

SOLIDAR MED



Annual Report

2016



SolidarMed improves
health care for 1.5 million
people in southern Africa.

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“Malaria can and should not be a threat to future generations of African children.”

Dr med. Svend Capol
President of SolidarMed

It is time for the next step. It is time for change. It is time for the next president!

In the Annual Report of 2002, my predecessor Hugo Morder quoted the German Federal Ministry for Economic Cooperation and Development: “The best remedy for terror is justice.” He pinned his hopes on a quote by Willy Brandt: “Development policy is the peace policy of the 21st century”. What seemed plausible then seems a long way off now. Looking at the terrorism and conflicts in the world today, one could claim that the last 14 years of development policy have not brought us one step further. So it does one good to read this Annual Report and learn just how much SolidarMed was able to achieve over the past year.

All good things come in threes

After 14 eventful years and in SolidarMed’s 90th year as an association, my time as president is coming to an end. If I had to single out our three most important achievements during this time, for me these would be our introduction of HIV/Aids treatment with the SMART programme, the development of the support and training programme for health professionals in Zambia and the admission of SolidarMed into the ranks of organisations receiving programme support by the SDC. These three achievements were not simply institutional steps, but real developmental leaps. This was only possible thanks to the vision, foresight and commitment of the board, the hard and excellent work of staff at headquarters and the generous financial contributions of our donors. I am very grateful to all of you. I consider myself extraordinarily fortunate for your support during my tenure as president. Following the Roman philosopher Seneca’s wisdom that “luck is what happens when preparation meets opportunity”, I was very lucky as president over the past years.

SolidarMed has continued to develop as organisation, rising to the challenges with often highly innovative programmes and has positioned itself extremely well as a Swiss NGO.

