



# Dear reader



Our patients live in exceptionally fragile circumstances. Our treatment model must also include aspects that go beyond simply treating HIV.

Matthias Widmaier, Sabine Lüthy and Ruedi Lüthy

14 years after we were first established, 2016 once again demonstrated how urgently needed our foundation's work is in Zimbabwe. Over the past year, many of Newlands Clinic's patients suffered as a result of a severe drought, and we launched an emergency relief programme in spring 2016 to provide support to food-insecure families. We were overwhelmed by the solidarity shown by our donors, and thanks to their generous and speedy help we were able to give regular supplies of maize meal, sugar beans and vegetable oil to 725 families in need last year. This help is vital to their survival, and we will probably be extending this relief for a further year since the catastrophic drought has now been followed by floods, resulting in crop failures.

This highlights just how precarious the situation of our patients is. For the HIV treatment to be successful, our model must be tailored to these difficult circumstances. This means that we cannot simply apply the findings from Switzerland or other rich western countries directly to Zimbabwe. The first differences become apparent in that the patients cannot even afford the journey to the clinic. Young patients growing up without parents because of Aids also need special support, and so, too, do women who are unable to decide about their own bodies. Our treatment model therefore contains many facets that go beyond medical HIV therapy alone. Examples include support and counselling groups devoted to adherence, nutritional support, a vocational skills training programme for young people, and support groups for young mothers.

The complex HIV therapy remains the core element of this comprehensive treatment model, which has been developed over the years on the basis of the experience gathered. To ensure that we can continue to deliver the same high quality of care after the upcoming retirement of Ruedi Lüthy as Medical Director, we entered into a cooperation arrangement with Inselspital Bern at the end of 2016. Stefan Zimmerli, Senior Staff Physician at the University Clinic for Infectious Diseases at Inselspital, has been on site at Newlands Clinic regularly since the end of last year, providing further training to the medical team and ensuring that the high quality of the treatment is maintained. Over the course

of 2017, he will take over as Medical Coordinator of the clinic, taking the work of the foundation and the clinic forward together with Matthias Widmaier and Sabine Lüthy.

To underscore our long-term commitment, we have also changed our name, with Swiss Aids Care International becoming the Ruedi Lüthy Foundation on 1 July 2016. Our new name represents a promise to carry on the work of our founder, Ruedi Lüthy, and to uphold his vision and ideals. We will continue to focus clearly on providing compassionate care for people with HIV/Aids and offering them long-term prospects.

We are delighted that you have remained resolute in your loyalty to our foundation during this period of change, and hope that we can continue to count on your support in the future. With your help, we are now able to give nearly 6,000 children, adolescents, women and men a life worth living and hope for a better future.

This is more than we would have ever dared to dream, and for that we thank you with all our hearts.

Prof. Ruedi Lüthy  
Medical Director  
Newlands Clinic

Sabine Lüthy  
Chief Executive  
Ruedi Lüthy Foundation

Matthias Widmaier  
Country Director  
Newlands Clinic

# Specialised help for people with HIV/Aids

At the end of 2016, Newlands Clinic had 5,776 patients registered in care. The consequences of the drought posed a major challenge, but thanks to the swift support from our donors we were able to set up an emergency relief programme for food-insecure families.

In 2016, Newlands Clinic in Harare had more HIV patients in care than the year before, with 5,776 children, adolescents and adults registered with the clinic at the end of December 2016. As regards the enrolment of new patients, we are prioritising complex cases, people who would not receive adequate treatment in other clinics in Zimbabwe. This includes, in particular, patients who have developed resistance to certain drugs as well as those where the disease is already at an advanced stage. These new patients are increasingly reliant on more complex and more expensive combinations of medications.

