

Himalayan HealthCare (HHC)



2020 Annual Report



OUR MISSION

Himalayan HealthCare seeks to improve the quality of life for some of Nepal's most marginalized communities by providing **sustainable development programs, focusing on gender-sensitive primary health care and rights, community education, income generation and disaster preparedness and response**. This multi-pronged approach to sustainable development empowers villagers to become self-supporting over the long-term.

Himalayan HealthCare (HHC) is a not-for-profit, non-governmental and non-denominational organization providing health care, education and income-generation opportunities to minority and indigenous communities in remote mountain villages in Nepal. Founded in 1992, HHC has provided life-changing services to many thousands of people living in extreme poverty and marginalization. Our community initiatives and development programs have focused on the region of Dhading, which historically has had little support from government agencies or other NGOs.

HHC has served marginalized communities during a decade long civil war (1996-2006), which left a shattered and struggling economy, and a devastating earthquake that took 9,000 lives and destroyed hundreds of thousands of homes, as well as thousands of schools and clinics. HHC continued to serve these communities in 2020 during the Covid-19 pandemic, helping local health providers and government health agencies and facilities with training, equipment and safety materials, while also maintaining our commitment to on-going long-term programs of gender-sensitive primary health care, education and income-generation and disaster preparedness and response to ensure meaningful and multi-

generational improvements. Targeting the root causes of poverty and illness, our programs are developed with the input and active involvement of the communities we serve, and frequently focus on women's core needs. We support villagers in accessing and developing the tools they need to survive and create a sustainable and prosperous future based on self-reliance and independent of our assistance. HHC exists to provide care, opportunity and hope to the people of rural Nepal.

Despite significant challenges due to the Covid-19 virus, HHC continued to serve vulnerable rural communities, thanks to your support and the tireless work of our staff. We continued our core projects of public health and education, which included village student stipends, high school education, empowering Dalit and minority girls and young women with skills training and education providing health training to women health providers and constructing toilets and stoves. We also continued food security initiatives such as vegetable gardening for women farmers and providing therapeutic and other nutritious foods for malnourished children.

We thank you for supporting these communities and sustaining HHC's urgently needed programs. We invite you to read more about the impact of your 2020 donations.

Cover Photo: HHC trained midwife providing homecare in remote Dhading village

Health Care

HHC has been providing primary health care services to communities that had little or no healthcare since its inception in 1992. We have built health posts in villages where there were none and have provided formal training to local youths to lead the health services in their communities, and we continue to do so. This past year was a unique test for HHC as the world struggled with a global pandemic, and Nepal's health care system was challenged to the fullest. Everyone involved in healthcare had to find a way to fight this war.

Covid Relief for Villages

In 2020 almost 300,000 people contracted the virus in Nepal with 10,000 people hospitalized and 2,000 unfortunate deaths. The government struggled to provide enough tests to properly assess the depth of the pandemic and struggled to reopen the country to resurrect the economy when people were deprived of work, food and other necessities of life. After months of lockdown, towards the end of 2020, around 60% of businesses became fully operational and others were slowly coming back to life. Even though the schools were instructed to restart in-person classes, only some public schools managed to do so while the private schools continued with only online classes.

HHC was asked by the regional authorities to have our hospital in the town of Ilam become a quarantine center for the region during

the height of the Covid infection. Over a period of one month, HHC served 19 patients who were cared for in isolation at our facility.

HHC also reached out to the Dhading district health office and provided rural municipalities with thermal guns to measure the temperature of patients and personal protective gear for all the health providers. We also helped train six health providers in remote Ruby Valley and neighboring rural municipalities in Covid care. While we screened hundreds of children for malnutrition in local village clinics, HHC provided over 1,900 mothers and family members with information and tips on Covid care.

Once vaccines were available for essential workers, HHC staff was able to re-start our many ongoing programs which had temporarily halted due to the five-month-long lockdown.

During the pandemic, HHC also supported Drugs Free Society Nepal in Lalitpur with food supplies for their nineteen recovering residents. The organization, founded by Mr. Sonam Sherpa, helps young people recover from substance use and drug dependence disorders while they seek a new path in life. HHC will continue this meaningful partnership with Drugs Free Society Nepal into 2021.