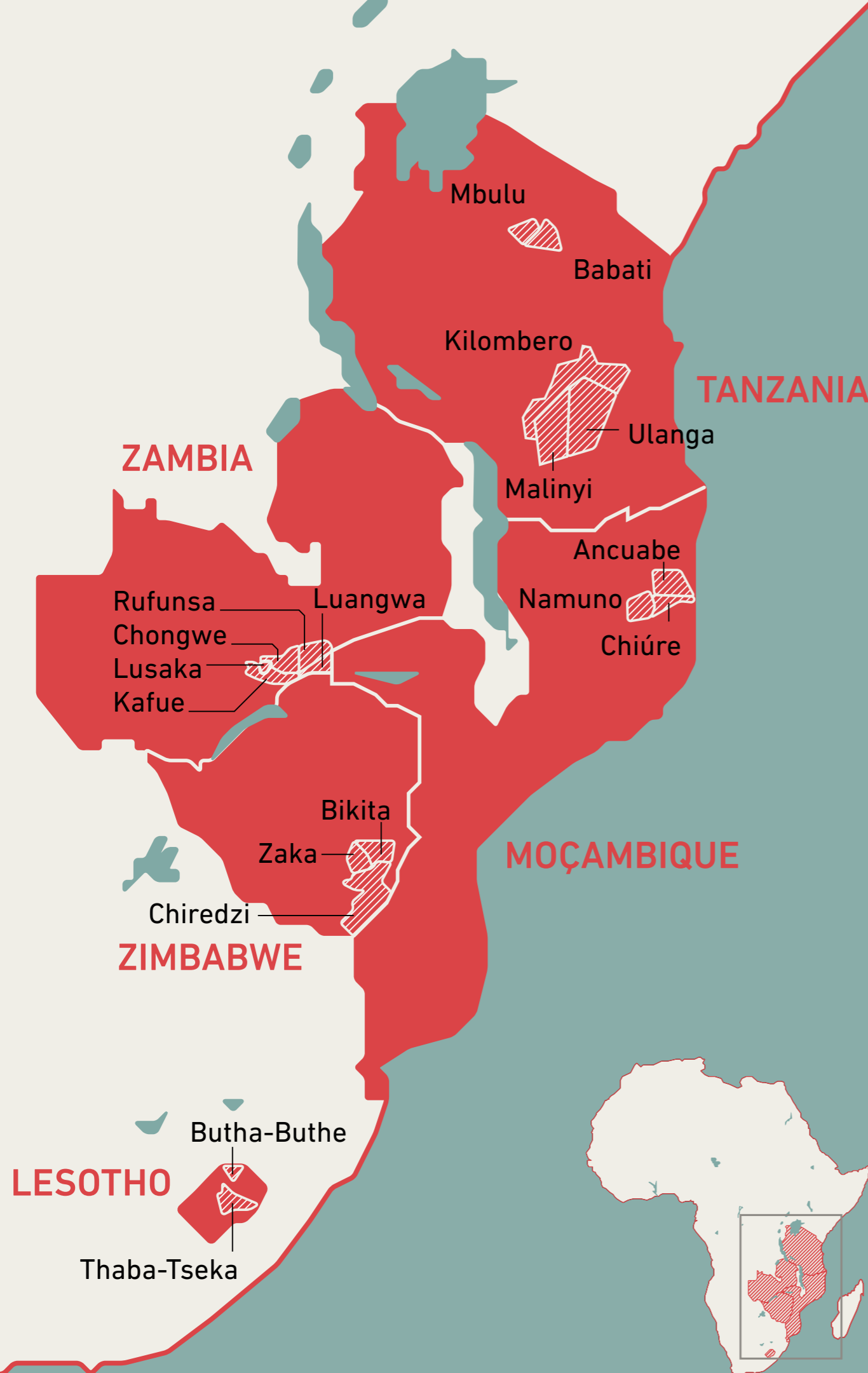
New ideas for new challenges

In our rapidly changing world, new ideas are incredibly important. The challenges of development cooperation are becoming ever more complex. Our partners in Africa have emancipated themselves and follow a self-determined agenda. They do not simply accept projects placed before them, but rather critically evaluate which organisations they choose to work with. An organisation the size of SolidarMed cannot offer all the necessary solutions on its own. Closer cooperation with other organisations is important in order to tackle tasks successfully and to be a reliable, long-term partner for the people in southern Africa. SolidarMed is ready for the future. The board can count on the commitment of new members. Ensuring the continuity of the organisation, they will also bring in fresh ideas to advance the health projects in a way that is forward-looking, inspiring, captivating and visionary. It is time for the next step. It is time for something new!



Dr. med. Svend Capol
President

The projects



In 2016, SolidarMed worked on 24 projects in rural areas of Lesotho, Mozambique, Tanzania, Zambia and Zimbabwe. All projects have the goal of improving health care for the population in some of the poorest regions of the world.

Lesotho

- Support of Paray hospital
- Primary health care for the mountain population (incl. Seboche hospital)
- 90-90-90: Effective HIV treatment as prevention (Butha Buthe)
- Conducting operational research

Mozambique

- MUANA – protecting children and adolescents from HIV (Ancyube)
- MAMA – Health for mothers and newborn babies
- Ensuring water supply for health centres (Ancyube)
- Preventing and treating malaria in children (Chiúre)
- Conducting operational research
- Wiwanana¹

Tanzania

- Supporting Dareda Hospital (incl. SMART²)
- Supporting the Lugala Hospital Development Plan (incl. construction of a new operating theatre and SMART)
- Support for Lugala Nursing School
- Support for Edgar Maranta Nursing School in Ifakara³
- Strengthening primary health care in Mbulu (PHCM)
- Strengthening primary health care in Ulanga and Malinyi (PHCU)

Zambia

- Training associate clinicians (Medical Licentiates)
- Training of nursing staff and midwives for rural hospitals
- Development of a housing association for health staff in rural Zambia

Zimbabwe

- Securing the provision of medical care in Musiso Hospital
- Securing the provision of medical care at Silveira Hospital
- Support of nursing schools in Musiso and Silveira
- HIV and tuberculosis treatment in three districts (incl. Ruponeso – saving children's lives)
- MAMA - Health for mothers and newborn babies in two districts

