a “Blue Box”. We use converted shipping containers (painted blue) to house clinics (Roadside Wellness Centres or RWCs) that deliver public health programmes for people with increased health risks, like truck drivers and sex workers, and primary health care to communities with limited or no access to medical services.

We chose this “containerised-approach” because semi-mobile structures with a standard layout could be rapidly produced and deployed, enabling us to continuously expand our reach. As a result, we’ve grown from one clinic with 5,000 visitors in 2007, to a network reaching over 225,000 people in 13 countries; and we’re only getting started.

As of 2012, we worked with more than 70 partners from the private, public and humanitarian sectors. As we continue to grow our network of “Blue Boxes”, we are always on the lookout for new partners to join our alliance and help us expand our reach across Africa and around the world.

We know that a “Blue Box” can’t solve all the health challenges facing our clients, but over the last six years we’ve been amazed to discover just how much of a difference they can make. As we continue to expand our network across Africa, we’re working hard to make that difference grow every day.

Star

DURING THE PAST YEAR WE'VE HAD MANY REASONS TO CELEBRATE OUR SUCCESS— HERE ARE A FEW NOTEWORTHY HIGHLIGHTS



North Star Alliance and Fleet Forum combined forces to provide truck drivers with on-the-job health, road safety, and occupational skills training through the

NSEWA LEARNING NETWORK

North Star's Regional Director for Southern Africa, **Paul Matthew**, is named **SOCIAL ENTREPRENEUR OF THE YEAR AFRICA 2012** at the World Economic Forum on Africa by The Schwab Foundation for Social Entrepreneurship



JULY

Qurius/Prodware joined North Star's network of partners and supported North Star by developing an ICT Roadmap and advising us on office systems



The first North Star laboratory was opened at our RWC in Salgaa (Kenya), increasing greatly our capacity to provide timely and confidential diagnoses to our clients in the region



CONTRACT WAS SIGNED WITH THE NATIONAL AIDS CONTROL COUNCIL IN KENYA TO SUPPORT OUR RWC IN MAAI MAHIU (KENYA), THROUGH THE TOTAL WAR AGAINST AIDS PROJECT

JUNE

NEW ROADSIDE WELLNESS CENTRES (RWCS) WERE OPENED IN

Victoria Falls
Zimbabwe

AND

Ficksburg
South Africa

WITH SUPPORT FROM THE **SOUTHERN AFRICAN DEVELOPMENT COMMUNITY (SADC)**



Cisco Systems joined our network of partners and provided North Star with important hardware and software to improve the reliability of our data management and communication systems across our clinical network



The North Star road show continued, making a stop at the World Food Programme (WFP) Head Office in Rome (Italy)

AUGUST



A new 'Blue Box' container arrives safely in the Port of Beira and is transported to Inchope, in preparation for the launch of our first RWC in Mozambique. The centre is supported by FHI 360 and funded by USAID, WFP and the Government of Mozambique



North Star begins development of

A DATABASE AND DIGITAL MAPPING TOOL OF EXISTING HEALTHCARE INFRASTRUCTURE



along main corridors in Africa that will strengthen our referral system and optimise our network deployment

OCTOBER

North Star participates in a high-level visit to the Democratic Republic of Congo and scouts potential sites for future RWCs



A partnership is established with the

ELIZABETH GLASER PEDIATRIC AIDS FOUNDATION (EGPAF)

that will support North Star operations in Kenya and build our capacity to reach key populations including truck drivers and sex workers



NOVEMBER

TWO NEW RWCs ARE OPENED IN



Forbes Zimbabwe

AND

Kazungula Ferry Botswana

IN PARTNERSHIP WITH THE

SOUTHERN AFRICAN DEVELOPMENT COMMUNITY (SADC)



North Star and Container Leasing Africa (CLA) cosponsor the



THOUSAND HILLS FOOTBALL CLUB

as a way to promote healthy living for young people in KwaZulu-Natal (South Africa)

North Star releases the

STATE OF THE ROAD SURVEY



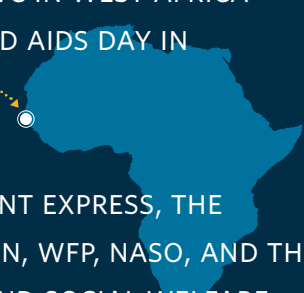
which examines the major challenges that mobile populations face along two major corridors in Africa and the policies and programmes in place to address these issues

DECEMBER

NORTH STAR'S FIRST RWC IN WEST AFRICA WAS OPENED ON WORLD AIDS DAY IN

Farafenni The Gambia

WITH SUPPORT FROM TNT EXPRESS, THE TRAFIGURA FOUNDATION, WFP, NASO, AND THE MINISTRY OF HEALTH AND SOCIAL WELFARE



HAVING OUTGROWN THEIR OFFICE BUILDING, THE SOUTHERN AFRICA REGIONAL OFFICE MOVES FROM GILLITTS TO PINETOWN (SOUTH AFRICA)



The latest version of COMETS, our electronic health passport and data management system, is released



