



2025 ANNUAL REPORT

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LETTER FROM THE CEO

A Pivotal Moment: Proven Results and a New Chapter in Leadership

Two words define what happened in 2025: validation and integration. From the beginning, we built our model to work inside Indonesia's existing health system — not beside it, not despite it. This year, that bet paid off.

In November, we learned that the 1000 Days Fund was named one of just 80 global recipients of the Action for Women's Health award, backed by Melinda French Gates and managed by Lever for Change. More than 4,000 organizations applied. We had a 2% chance. What the peer review committee saw — what we've always known — is that stunting doesn't yield to charity. It yields to systems.

"Stunting and malnutrition will never disappear from Indonesia's vocabulary unless community health workers are supervised, skilled, salaried, supplied, and sustained."

Government co-funding increased sixfold since 2023. In 2025, local governments contributed nearly USD \$480,000 — concrete proof that communities aren't just beneficiaries. They're owners of this work.

We also expanded Kader Academy to train CHWs in regions once considered unreachable, and integrated AI as a practical monitoring tool — not a showcase.

Looking ahead: we need to raise an additional USD \$800,000 in 2026 to sustain this momentum and scale across Indonesia by 2030. The window is open. The model is proven.

— Dr. Rindang Asmara



Dr. Rindang Asmara, MPH
CEO

Reflecting on 2025 — a year defined by validation and integration.

WE'RE AN
AWARDEE



34 PROVINCES
RECEIVE ASSISTANCE:

822,913

Pregnant women,
caregivers, and children
under 5 reached across
34 provinces

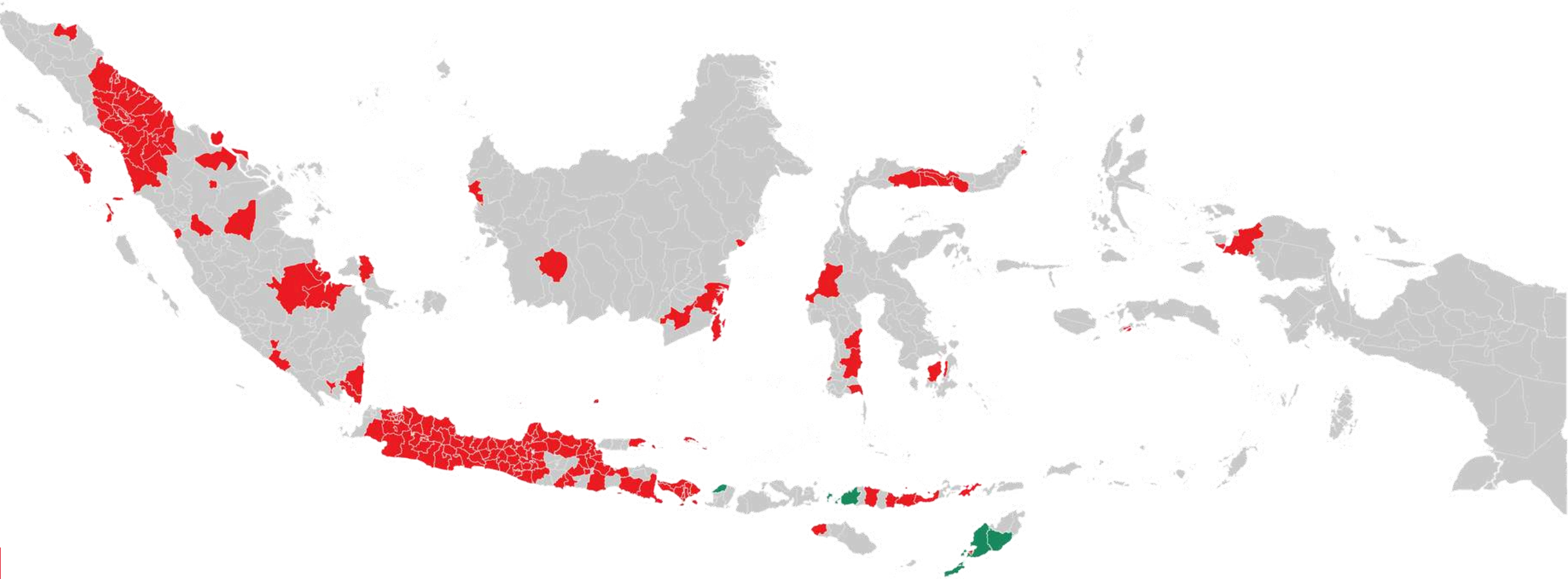
\$480,079

Government pledged
co-funding

72,050

Health workers (HWs)
and community health
workers (CHWs) trained

2025
IMPACT TO DATE



Reached through Kader Academy



Reached through Community Care Model High Fidelity Districts

95%

Exclusive Breastfeeding
compared to 66.4% nationwide.



