WE ARE
mobilizing children for life

Impact Report 2019
WE ARE MOBILIZING CHILDREN FOR LIFE
2 million children are growing up with a treatable disability.

MiracleFeet is on a mission to eliminate a leading cause of physical disability worldwide. Over two million children under 10 are living with the physical and social consequences of a readily treatable condition—a common birth defect, known as clubfoot, that causes one or both feet to turn inwards and upwards.

175,000 babies are born with it every year, mostly in low- and middle-income countries where fewer than 15% have access to the low-cost treatment. Neglected clubfoot is a root cause of illiteracy, abuse, malnutrition, and poverty in many parts of the world.

ONLY ONE IN FIVE CHILDREN GLOBALLY CAN ACCESS THE SOLUTION.

MiracleFeet is bringing the low-cost nonsurgical standard of care, widely available in the US, Europe, and other wealthy countries, to underserved markets worldwide. We are the largest global organization solely dedicated to ending this solvable problem for every child born with it, forever.

A $500 TREATMENT PROVIDES FULL, LASTING MOBILITY IN 95% OF CASES.

While we cannot eradicate the birth defect, we can prevent the extreme disability it causes and radically change the trajectory of millions of lives. 95% of cases can be cured at an average cost of less than $500 per child. A highly-effective treatment provides lifelong mobility, independence, and opportunity for children affected by this common condition.
As we embark on MiracleFeet’s 10th year, and I reflect on the scale of change we achieved in the past year alone, my head swirls with the stories of all those we have helped. Children like three-year-old Yanni, whose parents feared she would never walk until they finally found care for her in Paraguay. The joy in Yanni’s eyes, as she shows off her new brace, is proof of how resilient kids are and what this treatment means for their futures.

These stories of the hopes and struggles of children and families, and of the dedication of the doctors, physical therapists, midwives, and social workers—each making mobility possible for thousands of children where we work—inspire and drive us every day. In the pages of this report, I hope you see the scale of change that we—MiracleFeet, together with our partners, donors, and supporters—are catalyzing for so many worldwide.

We know it’s possible to deliver treatment to every child born with this preventable disability globally. This is a problem we know how to solve for a child before they learn how to walk, and I believe it’s a problem we can solve for the world in our lifetimes.

In just nine years, MiracleFeet has scaled the proven solution for clubfoot to 27 countries. We have reached over 40,000 children—and, in some countries, like Paraguay, Sri Lanka and Liberia, over 60 percent coverage of those in need. And 2019 was a record year:

- We are reaching more children, in more countries, than ever before—and a growing, substantial percent of the need in many places.
- We are building momentum and diversity in MiracleFeet’s financial resources, with record-breaking support from an array of individual donors, corporate sponsors, and major foundations.
- We are propelled forward by the powerful results of an external impact evaluation, proving how effective and life-changing the intervention we’re scaling is for those we’ve treated so far.

We are at a turning point in solving this neglected problem. In 2005, fewer than 500 children in all low- and middle-income countries combined received proper treatment. **500 total**—from any NGO, clinic, or provider—of the 157,000 born with clubfoot annually in these regions. Last year, over 70 times as many were treated in the same countries.

“The potential to eliminate a major disability from the planet is very real.”
The year-over-year growth in clinics all over the world providing this treatment is astounding and yet completely rational: the method works; it is low-cost; many types of health workers can learn and provide the technique; and it is ideally suited to low resource environments. What’s needed now is large-scale awareness, funding, coordination, and partnership. And it’s happening.

Do I believe we can reach millions? Yes, now more than ever. The potential to eliminate a major disability from the planet is real. MiracleFeet is at the forefront of this movement. As the largest global organization solely focused on bringing clubfoot treatment to every child who needs it—we are building the treatment network, training local providers, and securing the public health partnerships, facilities and supply chains required to ensure all babies born with this preventable disability, everywhere, will eventually access care.

Thank you for helping us give so many children life-long mobility and opportunity.

**Chesca Colloredo-Mansfeld**  
*Executive Director & Co-Founder*
WE ARE REACHING MORE CHILDREN IN MORE COUNTRIES THAN EVER.

MiracleFeet, with local healthcare providers and governments, has shown that scaling this proven yet relatively new solution to a major public health challenge is possible. In nine years, we have rigorously developed and tested the model needed to take this to scale and cultivated the partnerships to ensure lasting change.

This year, our partners enrolled more children than ever in treatment—62% growth over the previous year—and continued care for an additional 14,700 children completing their treatment at 188 clinics worldwide.

8,502 + 14,700
NEW CHILDREN ENROLLED IN TREATMENT IN 2019.
ADDITIONAL CHILDREN STILL ACTIVELY RECEIVING TREATMENT.

40,000 CHILDREN REACHED SINCE 2011.
GLOBAL GROWTH: PATIENTS
Children reached since MiracleFeet’s founding, per year and cumulative (as of June 30, 2019).

GLOBAL GROWTH: COUNTRIES
Countries supported since MiracleFeet’s founding, per year.
EXTERNAL EVALUATION PROVIDES
Proof of Impact

MiracleFeet commissioned an in-depth external evaluation to understand how well we are fulfilling our mission of changing the trajectory of children’s lives by treating clubfoot, and whether we are building sustainable treatment capacity in the countries where we work.

