

Annual Report

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Partnerships for Health



SOLIDAR
MED

96 years old

9 countries

3,092,886 people
with access to
improved healthcare

86,521 babies
safely delivered

1,665 healthcare
professionals and community
health workers trained

195 healthcare
facilities assisted

39 projects

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The pandemic as an opportunity for global health



**Prof.
Niklaus Labhardt**
President

Global health policy has been dominated by Covid-19 for over two years now. The pandemic has highlighted that public health is not adequately protected in poor countries with few resources. In many African countries, there were not enough vaccines, not enough personal protective equipment, not enough oxygen, no Covid medicines and hardly any intensive care beds.

At the same time, the pandemic has raised awareness of global health among the public and policymakers. Two insights are particularly important: first, viruses that are circulating in Africa today can crop up in Europe tomorrow. And second, it is especially complex and difficult for weak healthcare systems to tackle a pandemic. Because vaccines alone are not enough. We also need cold chains, transportation and a public that trusts the health system. So even countries that have made huge progress in tackling HIV and malaria in the last decade were unable to respond appropriately to the pandemic due to their still weak health systems.

The pandemic has therefore opened the eyes of African governments and the international community to the importance of functioning healthcare delivered by trained and motivated staff. It has also reinforced initiatives inside Africa to reduce dependence on the Global North in the area of health. For example, new facilities are currently being built in Africa to produce

modern medicines and vaccines. Let's hope these initiatives continue. If the Covid-19 pandemic makes us realise that, in order to tackle future epidemics or pandemics, we need a strong and resilient health system that can quickly respond to new challenges, then this could mark a turning point for global health.

In the second year of the pandemic, SolidarMed once again improved basic primary healthcare in its partner countries and proved a reliable partner despite the challenges it faced. In 2021, it continued training healthcare staff in Zambia, promoted maternal and newborn health in Tanzania, allowed patients with diabetes and high blood pressure to access treatment in Zimbabwe, delivered basic health services to remote communities in Lesotho, provided medical care to internally displaced people in Mozambique, offered psychological support to traumatised migrants in South Africa, and provided food, medical care and the chance to go to school to children with HIV in Kenya and India. We were able to implement these projects thanks to highly competent teams in the project countries, an efficient and committed administrative office here in Switzerland, and your financial support. Read on to find out more about what we've achieved.

And also as an organisation, SolidarMed is continually evolving, with new topic areas becoming more important. For example, in the future we will be



“The pandemic has shown the world the importance of functioning primary healthcare delivered by trained staff.”

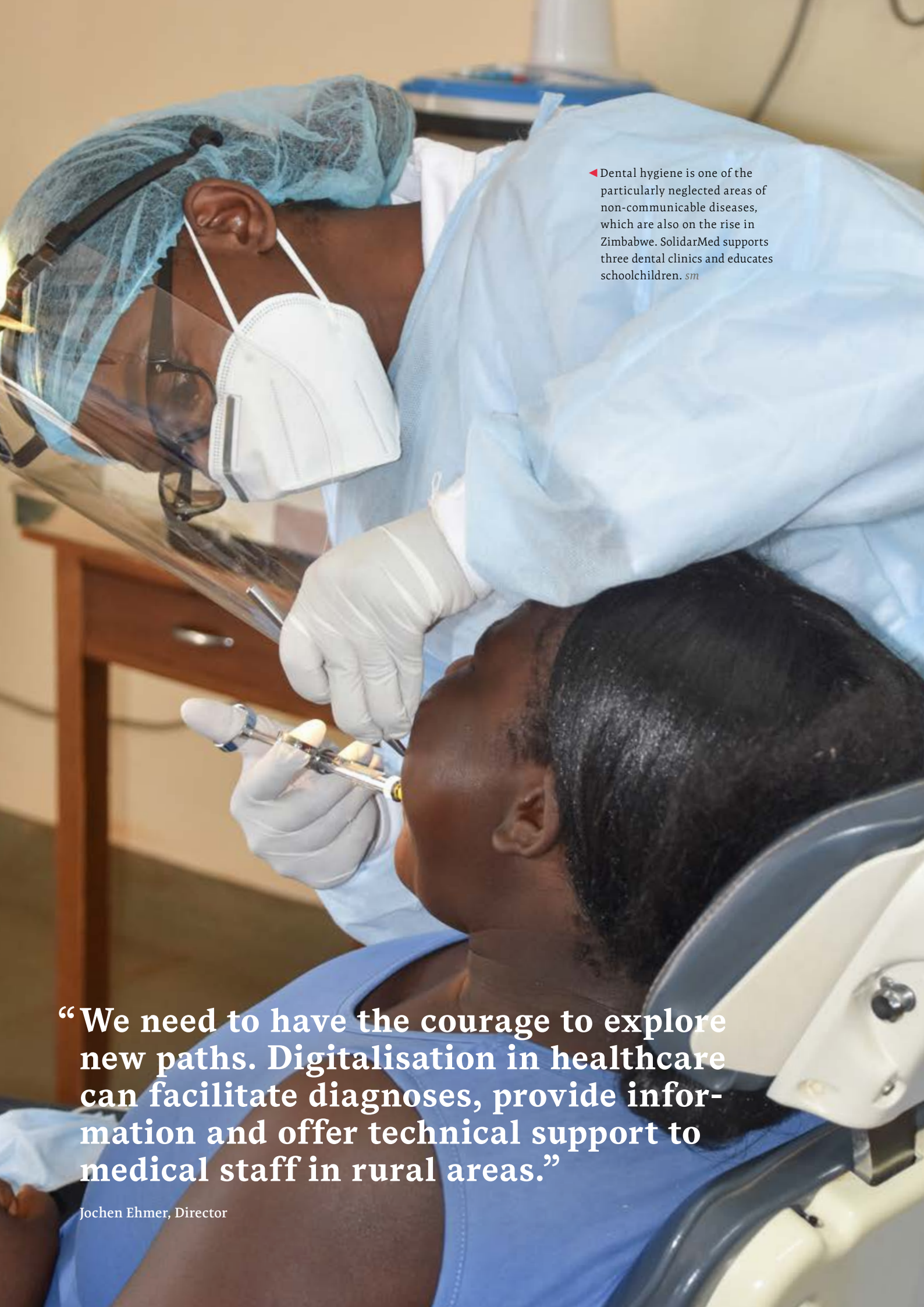
Niklaus Labhardt, President

▲ Eighteen-year-old Anifa from the Ulanga District in Tanzania receives advice from community health workers on monitoring her 18-month-old baby Nasma's growth and on feeding her a balanced diet. *rl*

focusing more on chronic, non-communicable diseases, such as cervical cancer, mental illness and cardiovascular disease. We will be seeking more joint projects with national and international partner organisations, opportunities to support digitalisation in healthcare, and ways to strengthen partners in a targeted way on the ground. And decolonising international development cooperation remains a key issue for SolidarMed too. The shifting of decision-making power from the administrative office in Lucerne to the country offices and local organisations in partner countries is a step in this direction. In the next few years, SolidarMed will increasingly decentralise the development of projects. This process is intended to be gradual and to go hand in hand with a reinforcement of country offices and partner organisations, without compromising the quality and efficiency of the actual work. Fortunately, Africa already has millions of talented young people. With the shift away from Lucerne, SolidarMed's programmes should not only improve healthcare, but also offer training and career opportunities to dedicated young people in partner countries. In this way, SolidarMed is contributing to true sustainable development.

Amid all these changes, we still firmly believe that access to healthcare is a universal human right. Helping ensure that over 2.5 million people in southern Africa and in Hyderabad (India) have the chance of better health will remain SolidarMed's focus.

I am very grateful for the trust you have placed in our work and I hope you'll continue to follow and support us in the year ahead. ■



◀ Dental hygiene is one of the particularly neglected areas of non-communicable diseases, which are also on the rise in Zimbabwe. SolidarMed supports three dental clinics and educates schoolchildren. *sm*

“We need to have the courage to explore new paths. Digitalisation in healthcare can facilitate diagnoses, provide information and offer technical support to medical staff in rural areas.”

Jochen Ehmer, Director

The world is doing better than we think



Jochen Ehmer, MD
Director

What do you think of when you hear the word 'Africa'? What images spring to mind? Is it hunger, poverty and disease? Malnourished children, dry fields and dusty huts? You wouldn't be alone as our idea of Africa is shaped by pictures and headlines from the media. But are they accurate?

While Africa is indeed impacted by disasters, climate change and child mortality, there is so much more to it than that: it's about living and breathing hope, new beginnings and energy. We at SolidarMed see these positive stories on a daily basis: the boy from a very poor family who is now working as a surgeon. Or the bold female entrepreneur who grows organic vegetables on the outskirts of a city and has ten employees. Or the father who survived HIV thanks to modern medicine and is now working as a farmer to feed his family. In this age, overshadowed by war and Covid, we often fail to notice the positives. Because good news doesn't make headlines. Hope doesn't sell. But don't be fooled: the world is doing better than we think – both here in Switzerland and elsewhere. I invite you to discover a courageous, positive and hopeful Africa in this Annual Report.

The courage to explore new paths

Once again in 2021, SolidarMed worked to harness this positive energy to provide real life chances and to allow people to live a life where health and empowered development is possible for all, in some of the world's poorest regions. In difficult circumstances we

implemented numerous projects to strengthen basic primary healthcare and secured sufficient resources for project work. SolidarMed therefore relies on a proven approach: equipping healthcare facilities, training healthcare workers, and educating the public about health issues. We also need the courage to explore new paths. For example, in the year under review, we utilised and promoted the advantages of digitalisation in the healthcare sector. Because digital aids such as mobile phones and apps can facilitate diagnoses, provide information and offer technical support to medical staff in rural areas. And SMS notifications or counselling by phone allow more people to access healthcare services while saving them repeated lengthy journeys to health centres.

