



Our work continues as before



Ruedi Lüthy, in autumn 2017, you handed over the reins to Stefan Zimmerli as the clinic's Medical Coordinator. What did that feel like for you?

Letting go was painful – and still is – but this was an exceptionally important step for the future of the Foundation. We want to safeguard our philosophy and ensure our work continues as before. Stefan Zimmerli is superbly qualified, and also has the empathy and sensitivity you need to lead our team of Zimbabwean people with their own unique culture. So despite all the heartache, the overriding feeling for me is one of joy that with my daughter Sabine, Matthias Widmaier and Stefan Zimmerli we have been able to bring together the ideal team.

Your work in Zimbabwe stretches back some 15 years now. What are you particularly proud of?

Of all of the efforts we have put in. We started from scratch in 2003, and now we treat more than 6,000 patients. Last year, we were able to demonstrate with the TENART study that our comprehensive care model is successful – also at the international level: 90% of the patients in care with us for ten years have a fully suppressed viral load. This means they are no longer contagious, and that the women cannot pass the HIV virus on to their child during birth or while breastfeeding. I would never have dreamed of achieving this, and it marks a huge success for the entire team.

Where do you see the biggest challenges in the coming years?

Thanks to the successful HIV treatment, the life expectancy of our patients is increasing. A fifth of them are now over 50 years old. This brings with it new challenges. We are particularly concerned at the growing number of cancer cases. More and more, we are also seeing patients presenting with complex clinical pictures because they cannot be helped elsewhere. In light of these challenges, we are very grateful that we can count on the support of such loyal donors.



90% of our long-term patients have a fully suppressed viral load. I would never have dreamed of achieving this, and it marks a huge success for the entire team.

Prof. Ruedi Lüthy, founder of the Foundation and Newlands Clinic

The young people have always been particularly close to your heart.

That's true. Given their difficult circumstances and lack of prospects for the future, many young people see hardly any point in the HIV treatment. They have depressive traits, some even suffer from full-blown depression. As a result, they do not adhere to the treatment well or break it off altogether. Fortunately we have been able to achieve a lot with our group therapy sessions: young people who regularly take part in these adhere much better to the treatment, and sustainably so. An initial study has demonstrated this.



How would you like to see Newlands Clinic develop in the future?

I would want the team to continue to work with the same level of passion and commitment, and for us to be able to keep providing substantial help. For me, this means giving our patients independence and meaning in their lives, in addition to the life-saving treatment. Our patients are people just like you and I, with feelings and hopes. And what I would really like to see, above all, is for us to be able to help them and make a lasting difference.

Comprehensive help for over 6,000 HIV patients

As of the end of 2017, 6,124 people with HIV/Aids were receiving medical care and psychosocial support at Newlands Clinic in Zimbabwe. In addition to providing the life-saving treatment, we want to enable them to have a future with as much independence as possible.

Newlands Clinic in the Zimbabwean capital of Harare was able to enrol new HIV patients again in 2017. At the end of the year, there were a total of 6,124 patients registered in care (+6%) – from a newborn baby to adolescents and adults who have already been with us for many years. Among the new enrolments, there are increasing numbers of people in an advanced stage of the disease, which makes the treatment more complicated and costly.

Despite this challenge, we have maintained the high quality of care: in 2017, nearly 90% of our patients taking antiretroviral medicines for at least six months had achieved full viral suppression. The fatality rate remained low at 1.4%, as was the lost-to-follow-up rate of 3.5%.

Close attention for children and adolescents

Our patients come from the poorest backgrounds. 27% are children and young adults up

to the age of 24, 52% adults between the ages of 25 and 49, and 21% aged 50 and older. In the youngest age group the suppression rate is just 78%, and around a third of these patients are receiving second line antiretroviral therapy because the standard first line treatment was no longer effective. For this reason, we also took particular efforts in 2017 to explain matters carefully to children and adolescents, and to monitor them closely. These measures are having an effect, and evaluations of our group therapy sessions show that this is leading to a marked improvement in adherence. This is crucial for the success of the HIV treatment.

