BINAYTARA

WE EXIST TO MINIMIZE
CANCER HEALTH DISPARITIES



ANNUAL IMPACT REPORT 2025

Nov 1, 2024 to Oct 31, 2025



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Letter from Our Founders

Dear Friends and Supporters,

As we reflect on this past year at Binaytara, the distance afforded by hindsight lets us take in the full picture. From this distance, the moments and milestones form a pattern of growth—tangible, steady, and measured. Thanks to incredible acts of generosity and partnership from supporters like you, we've made unprecedented progress toward the goal Binaytara has remained fixed on since 2007: minimizing cancer health disparities.

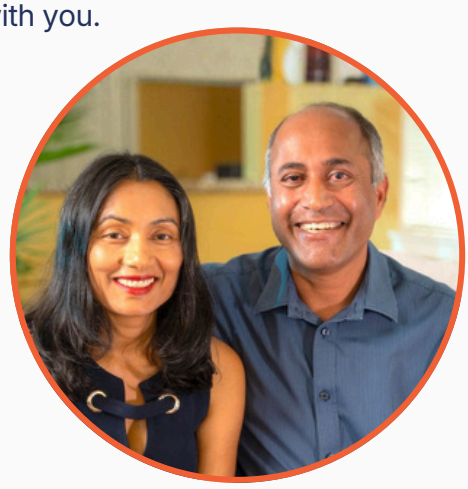
We're **energized** by the ever-expanding scope of our work. We developed our existing global oncology programs in Nepal, launched a new partnership in Nigeria, and our game-based educational tool OncoBlast gave healthcare professionals in more than 15 countries free access to the latest developments in oncology.

We're **humbled** by our mission-sustaining partnerships. Our supporters who were moved to early action to become the founding champions of our proposed 250-bed cancer hospital in Nepal, our partner organizations that extended the reach of our cancer prevention and relief services, and our dedicated volunteers—these and other partnerships proved that healthcare equity is a unifying vision.

Above all, we're **emboldened** to take our work to new heights as the impact of our existing healthcare initiatives begins to ripple out, creating real, lasting change. Your support has been a lifeline to those without access to the cancer care they deserve. As we continue to implement lasting solutions to healthcare inequities nationally and abroad, we invite you to deepen your engagement with Binaytara by contributing to our programs, volunteering, or sharing our mission with others.

In moments of reflection like these, the path ahead becomes clearer than ever. We're deeply grateful to those who walked with us in 2025, and as we retrace our steps in this impact report, we hope to reaffirm our shared destination: a world where everyone has access to evidence-based, culturally appropriate healthcare—a path we are paving together with you.