The need for new solutions is particularly great in the area of non-communicable diseases, such as high blood pressure and diabetes. These diseases are now among the biggest causes of death worldwide. But because there is an acute shortage of qualified staff in poor countries, people are left untreated and many die, with 75% of all deaths due to non-communicable diseases worldwide occurring in poor countries. SolidarMed has therefore launched a project in Lesotho for improved diagnosis and treatment of chronic diseases. It is being implemented in association with the Ministry of Health and two Swiss universities and relies on modern digital solutions for early detection and prevention. Meanwhile, in Mozambique,



▼ During a visit by the mobile clinic to the remote district of Butha-Buthe in Lesotho, nurse Manare cares for villager Mamotsamai and her daughter Puleng. [my](#)

“Only by working together can we build a future in which no one needs to fear malaria, Covid-19 or childbirth.”

Jochen Ehmer, Director

SolidarMed is promoting the early detection of cervical cancer using smartphones. And in the context of Covid-19, we are testing mobile, digital x-rays supported by artificial intelligence. These are just some examples of ways in which SolidarMed is exploring new approaches.

Working together to bring about change

SolidarMed's crucial added value is this courage to innovate coupled with its longstanding experience and technical expertise. Thanks to highly capable staff on the ground, we are familiar with the local situation and can develop sustainable, grassroots solutions. This is only possible thanks to our dedicated partners. These include the Swiss Agency for Development and Cooperation SDC, who invests in our projects and has pledged this support until the end of 2024; the Liechtenstein partners, such as the Liechtenstein Development Service (LED) and the Hilti Foundation, who support our programmes in Zambia and provide important momentum; the Swiss organisation 'Enfants du Monde' with whom we are developing our projects in Tanzania; and the universities of Bern, Basel, Zurich, Lucerne and Lausanne, who are supporting us in the areas of innovation and research. Added to this are the many supporters, members, legacy donors, companies, foundations, cantonal authorities and partner organisations, who express their trust through small or large donations.

They all believe in our work and our values. My heartfelt thanks go to everyone who supports SolidarMed's programmes and encourages us to continue. Without them, our work wouldn't be possible. Only by working together can we build a future in which no one needs to fear malaria, Covid-19 or childbirth. SolidarMed will continue to work day in, day out to make this vision of the future a reality. ■



Improving basic primary healthcare

Hospitals and healthcare centres are the backbone of healthcare in rural Africa. A lack of infrastructure in the medical field, coupled with inadequate power and water supplies pose major challenges to health workers. Vaccines, medicines and even blood supplies spoil if they are not refrigerated, and operations cannot be performed without enough light. SolidarMed replaces and procures the necessary infrastructure, medical equipment and devices for hospitals and healthcare centres. These resources are essential to ensure that babies can be delivered safely, that blood supplies refrigerated using solar power can be used

in emergencies, and that running water is available for good hygiene. In 2021, SolidarMed partnered with 195 hospitals and healthcare centres to contribute to effective basic primary healthcare.

- ▶ 43 hospitals supported
- ▶ Improved services in 152 healthcare centres
- ▶ 21 operating theatres manned
- ▶ 1,903,952 outpatient consultations
- ▶ 86,521 babies safely delivered



Training and continuing education for health workers

Many African countries have a gravely alarming skills shortage in the healthcare sector. In rural areas in particular, there is a lack of qualified healthcare professionals, which has a direct impact on the health of local communities. Training and continuing education for doctors, nurses and midwives is therefore key to sustainable development and strengthening of the health system. SolidarMed has been committed to this goal for many years and trained a total of 1,372 nurses, doctors, medical licentiates and midwives in 2021. This will sustainably

improve the quality of healthcare in southern Africa, particularly in rural regions.

- ▶ Initial training of 418 professionals
- ▶ Continuing education of 954 professionals
- ▶ 80 experts assisting local partners
- ▶ 16 medical schools supported



Strengthening healthcare and prevention in communities

Preventable and curable diseases claim millions of lives. And it is not only treatment that is key, but also prevention and diagnosis. Unfortunately, particularly in rural Africa, there is insufficient access to the necessary services and crucial expertise is hard to come by. SolidarMed systemically strengthens village communities and connects them with the existing healthcare system by developing knowledge, counselling and transportation options. Community health workers – people from the local community who receive brief training in basic primary healthcare and prevention strategies – are invaluable for these projects. They allowed 62,350 mothers and children to

receive preventive counselling or treatment for diarrhoea in 2021. Likewise, young people – known as peer educators – are involved to educate other young people, which is an important part of the puzzle in the path to sexual and reproductive health.

- ▶ 1,247 community health workers trained
- ▶ 232 healthcare groups supported
- ▶ 62,350 mothers and children counselled in local communities
- ▶ 56,281 people educated about chronic diseases



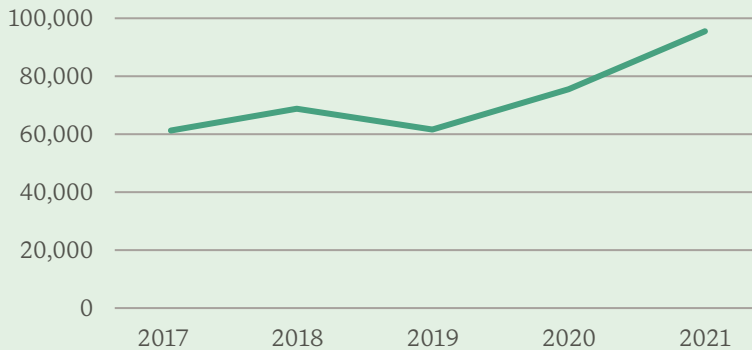
Implementing programmes effectively

Reliable, binding and value-preserving development, which takes balanced account of social, environmental and economic aspects, is crucial. SolidarMed works with various partners to review the results and effectiveness of its programmes and projects on an ongoing basis. Interventions are based on scientifically justified strategies that are in keeping with national and international standards. Where the relevant knowledge and expertise are lacking and in order to continually develop it, SolidarMed works with local and international partners on scientific field studies (see

page 33). This allows it to help shape health policy beyond its regions of activity. And in Switzerland and Liechtenstein, too, SolidarMed advocates for the health concerns of people in partner countries.

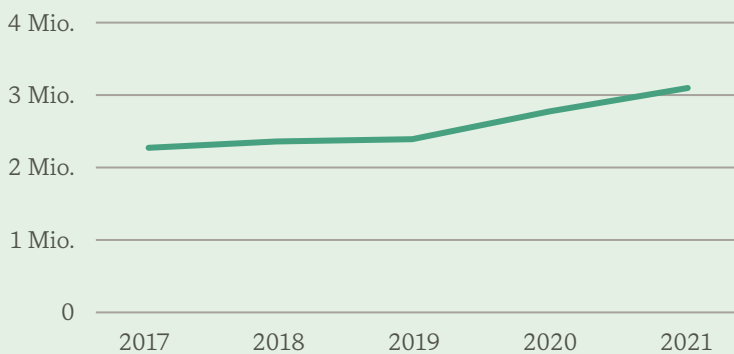
- ▶ 21 academic publications (peer review)
- ▶ 49 national health strategies shaped
- ▶ 284,159 people educated through SolidarMed's own publications

Institutional births



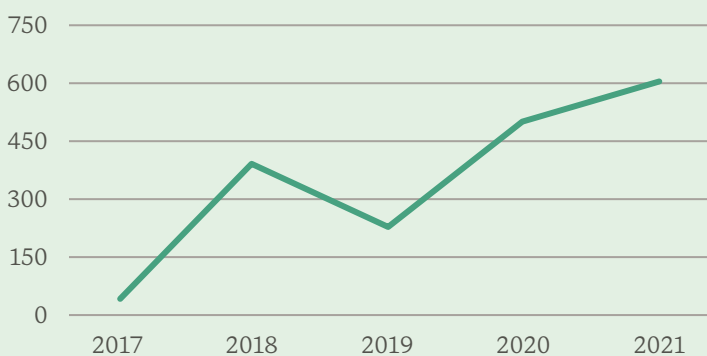
The number of births at healthcare facilities supported by SolidarMed is increasing. Incentives such as a free baby bath are no longer needed. This shows that the work on educating mothers about the advantages of institutional delivery has been successful.

Number of project beneficiaries



The number of people benefitting from SolidarMed's projects is on the rise: more visits to communities and more health institutions receiving support means the projects are reaching more people. And the population is growing, which means the catchment area of each supported facility is increasing.

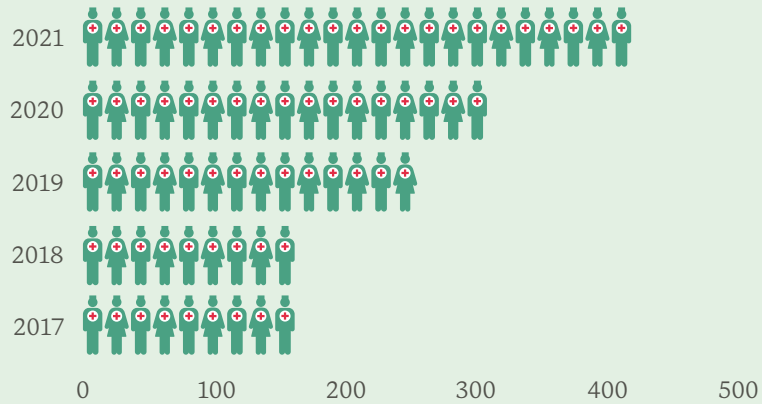
Ambulance journeys



For many people in northern Mozambique, the journey to hospital is long and arduous. To make it easier, SolidarMed has been supporting ambulance transport using bicycles and motorbikes for a number of years now. This allows pregnant women to access rapid medical assistance in the event of complications, for example.