Acumen-founded Lean DataSM (now 60 Decibels) conducted the evaluation. They interviewed 470 guardians of children treated at least two years ago by MiracleFeet’s network of partners in three countries—India, Tanzania, and the Philippines—and 70 healthcare providers globally.

The results? MiracleFeet exceeded, and in some cases nearly doubled, benchmarks of client satisfaction and success from Acumen’s portfolio of 350+ evaluations for leading organizations, like the Omidyar Network, World Bank, DFID, and many others.

98% SAY THEIR QUALITY OF LIFE HAS IMPROVED DUE TO TREATMENT

94% OF PATIENTS CAN ALWAYS WALK WITHOUT DIFFICULTY OR ASSISTANCE

82% OF PROVIDERS WOULD NOT BE ABLE TO REPLACE MIRACLEFEET TRAINING TO TREAT CLUBFOOT

83 OUR NET PROMOTER SCORE, NEARLY DOUBLE LEAN DATA’S PORTFOLIO BENCHMARK

VIEW THE FULL REPORT AT WWW.MIRACLEFEET.ORG/IMPACT-EVALUATION
THE SOLUTION
WE ARE SCALING

Until the past decade, most children born with clubfoot in low- and middle-income countries were not treated due to the complexity of surgery and limited access to safe services. When the non-surgical Ponseti Method became the orthopedic standard for treating clubfoot in 2005, a global movement was born.

The method is extremely effective, restoring full mobility in 95% of cases. It requires a series of casts to gently stretch the feet, a simple outpatient procedure to release the Achilles tendon, and afterwards, a brace worn while sleeping at night to prevent relapse (following an initial three-month period when it is used for 23 hours/day). The simplicity of this non-invasive treatment is ideal for low resource settings, since only basic supplies are needed.

This medical innovation makes it possible to treat a leading birth defect and disability inexpensively and effectively on a global scale.

MiracleFeet innovations deliver a powerful treatment at scale.

The award-winning MiracleFeet Brace
The FDA-registered MiracleFeet Brace—developed in partnership with Stanford University’s d.school, Clarks Shoes, and Suncast—received an official patent this year. Worn at night for four years to prevent relapse, the brace is a critical component of successful treatment—and often the most difficult for children and parents. MiracleFeet created its $20 brace as a low-cost, user-friendly alternative comparable in performance to braces costing between $350 - $1,000 in the US.

This year, we distributed over 15,600 pairs of shoes and 8,200 bars to 18 MiracleFeet country programs plus additional clinics in non-partner countries. When providers requested a smaller size bar and shoe as they started to see younger patients, we designed and manufactured a new set to better fit our smallest patients. The new bar and shoe will arrive at participating clinics in late 2019.

Finally, the new results of a 2-year study using sensors in India show the MiracleFeet brace performed as well as the locally-produced brace, resulting in no relapses, and meeting all expected standards for a safe and effective clubfoot brace.

eLearning
To enhance training outcomes, MiracleFeet continues to invest in new tools to supplement the Global Clubfoot Initiative’s (GCI) Africa Clubfoot Training Program (ACT), a standardized training curriculum developed by global experts, approved by the Royal College of Surgeons in the UK, and officially embraced as MiracleFeet’s standard training curriculum worldwide. We completed the world’s first 3D computer simulation of a clubfoot and made progress on a digital version of the basic Ponseti course, in partnership with OpenPediatrics at Boston Children’s Hospital. These tools will be tested and introduced as part of a blended learning platform in 2020.

A series of plaster casts, changed once a week, gradually correct the feet.
CAST mobile data collection app
MiracleFeet’s mobile data collection application CAST is transforming how we gather and use real-time data worldwide and amplifying our focus on treatment precision and program quality.

In 2019, we completed the global rollout of CAST to 168 clinics across 25 countries, now storing 23,667 patients’ medical records documenting their full treatment progress. Almost all MiracleFeet-supported clinics have adopted the application.

CAST is enhancing data-driven decision-making at the local level and provides MiracleFeet’s global staff and donors greater confidence in data integrity and treatment quality. The tool syncs with Salesforce and Tableau to render easy-to-understand dashboards, with sophisticated analytics and reporting capabilities. Providers say CAST has significantly improved their workflow, and it has expedited MiracleFeet’s global reporting capabilities.

CAST is the best tool we’ve ever had. It motivates providers to do a better job.

- PHYSICAL THERAPIST IN TANZANIA
WE ARE MOBILIZING CHILDREN FOR LIFE

Local health systems fund 95% of MiracleFeet clinic space worldwide, up from 75% the previous year.

Local health systems pay providers’ full salaries in 99.95% of MiracleFeet-supported clinics in Africa.

Public hospitals provide all casting supplies at 86% of supported clinics in Latin America.

LATIN AMERICA
$609 average cost to treat one child in 2019

AFRICA
$473 average cost to treat one child in 2019

WE ARE building sustainable treatment systems worldwide
MiracleFeet opened 76 new clinics in 2019, expanding our treatment network to 188 clinics in existing public and private health facilities in 27 countries across Asia, Africa, and Latin America.

Our advocacy with local governments to increase the publicly-funded portion of the cost of clubfoot care over time is paying off. Through our network of partners, providers, and Ponseti method trainers we are creating sustainable access to clubfoot treatment for years to come in countries where we work.