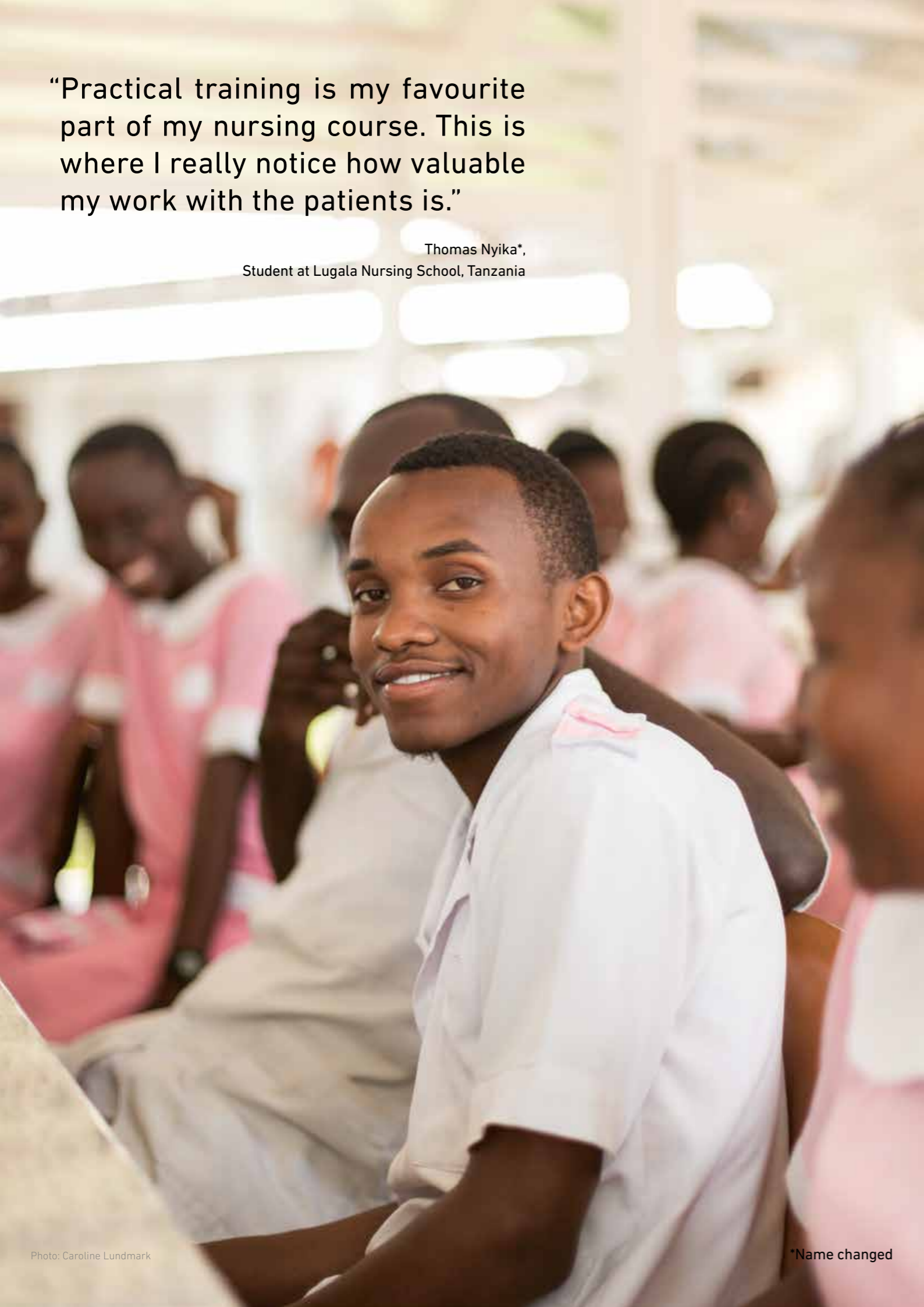
¹Wiwanana: local Mozambican partner organisation for health promotion in the villages

²SMART: regional programme for HIV/AIDS prevention and treatment in hospitals, rural health centres and villages

³As a mandate from the SDC.

“Practical training is my favourite part of my nursing course. This is where I really notice how valuable my work with the patients is.”

Thomas Nyika*,
Student at Lugala Nursing School, Tanzania



For many, Africa is a continent of poverty, characterised by starving children and dried out fields. Some see a place of foreign customs, exotic cultures and colourful traditions.

Yet ever more people are also recognising Africa's attractive potential for growth and economic development. With 54 countries covering 30 million square kilometres of land, 2'000 languages and over a billion people, they see a continent of hope: modern, entrepreneurial and full of initiative.

There is no true or false

Africa is diverse and contradictory, modern and traditional at the same time. It encompasses conflicts in Moçambique, a lively art scene in Zimbabwe, valuable raw materials in Zambia and high-tech in South Africa. What is certain: Africa is going places. 40 percent of the population is under the age of 15 – by 2050, this number will double to 800 million. All these young people want to learn, want to work and want to move their countries forward.

But too often, this is exactly what they cannot do. Africa's developmental capacity is huge, but this potential is not tapped and the benefits of economic growth are not reaching everyone. Sick people cannot work. Mothers caring for sick children cannot attend to their fields. Children with diarrhoea miss school. And this is because things we take for granted are lacking: A hospital nearby. An X-ray machine. Out-patient care services. Access to clean water. Every year, high treatment costs push 100 million people into poverty.

This is where SolidarMed works

We strengthen primary health care in the rural areas, where the poorest people live. Our doctors and nurses train health professionals. We

support hospitals. And we promote fresh ideas and local initiatives in places where people have been left to face their problems alone. Thanks to our expertise and our clear focus, we could achieve a lot in 2016, as the following pages show. Whether it's malaria in Tanzania, maternal health in Moçambique or medical training in Zambia: We are committed to ensuring that mothers stay healthy, children can learn healthily and healthy young people can work. Over 1.5 million people benefit from this.

A healthy Africa helps everyone

SolidarMed does not seek to develop Africa. We give people a fair chance to take their fate into their own hands. Because a safe and wealthy Africa is good for Switzerland too. Because healthy people with prospects do not flee. And because we assume responsibility in our globalised world.

For this, we need the support of people who believe in our work. Without the backing of the many donors, sponsors, members, testators, firms, foundations and institutional donors, this would not be possible.

My heartfelt thanks to all those who share our convictions and who walk with us on the path towards a healthy world!



Jochen Ehmer
Executive Director

Prevention, treatment and care in our partner hospitals was a central concern of the SolidarMed projects in 2016, and this was reflected in our activities.

In countries with fewer resources, district hospitals play an important role in primary health care for the population. They provide medical expertise, store and distribute medication, supervise and assure the quality of the surrounding health centres and collect information about the health status of the population.

