



Annual Report 2013

**SOLIDAR
MED**
For Health
in Africa.

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

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www.solidarmed.ch

For Health in Africa



Are we doing the right things right?



Photo: Alexander Jaquemet

There is an impressive moment every February when the annual numbers from all countries arrive at headquarters. And as every year, it is the sum of all our activities which makes me aware of just how much SolidarMed is achieving for people in southern Africa.

These numbers, together with regular professional evaluations of our project work and critical self-examination, help create a very clear picture for me that SolidarMed is doing the right thing. Three experiences from the past year confirm this.

Making a mark in Zambia

The first was the visit of the Foreign Minister of the Principality of Liechtenstein to Zambia in early 2013. I had the pleasure of accompanying the delegation from Liechtenstein on their exploration of our programme in Zambia which is completely financed by funds from the Principality of Liechtenstein. The meetings with a wide variety of Zambians, from the Minister to a sick child in a rural hospital, made it possible to directly experience just how much this relatively young SolidarMed programme is valued. The impact SolidarMed has been able to achieve with funds made available by Liechtenstein in the past 5 years is impressive. Together, SolidarMed and the Principality are making a clear mark on the health system of Zambia: through freshly trained staff and through the development of urgently needed infrastructure in and around the hospitals and schools.

That we're doing the right thing was also confirmed to me by our goodwill ambassador Nik Hartmann during his series of slide shows in November. His sympathy with the fate of patients from Mpanshya hospital in Zambia, which he visited personally, came across clearly in every picture and struck a chord with the entire audience. His description of his personal experiences showed clearly and impressively what SolidarMed stands for and just how important this commitment is to the local population.

Partners on an equal footing

18 years after my own deployment as SolidarMed doctor in Lesotho, I and select members of the Board were able to take a closer look at the current status of the programme in a country where SolidarMed has been present for many years. For me personally it was exciting to see

how conditions have improved. Whereas I and my Swiss colleagues were once solely responsible for medical care in Thaba Tseka district, today six African doctors and finally also more qualified nursing staff see to the health needs of the mountain population. During our visit, we also had the valuable opportunity for personal conversations with the local partners. Questions of principle arose: what does development cooperation mean? What should SolidarMed's involvement look like in 10–20 years, to ensure we are also doing the right thing then?

Solidarity is key

But are we doing the right things right? In Johannesburg airport there is a sign in large letters in the departure lounge: «If you want to go fast, go alone. If you want to go far, go together.» Solidarity is key.

Let's imagine a train, in one of whose carriages sit SolidarMed and other organisations. In the next carriage, we find the rich countries, in the one after that, the poorer ones, where SolidarMed's local partners also sit. The train tracks define the direction of travel, but the speed is determined by various factors like politics, economics, technological progress, beliefs and environment. As we are all sitting on the same train, we can only reach a goal together. If there's a fire in one carriage or the brakes are stuck in another, everyone will be delayed. Only with solidarity can we keep to the timetable and realise the developments we desire.

Solidarity is not only part of SolidarMed's name, but also a daily lived reality in our work with local partners. Likewise, we experience the solidarity of our donors through their support.



**Dr. med. Svend Capol,
President**

The 26 SolidarMed projects 2013



SolidarMed's five project countries share similar challenges like high mortality or deadly infectious diseases. SolidarMed responds to these issues with the transversal projects SMART and MAMA. These cut across individual country programmes whilst taking local conditions and needs into account.



Tanzania

- Dareda Hospital Development Plan (incl. SMART*)
- Lugala Hospital Development Plan (incl. SMART*, maternity wing and water supply)
- Support for Lugala Nursing School
- Strengthening of primary health care in Mbulu (PHCM)
- Strengthening of primary health care in Ulanga (PHCU)

Zimbabwe

- Securing the provision of medical care at Musiso Hospital
- Securing the provision of medical care at Silveira Hospital
- Support of nursing schools in Musiso and Silveira
- Staff houses for Musiso and Silveira Hospital
- SMART* III (in 2 districts)
- Expansion of Bota health centre

Zambia

- Training of non-physician clinicians (Medical Licentiates)
- Training of nursing staff in remote hospitals
- Implementation of a business model for staff accommodation (in Chongwe district)

* SMART: Regional programme for HIV/Aids prevention, treatment and care in hospitals, rural health centres and villages.

** Wiwanana: local, Moçambican partner organisation for health promotion in the villages. Mandated by SDC.

Lesotho

- Support of the hospitals Seboche und Paray
- SMART* III (in 2 districts)
- Support of primary health care (PHC)

Moçambique

- Wiwanana**
- SMART* II (in Ancuabe district)
- SMART* III (in Chiúre district)
- Malaria protection for infants and expectant mothers
- Self-help groups for HIV/Aids patients
- MAMA: health for mothers and newborns
- Construction of an operating theatre in Metoro
- Water supply for health centres (in Ancuabe district)
- Bicycle ambulances
- Operational research

SolidarMed's impact



Lugala
Nursing school,
Tanzania

Photo:
Marten Bril

One year after its introduction, SolidarMed's newly adapted strategy has already made its mark. The health of mothers and children took centre stage. More than 52'000 women delivered their babies under better medical conditions.

In SolidarMed's partner countries, social disparities are growing ever faster, causing suffering to the weak and disadvantaged most of all. Only the healthy have the strength to fight for their rights, to actively take part in societal processes, have the opportunity to develop themselves freely and in dignity and make a decisive contribution to social and economic development in a region. Illness makes you poor and poverty makes you ill.

To break this cycle, since 2013 SolidarMed has been focussing its support specifically on strengthening basic health services for children, expectant mothers and people with diseases like HIV, tuberculosis or malaria. Societies' most vulnerable take centre stage in the new strategy.

More staff, better trained

The competence and motivation of staff have a significant effect on the quality of a health system. But for many years, this is where a large gap has yawned in southern Africa. As a result, SolidarMed increased efforts to train new health staff and stepped up its support for the professional development of doctors, nursing staff, midwives, laboratory staff and pharmacists. At the same time, with new solutions and structural improvements, SolidarMed ensured that these trained professionals were retained in the rural areas. SolidarMed expanded the services of five

training facilities with urgently needed classrooms, staff houses for teaching staff or student hostels. To improve teaching quality, SolidarMed supplemented teaching materials and enabled teaching staff to receive valuable initial and further training.

