



Annual Report

2013

AUSTRALIAN
DOCTORS
FOR
AFRICA

HONOUR ROLL

Since 2005 Australian Doctors For Africa acknowledges the committed support of our medical team members, many of whom have made multiple visits to Ethiopia, Madagascar or Somaliland.

ORTHOPAEDIC SURGERY

Dr Elias Ahmed (Ethiopian)
 Dr Nasdridin Usuf (Ethiopian)
 Dr Will Bryceson
 Dr Graham Forward
 Dr Rob Genat
 Dr Tony Jeffries
 Dr Tim Keenan
 Dr Li-On Lam
 Dr Geoffrey Rosenberg
 Dr Michael Tiller
 Dr Michael Wren
 Dr Tim Fletcher
 Dr Sam Martin

GENERAL SURGERY

Dr Yohannes Nigussie (Ethiopian)

UROLOGY

Dr Sue Chapman
 Dr David Chelvanayagam

GASTROENTEROLOGY

Dr Digby Cullen

ANAESTHETICS

Dr Emma Giles
 Dr Conra Macrokanis
 Dr Paul Rowe
 Dr Mark Salib
 Dr Phillip Smith
 Dr Mark Thackray

GENERAL PRACTICE/REGISTRAR/ RESIDENT

Dr Rhys Clark
 Dr Hannah Forward
 Dr Sarah Rylance
 Dr Evelyn Fletcher
 Dr James Marangou
 Dr Zoe Wake
 Dr Simon Zilko

GENERAL NURSING

Emily Forward
 Scott McKay
 Margaret Twine

Clare Rixon

LOGISTICS

Catriona Ferrie
 Robert Forward
 David Schwartz
 Jan Tiller
 Paul Tye
 Cassie Smith

THEATRE NURSING

Cherrie Genat
 Victoria Gibson
 Kassie Keenan
 Rhonda Milner
 Kelly Pride
 Mary Watson

ENDOSCOPY NURSE

CATHY POOLE

PHYSIOTHERAPY

Helen Burgan

THEATRE TECHNICIAN

Paul Maloney

UNIVERSITY OF WESTERN AUSTRALIA SCHOOL OF MEDICINE

Em. Prof. David Allbrook
 Prof. Ian Puddey (Dean)
 Dr Fred Faigenbaum (General Physiician)
 Dr Anna Parker
 Dr Elena Gherori
 Dr Leon Cohen
 Dr Gary Hastwell
 Dr David Henley
 Dr Rod Thalander
 Dr Melissa Jennings
 Dr Sarah Hodson (Emergency Physician)
 Dr Rashmi Patel (Anaesthetist)
 Dr Luigi D'Orsonga (Paediatrician
 Cardiologist)
 Dr Don Howarth (General Physician)

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ADFA'S PURPOSE IS:

“The provision of medical and surgical services, the training of medical and other health care staff and the provision of facilities, equipment and supplies for the relief of people in developing countries.”

OVERVIEW

Australian Doctors for Africa (ADFA) plays a critical role in providing medical assistance and training in Ethiopia, Somaliland and Madagascar through its humanitarian and volunteer medical operations.

During 2012–13, the organisation operated in four locations comprising:

- Addis Ababa, the capital of Ethiopia;
- Tulear in the south west region of Madagascar;
- Hargeisa, Somaliland's largest city; and
- Antananarivo, capital city of Madagascar.

Established in 2005, ADFA is a non-profit community based organisation with its headquarters located in Perth, Western Australia.

It has no political or religious affiliations.

Succinctly, the goals of ADFA are to:

- Provide medical supplies and equipment.
- Consult and undertake specialist procedures.
- Train and teach nurses, medical students, doctors and medical specialists.
- Provide other medical specialities to meet demand.
- Disseminate best practice in health care.
- Build capacity and skill with local medical staff and students.
- Assess future training needs of local staff to build capacity.
- Improve hospitals through the provision of better equipment.
- Undertake a mandate to effect significant change with the building of new hospital facilities.

The cornerstone of ADFA commitment is to provide extensive orthopaedic medical teams to furnish medical assistance and support to communities in Addis Ababa (Ethiopia), Hargeisa (Somaliland) and Tulear and Antananarivo (Madagascar).

From this specialists service in gastroenterology, urology, paediatrics and cardiology have been added.