Given their key role in health service provision, in this reporting year SolidarMed provided support to partner hospitals and health centres for the procurement of medical material and equipment like X-ray or ultrasound machines for diagnosis. In addition, SolidarMed provided emergency obstetric instruments and surgical equipment, improved infrastructure or repaired water systems. Furthermore, we succeeded in improving the quality of clinical treatment for pregnant women and were able to improve the care of newborn babies. Thanks to close cooperation with hospital staff, the SolidarMed doctors enhanced local competencies in patient care.

Better primary health care for
1.5 million
people

Projects in **18** districts
3'150
people newly admitted into the HIV programme

31
hospitals¹ supported

Better services in
132
health centres²

¹ ≥ 50 beds

² < 50 beds

Out-patient consultations in the partner hospitals

The number of men, women and children per year who received out-patient treatment with the help of SolidarMed in a partner hospital. Since 2012, these constitute close to 3.2 million consultations.



Enabled advanced training for
1'419
nurses, midwives and doctors

1
university degree programme promoted

Supported and advised
280
nurses, midwives and associate clinicians newly trained

25
training hospitals

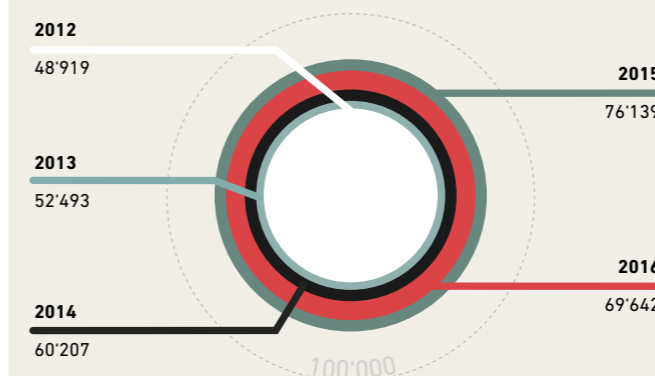
15 staff houses built

7 nursing schools supported

Staff in a rural hospital must be able to treat everything: from emergencies to deliveries to chronic diseases. SolidarMed supported local health professionals in 2016.

Whilst Switzerland employs six times more health workers than required by the WHO, the situation in SolidarMed's project areas is precarious. On average, only 7.4 nurses see to the needs of 10'000 people. This is merely one quarter of the minimum required. The situation is more dire still when it comes to doctors.

To counteract this, SolidarMed trained new health professionals in 2016 and provided advanced training to existing staff. Nurses, midwives, laboratory staff, pharmacists and associate clinicians could receive their diplomas. For the training of health workers, SolidarMed emphasizes collaboration with partner schools and hospitals. SolidarMed helped improve the quality of theoretical teaching and practical training and provided staff housing. Close collaboration with the SolidarMed experts enhanced local medical competencies in patient care.



Births under medical supervision

Over the past 5 years, over 307'400 births were supervised by medical professionals in the hospitals and health centres supported by SolidarMed.

Health begins at home, in everyday life. Protecting oneself from infection and quickly recognising when someone needs medical help saves lives.

Some diseases like diarrhoea, malaria or HIV are easily preventable. Hand washing, mosquito nets or condoms are effective measures. Those who still fall ill can improve their chances of recovery by behaving appropriately.

In addition to strengthening the health system in the project areas, SolidarMed also continued supporting health initiatives in remote villages. Local community health workers and mobile clinics spread valuable knowledge, for example about fever and how it can be lowered at home. The importance of vaccinating children to prevent dangerous diseases is another example of vital health knowledge shared in this way. When visiting families in their homes, community health workers recognised symptoms of disease and provided treatment. Emergencies were referred to the health centre or hospital. Thanks to various health initiatives, people in remote villages were given the opportunity to actively voice their own health concerns.

534'000

people were given the opportunity to get actively involved for their own health

74'858

HIV tests carried out

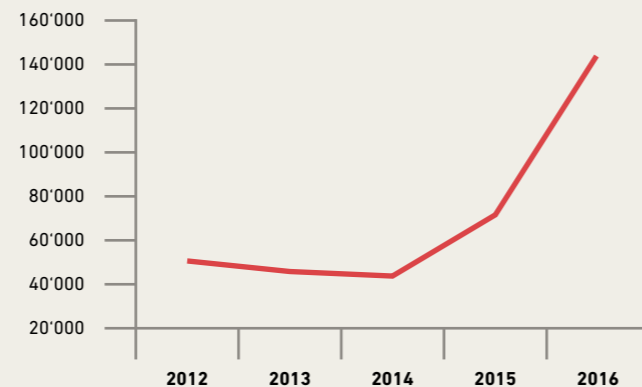
267 organisations and health groups in the villages strengthened

294'572 condoms distributed

2'923 community health workers supported

Health advice in the villages

The number of mothers and children in remote villages who received preventive advice or simple treatment from a community health worker thanks to SolidarMed.



