



Healthy
Entrepreneurs

ANNUAL REPORT 2024

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Healthy
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FOUNDER'S MESSAGE



Dear All,

The time we are living in is changing fast. Funding is no longer guaranteed, health challenges continue increasing while the buying power of the most vulnerable people continuously decreased. The work of Healthy Entrepreneurs can contribute significantly to the health challenges by offering access to the best quality of care, delivered at the doorstep of rural and remote located families while supporting governments in sustaining their community health systems. At Healthy Entrepreneurs, we continue to further improve our work aiming to serve many more customers in the future.

In the year 2024, we have made some significant improvements in the Healthy Entrepreneurs model and in supporting our local organization. In the first part of the year, there was a significant decrease in buying power across most of the markets in which we operate. The primary factors identified are the increased cost of living, the reduced agricultural yields, and -overall- the challenging economic development. Over the course of the year, the ambitious growth plan aiming for a significant expansion in revenues in 2024 evolved, resulting in modifications to the model and a restructuring of the organization.

We have introduced new credit terms for Community Health Entrepreneurs (CHEs) to address their financial capacity issues with prefinancing stock. The new terms double the entrepreneur's investment, with a repayment period of 3-6 weeks based on our supply delivery frequency. We also introduced an Emergency Credit Facility, allowing CHWs to access up to 100% credit in the event of financial hardship. This is intended to safeguard both income continuity and service delivery in times of personal or community crisis.

The new 'business builder' programs help new and existing CHEs to use new credit terms while improving financial literacy and business skills. The results of the implementation of the new programs and the new credit terms lead to an increased income for the CHEs in the program. The most recent survey data (2024-2025) show that participants earn an average income of USD 45 per month from their Healthy Entrepreneurs business - representing a 70% increase compared to their earnings before joining the program. Further income growth is expected as CHEs continue to expand their businesses supported by the business builder program.

The organizational restructuring focused on operational efficiencies and reduction of operational cost. Some of the preliminary investments made to scale and expand the business were reduced. Another focus was on optimizing cost-effective delivery routes by reducing delivery frequencies while extending credit facilities for remotely located CHEs. By prioritizing revenue growth alongside operational efficiencies, we have restructured the organization in order to prepare for controlled expansion in the coming years.

Other finding on recent evaluation studies conclude that:
97% of participants believe that their work as CHEs has improved community access to health products.
97% also reported that the health of their communities has improved as a result of their work.
94% say their motivation to engage in community health activities has increased since becoming CHEs.
97% state that they feel happy and empowered in their role.

Strikingly, all participants reported feeling more appreciated by their communities since becoming a CHE.

This increase in motivation is reflected in the number of household visits CHEs conducted each month. Previous studies have shown that many Community Health Workers (CHWs) struggle to reach all the assigned households, typically visiting only one-third to one-half (Abuya et al. 2021). By contrast, survey data indicate that CHEs visit over two-thirds of their assigned households - marking a significant improvement. This is echoed in participants' self-reports, with 84% stating that they now visit more households than they did prior to becoming a CHE.

In the fast-changing environment, where continuity of funding is not guaranteed and health challenges continue expanding especially chronic diseases, the national and local ministries of health are very interested in working with Healthy Entrepreneurs. In 2024, we had a delegation of the ministry of Health and Po-Larg of Tanzania visiting our work in Uganda. The visit has resulted in integrating the Community Health Entrepreneurs in the national program, formalized in a MOU. In partnership with national and regional government in Ethiopia, we are localizing the model to the Ethiopian context in which we hope for the same interest and commitment.

There is particular interest in the role of the telehealth services offered by the virtual clinic for chronic patients. Supported by technology, we empower CHWs to offer more value-added services within their mandate of identifying patients and delivering products at the doorstep. During the Great Lakes Digital Health Conference, we presented results of our work around chronic diseases. One of the outstanding results was the reduction in chances of a stroke from 16% to 11% within a period of 6 months. More results are presented soon. In collaboration with the ministries in Kenya and Uganda, we are also executing initiatives to combat malnutrition. This involves regular home monitoring of children and ensuring access to a comprehensive preventive package of affordable products. It can be approached in the same way as our solution for chronic patients making a significant impact in the lives of many vulnerable people in poor and desolated areas.

Finally, I want to thank everyone for their work and assistance during 2024. My biggest thanks go to more than 20,000 Community Health Entrepreneurs for their continuous effort in their communities, our colleagues in the different countries supporting our mission daily, and finally to all donors, investors and partners supporting the growth of Healthy Entrepreneurs.

My best regards,

Joost van Engen
FOUNDER, CEO HEALTHY ENTREPRENEURS

GENERAL INTRODUCTION OF HEALTHY ENTREPRENEURS

INTRODUCTION

Over 600 million people in Sub-Saharan Africa live in remote and rural areas where access to high-quality, low-cost, clinical-based primary care is minimal. Walking for hours or even days to reach the nearest health center is only too real for them. Hosting 15% of the world's population Sub Saharan Africa faces almost 25% of all health/illness-related issues. These have to be countered with only 3% of the world's medically trained professionals and 2% of the financial means spent on health care globally (Kaleidos Research 2015).