HEALTH CARE IS ABOUT PEOPLE AND HAVING A DEEP UNDERSTANDING OF THE COMMUNITIES WE WORK WITH IS A CORE PART OF WHAT WE DO

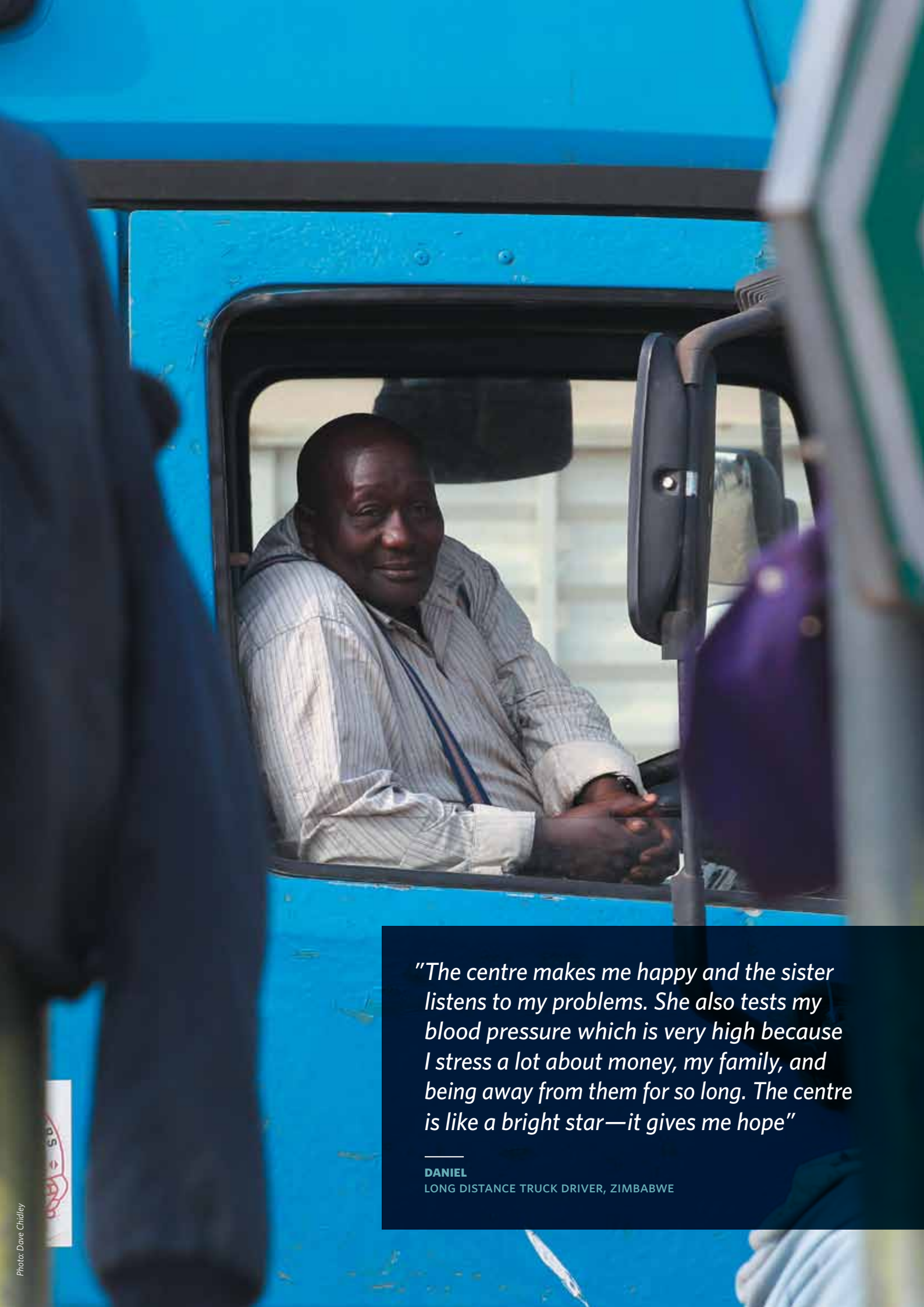
In 2006, North Star Alliance (North Star) was founded in response to the overwhelming impact that HIV was having on Africa's transport sector. As the concept developed and our model was honed, it became clear that mobile workers, like long-distance truck drivers, were only one side of a more complex story. If our response to HIV and other sexually transmitted infections (STIs) was to be successful, we would need to look beyond the scope of occupational health and into the wider public health sphere, addressing a chain of links in the transmission of disease. To do that, we would have to expand the range of services offered at each Roadside Wellness Centre (RWC) in a way that supported local and national health care systems and offer them to some of the most-at-risk people in the broader community.

Bolstered by strategic information and expert advice, we honed our model to include specific services for sex workers and community members living near transport hubs and ports, who each represented a link in the transmission of communicable disease. In addition to expanding our services to the broader community, we also widened the scope of our health service package to include more than HIV and STI prevention and management. Mobility plays a key role in the spread of other high impact diseases like malaria and tuberculosis and North Star's RWCs are ideally positioned to help national and regional health authorities reach most-at-risk populations for these diseases as well.

Continuing to develop a deeper understanding of the people we serve, and of the health needs in communities and countries where we work has been a core part of our approach since we opened our first RWC. This year, we took some important steps in this light.

While we've long recognised the devastating impact that HIV and other communicable diseases are having on mobile populations, we knew we needed to develop a better understanding of how truck drivers conceived of their own health and the services we offer. To accomplish this, we launched the first phase of a significant research study called "Health on the Road" that will deepen greatly our understanding of this key population, and enable them to play a participatory role in the development of future services and programmes offered at our RWCs. In unison with this programme, we officially launched the NSEWA Learning Network, a new initiative that addresses the interconnected issues of health and road safety through the provision of driver safety training and health-related programmes. We also launched a new peer education training programme that provides sex workers with the resources and health-specific knowledge needed to reach their peers with important health and lifestyle information after they've left our clinic.

These initiatives have already enabled us to develop a deeper understanding of our clients and will continue to play a significant role in how we work with and within our communities as we look toward 2013.