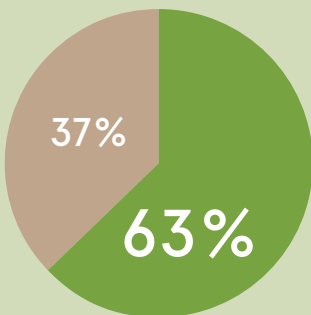
A large part of our efforts in the psychosocial area are therefore aimed at adolescents and young adults:

Group therapy sessions and workshops: Group therapy sessions were offered for 66 adolescents and 138 adults with poor adherence. >



27% of our patients are aged 24 or younger, and they need special support. Focused group therapy sessions have proven to be successful in this regard, with the results of an internal study showing a very positive influence on viral load suppression among adolescents and young adults.

- 27%** Children and young adults up to the age of 24
- 52%** Adults aged between 25 and 49
- 21%** Adults aged 50 or older



In 2017, Newlands Clinic had 6,124 patients in care — 6% more than the year before. Two thirds of them are women and girls. As a rule, it is the women who look after the families and the community.

HIV treatment

There were also workshops attended by 31 newly diagnosed children and adolescents as well as for 40 parents and other caregivers.

Support groups were aimed at adolescent patients with persistently poor adherence, as well as pregnant women and young mothers.

Home visits: Visiting patients at home can often help prevent them from breaking off treatment, and also makes it possible to determine more precisely the help that they need. The clinic's community coordinator made 170 home visits in 2017, more than twice as many as in the year before.

Added to this, over the course of the year 653 patients were referred to the Mental and Social Health Department for individual psychotherapy and counselling, primarily for adherence and depression difficulties.

Education is the key to a better future

Our goal is for all of the children at Newlands Clinic to be able to complete their compulsory school education, despite the poverty they live in. On average in 2017, 131 students had their school fees paid per term. We also offer a vocational skills training program for young adults and adolescents. 27 patients were enrolled for training in a range of different vocations in 2017. These will now receive a year's support in setting up their own business. 19 have successfully completed the training, and some are already generating their first profits. In addition to this, six young mothers were enrolled in a tailoring course with a view to making them financially independent and so enabling them to provide for their children better.

Food support for families in need

Many families were again dependent on food support in 2017. The emergency programme set up in 2016 continued last year, providing support to up to 1,100 families, who received maize meal, sugar beans and vegetable oil for their daily needs. The other support programmes were also continued:

e'PAP: some 127 undernourished patients were given e'PAP, a type of vitamin-rich porridge, every month. 70% of them were children up to the age of 12.

Milk powder: 1,636 patients received fortified milk powder enriched with fat and proteins, which was financed by the Swiss Agency for Development and Cooperation (SDC). This supports the healthy development of children and adolescents, and helps build up the strength of sick patients and pregnant women.

World Food Programme (WFP): Thanks to the United Nations World Food Programme, 25 extremely undernourished and sick patients were given a particularly nutritious type of porridge every month.

Maize farming: To reduce dependence on food support, 150 patients received training in water-efficient maize farming. The average harvest in 2017 was 364kg of maize per family. This was a better result than that achieved with traditional methods, and this despite the difficult climatic conditions.

Fighting against cancer

An increasing challenge in the treatment of HIV patients is the frequent incidences of cancer (*see page 8*). At our Women's Health Centre,



Our patients will be reliant on us for their entire lives. My task is to ensure that our work continues over the long term in keeping with the visions and ideals of my father, Ruedi Lüthy. His philosophy and humanity are the very bedrock of our Foundation and Newlands Clinic in Harare.

Sabine Lüthy, Chief Executive of the Ruedi Lüthy Foundation

particular emphasis is placed on preventing cervical cancer. These efforts again paid off in 2017. While 21% of the 381 patients screened for the first time showed abnormalities, the corresponding figure for the 2,498 women who are regularly rescreened was just 8%. A total of 287 patients showed pre-cancerous lesions, while ten were diagnosed with cervical cancer.