Gynecological Training for Village Midwives

In 2020, HHC for the third year conducted a gynecological training with the support of the Chao Foundation and Transparent Fish Fund. This training allows village health providers to extend much-needed services to all women who live in underserved villages, not just the mothers and infants they typically serve. HHC partnered with leaders of Benighat Rorang Rural Municipality of Dhading District



HHC trainer Ob-gyne specialist Dr. Jha providing critical training to Benighat Rorang midwives

in central Nepal to identify and bring together 11 women health providers (mostly midwives) from the remote corners of the municipality and help provide the centers to conduct the training.

These government-certified midwives receive 18 months of formal government training, which focuses only on prenatal, delivery and post-natal care, and are sent to health stations across the country. They have been providing critical care to mothers and babies, which has helped reduce maternal and infant mortality significantly in rural Nepal. But unfortunately their training does not train them to treat rural women who have other gynecological ailments, many of which

are debilitating and life-threatening, such as prolapse of the uterus, infections, sexually transmitted diseases and cervical cancer.

This important HHC project gives health providers hands-on training on proper gynecological examination, treatment of infections, hygiene and preventive care, basic screening of cervical cancer and timely and correct referral to more advanced medical centers.

Group A: Dr. Rakshya Upreti			
	Trainees	Designation	Work Station
1	Amrita Rimal	ANM (Auxiliary Nurse Midwife)	Benighat Health Post (HP)
2	Pratigya Shahi	ANM	Jayapuri Community Health Unit (CHU)
3	Aasha Ku. Chaudhari	ANM	Syadul CHU
4	Sujata Dharel	ANM	Charaudi Basic Health Center (BHC)
5	Shristika Kandel	ANM	Salanghat CHU
6	Dipa Shahi Thakuri	ANM	Dandagaun CHU
Group B: Dr. Richa Jha			
	Trainees	Designation	Work Station
1	Samjhana Shrestha	AHW (Auxiliary Health Worker)	Benighat HP
2	Birsana Nepal	AHW	Mahadevsthan HP
3	Sabina Chepang	ANM	Dhusa HP
4	Tulasa Devi Burja Magar	Sr. AHW	Gogimara HP
5	Jayanti Bhujel	ANM	Jarung CHU

This gynecological/obstetric training of 11 new midwives provided by specialists from Kathmandu will directly benefit over 15,000 women and lead to an overall improvement in women's health. HHC expects a 15% reduction in maternal mortality and morbidity over a three-year period. Moreover, 25% of girls and young women who suffer from menstrual and related issues will benefit

significantly from advice, monthly follow-ups and necessary medication.

We are grateful to obstetrical and gynecological specialists Drs. Rakshya Upreti, Richa Jha and Dipak Jha for providing the training and also Dr. Madhu Shrestha, Chief Consultant of Paropakar

Maternity and Women's Hospital, for coordinating and helping us with this training at the Benighat Health Post in December. The follow-up training is slated for February 2021. HHC will continue this training to frontline female health providers across rural Nepal so that more and more women are provided essential care.

We would like to express our special thanks to Mr. and Mrs. Ramesh Shankar Shrestha for their decade-long support of referred patients from northern Dhading village.

ILAM HOSPITAL PROJECT

Since the start of the Ilam Hospital project in 2004 during the civil war in Nepal, tens of thousands of patients who had little care in a region of over 300,000 people, received health services including emergency surgery in a rural setting.

In 2020, the hospital was deemed a Covid-19 quarantine center to help the Ilam community during the pandemic. As soon as the pandemic lockdown eased in Nepal, the hospital property and infrastructure was leased to Nepal Apollo Hospital and Trauma Center to continue services in Ilam.

SANITATION PROJECT

'ONE HOME ONE TOILET'

HHC launched "One Home One Toilet," a WASH (Water, Sanitation and Hygiene) program in the remote villages of Tipling, Sertung and Lapa in 1993 and since then started with building

temporary outhouses and starting in 2010 has built seven hundred and fifty permanent toilets with septic tanks in the three villages.