Note: Cost/child includes US program management and oversight, as well as in-country costs. Previous estimates were based on only in-country costs. This change is an effort to represent the full cost to treat a child.

Local governments employ 70% of MiracleFeet trainers in East Africa.

Paraguay, Sri Lanka, Liberia are treating at least 60% of new clubfoot cases nationally.

1638 healthcare workers including midwives, nurses, doctors and community health workers were trained in early detection and referral, and community awareness.

ASIA
$444 average cost to treat one child in 2019

INDIA
$355 average cost to treat one child in 2019

500 new providers in 17 countries were trained in the Ponseti method through MiracleFeet in 2019.
OUR IMPACT IN AFRICA

MiracleFeet’s growth—in partners, clinics, providers and, ultimately, children reached—continued throughout Africa in 2019, where we enrolled 3,680 children in treatment. We launched new programs in Nigeria, Gambia, Mali, and Somalia. And our largest and most established programs—in Liberia, Madagascar, Tanzania, and Uganda—accounted for much of our global growth in children reached.

Bringing Mobility to Children in War-Torn Somalia: After years of planning how to support a core group of passionate providers in Somalia who wanted to address the enormous backlog of untreated clubfoot in their country, MiracleFeet launched a partnership with International Committee of the Red Cross (ICRC)/MoveAbility, the Somali Red Crescent Society (SRCS) and NorCross to provide training and material support for three rehabilitation centers in Mogadishu, Galkayo and Hargheisa. Ten Somali providers were trained in March by MiracleFeet East Africa trainers and twenty-six children were treated by the end of FY 2019.

Increasing Early Detection and Referral at Birth: Early referral to treatment is critical to achieving the best possible outcomes for children. In Congo—and many other countries—our partner led early detection and referral trainings for midwives at healthcare facilities in the two largest cities. Those facilities now account for 57% of all children receiving treatment in the country. Two years ago, most nurses and midwives said they paid little attention to deformities at birth. But that’s changed—and these midwives are playing a major role in linking babies to treatment that will dramatically change their lives.

Training Africa’s Future Ponseti Providers: MiracleFeet held a keystone training-of-trainer course in Morocco, forming Francophone Africa’s first team of 10 new Ponseti trainers—from Madagascar, Mali, Senegal, Congo, Guinea, and Morocco. East Africa now has the largest and most experienced team of certified Ponseti trainers—17 total—who support MiracleFeet training efforts throughout the region; 70% are employed by the local government.

<table>
<thead>
<tr>
<th>All-Time</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Patients</td>
</tr>
<tr>
<td>Republic of Congo</td>
<td>259</td>
</tr>
<tr>
<td>Association pour le Développement de la Réadaptation et du Bien Etre</td>
<td></td>
</tr>
<tr>
<td>Gambia</td>
<td>51</td>
</tr>
<tr>
<td>The Gambia Clubfoot Foundation</td>
<td></td>
</tr>
<tr>
<td>Guinea</td>
<td>60</td>
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<tr>
<td>Faith Clinical Orthopedic Rehabilitation Center</td>
<td></td>
</tr>
<tr>
<td>Liberia</td>
<td>1,960</td>
</tr>
<tr>
<td>Faith Clinical Orthopedic Rehabilitation Center</td>
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<tr>
<td>Madagascar</td>
<td>634</td>
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<tr>
<td>Fondation TELMA</td>
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<tr>
<td>Mali</td>
<td>133</td>
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<tr>
<td>Action de Solidarité aux Enfants Atteints de Malformation du Pied Bot (ASEMP)</td>
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</tr>
<tr>
<td>Nigeria</td>
<td>95</td>
</tr>
<tr>
<td>The Straight Child Foundation</td>
<td></td>
</tr>
<tr>
<td>Senegal</td>
<td>77</td>
</tr>
<tr>
<td>DAWH Senegal (German Leprosy and Tuberculosis Relief Association)</td>
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<tr>
<td>Somalia</td>
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<tr>
<td>International Committee of the Red Cross (ICRC)/MoveAbility</td>
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<td>Tanzania</td>
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<tr>
<td>Tanzania Clubfoot Care Organization (TCCO)</td>
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<tr>
<td>Uganda</td>
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<tr>
<td>Comprehensive Rehabilitation Services Uganda (CoRSU)</td>
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<tr>
<td>Zimbabwe</td>
<td>2,333</td>
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<tr>
<td>Zimbabwe Sustainable Clubfoot Program (ZSCP)</td>
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</tbody>
</table>
MATINDE

Matinde was born with bilateral clubfoot. So was his father. And his oldest sister. But he is the first in his family to receive treatment—from a MiracleFeet-supported clinic 60 KM from their home, one of 34 run by MiracleFeet’s partner, Tanzania Clubfoot Care Organization. Matinde’s father, Bundala, has navigated his entire life with the painful disability of neglected clubfoot. “Thanks to this treatment, my son won’t have to face many of the struggles and hardships I’ve had to deal with throughout my life. My son can now have a much better life than the one I had.”