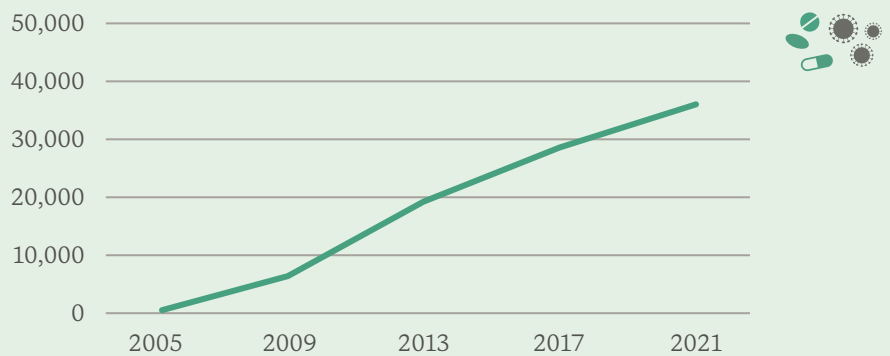
Rural areas of Africa are in urgent need of healthcare professionals. SolidarMed supports a number of training institutions and is also building housing for staff. This significantly improves healthcare provision for rural populations.

Newly-trained healthcare professionals



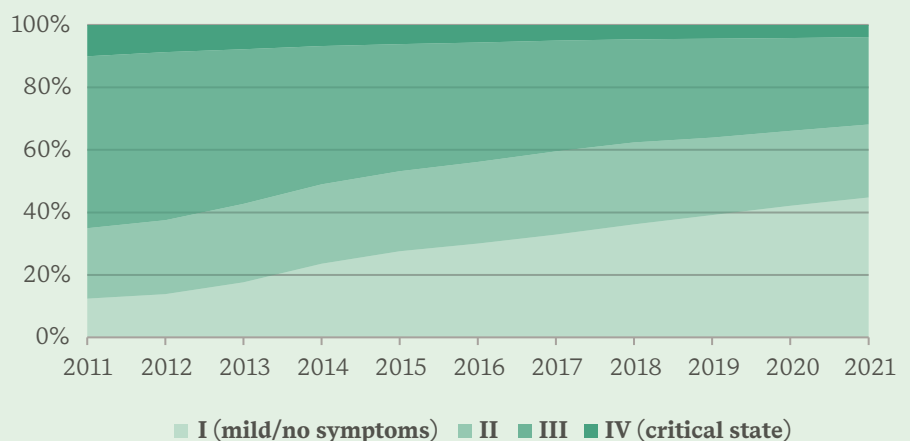
Over the last 16 years, an increasing number of people living with HIV have gained access to life-saving antiretroviral therapy thanks to SolidarMed. Also, the number of HIV patients spending more than two years in therapy has significantly increased.

Access to medicines for those living with HIV



Over the last 10 years, people living with HIV in the project regions have been starting therapy earlier. SolidarMed's commitment to education, diagnosis and providing access to therapy is therefore having an impact.

State of HIV patients when they start therapy



Tanzania

- ▶ Population: 59,734,210
- ▶ Poverty headcount ratio*: 49.4%
- ▶ Life expectancy at birth: 67.3 years
- ▶ Child mortality**: 50
- ▶ Number of projects: 5
- ▶ Number of staff: 17



Switzerland

- ▶ Population: 8,670,300
- ▶ Poverty headcount ratio*: 0%
- ▶ Life expectancy at birth: 83.4 years
- ▶ Child mortality**: 4
- ▶ SolidarMed administrative office: Lucerne



Zambia

- ▶ Population: 18,383,960
- ▶ Poverty headcount ratio*: 58.7%
- ▶ Life expectancy at birth: 62.5 years
- ▶ Child mortality**: 62
- ▶ Number of projects: 3
- ▶ Number of staff: 11



Zimbabwe

- ▶ Population: 14,862,930
- ▶ Poverty headcount ratio*: 39.5%
- ▶ Life expectancy at birth: 60.7 years
- ▶ Child mortality**: 55
- ▶ Number of projects: 6
- ▶ Number of staff: 24



South Africa

- ▶ Population: 59,308,690
- ▶ Poverty headcount ratio*: 18.7%
- ▶ Life expectancy at birth: 65.3 years
- ▶ Child mortality**: 34
- ▶ Number of projects: 3
- ▶ Partner organisations: Jika Uluntu, CHoiCe Trust, SCPS



Kenya

- ▶ Population: 53,771,300
- ▶ Poverty headcount ratio*: 37.1%
- ▶ Life expectancy at birth: 66.1 years
- ▶ Child mortality**: 43
- ▶ Number of projects: 1
- ▶ Partner organisations: DAMKA

Hyderabad (India)

- ▶ Population: approx. 10 million
- ▶ Poverty headcount ratio* (India): 22.5%
- ▶ Life expectancy at birth (India): 70.8 years
- ▶ Child mortality** (India): 34
- ▶ Number of projects: 1
- ▶ Partner organisations: John Foundation

Mozambique

- ▶ Population: 31,255,440
- ▶ Poverty headcount ratio*: 63.7%
- ▶ Life expectancy at birth: 58.1 years
- ▶ Child mortality**: 74
- ▶ Number of projects: 9
- ▶ Number of staff: 53

Lesotho

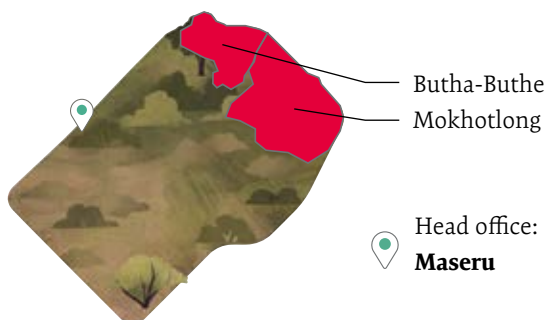
- ▶ Population: 2,142,250
- ▶ Poverty headcount ratio*: 49.7%
- ▶ Life expectancy at birth: 50.7 years
- ▶ Child mortality**: 86
- ▶ Number of projects: 11
- ▶ Number of staff: 106

* Percentage of the population who live on less than USD 1.90 a day

** Deaths of children before 5 years of age per 1,000 live births

Lesotho

Lesotho has the world's second-highest HIV rate, with one in five people carrying the virus. At the same time, cases of non-communicable diseases, such as diabetes, high blood pressure and mental illness are rising and placing an additional burden on the health system.




10,318 people in remote and hard-to-reach areas were able to access medical services thanks to the mobile clinic.

3,936 babies were safely delivered in hospitals and health centres supported by SolidarMed.

23 health centres received comprehensive training on non-communicable diseases.

How SolidarMed is making a difference in Lesotho

 **ComBaCaL**

Project duration 2021 - 25


Region Butha-Buthe and Mokhotlong

Target group 200,000 people in remote communities, 110 community health workers, 23 health centres

Objective A project team led by SolidarMed educates healthcare workers about non-communicable diseases using an approach that has proven effective in the fight against HIV/AIDS: Lay counsellors offer treatment locally so that patients don't need to travel to a health centre. The team thereby obtains scientifically validated insights on the challenges of treating non-communicable diseases.

Main activities

- ▶ Training staff at 23 healthcare facilities to prevent and detect non-communicable diseases.
- ▶ Developing a digital app to facilitate treatment of non-communicable diseases.
- ▶ Reviewing the effectiveness of the project by means of clinical studies in over 100 communities.

 **MistraL**

Project duration 2020 - 22


Region Butha-Buthe and Mokhotlong

Target group more than 100,000 people in remote communities

Objective The research project, led by the Swiss TPH, enables people in two remote districts of the country to be tested for Covid-19, and refines methods to facilitate diagnosis. It helps hospitals, healthcare workers and communities prevent the spread of the virus by supplying personal protective equipment. It also researches the factors that contribute to vaccine scepticism among the population.

Main activities

- ▶ Offering Covid-19 rapid tests for adults and children at two hospitals thanks to the construction of test centres.
- ▶ Training community health workers to diagnose Covid-19 and conducting qualitative surveys in more than 20 communities.
- ▶ Researching facilitated diagnosis of Covid-19 by means of x-rays and by analysing aerosols exhaled into a tube.

 **VITAL**

Project duration 2020 - 24

Region Butha-Buthe and Mokhotlong

Target group 300,000 people living with HIV in rural areas

Objective To supplement the previous, standardised treatment of people infected with HIV, SolidarMed is working with the Swiss TPH to develop a differentiated service delivery model. This takes account of the viral load, the clinical characteristics and the patient's personal preferences. The team then tests the impact of the interventions in several test groups. In so doing, it aims to guarantee continuous and high-quality HIV care.

Main activities

- ▶ Delivering customised treatment in 18 clinics to over 5,000 people living with HIV.
- ▶ Deploying eHealth tools to support healthcare workers and save patients another trip to the clinic.
- ▶ Preventing or treating tuberculosis, mental illness and cervical cancer as well as HIV.



▲ In 2021, SolidarMed’s mobile clinic allowed over 10,000 people to access medical services, such as prenatal check-ups. *my*

Support to tackle the Covid-19 pandemic



After Lesotho received Covid-19 vaccines in the summer of 2021, the health authorities and district health team in Butha-Buthe asked

SolidarMed to help with the vaccination rollout. SolidarMed responded by providing two nurses and two cars with drivers for several weeks. The mobile clinic was also deployed to vaccinate as many people as possible in remote communities. SolidarMed

was therefore one of the most important partners of the authorities in Lesotho’s vaccination campaign. The photo shows 26-year-old Mapolao Sekoenya getting her Covid-19 jab in Lehlakaneng. ■

Irene Ayakaka, Technical Director

SolidarMed Lesotho continued to grow in 2021. We launched the ComBaCaL project to be able to treat more people with non-communicable diseases in rural Lesotho. We also expanded access to diagnosis of Covid-19 and tuberculosis and assisted the authorities in Butha-Buthe with the rollout of the Covid-19 vaccination campaign.