In the reporting year, SolidarMed placed a technical advisor at the disposal of eleven partner institutions. These are doctors or laboratory experts who offer their local colleagues professional support, impart medical knowledge and so bring about improvements in treatment quality.

- 4 nursing schools supported
- 1 university degree course promoted

- 800 nurses, midwives and doctors received further training
- 74 nurses and midwives newly trained

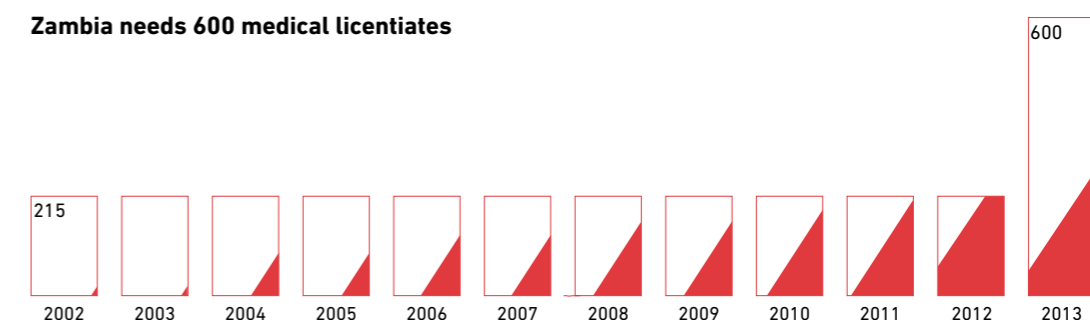
- 7 staff houses built
- 2 classrooms and
- 1 student hostel constructed

874'000 people receive professional medical care when needed ¹

¹ According to the WHO, one well-trained nurse sees to the health needs of around 1'000 people.

Zambia needs 600 medical licentiates

□ Need for Medical Licentiates in Zambia
■ Trained Medical Licentiates



SolidarMed has been supporting Medical Licentiates training in Zambia since 2011. Since then, a new intake begins every year, which has allowed the number of graduates to be doubled. As these non-university doctors quickly proved themselves in practice, the government raised the original requirement of 215 to 600.



Photo:
Marten Bril

Improving primary health care sustainably

Prevention, treatment and care are the three services a patient expects from a health system. Good primary health care is therefore a central concern for SolidarMed. Efforts in this area were accordingly intense in 2013. SolidarMed supported 10 districts, 19 hospitals as well as 102 health centres and could further improve primary health care for 1.5 million people. In doing so, SolidarMed concentrated on those focal areas, defined with our partners, which create sustainable change. These include, for example, investments in basic infrastructure, equipment, communication and transport. Good quality and properly skilled treatment must be guaranteed for every patient, irrespective of his or her living and working conditions. The result of process optimization is that the different components of the health system work together better. Likewise, modern technologies and innovations are improving primary health care.

- 10 districts
 - 19 hospitals
 - 102 health centres
- offer better health services.

1'500'000 people benefit from improved primary health care through these institutions.

- 611'184 children, women and men are treated as out-patients
- 52'493 expectant mothers deliver under improved medical conditions
- 18'947 people receive life-saving HIV medication

Competent village communities

Individual and collective empowerment is closely linked with combating poverty and is, for SolidarMed, both a goal in itself as well as a means to better health. Empowerment is a process by which – together with the most disadvantaged – capacities are developed to recognise problems, find solutions and work as a group. People are supported in exercising their rights, demanding access to resources and actively taking part in societal and political development processes.

SolidarMed promotes complementary health initiatives at community level and so strengthens the health system. Different groupings from within the villages take up health issues and impart valuable knowledge to their fellow villagers. This way, the parents of small children know how to react if their child has diarrhoea and get their children immunised and weighed as a precautionary measure.

SolidarMed supports selected local organisations in the development and expansion of their capacities, either financially or with equipment, so that they recognise problems, find solutions, exercise rights and can take part in decision-making processes. In Moçambique, SolidarMed together with the SDC (Swiss Agency for Development and Cooperation) initiated «Wiwana», now a Moçambican trust committed to health promotion in rural areas.

- 604 community health workers supported
- 247 local organisations and village health groups strengthened
- 15'000 mosquito nets distributed
- 192'000 condoms handed out
- 135'089 HIV tests offered
- 51 bicycle ambulances with over 200 transfers

- 494'000 people given a voice at community level
- 30'200 mothers and children with access to improved community-based health

Collaboration in networks

In addition to programme work in the South, it is a declared goal to sensitise the Swiss population for the health concerns of people in Africa. In 2013, SolidarMed brought forgotten catastrophes into the public awareness with the campaign «Loud against Silent Catastrophes».

Expert and policy dialogue can only be successful if an organisation has the necessary competencies and processes its own experiences to this end. This is why, in the 2013 reporting year, SolidarMed expanded its efforts in «operational research and monitoring», «further training / professional development» as well as «programme cycle management». A number of operational research projects were launched and implemented, a monitoring system for maternal health was designed, the data management for the HIV programme was adapted, numerous further training courses for SolidarMed staff and partners were supported and the review of the internal knowledge management concept was begun.

In 2013, SolidarMed expanded its advocacy alliances and networks in both the South and the North in order to deepen networking and exchange.

22'000 bikes fitted with noisy «clatter cards»

400'000 people reached with this campaign through media coverage

11 number of scholarly publications

Operational research by SolidarMed on Hepatitis B, HIV/Aids, tuberculosis, non-communicable diseases, maternal health