Precancerous lesions can be treated directly in the Women's Health Centre. However, patients in advanced stages of cancer are referred to other clinics. Cancer treatment and other urgent therapies are financed with corresponding donations. In 2017, we were able to provide support to 78 patients with cancer and 77 suffering from other diseases. Unfortunately, we expect the demand to increase in the coming years.

Other important services offered by the Women's Health Centre include the diagnosis

and treatment of sexually transmitted infections (2017: 342 diagnoses) as well as family planning advice and the prescription of contraceptives (2017: 995 consultations).

Supplementary support services

Newlands Clinic also offers oral hygiene and basic dental treatment. 1,698 consultations were performed in 2017. Physiotherapy is also offered, in particular for children with neurological problems and HIV-related lung diseases. 226 consultations were held in 2017, and led to a marked improvement in the children's lives. ■



Chemotherapy and radio-therapy are very expensive. Most families cannot afford them.

› The Women's Health Centre at Newlands Clinic is recognised across Zimbabwe for its expertise in cervical cancer, with the result that other clinics refer their patients to us. Added to this, our Training Centre regularly provides courses attended by doctors and nurses from other clinics in the diagnosis of cervical cancer and the treatment of precancerous lesions.



Sometimes it's too late for recovery

Cases of cancer among HIV/Aids patients are increasing at an alarming rate. Fighting this disease also poses challenges for the team at Newlands Clinic, given that people with HIV who adhere strictly to their treatment actually have a nearly normal life expectancy these days.

Just imagine: After a hard battle, a patient living in poverty has finally accepted her HIV status and thanks to treatment has a suppressed viral load. But fate then deals her another blow: cancer. Unfortunately, this is by no means an isolated occurrence. Great progress has been made in the treatment of HIV/Aids in recent years: there are better medications, and people with HIV have a virtually normal life expectancy if they adhere ideally to their treatment. However, it has also been known for some years now that HIV infection increases susceptibility to certain cancers.

Help is often sought too late

The increasing number of cancer cases among people with HIV/Aids is presumably due to their weakened immune system. Infectious diseases specialist Stefan Zimmerli, who took over as Medical Coordinator of Newlands

Clinic in October 2017, has seen this problem in Switzerland as well. "But there is a crucial difference: in Zimbabwe hardly anyone has access to screening tests," he explains. In 2016 and 2017, around 150 patients at Newlands Clinic were diagnosed with cancer. In the vast majority of cases, they were referred to other clinics for cancer treatment and were given financial support from corresponding donations. However, 21 of them were already beyond any help and have since died. Stefan Zimmerli: "Many HIV-associated cancers affect the genital area, and there is a great sense of shame attached to examinations. For this reason, many patients only seek help when the symptoms are unbearable and the disease well advanced. Sometimes it's then too late for recovery." >



“Our efforts are paying off, and we must keep going.”

Dr. Margaret Pascoe, Head of the Women’s Health Centre at Newlands Clinic

“Before an examination or treatment, we talk through exactly what is going to happen. Our patients come from the poorest backgrounds, and have often never been screened before. That can make them very afraid.”

Petronella Mudhokwani, nurse at the Women’s Health Centre at Newlands Clinic

Explaining and easing fears

At Newlands Clinic, the team at the Women’s Health Centre, which was opened in 2014, has extensive experience in the diagnosis and treatment of precancerous cervical lesions. They now conduct some 3,000 screening tests every year. The Zimbabwean doctor in charge of the centre, Margaret Pascoe, is proud of the results: “While nearly a quarter of the HIV patients we examine for the first time show precancerous cervical lesions, this figure falls to less than 10% in the subsequent annual check-ups. This shows that our continual efforts are paying off, and that we must keep going.”