76%

Protein Intake
compared to 68.5% in NTT.



42%

Reduction in chronic
malnutrition among
pregnant women in
targeted areas.

2025
IMPACT
TO DATE

28%

Reduction in low
birth weight in
targeted areas.



95%

IFA Adherence
compared to 59.6% nationwide.

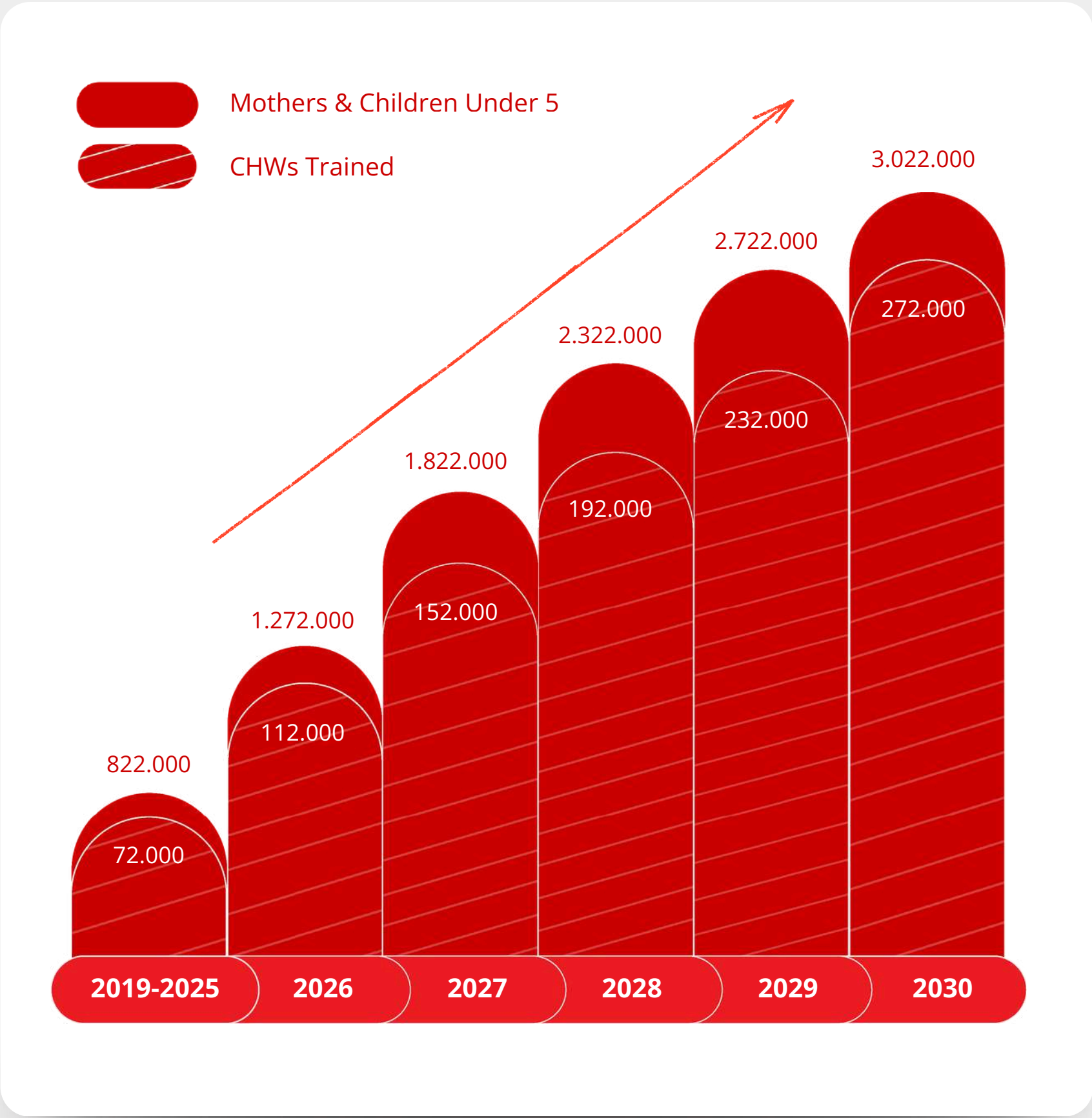
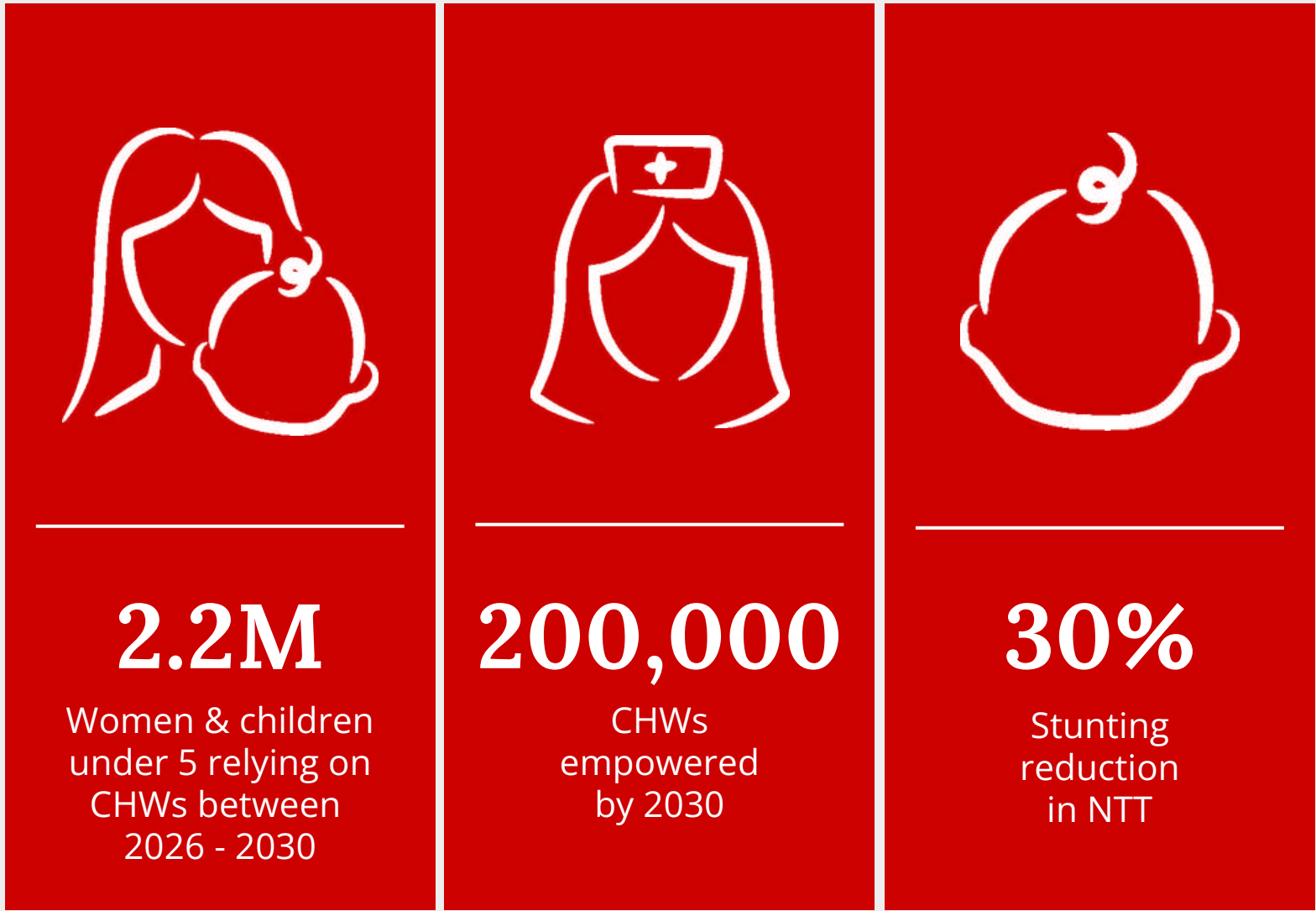


69%

ANC Compliance compared to
28.1% nationwide.