Since its inception the growth of ADFA has been phenomenally successful through 12 medical assignments to Madagascar, 13 to Ethiopia and 12 to Somaliland (and Puntland).

In addition, sea containers have been dispatched as well as kilograms of air freighted equipment. 2012–13 saw the 19th, 20th, 21st and 22nd sea containers shipped to Somaliland, Madagascar and Ethiopia. Through medical donations, the containers have contained medical operating equipment and supplies such as beds, crutches, wheelchairs and nursing station office equipment.

Although the size of medical teams vary, ADFA attempts to ensure that a typical team comprises orthopaedic surgeons, an anaesthetist and theatre nurse with additional specialised support incorporated into the team such as a physiotherapist, plaster technician and orthopaedic technician. Other speciality team members include gastroenterology and urology.

A partnership with the University of Western Australia School of Medicine has been instrumental in raising the teaching standards of medical students and doctors in Hargeisa, Somaliland.

ADFA relies on the support of corporate partners, donations, fund raising activities and volunteers to maintain its core business.

FROM THE FOUNDER



“My sincere thanks go to the Management Committee and to all the volunteers who have so unselfishly given their time to the achievements of the organisation”

FROM HUMBLE BEGINNINGS

Since humble beginnings in 2005, I look back on the development of the organisation with a great deal of pride and satisfaction and yet, I know that there is still a long way to go for fulfilment.

In the past twelve months we have expanded our operations significantly and I have been amazed by the achievements. This is not only the number of medical teams dispatched to Ethiopia, Madagascar and Somaliland but the output, outcomes and impacts we have achieved with building projects; the number of sea containers dispatched; the level and quality of teaching programmes to nurses, medical students, doctors, registrars and surgeons and the number of patient consultations, procedures and operations achieved.

POSITIVE TRAINING

The problems of training in surgical techniques is often difficult due to the lack of facilities and medical education. However, the response from surgeons, residents, registrars, medical students and nurses has been extremely positive.

In Madagascar, the specialist areas of urology and gastroenterology under the tutelage of Dr Chapman and Dr Cullen have progressed considerably. With new equipment being left at the hospitals and the training of specialists occurring, these programs have made an incredible impact on the local community.

In Ethiopia, ADFA is undertaking its biggest building project yet through the conversion of an area into three orthopaedic operating theatres. After initial momentum, the project was temporary halted due to an internal dispute but it is anticipated that completion will occur in the latter half of 2013.

We implemented a training programme for Orthopaedic surgeons in April under the tutelage of myself, Dr Wren and Dr Keenan.

Sixteen first and second year orthopaedic trainees completed the two-day course with a noticeable positive difference in their skill levels.

The talipes programme at the Black Lion Hospital has been well established for a number of years under Dr Woubalem.

In Somaliland, through the University of Western Australia Medical School, two teaching teams were dispatched in November and April. There is still much to be achieved with the curriculum and the practical application of skills. However, under the direction and coordination of Dr Mahdi at the University of Hargeisa Medical School, there is a more coordinated approach

In all three countries, the cornerstone of our activities has remained orthopaedic surgery and the training of the next generation of orthopaedic surgeons.

TREATMENT PROGRAM

We were fortunate to have the services of Dr Elias Ahmed, Dr Yohannes Nigussie and Dr Nasridin Yusuf from Ethiopia who worked tirelessly in Hargeisa, Somaliland with operations and supervision. Their presence was well appreciated by hospital and government officials and highlights that international cooperation can occur when the ingredients are right.

In Madagascar, Dr Genat and Li-On Lam together with nurse Cherie Genat continued with the talipes programme and orthopaedic surgery. There is still a long way to go to establish a robust screening and treatment program but the seeds have been sown.

ADFA IN THE WIDER COMMUNITY

In August, I addressed 1300 delegates at the Research Forum as part of the Paydirt Down Under Conference which attracted national and international mining companies and government and ministerial representatives from Australia and Africa. It was an opportunity to focus on Australian Doctors for Africa and corporate social responsibility.

STRATEGIC DIRECTION

A mixture of twenty two people consisting of medical team members, UWA Faculty of Medicine, ADFA Management Committee, volunteers and young doctors and under the facilitation of Dr Dorothy Wardale from the School of Business at Curtin University, undertook a strategic planning process to embark Australian Doctors for Africa on their next five year journey.