With gratitude,



Dr. Binay Shah
President and Co-Founder

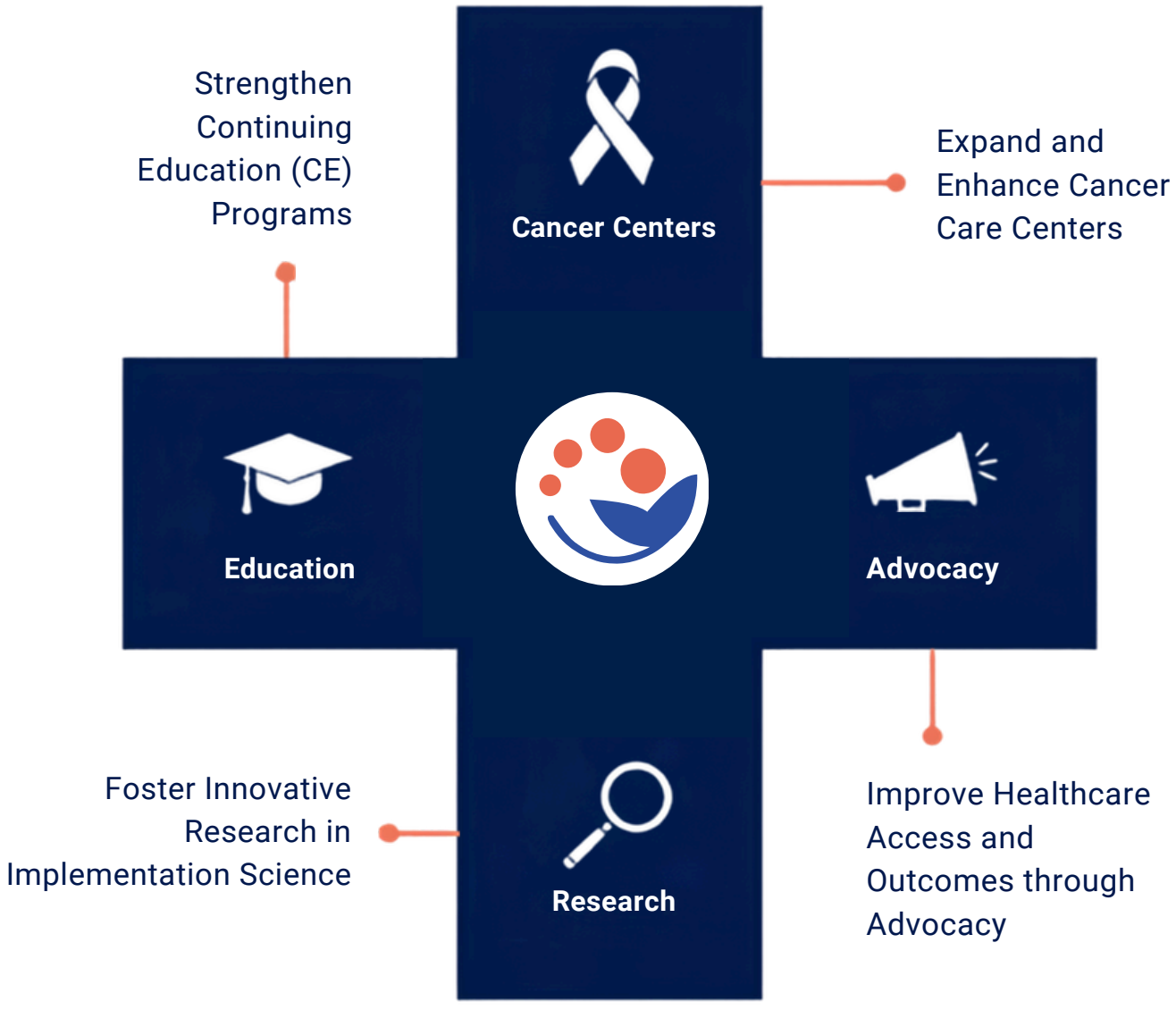
Tara Shah
Executive Director and Co-Founder

C.A.R.E.



What does it mean for cancer care to be truly accessible?

In the United States and across the globe, cancer patients and their caretakers are barred from the quality of care every human deserves. **A multifaceted problem requires a multidisciplinary solution, and the C.A.R.E. model is our roadmap there.** Explore our four strategic priorities as we work to systematically dismantle cancer health disparities.



C.A.R.E.

Cancer Care Centers

The Challenge: Cancer is the second leading cause of death worldwide, with mortality rates from the disease exceeding the combined mortality rates of HIV/AIDS, tuberculosis, and malaria.

Binaytara leads global oncology initiatives that prioritize safe, effective, quality, and affordable cancer care. In practice, this looks like preventive services, education, treatment, and palliative care services — all building toward evidence-based, patient-centered, culturally appropriate cancer care for every community.

In 2025, prevention measures took center stage in our global oncology programming. With funding from Engage Nepal and the Margaret Rowley Clarke Family Foundation, Binaytara held a series of health camps in underserved rural communities in the Janakpur region to catch and treat cancer while still at a treatable stage. The screenings also targeted general quality of life issues, diagnosing infectious diseases, cardiovascular and respiratory conditions, and joint problems.

A continent over, Binaytara laid the groundwork to bring high-quality cancer care to Nigeria with the landmark signing of a memorandum of understanding with the Federal Medical Center (FMC) Ebute Metta, a hospital that serves 40 million people in Southern Nigeria. Dubbed Project Naija, the collaboration between Binaytara and FMC Ebute Metta aims to kickstart better cancer care in Nigeria and beyond.


Lohana, Nepal


Lagos, Nigeria


Janakpur, Nepal

By the Numbers

4
health camps in calendar year 2025

639
people served (365 from cancer screening camps, 274 HPV tests)

97%
of the women we screened for cervical cancer were screened for the first time in their lives

105
visits to the clinic in Janakpur

Cancer Care: The Binaytara Health Clinic continued to provide affordable oncology services to people in Southern Nepal, who previously faced eight-plus-hour bus rides to receive prohibitively costly care.

Ostomy Support: We established our ostomy care program with The Rose International Fund for Children for ostomy patients in Nepal to receive effective, dignified gastrointestinal cancer care.

Project Naija: We partnered with one of the biggest federal hospitals in Nigeria, launching a strategic plan to improve cancer care in the region through infrastructure, education, and capacity building.

Cervical Screenings: Our cervical cancer screening program focused on sustainable, scalable programming for maximum impact; we screened over 250 women for the high-risk HPV strains that lead to cervical cancer.