Improving access to high-quality, low-cost information, services and medicines at the community level or primary care and investing in community health workers is very cost-effective, especially in increasing children's health (USAID 2018). Each \$1 invested in community health workers, can have a return of \$10 due to an increase in the productivity of a healthier population, the potential decreased risk of disasters, such as Ebola, and the economic impact of an increase in employment; more people are working, generate an income and are, when needed, able to buy health products or services (USAID, 2015).

However, efforts to create cadres of community health workers have reached a limited scale; Lack of government budget and competing priorities results in only 13% of the CHWs in Sub-Saharan Africa receiving some form of payment (Taylor. C 2018).

Structured evaluation of models for managing community-level healthcare is limited resulting in limited insights into the effectiveness of healthcare interventions and models.

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Healthy Entrepreneurs believes entrepreneurship is the sustainable solution to offer healthcare access to the most remote areas of Africa, if the solution can be offered at scale. Over the past years, Healthy Entrepreneurs scaled the operations in Kenya and Uganda and expanded to other sub-Saharan countries in partnership with governments and other organizations. Today, we deliver long-lasting impact on scale in Uganda, Kenya, Burundi, Tanzania, DR Congo, Burkina Faso and Nigeria.

OUR CONTRIBUTION

1. Our customers adopt healthy behaviors when health information and curative and preventative products are available
2. Our work contributes to the well-functioning of the formal national health care system.
 - A. We provide health care where it would otherwise be absent
 - B. We improve availability of health care products
 - C. Our CHEs refer patients to neighboring health facilities when needed
 - D. In all areas we work, we collaborate with the local Ministry of Health
3. Our intervention directly contributes to Sustainable Development Goals
4. Our interventions are more cost-efficient than other solutions offered in the market
5. Research has shown that regular supplies of health commodities lead to a 17-25% reduction in market prices.
6. Research has shown that our entrepreneurs have increased their income twofold or more since they have started as an entrepreneur.

WHO WE ARE

Goal, strategy and activities

Our vision is to be the trusted community healthcare provider, creating both positive health outcomes and economic opportunities. By using our unique business model and improving the existing infrastructure, we empower Community Health Workers (CHWs) enabling them to drive systematic change in healthcare provision.

Our mission is to satisfy the health needs of consumers in hard-to-reach and remote areas of Africa, by bringing products, experts, education and innovative technology together. Through trusted CHWs and a unique end-to-end supply chain, we not only provide healthcare solutions but also empower CHWs economically, ensuring they thrive as key drivers of sustainable community health and development.

The goal of Healthy Entrepreneurs is to train entrepreneurs and equip them with innovative and practical solutions that meet the health needs of families in remote areas..

Operating Model

Healthy Entrepreneurs (HE) is a social enterprise that manages a fully integrated end-to-end supply chain to deliver affordable and reliable health products and services via a network of trained micro-entrepreneurs to the most impoverished families living in rural areas. HE's product basket targets the health of children under 5 years with products like anti-malaria medications, zinc and oral rehydration salts, as well as sexual and reproductive health and rights for women and adolescent girls with items such as sanitary pads, condoms, and contraception.

Through HE's entrepreneurial micro-franchise model for delivery of basic health in remote areas, access to health care and reduced poverty go hand-in-hand. Selected health workers are trained and contracted as 'community health entrepreneurs' (CHEs). These CHEs provide trusted and targeted health information to their communities, using best-in-class digital aids built from World Health Organization (WHO) and UNICEF content. They also enable convenient, door-to-door and regular access to a wide range of affordable, high-quality health products, such as personal hygiene products, water filters, vitamins, and essential over-the-counter (OTC) medicines (e.g. paracetamol and anti-malaria pills). By increasing health knowledge and bringing new products and services to unreached areas, HE generates income for traditionally low-paid health workers. Managing the full supply chain in each country, the social enterprise ensures the products' quality, availability and affordability, with prices ranging 10 to 15% below market prices. HE has rolled out its model in Uganda, Kenya, Tanzania, the DRC, Burkina Faso, and Nigeria. It has started activities in Ethiopia during the current year

HE creates substantial added value on several levels. HE identifies potential entrepreneurs with basic knowledge of health care, a secondary school diploma and preferably women. During their training, they learn about basic health the set of health products and entrepreneurial skills needed to establish their own health business.

Operating under formal agreements with national or local governments, HE complements public health services by enabling CHEs to offer approved products in personal care, nutrition, family planning, and basic medicine.

The 12-month program CHEs participate in begins with training in financial and digital literacy, business development, supply and demand, and inventory management. CHEs receive a starter kit and are supported through ongoing coaching, refresher courses, access to credit, and regular product restocking (every 3 to 6 weeks).

By offering products at up to 60% lower cost than local markets or health facilities, CHEs can earn up to \$60 more per month. After the initial program year, they continue to benefit from supply replenishment, hospitalization insurance, and an emergency fund that provides full product credit for up to six months during times of financial hardship.