The initial Strategic Plan 2010 – 2012 has served ADFA extremely well by providing clear priorities and direction for the organisation. Our new Strategic Plan 2013 – 17 will see ADFA consolidate its activities; consider an expansion of services and operations to all three current countries; identify a possible expansion to a fourth country and implement Research and Evaluation as a new priority.

CONTINUED JOURNEY

As a signatory to the Australian Council for International Development (ACFID) we have strengthened our governance structures and framework in which to operate. We have also completed an AusAID application for accreditation with an expected decision in the latter half of 2013.

Despite the financial times, the extraordinary generosity of the public was again shown through philanthropic gestures to continue our journey.

Finally, I am indebted to David Martino who, as Chair of ADFA, professionally guided the Management Committee through its internal systems of governance and procedures. As a result, ADFA is now at another level and a stronger agent of change.

I have been privileged to serve as part of the Management Committee during the reporting period. It is a well structured Committee with a strong focus and a diverse range of skills and acumen.

My sincere thanks go to the Management Committee and to all the volunteers who have so unselfishly given their time to the achievements of the organisation.

RECOGNITION

It is always pleasing when the work of our volunteers is recognised. Ms Christine Tasker and Mr Robert Forward were honored to receive certificates from the Minister for Health in Somaliland appreciating their generous contribution to humanitarian aid in Hargeisa.

MEDICAL REPORTS

Madagascar

LOCATIONS

Clinic St Luc, Tulear
 Generale Hospital, Tulear
 Akany Fantananena Clinic, Tulear

Fantanenena Clinic, Tulear
 Military Hospital, Antananarivo
 University Hospital, Antananarivo

MEDICAL TEAM VISITS

October/November 2012
 April 2013

ORTHOPAEDICS

33

Number of surgical procedures

180

Clinical consultations

5

Ward rounds

PAEDIATRICS

210

Clinical consultations

6

Ward rounds

UROLOGY

17

Number of surgical procedures

65

Clinical consultations

29

Anaesthetic procedures

GASTROENTEROLOGY

51

Number of endoscopic procedures

228

Clinical consultations

29

Procedures

ANAESTHETICS

29

Anaesthetic procedures

ANAESTHESIA

29

Procedures



Somaliland

LOCATIONS

University Medical School, Hargeisa
 Hargeisa Group Hospital
 Edna Adan Maternity Hospital, Hargeisa

MEDICAL TEAM VISITS

November 2012
 April 2013

ORTHOPAEDICS

29

Number of surgical procedures

250

Clinical consultations

12

Ward rounds

TEACHING

Ward rounds: Daily seeing

10-15

Patients

Ward round teaching to

4-6

Students

8

Formal lectures

2

OSCE examination

CARDIOLOGY

Consultations on

3-4

Patients per day in both emergency department and on ward

3-4

Informal patient based tutorials at the bedside each day

One

Ward round at Edna Adan Hospital.



Ethiopia

PERMANENT LOCATIONS

Black Lion Hospital, Addis Ababa

ADDITIONAL LOCATIONS

ALERT Leprosy Hospital

CURE Hospital, Addis Ababa

Fistula Hospital, Addis Ababa

MEDICAL TEAM VISITS

September 2012

April 2013

ORTHOPAEDICS

6

Number of surgical procedures

20

Clinical consultations

10

Ward rounds

TEACHING

2-DAY

Orthopaedic training course in management of trauma to 16, 1st and 2nd year residents

2

Orthopaedic formal presentations to 25 staff and residents

CARDIOLOGY

2

Ward rounds, 15 patients each time

2

Cardiology clinics with 12-15 patients

ONE

Daily hand over meeting on ward

Madagascar

ADFA has been visiting Madagascar continuously since 2005 and orthopaedic and other specialised services have attended every year. There has been steady progress, and our operational model has gradually changed to pragmatically confront the reality of a unique set of circumstances.

As in previous years, the stability in the composition of the medical teams has enabled much to be achieved in building capacity through training, sustainability of programmes and progress to be made at all locations.

Through the efforts of the medical teams, ADFA has been provided with feedback to improve the delivery of its services.

The environment in which the teams operate can be harsh and frustrating at times through utilising outdated equipment, power cuts, down time, disruption of travel plans and a lack of medical supplies.

Adaptability, flexibility and patience are key elements for ADFA medical teams.