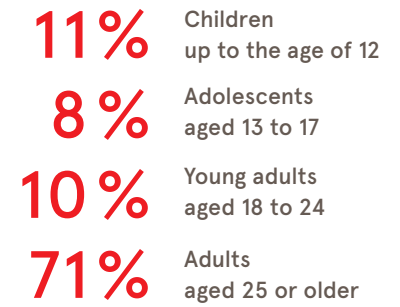
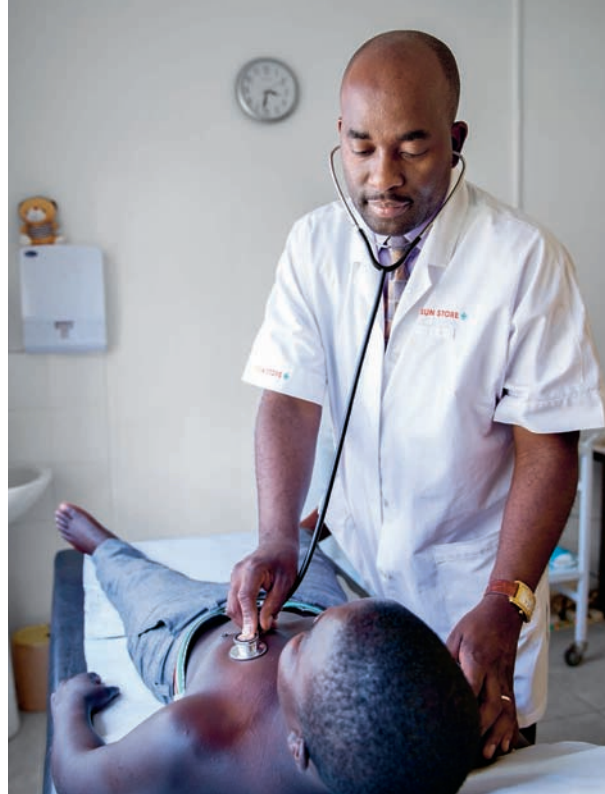
One of the principal means of measuring the success of HIV treatment is the viral load. The 2016 results in this regard are once again very good: nearly 90% of all patients in care at Newlands Clinic for at least six months and receiving antiretroviral medicines achieved viral suppression.

Another key indicator of the high treatment quality provided is the fact that the lost-to-follow-up rate remains low at just under 3%. Sadly 113 patients (1.9%) died in 2016 owing to treatment failure or them already being very ill when presenting. Both of the percentage figures show an increase year-on-year, this being attributable to the new enrolment criteria.

### Psychosocial support for patients

Our patients' lives are shaped by poverty, loss and stigmatisation. Psychosocial support is aimed at improving their psychological state and adherence, and at allowing them to live as independent a life as possible. The following support services were offered to particularly vulnerable patients in 2016:

Individual psychotherapy and counselling: 602 patients received individual psychotherapy



Nearly 30% of our patients are aged 24 or younger. These children, adolescents and young adults need particularly close support given that many of them are having to grow up without parents. By paying their school fees or offering them a place on a vocational skills training programme, we can offer them the hope of a better future.

support, with most referrals being on account of adherence difficulties and depression.

**Group therapy:** 71 adolescents and 109 adults attended adherence counselling groups. 26 adolescents and 37 adults achieved virus suppression as a result, without having to change medication. Additional support offerings were aimed at 29 children and adolescents unwilling to accept their HIV status or at acute risk of therapy discontinuation or failure.

**Moderated support groups:** An average of 57 adolescents and 30 young mothers attend monthly group meetings where they can lend mutual support. Six young mothers also enrolled in a tailoring course with the aim of enabling them to generate their own income.

**Home visits:** Visiting patients at home can make it possible to identify problems more

quickly, and so help prevent treatment being broken off. In 2016, our social worker carried out 82 such visits. (see page 8)

**Vocational skills training programme:** 29 newly enrolled and 138 existing students attended VST courses or received support in setting up and developing their business. This project was implemented by our partner organisation *Africaid Zvandiri*.

Another key issue for us is to ensure that our youngest patients can complete their compulsory school education, and in 2016 we covered the school fees of 109 needy children and adolescents. >

## HIV treatment

### Nutritional support expanded due to drought

The major crop failures resulting from the prolonged drought in 2015/2016 posed a major challenge in the year under review, and we therefore launched an emergency relief programme in the spring. Thanks to the overwhelming support from our donors, from April 2016 we were able to provide maize meal, sugar beans and vegetable oil to 725 food-insecure families, making a total of some 3,000 people. Meanwhile, we continued our existing nutritional support measures. An average of 206 children and undernourished patients received e'Pap, a type of vitamin-rich porridge, every month. The milk powder financed by the Swiss Agency for Development and Cooperation (SDC) was provided to 1,147 patients in the year under review, 91% of them aged under 18. The support of the World Food Programme was also continued, enabling us to distribute 7,349kg of porridge to severely undernourished patients.

In addition to providing food support, we also run a maize farming project to help families who have a small piece of land. The aim is for them to be able to feed themselves over the medium term. However, the project, which is being implemented by the local organisation *Foundations for Farming*, delivered lower yields than had been hoped owing to the drought. Around 75 of the 150 families will now receive training and support for a further year. 75 additional families have been newly enrolled in the programme, which reaches some 600 people in total.

### Successful prevention of cervical cancer

2,550 women were screened for cervical cancer at the Women's Health Centre in 2016. Around 19% of the 387 women screened for

the first time showed precancerous cervical lesions or were already affected by cancer. Meanwhile, only just under 6% of the women who were re-screened had cervical abnormalities, which highlights how effective this programme is. 202 patients were treated in the centre itself, while 13 were referred to other clinics. As a preventative measure against Human Papillomavirus (HPV) infection, which can cause cervical cancer and other conditions, 310 girls and 212 boys aged between 10 and 17 were vaccinated in 2016.