In addition, we continued our fight against the HIV epidemic by expanding the use of digital technologies

and supporting the first laboratory for HIV resistance testing in Seboche Hospital.

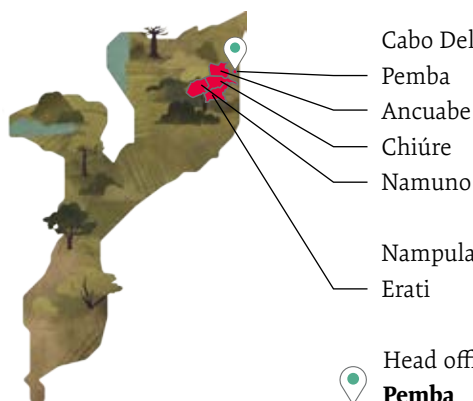
In 2021, we had to say goodbye to Dr Josephine Muhairwe, who had been country director at SolidarMed Lesotho since 2016. As the new technical director, I’m delighted to be joining a wonderful, enthusiastic and professional team in Lesotho and I look forward to supporting further growth.



The Swiss Agency for Development and Cooperation SDC at the Federal Department of Foreign Affairs donated CHF 352,330 to support the Lesotho country programme.

Mozambique

Over 800,000 people have already fled the terrorist groups in northern Mozambique. They stay in the south with friends or in resettlement villages, which puts additional pressure on the local healthcare system. Additionally, Mozambique is one of the three African countries that are most vulnerable to extreme climate shocks.



111 healthcare professionals and receptionists took part in triage training.

750 latrines were built in the resettlement villages.

1,313 HIV-positive women aged 25 or over were tested for cervical cancer for the first time.

How SolidarMed is making a difference in Mozambique

UVONA

Project duration 2021–22

Region Ancuabe und Chiúre

Target group Internally displaced people and the local population

Objective This project meets the immediate humanitarian needs of 82,500 internally displaced people in the Cabo Delgado Province in northern Mozambique. It improves their health by providing information, and educating people about prevention and hygiene measures to combat Covid-19 and other communicable diseases. It improves and facilitates access to primary healthcare and educates key figures in the community about the dramatic consequences of gender-based violence.

Main activities

- ▶ Building latrines, handing out hygiene kits and educating people about diet in the resettlement villages.
- ▶ Preventing the spread of sexually-transmitted diseases and raising awareness about gender-based violence.
- ▶ Supporting mobile clinics, community health workers and healthcare facilities in and around the resettlement villages.

Infection prevention and control

Project duration 2021–22

Region Chiúre, Ancuabe, Namuno

Target group Hospital staff and patients

Objective Hospital hygiene is crucial to prevent infections and resistant germs from spreading. In three healthcare facilities, SolidarMed is promoting the implementation of established practices, such as sterilising medical devices, using personal protective equipment (PPE), hand hygiene and proper disposal of waste.

Main activities

- ▶ Providing cleaning equipment and PPE; incinerating infectious waste.
- ▶ Repairing handwashing stations and toilets.
- ▶ Training hygiene managers and raising awareness of recycling and composting among all hospital users.
- ▶ Documenting (before/after) and analysing the measures.

Survive and thrive

Project duration 2021–23

Region Cabo Delgado and Nampula

Target group Children under 15

Objective Because accident and emergency departments are often crowded, a number of healthcare facilities have introduced a colour coding system since 2016 thanks to SolidarMed. When they arrive at hospital, children are given a coloured card which denotes the urgency of their treatment. In 2021, SolidarMed helped the Ministry of Health extend this system in northern Mozambique.

Main activities

- ▶ Renovating and constructing a triage room to improve patient flows.
- ▶ Training reception workers in allocating coloured cards and training medical staff.
- ▶ Implementing a digital database and a digital app to schedule patients.
- ▶ Integrating the triage concept in the curriculum of the training centre for healthcare workers in Pemba, in association with the health authorities.



▲ In several healthcare facilities, children are given a coloured card when they arrive which denotes the urgency of their treatment. rf

Rafael's story



Two-year-old Rafael* had a high temperature for several days before his mother decided to take him to the

Metoro health centre in the Ancuabe District. There, the reception staff examined Rafael and recognised three signs of an emergency: fever, loss of appetite and pale skin. Thanks to

SolidarMed's 'survive and thrive' project, Rafael was given a red card and was immediately examined by an experienced nurse. It turned out that he had severe malaria and anaemia.

Healthcare staff immediately initiated the right treatment and Rafael spent four days on the children's ward until he finally started to feel better. His mother received training on how to prevent

malaria and was briefed on Rafael's further treatment. The pair left the health centre on the fifth day, happy and empowered. Rafael's mother now knows that if her son ever has a sudden fever again, she'll need to take him straight to a health centre. ■

**Name has been changed.*

Barbara Kruspan, Country Director

SolidarMed concluded the extensive MAMA project in 2021. The project has been improving maternal and neonatal health in three large rural districts in the Cabo Delgado Province since 2011. On the one hand, the project encouraged families to use medical services before, during and after childbirth, and to access family planning. On the other, it strengthened health centres so they are able to guarantee appropriate treatment before, during and after delivery. Despite many unexpected challenges, such as several cyclones, a cholera outbreak,

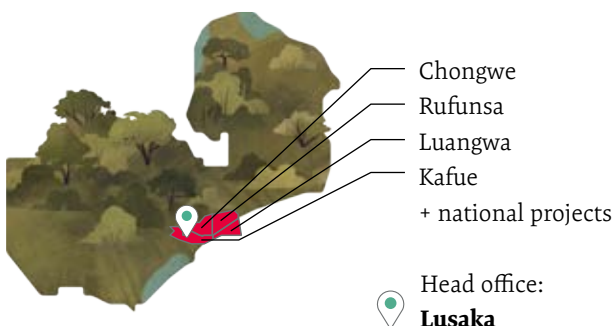
political uncertainty and large population movements, the project achieved good results. SolidarMed concluded the project in close collaboration with the health authorities to ensure its successes can be sustained.



The Swiss Agency for Development and Cooperation SDC at the Federal Department of Foreign Affairs donated CHF 549,771 to support the Mozambique country programme.

Zambia

In the 2021 elections, the previous government was replaced by a coalition led by the main opposition party. The new government wants to combat corruption, stimulate the economy and promote free speech. Hopes are high that this will also benefit the poorest sections of the population.



290 registered nurses and midwives completed their training at partner nursing colleges.

18 staff houses for healthcare workers were built or renovated, and work was started on the construction of 14 additional houses.

35 students completed their studies to become medical licentiates at the Levy Mwanawasa Medical University in Lusaka.

How SolidarMed is making a difference in Zambia

Houses for better health

Project duration 2019 - 22

Region Provinz Lusaka

Target group Healthcare workers in rural areas

Objective To provide healthcare workers with high-quality housing to make working in rural healthcare facilities more attractive and thus to increase staff retention.

Main activities

- ▶ Improving the living conditions of rural healthcare workers by renovating existing and building new housing for staff. Since the project launched in 2013, SolidarMed has built over 100 houses.
- ▶ Strengthening the organisational and operational structures of SolidarInvest, a social enterprise set up by SolidarMed, in order to promote the sustainability and profitability of the project.
- ▶ Training the local population in construction skills to improve employment opportunities and to boost households' economic situations.

Decentralised Nurse Training

Project duration 2019 - 22

Region Selected nursing colleges in several provinces

Target group Student nurses

Objective To promote and professionalise the training of nurses in rural Zambia through a decentralised training model. The theoretical teaching of three nursing disciplines takes place in a central school, after which students switch between various regional hospitals for their practical training. This allows more students to be trained than before and enhances the quality of teaching.

Main activities

- ▶ Scaling up the model to other educational institutions.
- ▶ Further developing the training model through a blended learning approach (theory, practice, online etc.) to make it cheaper and more effective.
- ▶ Strengthening the sharing of experience at policy level.

Training medical licentiates

Project duration 2019 - 21

Region The main partner is the medical university in Lusaka; the training facilities are spread out over the whole country.

Target group Students and their trainers

Objective To sustainably improve healthcare for rural and underserved population groups through a professional, competence-based training programme for medical licentiates. SolidarMed promotes the basic and further training of practical trainers to improve the quality of teaching and training.

Main activities

- ▶ Improving and maintaining training quality by instructing practical trainers in methodology and teaching skills.
- ▶ Enhancing training quality through a blend of practice and theory and by strengthening digital tools.
- ▶ Strengthening the Zambia Medical Licentiate Practitioners Association (ZMLPA) to better integrate and further develop medical licentiates within the healthcare system.



▲ SolidarMed's Z-MED podcast is a medical education and training podcast for future medical licentiates. It allows students in remote areas to access quality learning resources. *sm*

Manyama's story



Manyama is an operating theatre nurse and medical trainer at Chongwe District Hospital. He describes the switch to the decentralised training model as a success, saying that the training courses and teaching materials

have made him a better teacher. As a trainer in the decentralised model, he has become the link between the training institution St Luke's College and his hospital. "In this role I have helped hospital staff get to grips with the decentralised model and to overcome their initial scepticism," he explains. He says that sharing experience with

trainers from other healthcare institutions has also been rewarding and valuable and that it has given him an understanding of the differences between the various locations. He is now doubly motivated to do his job. ■

John Tierney, Country Director



We worked closely with the Ministry of Health in 2021 to continue to strengthen the health system in rural Zambia and thus to respond to population growth. Once again, there were more graduates than ever before in our projects and there is still a lot of interest from the Ministry of Health in further expansion. The medical licentiate project is therefore being developed in 2022 to broaden the practical training of students of all medical disciplines in regional hospitals.

Our housing and infrastructure programme has also grown and the business model of SolidarInvest is to be self-financing by the end of 2022. Through these projects, we are not only working to ensure that there are more healthcare professionals available to work in rural healthcare facilities, but also that they settle in those regions. This has a positive impact on the lives of thousands of people.