ORTHOPAEDIC SURGERY AND TREATMENT

The cornerstone of visits remains orthopaedic surgical procedures and consultations.

For the first time, ADFA included a paediatric registrar in its medical team who identified a great number of primary problems including high infant mortality (~4%); infectious diseases including malaria, gastroenteritis, and respiratory illness; severe malnutrition (up to 50% of Malagasy children); and a lack of examination and neonatal theatre equipment.

The type of procedure each team encounters varies but typical are limb amputations, ORIFs, talipes-correction surgery, arthrotomy wound washouts, excision osteochondroma, excision of mass from foot, removal of metal of various descriptions, and contracture releases with full thickness grafting.

- 1 Dr Sue Chapman with bladder stones removed from a patient in Tulear
- 2 Clinical nurse Lucy Harris prepares for the surgery

1 2



OTHER MEDICAL SPECIALITIES

Urology

Under the tutelage of Dr Sue Chapman, urology was able to build upon previous visits. Over a two week period in October – November, 65 patients were seen in clinics and 17 operations performed. The operations were varied and challenging and included 6 TURP, 6 optical urethrotomies, two open bladder stone removals, 1 endoscopic stone removal and 1 insertion of a suprapubic catheter.

To complement the established program, new cameras, camera processors, light sources, monitors and voltage regulator were brought from Australia and greatly improved the operating environment and facilities.

Anaesthesia

Dr Paul Smith provided support for 29 procedures in 7 days with the age range of operations being from 8 years old to 78 years old.

The range of operations included removal of bullet scar, removal of small toe, forearm fracture, removal of bladder stones, optical urethrotomy; repair of hernia, colonoscopy and gastroscopy among others.

In addition, Dr Paul Smith also identified equipment requirements in order to improve the delivery of anaesthesia. An urgent requirement is to provide more up to date equipment as much of the current equipment has now been superseded by more technical and functioning equipment.

While there is still a lack of some equipment, the hospitals and their staff made considerable progress and worked long hours with humour and enthusiasm.

Gastroenterology

There still remains a tremendous burden of GI disease all over Madagascar and the Tulear region is in particular need of increased services and treatment.

The gastroenterology program continued to gain momentum under the direction of Dr Digby Cullen. The provision of endoscopic equipment and training to the two major teaching hospitals in Antananarivo (Military and University Hospitals) has resulted in very good outcomes.

In Tulear, it has been a much more difficult working environment with little progress made in the last 12 months. With only one trained endoscopist, activities have not advanced as anticipated, outpatient clinics curtailed and endoscopy performed on an irregular basis. All this points to the need for further Drs to be trained which will be a thrust of ADFA's activities over the next 12 months.

The range of consultations was extremely varied and included reflux symptoms, sexually transmitted disease, ovarian cysts, renal colic, breast cyst, abscess, rectal bleeding and upper abdominal pain. CLO tests were administered with a very high positive result.

A key focus of the next stage in ADFA's gastroenterology work in Madagascar will be further research into *heliobacter pylori* and other GI disorders. Professor Barry Marshall (Nobel Laureate) has kindly offered to assist in this research.

TEACHING

Urology

There was continual training and up skilling of doctors and surgeons through assisting in operations and specific instructions in the use of the new equipment.

Gastroenterology

The training programme under supervision was continued at the two hospitals in Antananarivo with interventions successfully implemented without complications.

At the University Hospital, a centre of excellence has now been established and is capable of being an adequate training centre for endoscopists and endoscopy nurses in Madagascar. This is a huge leap forward for our Gastroenterology program in Madagascar.

The work of Cathy Poole, endoscopy nurse, has been magnificent with diligent collection and distribution of a significant amount of endoscopic equipment.

ADFA is slowly implementing the Ponseti method for the screening and treatment of talipes. There is still some way to go with the training of doctors, physiotherapists and nurses and ensuring there is a regular supply of medical resources.

Talipes workshop in Tulear



Ethiopia

DESPATCHING MEDICAL TEAMS, EQUIPMENT AND SUPPLIES

As in previous years, Smith + Nephew has been extremely generous in their support of medical supplies for the talipes program. The plaster of paris (gypsona) bandages has sustained the talipes program in Tulear once doctors have returned to Australia.

With support from Olympus WA, obtaining old endoscopy equipment from WA hospitals as they upgrade has been a successful outcome for the local hospitals.