The range of services offered by the Women's Health Centre also includes the diagnosis and treatment of sexually transmitted infections such as syphilis, gonorrhoea and herpes, since these facilitate the transmission of HIV. The patients' partners are also treated. A total of 445 patients received treatment. As regards family planning, 826 advisory sessions and medical consultations were carried out in 2016 (in particular prescribing contraceptives).

### Supplementary services

Newlands Clinic offers basic dental treatment for its patients. 2,672 consultations were conducted in 2016, with 1,568 being for children and adolescents aged up to 15.

An earmarked emergency fund and a dedicated cancer fund provide support to patients requiring urgent treatment in a different clinic. The emergency fund helped 41 such patients in 2016, with 65 receiving support from the cancer fund. ■



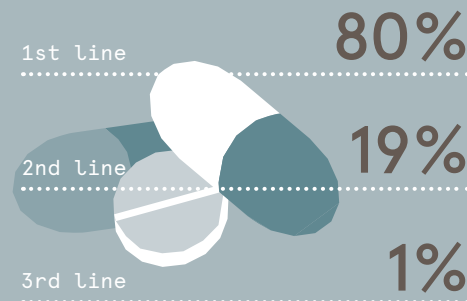
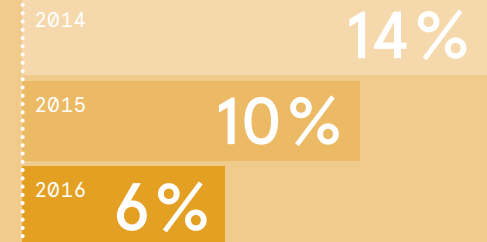
### Drought emergency relief programme

Thanks to the quick support from our donors, from April onwards we provided basic foodstuffs to families suffering from hunger as a result of the drought. By the end of the year, we had distributed a total of:

**181,850 kg** maize meal  
**36,390 kg** sugar beans  
**5,575 l** vegetable oil

### Women's health

Nearly two thirds of our patients are women and girls, and we can provide them with specific support through the Women's Health Centre. The efforts to prevent cervical cancer are having an effect: since regular screening and treatment were introduced, the proportion of positive findings on re-screening has fallen from 14% in 2014 to 6% in 2016.



### Medication

Not all HIV medicines are available in Zimbabwe, and it is therefore all the more important that the patients adhere strictly to the treatment in order to prevent resistance developing. In 2016, 80% of our patients were on the standard 1st line regimen, with 19% on 2nd line and 1% receiving 3rd line treatment.

# Helping patients take back control

Some patients live in the most difficult of circumstances, making it scarcely possible for them to adhere strictly to the HIV treatment. Our social worker visits them in their homes to find out how we can support them. And she is helped in this by having her own HIV story to tell.

“I’m fortunate in being able to break the dangerous silence about HIV as part of my work.”

Catching Melania Mugamu in her small office at Newlands Clinic is no easy task. Aged in her early sixties, and always ready with a warm, welcoming smile, she spends most of her time on the go. Our social worker runs group therapy sessions for patients at risk of treatment failure, counsels people currently in a particularly difficult situation, and makes home visits to patients who need special support.

For these calls, Melania Mugamu drives to the communities around Harare where most of Newlands Clinic’s patients live. She visits children who have lost their parents to Aids and live with their elderly grandparents, young mothers who are scarcely able to provide for their babies, and young people who see no prospects for the future. Some of them live in rudimentary plastic shacks; others at least have a solid roof over their heads and a small vegetable garden so they can keep the worst of their hunger at bay.

## Fighting resistance

The primary objective of these home visits is to prevent people from breaking off treatment. If a patient misses an appointment at the clinic, or if the viral load in their blood is too high, this calls for particularly close attention. In such cases, their nurse can involve the social worker and ask her to get an impression of the patient’s situation on site and find out how they could be given better support. This is especially important given that HIV rapidly develops resistance to drugs if they are not taken regularly, and more complex combinations of medications are very expensive.

“Sometimes it turns out that the reason for appointments being missed is the long journey to the clinic. In other cases, the patient’s psychological condition is so bad that they can barely motivate themselves to continue the treatment,” says Melania Mugamu.

The home visits are therefore also partly aimed at finding out whether there is any domestic violence and whether a family has enough to eat. Depending on the situation she finds, the social worker can then put in an application for nutritional support or help with school fees for the children, for example. She can also encourage the patient to attend counselling sessions or a self-help group at the clinic. This psychosocial support is aimed at the most vulnerable patient groups, and provided by a team of eight headed by a psychologist. >

Newlands Clinic’s social worker Melania Mugamu herself is HIV positive and lost her husband to Aids.