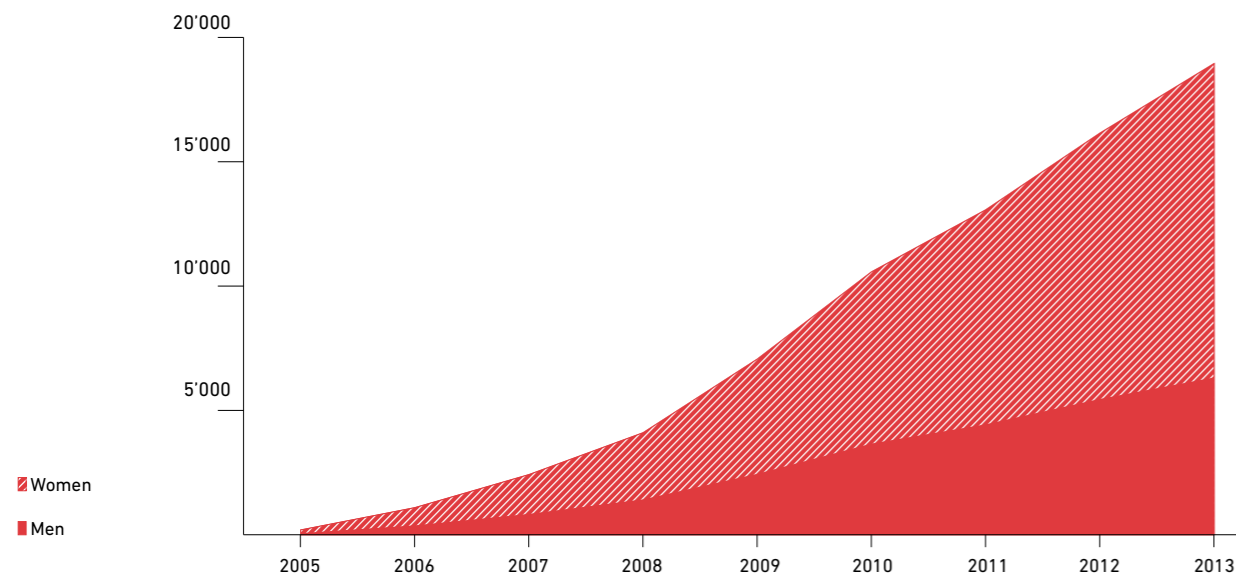
SolidarMed is an active member of Medicus Mundi, Aidsfocus, Swiss Malaria Group

More information under www.solidarmed.ch > Info & Media > Publications



Joel Meir,
Executive Director

SMART saves lives



In 2013, close to 19'000 people with HIV/Aids received life-saving therapy thanks to SolidarMed and received competent support through local staff.

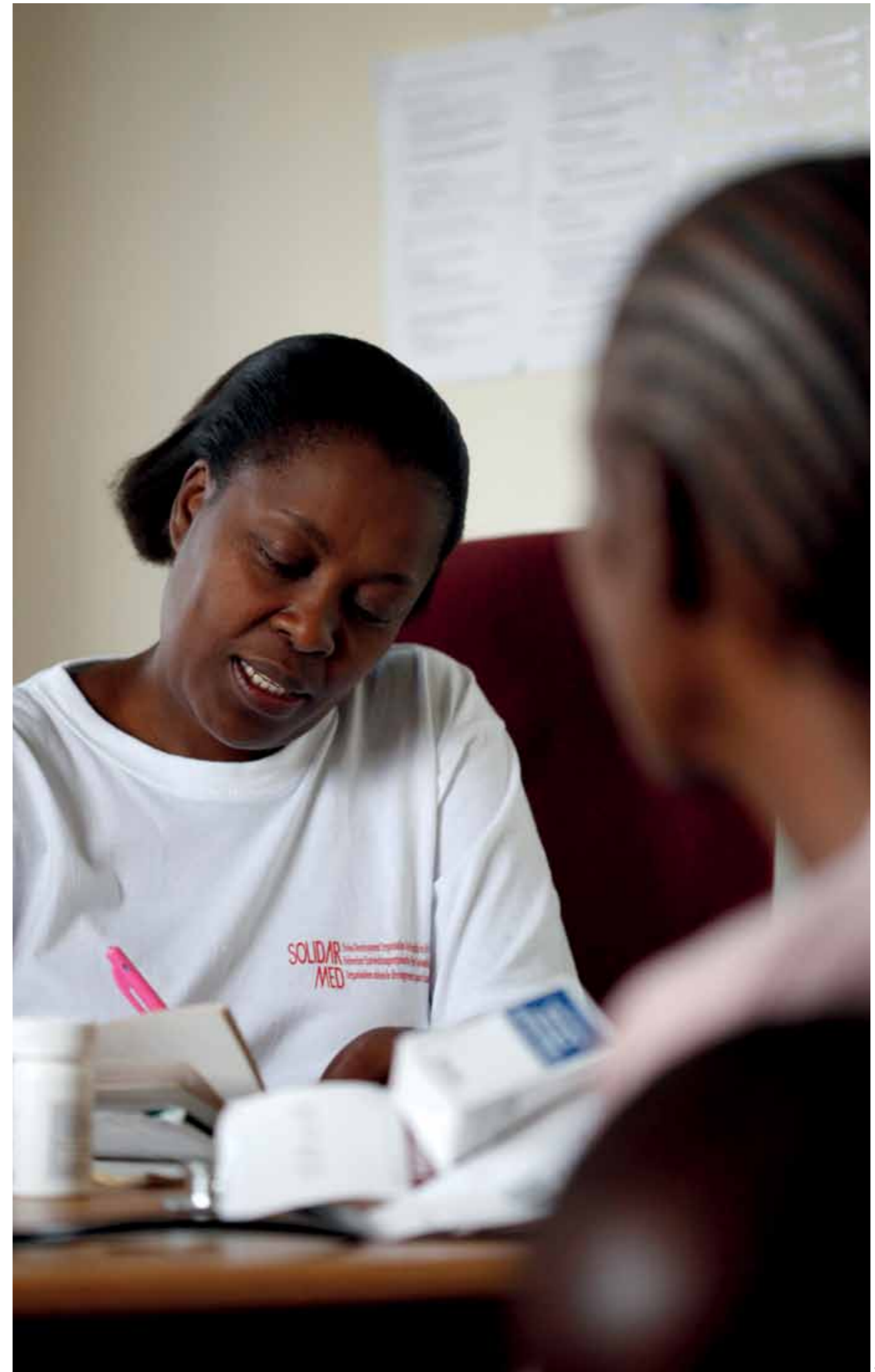


Photo: Dominik Labhardt

2013 in pictures

February



Breathing easier in Lesotho

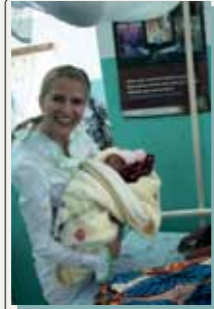
«The community health worker in our village recognised that my son Thato had pneumonia. She advised us to go to hospital immediately – this saved his life.»