In March, 50 kgs of equipment was air freighted comprising gastroenterology equipment for Tulear and Antananarivo hospitals in addition to cartons of plaster of paris for the talipes programme at the CHRR hospital in Tulear.

St John of God Healthcare (Bunbury) kindly donated consumable stock including sutures, masks, gloves, and dressings.

CONSTRUCTING NEW MEDICAL BUILDINGS AND FACILITIES

The 2010 hygiene and sanitation toilet block has required further improvements to adjust for water pressure and control of sewerage.

Through support from the Direct Aid Program at the Australian High Commission in Mauritius, construction commenced on the building of a water tower and the sinking of a large sewerage container. Both these new constructions were completed in April 2013 and will assist in the efficiency of the salle de toilette commune facility.

RESEARCH AND EVALUATION

As part of ADFA's Strategic Plan 2013 – 2017, an anthropologist was engaged to assess the program to treat children born with talipes equino varus.

The project required interviews and focus group meetings and highlighted the need to overcome the cultural barriers which currently exist.

The research will pave the way for ADFA to implement a more comprehensive screening and treatment program. Discussion with the St John of God Hospital Outreach Program as partner for the project are well advanced.



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Pouring the footings for the new water tower

ACKNOWLEDGEMENTS

In the past twelve months, our operations and services in Madagascar have vastly improved. This improvement is, in part, due to local representatives who have continued to embrace the ADFA vision and mission.

Particular thanks go to:

- Dr Gaby in gastroenterology at the CHRR hospital
- Professor Rado at the University Hospital
- Smith + Nephew for medical supplies of Plaster of Paris
- Tiana Andrianarijaona – ADFA representative in Tulear
- Ansell Health for surgical gloves.
- Marcellin Jean Desire – Project Manager for building projects
- Dr Christini Monja – Director of CHRR (General Hospital)
- Olympus WA for endoscopic equipment.
- SJOG Subiaco, Mercy Hospital and Boston
- Scientific for endoscopic accessories
- M. Jules Le Clezio (Toliara Sands Project)
- Malagasy Minerals Ltd and Toliara Sands

- Ms Kerri Coupar from Air Mauritius for their continued support with airfreight and excess baggage
- St John of God Healthcare – Bunbury for donations of consumable stock
- Sidera and Tantely – AFAD's two interpreters at CHRR
- St John of God Hospital Outreach Program
- Emirates Airline Foundation

“It is very exiting news for my department and also to black lion hospital. Thanks for all your effort. I have already announced to high officials. I assure you all donors going to be happy when they see difference in entire department.”

– Director
Dr Bahiru, Orothopaedic Department

The last twelve months has emphasised the building of capacity in order to progress sustainability. However, the fundamental problems of priority, demand, safety and morbidity remain.

The September orthopaedic team experienced a major challenge in that the country was in a state of turmoil following the death of the Prime Minister. This resulted in the closure of all operating theatres at the hospital for one week to accommodate any mass casualties resulting from an emergency. Thus the visit was adapted to accommodate a more teaching perspective.

ORTHOPAEDIC SURGERY AND TREATMENT

There have been two medical team visits over the past twelve months. In September Dr Tim Fletcher and Dr Sam Martin undertook a two-week visit to the Black Lion Hospital. Due to the closure of all operating theatres for one week during a mourning period for the late Prime Minister, the team were only able to do some rudimentary surgery in the emergency department operating theatre. The team, therefore, were presented with more formal lecturing time to teach the staff and residents.

During April, Drs Forward, Keenan, Wren and Marangou were engaged in all aspects of orthopaedic management of trauma. In addition to clinical ward rounds and consultation. However, Dr Tim Keenan was able to supervise and assist with four operations.

Involvement in the daily X-Ray meetings to review trauma cases and provide professional advice continue to be a feature of ADFA medical teams.

OTHER MEDICAL SPECIALITIES

While building upon orthopaedics as the cornerstone of ADFA's activities over the last 12 months, ADFA has investigated the scope to expand its services in medical speciality needs at the Black Lion Hospital.

Areas requiring further discussion include obstetrics, cardiology and radiology. Currently there are 13 trainees in obstetrics and gynaecology but only two surgeons available for cervical cancer.