The driver of HE's sustainability and value proposition are our integrated supply chain, which allows us to control the movement of products from the manufacturer down to Entrepreneur. This control reduces mark-ups along the chain of supply. The cost savings generated from this approach allow for two things:

1. We pass products along to our entrepreneurs at higher quality and lower cost than they can obtain elsewhere. They can sell the products to consumers at prices that are ~10-15% lower than what is commonly available on the market, while the products were already marked-up (between 20-35%) to earn a wage.
2. The cost savings generated by streamlining supply are substantial enough to cover Healthy Entrepreneurs' lean local management costs at scale. These cost-savings set Healthy Entrepreneurs apart from other direct sales models, such as Living Goods, because at scale the model can sustain itself from the savings generated through our supply chain optimization while continuing to sell products at lower prices in rural markets.

This scalable and sustainable system allows the HE organization to fulfil its mission and create a 20% margin, which is then used to finance local management and the cost of its operations. Grant funding covers the start-up expenses in new countries. This funding is mostly provided by governments and NGOs, such as the Dutch, US and Canadian governments and NGOs like Amref, CARE, Philips Foundation, Bayer Foundation).

A study from the Erasmus University Rotterdam and the Makerere University Kampala found a significant improvement in knowledge and access to basic care. In comparison to communities without our presence, communities with the Community Health Entrepreneurs (CHEs) demonstrated that:

1. Households reached by CHEs have twice the odds of using modern contraceptives and have substantially more comprehensive knowledge of HIV and other STIs (46%).
2. CHEs had a substantially better availability of essential generic medicine (80%) and basic equipment. They were more motivated, referred twice as many patients, spent more time on health work (+20%) and followed more refreshment training .
3. The motivation and performances of CHW, who became CHE, were positively affected by the opportunity to generate an income, the substantially better availability of essential medicine and basic equipment, and the organizational structure in which they functioned. The entrepreneurial approach provides CHEs with the incentives, products and equipment that improve and sustain their functioning.

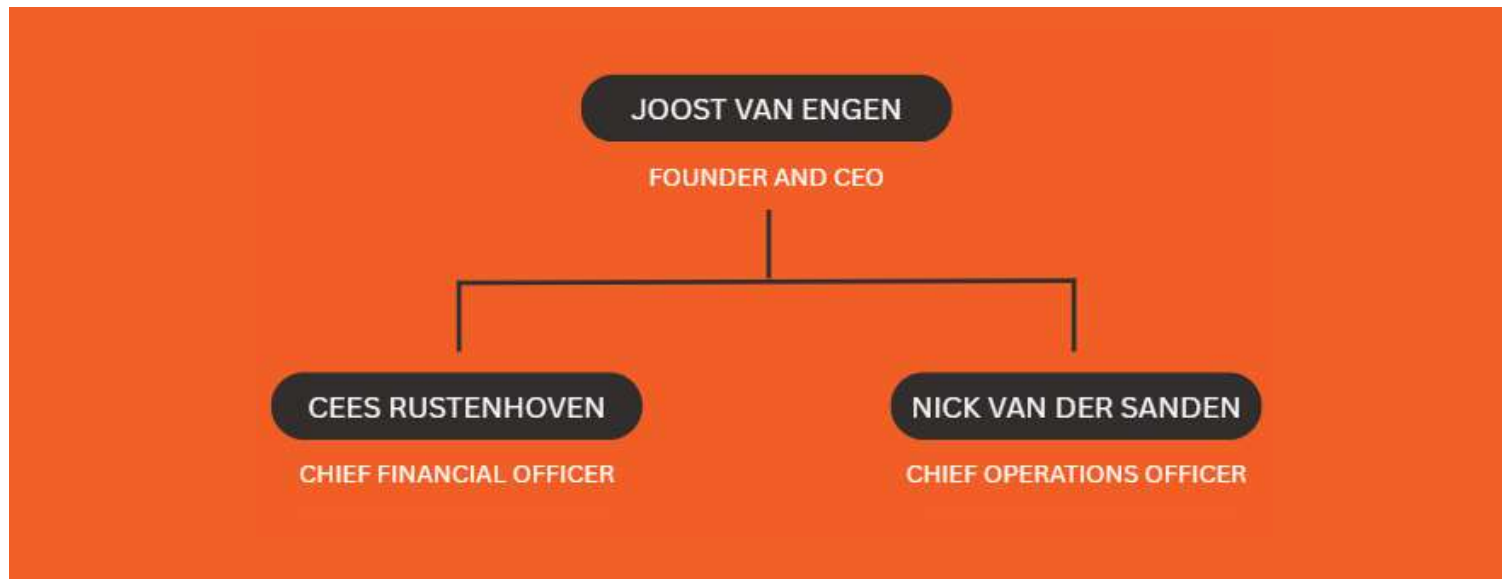
The research team has submitted several articles about these studies for publication in peer-review scientific journals (see: <https://www.healthyentrepreneurs.nl/publications/>)

Organization and Governance

Healthy Entrepreneurs is a social enterprise with a Foundation and a limited liability company (Ltd. or BV) in the Netherlands. In addition, there are registered entities in countries where networks of entrepreneurs are currently active. These entities are responsible for identifying, selecting and training of new entrepreneurs and for providing these entrepreneurs with products and services.