Nearly 3,000 children are born with clubfoot in Tanzania every year. Matinde is one of 1,467 children MiracleFeet enrolled in treatment there last year.
OUR IMPACT IN ASIA

3,315 new children began treatment throughout Asia with MiracleFeet’s support in 2019—56 percent more than the previous year. New partnerships with strong organizations in Bangladesh and the Philippines contributed to this growth: Walk For Life (WFL) in Bangladesh brings 10 years of expertise in managing clubfoot programs, and the Philippine NGO Council on Population Health & Welfare, Inc. (PNGOC), based in Manila, has deep experience in strengthening health service delivery through public and private systems.

Geospatial analysis targets program expansion to reach more patients: In a nation of 7,000+ islands like the Philippines, planning clinic locations so they are accessible to the most people possible is one of the challenges to scaling specialized treatment for conditions like clubfoot. We worked with PNGOC to analyze population density and birth rates across the country to estimate areas with the highest need for clubfoot services—where the most babies will be born each year with clubfoot. We used mapping data to design an expansion plan for MiracleFeet clinics in the Philippines—and a similar approach to develop long-term expansion plans for reaching the unmet need throughout Asia and other regions. Our partner in Nepal introduced outreach initiatives to expand services to reach the most remote areas of the country that are not densely populated but hard to reach.

Professional networks inform outreach strategies: Learning what drives awareness in different contexts is critical to reaching more parents and their children. In Cambodia and the Philippines, our partners formed country-wide professional networks (among clinic assistants, orthopedic surgeons, and other clubfoot providers) to share lessons learned and plan new strategies for community awareness, parent education, and social media outreach to reach more families in the coming year. Intra-regional trainings for CAST allowed Asian partners to share lessons learned, inspiring smaller partners such as the one in Indonesia to reflect on next steps for reaching more children in their country.

Creating alliances to raise the profile of clubfoot disability: In Myanmar our partner is networking with other NGOs in the disability and community development sectors to strengthen their local presence. In Sri Lanka, our partner participated in a working group with the Youth, Elderly, and Disability (YED) Unit to include clubfoot braces in the assistive devices list drafted by the Government. Our partner in Indonesia built relationships with National Nurse and Midwife associations to improve timely referrals of babies born with clubfoot.

<table>
<thead>
<tr>
<th></th>
<th>All-Time</th>
<th>2019</th>
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<tr>
<td></td>
<td>Patients</td>
<td>New Patients</td>
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<tr>
<td>Bangladesh</td>
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<td>1,214</td>
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<tr>
<td>Walk for Life: Bangladesh</td>
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<td></td>
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<tr>
<td>Cambodia</td>
<td>382</td>
<td>176</td>
</tr>
<tr>
<td>NextSteps</td>
<td></td>
<td></td>
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<tr>
<td>Indonesia</td>
<td>64</td>
<td>41</td>
</tr>
<tr>
<td>Stepping Stones Bali</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Myanmar</td>
<td>880</td>
<td>338</td>
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<tr>
<td>Walk for Life: Myanmar</td>
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<tr>
<td>Nepal</td>
<td>1,573</td>
<td>520</td>
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<tr>
<td>Hospital and Rehabilitation Center for Disabled Children</td>
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<td></td>
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<tr>
<td>Philippines</td>
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<td>Philippine Non-Governmental Organization Council</td>
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<tr>
<td>Sri Lanka</td>
<td>749</td>
<td>297</td>
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<tr>
<td>Humanity and Inclusion</td>
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<td></td>
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<tr>
<td>Vietnam</td>
<td>396</td>
<td>148</td>
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<tr>
<td>Mobility Outreach International</td>
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</tbody>
</table>
JULIA

Two-year-old Julia was diagnosed with bilateral clubfoot at birth. She immediately began treatment at the nearest pediatric orthopedic clinic to her parents’ home on the island of Negros in the Philippines—but it was before MiracleFeet supported clubfoot services on the island. At the time, families had to purchase cast materials (about $100 USD) each week, for four to eight weeks. The cost was more than Julia’s parents earned in a month, so they stopped treatment.

Clinic coordinators collected lists of patients like Julia who dropped out, and when MiracleFeet and PNGOC partnered to cover clubfoot services nationally in 2018, they contacted each family letting them know treatment was available at no cost. Today most of these children, like Julia, are running, playing, and exploring life alongside their siblings and peers. Thanks to our partners and her parents’ perseverance—she is one of over 2,100 children in the Philippines whose treatment MiracleFeet has supported so far.
OUR IMPACT IN LATIN AMERICA

MiracleFeet deepened its networks and relationships with partners throughout Latin America in 2019 and expanded our team of regional Ponseti trainers working to increase the number of clinicians providing clubfoot treatment in the region.

Data for advocacy: Similar to geodata used in Asia, MiracleFeet partners in Bolivia, Paraguay, and Ecuador used mapping information to successfully advocate to hospitals, providers, and health authorities for strategic new clinic locations, and for increased staffing in specific areas—driving expansion plans in these countries.

Motivated providers make the difference: In Nicaragua, when political instability made traveling to clinics difficult, staff personally contacted all families every week to inform them about clinic hours and changes in treatment accessibility. They worked closely with local authorities to increase early detection and to reach families in remote communities, encouraging them to resume treatment at the hospital once it was safer to travel. Ecuador surpassed its annual patient enrollment goal enrollment in 2019, because of an exceptionally motivated doctor who joined the MiracleFeet network and launched a new clinic in Portoviejo, Manabi province. In Bolivia, clinic assistants—newly assigned by health officials to support clubfoot treatment—are making strides toward sustainable family support services in the country. The increased programmatic involvement of an orthopedic surgeon in Guatemala has strengthened our partner’s ability to continuously and consistently mentor newly trained health workers.