'M'e Ntebaleng Lekhanya, mother from Lesotho

Photo: Jean-Pierre Grüter

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> Info & Media > Publications

April



The Foreign Minister of Liechtenstein visits SolidarMed in Zambia

May



Sting Day! Malaria in Liechtenstein



Tanzania:

A hospital needs water

«Only thanks to the clean water made possible by SolidarMed are we able to make enough infusion liquid.»

Helena Mbagu, nurse in Lugala

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> Info & Media > Publications

August



Widely acclaimed SolidarMed presentation at the International HIV/Aids conference in Kuala Lumpur.

Photo: IAS/Steve Forest



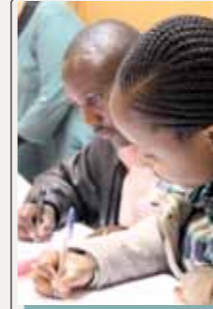
Healthy babies in Moçambique

«Thanks to a bag valve mask and my training, Valentino survived. SolidarMed ensures that we can save lives.»

Márcia Nampipi, midwife from Chiúre

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September



Valuable exchange of experiences. SolidarMed Tanzania visits the team in Lesotho..



Degree for 19 Medical Licentiatees in Zambia



Switzerland:
Loud against silent catastrophes!

October



The Board visits the partners in Lesotho. President Dr med. Svend Capol was impressed by the project's progress: «Whereas my Swiss colleague and I were once solely responsible for medical care, today six African doctors and finally also more nursing staff work here.»

November



Slide show with Nik Hartmann



Zimbabwe: Hospital of Hope

«Here in Silveira, the doctors knew how to save my son Trymore's arm.»

Mai Trymore mother from Silveira

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December



Lecture hall for 80 students in Lusaka

We are SolidarMed

Board

 Dr med. Svend Capol (since 2003)	President	 Rita Borer PR expert (2005–2013)
 Dr med. Pepo Frick (since 1994)	Vice president	 Christopher Zuellig Economist (2007–2013)
 Dr med. Urs Allenspach (since 1994)		 Ruth Ospelt Niepelt Economist (since 2013)
 Maria Thiess Biologist (since 2009)		 Dr med. Gregor Stadler (since 2013)
 Dr med. Peter Schubarth (since 2008)		 Hansjörg Widmer Economist (since 2013)
 Kathi Jungen Librarian (since 1994)		

Voluntary and unpaid commitment

The members of the Board contributed a total of 1'914 hours of unpaid voluntary work in the reporting year. This is equivalent to CHF 191'400.— and shows just how committed the Board is to SolidarMed.

Our heartfelt thanks to all those who volunteered as members of expert commissions, who participated in fundraising campaigns and activities, in parishes or in local events.




Headquarters

 Joel Meir Director	 Elisabeth Meier-Birchmeier Finances
 Jochen Elmer Physician, Head of International Programmes	 Lisbeth Pembele Institutional Fundraising
 Silvia Bucher Design and Communication until 08.2013	 Dr med. Karolin Pfeiffer Programme Zimbabwe and Lesotho
 Murielle Drack Design and Communication since 09.2013	 Raphaela Scholz Translations
 Lisbeth Bühmann Donation Management	
 Benjamin Gross Media and Public Relations	



Goodwill ambassadors

 Anna Häggblom Programme Tanzania and Zambia	 Stephan Lichtsteiner football player Swiss national team
 Dr. phil. Michael Hobbins Programme Moçambique	 Nik Hartmann Radio and TV presenter
 Sandra Lerch Administration	 Nadine Strittmatter model and actress
 Patricia Löw Public Fundraising until 04.2013	
 Eliane Jenny Public Fundraising since 06.2013	



Lesotho

 Sabine Heinrich Country Coordinator
 Dr med. Olatunbosun Faturiyele since 12.2013
 Daniel Puga






Moçambique

 Dr med. Erling Larsson Country Coordinator until 10.2013
 Tom Huxley Country Coordinator since 11.2013
 Dr med. Jara Llenas
 Dr med. Anita Makins
 Dr med. Sabrina Pestilli until 01.2013
 Ina Prager
 Dr Marina Torre until 05.2013
 Dr med. Philip Wikman






Tanzania

 Elisabeth Rotzetter Country Coordinator
 Fortunat Büsch until 02.2013
 Dr med. Jürg Eidenbenz
 Dr med. Peter Hellmold
 Ineke Petter
 Barabara Da Silva until 07.2013

Zambia

 Martina Weber Country Coordinator
 Dr med. P. Michael Bahrdt
 Dr med. Annette Boose
 Dr med. Uwe Graf
 Dr phil. Klaus Thieme

Zimbabwe

 Christiane Fritz Country Coordinator until 12.2013
 Simon Bridger Country Coordinator since 11.2013
 Dr med. Clemens Fehr until 12.2013
 Dr med. Rutger Anten
 Dr med. Alexandra Piprek since 11.2013

Annual Financial Statement 2013

In the reporting year, SolidarMed succeeded in maintaining project costs at previous levels and, thanks to the many loyal donors, managed to implement the planned projects. With a lot of commitment, much could be achieved for the people in the project areas.

Compared to the previous year, project expenditure remained stable at CHF 8'138'278.—. Private donations achieved a pleasing surplus in comparison with the previous year, which had a positive influence on the overall balance.

In addition to our loyal donors, this was made possible by our institutional partners. These partly long-term partnerships here in Switzerland and Liechtenstein play a significant part in making SolidarMed a reliable institution with firm commitments for the partners in the South. The administrative costs could be lowered slightly in the reporting year and are, at 3.4 percent, low.

Once again deserving particular mention are the contributions of the Liechtenstein Development Service LED and the Swiss Agency for Development and Cooperation SDC, who together provided 48.6 percent of the funds. It is thanks to these partners that in a challenging environment, fundraising costs have only had to be raised slightly (6.1 percent).

The comparison by ZEW0 with other non-political organisations confirms the still low expenditures for fundraising and administration. Out of every CHF 100.—, CHF 86.50 flow directly into the project work of SolidarMed.