The Swiss Agency for Development and Cooperation SDC at the Federal Department of Foreign Affairs donated CHF 87,926 to support the Zambia country programme.

Zimbabwe

Some 15 million people live in Zimbabwe and one in six adults is unemployed. The health system is chronically underfunded, and staff are overstretched and disheartened. The increase in non-communicable diseases is placing additional pressure on the health sector.



12,761 babies were delivered in a healthcare facility supported by SolidarMed.

2,500 patients with diabetes or high blood pressure were treated and advised.

424 primary school pupils with tooth decay received dental treatment.

How SolidarMed is making a difference in Zimbabwe

Maternal and newborn health

Project duration 2019-22

Region: Zaka, Bikita und Chiredzi Districts

Target group Some 12,500 pregnant women and their newborns every year, 90,000 women of childbearing age, 125 midwives and 600 community health workers

Objective To improve the quality of medical care for mothers and newborns by empowering women, their families, community health workers and healthcare professionals, and strengthening healthcare facilities.

Main activities

- ▶ Educating individuals, families and community health workers on the benefits of institutional births, sexual and reproductive health and family planning.
- ▶ Practical training of nurses to guarantee quality care during pregnancy and childbirth.
- ▶ Procuring medical equipment and consumables.

eHealth

Project duration 2018-22

Region Zaka, Bikita and Chiredzi Districts

Target group Healthcare workers and inhabitants in the project region; also indirectly the Ministry of Health

Objective To increase the efficiency and effectiveness of healthcare through the development of digital health measures that are integrated in the existing health system. This is a cross-cutting project and is deployed by SolidarMed in Zimbabwe in the area of HIV/tuberculosis, maternal and newborn health, and non-communicable diseases.

Main activities

- ▶ Providing digital solutions for dealing with patients, e.g. sending test results via SMS, managing electronic patient records.
- ▶ Developing digital information and exchange platforms.
- ▶ Training staff in computer skills.

Tackling non-communicable diseases

Project duration 2021-23

Region Zaka, Bikita, Chiredzi and Masvingo Districts

Target group People with diabetes, high blood pressure or dental problems

Objective Although the number of people with non-communicable diseases in rural Zimbabwe is increasing, there is little medical assistance available for those affected. SolidarMed is therefore supporting healthcare facilities to improve medical care for these people.

Main activities

- ▶ Training of healthcare workers in diagnosing and treating diabetes and high blood pressure.
- ▶ Providing medicines and equipment.
- ▶ Educating those affected by non-communicable diseases about the potential consequences and the importance of a healthy diet.
- ▶ Gradually building capacity to scale the project up from six to 18 health centres.



▲ In Zimbabwe, too, non-communicable diseases are on the rise. There is a great need for education, training and medical equipment. *sm*

Tau's story



For almost two years, 77-year-old Tau* was partially blind as a result of his diabetes. He had to give up his job as an electrician and was no longer able to support his family. In 2021, he was diagnosed with a cataract at Masvingo

Hospital, which is supported by SolidarMed. He underwent a free cataract operation, which was jointly organised by SolidarMed and the hospital. Now, Tau can finally see again. "I'm so grateful to SolidarMed and its partners as they've given me a new life," said the 77-year-old a few days after his operation. Tau is now back to working as an electrician.

He has also optimised the way he takes his medication, and made changes to his diet and lifestyle, which have significantly improved his blood sugar levels and blood pressure. ■

**Name has been changed.*

Kudakwashe Madzeke, Country Director

SolidarMed concluded a project in 2021 supporting the construction of two staff houses and the renovation of the maternity waiting shelter in the health centre in rural Samu, which had been damaged by Cyclone Eline. What's more, in the SolidarMed districts, thousands of mothers also received high-quality care during and after childbirth, while people with HIV were able to monitor their viral load and undergo resistance tests. A number of projects had to be adapted in order to reach those most in need despite the Covid-19 restrictions. For example, our committed team utilised digital platforms

to maintain timely care for patients and to educate village communities.

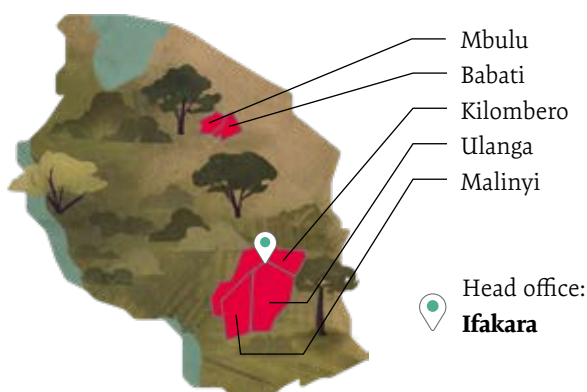
In addition, our country director, Janneke van Dijk, stepped down after six tireless years. The team is looking forward to 2022, which promises to be an exciting year of growth, particularly in the area of non-communicable diseases, where there is huge demand in Zimbabwe.



The Swiss Agency for Development and Cooperation SDC at the Federal Department of Foreign Affairs donated CHF 1,002,535 to support the Zimbabwe country programme.

Tanzania

More than half of Tanzania's fast-growing population is under 17. In rural areas in particular, pregnant women frequently give birth at home, which entails health risks. At the same time, a lack of access to running water adversely affects the quality of healthcare in rural areas.



29,697 babies were delivered in a healthcare facility supported by SolidarMed.

468 newborns benefitted from Kangaroo Mother Care.

377 people with tuberculosis and **278** people with HIV started life-saving therapy.

How SolidarMed is making a difference in Tanzania

Healthy newborns in Malinyi

Project duration 2018 - 21

Region Malinyi District

Target group 38,000 women of child-bearing age and their newborns; young people; healthcare staff and community health workers

Objective To improve the health of newborns and their mothers, as well as that of pregnant women and adolescents. This involved improving access to prenatal care and sexual and reproductive health, reducing the number of home births and improving the quality of medical services.

Main activities

- ▶ Visiting 14 remote villages with the mobile clinic.
- ▶ Running training and awareness campaigns on sexual and reproductive health and on maternal and neonatal health.
- ▶ Reinforcing peer groups for women and young people.

Kangaroo Mother Care

Project duration 2018 - 21

Region Malinyi District

Target group Newborns and their mothers and families

Objective To reduce the number of newborn deaths by deploying Kangaroo Mother Care, where the mother has skin-to-skin contact with her baby, and by setting up a neonatal unit with life-saving equipment and qualified healthcare staff. In addition, community health workers raise awareness of newborn health in village communities.

Main activities

- ▶ Procuring equipment; training and mentoring healthcare workers.
- ▶ Deploying community health workers to educate village communities.
- ▶ Developing information material on newborn health.
- ▶ Engaging in policy dialogue at national level in order to apply the method in other districts.

WASH

Project duration 1 year (2021)

Region Malinyi and Ulanga Districts

Target group 167,000 people in the catchment area of eight rural healthcare facilities

Objective To provide water and sanitation and therefore improve hygiene at eight rural healthcare facilities. This was achieved by building a well and toilets at each healthcare facility, several of which have wheelchair access. The training of staff and the public improves awareness of hygiene and leads to corresponding behavioural changes.

Main activities

- ▶ Constructing a well and sanitation facilities at eight healthcare facilities.
- ▶ Training of staff in long-term maintenance of water supplies and sanitation, in association with a local NGO.



▲ Community health workers advise mothers on their children's growth and on feeding them a healthy diet. *rl*

Samson's story



Samson is the clinical officer and manager of the Kiswago Dispensary in the Malinyi District. Until recently, the dispensary had no running water. Staff therefore had to buy water in barrels from villagers and use it extremely sparingly. For example, the

premises and toilets were only cleaned twice a week, and relatives had to bring water for patients and take clothes to the river to wash. Thanks to SolidarMed, hygiene has been significantly improved. The dispensary now has a water pump with running water and new toilets have been built. For Samson, the impact is huge: "Everything is so much more hygienic now because we can

clean every day. This reduces the risk of infection for women and their newborns, and takes the pressure off patients' family members." ■

Benatus Sambili, Country Director

We concluded several major projects focusing on maternal and child health in 2021. Cooperation with the local authorities was always very close and ensures the interventions are sustainable. The year's key achievements include building and handing over a Mother Waiting Home at the Lupiro health centre, training local professionals, and improving sanitation at eight healthcare facilities.

The insights gained were incorporated in the development of five new projects to tackle a number of key health

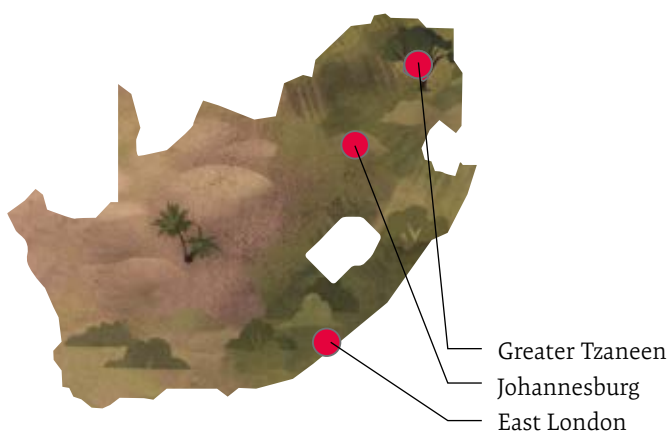
challenges, such as newborn and adolescent health and tuberculosis. SolidarMed will focus its efforts in this area in the Morogoro region from 2022. Through the new partnership with the renowned Ifakara Health Institute and participation in NGO networks in Dar es Salaam, SolidarMed will broaden and enhance its longstanding expertise in the region.