<table>
<thead>
<tr>
<th>Country</th>
<th>Clinic Name</th>
<th>All-Time Patients</th>
<th>New Patients</th>
<th>Clinics supported</th>
<th>New providers trained</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bolivia</td>
<td>Ayninakuna</td>
<td>203</td>
<td>68</td>
<td>5</td>
<td>11</td>
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<tr>
<td>Brazil</td>
<td>Instituto de Ortopedia e Traumatologia, Hospital de Clinicas, Sao Paulo</td>
<td>610</td>
<td>38</td>
<td>1</td>
<td></td>
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<tr>
<td>Ecuador</td>
<td>Fundación Hermano Miguel</td>
<td>458</td>
<td>104</td>
<td>4</td>
<td>31</td>
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<tr>
<td>Guatemala</td>
<td>Asociación de Padres y Amigos de Personas con Discapacidad de Santiago Atitlán (ADISA)</td>
<td>229</td>
<td>96</td>
<td>6</td>
<td>19</td>
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<tr>
<td>Nicaragua</td>
<td>Rotary International</td>
<td>877</td>
<td>109</td>
<td>3</td>
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<tr>
<td>Paraguay</td>
<td>Fundación Solidaridad</td>
<td>535</td>
<td>149</td>
<td>4</td>
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</tr>
</tbody>
</table>
When Miguel was born fifteen years ago in a remote village of Guatemala, his parents noticed the deformity in his feet right away. No one told them there was a treatment for clubfoot, but his family never gave up. They began a long search for solutions to help Miguel.

Finally, in 2018, they traveled to a hospital in Xela, the nearest city three hours away, where they learned treatment was possible through a clinic supported by MiracleFeet and its partner, Asociación de Padres y Amigos de Personas con Discapacidad de Santiago Atitlán (ADISA).

Today, Miguel’s feet are fully corrected, and he has returned to school where he is thriving. The top student in his class, Miguel dreams of becoming a doctor:

“I want to help children who need help. Children who have feet like I had.”
WE ARE MOBILIZING CHILDREN FOR LIFE
MIRACLEFEET INDIA

Home to over 1.3 billion, India has the largest population estimated to live with neglected clubfoot worldwide. Over 304,000 children under 10, who could enjoy fully active lives through treatment, are growing up with clubfoot disability.

A new chapter for MiracleFeet in India: Created in 2014 primarily to raise funds in India, MiracleFeet India became a full-fledged non-profit in June 2019. MiracleFeet India has an independent Indian Board of Directors, but utilizes the global MiracleFeet model and M&E systems.

Reaching new frontiers: In FY 2019, MiracleFeet India launched formal partnerships with Uttar Pradesh (the largest state in India with a population of 220M), Mizoram, and Himachal Pradesh, as well as agreements to run clubfoot programs with three private charitable hospitals each in Maharashtra and Madhya Pradesh.

In their first year of independent operations, MiracleFeet India supported 33 clinics with a staff of over 30 employees, and enrolled over 900 new children in treatment. In future years, MiracleFeet India will continue to expand its footprint across the country.

BHUMI

Bhumi, 1, began treatment in March 2019, after her grandmother saw a poster about clubfoot hanging in the waiting room of Bahraich District Hospital where she was visiting an ill friend. She immediately recognized the condition as the same as her granddaughter’s, but had no idea it could be cured. She raced home—about 50 miles away—to share the news with her daughter-in-law and son, and eventually brought Bhumi herself to each casting appointment.

We’ve built the foundation for a national program in India. Ten years from now, every child born with clubfoot should have access to proper care.

Kunal Premnarayen
MiracleFeet India Board of Directors
YOU ARE funding futures and a movement.

Our work would not be possible without the generous support of many. Every dollar raised brings us closer to the goal of ensuring every child on the planet born with clubfoot has a chance to walk, run, and enjoy mobility for life.

MiracleFeet raised $7.48M this year, an extraordinary 89% increase over the previous fiscal year.

TOTAL FUNDS RAISED 2019
Funds raised by individuals, corporations, foundations, and other sources.

THE NETWORK EFFECT
People power this movement, raising awareness and funds through their everyday efforts and advocacy.

160 individuals sponsored crowdfunding events that attracted 1,087 new donors to MiracleFeet this year.

$5.3M
$1.77M
$.04M
$.1M
$.2M
$1.9M

2,800 individuals funded 75% of our work

Individual
Foundation
Corporate
Other
MiracleFeet India

Total donated by foundations and corporations
$500 CHANGES A CHILD’S LIFE FOREVER

MiracleFeet offers an incredible return on investment: $500 changes a child’s life forever and generates an average of $120,000 of additional income in lifetime earnings—a social return of 240 times the initial investment. Solving this problem globally is one of the most effective investments in public health today.
Donors

This report recognizes major donors by their cumulative support to MiracleFeet between 2011 and June 30, 2019.