Nursing Development: Volunteer nurses in the U.S. hosted virtual informational sessions on oncology nursing with the Binaytara Health Clinic staff in Nepal, and the Binaytara Nurse Training Program raised funds for our nurses to receive formal comprehensive training from leading institutions.

Health Camps: Across our health camps, we screened over 630 people for cancer and other health conditions, establishing referral pathways for those who recieved positive diagnoses.



Staff Spotlight: Ruchika Shrestha

Ruchika is one of the specialized nurses at Binaytara Health Clinic. She has worked with us since we first started serving patients in 2018. In 2025, she helped lead our free health camps, cancer screenings, and HPV testing program. ***"If my effort saves a life, I will work day and night. Happiness outweighed the fatigue."***

Women line up for free cervical cancer screening



C.A.R.E.

Advocacy

The Challenge: Global access disparities are glaring, in particular among low-resource communities and women. A Lancet Commission analysis found that of the 2.3 million women who die prematurely from cancer worldwide each year, 1.5 million deaths could be averted through primary prevention or early detection strategies, while a further 800,000 deaths could be averted if all women everywhere could access optimal cancer care.



Binaytara has spent 2025 centering the conversation around the people healthcare systems overlook, including women, lower-income individuals, and rural communities. Our subject matter experts have led global healthcare policy debates with evidence-based advocacy championing fair and compassionate cancer care. Headed by our Center for Women's Cancer Access and Advocacy, our program implementation has forefronted women's health. Our flagship conference, Summit on Cancer Health Disparities (SCHD), is one of the few conferences that takes disparities in cancer care and delivery as its focus. We're finding highly visible platforms to share our belief that access to care shouldn't be gatekept by exorbitant fees, urban-only facilities, or misinformation that creates diagnosis crises.

OUR IMPACT:

Policy Panel:
We hosted an in-person healthcare policy debate in Kathmandu, Nepal that charted a path toward equitable insurance coverage with specific recommendations for reform.

Equity Events:
Closer to home, our 2025 SCHD conference drew medical professionals from across the country into the debate "Crisis in Care: Can the U.S. Find a Sustainable Model for Affordable Healthcare?".

News Advocacy:
Binaytara published several op-eds in news media outlets raising awareness about cancer health disparities, including ASCO Post, KFF Health News, Modern Healthcare, The Cancer Letter, The Seattle Times, and Think Global Health.

Advocacy *Cont.*

BY THE NUMBERS

72%

of patients served by our health clinic and health camps were women

39%

of our published articles were about health equity or health care policy reform

2

healthcare policy debates (one in the US and one in Nepal)

Up for Debate:

Binaytara co-founder Dr. Binay Shah sat on a panel alongside high-profile healthcare stakeholders like Dr. Sudha Sharma, now Nepal's Minister of Health and Population. The panel addressed systemic gaps in Nepal's health insurance framework and led to consensus statements and policy recommendations.



Female Community Healthcare Volunteers:

Women from local communities received a brief, intensive training, then acted as patient navigators to make sure female patients received culturally appropriate care.



"Collaborating with Binaytara has been an important part of my role as a Female Community Health Volunteer... Unfortunately, one of the greatest barriers is that decisions about women's health are often made by men or other family members. **If we can address this challenge and educate the community, we will be able to create broader, lasting change."** - **FCHV Shila Paswan**

C.A.R.E.

Research



There's a gap between what medical researchers *know* and the actual integration of these breakthroughs into clinical practice—in short, what medical professionals *do*. The emergent field innovating to close this gap is called implementation science. Binaytara is on the front lines of the movement to bring siloed-away solutions to the patients who need them, especially those in underserved communities. At the same time, we're supporting medical research and scholarship in the field of oncology through our publications and early-career research award opportunities. Our robust research initiatives are a testament to our confidence that equitable cancer care and delivery starts with fostering innovation.

01

Research Publications:

We continued to run our fully digital and open-access peer-reviewed research journal, the International Journal of Cancer Care and Delivery (IJCCD), which focuses on global oncology and systemic barriers to health like geography, race and ethnicity—a niche underrepresented in scholarly conversation.

02

Expanding Access:

Binaytara Fractional CTO Bipul Luitel created and implemented AIRA, an AI research assistant for IJCCD that makes the Journal's contents more accessible than ever for scholars and non-scholars alike.

03

Implementation Science:

With a grant from the Murdock Charitable Trust, we hired an Implementation Science & Research Development Officer to kickstart the creation of an implementation science cancer research unit in Washington.

04

Research Awards:

We launched the Binaytara Research Awards, increasing funding opportunities for early-care investors and fellows. After a record-setting influx of research abstract submissions, the awar-dee candidates will compete in a first-of-its-kind Shark Tank-style pitching event in early 2026.