The Foundation in the Netherlands is responsible for program management, for raising funding and for the allocation of funds towards the local operations. The limited liability company or BV in the Netherlands primarily support the local entities with the procurement of products, operational management, IT services, product innovation and reporting on its operational and financial performance. The company also supports the country offices in expanding the networks of entrepreneurs.

The Healthy Entrepreneurs Foundation is a Foundation with an ANBI status which is a Dutch accreditation of HEs social work and which gives the Foundation a tax exemption status. Apart from the tax exemption, an agreement has been drawn up for the management of cash flows between the Foundation and the various local entities. The profits that can be gained from the companies will be reinvested for the further roll-out of new entrepreneurs and for the social goals of the Foundation.



COMPOSITION OF THE EXECUTIVE BOARD*

- Joost van Engen MBA: Chairman, formerly IDA Foundation, founder Healthy Entrepreneurs, now Chief Executive Officer Healthy Entrepreneurs.
- Cees Rustenhoven MA: Treasurer, formerly finance director Haydom Lutheran Hospital, Tanzania, now Chief Financial Officer Healthy Entrepreneurs.
- Nick van der Sanden BA: formerly SAP Supply Chain Management and Integration Consultant at Perfect for People and Capgemini, now Chief Operations Officer of Healthy Entrepreneurs

* Thijs Bergervoet is an official member of the Board of HE Foundation, but he is no longer an executive member. Previously, he was the Chief Technology Officer at Healthy Entrepreneurs.

ORGANIZATIONAL STRUCTURE



Joost van Engen
Founder and CEO



Cees Rustenhoven
Chief Financial Officer



Nick van Der Sanden
Chief Operations Officer



Adima Mesa
Global Data and
Technology
Expert



**Bryme
Mohamed**
Country Director
Burkina Faso



Isaac Miruho Nkola
Country Director DRC



Arnold Oduor
Country Director
Kenya



Mayowa Adeagbo
Country Director
Nigeria



Monica Bernard
Country Director
Tanzania



Tjerk Kuipers
Country Director
Uganda



**Healthy
Entrepreneurs**

IMPACT OF OUR WORK

Through the growing network of CHEs, we can reach the most challenging areas with interventions for sexual and reproductive health, maternal health, children's health, water, sanitation and hygiene and nutrition. Priority diseases are malaria, pneumonia, diarrhea and malnutrition for children under 5.

As of 2025, we have activities in Uganda, Kenya, Tanzania, DR Congo, Burkina Faso and Nigeria, with a network of around 20,000 CHEs, reaching 18 million people in remote and rural areas. We are also expanding to Ethiopia. HE had sold circa 47 million impact products, provided a substantial increase in income for CHEs (double their income) and 55% cost savings in health expenditure for rural families by reducing transport costs to health services and access to lower-cost health products for patients.

Health benefits from information and early detection

Well-trained and equipped CHEs can diagnose health issues in the early stages and patients can be treated or referred to a health center in time. Timely detection and treatment prevent further development and spreading. It prevents high costs and decreases the burden on the limited health care available and waiting times in health centers. HE ensures a constant supply of generic medicines. It has already experienced that health centers refer their patients to the CHE when they do not have the medication available themselves

Market and system change through being the example

The HE model is proving that it can be done. HE strives to be an example for many other African organizations and governments, by realizing a full financially self-sufficient/sustainable operation in at least two countries. Based on the results, donors and national governments will learn that social entrepreneurship is not a threat but complementary to their contribution.

By offering health products and medicines for a competitive and affordable price, HE forces the market to change their prices to a market comfort price

Financial and economic benefits as a driver for sustainable change

Apart from health benefits, the HE model contributes to employment, which is essential, particularly in rural and remote areas. The CHEs earn a sustainable income from their activities by running their own business. Entrepreneurs can realize a significant increase in their income

of 20% on average. Particularly for women, entrepreneurship is an essential step towards empowerment and self-efficacy; their position in the community and family is strengthened significantly.

Our beneficiaries are families of 5 members on average including a child < 5 years, one adolescent, living in remote villages in one-room houses, earning less than \$2 per day. Families in remote areas of Sub-Saharan Africa spend out of pocket an average of \$100 per year on basic health treatment (USAID 2016) of which \$45 on treatment and \$55 on transport costs. The nearest health center is -on average- 75 minutes walking distance away, or at \$2 costs by transport.

In other words, 600 million people living in Sub Saharan Africa, represent 120 million families spending together \$12 billion out of pocket on basic health. \$5,4 billion (45%) is spent on treatment and consultation and \$6,6 billion (55%) is spent on transport. The work of Healthy Entrepreneurs is focused on the most vulnerable population that is spending at least twice as much on basic health due to distances to the health care provider.