“Sometimes it turns out that the reason for appointments being missed is the long journey to the clinic. In other cases, the patient’s psychological condition is so bad that they can barely motivate themselves to continue the treatment.”

Melania Mugamu makes home visits to patients who need special support. Here she is visiting Tafadzwa, a young patient who was living on the street and had therefore interrupted treatment.



An understanding ear for the patients’ troubles When making home visits, Melania Mugamu also has to address very private issues such as poverty, abuse and violence. She makes no secret of the fact that she can have great difficulty with certain situations – for example when a small orphaned girl is passed from one relative to the next and therefore has to stop treatment at Newlands Clinic.

Two things above all help her to deal with the sad stories she is confronted with: debriefing with the psychologist, and her faith. “I know that I don’t have a solution for many of the problems, but I can at least listen to the patients,” she says. Another source of energy and motivation is her own story: Melania Mugamu herself is HIV positive and lost her husband to Aids in 2000. Back then there were no drugs to treat the virus in Zimbabwe. She was more fortunate, however, and although gravely ill she was able to start treatment

three years later. “I had already begun to prepare myself for death,” she says. But just a few weeks into the therapy she already felt much better, and half a year or so later was even well enough to take part in her daughter’s wedding.

**Breaking the silence over HIV**  
Having been given the gift of a second life, she wants to use it to bring hope to people with HIV, and to fight against stigmatisation. She has first-hand experience of this: in the first eight years she didn’t even discuss her HIV infection with her family for fear of the reaction. But if people don’t disclose, this starts a dangerous vicious circle: young people no longer take their medication regularly because they conceal it from their friends; babies are born with HIV even though this could be prevented if the expectant mothers received treatment in time; and partners are infected with the virus.

“I’m fortunate in being able to break the dangerous silence about HIV as part of my work,” says Melania Mugamu. As regards the situation in Zimbabwe, she wishes that people would have a better understanding of the disease and take it more seriously. “Many think that the epidemic is over thanks to the scientific progress that has been made, and act irresponsibly both with regard to their partners and themselves,” she adds.

It is a long battle, one that she fights together with the team at Newlands Clinic, but Melania Mugamu does not doubt for a single second that it is worthwhile. And the greatest reward she can receive for her work is when a young patient starts to take their life back into their own hands, or when a child is strong enough to go back to school. ■

➤ The Mental & Social Health Department where Melania Mugamu works offers support to patients at threat of treatment failure. With one-on-one psychological counselling, group therapy, moderated support groups and a vocational training programme, they seek to empower patients and to give them fresh prospects that will make a decisive contribution to the success of their HIV treatment.

# Knowledge about HIV treatment saves lives

In 2016, Newlands Clinic provided training in the treatment of HIV/Aids and associated diseases to 452 healthcare workers from across Zimbabwe, while continuing to cooperate with other clinics and organisations.

The most important course offered by the Newlands Clinic Training Centre provides knowledge about the comprehensive treatment of HIV/Aids to healthcare workers such as doctors and nurses. 14 of these two-week courses in HIV Management were run in 2016, with a total of 277 participants from other clinics across Zimbabwe. In addition to training in the theory behind the complex treatment, they were also given an insight into the Newlands Clinic model, and were able to conduct several consultations together with our staff.

## Further courses and training

**VIAC Training:** Two courses were held in 2016 and were attended by a total of twelve healthcare workers from private and public clinics, who learned how to diagnose cervical cancer and treat precancerous lesions.

**Sexually transmitted infections:** In a pilot course, twelve internal and external healthcare workers received training in the diagnosis and treatment of STIs. The feedback from participants was very positive, and the course will continue to be offered on demand.

**Continuous medical education:** A total of 151 participants attended the three CME days held in 2016, two devoted to treatment failure and drug resistance and one on STI management. 35 trainee primary teachers also received schooling in HIV prevention and treatment.

## Cooperation and mentorships

In addition to courses, Newlands Clinic provides support to other clinics and organisations in Zimbabwe in the form of mentorships and a help desk service. In 2016, the Newlands Clinic mentorship team comprising medical staff and IT specialists supported the following institutions:

**Population Services International:** Three HIV clinics run by the organisation took on the Newlands Clinic model in its entirety in 2013, and have since been receiving support in specific areas. A new nurse completed the HIV Management course in 2016. The use of Newlands Clinic's own software ePOC, which is used for recording patient data and offers support in the decision-making process, was

also reviewed and optimised. A fourth clinic will be opened in 2017.

**Central Hospitals:** As part of a cooperation arrangement with Zimbabwe's Ministry of Health and Child Care, the ePOC software is to be rolled out in six Central Hospitals by the end of May 2017. It is already being introduced in two hospitals, but cannot be rolled out at the other four yet owing to infrastructure and organisational factors.