$1,000,000+
Henrik and Beate Fastrich
Google.org
Gordon and Llura Gund Foundation
Hans Peter and Ramona Maassen
Georg Madersbacher and Åro Eide
Oak Foundation
Martin and Alexandra Vorderwülbecke

$200,000+
Jennifer Ayer
Roger Berman and Bridget Ryan Berman
Clarks
Community Foundation Of New Jersey
Komar Family Foundation
Matthew 25: Ministries
Passport Foundation
Sebonack Foundation
UBS Optimus Foundation

$100,000+
Michael and Laura Boutross
Clarks North America
Ferdinand and Susanna Colloredo-Mansfeld
Ferroni Foundation, Inc.
MiracleFeet Germany
Harrison Miller and Clare McCamy
Cathy and Andrew Moley
Jillian Marcus Neubauer
Lawrence Neubauer
Operation Blessing
Ronald McDonald House Charities
Scott Sandell
Schott Family Foundation
Kevin Taweel
Tom and Jeannie Tisbo

$25,000-$99,999
Anonymous
James and Veronica Baker
Chesca and Rudi Colloredo-Mansfeld
Franz and Anne Colloredo-Mansfeld
Sandy and Adam Davis
The Dheer Family Fund
Dorothea Haus Ross Foundation
Suzanne and Edward Eyre
The Fledgling Fund
Lawton W. Fitt and James I. McLaren Foundation
Louis J. & June E. Kay Foundation
Damien Lim
Christopher and Elizabeth Lynch
Peter and Elisabetta Mallinson
Mulago Foundation
Victoria Spence and Fergal O’Driscoll
On His Path
Mark and Jennifer Pavao
Ambassador Dave Phillips
Kunal and Kavita Premnarayen
Project Redwood
Steven and Karin Sadove
Stanford Graduate School of Business, Class of 1992
Tawingo Family Fund
The Tech Interactive
Will and Genie Thorndike
Jennifer Tye and Nate Chang
USAID-DIV
Jean Wilson and Mark Siegel
Jennifer and Bill Youstra

$10,000-24,999
Anonymous
The Alces Trust
Lamberto Andreotti
Arthur B. Shultz Foundation Inc.
Arthur C. and Mary M. Endrizzi Revocable Trust
Jodie and Andrew Baker
Manuel Barron
Carmen Caneda and Richard Gilfillan
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Charlotte Geyer Foundation
Christopher Family Foundation
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Fortune Footwear
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Dennis and Beth Goldstein
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David Hermer and SilviaCampo
Hope Through L.I.F.E. Foundation
Joshua Hyman, M.D.
James Family Foundation
Catherine and Edward Kouri
Zev and Noga Laderman
Yamini Mathur
Lydia Miller
Michael Morris and Robin Durst
Lyle and Sarah Mullican
Nicole Nehrig and Jerome Benveniste
Norma A. Crouch Trust
Philips Healthcare
Nicholas Pianim
Mary and Ralph Pruett
Rodger Raderman
John and Marsha Shields
Shoe Zone
Zoe Shomate
Michael and Carol Staenberg
Stanford University d.School
SurveyMonkey
Unite For Sight

$5,000-$9,999
Aid for Africa
Altar’d State Store #145
APPLES Service-Learning
Amy and Scott Arnold
Kyle Berlin
WE ARE MOBILIZING CHILDREN FOR LIFE