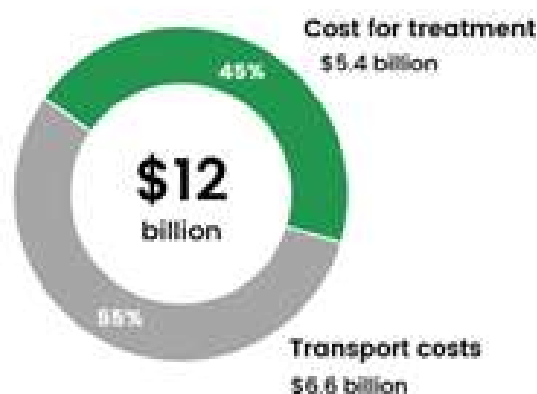
Our social business case – proximity to health care is key

Healthy Entrepreneurs offers its products and services at minimum 10-15% lower than the market price and offers a saving of 55% of the annual expenses, money that can be spent on healthcare of other expenses like seeds or school fees. The social business case of Healthy Entrepreneurs is about optimizing the current out of pocket expenses and builds on the existing money available in the market.

A burden or a market opportunity

Expenditure on basic health of rural families in sub Saharan Africa

A rural family	
Treatment	\$45
Transport	\$55
<hr/>	
Total	\$100



Potential savings OR estimated market size of \$6.6 billion

COUNTRY UPDATES

In 2024, HE focused on strengthening operations by refining recruitment and retention strategies for Community Health Entrepreneurs (CHEs). A more selective approach was adopted, introducing new recruitment criteria such as financial entry requirements, reference checks, and the involvement of existing CHEs. This shift emphasized quality over quantity to ensure a strong and sustainable network.

HE also introduced structured credit management tools, including short-term credit with clear repayment terms. To support income growth among CHEs, the **CHE Incubator Program** was launched to help both new and existing CHEs grow their businesses and increase revenue.

Additionally, CHEs facing temporary financial difficulties are supported through a **Solidarity Fund managed directly by HE**, which provides timely financial relief. This fund ensures that CHEs can continue operations during unforeseen challenges without relying on peer-based savings groups.

HE prioritized high-potential markets and prepared strategic investments to support future growth. The organization began a transition phase to review and improve the viability of its model, closing loss-making routes and optimizing coverage through better route alignment and network strengthening.

To succeed in this phase, HE emphasized leadership quality and stakeholder engagement, including strong relationships with CHEs, government officials, and suppliers.

The **enabling environment varies significantly across countries**, which influences how HE operates and scales. In some settings, effective collaboration with stakeholders is possible, while in others, the conditions for large-scale implementation are more limited. HE continually adapts its presence and interventions to maximize impact and manage risks accordingly.

In addition, a new CHE engagement strategy was implemented in 2024, designed to strengthen relationships with CHEs and enhance their overall experience and performance. This strategy is supported by a refreshed operations approach that prioritizes improved service levels while reducing the overall cost to serve. Together, these initiatives are expected to increase the effectiveness and sustainability of HE's delivery model.

UGANDA

HE Uganda faced a challenging period in early 2024 with a significant decline in sales. In response, recruitment of new CHEs was paused to investigate root causes, including poor recruitment quality and limited staff-CHE connection.

Efforts focused on consolidating existing operations, improving recruitment standards, and enhancing sustainability by reducing the number of operational districts and delivery routes. Delivery cycles were extended to improve coverage.

In 2024, 455 new CHEs were trained—a deliberate reduction to emphasize quality. Existing CHEs received further product training, such as on the SaWa water purification solution and reading glasses. On top of that, our telehealth services were optimized by embedding telehealth more in the engagement services.

By year-end, Uganda had 8,232 active CHEs, with 58% women and 23% under 35. Product sales were led by medicine and pain relief (66%), followed by nutrition (13%), skin care and hygiene (11%), and female-focused products (7%).

The **CHE Incubator Program** supported improved CHE performance and sustainability across the network. In this way, Uganda is ready for further scale up and growth in the coming years.

KENYA

In 2024, HE Kenya expanded its telehealth services in Kisumu, Homa Bay, and Makueni counties, focusing on extending healthcare services and building on earlier success.

By year-end, Kenya had 3,181 CHEs, including 597 trained during the year. Of these, 480 were newly onboarded.

Skin Care & Hygiene made up 56% of total sales, followed by Medicine & Pain Relief (19%) and Nutrition & Prevention (15%).

Telehealth Infrastructure

HE Kenya expanded its telehealth infrastructure by implementing e-Dispensing through MOUs with several counties. The HE Telehealth Centre was registered nationally and enabled patients to access care under national insurance, reducing out-of-pocket costs.

The facility served an average of 1,151 patients per month. HE also established 167 Peer Support Groups and referred cases for advanced diagnostics.

Nutrition and Malnutrition Prevention

A new child malnutrition projection model was finalized. CHEs were trained to screen children using MUAC tapes and linked suspected cases to healthcare via the Telehealth platform. They were also trained in exclusive breastfeeding, immunizations, and child development tracking. Nutrient-dense product assortments were developed based on WHO and UNICEF guidelines.

TANZANIA

In 2024, HE successfully embedded community health entrepreneurship into Tanzania's national health strategy. Following a visit from Ministry officials, HE was recognized as a strategic partner.

After the withdrawal of USAID funding, HE began seeking alternative support to sustain growth in Geita and Tamora, where expansion potential remains strong.