Two doctors and three nurses, all of them women, show great deal of empathy in caring for the patients. “If they are to take responsibility for their health, our patients have to know their bodies. We explain to them everything they want to know,” says Petronella

Mudhokwani, an experienced nurse known as Sister Petronella in the clinic. She is passionately committed to helping women, who in Zimbabwe are generally entirely responsible for their families. This calls for a sensitive approach: “Before an examination or treatment, we talk through exactly what is going to happen. Our patients come from the poorest backgrounds, and have often never been screened before. That can make them very afraid,” says Petronella.

Making life-saving treatment possible

The focus is now to be increasingly placed on other types of cancer as well, given that the tumours can likewise affect organs such as the liver or skin, while Non-Hodgkin lymphoma also occurs relatively frequently among HIV patients. “The sooner we can identify these diseases, the better the chances of recovery,” says Stefan Zimmerli. “We therefore train the



team in identifying the specific symptoms, and conduct a thorough examination of all patients once a year." Precancerous cervical lesions can be treated at Newlands Clinic itself, as can anal and vulvar carcinoma, but patients have to go to public health oncology centres at the central hospitals for cancer treatment. "Radiology procedures for precise diagnosis are very expensive, and so too are chemotherapy and radiotherapy," explains Margaret Pascoe. "Most families cannot afford them."

Using corresponding donations, we therefore support Newlands Clinic patients who urgently require a clarification and treatment. This often poses difficult ethical questions. For example, is it justifiable to support a cancer patient who has little chance of recovery if you could use the same money to treat two HIV patients for a whole year? Which treatments are urgently needed and would improve the patient's quality of life? Stefan Zimmerli

firmly believes that these questions can only be resolved as a team and require continual dialogue and analysis. "It's all very well writing down basic principles on a piece of paper, but ultimately we have to make our decisions on a case-by-case basis. In doing so, we take into account not only the medical facts but also the overall situation of the patient."

One thing is certain: the team at Newlands Clinic will have to be prepared for a further increase in the incidences of cancer. "It won't be easy," says Margaret Pascoe. "But I am convinced that if we all pull together we will master this challenge as well." ■

Providing lasting help through knowledge transfer

In 2017, we provided training in the treatment of HIV/Aids and associated diseases to 630 healthcare workers from across Zimbabwe. In addition to this, we also offered an increasing number of customised and abridged courses, while continuing our existing cooperation work.

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. 15 of these two-week courses in HIV management were run in 2017, with a total of 287 participants. In addition to training in the theory behind the complex treatment, they were also given an insight into our care model, while gaining practical experience of consultations with patients.

Further courses and training

VIAC training: Two courses were held in 2017 and were attended by a total of ten healthcare workers, who learned how to diagnose and treat precancerous cervical lesions.

Abridged courses: Newlands Clinic has developed an abridged curriculum for medical students and doctors who are unable to attend the two-week Advanced HIV Management course owing to time constraints. 25 medical students attended one of these abridged courses in 2017, and this training format is to be expanded further this year.

Continuous medical education: A total of 237 participants attended the five CME days held in 2017, three devoted to treatment failure and drug resistance and two covering Kaposi sarcoma (a form of cancer) and tuberculosis. The centre also continues to focus on the training of non-medical staff such as teachers, with a view to disseminating life-saving knowledge about HIV throughout Zimbabwe.

Cooperation and mentorships

Newlands Clinic also provides support to other clinics and organisations in Zimbabwe in the form of mentorships and a help desk service. In 2017, our 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. The use of Newlands Clinic's own



software ePOC was also optimised, this being used for recording patient data and offering support in the decision-making process. 18 staff members participated in mentorship programmes in 2017.

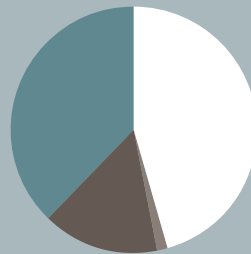
Central Hospitals: As part of a cooperation arrangement with Zimbabwe’s Ministry of Health and Child Care, the ePOC software was rolled out in two Central Hospitals. By the end of the year, training courses had been carried out and pending IT issues resolved. It was not possible to roll out the system at four other hospitals owing to organisational difficulties.