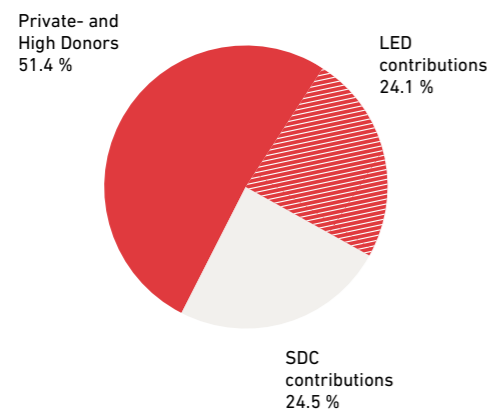
For the first time in this reporting year, a currency fluctuation fund was created and capitalised with CHF 80'000.—. The securities were valued at market value and in addition to the realised gains, the non-realised gains also affected net income. The goal of this currency fluctuation fund is to create reserves from the non-realised currency gains. Despite a very conservative investment policy, losses are possible and with this reserve, the use of donor funds can be avoided.

SolidarMed's overall annual result was positive, with a year-end surplus of CHF 6'210.52. This amount will be transferred to the capital funds. The organisational capital is thus slightly increased and shows that the required reserves could be maintained.

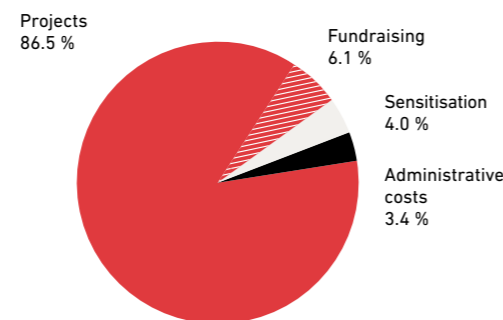


Elisabeth Meier-Birchmeier,
Finances

Sources of funds in 2013



Use of funds in 2013



SolidarMed

Report of the statutory auditors to the Annual General Meeting of SolidarMed, Swiss Organisation for Health in Africa, Lucerne

As per our contract as auditors, we examined the annual financial statement (balance sheet, income statement, statement of cash flow, analysis of changes in capital and annexes of SolidarMed – Swiss Organisation for Health in Africa for the financial year that ended December 31st 2013. In accordance with Swiss GAAP FER 21, the auditors are not obliged to examine the information presented in the performance report.

Responsibilities of the Board

The Board is responsible for the preparation of the annual financial statement in conformity with Swiss GAAP FER 21, compliant with legal requirements and the statutes. This responsibility includes the establishment, implementation and maintenance of an internal control system relevant to the preparation of the annual financial statement, which is free of material misstatement, whether due to fraud or error. In addition, the Board is responsible for the selection and application of appropriate accounting policies and for making reasonable accounting estimates.

Responsibilities of the auditors

It is our responsibility to express an opinion on the annual financial statement on the basis of our audit. We carried out our audit in accordance with Swiss audit standards. Following these standards, our audit must be designed and executed to provide reasonable assurance of whether the annual financial statement is free of material misstatement.

An audit involves the performance of audit procedures to obtain audit evidence concerning the asset valuation and other disclosures in the annual financial statement. The selection of audit procedures lies in the dutiful judgement of the auditor. This includes an assessment of the risks of material misstatement in the annual financial statement as a result of fraud or error. In the risk

assessment, the auditor reviews the internal control system where relevant to the preparation of the annual financial statement, in order to design appropriate audit procedures. However, this is not for the purpose of expressing an opinion on the existence or effectiveness of the internal control system. The audit also includes an evaluation of the appropriateness of the accounting policies in use, whether the accounting estimates are plausible as well as an assessment of the overall presentation of the annual financial statement. We are of the opinion that the audit evidence we have obtained is sufficient and appropriate for providing a basis for our audit opinion.

Audit opinion

In our opinion, the annual financial statement for the year ended December 31st 2013 gives a true and accurate picture of the assets and liabilities, financial position and income and expenses in accordance with Swiss GAAP FER 21 and complies with Swiss law and the statutes of the association.

We recommend that the annual financial statement presented here is approved.

In addition, we can confirm that the ZEW0 Foundation provisions, which require review as defined in the implementation provisions noted in article 12 of the regulations concerning the use of the ZEW0 Seal of Approval, have been met.

Kriens, 2nd April 2014

AREGGER SCHLEISS BUCHELI
AG FÜR WIRTSCHAFTSBERATUNG

Felix Aregger
Licensed audit expert
Lead Auditor

Werner Bucheli
Licensed audit expert

Swiss GAAP FER 21 guidelines

Since 2004, SolidarMed accounts have been prepared according to the guidelines of «Swiss GAAP FER 21» for charitable and social non-profit organisations. These require a performance report which gives «appropriate information on the performance and economic efficiency of the charitable, social non-profit organisation». It must include information on the purpose of the organisation, its leadership (Board) and their terms of office as well as details of the persons responsible for the management of the organisation.

The 2013 SolidarMed Annual Report fulfils these requirements. The purpose of the organisation is described on the back cover. On page 16 you can find details on the leadership (Board), their terms of office as well as information about staff at headquarters. An overview of the services provided in the project countries is found on pages 6 to 13. Details on the funds used can be found in the consolidated accounts on pages 21–22.

For Health in Africa

Balance sheet
as of 31.12.2013

	2013		2012	
	CHF	%	CHF	%
Assets				
Current assets				
Cash	5'256'225.48	62.8	6'276'820.28	70.0
Securities	2'348'308.89	28.1	2'208'130.88	24.6
Accounts receivable	12'144.63	0.1	60'392.43	0.7
Project advances	694'221.94	8.3	367'796.94	4.1
Prepaid expenses	26'108.77	0.3	26'364.24	0.3
	8'337'009.71	99.6	8'939'504.77	99.7
Fixed assets				
Plant and equipment	31'970.00	0.4	24'000.00	0.3
Property Zimbabwe	1.00	0.0	1.00	0.0
Financial investments	0.00	0.0	0.00	0.0
	31'971.00	0.4	24'001.00	0.3
Total Assets	8'368'980.71	100	8'963'505.77	100
Liabilities				
Short-term liabilities				
Other liabilities	78'439.33	0.9	128'168.57	1.4
Accrued expenses	243'810.89	2.9	203'996.58	2.3
	322'250.22	3.8	332'165.15	3.7
Long-term liabilities				
Provisions	206'827.45	2.5	212'427.45	2.4
	206'827.45	2.5	212'427.45	2.4
Funds reserved for projects				
SDC projects	0.00		26'126.99	0.3
LED projects	871'017.98	10.4	1'544'152.96	17.2
SolidarMed projects	919'471.74	11.0	992'226.63	11.1
	1'790'489.72	21.4	2'562'506.58	28.6
Organisational capital				
Paid-in capital and reserves	865'346.34	10.3	858'843.55	9.6
Currency fluctation fund	80'000.00	1.0	0.00	0.0
Funds 1 unrestricted funds	1'701'650.67	20.3	1'490'000.00	16.6
Funds 2 unrestricted funds	3'396'205.79	40.6	3'501'060.25	39.1
Annual profit	6'210.52	0.1	6'502.79	0.1
	6'049'413.32	72.3	5'856'406.59	65.3
Total liabilities	8'368'980.71	100	8'963'505.77	100