By the Numbers

10,000+

global learners downloaded and read IJCCD articles

10

countries accessing IJCCD beyond the United States

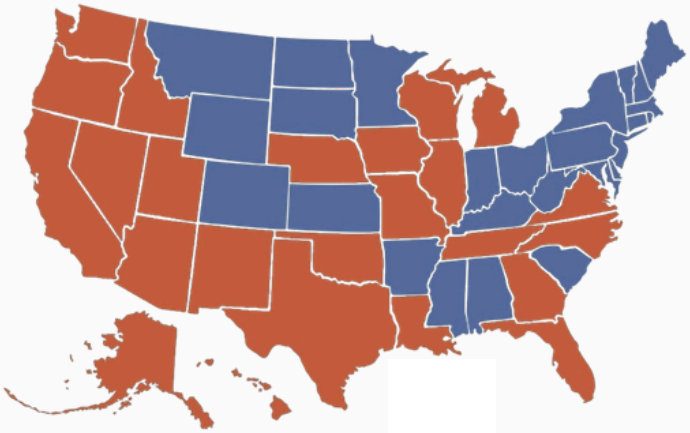
8

original research and review articles

C.A.R.E.

Education

The Challenge: There's a cancer survival disparity between rural and urban areas in the United States, in part because rurality is currently a barrier to accessing state-of-the-art cancer prevention, diagnosis, and treatment services. In short, where you live currently impacts your likelihood of surviving cancer.



States visited in FY2025



The fourth pillar of our programming supports the continued education of healthcare providers in the fields of hematology and oncology. This year, we held the 7th International Cancer Congress in Janakpur, Nepal, emphasizing cutting-edge treatments and their practical applications in the South Asian health-care landscape.

Within the U.S., Binaytara organizes the most oncology/hematology continuing medical education (CME) conferences, making us one of the few not-for-profit CME providers. The difference shows: many of our conferences are in smaller markets with less access to developments in best oncology practices—because when CME extends to rural areas, practices that care for rural patients benefit. OncoBlast, our free, app-based, gamified CME resource, is further democratizing access to CME credits, usually an investment in time and money.

"It is very important for patients and for doctors to have access to these conferences. And it's not necessarily that they don't have the means to attend, but maybe they don't have the time. Maybe they're the main caregiver in the family. So we bring the information to them, and we also learn from each other in the process."

Dr. Julie Graff, Binaytrara faculty for Best of ASCO® Portland 2025

Dr. Andrew Pierson, Binaytara faculty for Best of ASCO® Boise 2025

You get a great education, and the underlying mission is to make oncology care better... The fact that it is local and that Binaytara makes it affordable, sometimes even free, for providers is a big deal."

Education *Cont.*

Continuing Education:

We hosted the most oncology CE-accredited in-person events in the United States with **49** conferences.

Beyond ASCO:

We also hosted the most officially licensed Best of ASCO® events (bite-sized, accessible highlights from the ASCO Annual Meeting for those unable to make the main event) in the United States, garnering record numbers of healthcare professional attendees.

Funding Learning:

We extended **529** discounted conference registrations and **$30,000+** in travel grants to help keep learning accessible.

Innovating CME:

OncoBlast, the only gaming app that offers free CME-accredited, oncology-centered education for healthcare professionals, offered more than **42** credits of CME for free, the equivalent of ~6 in-person conferences.

The Cancer News:

The Cancer News kept readers up to date with oncology-related developments, advice, and perspectives.







Education *Cont.*



Binaytara's Nepal Team conducts community outreach sessions, educating school-age students on cervical health.

Program Spotlight

THE CANCER NEWS

AN AUTHORITATIVE RESOURCE FOR EVERYTHING ABOUT CANCER

In a sea of online misinformation, we established The Cancer News (TCN) as an authoritative resource to bridge the trifold gap between healthcare providers delivering care, researchers developing treatments, and patients receiving care. TCN collaborates with cancer doctors, scientists, and other healthcare professionals to publish topics from risk factors to early detection strategies, debunking unproven claims and highlighting the risks of under-tested therapies. Featuring interviews with cancer survivors, physical therapists, nurses, and advocates working to reduce disparities, TCN is an accessible resource for anyone wanting to dig deep in the field of oncology.