During 2020, HHC continued with the campaign and built 50 more permanent toilets in the villages of Tipling and Sertung, with the support of One Day's Wages, GlobeMed at CU Boulder, St. Thomas Episcopal Church in Hanover and individual donors.

HHC takes great pride in partnering with the toilet recipients who take full ownership of the toilets by providing land, collecting local materials and contributing three months of labor. These toilets directly benefited 250 family members, as well as indirectly improved the overall sanitation of thousands in their community.

There is a need for another 400 toilets for the remote Ruby Valley Region to be an 'Open-Defecation Free' area, a milestone that is both a national and a global goal. HHC will continue to raise funds to build several hundred more toilets to reach that goal.

Without toilets, open defecation can lead to dysentery, typhoid (enteric fever), worm infestation and chronic gastritis due to repeated GI infections. Installing toilets saves lives by preventing these diseases, improving overall health outcomes and contributing to an improved standard of living. Home toilets also provide safety for vulnerable community members (e.g. children, elderly, those with physical disabilities) who no longer need to venture away from their homes to access sanitation facilities. Increased social acceptance and normalization of home toilets can also be leveraged to increase motivation and engagement in other social change and

public health improvements projects like efficient woodstoves, clean water projects, etc.

NUTRITION PROJECT

HHC has been working to reduce the prevalence of malnutrition in children under five years of age, improve health, and reduce morbidity and mortality risk since the mid-1990's through gathering data through research projects and collaborating with local health care providers.

HHC's research in 1995 found that 227 out of 1000 children under the age of five (U5) died before they reached their fifth birthday. Most children in Tipling, Sertung and Lapa villages showed signs of malnourishment. In 2010, HHC piloted a malnutrition management program after receiving several tons of Plumpy'Nut, a Ready-to-Use Therapeutic Food (RUTF), from Doctors without Borders. We screened 832 children of whom 179 (21.5%) had various levels of malnutrition while many others were borderline. In 2014, HHC's nutritionist intern engaged in academic research using government data, and this confirmed ongoing high numbers of malnourished children under five in the northern Dhading villages of Lapa (25.92%), Sertung (23.46%) and Tipling (14.43%). This underlined the ongoing need for long-term child health



improvement in the most neglected region of Dhading.

In 2020 with the support of the Chao Foundation and the Transparent Fish Fund, HHC, in partnership with the Ruby Valley Rural Municipality and Dhading District Health Office, HHC carried out an Integrated Management of Acute Malnutrition program (IMAM).

HHC's IMAM project provided government nutrition experts to train 46 village health care providers from eight villages and provided 74 or Female Community Health Volunteers (FCHVs) with nutrition project orientation to help identify targeted children, encourage mothers to bring them for screening and ensure that the malnourished children eat the fortified food correctly.

Together they screened 1,953 children between the critical ages of six and fifty-nine months by the end of December 2020. The anthropometric measurements (weight for height) were used to calculate the Z- score, which is basically a standard deviation scale to identify children who fall short compared to a standard set by the W.H.O. or the Ministry of Health of Nepal.

To ensure that children who could have marasmus were not left out, MUAC tests (Mid Upper Arm Circumference) were also conducted to measure the subcutaneous fat in the upper mid-arm which disappears because of inadequate protein, carbohydrates and fats in their diet.



IMAM trained Darkha Health Provider measuring height of child at Kuri village

Out of the 1953 children screened at the end of December, 378 were found to be malnourished to varying degrees: 37 were identified as severely malnourished (SAM), 92 as moderately malnourished (MAM) and 279 as mildly malnourished. The remaining children will be screened in early 2021.

To help these children, HHC acquired 700kg of **RUTF** (Ready to Use Therapeutic Food) a peanut-based food containing sugar, skimmed milk, vegetable oils and micronutrients and 36,000 sachet of BalVita (a micronutrient powder to sprinkle over food) from the government storage in Pathlaiya (southern Nepal) which was transported to Dhadingbesi and then carried by mules to the villages. HHC also purchased and transported two tons

of **RUSF** (Ready to Use Supplemental Food).