Income statement
01.01.-31.12.2013

	2013		2012	
	CHF	%	CHF	%
Income				
Donations, legacies, membership fees	1'113'800.11	11.6	1'037'766.40	10.9
Purpose specific income				
SolidarMed projects	3'817'367.05	39.7	3'888'803.42	40.7
	3'817'367.05	39.7	3'888'803.42	40.7
Public sector contributions				
SDC program contribution	2'200'000.00	22.9	1'200'000.00	12.6
SDC mandate Wiwanana Moçambique	154'162.61	1.6	816'001.30	8.5
SDC project contribution Staff Houses Zimbabwe	0.00	0.0	50'270.40	0.5
SDC project contribution SMART Zimbabwe	0.00	0.0	452'722.61	4.7
SDC project contribution OI Musiso, Zimbabwe	0.00	0.0	55'550.00	0.6
LED SMART Chiùre Moçambique	343'469.53	3.6	290'650.24	3.0
LED SMART Ancuabe Moçambique	604'741.94	6.3	547'607.51	5.7
LED Mother and Child Moçambique	390'566.87	4.1	406'253.33	4.3
LED C-Section Moçambique	173'913.54	1.7	26'086.46	0.3
LED Chainama College Zambia	805'917.47	8.4	782'891.10	8.2
	4'672'771.96	48.6	4'628'032.95	48.4
Other income	5'545.80	0.1	3'346.22	0.0
Total income	9'609'484.92	100	9'557'948.99	100
Expenditures				
Project expenses				
Personnel expenses project management Switzerland	-601'165.65	6.4	-615'482.48	6.5
Project visits	-30'592.35	0.3	-33'882.46	0.4
SolidarMed projects	-5'311'150.47	56.5	-4'656'957.31	48.9
SDC mandate Wiwanana Moçambique	-143'219.28	1.5	-720'886.24	7.6
SDC project contribution Staff Houses Zimbabwe	0.00	0.0	-45'700.86	0.5
SDC project contribution SMART Zimbabwe	0.00	0.0	-325'807.41	3.4
SDC project contribution OI Musiso, Zimbabwe	0.00	0.0	-50'500.00	0.5
LED SMART Chiùre Moçambique	-301'289.06	3.2	-254'956.35	2.7
LED SMART Ancuabe Moçambique	-548'758.27	5.9	-497'663.73	5.2
LED Mother and Child Moçambique	-342'602.52	3.6	-356'362.58	3.7
LED C-Section Moçambique	-152'555.74	1.6	-22'882.86	0.2
LED Chainama College Zambia	-706'945.15	7.5	-686'746.58	7.2
	-8'138'278.49	86.5	-8'267'828.86	86.8
Public relations, awareness raising				
Personnel expenses	-161'226.36	1.7	-170'815.61	1.8
Membership expenses	-15'893.35	0.2	-18'967.99	0.2
Publications	-94'927.18	1.0	-93'231.81	1.0
Public relations	-103'333.66	1.1	-87'646.41	0.9
	-375'380.55	4.0	-370'661.82	3.9

continued overleaf

Income statement
01.01.–31.12.2013

Expenses continued	2013		2012	
	CHF	%	CHF	%
Fundraising				
Personnel expenses	-305'661.37	3.2	-274'451.96	2.9
Fundraising	-270'221.49	2.9	-237'918.95	2.5
	-575'882.86	6.1	-512'370.91	5.4
Administrative expenses				
Personnel expenses	-192'159.97	2.0	-238'882.53	2.5
Travel and representation expenses	-6'085.88	0.1	-7'672.76	0.1
Financial expenses	-4'275.14	0.0	-5'049.02	0.1
Rental expenses	-39'259.45	0.4	-38'500.90	0.4
Office and operating expenses	-28'173.14	0.3	-25'165.56	0.3
Memberships	-5'762.20	0.1	-8'042.50	0.1
Third-party services	0.00	0.0	-1'091.00	0.0
Investments and maintenance	-31'488.65	0.3	-34'676.60	0.4
Asset depreciation	-14'421.40	0.2	-10'639.95	0.1
	-321'625.83	3.4	-369'720.82	3.9
Total Income / Expenses	-9'411'167.73	100	-9'520'582.41	100
Intermediate result	198'317.19		37'366.58	
Financial income				
Interest and securities, realised gains	46'141.20		55'645.64	
Securities, non-realised gains	86'752.13		143'490.57	
	132'893.33		199'136.21	
Real estate income				
Income	0.00		0.00	
Expenses	0.00		0.00	
	0.00		0.00	
Other income				
Creation of currency fluctuation fund	-80'000.00		0.00	
Other extraordinary expenses	-245'000.00		-230'000.00	
	-325'000.00		-230'000.00	
Result	6'210.52		6'502.79	
Statement of changes in restricted project funding				
Funds allocated to projects	7'474'748.52		7'486'690.13	
Funds used by projects	-8'246'764.96		-8'564'215.80	
	-772'016.44		-1'077'525.67	
Changes in restricted funds	-765'805.92		-1'071'022.88	
Allocations				
Allocations to organisational capital	-765'805.92		-1'071'022.88	
Allocation to project funds	-6'210.52		-6'502.79	
	772'016.44		1'077'525.67	