Rosemary Ferrer
Heidi Fischer
Brad Fishel
John and Diane Fisk
Five Fifteen Charitable Fund
Michael and Diane Fournel
Lawrence and Clare Fox
Celia Frayling
Karen and Edward Friedman
Cynthia Furlong
Juan Garcia
Priyanka Garg and Matthew Schneider
Beverly Gee and Manu Daftary
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William and Mary Gibb
John Gilardi
Mark Gordon
Zelda Gorman
Kathleen Gosa
Christine Gray-Scott
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Kathryn Grossman
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Alex von Hoffmann
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Miriam Jackson
Anula Jayasuriya and David Gilmour
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Elizabeth Jones
Richard Kahn
Balram Kakkar
Karen Kames
Madhu Kapur
Oliver Karlin
Scott Keeter
James and Nancy Kelleher
Marc Kelley
Jeremy and Erica Kelly
Susan and Chris Killenberg
Mary Pat Killian
Marilyn Kime
Angela King
John Kinghan
Beth Kirkhart
Jacob and Angela Kirkman
Rosa and Larkin Kirkman
Dirk Klee
Kathy Klein
Katherine Koldewyn
Paul Kostenuik
Mary Kraus and David Uhler
Harold and Debra Kuehler
Rebekah Kumar
La Clé
Jeffrey Lamken
Hilaire Lanaux, Jr.
Judy and Myron Landin
Chris Latham
Jack and Susan Lawrence
Norbert Lempert
Mike Leonesio and Sharmila Choudhury
Lauren and Paul Levitan
Frank Lewis
Steve Lewis and Pamela Burke
Lindy and Joshua Liberman
Chun Jou Lin
Bret and Stephanie Linford
Ruth Little
John and Karen Lopez
Christopher and Karly Lucarelli
Andy Luce
Robert Luce
Julie Lynn and Doug Smith
Michael Maher and Jeanne Doornbos
Lanie Marcus
Barbara Marder
Mariner Foundation
Caroline Marksfield
Katherine Marques
Alan Mayer
Julie McDonald
Robert McDonald
Lynn McFarland
Margaret McGown
Leigh McGregor and Mark Cochrane
Elizabeth McKinsey
Tom McLoughlin
George and Cristina McQuistion
Elizabeth Meckes
Michael Mesler
Kimberly Meyer
Gienna Michaels
Kerry Michaels
Microsoft Philanthropies
Eric Moede
Janis Moffat
Doryce and John Moosey
Morgan Stanley
Belinda Morris and Tony Brunello
Christine Mower
Pamela Murphy
Rajendra Nagubadi
Margaret Nakamura
Richard Nakamura
Michael Nesbitt
Christine Nash and Andrew Chen
Armand and Eliane Neukermans
Ellen Newcomer
Bonnie Newell and Richard Nevel
Raymond Newlin
Jeff and Betsy Newton
Christopher Nolan
North Carolina State Employees Combined Campaign
Elizabeth Nurrenbern
NYU NASHA
Oaktree Capital Management
Linda O’Brien
Orla O’Connor
Frank Ohrt
Omnimed, Ltd.
Paula Oppenheim
Xiomara Ospina
Brian Paganelli
Paige and Omar Zinn Charitable Trust
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David Parkes
Akhil Patel
PayPal Giving Fund
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Keri Peevey
Leonard Pellettieri
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Peoples Improv Theater
Shelley Perino
Prudence Perry
Mark Peterson and Mary Woolsey
Peg and Bill Phelps
Howard Pitts
Pledgeling Foundation
Walker Poole
Anne and Wes Pope
Andrea Portago
Sara Presutti
Ana Priu
Kerrie and Adam Quealey
Latha and Karthik Rammohan
Marshall Ransom
Paul Ravnikar
Amrit Ray
Peter Redfield and Silvia Tomaskova
Reingold 2004 CLAT Fund
Joseph Reinkemeyer
Susan Reissner
Gerri Richards
RidgeWorth Capital Management, Inc.
David Riley
Bruce Robinson
Ruben Rodriguez and Cristy Fernandez
James Rogers
Virginia and Helmuth Rogg
Jean Roiphe and Zach Herz-Roiphe
Melanie Rose-Bilhardt
Rotary Club Of Roselle-Roselle Park
Thomas Rottner and Cecile Astrup
Scott and Melinda Rossi
Thomas Ruppel and Nancy Clark
William Rustico and Debbie Hodges
Elaine Ryan
Fawzi Saed
Hany Salah
Tara Salamone
James Salzano
Jude Sangillo
Steven Schall and Alyce Russo
Martin Scheinberg
Greg Schmale
Gregory and Florence Schmidt
Carly Schmitt
Bruce and Susan Schneider
Jean Schubert
Jeegar Shah
Peter Sheehy
Shoes For Change
Damon and Laura Silverstein
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Steve and Frankie Slaughter
James Snow
Gopalaswamy and Sudha Soora
Southern California Foot & Ankle Specialists
Eric St. Pierre
Letizia Stanghellini
John Steinberg and Andrea Kremer
Lucy and Niklaus Steiner
Terrence Stephenson
Jim and Lisle Stigler
Robert and Diane Stites
Bob Strawbridge
Theresa Stremlau
Ivan Strenski
Joyce and William Summerwill
Poodepelli Suryanarayana
The Susan E. Trees Fund
Barbara Tamkins
Joanne Tatham
Edwin Taylor and Carla Kirmani-Taylor
Sundara Thirumalaiappan
Caroline Thomas and Renne Jacobs
Lanny and Anne Thordike
Andrew Tse
Louis Tullo and Janet Trullo
Grace Tye
Kenneth and Ying Tye
Tye Revocable Family Trust
Amos and Beverly Tyndall
The University of North Carolina at Chapel Hill
Rajendra Unni
Kristine Urrutia and Tim Strauss
Menka Uttamchandani
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Shona Varghese
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Rajkumari Yabaji
Thomas Young
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Donna Zimmerman

Gifts in Kind
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Fondation Telma
GSW
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MD Orthopaedics
MNI Targeted Media Inc.
New York Interconnect
Storr Office Environments
Suncast Corporation
Sutton Magidoff LLP
The Wall Street Journal
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MiracleFeet India
100,000+
Bajaj Foundation
Hero Enterprises
Premnarayen Family

$25,000-99,999
Bachi Shoes
JSW Foundation
Tata Power

$10,000-$24,999
Inner Wheel Clubs
Noida Toll Bridge Company
Tata Investment Corporation Limited
Financial transparency and responsible stewardship of donor funds are the foundation of MiracleFeet’s operations. We maintain a Platinum Seal of Transparency with GuideStar and are one of Great Nonprofits Top Rated Nonprofits for 2018 and 2019.