The foods were distributed immediately and mothers and family members were trained in constituting and dispensing the foods.

- The malnourished children will be closely monitored once or twice a month depending on the severity of their condition for a period of one year. Our field officers report that the children are already responding well to the foods.
- Everyone directly involved with screening and treatment were provided with **PPE** and other safety goods like hand sanitizer, surface disinfectants, masks, etc.



RUTF sachets provided to child in Tipling Health Post

2. EDUCATION

Since 1993, HHC has supported village schools and adult literacy programs. Before our village programs were initiated, only a handful of children attended school. Today, all of the villagers realize the importance of education and more girls than boys are enrolled in schools.

Unfortunately the schools remained closed due to the pandemic lockdown for most of the year, but HHC ensured that the students

VILLAGE SCHOOL PROGRAM

Village schools in Nepal are government-run, and the villages have little financial means or qualified personnel to support them with additional staff or funds. Since 1995, HHC has supported the construction of schools with libraries and toilets for girls, as well as provided teacher training and supplemental salaries, furniture and computers. These interventions helped improve educational standards and expand enrollment in 20 schools in the three northern Dhading villages of Tipling, Sertung and Lapa.

There are only two high schools in Northern Dhading and most students in the rural areas stop attending school after their primary years due to lack of financial support.

In 2020, with the help of the school management committees, principals and HHC field supervisors, HHC identified and supported 20 students (14 girls and 6 boys) from Tipling and Sertung villages whose families could not afford to put them through school and put food on the table. We are ensuring that more Dalit (once untouchables) students are supported and in 2020 we provided support for seven children.

School/Village	Students		
	Total	Girls	Boys
Dongden Devi Secondary School, Tipling	2	2	
Mukrab Devi Secondary School, Borang	7	7	
Chyamra Devi Secondary School, Sertung	8	3	5
Kharsa Basic School, Sertung	3	2	1
Total	20	14	6

continued to receive the small stipend to help their family out during these hard times when family earnings were diminished and also to ensure that the parents continue with their children's education once the schools resumed. This also ensured that the older girls are not married off by the family when the school remains closed.

Many of these high school graduates are further supported by HHC when they attend technical schools and colleges. They receive training as health providers, teachers and skilled technicians (midwifery, civil overseer, electrical overseer, land surveyor, etc.)

and typically assume the running of their village health posts, schools and trades in their villages.

In 2020, we continued to support two young women in midwifery and one in nursing in the city of Kathmandu with the support of the Chao Foundation and the Transparent Fish Fund. These young women are from the remote northern Dhading villages of Tipling, Jharlang and Lapa. The midwife training lasts approximately two years while the nursing training is for three years. After their training Apsara, Tuni and Rasa Maya will serve in their villages providing life-saving obstetrical care. They will also be salaried and become role models for other young girls in their communities.

We also sponsored Grishma and Reli Maya to complete their two years education diploma. They will be appearing for their final

exams in 2021. In addition, HHC also supports the education of three of its staff's children.

A special thank you to Mr. Ramesh Shankar Shrestha and Mrs. Anju Shrestha for continued support of our village stipend program since 2007.

Photo - HHC supported Student Midwives in college uniform



3. INCOME-GENERATION

HHC supports income-generating activities in the villages, including vegetable and fruit farming for women farmers, raising livestock and creating handicrafts from recycled materials



JEEVANKALA (Art for Life)

One of our most successful projects is our line of handcrafted artisanal goods, JeevanKala. The crafts, which are made from recycled and locally sourced materials, can be found in stores in Kathmandu and in some stores in

North America and Europe. A proud member of the Fair Trade Federation, JeevanKala has trained and supported more than 1,000 artisans in Nepal and raised more than \$1 million to support HHC's programs.