The Swiss Agency for Development and Cooperation SDC at the Federal Department of Foreign Affairs donated CHF 212,467 to support the country programme in Tanzania.

South Africa

South Africa is the world's most unequal society. It is also the country with the highest number of people living with HIV. Unemployment is high, particularly among young people, and there is a lack of access to education and healthcare.




More than **400** HIV-positive people received support in dealing with the disease and accessing the necessary treatment.

More than **1,800** young people and adults affected by HIV and poverty received support through quarterly home visits.

More than **1,000** people received school meals or food parcels.

How SolidarMed is making a difference in South Africa

 **Children for Change**

Project running since 2013


Region Greater Tzaneen, Limpopo Province

Target group Some 2,000 children and young people and 1,400 adults; all of whom affected by poverty, many living with HIV.

Objective To improve the physical and mental health of children and their caregivers and to boost the economic resilience of households. This is intended to break the vicious circle of poverty and disease and sustainably improve the lives of beneficiaries.

Main activities

- ▶ Providing individual psychosocial and medical support through monthly home visits.
- ▶ Offering educational guidance and strengthening the relationship between children and their caregivers.
- ▶ Running self-help groups for HIV-positive children/adults and mixed group activities with HIV-negative children.
- ▶ Supporting the establishment and maintenance of savings and loan groups.

 **Ilitha**

Project running since 2018


Region East London, Eastern Cape Province

Target group Some 1,000 children and young people affected by poverty and in some cases HIV/AIDS, as well as 125 caregivers.

Objective Giving children and young people affected by HIV and/or poverty in the project region the chance of a brighter future.

Main activities

- ▶ Providing individual psychosocial and medical support for children, young people and their caregivers through monthly home visits for the most vulnerable households.
- ▶ Operating a community centre with a nursery, help with homework, computer courses, learning programmes and group courses for children and adolescents.
- ▶ Providing free breakfast (porridge) for 850 primary school pupils.
- ▶ Running workshops for parents on parenting, HIV/AIDS, money management, alcohol use and gender-based violence.

 **Window of Hope**

Project running since 2012

Region Johannesburg

Target group Some 500 children and adolescents and 250 adults, many of whom are traumatised by concomitant poverty, HIV, violence, etc.

Objective To provide trauma counselling and therapy to empower desperate people. This helps give many people a brighter future and the chance to break free from poverty and hopelessness and to lead a dignified life.

Main activities

- ▶ Carrying out home visits to provide individual support to households affected by HIV and poverty.
- ▶ Conducting group therapy for traumatised AIDS orphans and often overburdened and depressive mothers/grandmothers.
- ▶ Running self-help groups for nurses.
- ▶ Running youth groups for students.
- ▶ Organising four-day holiday programmes for traumatised children and adolescents affected by HIV.



▲ SolidarMed supports the establishment of savings and loan groups. They allow members - who are mostly women - to borrow money from one another for emergencies or small investments. *mr*

Mary's story



Mary* is 36 years old and a single mother of four. She also cares for the three children of her late sister and for a younger brother. In early 2021, after the birth of twins, one of whom died, she was severely depressed and demotivated. She had lost her job as a result of the pregnancy, so she was reliant on child benefits and food parcels to feed the seven children and her adult brother. During this difficult time, Mary became addicted to watching television and gave up on all her previous hopes and dreams.

Through her children, who participate in the 'Window of Hope' programme, she became known to one of the programme's leaders. He encouraged her to take part in a new, fortnightly coaching programme. This helped her to accept the fact that she had to care for her late sister's three children and that she had dropped out of school as a young woman. She stopped compulsive television watching and focused on putting together a CV and applying for jobs. She completed a baking course and is now training others.

This process of coming to terms with her own life and taking ownership has

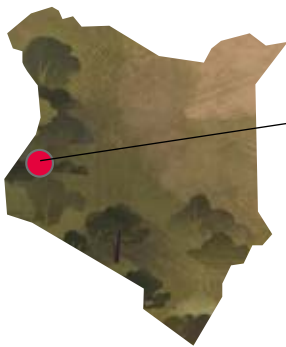
not only benefitted Mary, but her whole family. The older girls, who last year failed their exams, were motivated to apply to re-sit them and are confident that this time they will do well. Mary's relationship with all the children has significantly improved. ■

**Name has been changed.*

The Swiss Agency for Development and Cooperation SDC at the Federal Department of Foreign Affairs donated a total of CHF 38,405 to support the South Africa and Kenya programmes.

Kenya

The rural region of Butere with a population of some 140,000 is one of the poorest regions in Kenya. In 2021, SolidarMed provided holistic support to 250 HIV-positive children and their families to allow them to live in dignity. That is around 100 more children than the previous year.



Butere,
Kakamega County

250 HIV-positive children and their caregivers received holistic, health and academic support.

91 young people received equipment to attend school or to undertake vocational training.

400 More than **1,000** children and adolescents and a total of adults received medical and psychosocial support.



Nafasi – Help in Butere

Project running since 2015

Region Butere, Kakamega County

Target group 250 HIV-positive children and young people living in poverty, and their caregivers

Objective To improve the physical and mental health of HIV-positive children and young people affected by poverty through access to knowledge and medicines and through social interaction. Also, to allow children and young people to access school and vocational training.

Main activities

- ▶ Organising monthly meetings for HIV-positive children and young people including medical care, dealing with HIV and games and sport.
- ▶ Carrying out regular home visits for particularly vulnerable children.
- ▶ Providing contributions to school fees, uniforms and stationery so that children can access school and vocational training. Also, providing extra lessons in the holidays.

Vivian's story



As a child, Vivian had trouble accepting that she was HIV-positive. For years she didn't take her medication and was therefore very thin and small for her age. She dropped out of primary school and at one stage her situation was life-threatening. Only after losing her mother and then her father did she start taking her medication properly. Thanks to the team at DAMKA – SolidarMed's local partner organisation – she enrolled in school again and repeated an academic year. Thanks to her hard work and effort, her grades significantly improved, as did her relationship with those around her. She started volunteering at the DAMKA office to raise awareness among her peers of the risks of failing to adhere to therapy and of the benefits of a positive attitude and close support. Her story is a great source of inspiration for other



▲ At workshops, children and adolescents learn to live a good life despite HIV. *mr*

children, especially those who have given up hope and ambition due to their HIV status.

The 19-year-old is now studying applied statistics, and is the pride and joy of her uncle's family, with whom she lives. DAMKA continues to support her and covers her tuition fees and other equipment. This will hopefully allow Vivian to soon graduate and lead a healthy and empowered life. ■

The Swiss Agency for Development and Cooperation SDC at the Federal Department of Foreign Affairs donated CHF 38,405 to support the South Africa and Kenya country programmes.

India

There is a great deal of stigma around HIV and AIDS in India. In Hyderabad, the country's fourth-largest city, children and young people affected by HIV and poverty can access education and healthcare thanks to SolidarMed. Since 2017, over 200 young people have completed vocational training in order to be financially independent despite the stigma.



Hyderabad/Secunderabad, Telangana State

Over **3,300** adolescents and adults educated about HIV.

325 people received food, accommodation, medical support and/or education or skills training.

Over **2,200** food packages were distributed during the Covid relief campaigns.



ASHA Window of Hope

Project running since 2017

Region Hyderabad in Telangana State, India

Target group Some 400 children and young people affected by HIV/AIDS and poverty, as well as 300 adults

Objective To allow children and young people from families affected by HIV and poverty in Hyderabad to lead dignified lives and to be financially independent once they reach adulthood. They receive health and psychological support and access to education and skills training. Public awareness campaigns protect vulnerable children and adolescents from human trafficking and prostitution, both of which are widespread in the project region.

Main activities

- ▶ Operating two homes for vulnerable children and adolescents.
- ▶ Running vocational training courses; operating tutoring centres; covering school fees.
- ▶ Conducting awareness campaigns in schools, slums and red-light districts.

Aruna's story



Aruna's* father died of AIDS when she was only young. When the family found out that their mother was

HIV-positive, Aruna gave up all hope. She was isolated from her community and lived in poverty, which put her at risk of being trafficked. Fortunately, the team at John Foundation – SolidarMed's partner organisation – got to know the family. Aruna was able to take part in the vocational training programme and completed IT and English courses. She worked hard, successfully obtained a qualification and immediately found a job at a renowned IT company. Today, the 24-year-old says that her family has regained hope: "I've succeeded in life thanks to the training and employment service in the ASHA Window of Hope project. Thank you so much for the training and opportunities it gives women like me!" ■

*Name has been changed.



▲ Young people affected by HIV are often unable to finish school. Vocational training courses help them enter the labour market. *jf*



▲ Young people can take courses and gain qualifications in English, IT and manual occupations. *jf*

Our vision

We are committed to a world where all people have equitable access to good and affordable healthcare.

Values

Solidarity

Our commitment is founded on solidarity and partnership. The name SolidarMed bears witness to this.

Social equity

We are committed to ensuring that all people can exercise their right to physical and mental health without discrimination, regardless of age, circumstance, gender, religion, place of residence or income.

Empowered development

Health empowers people and allows them to reach their potential. We respect and promote the right to empowered individual and social development.

Integrity

Expertise, experience, trust and credibility form the basis and the capital of our work. SolidarMed behaves fairly, transparently and respectfully towards its employees, supporters, partners and local populations.

Sustainability

We stand for reliable, binding and value-preserving development which balances social, ecological and economic concerns.

Bodies

Annual general meeting

The annual general meeting is the highest association body. It meets once a year. Its duties principally include enacting the articles of association, approving the annual report, the annual financial statement and the audit report and electing and dismissing the members of the Board and the president and auditor.