59'353

visitors to solidarmed.ch

17 peer-reviewed articles

4 research partnerships with universities

21 contributions to expert and policy dialogue

1'360'000

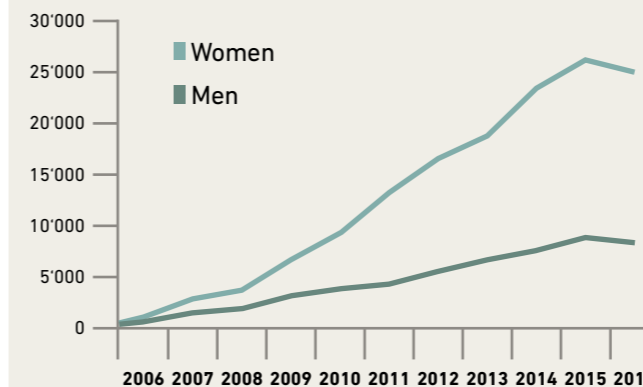
people reached with media reports

188'067 contacts via Social Media

What works where and why? What does this mean for policy dialogue and for scaling-up? And how does one explain complex projects to different stakeholders?

In 2016, SolidarMed made a decisive step towards answering these questions by establishing a separate department for research, quality and development. This department is responsible for innovation, ensures our knowledge is systematically processed, has the lead in policy dialogue and is responsible for scaling-up successful initiatives. In addition, SolidarMed laid important groundwork by reviewing our organisational Knowledge Management. The growing number of scientific publications is both a sign of the quality of our research and demonstrates the level of expert interest in well-researched and suitably presented experiences from very remote parts of the world.

With this new department, SolidarMed generates information that is also highly interesting to the general public. SolidarMed's sensitisation activities are thus quite varied. They include public information campaigns and publications as well as events like public lectures or presentations. Communication via social media, active association work, the activities of our goodwill ambassadors, public relations and targeted promotions are further examples.



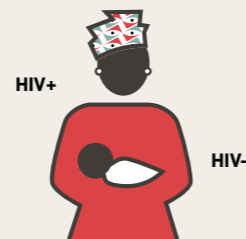
SMART projects save lives

SolidarMed has been giving patients access to life-saving HIV therapy since 2005. 2016 was the first year in which treatment coverage began to reach saturation point in our project districts, with many HIV patients already in treatment. For this reason, SolidarMed has begun handing over to local authorities.

Our projects are geared towards improving primary health care. Strong health systems create a leverage effect benefitting more individuals. This is what SolidarMed achieved in 2016:

7'128 children's lives saved

The transmission of HIV from a mother to her newborn baby was prevented.



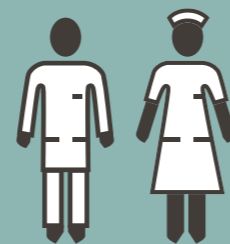
69'642 safe deliveries

Pregnant women deliver safely under medical supervision. Mothers and babies have access to professional emergency care.



1'419'000 patients in good hands

Better quality treatment by well-trained health staff.



45% more infants survived emergencies

Thanks to the introduction of a simple triage system using coloured slips of paper, the most urgent emergencies were treated immediately.¹



785'262 children, women and men treated

Out-patient treatment of an acute or chronic disease like malaria or pneumonia.



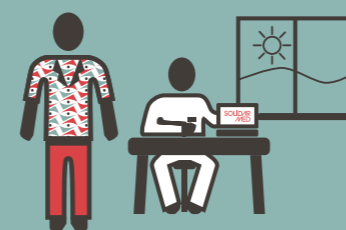
146'150 children and their mothers reached in their villages

Community health workers visit families in remote villages and give preventive advice or treat simple ailments.



25'239 HIV patients in treatment

Thanks to antiretroviral medication, the immune response of those affected rose by 120 percent into the life-saving, normal range.



70% of patients remain in treatment

After 2 years, most chronically ill patients remain reliably in treatment.²



¹Reduction in the number of deaths. Comparative data from the second half of 2015 and 2016.

²In the case of life-long HIV treatment.

SolidarMed is organised as an association. We are led by a highly committed board which is active on a voluntary basis. The members of the board make strategic decisions and set our direction.

The members of the board provided 1'559 hours of voluntary, unpaid work. This impressive figure shows just how committed this body is to SolidarMed.

Our head office in Lucerne is responsible for the planning and management of the projects in Africa. Public Health experts plan projects, monitor progress and advise the local teams. Specialists in communication and administration engage with individual donors, foundations and other funding partners. They are responsible for reporting and ensure the diligent handling of donations. Head office was staffed with a total of 985 percent by position.

In the project countries, experts from Africa, Europe and Switzerland are responsible for the implementation of the projects. 124 local staff offer active and energetic support.