"The centre makes me happy and the sister listens to my problems. She also tests my blood pressure which is very high because I stress a lot about money, my family, and being away from them for so long. The centre is like a bright star—it gives me hope"

DANIEL

LONG DISTANCE TRUCK DRIVER, ZIMBABWE



Photo: Dove Chidley

HEALTH IN A BLUE BOX

- Roadside Wellness Centres (RWCs) are usually housed in converted shipping containers (painted blue) that are divided into a clinical and an educational area.
- RWCs are located at 'hotspots' such as border posts, transit towns or ports where trucks stop, and where sex work and informal trades often flourish.
- Each RWC employs both a local medical officer and behavior change communication specialist.
- All of our RWCs are digitally linked using our innovative electronic health passport system called COMETS, which allows us to gather patient data, track epidemiological trends, evaluate key performance indicators, and oversee operations.
- Our RWCs are open to everyone but provide special services and programmes for mobile populations like long-distance truck drivers and vulnerable groups such as sex workers.
- RWCs are open at hours that suit our target groups, including evening services for working truck drivers.
- We offer a select package of services and programmes that are aligned with national health strategies. When we are unable to treat a specific condition, however, our comprehensive local healthcare mapping enables us to refer a client to other providers in the area.

WE'RE THINKING INSIDE THE 'BLUE BOX' AND BRINGING HEALTH CARE TO AFRICA'S HARD-TO-REACH COMMUNITIES

A NETWORK OF ROADSIDE WELLNESS CENTRES

Truck drivers and other mobile workers often have difficulty accessing quality health care without losing valuable work time. Simple factors like limited operating hours and distance to health facilities are barriers for people who cannot take time off to seek medical treatment. As a solution, North Star developed the Roadside Wellness Centre (RWC) concept to extend local health infrastructure and strengthen referral systems to meet the needs of truck drivers and others, including nearby communities.

With support from the PharmAccess Foundation, we have developed a health service package that is responsive to our clients' needs. North Star clinics offer general health check-ups, treatment for a range of illnesses including, but not limited to, sexually transmitted infections and malaria, counselling and testing for HIV, anti-retroviral treatment, free condoms and information on topics such as tuberculosis, hypertension, diabetes, and positive gender relations. To stay relevant, we constantly assess our services and invest in ways to improve our capacity to deliver them.

Our clinics are located at 'hotspots' such as border posts, transit towns or ports where large numbers of trucks stop, load and offload, and where sex work and informal trades flourish. Most are open late when drivers are parked for the night and sex work activity peaks. The exact hours of operation, referral mechanisms and other details are determined in conjunction with local stakeholders prior to establishing each clinic.

TECHNOLOGY FOR HEALTH

North Star uses a proprietary electronic health passport system called COMETS, developed by ORTEC, that enables our clinicians to access client health information anywhere in the network. The system, which is continually being upgraded, uses unique personal identification numbers so that we can monitor who comes through a clinic, their medical history, how they are treated, whether they return, and whether the same person goes to another clinic within the network. COMETS is accessible for staff with limited computer literacy and is resilient to common operational challenges like power outages and breaks in connectivity.

In 2012, we worked with ORTEC and Just-BI to develop the next version of COMETS, which extends our capacity to gather rich data, report on a variety of health issues, and prescribe appropriate treatment. This version, which will be released in the first half of 2013, will also introduce biometric identification to increase client convenience and data security across our network.

OUR REGIONS TOOK IMPORTANT STEPS TO EXTEND OUR HEALTH SERVICES TO MORE COMMUNITIES IN NEED ACROSS AFRICA

HEAD OFFICE

In 2012, our Head Office built on strategic investments made during 2011 to lay the foundations to meet the growing demand for our services. Our primary areas of focus included the development of a standardised medical service package by our Medical Committee with support from the Wits Reproductive Health & HIV Institute (WRHI) and the PharmAccess Foundation; the establishment of new quality control and management systems using SafeCare guidelines; improvements to COMETS, our electronic health passport system; research and the initial development of a new staff training programme; the development of new, standardised communications materials to promote a unified North Star brand among our stakeholders, clients and the general public; and, the enactment of a new legal governance structure, including new articles of associations and rules of procedure, to ensure that our growing organisation continues to exemplify excellence in the areas of governance and transparency.

WEST AFRICA

In early 2012, the container required for the construction of our first clinic in West Africa was converted in Durban and shipped to Banjul, The Gambia. After an extensive scouting period, it was placed in Farafenni in May 2012, and on December 1st, World AIDS Day, it was opened with support from the Trafigura Foundation. In cooperation with a nearby hospital, two nurses have joined our team. In addition, medicine has been provided by the National AIDS Services Organisation (NASO) to the centre for the first six months of its operations. We also took important steps in 2012 to deepen our partnership with the Abidjan-Lagos Corridor Organisation. In April, we installed COMETS, our electronic health passport system, in two of their HIV information units along the Abidjan-Lagos Corridor, and, near the end of 2012, we began exploring opportunities to collaborate on service delivery.


EAST AFRICA

In 2012, our East Africa region worked to develop and strengthen regional partnerships to promote and expand the range of services offered across our clinical network. In Kenya, we strengthened our partnership with the Ministry of Health and Sanitation, which enabled us to begin providing on-site HIV and tuberculosis treatment at two of the seven Kenyan clinics. In addition to rolling out these new services, we were proud to establish the first North Star Alliance laboratory in July at our Salgaa RWC. This new lab will greatly improve our capacity to provide timely and confidential diagnosis to clients in the region. To promote our services among key populations, we launched a peer education training programme for sex workers in partnership with SOA AIDS Netherlands. We also launched a fee-for-service pilot with Rongai Workshop & Transport Ltd. and Redshank Ltd., to provide health care to their employees at our Salgaa RWC.