Cash flow statement
01.01.–31.12.2013

	2013		2012	
	CHF		CHF	
1. Cash flow from operating activities				
Result	6'211		6'503	
Depreciation	14'421		10'640	
Annual earnings before depreciation	20'632		17'143	
Changes in provisions	-5'600		-148'663	
Increase (-) / decrease securities	-140'178		110'153	
Increase (-) / decrease receivable	-278'178		-89'892	
Increase (-) / decrease prepaid expenses	256		-9'781	
Increase / decrease (-) accounts payable	-49'729		-124'454	
Increase / decrease (-) accrued expenses	39'814		51'839	
Cash flow from operating expenses	-412'983		-193'656	
2. Cash flow from investment activity				
Increase (-) / decrease financial investments	0		10'000	
Increase (-) / decrease tangible assets	-22'391		-6'340	
Increase (-) / decrease real estate	0		0	
Cash flow from investment activity	-22'391		3'661	
3. Cash flow from financing activities				
Increase / decrease (-) earmarked funds	-772'016		-1'077'527	
Increase / decrease (-) unrestricted funds	186'795		97'423	
Cash flow from financing activities	-585'221		-980'104	
Cash flow	-1'020'595		-1'170'100	
Control				
Cash balance on 01.01.2013 / 01.01.2012	6'276'820		7'446'920	
Cash balance on 31.12.2013 / 31.12.2012	5'256'225		6'276'820	
Change in cash and cash equivalents	-1'020'595		-1'170'100	

	Operating balance 01.01.2013	Allocations	Internal fund transfers	With- drawals	Closing balance 31.12.2013
Organisational capital					
Paid-in capital and reserves	865'346	0	0	0	865'346
Currency fluctuation fund	0	80'000	0	0	80'000
Fund 1: unrestricted funds	1'490'000	245'000	0	-33'349	1'701'651
Fund 2: unrestricted funds	3'501'060	0	0	-104'854	3'396'206
Result 2013	0	6'211	0	0	6'211
	5'856'406	331'211	0	-138'203	6'049'414
Funds reserved for projects					
SDC, LED projects					
SDC	26'127	0	0	-26'127	0
LED	1'544'153	1'665'867	0	-2'339'002	871'018
	1'570'280	1'665'867	0	-2'365'129	871'018
SolidarMed projects					
Lesotho	289'732	932'002	0	-942'662	279'073
Moçambique	120'935	990'023	0	-825'013	285'944
Tanzania	161'297	1'810'847	0	-1'933'692	38'451
Zambia	73'898	539'267	0	-571'610	41'555
Zimbabwe	296'365	1'383'507	0	-1'455'422	224'450
Other countries	50'000	153'236	0	-153'236	50'000
	992'227	5'808'882	0	-5'881'636	919'472
Total funds reserved for projects	2'562'507	7'474'749	0	-8'246'765	1'790'491
Changes in provisions					
Personnel deployed	119'874	0	0	0	119'874
Reintegration contributions	78'600	15'000	0	-20'600	73'000
Real estate	13'954	0	0	0	13'954
	212'428	15'000	0	-20'600	206'828

Annex to the annual financial statement 2013

Accounting principles: The accounts are prepared in accordance with Swiss GAAP FER accounting recommendations and give a true and accurate picture of the assets and liabilities, financial position and profit and loss.

Insurance Values: Assets are insured to the value of CHF 155'000.—.

Remuneration of the Executive Board: The Board of SolidarMed is active on a voluntary and unpaid basis. The President donated his fee of CHF 800.— in its entirety to SolidarMed. The Board did not submit any expense claims for reimbursement.

Accounting and Valuation Principles:

- Cash stated at nominal value
- Securities at the exchange rate on balance sheet reporting day
- the non-realised securities gains can, in line with the guidelines for investments and reserves, and to a max. value of 20% of the securities portfolio balance, be allocated to the currency fluctuation fund.
- Accounts receivable stated at nominal value
- Accounts payable to projects at nominal value minus necessary value adjustments
- Accounts receivable from projects (project advances): stated in foreign currency at exchange rate on balance sheet reporting day
- Assets at purchase price minus necessary amortisation
- Financial investments stated at nominal value

Many thanks for your support!

Our heartfelt thanks to all private individuals and institutions for your loyal commitment. Without these generous donations, SolidarMed's work would not be possible. Space restrictions mean that unfortunately, we cannot name every single donor. Beyond this list, our thanks also to those organisations who do not wish to be named.

Public sector

Swiss Agency for Development and Cooperation SDC; Liechtenstein Development Service LED; Bureau for Foreign Affairs of the Principality of Liechtenstein; Canton Aarau, Canton Appenzell Ausserrhoden; Canton Basel City; Canton Grison; Canton Lucerne; Canton Schaffhausen; Canton Schwyz; Canton Thurgovia; Canton Uri; Canton Zurich; City of Bern; City of Chur; City of Frauenfeld; City of Zurich; Municipality Arlesheim; Municipality Dottikon; Municipality Heimberg; Municipality Küsnacht ZH; Municipality Maur; Municipality Pfeffingen; Municipality Schaan.

Foundations and trusts

Abantu Stiftung; Carl und Elise Elsener-Gut Stiftung; Christian Bachschuster Stiftung Jona; COFRA Foundation; Familien-Vontobel-Stiftung; Ferster-Stiftung; Fondation Gertrude Hirzel; Fondation Yoni; Gebauer Stiftung; Gemeinnützige Stiftung Symphysis; Gertrud von Haller Stiftung für Drittwelthilfe; Gottfried und Julia Bangerter-Rhyner-Stiftung; Glückskette; Hilti Foundation; Josef und Margrit Killer-Schmidli Stiftung; Karl Mayer Stiftung; Leopold Bachmann Stiftung; Margrit Werzinger-Stiftung; Maria-Stiftung; Medicor Foundation; Mondo dei Bambini Fondazione; Paul Hess Stiftung; Promotor Stiftung; RHW-Stiftung; Rowdely Stiftung; Schwarzdorn Stiftung; St. Anna Stiftung; Stefanie und Wolfgang Baumann Stiftung; Stiftung Charles North; Stiftung der Gemeinschaft der Liebfrauwenschwestern; Stiftung Fons Margarita; Stiftung Fürstl. Kommerzienrat Guido Feger; Stiftung Sanitas Davos; Stiftung zur Förderung der Trinkwasserqualität; UNISCIENTIA Stiftung; Valüna Stiftung; Von Duhn Stiftung.