Five-year Strategic Plan

Our 2026–2030 strategy has one headline ambition: **empower 200,000 CHWs to reach 2.2 million mothers and children under five across 22 districts, driving a 30% reduction in stunting in East Nusa Tenggara by 2030** — and positioning that model for national adoption.



EVIDENCE

When Local Systems Are Empowered, Change Follows

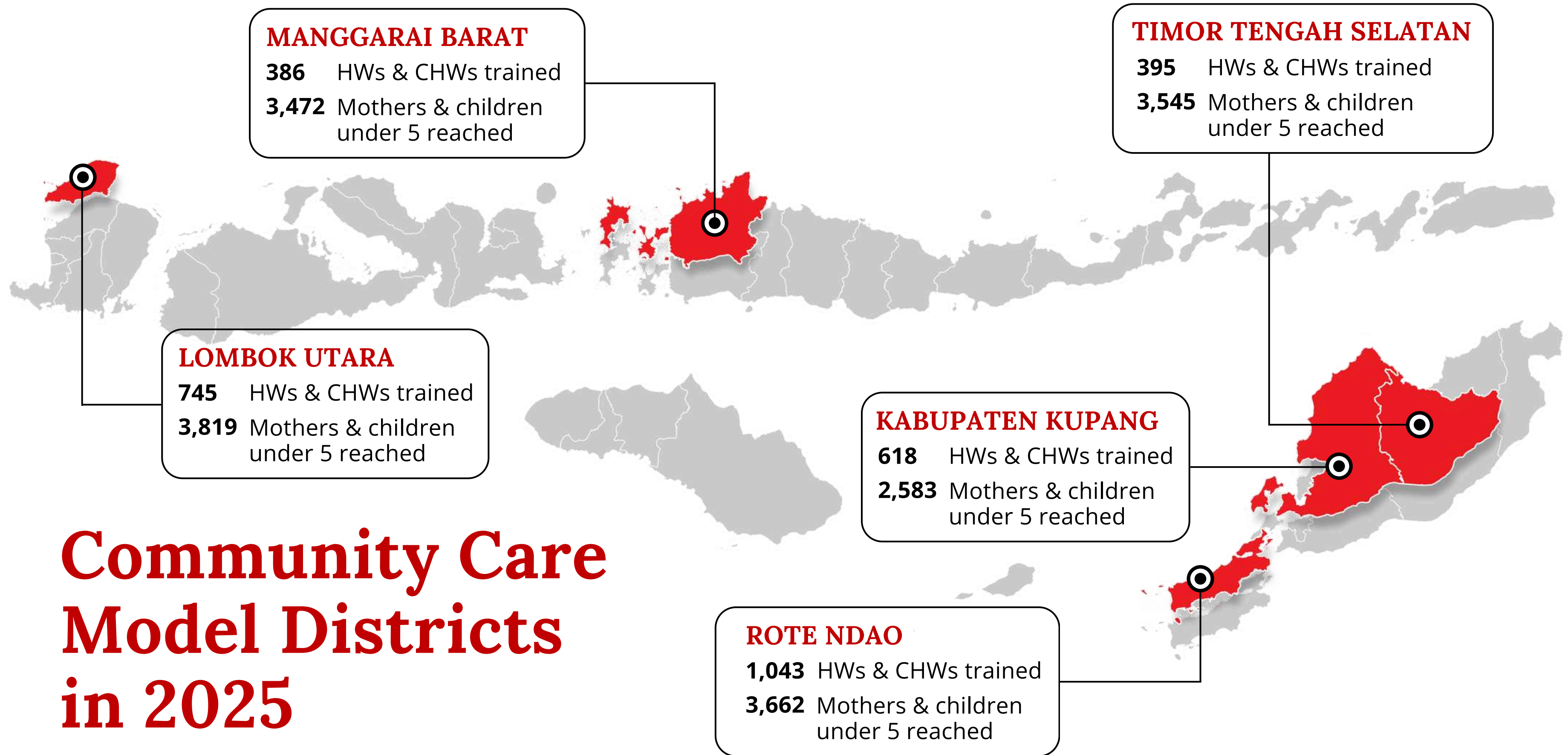
Mixed-Method Independent Evaluation

Independent evaluations show a consistent result: 1000 Days Fund model improves child health by strengthening people and system. From 2021-2024, **stunting fell 19% in Manggarai Barat and Rote Ndao, outperforming 18 other districts**. Progress accelerated in 2023-2024, reflecting global evidence that system-strengthening impact builds over time.