### FINANCIAL SUMMARY

*MiracleFeet and MiracleFeet India Combined Financials*

<table>
<thead>
<tr>
<th>Program Impact</th>
<th>FY 2018</th>
<th>FY 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>New children enrolled in treatment</td>
<td>5,253</td>
<td>8,502</td>
</tr>
<tr>
<td>Total children enrolled in treatment</td>
<td>30,755</td>
<td>39,257</td>
</tr>
<tr>
<td>Total cost/child</td>
<td>$673</td>
<td>$571</td>
</tr>
<tr>
<td>Programing cost/child (excl prog mgnt.)</td>
<td>$252</td>
<td>$300</td>
</tr>
<tr>
<td>Programing cost/child (incl prog mgnt.)</td>
<td>$514</td>
<td>$458</td>
</tr>
<tr>
<td>Total Revenue (Cash Basis)</td>
<td>$4,209,426</td>
<td>$7,475,383</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenses (Cash Basis)</th>
<th>FY 2018</th>
<th>FY 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration</td>
<td>$294,238</td>
<td>$374,212</td>
</tr>
<tr>
<td>Fundraising</td>
<td>$537,713</td>
<td>$593,193</td>
</tr>
<tr>
<td>Program</td>
<td>$2,701,599</td>
<td>$3,891,349</td>
</tr>
<tr>
<td>Total</td>
<td>$3,533,553</td>
<td>$4,858,755</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Percentages</th>
<th>FY 2018</th>
<th>FY 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration</td>
<td>8%</td>
<td>8%</td>
</tr>
<tr>
<td>Fundraising</td>
<td>15%</td>
<td>12%</td>
</tr>
<tr>
<td>Program</td>
<td>77%</td>
<td>80%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AUDITED FINANCIALS</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Total Revenue (Accrual Basis)</td>
<td>$3,507,334</td>
<td>$7,752,407</td>
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</table>

<table>
<thead>
<tr>
<th>Expenses (Accrual Basis)</th>
<th>FY 2018</th>
<th>FY 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration</td>
<td>$319,611</td>
<td>$374,993</td>
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<tr>
<td>Fundraising</td>
<td>$556,657</td>
<td>$600,955</td>
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<tr>
<td>Program</td>
<td>$2,568,824</td>
<td>$4,017,286</td>
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<tr>
<td>Total</td>
<td>$3,445,092</td>
<td>$4,993,234</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Percentages</th>
<th>FY 2018</th>
<th>FY 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration</td>
<td>9%</td>
<td>8%</td>
</tr>
<tr>
<td>Fundraising</td>
<td>16%</td>
<td>12%</td>
</tr>
<tr>
<td>Program</td>
<td>75%</td>
<td>80%</td>
</tr>
</tbody>
</table>

**End of Year Net Assets**

<table>
<thead>
<tr>
<th></th>
<th>FY 2018</th>
<th>FY 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$4,709,033</td>
<td>$7,465,972</td>
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</tbody>
</table>

**FOOTNOTES**

1. This includes the salaries and travel expenses of the MiracleFeet program team but not general overhead.
2. Audited financials exclude MiracleFeet India. MiracleFeet uses cash basis accounting for management purposes. However, audited financials are conducted on an accrual basis, resulting in future grant agreements and pledge donations being booked in the year they are signed instead of the year the expense is actually incurred or the donation is actually received. This accounts for the differences between the cash and accrual financial statements.
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Executive Director

Meredith Driscoll
Director of Finance & Operations

Jennifer Everhart
Director of Programs

Lindsey Freeze
Director of Marketing & Communications

Andrea Norris
Interim Director of Development

Amanda Springer
Director of Program Operations

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President and CEO, R-PHARM US

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President, RH Berman Consulting

Bridget Ryan Berman
Founding Board Member
Managing Partner, Ryan Berman Advisory

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President, Community Foundation of New Jersey

Jarret Fass | Treasurer
Co-Founder and Managing Partner, Pierpoint Capital

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Professor of Orthopedic Surgery, Columbia University

Michelle Cooper
Speech/Language Pathologist

Åro Eide
Managing Director, Emilia GmbH

Sue Eitel
Founder, Eitel Global

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Former Chairman & CEO, Saks Incorporated

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Chris Lavy, MD
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Norgrove Penny, MD
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Coleen S. Sabatini, MD, MPH
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Greg Schmale, MD
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Rick Schwend, MD, PhD
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Associate Professor, University of Pennsylvania Medical School

Anna D. Vergun, MD
Assistant Professor, Pediatric Orthopedics, University of North Carolina, Chapel Hill

Lewis E. Zionts, M.D.
Clinical Professor (Step VI) of Orthopaedics, David Geffen School of Medicine at UCLA
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Executive Director

Ashish Bhadouria
Program Manager

Siby Mathew
Senior Executive, Human Resources

Amrutlal Mistry
Assistant Manager, Accounts

Foram Sakhida
Assistant Manager, Human Resources

Jahnvi Shah
Development Manager

Bhupesh Singh
Branch Manager

Ranjodh Singh
Branch Manager

Shirish Srivastava
Program Manager, Uttar Pradesh

Dr. Kalpana J. Urkade
Monitoring & Evaluation Manager

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Anil Sardana
CEO, Adani Transmissions

Ranjit Shahani
Former Managing Director & Vice Chairman, Novartis India Ltd.

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Founding Board Member, MiracleFeet
President, RH Berman Consulting

Chesca Colloredo-Mansfeld
Executive Director and Co-Founder of MiracleFeet

Ashish Bharatram
Managing Director & Executive Director at SRF Ltd.
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Chapel Hill, NC 27514
+1.919.240.5572
www.miraclefeet.org