BURUNDI

In 2023, HE expanded its network by adding 1,400 new Community Health Entrepreneurs. Burundi trained 455 new CHEs in 2024, growing its network to 2,130. However, sustainability remained challenging due to limited product assortment, high costs, and low purchasing power.

HE searched for a strategic partner who might be interested in further exploring community-based business models. As a result, a Dutch social enterprise called Auxfin is interested to continue supporting CHEs while expanding the health offering. HE remains involved through technical support and systems integration.

BURKINA FASO

HE Burkina Faso made strong progress in 2024, onboarding 246 new CHEs to reach a total of 273. The Ministry of Health recognized HE's innovative contributions, although we are facing restrictions on certain medicines which we would like to add to our product basket. The CHE's product basket is defined based on the needs of its community, availability in the country, and government regulations. The basket consists solely of health products and a few non-prescription SSR products.

The agreement initially reached with the Ministry of Health to include more medicines, with the condition of covering a health district in areas with security challenges, could not be fulfilled. In a vision geared towards implementing this initial agreement; HE has ensured ongoing advocacy, which resulted in a workshop to update the product list with the Northern Regional Directorate in June 2024. This work was carried out jointly with the Northern Regional Health Directorate and the Kaya Health District.

Key milestones included reaching 40% of young people with sexual health education and delivering health interventions to over 27,000 people for TB, malaria, and hepatitis.

DRC

Despite regional security challenges, HE DRC continued growing its network. A total of 353 new CHEs were added in 2024, bringing the total to 457.

The team addressed competition from counterfeit medicines by focusing on quality products and ensuring continued service delivery despite logistical constraints.

Given the circumstances, the DRC team has made a huge achievement and will hopefully do so in the coming years.

NIGERIA

2024 was a Foundational year for HE Nigeria. The onboarding of 195 new CHEs and early program feedback confirmed the model's relevance. Alignment with state and national strategies progressed.

Lessons from Uganda and Kenya informed the introduction of the CHE Incubator Program to support growth and performance. Growth will likely be achieved by increasing the number of households per CHE, by setting specific targets for CHEs, by establishing a reward system for active CHEs and by ensuring community engagements and campaigns. In this way, Nigeria is positioned for further optimization and expansion.



BUSINESS DEVELOPMENT

In 2024, HE strengthened its presence in current countries while preparing for expansion. Business development efforts emphasized relevance, impact, and funding diversification.

Ethiopia was a key focus. Following stakeholder engagement and groundwork, HE committed to launching operations there with support from Traide and RVO.

HE also pursued a potential multi-country scale-up with a single funder. In response to the USAID withdrawal in Tanzania, new funding streams were actively pursued to sustain growth.

In Kenya, RVO funding supported CHE training, NCD screening, and the digitization of Primary Care Networks, while the National Postcode Lottery (NPL) funded a 3-year program to

Across all countries, strategic partnerships continued to drive innovation and sustainability in community health.

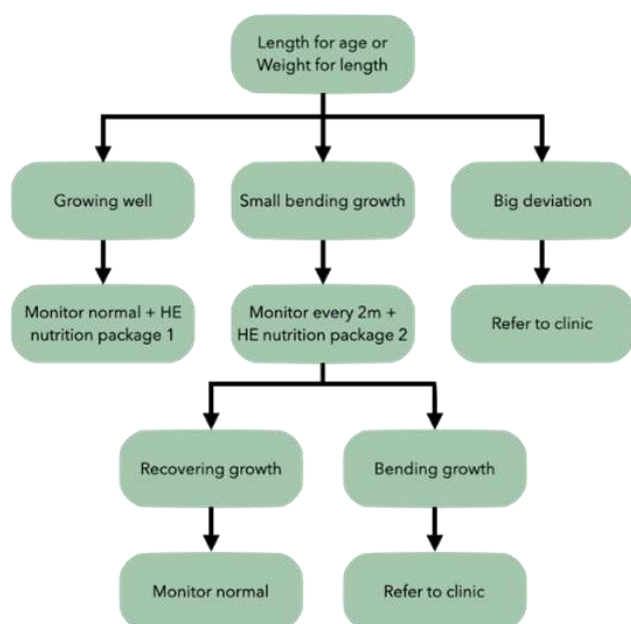
INNOVATION

ClickMedix

Child growth monitoring is a vital aspect of HE's healthcare services, facilitated by a systematic procedure designed to track the growth of children. This process involves obtaining various measurements from the child, which are then entered into the Click Medix system. The system generates personalized growth charts based on weight and height measurements, guiding subsequent actions. HE continued and further implemented the use of the ClickMedix system in 2024.

ClickMedix technology plays a pivotal role in virtually automating the procedure, ensuring that decisions are made in alignment with the intended workflow. Regular examinations are integral to this workflow, determining the trajectory of monitoring and intervention.