**John Snow International (JSI):** Three pharmacies at public hospitals supported by JSI use the corresponding ePOC modules. The cooperation has thus been concluded.

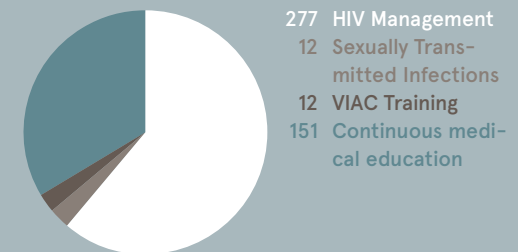
**Doctors Without Borders MSF Belgium and Holland:** Newlands Clinic is supporting both organisations in establishing gynaecology departments at clinics in Zimbabwe. Mentorship was provided to ten healthcare workers in 2016, and this was followed by three further visits to provide development assistance on site.

The medical help desk service, which includes a toll-free line and a WhatsApp chat platform, offers post-training support to those who attend courses at the Training Centre. Key areas covered include HIV management, medicines, and sexual and reproductive health. ■



Our Training Centre equips healthcare workers with the knowledge they need to effectively treat HIV/Aids and associated diseases. A total of 452 doctors and nurses took part in a training or continuous medical education course in 2016.

Number of participants per course



# Researching for more effective HIV treatment

Newlands Clinic's research activities contribute to the ongoing improvement in HIV treatment in countries that have been greatly affected such as Zimbabwe. The focus at present is on therapy adherence and sexually transmitted infections.

The Newlands Clinic Research Unit comprises five doctors, the head pharmacist and head lab scientist, a nurse, the clinic psychologist, and a research assistant. All of them play their part in ensuring that the Newlands Clinic treatment concept is continually improved and can serve as a model for other clinics in Zimbabwe.

Newlands Clinic has also been providing data for the International Epidemiologic Databases to Evaluate Aids (IeDEA) since 2007. The clinic's own research projects currently include:

- Neonatal hair measurements to evaluate in utero tenofovir exposure, assessing the transfer of this HIV drug to the child

- Treatment outcomes after 10 years receiving care at Newlands Clinic
- Determining antiretroviral levels in hair and the use of this in assessing treatment success and adherence in adolescents
- Prevalence and risk factors of non-communicable diseases such as diabetes or high blood pressure in HIV patients
- Prevalence of depression and the impact on treatment success among young HIV patients

These research projects are also made possible thanks to the clinic's own software ePOC, which has been used to systematically record all relevant patient data since 2004. Patient anonymity is ensured in full in all studies. ■



At the end of 2016, Stefan Zimmerli was appointed as the Medical Coordinator designate of Newlands Clinic. In addition to his activities as Senior Staff Physician at the University Clinic for Infectious Diseases at Inselspital Bern, he will be spending several months a year at Newlands Clinic in Harare, providing specialist support and further training to the medical team.

## Bodies

**Board of Trustees** Ulrich B. Mayer, Attorney, Zurich (President) | Martin Fuhrer, former Head of International Cooperation at the Swiss Red Cross, Bern | Prof. em. Ruedi Lüthy, Harare/Muntelier | Prof. em. Hans Lutz, Emeritus, Rüdlingen | Gregor Neidhart, certified expert in accounting and controlling, Winterthur | Patrick Rohr, communications consultant, photographer and journalist, Zurich/Amsterdam (until end-2016)

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**Directorate Newlands Clinic** Matthias Widmaier, Country Director | Prof. em. Ruedi Lüthy, Medical Director

**Scientific Advisory Council** Prof. Hansjakob Furrer, Physician in Chief and Director Department of Infectious Diseases, Bern University Hospital | Prof. Huldrych Günthard, Senior Attending Physician / Deputy Director, Department of Infectious Diseases and Hospital Epidemiology, University Hospital Zurich | Prof. Bernard Hirschel, Chairman of the Cantonal Ethics Committee Geneva (CCER) | Prof. Christoph Rudin, Head of Paediatrics and Paediatric Nephrology, University Children's Hospital, Basel | Prof. Jörg Schüpbach, former Director of the Swiss National Centre for Retroviruses, University of Zurich

**Patronage Committee** Kurt Aeschbacher, television presenter and journalist, Zurich | Ruth Dreifuss, former Swiss Federal Councillor, Geneva | Prof. em. Felix Gutzwiller, former Director of the Institute of Social and Preventive Medicine, University of Zurich | Ambassador Marcel Stutz, Embassy of Switzerland, Havana/Cuba | Prof. Martin Täuber, former Rector of the University of Bern | Prof. Alexandra Trkola, Head of the Institute of Medical Virology, University of Zurich