Doctors Without Borders MSF Belgium and Holland: Newlands Clinic is supporting both organisations in establishing gynaecology departments in Zimbabwe. Two VIAC training courses were offered in 2017, and those who attended can now pass on the corresponding knowledge within their respective organisations. This is further promoted through a remote support service to clarify any unresolved issues.

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

The new abridged and customised courses developed by our Training Centre address the knowledge needs of local healthcare workers better. A total of 630 participants attended a course in 2017.

Number of participants per course



- 287 HIV management
- 10 VIAC training
- 96 Customised courses (2 – 5 days)
- 237 Continuous medical education

Researching for more effective HIV treatment

Through research, focused networking and the publication of results, we make our contribution to the ongoing improvement of HIV treatment. The long-term study TENART that we published in 2017 shows the success of Newlands Clinic's comprehensive care model.

The team of doctors at Newlands Clinic carry out research projects on an ongoing basis, thus contributing to the continual improvement of our comprehensive care concept and ensuring that it 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. Furthermore, it carried out its own research projects in the following areas in 2017:

- Neonatal hair measurements to evaluate in-utero tenofovir exposure, assessing the transfer of this HIV drug to the child.
- Treatment success among long-term patients: The TENART study published in 2017 shows that 90% of the patients in care at Newlands Clinic for ten years have a fully suppressed viral load.
- The effectiveness of group therapy among young people: the results after one year show psychotherapy having a very positive impact on viral load suppression.
- The prevalence of STIs and precancerous cervical lesions among female HIV patients.
- Determining the levels of the HIV drugs Atazanavir and Lopinavir in hair to estimate therapy adherence among adolescents.

Important findings are to be presented at various conferences and published in scientific journals in 2018.

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. ■



We often see patients who are very ill. Would an in-depth medical clarification be appropriate? Is treatment possible? Or do we have to help prepare the patient and their family for the worst? These considerations are difficult, both on the human level and ethically. Such decisions have to be borne by us all, and I have trust in our team to master this challenge.

PD Dr. med. Stefan Zimmerli,
Medical Coordinator of Newlands Clinic

Foundation bodies

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Our heartfelt thanks!

Without our project partners and the generous contributions from our many donors, we would be unable to carry out our fight against HIV/Aids. Thank you all from the bottom of our hearts!

Special thanks go to the following institutions:

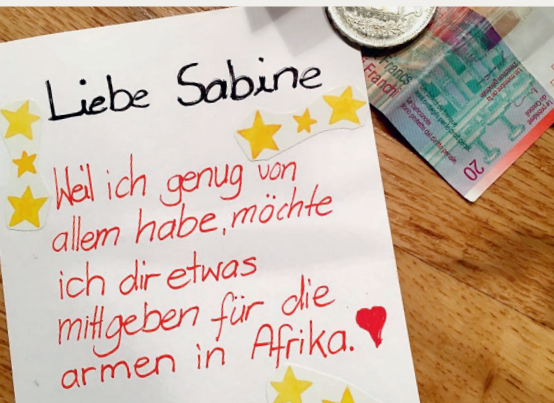
- Apotheke zum Rebstock AG
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- the Zimbabwean Ministry of Health and Child Care
- Kath. Pfarr- und Kirchgemeinde Wil
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- University Hospital Bern
- University of Bern
- Vrenjo Stiftung
- United Nations World Food Programme



Many of our loyal staff in Harare have been with us for a long time. In 2017, no fewer than four of them celebrated 10 years' working with us. Our warmest congratulations go to lab scientist Ratidzai and nurses Veronica, Grace and Moreni, and a massive thank you for your committed efforts!