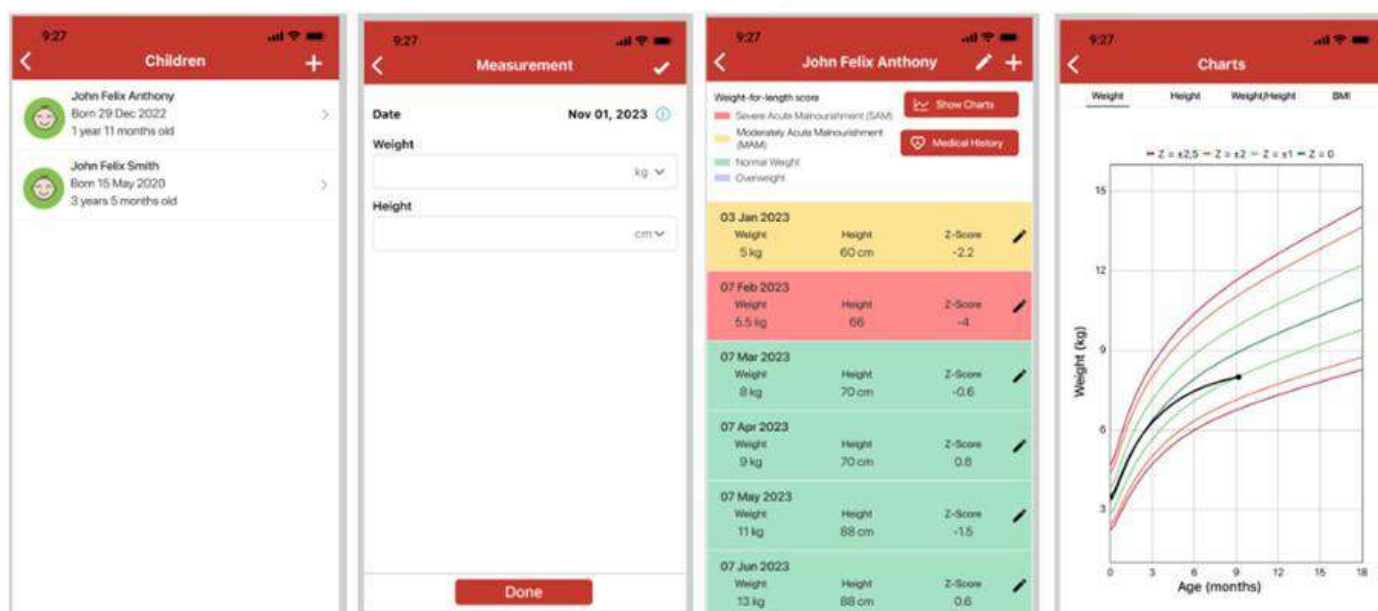




The CHE collaborates closely with the call center to conduct these examinations. The initial examination occurs promptly after birth to confirm successful delivery. A follow-up examination is conducted after one month, primarily to assess breastfeeding success. Subsequently, children are monitored every three months until the age of two, and then every six months until the age of five. Children displaying deviations from the growth chart are monitored more frequently, with monthly check-ups until the deviation resolves.

This systematic approach to child growth monitoring ensures that timely interventions can be implemented to address any deviations and promote healthy growth and development in children.

CGM workflow



Improved telemedicine and eDispensing services

In 2024, HE continued to expand its e-dispensing services especially in Kenya and Burundi supported by the ClickMedix monitoring system. By combining our telemedicine services with ClickMedix, we aim to address stunting rates in all countries where HE is active. On top of that, the eDispensing solution is completing our proposition of providing quality and affordable care in a controlled way through our network of Community Health Entrepreneurs.

eDispensing is the electronic retrieval of a prescription and the dispensing of the medicine to the patient. HE controls the treatment supplied and issued to the patient via registration of prescription treatments delivered to the CHE. Simultaneously, ePrescription will be provided to the CHE and to patients, and all medicines will be dispensed to patients. We have initially focused our services on chronic patients with hypertension, diabetes, and arthritis. But the e-Dispensing solution can be used for many other health services, such as infectious diseases and malnutrition

This initiative underscores HE's commitment to leveraging technology and innovative approaches to improve health outcomes, particularly among chronic patients with NCDs and children facing malnutrition. By implementing these health services, we aim to make a meaningful impact on the health and well-being of vulnerable people in the communities we serve.

PRIORITIES FOR 2025

HE enters 2025 with a focus on resilient, strategic growth. Priorities include strengthening the CHE network, improving quality and commitment, and adapting to diverse country contexts.

CHE Quality and Commitment

HE will continue to apply rigorous recruitment criteria and support new and existing CHEs through the CHE Incubator Program, designed to enhance business skills, income potential, and network alignment.

Ethiopia Expansion

A major priority is launching operations in Ethiopia. HE will appoint a project manager to develop a concept note and initiate a pilot in collaboration with national and regional ministries. The goal is to ensure a compliant, phased, and effective implementation of the Community Health Entrepreneurship Module (CHEM).

Further Scaling

Depending on the funding possibilities, scaling our network is prerequisite to become sustainable in the long term. Scaling should take place in a controlled way, filling up the blind spots in our current network and/or expanding the network by adding new CHEs to existing routes or new routes. Districts which are far away, and which cannot easily be integrated into our current network are likely not economically viable. Therefore, scaling should become more a strategic decision rather than an opportunistic decision to boost our revenues and impact. Although the current circumstances are challenging with less funding available in the health space and with economic and geopolitical unrest. HE, however, remains loyal to its ultimate goal: basic healthcare for all.