Board • Dr. med. Robert van der Ploeg (since 2016) • Dr. med. Svend Capol, President (since 2003) • Kathi Jungen, librarian (since 1994) • Ruth Ospelt Niepelt, economist (since 2013) • Maria Thiess, biologist (since 2009) • Dr. Guido Keel (since 2016) • Dr. med. Niklaus Labhardt (since 2016) • Dr. med. Pepo Frick, Vice President (since 1994) • Dr. med. Gregor Stadler (since 2013)
Not in the photo: Dr. med. Markus Frei (since 2016) • Dr. med. Peter Schubarth (since 2008) • Hansjörg Widmer, economist (since 2013)



Switzerland • Anna Häggblom, Zambia programme • Marc Birbaum, Deputy Executive Director • Dr. med. Karolin Pfeiffer MPH, Tanzania programme • Benjamin Gross, Media and Public Relations • Katharine Arnold, Zimbabwe programme • Lisbeth Pembele, Institutional Fundraising • Elisabeth Meier-Birchmeier, Finances & Human Resources Administration • Dr. phil. Michael Hobbins, Moçambique programme and Research • Sandra Lerch, Administration • Jochen Ehmer MD, Executive Director • Tiziana Pittini, Design & Communication
Not in the photo: Lisbeth Bühlmann, Donation Management • Christiane Fritz, Moçambique und Lesotho programme • Eliane Jenny, Public Fundraising • Raphaela Scholz, translations

SolidarMed goodwill ambassadors



Nik Hartmann
Television and radio host



Nadine Strittmatter
Model



Stephan Lichtsteiner
Professional football player (National Team)



Tanzania South • Country Coordinator Elisabeth Rotzetter (top middle)



Zambia • Country Coordinator Martina Weber (right)



Tanzania North



Moçambique • Country Coordinator Krista Vandermeer (middle)



Lesotho • Country Coordinator Josephine Muhairwe (left)



Zimbabwe • Country Coordinator Janneke van Dijk (below right)



“The birth of my son was very dangerous. We were lucky that the midwife in the health centre knew what to do. I am very happy that we are both healthy.”

Felicia Brito*, mother and farmer
Moçambique

*Name changed

In the reporting year, SolidarMed succeeded in maintaining project expenditure at a stable level, thereby in turn benefitting many people in the project areas.

The “result before changes to restricted project funds” stands at CHF 658’550.– and indicates a financially successful year. This pleasing result is mostly due to income from bequests. For this reason, 2 unusually high bequests are listed as extraordinary income. In addition, the income from private donors could be maintained at the current level whilst earmarked donations increased. This income indicates the level of trust in our work and allowed us to implement projects with a financial volume of CHF 7’679’486.– and maintain our role as reliable partner.

In addition to our loyal private donors, we benefit from many, often long-term partnerships with institutions in Switzerland and in the Principality of Liechtenstein. The contributions from the Swiss Agency for Development Cooperation SDC and the Liechtenstein Development Service amounted to a total of 3.5 million Swiss Francs.

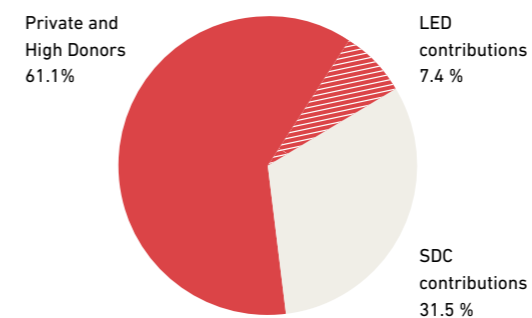
The ZEWÖ foundation renewed its accreditation for a further 5 years and confirmed that our administration costs (3.9 percent) and our costs for fundraising and sensitisation (13.3 percent), despite a slight increase, are still significantly below the average. Out of every CHF 100.– donated, CHF 82.80 flow directly into SolidarMed’s projects.

The additional income was largely transferred to the organisational capital. Thanks to positive developments on the stock exchange and a conservative investment policy, CHF 70’000.– could be transferred to the currency fluctuation fund. The organisational capital could thus, despite planned withdrawals for project funding (CHF 361’818.–), be increased by CHF 971’362.–. This further strengthens the healthy financial foundation of SolidarMed.

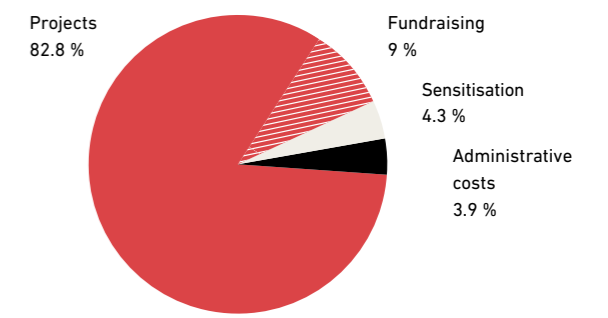


Elisabeth Meier
Finances, HR

Source of funds 2016



Use of funds 2016



Note: The complete Annual Financial Statement including Audit Report and attachments can be found at solidarmed.ch/en > Info & Media > Publications