Companies

ABB Vie AG, Baar; Arztpraxis Bären, Oberegg; Belop GmbH Sarnen; ERMED AG, Schleithelm; Franz Hasler AG, Gamprin-Bendern; Hand in Hand Anstalt, Balzers; Hartmann Architektur und Design, Vaduz; Haus Deville GmbH; Lenum AG,

Vaduz; Liechtensteinische Landesbank, Vaduz; NEOVACATA AG, Oberriet SG; Neue Bank AG, Vaduz; Oryx International, Hünenberg; Salman Investment Management AG, Vaduz; Stahel + Köng AG, Hinwil; Systec Schweiz, Hünenberg; VP Bank, Vaduz.

Roman Catholic congregations and national churches

Biberist-Lohn-Ammansegg-Bucheggberg; Burgdorf; Freienbach; Gesamtkirchgemeinde Bern und Umgebung; Luzern; Münchenstein; Oberkirch; Thalwil-Rüschlikon, Uster, Winterthur, Wohlen AG; Zug; Heilig-Geist, Zürich.

Catholic parishes

Dreifaltigkeit, Bern; Oberlunkhofen; Ruswil; St. Agatha, Neudorf; St. Maria, Luzern; St. Fiden, St. Gallen; St. Moritz; St. Pius, Meggen; Triengen; Uznach.

Lutheran/Protestant Reformed parishes

Belp; Elsau; Friedenskirchgemeinde Bern; Herisau; Küsnacht ZH; Langnau im Emmental; Mittleres Toggenburg, Wattwil; Murten; Pratteln-Augst; Rapperswil SG; reformierte Kirche Kanton Freiburg; reformierte Kirche Kanton Zug.

Other

Genossenschaft ProBon; Haus und Kinderärzte Ostschweiz (HKO); Kriens hilft Menschen in Not; Mariannahiller Missionare; miva Schweiz; Ökumenische Arbeitsgruppe für Entwicklungshilfe Stäfa/Ürikon; Rotary Club Aegeri-Menzingen; Rotary Club Eschernerberg; Schweizerische Kapuzinerprovinz Luzern; Seelsorgeraum Berg; Sekundarschule Pratteln; Verein Welt Gruppe Möhlin.

Listed are donations from CHF1000.— onwards.



Lisbeth Pembele,
Institutional 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.

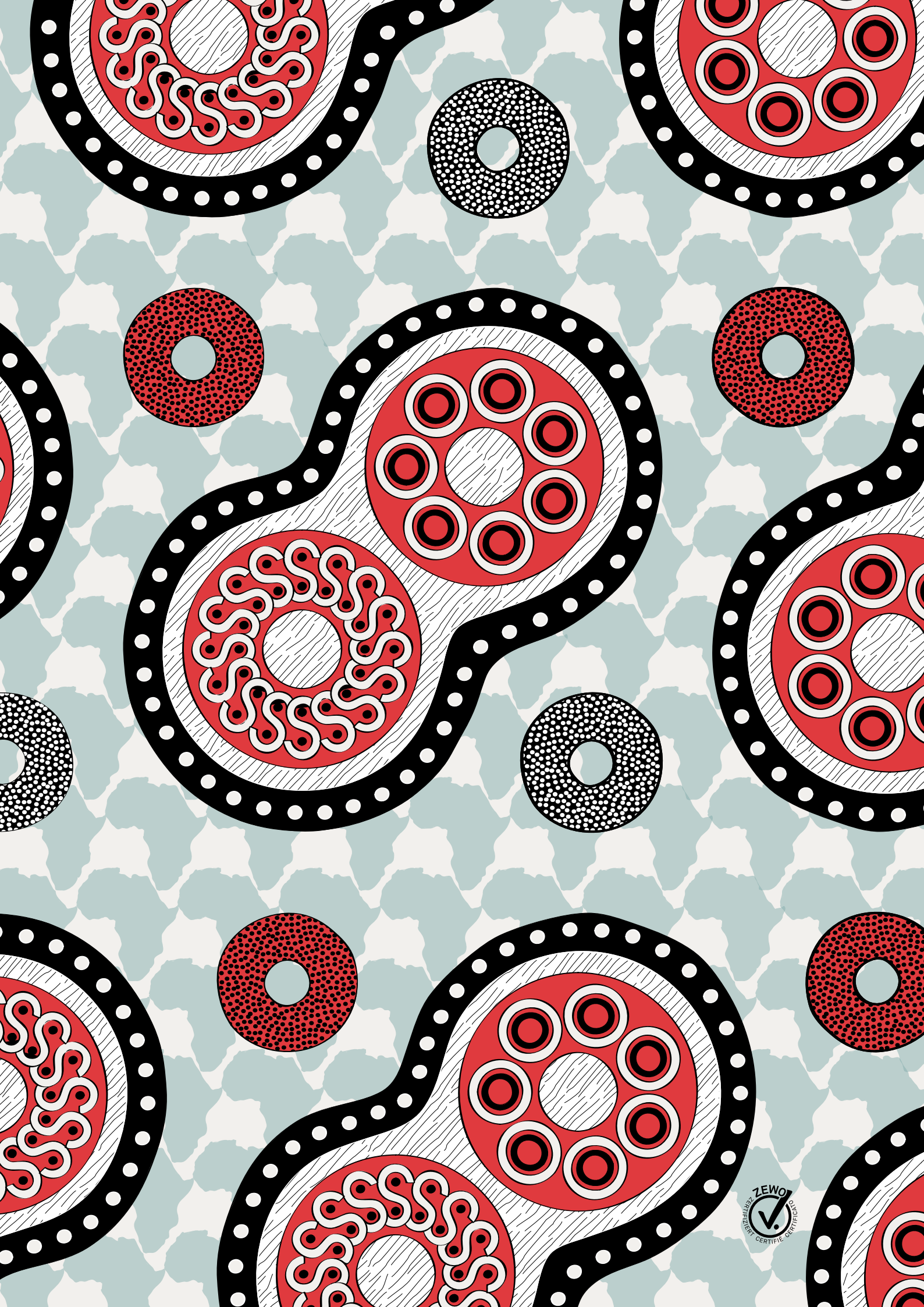
SolidarMed is committed to the five most important health concerns of Africa's rural population:

- Protecting mothers, children and newborns
- Combating infectious diseases such as 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 ZEW0 certificate, SolidarMed works efficiently, conscientiously and transparently.





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