In 2020, the tourism industry in Nepal collapsed due to the pandemic and HHC had to close down its most productive craft

store in the middle of Thamel, which is a tourist hub in Kathmandu. This led to cutting down production and letting go of staff which was hard on the hundreds of women artisans who made a real living through JeevanKala. But thankfully because of a few long term wholesale buyers of JeevanKala from Germany and Australia, we have kept the business alive so that we can bounce back when times are better to continue to support women artisans and keep the tradition alive.

JeevanKala is proud to support women artisans and give real meaning to the word *JeevanKala* or Art for Life in the Nepali language. JeevanKala has been registered as a handicraft company

in the Nepal since 2012 and maintain one store now in Lalitpur at the HHC Nepal office in Kathmandu.

You can help women artisans and their families by visiting **Jeevankalagifts** at **Etsy.com** or click **this link** (https://www.etsy.com/shop/JeevankalaGifts?ref=search_shop_redirect) or you can email Soni (parajuli.soni@gmail.com) to help access more crafts from Buffalo, NY and Boulder, CO.

The Nepal HHC chairwoman, Soni KC Parajuli, manages this unique handicraft project and is supported by Geeta KC, Saru Maharjan, Thuma Ale and Nabin Maharjan.



JeevanKala store in Kathmandu

WOMEN FARMERS' FOOD SECURITY AND INCOME: VEGETABLE AND FRUIT FARMING

The remote and mountainous villages of Northern Dhading have traditionally been dependent on crops such as corn, potato and millet, which are highly susceptible to unpredictable weather and have a high risk of pest infestation. This, combined with junk food brought in on mules from larger centers, has resulted in poor nutrition and food insecurity for the region.

HHC started agricultural programs in 2009, providing training to local farmers, distributing seeds and organizing regular learning expeditions to agricultural sites in Ilam. In 2020, HHC continued to work with farmers from the village of Sertung especially the women farmers, through the HHC experimental farm established in Sertung in 2015. HHC hopes that it will bring about a collective effort to cultivate healthier crops, including a variety of nutritious vegetables and fruits. This will improve the overall nutrition of the farmers' families and can provide a cash crop for these farmers, who traditionally live and work in a barter culture.

To foster awareness of the need for better nutrition, HHC initiated the 'One Family One Kitchen Garden' campaign several years ago, combining education with distribution of vegetable seeds and materials for greenhouse tunnels. More than 50% of households in Sertung village now grow additional crops, such as tomatoes, cabbages, chilies and other vegetables. The HHC farm in Sertung village is used to demonstrate simple modern agricultural techniques adapted to this region while also displaying vegetables and other plants with nutritional or commercial value. In this single-site



Expert teaching about solar drying of vegetables in remote Sertung village

experimental farm, farmers now have access to seeds, seedlings, fruit trees and other farming materials which would not otherwise be available locally.

In 2020, many farmers visited the center and purchased diverse vegetable seeds, obtained from centers and shops in Kathmandu. The Sertung center has the capability to show educational training

videos on a large screen on how to grow vegetables and other foods, the hazards of pesticide and the benefits of balanced nutrition. Dilli Tamang, a trained agriculture technician, manages this center, and in 2020 he helped over 50 farmers with issues relating to pests, bio-pesticide made from cow urine and cultivation of tomatoes, cardamom and fruits. He was able to provide a variety of vegetable seeds that were new to the region, including turnip, varieties of squash, capsicum or bell pepper, cabbage, onions, coriander and cauliflower. He continued to visit the farms of the twenty women farmers who received a special training at the Lumle Regional

Agricultural and Research Center in 2019 through The International Foundation to help them with their new vegetable crops and fruit trees.

HHC will also continue to use this center to train farmers, share information and host programs with visiting experts for the benefit of the 10,000 farmers that live in the many villages of the Ruby Valley region. The farm also produced and sold hundreds of kilograms of organic tomatoes as well as kiwi fruit, thus introducing new nutritious food to the community.

PARTNERS



PING & AMY CHAO
FAMILY FOUNDATION



The **Chao Foundation** and the **Transparent Fish Fund** continue to support HHC's efforts in empowering women in remote rural Nepal through support of minority and Dalit girls in school and college and providing scholarships for young women to become midwives and nurses.