The Board of Directors

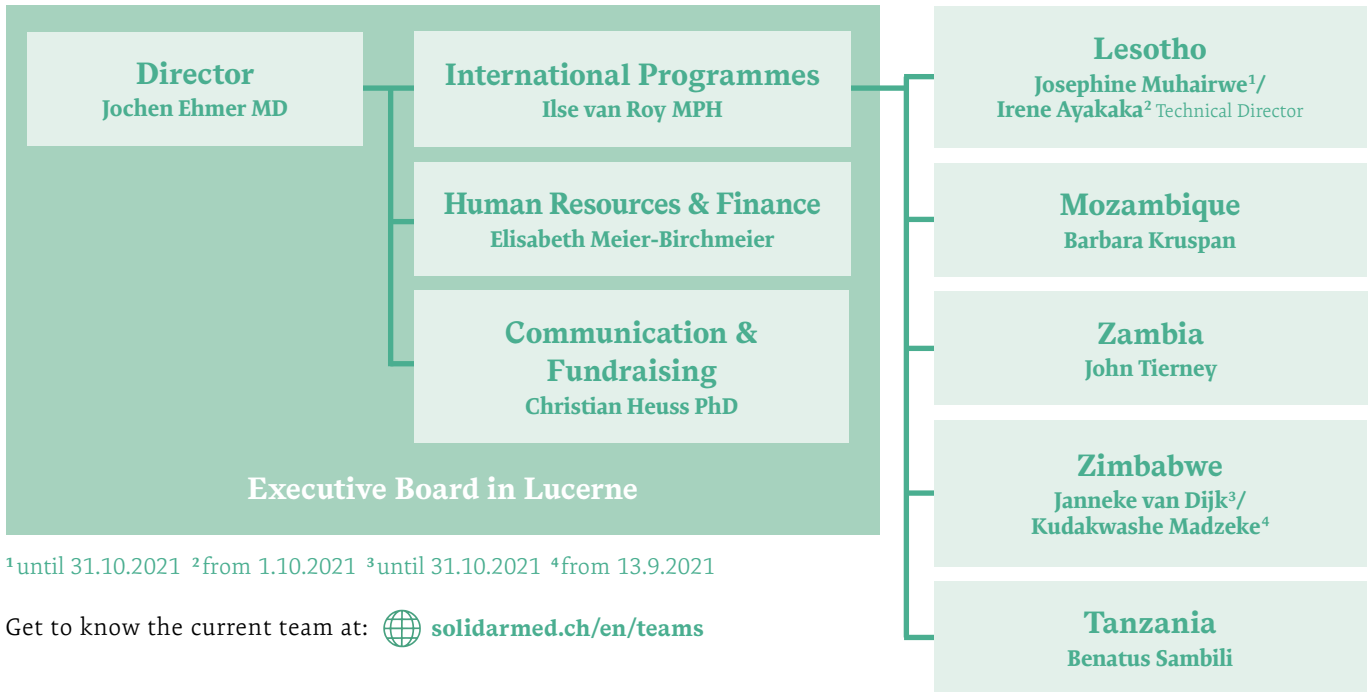
The Board of Directors represents the highest executive body and as such reports to the annual general meeting. The Board of Directors is responsible for electing the managing director, supervising the administrative office and approving the agenda, financial plan and annual budget.

Head office

The administrative office carries out all of SolidarMed's activities in Switzerland and abroad according to the resolutions and guidelines of the annual general meeting and the Board of Directors. In particular, the administrative office is in charge of the planning and execution of SolidarMed's projects, programmes and activities, hiring the staff in charge of the former, preparing the annual budget, fundraising and maintaining membership records and collecting membership fees. The programmes are implemented locally by the country offices together with our partners.

The headcount at the administrative office in Lucerne as of year-end 2021 was 16.3 full-time equivalents (previous year: 14.9).

SolidarMed Association
Prof. Niklaus Labhardt, President



Members of the Board of Directors in 2021

- ▶ **President:** Niklaus Labhardt ❶, Basel, Professor and research group leader at Swiss TPH, senior physician in the Department of Infectious Diseases & Hospital Epidemiology at the University Hospital Basel, since 2016; affiliations: staff member at the Swiss TPH
- ▶ **Vice-President:** Ruth Ospelt-Niepelt ❷, Vaduz, economist, since: 2013
- ▶ Markus Frei ❸, Lucerne, specialist in tropical and general medicine FMH; since: 2016
- ▶ Laura Frick ❹, Schaan, economist, since: 2020
- ▶ Guido Keel ❺, Winterthur, director of IAM Institute of Applied Media Studies ZHAW, since: 2016
- ▶ Bettina Maeschli ❻, Zurich, director of Swiss Hepatitis, since: 2020
- ▶ Bernadette Peterhans ❼, Fislisbach, head of professional postgraduate training at the Swiss TPH until July 2021, since then senior consultant at the Swiss TPH, since: 2020; affiliations: staff member at the Swiss TPH
- ▶ Robert van der Ploeg ❽, Dürnten, specialist in general internal medicine and tropical and travel medicine FMH, since: 2016
- ▶ Gregor Stadler ❾, Uerikon, specialist in general internal medicine FMH, since: 2013
- ▶ Hansjörg Widmer ❿, Baar, economist, since: 2013



According to the ZEWO requirements and §29 of the NPO code, affiliations representing potential conflicts of interest relevant to SolidarMed's activities are listed.

The members of the Board of Directors performed a total of 970 hours of voluntary work in 2021.

We are SolidarMed



▲ Lesotho team *sm*



▲ Mozambique team *sm*



▲ Zambia team *sm*



▲ Switzerland team *sm*



▲ Zimbabwe team *sm*



▲ Tanzania team *sm*

Enhancing the effectiveness of projects through research

Why SolidarMed carries out research

Research has the same goal as the health projects themselves: to sustainably improve the health and wellbeing of vulnerable and underserved people. To this end, research teams interview people about their needs and develop proposals for improved treatment methods.

What type of research does SolidarMed carry out

A research question could be, for example 'how high is the burden of diabetes in a certain rural African population?' Or 'how can HIV-positive people receive individual support to keep their viral load as low as possible?'

The ideas come from the projects themselves, from literature searches and from observations and conversations with partners on the ground. In any case, SolidarMed reviews the effectiveness of projects on an ongoing basis and learns from the insights gained to deploy its funds efficiently and effectively. From this, SolidarMed identifies relevant knowledge gaps and develops research projects which are either integrated in existing programmes or conducted separately.

SolidarMed's role in research projects

The research projects often take place in partnership with international or local universities, authorities, research institutes and/or NGOs. The research teams are chosen to complement one another. Depending on the research project, SolidarMed leads the project, acts as the link between the research team and the local authorities, or is responsible for implementation on the ground, while other actors take the strategic lead.

What happens to the findings

On the one hand, the findings (depending on the project) are incorporated in SolidarMed's programmes, and on the other, they benefit people well beyond the catchment area as SolidarMed shares them with local authorities, health institutions and the international research community. This roughly takes place in the following order:


- ▶ The research findings are published (e.g. at conferences, in academic journals). Some 100 articles have been shared with the research community in Switzerland and internationally in this way over the past five years.
- ▶ The research findings are prepared for a lay audience (e.g. seminars, short reports).
- ▶ SolidarMed engages in public debate (e.g. meetings, consultations with local authorities and decision-makers). Ideally the authorities incorporate SolidarMed's recommendations in national health strategies.
- ▶ The knowledge is incorporated in SolidarMed's projects by adapting existing measures or by identifying ideas for future projects.

 solidarmed.ch/en/publications

Three examples of SolidarMed's research projects (2021):

Topic	Authors	Medium
Tracing people living with HIV who are lost to follow-up at ART programs in Southern Africa: A sampling-based cohort study in six countries	Ballif M, Christ B, Anderegg N, Chammartin F, Muhairwe J*, Jefferys L, Hector J, van Dijk J*, Vinikoor MJ, van Lettow M, Chimbetete C, Phiri SJ, Onoya D, Fox MP, Egger M	Article in the journal Clinical Infectious Diseases from Oxford University Press dated January 2021
Review of the prevalence and contributing factors of postpartum haemorrhage at four rural hospitals in Masvingo Province, Zimbabwe	Muvirimi E*, Ndhlandlara T, Masinire K, van Dijk J*	Poster at the FIGO World Congress on gynaecology and obstetrics in October 2021
Containing the spread of infections in hospital (Mozambique)	Anne Jores*	Poster at the annual meeting of four Swiss professional associations in healthcare (SSI, SSHH, SSTMP, SSTTM) in September 2021

*= Employees of SolidarMed



◀ Close to East London in South Africa, SolidarMed funds the operation of a community centre that offers local children living in poverty a supervised leisure programme and help with homework. *mr*

“Of every CHF 100, CHF 83.20 go straight into our programmes. The cost of fundraising at 13.9% and of administration at 2.9% is low compared to other organisations.”

Elisabeth Meier, Head of HR & Finance

Effective programme work and growing support



Elisabeth Meier-Birchmeier
Head of Human Resources & Finance

SolidarMed achieved a pleasing set of annual results amid the challenges of the second year of the Covid-19 pandemic. Expenditure in partner countries passed the CHF 10 million mark for the first time in 2021. At 10.2 million (up by CHF 730,300 year-on-year), our activities were once again expanded for people in urgent need of medical assistance in our project regions.

Thanks to our many partners, donors and supporters, we managed to increase our purpose-specific income (including contributions from the public sector and organisations) in 2021 by CHF 444,160 year-on-year, while non-designated donations increased by CHF 58,000, taking total income to CHF 12.7 million.

In 2021, some CHF 342,000 of purpose-specific donations were made for subsequent years and were set aside in the purpose-specific fund capital for future use.

The encouraging stock market performance in 2021 allowed a gain of CHF 316,000, of which CHF 300,000 was set aside in the currency fluctuation fund.

This fund enables SolidarMed to cover any losses from securities in a bad year for the stock market.