By the Numbers

49 in-person CME-accredited conferences in fiscal year 2025

2,182 oncology and hematology professionals educated

27 OncoBlast courses, providing free CME for **882** clinician learners in **15+** countries

4,018 total CME credits awarded

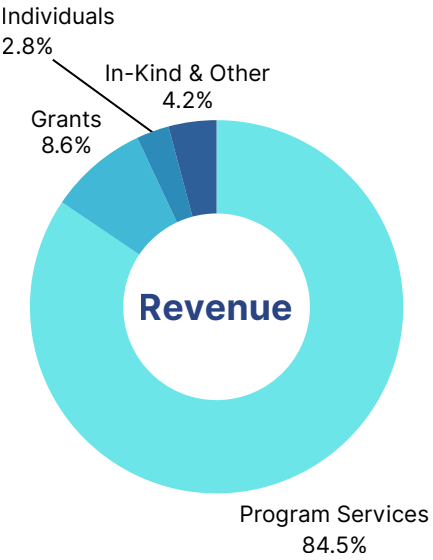
Financial Summary

Reporting Period - Fiscal Year Ending 2025
(November 1, 2024 to October 31, 2025)

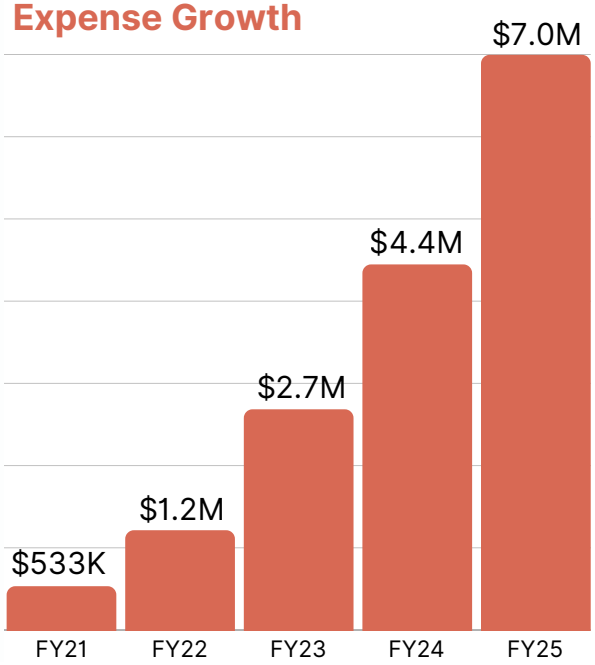
Revenue	**$10,563,269**
Program Revenues:	$8,921,535
Grants:	$904,336
Individual Donations:	$298,400
In-Kind and Other:	$438,998

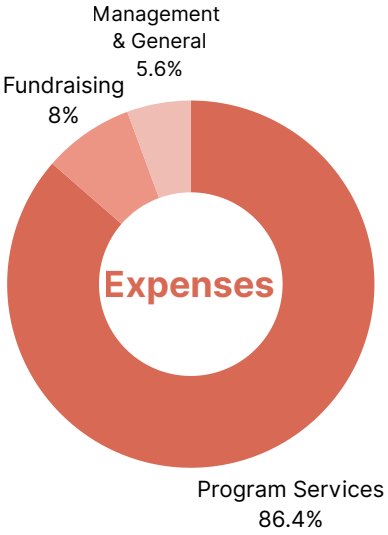
Expenses	**$6,996,086**
Program Services:	$6,044,410
Fundraising:	$558,588
Management & General:	$393,088

*



Expense Growth





Binaytara has seen rapid, accelerating growth over the past five years, enabling us to expand our programs and continually make a greater impact.

* Figures over $1 million are rounded to the nearest $100,000. Figures under $1 million are rounded to the nearest $1,000.

Every dollar raised above current operating expenses is building our reserves to expand our global oncology programs including constructing a 250-bed comprehensive cancer hospital in Janakpur, Nepal.

Charity Navigator ✦ FOUR-STAR ✦

Platinum Transparency 2026 Candid.

We are committed to financial transparency and efficient allocation of resources to maximize our impact. Thank you for your continued support of our mission. For audited financial statements, visit binaytara.org.

Leadership





EXECUTIVE TEAM

Binay Shah, MD, MHA
President and Co-Founder

Tara Shah, RN
Executive Director and Co-Founder

LEADERSHIP

Matt Lambert
Director of Marketing and Communications

Bipul Luitel, PhD
Fractional Chief Technology Officer

Justin Marquart
Chief Development Officer

Jin Mou, MD, MSc, MPH, PhD
Senior Research Scientist; Implementation Science & Research Development Officer

Vivian Scheidt
Director of Sponsorships

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Binaytara

Tara Shah, RN
Binaytara
Treasurer and Secretary

Xiaowen Wang, MD, PhD
Providence Regional Cancer Partnership



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For other giving options, such as donor-advised funds, employer matched giving, stock, legacy, or in-kind, please contact partnerships@binaytara.org