## Our heartfelt thanks!

We have been working together closely with the following partner organisations for many years:

**SDC:** The Swiss Agency for Development and Co-operation (SDC) has been supporting us as our main partner since 2004. | **Zimbabwe Ministry of Health and Child Care:** Newlands Clinic works together closely with Zimbabwe's Ministry of Health and Child Welfare. | **NatPharm:** The National Pharmaceutical Company of Zimbabwe provides the HIV medication, financed primarily by the Global Fund and the Clinton Health Access Initiative (CHAI). | **Bernhart Matter Foundation:** The Foundation made the opening of the Training Centre possible and finances its operations. | **World Food Programme:** The United Nation's Programme supports malnourished patients. | **Galenica Group:** Galenica Group and its affiliates such as Amavita, MediService and Galexis have been supporting us for many years with generous donations. | **Apothek zum Rebstock AG:** By ordering drugs via HIV-DIRECT, Swiss HIV patients can help patients in Africa. | **University of Bern:** The University of Bern is Newlands Clinic's research partner in the study International epidemiologic Databases to Evaluate AIDS (IeDEA). | **University Hospital Bern:** As part of a cooperation arrangement with Inselspital Bern, Stefan Zimmerli, Senior Staff Physician at the University Clinic for Infectious Diseases, is providing us with specialist support. In the course of 2017, he will take over as Medical Coordinator when Prof. Ruedi Lüthy steps down.

We would like to thank all of our donors for their generous support in the fight against HIV/Aids!



Thanks to the swift and generous support from our donors, we were able to launch a drought emergency relief programme in April 2016, and by the end of the year we had provided 725 families with maize meal, sugar beans and vegetable oil.



On 25 August, Newlands Clinic received a consignment of 14.06 tonnes of milk powder financed by the Swiss Agency for Development and Cooperation (SDC). This fosters the healthy development of HIV-positive children, and helps convalescing patients to recover more quickly.



On 15 October, The Medical Doctors' Ball held a collection for the Ruedi Lüthy Foundation for the 14th year running, and presented a cheque for CHF 10,000 to Martin Fuhrer, who is a member of our Board of Trustees. Our heartfelt thanks! (photo: Fabian Biasio)



One of Newlands Clinic's patients took part in the conference entitled 'Working in Fragile Contexts and Building up Resilient Health Systems' staged by the association Medicus Mundi Switzerland on 2 November. Maximina Jokonya spoke about her own experiences, and her work with HIV-positive children and young people in Zimbabwe. (photo: Medicus Mundi Switzerland)



In 2016, the staff at specialist pharmacy Medi-Service collected voluntary donations for the Ruedi Lüthy Foundation in their petty cash kitty. At the end of the year, the company rounded up the amount and its CEO Dr. Jürg Gasser presented us with a cheque for CHF 12,000. Many thanks to the entire team for their solidarity! (photo: MediService)



Tara LaTrash collected donations for our foundation at the election of the 2016 Pink Ice Princess in Zurich on 2 December. Our warmest thanks for supporting the patients of Newlands Clinic!

# More funds for our projects

**84% of spending flowed directly into our projects in 2016, while general expenditures were reduced by some 10%. Owing to lower donation income, we closed the financial year with a slight deficit of CHF 94,000.**

Earnings totalled CHF 6.2 million in 2016, nearly 20% lower than in 2015 when the foundation received an exceptionally high contribution of CHF 2.5 million. Ordinary donations amounted to CHF 1.9 million (-14.5%). At around CHF 699,000, earmarked donations were on a par with 2015, and comprised in particular donations for the drought emergency relief programme and contributions for the treatment of children. The increase in donations in kind to CHF 1.5 million (+72.2%) is in particular attributable to the fact that donations expected in 2015 did not arrive until the beginning of 2016. These donations in kind primarily comprise medicines.

The contribution from the Swiss Agency for Development and Cooperation (SDC) was higher year-on-year in 2016 at around CHF 1.8 million. This comprises the final contribution for the 2013 – 2015 period, and the initial amounts for the new 2016 – 2019 period. All

in all, the SDC will provide a total of CHF 4.6 million to support the foundation over this period. The income from the Training Centre and the laboratory fell by 55% year-on-year to around CHF 231,000, this marked decline being attributable to the difficult economic situation in Zimbabwe.