SOUTHERN AFRICA

At the beginning of 2012, several new clinics needed to be established, staffed, and opened in cooperation with the Southern African Development Community (SADC). We were happy to officially open four of these clinics in the second half of the year. In May, Paul Matthew, the Regional Director for Southern Africa, was recognised as Social Entrepreneur of the Year Africa, by the Schwab Foundation for Social Entrepreneurship at the World Economic Forum Africa in Addis Ababa. Partnering with Fleet Forum, The NSEWA Learning Network, our training arm, was launched in October, and in November we were excited to establish a new office in Johannesburg, where our regional finance and HR departments are now housed. This move coincided with the relocation of our Durban office to Pinetown, to again provide more space for our growing staff. Near the end of 2012, in conjunction with the WRHI we secured funding from the United States Presidents's Emergency Plan for AIDS Relief (PEPFAR) for the establishment of five new clinics in South Africa, which will begin in 2013.





NELLY MBITHI
VCT COUNSELLOR
EMALI, KENYA

"As a medical student, being able to go on an internship with North Star provided a perfect opportunity to explore my public health interests, to be part of an experienced, hard-working team and get the involvement and responsibilities that I could not get in my university or local hospital. Being part of an ambitious team and providing valuable services have made these six months really rewarding."

RICK VAN DEN HELDER
MEDICAL INTERN, NORTH STAR ALLIANCE

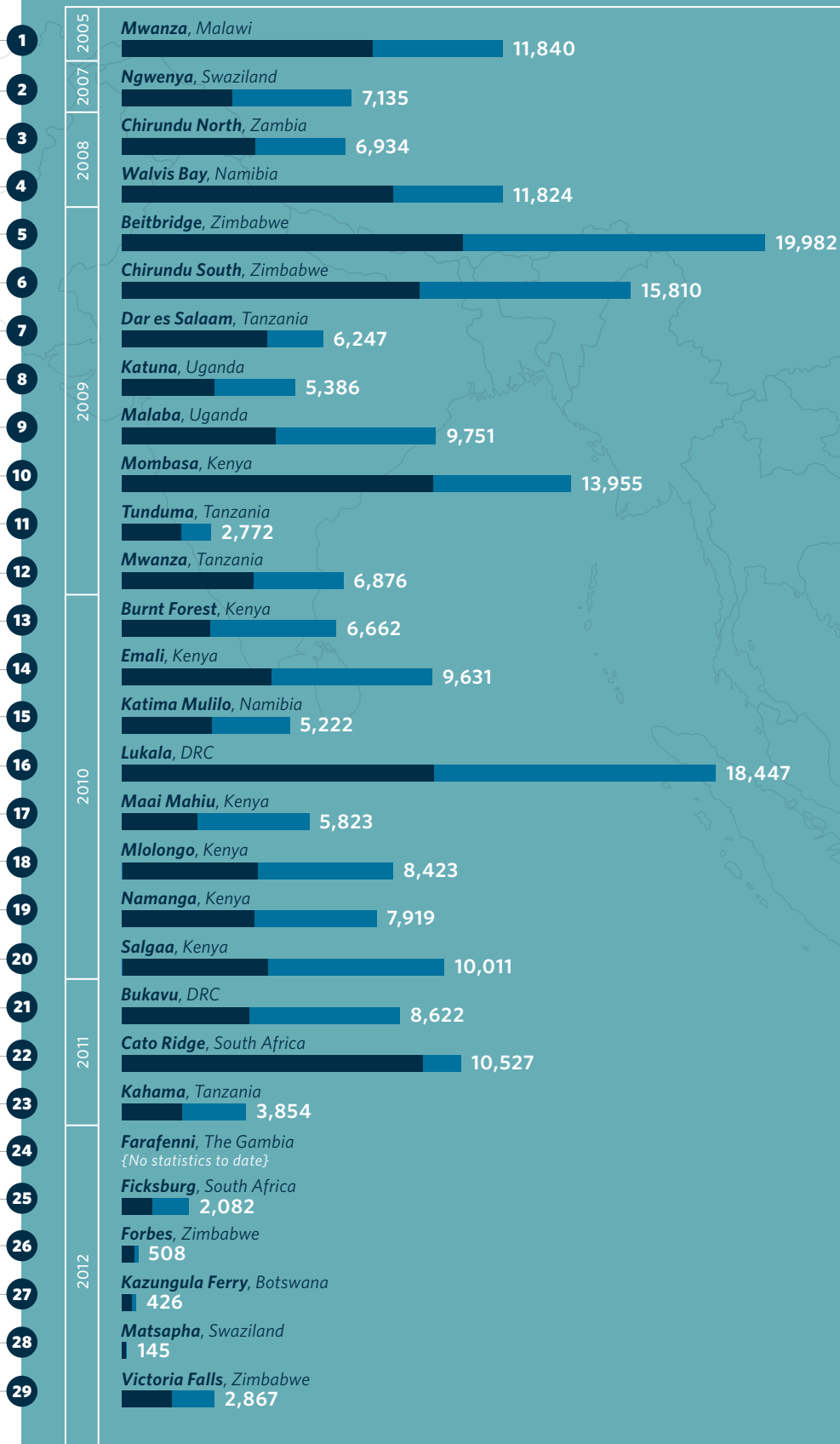
IN 2012, WE EXPANDED OUR NETWORK
OF ROADSIDE WELLNESS CENTRES
IN EAST AND SOUTHERN AFRICA
AND OPENED OUR FIRST IN WEST AFRICA