Annual Report 2016
Balance Sheet as of 31.12.16

| | 2016 | | 2015 | |
|--|---------------------|------------|---------------------|------------|
| | CHF | % | CHF | % |
| Assets | | | | |
| Current assets | | | | |
| Cash | 5'877'631.94 | 71.0 | 5'628'837.48 | 74.2 |
| Assets held for trading at quoted market price | 1'616'918.60 | 19.5 | 1'178'648.78 | 15.6 |
| Other short-term receivables | 326'031.48 | 3.9 | 33'506.41 | 0.4 |
| Project advances | 433'413.05 | 5.2 | 687'953.13 | 9.1 |
| Prepaid expenses | 10'739.78 | 0.1 | 37'570.28 | 0.5 |
| | 8'264'734.85 | 99.8 | 7'566'516.08 | 99.8 |
| Fixed assets | | | | |
| Plant and equipment | 14'011.00 | 0.2 | 18'681.00 | 0.2 |
| Other investments | 1.00 | 0.0 | 1.00 | 0.0 |
| | 14'012.00 | 0.2 | 18'682.00 | 0.2 |
| Total assets | 8'278'746.85 | 100 | 7'585'198.08 | 100 |
| Liabilities | | | | |
| Short-term liabilities | | | | |
| Liabilities from sales and services | 156'979.55 | 1.9 | 90'456.00 | 1.2 |
| Accrued expenses | 141'355.08 | 1.7 | 171'680.81 | 2.3 |
| | 298'334.63 | 3.6 | 262'136.81 | 3.5 |
| Long-term liabilities | | | | |
| Provisions | 188'242.43 | 2.3 | 189'442.43 | 2.5 |
| | 188'242.43 | 2.3 | 189'442.43 | 2.5 |
| Funds reserved for projects | | | | |
| SDC projects | -4'621.68 | -0.1 | 287'412.17 | 3.7 |
| LED projects | 672'929.66 | 8.1 | 680'966.14 | 9.0 |
| SolidarMed projects | 717'657.88 | 8.7 | 730'398.57 | 9.6 |
| | 1'385'965.86 | 16.7 | 1'698'776.88 | 22.3 |

Annual Report 2016
Balance Sheet as of 31.12.16
Income statement 1.1. - 31.12.16

| | 2016 | | 2015 | |
|--------------------------------------|---------------------|------------|---------------------|------------|
| | CHF | % | CHF | % |
| Organisational capital | | | | |
| Share capital | | | | |
| Paid-in capital and reserves | 881'632.93 | 10.6 | 881'632.93 | 11.6 |
| Fixed capital | | | | |
| Currency fluctuation fund | 230'000.00 | 2.8 | 160'000.00 | 2.1 |
| Free capital | | | | |
| Fund 1 unrestricted funds | 3'051'973.49 | 36.9 | 1'824'683.59 | 24.1 |
| Fund 2 unrestricted funds | 2'242'597.51 | 27.1 | 2'568'525.44 | 33.9 |
| | 6'406'203.93 | 77.4 | 5'434'841.96 | 71.7 |
| Total liabilities | 8'278'746.85 | 100 | 7'585'198.08 | 100 |
| Income | | | | |
| Donations, legacies, membership fees | 1'691'011.70 | 18.8 | 1'651'302.36 | 18.8 |
| Purpose specific income | | | | |
| SolidarMed projects | 3'806'978.56 | 42.2 | 3'392'796.06 | 38.6 |
| | 3'806'978.56 | 42.2 | 3'392'796.06 | 38.6 |
| Public sector contributions | | | | |
| SDC program contribution | 2'800'000.00 | 31.1 | 2'600'000.00 | 29.6 |
| SDC mandate EMSN Tanzania | 37'100.00 | 0.4 | 238'105.00 | 2.7 |
| LED Chainama College Zambia | 669'035.00 | 7.4 | 900'000.00 | 10.2 |
| | 3'506'135.00 | 38.9 | 3'738'105.00 | 42.6 |
| Other income | 7'757.40 | 0.1 | 1'446.25 | 0.0 |
| Total income | 9'011'882.66 | 100 | 8'783'649.67 | 100 |