On 16 September, The Medical Doctors' Ball held a collection for the Ruedi Lüthy Foundation for the 15th year running, and presented a cheque for CHF 8,000 to Sabine Lüthy and Stefan Zimmerli. Thank you from all our hearts for your long-standing support! (photo: Fabian Biasio)



A 10-year-old girl donated 25 francs from her savings bank to help the patients at Newlands Clinic. Many thanks, dearest Emily!



For our youngest patients, taking the HIV medicine is a daily ordeal. Thanks to the Clinton Health Access Initiative, we have been able to give 24 babies and toddlers up to the age of three a new medicine in the form of small pellets, which can be mixed in with their food. Many thanks!



A collection was once again taken for our foundation at the Pink Ice Princess 2017 competition on 1 December in Zurich. Our most sincere thanks for supporting the patients of Newlands Clinic!



Three members of Newlands Clinic staff attended the 9th IAS Conference on HIV Science: head lab scientist Tinei Shamu, pharmacist Tinashe Mudzviti and paediatrician Sandra Bote. Tinei Shamu gave a presentation on TENART, the long-term study on treatment success at the clinic.

Focus on long-term project financing

In 2017, around 85% of total spending flowed directly into our projects (2016: 84%). The 11% increase in donation income was due to higher donations in kind. We closed the financial year with a slight deficit of CHF 56,000. The financial situation remains stable, thus supporting the long-term financing of our project.

Earnings totalled CHF 6.2 million in 2017, nearly as high as the year before. Ordinary donations amounted to CHF 2.3 million (+21%). At around CHF 335,000 earmarked donations were lower than in 2016 (-52%), this being due to the fact that the 2016 donations included the welcome income for the drought emergency relief programme. The increase in donations in kind to CHF 1.9 million (+32%) is attributable to larger deliveries of medicines, these being financed mainly by the Global Fund.

The contribution from the Swiss Agency for Development and Cooperation (SDC) was around CHF 1.3 million in 2017. The previous year's figure had included the final contribu-

tion for the 2013 – 2015 period. All in all, the SDC will provide a total of CHF 4.6 million to support the foundation over the 2016 – 2019 period. The income from the Training Centre fell by 63% year-on-year to around CHF 42,000, this being attributable to the decline in participant fees owing to the still difficult economic situation in Zimbabwe.

Decline in general expenditures

Total expenditures were on a par with 2016 at CHF 6.3 million. 85% of expenditures flowed directly into the project (2016: 84%). These comprise around CHF 4.7 million for the clinic (+2.9% increase due to the higher number of patients and donations in kind), CHF 444,000 for the Training Centre (+5.3%) and CHF 283,000 for the Women's Health Centre (-12.1%).

General expenditures – comprising administration, fundraising and communications at the Foundation's office in Bern – were reduced further to CHF 0.9 million (-10%), and thus amounted to just 14.6% of total expenditures in 2017 (2016: 16.3%). Administration costs amounted to about CHF 497,000 (-5.2%), with expenditures on fundraising and communications totalling around CHF 425,000 (-15%).

Balance sheet and annual result

As at 31 December 2017, the circulating assets totalled just under CHF 10.5 million (-1.6%). Following a review of the securities positions,

The foundation was established in Zurich in March 2003. Its registered office was moved to Bern in April 2015, and the foundation was entered in the Commercial Register of Canton Bern. The purpose of the foundation is to provide treatment and care to HIV and Aids patients in southern Africa. The foundation does not pursue any business interests, and does not seek to make a profit.

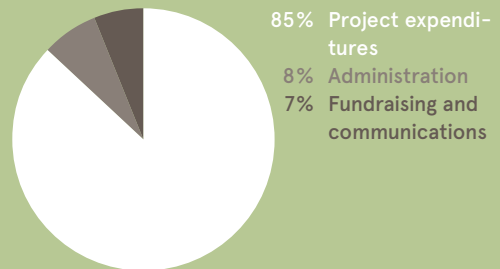
the securities portfolio was reduced to around CHF 234,000. The designated capital totalled CHF 8.5 million, with 'Newlands Clinic' accounting for CHF 7.5 million of this figure. This would ensure that even if there were to be a dramatic decline in income, our patients would for the time being continue 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.