- OPERATIONAL COUNTRY
- NON-OPERATIONAL COUNTRY
- NORTH STAR OFFICES

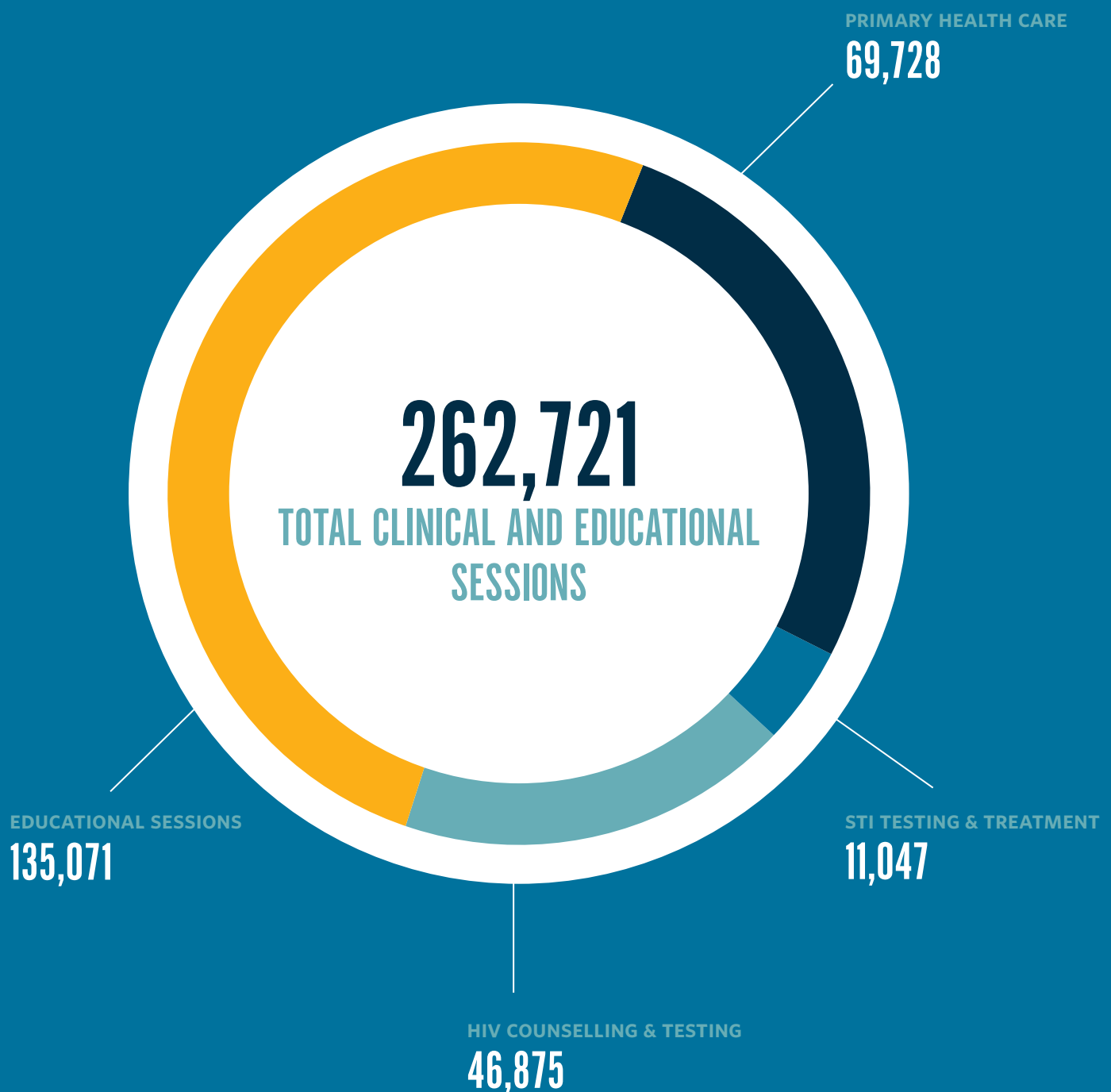
1000 KM
500 MI

IN 2012, WE HAD A COMBINED TOTAL OF 219,681 VISITS ACROSS 29 CLINICS

■ MALE ■ FEMALE

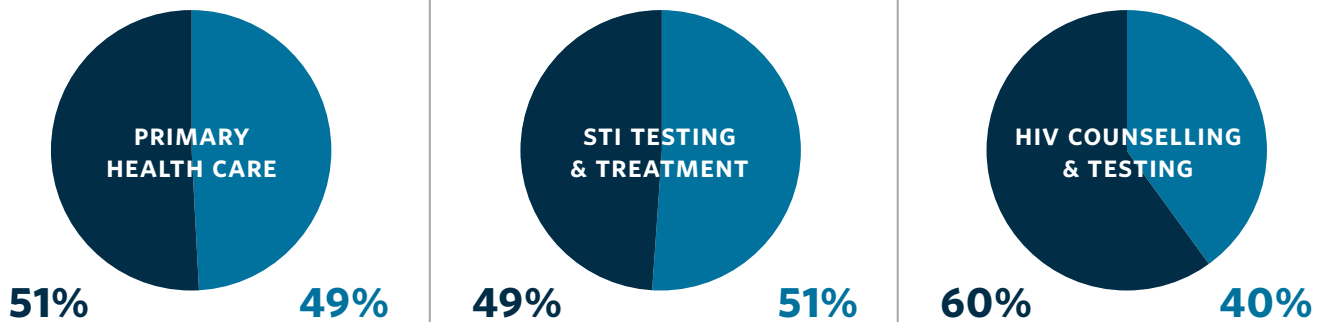


262,721 CLINICAL AND EDUCATIONAL SESSIONS TOOK PLACE AT NORTH STAR ALLIANCE CLINICS IN 2012



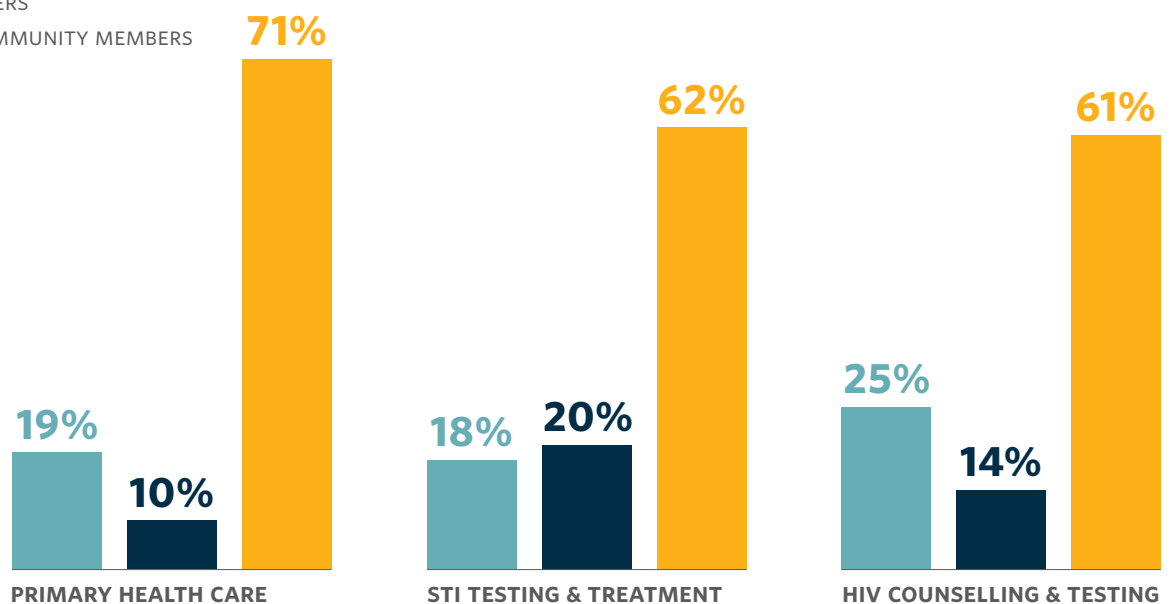
SESSION ATTENDANCE BASED ON GENDER

■ MALE
■ FEMALE



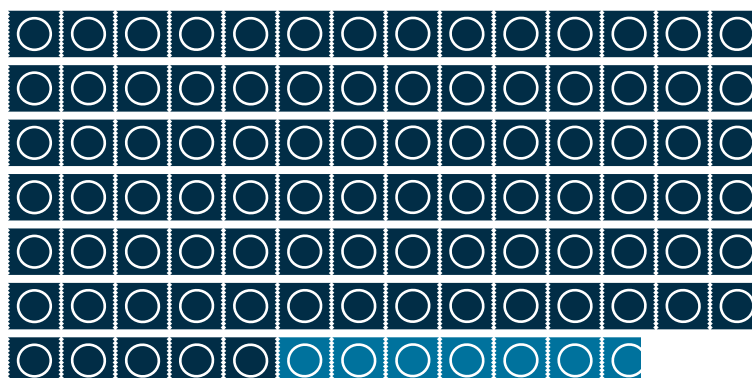
SESSION ATTENDANCE BASED ON OCCUPATION

■ TRUCK DRIVERS
■ SEX WORKERS
■ OTHER COMMUNITY MEMBERS




CONDOMS DISTRIBUTED BASED ON GENDER

■ MALE
■ FEMALE



957,707
TOTAL
CONDOMS

 = 10,000 CONDOMS

OUR PARTNERS PLAY A FUNDAMENTAL ROLE IN ALL THAT WE DO, BECAUSE NO SINGLE ORGANISATION ACTING ALONE CAN TURN THE TIDE IN PUBLIC HEALTH

For this reason, North Star Alliance was built on the principles of partnership, complementarity and accountability. In addition to the partners identified here, we would like to recognise the tremendous support of national governments and individual ministries in each of the countries where we are active, as well as a number of local hospitals and clinics who accept client referrals, share materials, and provide voluntary support to our staff in their communities.



Cato Ridge
Truck Stop