Annual Report 2016
Income statement 1.1. - 31.12.16

| | 2016 | | 2015 | |
|---|----------------------|------------|----------------------|------------|
| | CHF | % | CHF | % |
| Expenditures | | | | |
| Project expenses | | | | |
| Personnel expenses project management Switzerland | -639'739.97 | 6.9 | -572'517.72 | 6.2 |
| Project visits | -26'494.19 | 0.3 | -25'903.16 | 0.3 |
| SolidarMed projects | -6'099'600.73 | 65.8 | -5'889'910.18 | 63.9 |
| SDC mandate EMSN Tanzania | -319'711.05 | 3.4 | -317'057.68 | 3.4 |
| LED Chainama College Zambia | -593'922.35 | 6.4 | -932'455.73 | 10.1 |
| | -7'679'468.29 | 82.8 | -7'737'844.47 | 83.9 |
| Public relations, awareness raising | | | | |
| Personnel expenses | -201'791.79 | 2.2 | -147'200.49 | 1.6 |
| Membership expenses | -21'827.15 | 0.2 | -17'667.50 | 0.2 |
| Publications | -116'037.01 | 1.3 | -110'372.67 | 1.2 |
| Public relations | -62'830.87 | 0.7 | -71'161.78 | 0.8 |
| | -402'486.82 | 4.3 | -346'402.44 | 3.8 |
| Fundraising | | | | |
| Personnel expenses | -371'921.12 | 4.0 | -312'056.92 | 3.4 |
| Fundraising | -461'294.61 | 5.0 | -359'143.03 | 3.9 |
| | -833'215.73 | 9.0 | -671'199.95 | 7.3 |
| Administrative expenses | | | | |
| Personnel expenses | -200'786.49 | 2.2 | -287'431.13 | 3.1 |
| Travel and representation expenses | -7'600.46 | 0.1 | -6'850.10 | 0.1 |
| Banking and postage costs | -3'938.86 | 0.0 | -3'961.89 | 0.0 |
| Rental expenses | -51'310.35 | 0.6 | -50'945.80 | 0.6 |
| Office and operating expenses | -21'686.13 | 0.2 | -30'384.97 | 0.3 |
| Memberships | -9'509.95 | 0.1 | -6'868.65 | 0.1 |
| Third-party services | 0.00 | | -5'421.60 | 0.1 |
| Investments and maintenance | -59'780.30 | 0.6 | -65'839.10 | 0.7 |
| Asset depreciation | -4'670.00 | 0.1 | -6'226.70 | 0.1 |
| | -359'282.54 | 3.9 | -463'929.94 | 5.0 |
| Total Income / Expenses | -9'274'453.38 | 100 | -9'219'376.80 | 100 |
| Operating result | -262'570.72 | | -435'727.13 | |

Annual Report 2016
Income statement 1.1. - 31.12.16

| | 2016 | 2015 |
|---|--------------------|--------------------|
| | CHF | CHF |
| Financial income | | |
| Income from interest and securities | 122'009.01 | 79'873.01 |
| Expenses interest and securities | -46'988.34 | -109'794.90 |
| | 75'020.67 | -29'921.89 |
| Extraordinary income | | |
| Extraordinary income | 846'101.00 | 0.00 |
| | 846'101.00 | 0.00 |
| Result before changes to restricted project funds | 658'550.95 | -465'649.02 |
| Statement of changes to restricted project funds | 312'811.02 | 259'946.09 |
| Result (before changes to organisational capital) | 971'361.97 | -205'702.93 |
| Withdrawal from organisational capital | 361'818.72 | 745'624.18 |
| Allocation to paid up and acquired capital | 0.00 | 0.00 |
| Allocation to fund 1 unrestricted funds | -1'263'180.69 | -539'921.25 |
| Allocation to currency fluctuation fund | -70'000.00 | 0.00 |
| Total allocations / appropriations | -971'361.97 | 205'702.93 |
| Results after allocation to organisational capital | 0.00 | 0.00 |

“It takes me one hour on foot to reach the next health centre. I can barely manage this with my joints. I am very grateful for the mobile clinic that sometimes visits us in our village.”

Me Mputsoe (82)
from Ha Sephoko, Lesotho



SolidarMed can look back on a successful year 2016 with a lot of progress in the projects. This would not have been possible without the generous support of many private individuals and institutions. In the name of all the beneficiaries, we would like to express our thanks for this commitment. Due to space restrictions, only institutional donations of over 1000 Swiss Francs are listed here. Our thanks also go to all those we could not mention or who did not wish to be named.

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Lisbeth Pembele
Fundraising



Eliane Jenny
Fundraising

SolidarMed

For Health in Africa.

SolidarMed is the Swiss organisation for health in Africa and improves health care for 1.5 million people in Lesotho, Moçambique, Tanzania, Zambia and Zimbabwe. SolidarMed sustainably strengthens and meaningfully expands existing medical services. SolidarMed is committed to the five most important health concerns of Africa's rural population:

- Protecting mothers, children and newborns
- Combating infectious diseases like malaria, HIV/Aids or tuberculosis
- Improving the quality of hospitals and health centres
- Training and further education of health staff
- Strengthening village communities

The health of mothers, pregnant women, newborns and children is a central concern and receives particular attention in the projects. In cooperation with local partner organisations, hospitals and villages, SolidarMed promotes «help for self-help». In Switzerland and in Liechtenstein, SolidarMed advocates for the health concerns of people in Africa. As a non-profit organisation with the ZEWO certificate, SolidarMed works efficiently, conscientiously and transparently.

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