The operating statement showed a loss of around CHF 154,000. Taking into account the financial result, the annual financial statements recorded a slight loss of CHF 56,000.

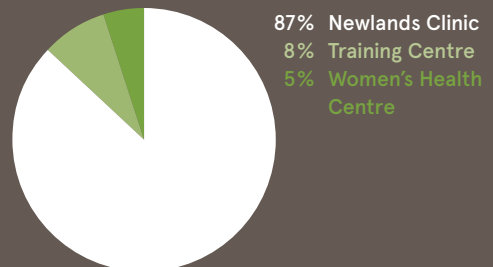
Financial statements for Zimbabwe

Swiss Aids Care International Zimbabwe was renamed as Ruedi Lüthy Foundation Zimbabwe in 2017. The local organisation ensures the smooth overall running of Newlands Clinic on site, while the Ruedi Lüthy Foundation provides the necessary funding. The accounts of Ruedi Lüthy Foundation 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. >

Breakdown of total expenditures



Breakdown of project expenditures



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 172,000 including employer's contributions. Around CHF 75,000 of this was allocated to project expenditures and CHF 97,000 to general expenditures. |



In addition to ensuring our work meets high quality standards, our focus at Newlands Clinic is on people's dignity. My primary task is to support staff and structure operations in such a way that we can sustain these standards over the long term with the limited resources we have available.

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

Matthias Widmaier, Country Director
at Newlands Clinic

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 2017. 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, 19 April 2018

Yours sincerely

LIENHARD Audit AG



Claudio Piubel
Licensed Audit Expert
Auditor in Charge



Stephan Lienhard
Licensed Audit Expert

Enclosure:

- Financial statements 2017 (balance sheet, income statement, cash flow statement, statement of changes in equity and notes)

Statement of operations

	2017 CHF	2016 CHF
Earnings		
Donations	4,679,883	4,159,300
- Ordinary donations	2,346,349	1,944,943
- Earmarked donations	335,394	698,903
- Donations in kind	1,998,140	1,515,454
SDC contributions	1,333,500	1,777,328
Income from Training Centre	42,491	115,332
Other earnings	100,443	115,616
Total earnings	6,156,317	6,167,576
Expenditures		
Project expenditures Harare		
Newlands Clinic	4,662,570	4,532,202
- Staff expenditures	1,704,957	1,684,216
- Medication and medical costs	2,676,040	2,372,991
- Infrastructure and vehicles	170,762	373,662
- Various project costs	110,811	101,333
Training Centre	443,643	421,313
Women's Health Centre	283,007	322,116
Total project expenditures Harare	5,389,220	5,275,631
General expenditures		
Administrative costs	497,118	524,096
Fundraising and communications	424,713	499,892
Total general expenditures	921,831	1,023,988
Total expenditures	6,311,051	6,299,619
Operating result	-154,734	-132,043
Financial result	90,282	38,437
Annual result before withdrawal from capital	-64,452	-93,606
Withdrawal from designated capital	8,389	-
Annual result after withdrawal from capital	-56,063	-93,606

Balance sheet

	2017	2016
	CHF	CHF
Assets		
Cash, post office account, bank deposits	6,275,601	6,464,321
Securities	3,073,735	3,307,770
Receivables from goods and services and prepayments and accrued income	105,568	225,030
Inventories	1,036,582	670,067
Total Assets	10,491,486	10,667,188

Liabilities

Short-term liabilities

Payables from goods and services and accrued liabilities and deferred income	204,828	284,597
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Capital of the organisation

Paid-in capital of the foundation	100,000	100,000
Designated capital	8,554,878	8,563,267
Reserve for fluctuations in asset value	100,000	100,000
Unrestricted capital	1,580,834	1,669,715
Annual result	- 56,063	- 93,606
Currency translation differences	7,009	43,215
Total Liabilities	10,491,486	10,667,188

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

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