"With optimisation techniques you can achieve more with less or, so-to-say, much, much more with the same. We are proud to be partnered with North Star, and to support their work through the development of optimisation tools that enable more lives to be saved and more people to be reached with important health services across Africa."

LAMBERT VAN DER BRUGGEN
CEO, ORTEC CONSULTING

NORTH STAR OWES ITS SUCCESS TO THE KNOWLEDGE, PASSION, AND ENERGY OF OUR STAFF, MANAGEMENT BOARD, AND SUPERVISORY BOARD

MANAGEMENT BOARD



MR. LUKE DISNEY
Executive Director
North Star Alliance
Utrecht, The Netherlands

Luke has 10 years of experience building international public-private partnerships. In 2006, he was asked by TNT and the World Food Programme (WFP) to take the reins at North Star Alliance (North Star) to develop the organisation and expand its partner base. Prior to this, Luke worked on the ground-breaking TNT-WFP partnership focused on hunger relief.



MR. PAUL MATTHEW
Regional Director, Southern Africa
North Star Alliance
Durban, South Africa

For two decades, Paul has been a driving force in the road freight industry's response to AIDS. Prior to joining North Star's management team in 2009, Paul worked in various executive positions, serving most recently as CEO of Ikaheng HR Services PTY LTD.



MS. EVA MWAI
Regional Director, East Africa
North Star Alliance
Nairobi, Kenya

For over 20 years, Eva has worked in the field of programme management. Prior to joining North Star in 2009 as the General Manager East Africa, Eva was the CEO of St. John's Ambulance Kenya. Eva was promoted to Director East Africa in December 2011.