Chao Foundation and TFish Fund continue to support the gynecological training of midwives in rural Dhading region of central Nepal so that more village women have access to better care.

HHC also received support for the Child Nutrition Project to serve 2500 children between the age of six and fifty-nine months during this critical age when malnutrition can compromise physical and mental development and also lead to long-term health issues.



GlobeMed at Colorado University in Boulder has been a strong partner of HHC since 2010. The GlobeMed students have supported school reconstruction, toilets and stove construction, farming plots for Dalit women, stipends for minority and Dalit students and other vital projects over the years.

HHC hosts GlobeMed interns annually through the Grass Roots Onsite Work or “GROW” internship. Interns are introduced to HHC’s grassroots global health intervention, a part of HHC’s larger tri-pronged sustainable rural development program of healthcare-education-income for isolated and remote rural communities in Nepal. This cross-cultural connection is a rich aspect of our partnership, and HHC prioritizes youth partnership and youth empowerment in all our work.

Unfortunately due to the Covid pandemic, the May 2020 in-person GROW internship had to be cancelled but to continue with this enriching experience, we conducted a virtual internship. We are grateful to Anila Narayana, Daniel Thomas, Shreya Sharma and Katie Hirasaki for their time away from studies to help HHC with a number of projects.

We are grateful to GlobeMed at CU for its long partnership and continued support of vital projects that truly help people in rural Nepal.



ST. THOMAS EPISCOPAL CHURCH
Hanover, New Hampshire

HHC is grateful to St. Thomas Episcopal Church in Hanover, NH for its continued support of projects in rural Nepal to serve the most marginalized populations. With the Church’s generous support, a total of 20 families partnered with HHC to build permanent toilets, benefitting 100 people, including 35 children. More than 5,000 Sertung village community members are now better protected from deadly fly-borne diseases like typhoid, cholera, dysentery, etc.



Brothers Brother Foundation (BBF) helps bridge the gap between aid and sustainability by supporting localized programs and providing essential resources in the area of Healthcare, Infrastructure, Disaster Response, and Education (H.I.D.E.)

BBF has been an incredible partner since the devastating 2015 earthquake in Nepal. In 2020, BBF helped sponsor 15 permanent toilets with septic tanks for the village of Sertung that directly impacted 75 people, including 25 children. HHC is most grateful to BBF for its continued support.

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OUR DONORS

We thank our many friends and supporters. Everything we do for the people of Nepal is made possible by these wonderful individuals and organizations that have made both monetary and in-kind donations. We are pleased to recognize them here, and express our hope for their support in the future.

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2020 CONSOLIDATED FINANCIAL STATEMENTS YEAR ENDING DECEMBER 31

Please note that these are reviews of the financial statements prepared by HHC.

A review includes primarily applying analytical procedures to management's financial data and making inquiries of management. A review is substantially less in scope than an audit, the objective of which is the expression of an opinion regarding the financial statements as a whole.

Numerous volunteers have contributed many hours to HHC's program. HHC has valued the program-related services at fair market value because those services constitute an integral part of the efforts of the organization and would be purchased if not provided by volunteers. Equivalent amounts of revenue and expense are recognized for these services.



HIMALAYAN HEALTHCARE, INC.	
STATEMENT OF ACTIVITIES	
FOR THE YEAR ENDED DECEMBER 31, 2020	
<u>Support and Revenue</u>	
Cash contributions	164,264.00
Contributions of marketable securities	3,714.00
Sales of products	1,722.00
Dividend income	17.00
Net assets released from restrictions	
Total support and revenue	\$ 169,717.00
<u>Expenses and Losses</u>	
Cost of goods sold	327.00
Program services	113,962.00
Fundraising	9,925.00
Management and general	22,146.00
Net realized loss on sale of marketable securities	54.00
Total expenses and losses	\$ 146,414.00
Change in Net Assets	23,303.00
Net Assets, Beginning of Year	117,553.00
<u>Net assets, End of Year</u>	\$ 140,856.00
For more information, please see the full notes and independent accountants' review report on our website	