RESPONSIBLE BUSINESS CONDUCT

Healthy Entrepreneurs positions itself as a social enterprise, for which responsible business conduct is an integral part of its business operations. Healthy Entrepreneurs is compliant with the OECD Guidelines for Multinational Enterprises.

The OECD Guidelines for Multinational Enterprises (MNE Guidelines) are comprehensive international standards for responsible business conduct, which cover all major areas of business ethics.

In this way, Healthy Entrepreneurs has setup and implemented a whole range of policies, guidelines and procedures which steer and control the way we do business, and which determine our behavior towards our network of entrepreneurs, end customers, employees, suppliers and other stakeholders.

The main objectives of our policies can be summarized as follows:

- Improved healthcare by creating healthy business and healthy lives
- Creating a safe and sustainable environment for all stakeholders
- Act responsibly towards people, planet and profit

We accomplish this by stimulating awareness with regular training among our staff and entrepreneurs.

Healthy Entrepreneurs requires directors, officers and employees to observe high standards of business and personal ethics in the conduct of their duties and responsibilities. These high standards are reflected in our policies, procedures and guidelines. As our organization has grown tremendously in the past years, we felt the need to broaden our range of policies and procedures in the light of our corporate responsibility. As a result, Healthy Entrepreneurs has setup and implemented the following policies:

- **Anti-corruption Policy:** Healthy Entrepreneurs is committed to the principle of zero tolerance towards corruption. The Code of Conduct rejects any form of corruption. Corruption can take many forms such as: bribery, theft, embezzlement, extortion, exploitation of “conflict of interest”, fraud, granting or receiving unlawful compensation, money laundering etc.
- **Modern slavery and human trafficking Policy:** we do not tolerate slavery, trafficking or forced labor in any part of our business or supply chain
- **Conflict of Interest Policy:** employee’s or director’s personal interest may not contradict the interest of the company

- **Whistleblower policy:** this policy is intended to encourage and enable employees and others to raise serious concerns internally so that HE can address and correct inappropriate conduct and actions.
- **Prevention of sexual exploitation, abuse & harassment Policy:** Healthy Entrepreneurs is committed to a workplace that is free from sexual exploitation, sexual abuse and sexual harassment. All of us have a responsibility to act in an ethical and transparent way to build a respectful working culture that rejects inappropriate behavior, and where staff, partners and communities feel supported and valued.
- **Safeguarding and Child Protection Policy:** this policy affirms Healthy Entrepreneurs' commitment, under the United Nations Convention on the Rights of the Child (UNCRC), to keep the children in our global operations and programs safe, protected from harm and uphold their rights.
- **Data Privacy and Data Protection Policy:** this policy details how Healthy Entrepreneurs handles Personally Identifiable Information in accordance with Relevant Laws. Our protection standards need to be compliant with the European General Data Protection Regulation (GDPR) as well as with the Data Protection and Privacy Act 2019 in Uganda and the Data Protection Act in Kenya.
- **Environmental Policy:** this policy is to prevent and control potential risks to the environment. It acknowledges the impact of our activities throughout the value chain, from the sourcing of materials, through packaging, distribution, sales and marketing, to the use and consumption of our products.
- In our view, these policies are concrete tools to set up and manage our operations in such a way that it strengthens the local communities and the environment, instead of contributing negatively to them. To be fully compliant, we will organize (refresher) courses about our policies and guidelines among our staff and other stakeholders. It's our ambition that these policies are becoming an integral part of the way we do business. That starts already with the way we recruit, select and hire new staff and new entrepreneurs. It's also reflected in our procedures, (employee) manuals and other guidelines.
- All the activities reflected are related to our responsible business conduct. It's not that we only feel responsible, but we are also convinced that such a social investment will pay off financially, both for HE as well as for our entrepreneurs. This is how HE would like to do business and how we would like to become a changemaker in the lives of poor people.

STATEMENT OF INCOME AND EXPENDITURE 2023-2024

INCOME STATEMENT 2024

	2024	2023
	€	€
Income / turnover	2.102.478	3.171.752
Project Expenses	2.050.445	3.152.586
	<u>52.033</u>	<u>19.166</u>
Other Income		
Results	<u>52.033</u>	<u>19.166</u>
Other Expenses		
General Expenses	24.647	20.158
Operating result	<u>27.386</u>	<u>-992</u>
Financial income and expenses	-21.757	-16.129
Share in results of subsidiaries and participating interests		
BALANCE OF FUNDS	<u><u>5.629</u></u>	<u><u>-17.121</u></u>

BALANCE SHEET 2024

	2024	2023
	€	€
Financial assets		
Trade receivables		
Other receivables		432.854
Accrued income	572.183	311.052
Cash and cash equivalents	19.671	183.691
Total assets	<u><u>591.854</u></u>	<u><u>927.597</u></u>
Equity - reserves	13.012	7.383
Other related parties	299.792	901.154
Trade payables		
Other payables	279.050	19.060
Total liabilities	<u><u>591.854</u></u>	<u><u>927.597</u></u>

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