SUPERVISORY BOARD



MR. GEERHARD DE VRIES
Chairman of the Supervisory Board
VP Global Business Consulting, ORTEC
Atlanta, Georgia, United States of America

Geerhard is VP Business Consulting with ORTEC. Before working with ORTEC, he worked over twelve years as a senior consultant for a large healthcare organisation in the Netherlands. He is involved with ORTEC's Social Responsibility Program in order to contribute to humanitarian aid organisations by deploying ORTEC's resources and expertise to optimize logistical processes.



MR. BAS JANSSEN
Managing Director
TNT Express Road Networks
Duiven, The Netherlands

Bas has worked for more than 20 years at TNT in different functions. Besides being on the Supervisory Board of North Star, Bas is Chairman of the Board for Fleet Forum, an organisation set up in 2003 between worldwide humanitarian organisations and development organisations.



DR. SYED ASIF ALTAF
Global HIV/AIDS Programme Coordinator
International Transport Workers' Federation
London, United Kingdom

Asif is currently working as the Global HIV/AIDS Coordinator in the International Transport Workers Federation (ITF). Over the last 20 years he worked as Programme Manager in a number of international organisations and implemented different reproductive and occupational healthcare programmes.



CAROLINE CHARLES KALONDU
CLINICAL OFFICER
EMALI, KENYA



AUDHRIECH KADYAKAPITA
SITE COORDINATOR
MWANZA, MALAWI

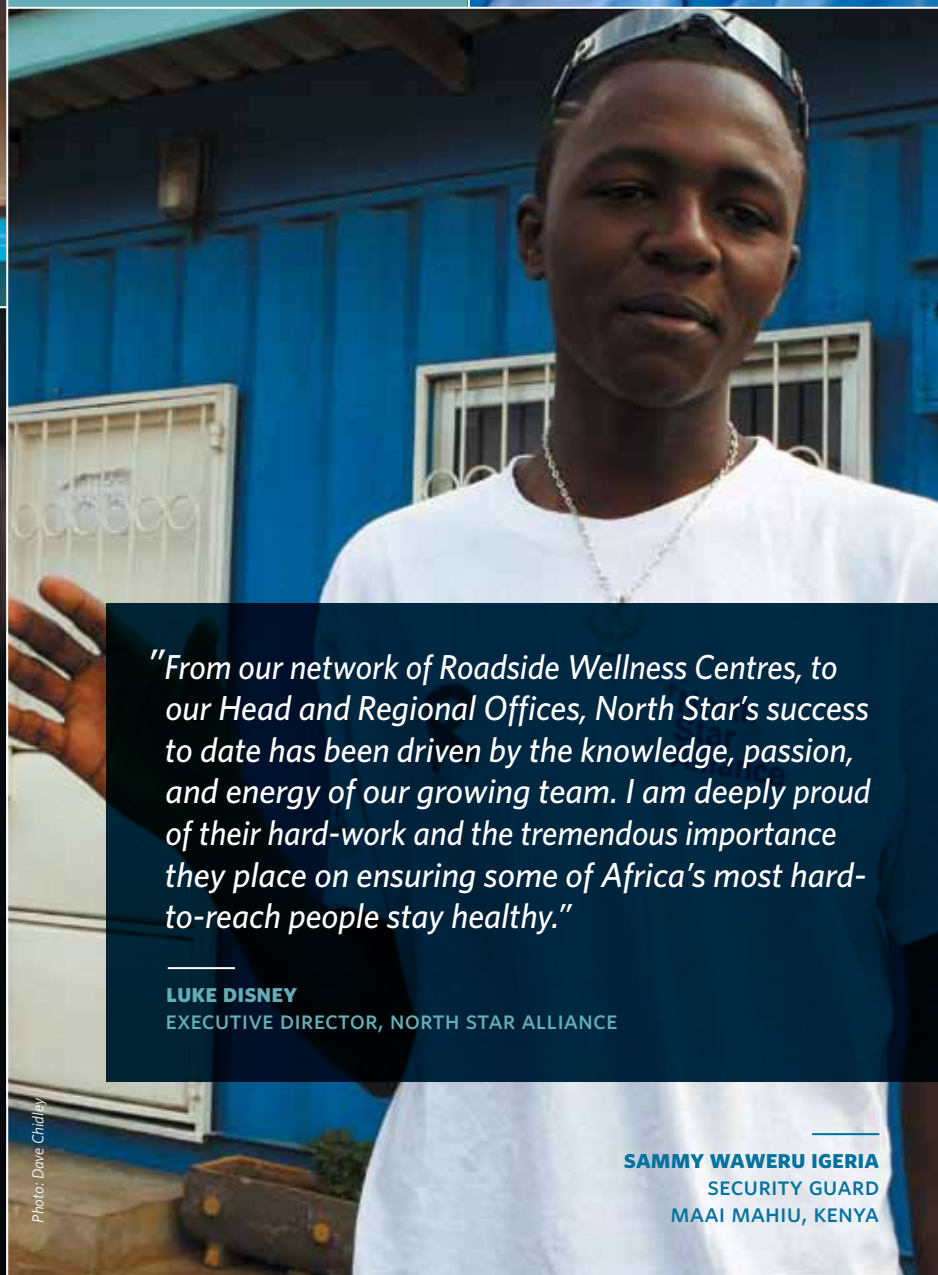
**IN 2012, 132
PEOPLE WERE
EMPLOYED BY
NORTH STAR IN
15 COUNTRIES.**



MARGARET NKWANYANA
CLINICAL OFFICER
CATO RIDGE, SOUTH AFRICA



LUCY JACINTA WANJIRU
VCT COUNSELLOR
MAAI MAHIU, KENYA



SAMMY WAWERU IGERIA
SECURITY GUARD
MAAI MAHIU, KENYA

"From our network of Roadside Wellness Centres, to our Head and Regional Offices, North Star's success to date has been driven by the knowledge, passion, and energy of our growing team. I am deeply proud of their hard-work and the tremendous importance they place on ensuring some of Africa's most hard-to-reach people stay healthy."