Trust is not a by-product, it is the intervention.

Independent evaluations by the Behavioural Insight Team (BIT) Singapore affirm that our model is built on a strong foundation, strengthening CHW capabilities has increased family trust, and in turn, improved health outcomes. Trust is the key mechanism that transforms CHW's knowledge, authority, and empathy into sustained behaviour change, and it is intentionally embedded and measured within our program design.





Community Care Model Districts in 2025

Trust in Action: Case Management

Across the Community Care Model districts, our trained CHWs began delivering structured case management to high-risk mothers and children under two, combining early risk detection, targeted counselling, and consistent follow-ups.

These outcomes, achieved in just four months, through an average of three home visits per case, affirm the power of skilled, supervised CHWs delivering structured case management to drive rapid, measurable change in maternal and child health.



876
Cases managed



32%
of stunted
children (6-23m)
moved above the
threshold



56%
of children with
weight faltering
reached healthy
weight

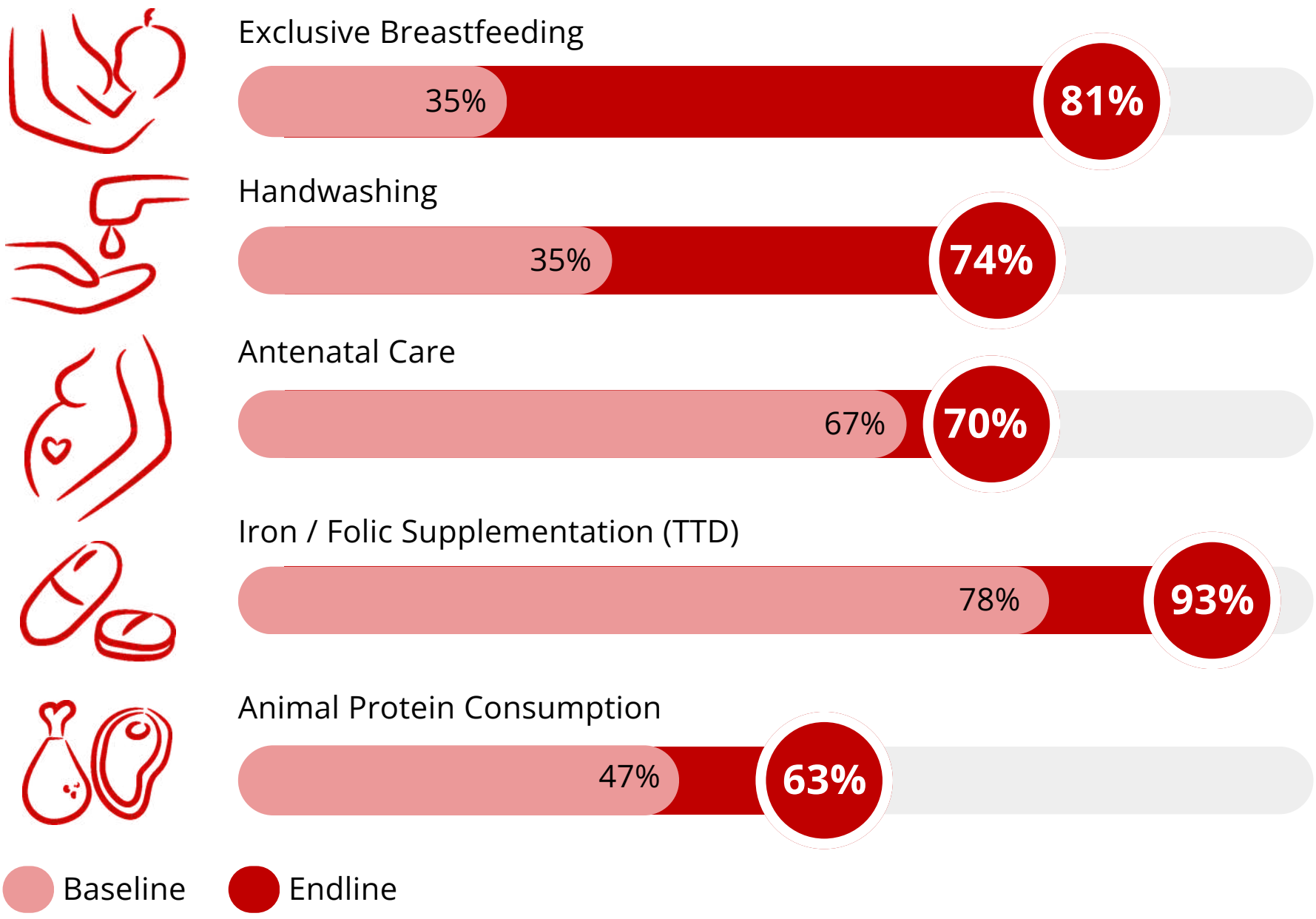


40%
of malnourished
mothers recovered
from malnutrition

CASE STUDY

Rote Ndao: When Every Part of the System Moves

CAREGIVER BEHAVIOUR CHANGE



2,100 CHWs formalized through district regulations



33% Reduction in stunting cases



44% Reduction in weight faltering



34% Reduction in maternal malnutrition

In Rote Ndao, one in three children experiences stunting. Launched in November 2024 with support from the J&J Foundation, William Lily Foundation and Amanah Bangun Negeri Foundation, the program shows what is possible when a health system works in alignment.

Through stakeholder insights, one conclusion was clear: impact came not from a single intervention, but from a system where health workers, CHWs, and village governments moved together.



GOVERNMENT MANDATE FOR SCALE IN NTT