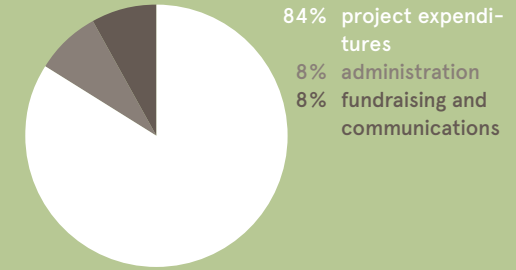
### Higher project costs – lower general expenditures

At CHF 6.3 million, total expenditures were somewhat higher than in 2015 (+7%). 84% of expenditures flowed into the projects (2015: 81%). These comprise around CHF 4.5 million (+7.4%) for the clinic, CHF 421,000 for the Training Centre (+53.8%) and CHF 322,000 for the Women's Health Centre (+34.1%). The increase in clinic expenditure is above all attributable to the emergency relief programme for food-insecure families. The appropriate allocation of staff costs led to increased

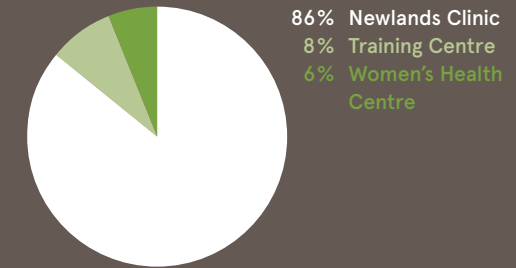


The foundation was entered in the Commercial Register of the Canton of Zurich on 27 March 2003. In April 2015, its registered office was moved from Zurich to Bern. On 1 July 2016, Swiss Aids Care International was renamed the Ruedi Lüthy Foundation. The purpose of the foundation is to treat and support HIV and Aids patients in southern Africa. The foundation does not pursue any economic purposes, and does not seek to make a profit.

Breakdown of total expenditures 2016



Breakdown of project expenditures 2016



expenditures in the case of the Training Centre and the Women's Health Centre.

General expenditures – comprising administration, fundraising and communications – were reduced to around CHF 1.0 million (-10.1%), and thus amounted to just 16.3% of total expenditures in 2016 (2015: 19%). This is above all attributable to the fact that special projects in the areas of infrastructure and brand management were concluded in 2016, while savings were also with regard to mass mailing. The headcount was increased to 3.8 FTE positions, one of the reasons being the professionalization of fundraising activities. Administration costs amounted to CHF 524,000 (+0.4%), with expenditures on fundraising and communications totalling around CHF 500,000 (-19%).

### Balance sheet and annual result

As at 31 December 2016, the circulating assets totalled just under CHF 10.7 million (+5%).

The 'Newlands Clinic' designated capital remained steady at CHF 7.5 million. This would ensure that even if there were to be a dramatic decline in income, our patients would for the time being continue to receive the life-long HIV treatment they need, allowing time for them to be handed over to other clinics. The SDC has agreed to this.

Due to a change in the accounting policy in Zimbabwe, stocks of medicines have been recognized in the balance sheet for the first time. A restatement has been made and the figures for 2015 have been adjusted. The securities portfolio had a total value of CHF 3.3 million. The statement of operations showed a deficit of around CHF 132,000. Taking into account the financial income, the annual financial statements showed a loss of CHF 94,000. >

### Financial statements for Zimbabwe

Swiss Aids Care International Zimbabwe ensures the smooth running of Newlands Clinic on site, while the Ruedi Lüthy Foundation provides the necessary funding. The accounts of Swiss Aids Care International Zimbabwe, the Training Centre and the Women's Health Centre were audited by Grant Thornton in Harare, and have been consolidated in the present financial statements. The local organisation is to be renamed the Ruedi Lüthy Foundation Zimbabwe in 2017.

### Organisation and remuneration

The foundation's bodies are listed in detail on page 15. The term of office of the members of the Board of Trustees is four years; repeated re-election is permitted. The members work in an honorary capacity. In addition to the strategic management of the foundation, they are responsible for the investment of the assets. The salaries and fees of the Chief Executive and her deputy totalled around CHF 190,000 including employer's contributions. Around CHF 81,000 of this was allocated to project expenditures and CHF 109,000 to general expenditures. ■

Lienhard Audit AG in Zurich serves as the foundation's auditors. The supervisory authority is the Federal Supervisory Board for Foundations (FSBF).



“Stefan Zimmerli and I have known each other since the 1990s when we worked together at University Hospital Zurich. We share the firm belief that HIV/Aids patients need comprehensive care and support if their treatment is to be successful.”

Stefan Zimmerli, Senior Staff Physician at the University Clinic for Infectious Diseases at Inselspital Bern, will take over from Prof. Ruedi Lüthy as Medical Coordinator of Newlands Clinic by the end of 2017.

## LIENHARD Audit AG

### Report of the Statutory Auditor on the Limited Statutory

to the Board of Trustees of

Ruedi Lüthy Foundation, Bern

As statutory auditors, we have examined the financial statements of Ruedi Lüthy Foundation, which comprise the balance sheet, income statement, cash flow statement, statement of changes in equity and notes for the year ended 31 December 2016. As permitted by Swiss GAAP FER 21 the information in the performance report is not required to be subject to the statutory auditors' examination.