LUKE DISNEY
EXECUTIVE DIRECTOR, NORTH STAR ALLIANCE

FINANCIALS

DONATIONS

CASH DONATIONS	EURO
Ministry of Foreign Affairs of the Netherlands	1,367,000
Southern African Development Community	950,500
TNT Express	400,000
Trafigura Foundation	304,500
UPS Foundation (via Fleet Forum)	133,000
FHI 360	113,500
Soa Aids	100,000
Aids Fonds	80,000
Chevron Corporation	75,500
World Food Programme	72,000
Heineken Africa Foundation	37,500
Transport Education & Training Authority	36,000
Walvis Bay Corridor Group	31,000
Other	63,612
TOTAL CASH DONATIONS	3,764,112
IN-KIND DONATIONS	
ORTEC	325,000
World Food Programme	109,000
PharmAccess Foundation	71,000
Other	49,921
TOTAL IN-KIND DONATIONS	554,921
TOTAL DONATIONS	4,319,033

BALANCE SHEET

	2012	2011
ASSETS	EURO	EURO
NON-CURRENT ASSETS		
Property, Plant and Equipment	69,980	79,680
CURRENT ASSETS		
Trade and Other Receivables	254,671	102,950
Cash and Cash Equivalents	1,240,237	603,164
TOTAL ASSETS	1,564,888	785,794
EQUITY		
Restricted Funds	273,545	257,825
Unrestricted Funds	440,940	180,599
Continuity Reserve	250,000	—
Foreign Currency Translation Reserve	(26,501)	(7,254)
TOTAL EQUITY	937,984	431,170
LIABILITIES		
NON-CURRENT LIABILITIES		
Instalment Sale	15,415	8,731
CURRENT LIABILITIES		
Instalment Sale	5,559	23,790
Trade and Other Payables	264,135	182,103
Deferred Income	341,795	140,000
TOTAL LIABILITIES	626,904	354,624
TOTAL EQUITY & LIABILITIES	1,564,888	785,794

COMMITTED TO
IMPROVING THE STATE
OF THE WORLD



"North Star Alliance is a remarkable social enterprise that is creating widescale social change through its network of Roadside Wellness Centres. North Star has achieved success through cross sector collaboration, working with regional governing bodies to influence health policy, building corporate partnerships to scale the clinics, and interacting with local hospitals to ensure consistent healthcare. This type of collaboration is something that we at the Schwab Foundation value highly."

DAVID AIKMAN

HEAD, SCHWAB FOUNDATION FOR SOCIAL ENTREPRENEURSHIP

INCOME STATEMENT

	2012	2011
REVENUE	EURO	EURO
Donations	4,319,033	2,893,460
OTHER INCOME		
Other Income	15,184	4,980
Interest Received	8,370	1,171
TOTAL OTHER INCOME	23,554	6,151
TOTAL REVENUE	4,342,587	2,899,611
OPERATING EXPENSES		
Salaries	1,784,063	1,317,718
Establishment Costs	91,124	144,191
Finance, Legal and Administration	376,160	128,624
Integrated Computer Technology	481,985	459,631
Marketing, Communications and Fundraising	36,268	171,532
Prevention	216,592	57,281
Running Costs	329,750	266,799
Subcontractors External	327,072	—
Travel Costs	173,512	152,105
TOTAL OPERATING EXPENSES	3,816,526	2,697,881
OPERATING RESULT	526,061	201,730
Interest Expenses	—	690
SURPLUS FOR THE YEAR	526,061	201,040

Refer to our website (www.northstar-alliance.org) for the complete set of 2012 audited financial statements.



SINCE NORTH STAR WAS FOUNDED, FOUR GUIDING PRINCIPLES HAVE BEEN THE FOUNDATION FOR OUR APPROACH TO HEALTH CARE

Since North Star Alliance was founded, we've worked to expand our reach each year to some of the people most heavily affected by communicable diseases across Africa; all through our simple but effective "Blue Box" Roadside Wellness Centres (RWCs).

By combining high-quality, measured prevention and treatment services for high-impact diseases like HIV, tuberculosis and malaria in our easily accessible drop-in clinics, we're changing the way companies, governments and communities think about health care.

As a result, we've been able to build a dedicated network of public, private, and humanitarian partners whose diverse skills and support have enabled us to maximise our impact on the ground. For us, this has meant providing essential health care and information to more people, in a shorter time, than we could have ever hoped as a stand-alone organisation. Since we were established in 2006, we've placed four guiding principles at the core of our model:

1

PROVIDE A PLATFORM FOR PUBLIC AND PRIVATE ENGAGEMENT

We are confident that well-managed, efficient and effective regional healthcare networks can create a platform to launch new products and services to complement and subsidise our existing health service packages.

2

DEMONSTRATE RETURN ON INVESTMENT

We ensure that the financial contributions of all stakeholders are clearly linked to the outcomes of our activities. Monthly reports that disaggregate results from individual RWCs and their services are available so that partners can stay abreast of their investments.

3

SHARE THE FINANCIAL BURDEN

We believe that, for the foreseeable future, the costs of providing sustainable access to high-quality health services in most low-income settings cannot be borne by the direct stakeholders (i.e., individuals, communities, and businesses) alone. Indirect stakeholders, such as international donors, multinational supply-chain operators, and philanthropic foundations, will need to remain engaged.

4

DEMONSTRATE IMPACT

We only expect stakeholders to invest in healthcare interventions that have proven their impact. Our computerised system, COMETS, allows us to monitor each RWC's performance and track client visits. Reports can be generated on demand for the entire network or individual RWCs, which gives investors and other stakeholders access to near-real time information.



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