The Minister of Health & the newly-elected Governor of Nusa Tenggara Timur (NTT) recognize our impact & have invited us to expand our program province-wide. This presents an unparalleled opportunity to implement our model at scale, with government buy-in and support. Our implementation strategy, combining CHW training, innovative tools, & real-time data collection, is designed for rapid, sustainable scaling. The Minister has given us the green light. We have a unique opportunity to scale our proven model across NTT, potentially impacting 320,000 children annually and formalizing 50,000 CHWs.

KADER ACADEMY

Ensuring Every Kader is Trained

Since its launch at the end of 2024, the Kader Academy has introduced three core modules to strengthen frontline health capacity. Delivered in close collaboration with the Government of East Nusa Tenggara and communities across Indonesia, the program has expanded access to high-quality training for CHWs, including those in previously hard-to-reach areas. This effort has enabled us to scale rapidly from 5 to 22 districts in East Nusa Tenggara, while simultaneously extending our reach nationwide, building a more connected, skilled, and responsive CHW network to accelerate stunting prevention across Indonesia.



16,969

Participants trained



150,010

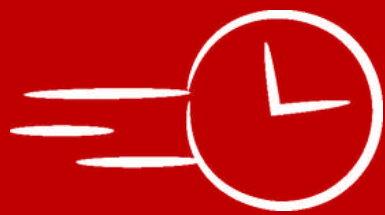
Mothers & children under 5 reached



TECHNOLOGY

Leveraging AI for Qualitative Insights

We partnered with Colectiv to test whether artificial intelligence could fundamentally improve how NGOs collect and analyze qualitative data. **The result:**



Faster insights



Greater reach



Lower costs-without sacrificing depth or rigor

Kader Perspectives on Exclusive Breastfeeding in Indonesia



116

Total Participants



1,870

Questions Answered



52,827

Total Word Count

What's next

Over the next 23 months, we will continue integrating an AI-based monitoring system into our M&E framework - enhancing monitoring and evaluation across our entire network of villages, districts, and provinces.



“Before, CHWs stayed silent, unsure of their knowledge and waiting for me to speak. Today, they stand at the front, confidently guiding mothers, reading the data, and taking action. Mothers now listen, trust, and return to them for advice. With continuous mentoring, CHWs didn’t just gain skills, they became trusted voices and leaders of change in their communities.”