These financial statements in accordance with Swiss GAAP FER 21 are the responsibility of the board of trustees. Our responsibility is to perform a limited statutory examination on these financial statements. We confirm that we meet the licensing and independence requirements as stipulated by Swiss law.

We conducted our examination in accordance with the Swiss Standard on the Limited Statutory Examination. This standard requires that we plan and perform a limited statutory examination to identify material misstatements in the financial statements. A limited statutory examination consists primarily of inquiries of personnel and analytical procedures as well as detailed tests of foundation documents as considered appropriate in the circumstances. However, the testing of operational processes and the internal control system, as well as inquiries and further testing procedures to detect fraud or other legal violations, are not within the scope of this examination.

Based on our limited statutory examination, nothing has come to our attention that causes us to believe that the financial statements do not give a true and fair view of the financial position, the results of operations and the cash flows in accordance with Swiss GAAP FER 21. Furthermore, nothing has come to our attention that causes us to believe that the financial statements do not comply with Swiss law, the foundation's deed and regulations.

Zurich, 8 May 2017

Yours sincerely

LIENHARD Audit AG

Claudio Piubel  
Licensed Audit Expert  
Auditor in Charge

Christine Scramoncin  
Licensed Audit Expert

Enclosure:

- Financial statements 2016 (balance sheet, income statement, cash flow statement, statement of changes in equity and notes)

Bleicherweg 45, 8027 Zürich, Tel. 044 201 76 00, [www.lienhard.ch](http://www.lienhard.ch)

Mitglied von EXPERTuisse

## Statement of Operations

	2016 CHF	2015 CHF
<b>Earnings</b>		
<b>Donations</b>	<b>4,159,300</b>	<b>6,363,071</b>
- Ordinary donations	1,944,943	4,782,204
- Earmarked donations	698,903	700,758
- Donations in kind	1,515,454	880,109
<b>SDC contributions</b>	<b>1,777,328</b>	<b>800,000</b>
<b>Income from Training Centre</b>	<b>115,332</b>	<b>216,439</b>
<b>Other earnings</b>	<b>115,616</b>	<b>296,331</b>
<b>Total Earnings</b>	<b>6,167,576</b>	<b>7,675,841</b>

### Expenditures

<b>Project expenditures Harare</b>		
<b>Newlands Clinic</b>	<b>4,532,202</b>	<b>4,227,456</b>
- Staff expenditures	1,684,216	1,667,532
- Medication and medical costs	2,372,991	1,653,706
- Infrastructure and vehicles	373,662	655,731
- Various project costs	101,333	250,487
<b>Training Centre</b>	<b>421,313</b>	<b>273,861</b>
<b>Women's Health Centre</b>	<b>322,116</b>	<b>240,131</b>
<b>Total project expenditures Harare</b>	<b>5,275,631</b>	<b>4,741,448</b>
<b>General expenditures</b>		
Administrative costs	524,096	522,099
Fundraising and communications	499,892	617,033
<b>Total general expenditures</b>	<b>1,023,988</b>	<b>1,139,132</b>
<b>Total expenditures</b>	<b>6,299,619</b>	<b>5,880,580</b>
<b>Operating result</b>	<b>-132,043</b>	<b>1,795,261</b>
<b>Financial result</b>	<b>38,437</b>	<b>39,019</b>
<b>Annual result before capital allocation</b>	<b>-93,606</b>	<b>1,834,280</b>
<b>Allocation to designated capital</b>	<b>-</b>	<b>-1,700,000</b>
<b>Annual result after capital allocation</b>	<b>-93,606</b>	<b>134,280</b>

## Balance sheet

	2016 CHF	2015 CHF
<b>Assets</b>		
Cash, post office account, bank deposit	6,464,321	6,748,666
Securities	3,307,770	3,241,647
Receivables from goods and services and prepayments and accrued income	225,030	180,554
Inventories	670,067	564,061
<b>Total Assets</b>	<b>10,667,188</b>	<b>10,734,928</b>

### Liabilities

#### Short-term liabilities

Payables from goods and services and prepayments and accrued income	284,597	279,873
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#### Capital of the organisation

Paid-in capital of the foundation	100,000	100,000
Designated capital	8,563,267	8,563,267
Reserve for fluctuations in asset value	100,000	100,000
Unrestricted capital	1,669,715	1,535,435
Annual result	- 93,606	134,280
Currency translation differences	43,215	22,073
<b>Total Liabilities</b>	<b>10,667,188</b>	<b>10,734,928</b>

As regards accounting we comply in full with the accounting and reporting recommendations for non-profit organisations (Swiss GAAP FER 21), and with the ZEW0 requirements.

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