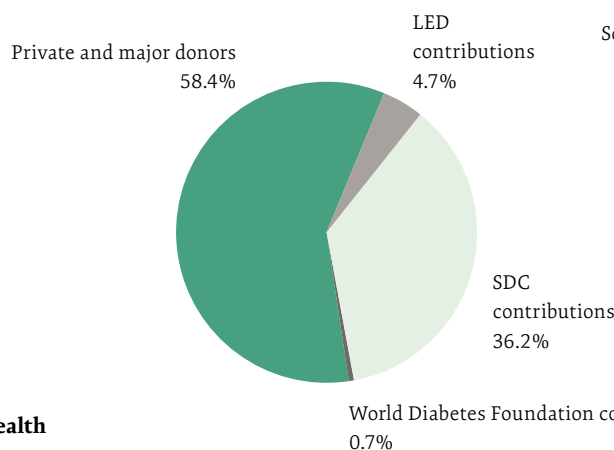
Organisational capital funds 1-3 decreased by a total of CHF 228,900. These funds were withdrawn to finance projects and activities. At CHF 9.3 million at the end of 2021, the organisation capital is an appropriate financial reserve to protect against the most important risks. This would allow the programmes in the South to be effectively and sustainably continued in the event of unforeseeable events, such as fluctuating donations or additional, unexpected costs.

In 2021, the ZEWO Foundation renewed its quality seal for a further five years and confirmed that the cost of fundraising (13.9%) and of administration (2.9%) is low compared to other organisations. Of every CHF 100 donated, CHF 83.20 flowed into our programmes in 2021. ■

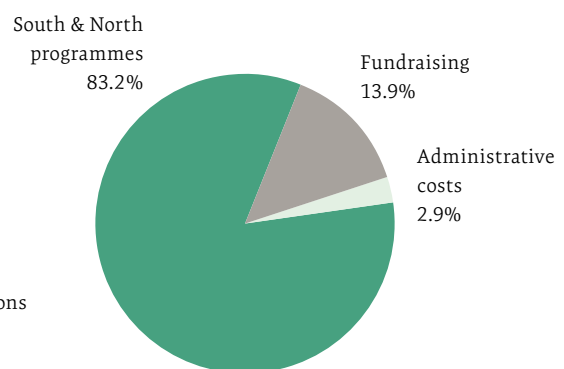
Please note: The annual financial statement including the auditor's report and annexes can be found at solidarmed.ch



Origin of funds 2021



Use of funds 2021



Balance sheet as of 31.12.21

	2021		2020	
	CHF	%	CHF	%
Assets				
Current assets				
Cash and cash equivalents	7,542,924		7,730,676	
Assets held for trading at quoted market price	4,479,497		3,669,440	
Other short-term receivables	118,424		380,371	
Accounts receivable from projects (project advances)	67,680		36,045	
Prepaid expenses	49,415		29,301	
	12,257,940	100	11'845'833	99.9
Fixed assets				
Plant and equipment	2,801		13,102	
Other investments	1		1	
	2,802	0.0	13,103	0.1
Total assets	12,260,742	100	11,858,936	100
Liabilities				
Short-term liabilities				
Liabilities from sales and services	159,264		98,740	
Accrued expenses	205,611		274,438	
	364,875	3.0	373,178	3.1
Long-term liabilities				
Provisions	159,642		162,842	
	159,642	1.3	162,842	1.4
Funds reserved for projects				
SDC mandates/project contributions	638,587		2,649	
LED projects	131,481		641,015	
World Diabetes Foundation projects	76,108		0	
SolidarMed projects	1,533,713		1,394,092	
	2,379,889	19.4	2,037,756	17.2

	2021		2020	
	CHF	%	CHF	%
Organisation capital				
Share capital				
Paid-in capital and reserves	881,633		881,633	
Fixed capital				
Currency fluctuation fund	754,645		454,645	
Funds 3 (restricted funds): Aids&Kind	3,533,388		3,676,477	
Free capital				
Fund 1 - unrestricted funds	3,100,498		2,968,704	
Fund 2 - unrestricted funds	1,086,172		1,303,701	
	9,356,336	76.3	9,285,160	78.3
Total liabilities	12,260,742	100	11,858,936	100

Income statement 1.1. – 31.12.21

Income

Non-designated income

Donations, membership fees	1,615,876		1,491,784	
Legacies	22,000		87,547	
	1,637,876	12.9	1,579,331	12.9

Purpose specific income

SolidarMed projects	5,788,826		6,294,995	
	5,788,826	45.5	6,294,995	51.6

Public sector contributions/organisations

SDC programme contribution	3,310,500		2,730,000	
SDC mandates/project contributions	1,293,602		840,617	
LED Zambia	593,069		764,150	
World Diabetes Foundation	87,925		0	
	5,285,096	41.6	4,334,767	35.5

Other income	2,030	0.0	1,301	0.0
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Total income	12,713,828	100	12,210,394	100
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Income statement

	2021		2020	
	CHF	%	CHF	%
Expenses				
South programme				
Personnel expenses – project management Switzerland	-788,538		-938,313	
Project visits	-11,231		-9,328	
Share of office costs (including IT), depreciation	-94,749		-57,839	
SolidarMed projects	-7,530,964		-7,033,882	
SDC mandates/project contributions	-886,269		-723,304	
LED projects Zambia	-967,197		-796,979	
World Diabetes Foundation projects	-11,044		0	
	-10,289,991	81.6	-9,559,645	80.4
North programme				
Personnel expenses	-182,400		-238,525	
Public relations	-5,495		-67,541	
Share of office costs (including IT), depreciation	-14,223		-29,893	
	-202,117	1.6	-335,959	2.8
Fundraising				
Personnel expenses	-667,989		-564,678	
Fundraising	-692,962		-679,081	
General material costs (including office costs/IT/depreciation)	-402,910		-321,745	
	-1,763,860	13.9	-1,565,504	13.2
Administrative expenses				
Personnel expenses	-253,757		-317,285	
Association work	-21,969		-9,332	
Office and administration expenses	-51,571		-47,269	
Travel and representation expenses	-5,794		-4,033	
Memberships	-6,680		-9,837	
Share of office costs (including IT), depreciation	-21,485		-35,615	
	-361,256	2.9	-423,371	3.6
Total operating expenses	-12,617,224	100	-11,884,479	100

	2021	2020
	CHF	CHF
Operating result	96,604	325,915
Financial income		
Income from interest and securities	370,346	185,325
Expenses for interest and securities	-53,641	-101,305
	316,704	84,020
Extraordinary income		
Extraordinary income	0	32,310
Result before changes to project funds	413,308	442,244
Changes to restricted project funds	-342,133	-383,768
Annual result (before changes to organisational capital)	71,176	58,476
Withdrawal from organisational capital	412,298	335,818
Allocation to paid-up and acquired capital	0	0
Allocation to Fund 1 - unrestricted funds	-183,474	-339,648
Allocation to currency fluctuation fund	-300,000	-54,645
Total allocations/appropriations	-71,176	-58,476
Result after allocation to organisational capital	0	0



Lisbeth Pembele
Project partnerships
(until September 2021)



Michèle Abouchar
Project partnerships
(from September 2021)



Simone Hueber
Project partnerships



Lucy Kormann
Individual giving

Thank you for your support!

“If you want to go quickly, go alone; but if you want to go far, go together.” This African proverb illustrates how important the support of over 10,000 individuals and numerous institutions is to our work. It is thanks to this support that we can improve the lives of people in rural Africa. Thank you! Unfortunately we don’t have enough space to mention all our donors and supporters by name, which is why we only list institutions with an annual donation of CHF 1,000 or more. But our thanks nonetheless go out to everyone we could not mention or who did not wish to be named. Because every donation makes a difference.

Public sector Swiss Agency for Development and Cooperation SDC; Liechtenstein Development Service LED; Canton of Aargau; Appenzell Ausserrhoden lottery fund; Canton of Basel-Stadt; Canton of Glarus; Canton of Schaffhausen; Canton of Thurgau; Canton of Uri; Canton of Zurich; City of Frauenfeld; City of Fribourg; City of Lucerne; City of Opfikon; City of Schlieren; City of Zug; City of Zurich; Municipality of Arlesheim; Municipality of Baar; Municipality of Bettingen; Municipality of Binningen; Municipality of Küsnacht ZH; Municipality of Maur; Municipality of Schaan; Municipality of Urtenen-Schönbühl; Municipality of Vaduz.

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Protestant parishes Kelleramt; Kilchberg ZH; Kirche Kanton Zug; Lörrach; Schwarzenegg.

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Partnerships for Health

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 Swiss NGO Network
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 Swiss Red Cross
 Tech4Impact NGO Impact Council

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Annual membership fee for individuals: CHF 50; Families and institutions: CHF 80.

Your membership fee includes the annual print subscription (4 issues) to the “SolidarMed Focus” magazine and the annual report.

Donations and annual membership fee

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SolidarMed

SolidarMed is a politically independent and non-denominational association which is supported by members and patrons. The annual general meeting is the highest association body and meets once a year. It elects the members of the Board and determines the articles of association. The Board of Directors, as the highest management body, is responsible for the strategy and approves the annual budget. The administrative office is in charge, along with the country offices, for the planning and implementation of the programmes.

Legal notice

Name: SolidarMed – Swiss Organisation for Health in Africa

Legal form: Association

Articles of Association: approved by SolidarMed’s ordinary annual general assembly dated 16 May 2009 in Lucerne.

In keeping with the core philosophy and values stated in the mission statement, SolidarMed promotes basic primary healthcare in Southern countries and sensitises the public to topics concerned with international health and solidarity.

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and Cooperation SDC**





◀ The photo on the cover shows 12-year-old Milka from Kenya. She is HIV-positive and has been participating in the Nafasi project, run by partner organisation DAMKA, for four years (see p. 28). *mr*



Nurse Mkonja Mohammed in Mahenge Hospital, Tanzania

**It's not about
working miracles.
It's about raising
medical standards.**

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Partnerships for Health

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