— Antoneta Uki, Nutritionist, Rote Ndao



Financial Statement & Summary

STATEMENT OF ACTIVITY

DONATIONS & OTHER INCOME

Corporate contributions	\$69,772
Non-profit & foundation grants	\$762,283
Individual donations	\$16,924
Total Donations	\$848,978
Other income	\$45,316
Total income	\$894,294

OPERATING EXPENSES

Staff compensation	\$180,661
Staff allowance	\$41,491
General & administrative	\$29,403
Office supplies	\$584
Total operating expenses	\$252,138

PROGRAM EXPENSES

Consultants & professional fees	\$216,977
Meetings & incidentals	\$3,072
Program support	\$272,826
Project travel	\$120,913
Shipping & delivery	\$908
Toolkits & printings	\$11,132
Total program expenses	\$625,828
Total operating expenses	\$877,966
Net income	\$16,327

STATEMENT OF POSITION

ASSETS

Bank & cash equivalents	\$1,531,300
Account receivable	\$14,897
Prepaid expenses	\$16,195
Total current assets	\$1,562,392
Fixed assets (net)	\$1,611
Total non-current assets	\$1,611
Total assets	\$1,564,002

LIABILITIES

Tax debt	\$44
Revenue received in advance	\$1,170,120
Account payable	\$42,216
BPJS Kesehatan payable	\$616
BPJS Ketenagakerjaan payable	\$1,934
Accrued expenses & other	\$5,096
Total current liabilities	\$1,220,026
Post-employment liabilities	\$49,009
Total liabilities	\$1,269,035
Total liabilities & net assets	\$1,564,002

SUPPORTERS

With Gratitude

As we reflect on 2025, we are deeply thankful for our generous supporters and dedicated partners who made every moment of impact possible. Over the past 6 years, our community has helped stunting prevention across Indonesia and other countries. Thank you for standing by us and enabling this life-changing work. With your support, we ended 2025 strong and look forward an even brighter 2026.

Foundations

National Philanthropic Trust
Asia Community Foundation
Dovetail Impact Foundation
MAC3 Impact Philanthropies
The Johnson & Johnson Foundation
Elsa Miller Foundation
Yayasan Pelayanan Kasih A&A Rachmat
LI Foundation
Yayasan William dan Lily
Yayasan Amanah Bangun Negeri
Yayasan Dunia Lebih Baik

Corporate Supporters

PT Daya Adicipta Motora
PT Adaro Indonesia
PT Softex Indonesia
KitaBisa
PT Cendana Indopearls
Gin Gin Bakery
Mitra Prodin
PT Adaro Indonesia
Persada Capital Investama
The Bali Florist
Atlas Pearl
Logiframe

Individual Supporters

Anthonia Hui
Pang Sze Khai
Aleem Azim
Thomas Alan Thrasher

Partnerships

Kementerian Kesehatan Republik Indonesia
Pemerintah Provinsi Nusa Tenggara Timur
BKKBN
Community Health Impact Coalition
MD Foundation
Infokes Indonesia
QuBisa
Portkemas
Ibu2ID
Solar Chapter
PT Myriad
Dr. Tan Shot Yen
Dr. Shane Tuty Cornish
Behavioural Insight Team
Myriad USA
Panorama Global

Our Team



DR. RINDANG ASMARA
CEO



AISYAH NURRUSMA
COO



DR. ADRIANA VIOLA MIRANDA
MER Director



LIDYA SOPHIANI
Program Implementation
Director



OCTAVIANUS SAPUTRA
Finance Director



CHELSEA STONE
Director of Development
& Partnership

ALIGNMENT WITH SUSTAINABLE DEVELOPMENT GOALS

2 ZERO HUNGER



SDG 2:
Zero Hunger
(through reducing malnutrition and stunting)

3 GOOD HEALTH AND WELL-BEING



SDG 3:
Good Health and Well-being
(maternal, newborn, and child health)

4 QUALITY EDUCATION



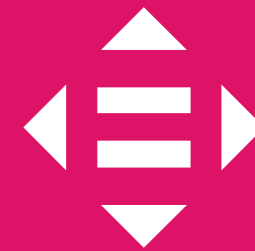
SDG 4:
Quality Education
(education and training delivered to CHWs)

5 GENDER EQUALITY



SDG 5:
Gender Equality
(empowering women through health and caregiving roles)

10 REDUCED INEQUALITIES



SDG 10:
Reduced Inequalities
(rural health access, equity)

11 SUSTAINABLE CITIES AND COMMUNITIES



SDG 11:
Sustainable Cities and Communities
(systemic change)

17 PARTNERSHIPS FOR THE GOALS



SDG 17:
Partnerships for the Goals
(collaboration with local government, corporates, individuals, foundations both domestically and internationally)