At the Black Lion Hospital the radiology training program is the only one servicing the entire country. With 150 students available and three staff, there is a need to expand the training into a post-graduate course in radiology technology with increased emphasis in X-ray, CTI and MR.

Involvement in the daily X-Ray meetings to review trauma cases and provide professional advice continue to be a feature of ADFA medical teams.



DESPATCHING MEDICAL TEAMS, EQUIPMENT AND SUPPLIES

Dispatching two teams to Addis Ababa in the last 12 months has maintained a high level of supervision, teaching, training and 'hands-on' service commitments.

In responses to requests from hospitals, in March 2013, ADFA shipped one sea container to the Black Lion Hospital and one to the Danu Specialist Orthopaedic Hospital.

We are grateful to the local Perth medical industry and businesses who donated 70 individual items comprising:

- Operating tables
- Anaesthetic machines
- Diathermy machines
- Ultra sound machines
- Operating light transformers
- Ward beds
- Recovery beds
- Doctors and nurses uniforms
- Wheelchairs
- Mattresses
- Cartons of surgical gloves

CONSTRUCTING NEW MEDICAL BUILDINGS AND FACILITIES

The most significant and ambitious project undertaken by Australian Doctors for Africa has been the conversion of an unused teaching space into three fully equipped orthopaedic operating theatres and recovery ward.

Although the project had a major setback, the impetus for the project has been maintained by the hospital orthopaedic department and ADFA. During April, ADFA was able to facilitate discussion between the disability department, physiotherapists, the Minister of Health and the Minister of Labour and Social Affairs in order to overcome a dispute which had halted progress.

As a result of these discussions, it is pleasing to report that progress on the conversion has started.

When completed, this project will be a win-win situation for all stakeholders housed in the orthopaedic department. The immense and massive trauma workload through road and construction work trauma presented to the Black Lion Hospital will be greatly reduced by the three theatres dedicated solely to orthopaedic surgery. In addition, the proximity of rehabilitation services will assist with a quicker recovery period.

TEACHING

Following on from the very successful teaching assignment in 2012, Drs Mike Wren, Tim Keenan, Graham Forward and James Marangou presented a basic management of trauma course for 16 1st and 2nd orthopaedic trainees. As the main convenor of the course, Dr Wren organised lectures on basic orthopaedic surgical principles and practical workshops using 'saw bones', drills, plates, screws and plastering.

It was amazing to observe within the group the improved theoretical knowledge and dexterity in the practical applications.

An evaluation of the course revealed the trainees acknowledgement of the professional delivery of the course; the adaptation of content to suit their ability levels; the practical nature of the activities; and the increase in their knowledge of basic orthopaedic management.

OTHER

The construction of the DANU Orthopaedic Specialist Hospital has advanced considerably in the last 12 months. ADFA is very keen to be involved in this project in some capacity as the hospital will be dedicated exclusively to orthopaedic surgery for private and poor patients. The hospital will be under the direction of Dr Elias Ahmed who is a well respected Ethiopian orthopaedic surgeon

As part of the Strategic Plan to developed ADFA Scholarships, a concept was agreed upon by the Black Lion Hospital to accept two Somaliland doctors for four years for further training in orthopaedics. This will be a monumental medical exchange with both countries fully supporting the concept. In conjunction with the Minister of Health in Somaliland, processes have been put in place to identify two doctors.

The four-year scholarship program will be fully funded through ADFA.

At the same time, a young Ethiopian doctor was identified as the potential recipient of a two-year ADFA Fellowship to India. The logistics of this concept are still being developed.

Both of the above examples demonstrate ADFA's commitment to continually build capacity with the organisations it connects with.

ACKNOWLEDGEMENTS

Over the past twelve months orthopaedic teaching, screening and treatment has greatly been extended, refined and progressed. In particular, our thanks are extended to:

- The orthopaedic staff at the Black Lion Hospital, particularly Dr Bahiru, Director
- Ansell Health for surgical gloves
- The Director of the Black Lion Hospital, Dr Mahalet
- The CEO of Health Sciences, Dr Ahmed Raja
- Mr Getaneh Retta, Ethiopian architect, for his contribution towards the design, submission and supervision of the new operating theatre project
- Her Excellency, Ms Lisa Filipetto, Australian Ambassador to Ethiopia
- Mr David Schwartz from Primewest Management for his invaluable input into project management

“We need this practice badly in our country so come again.”

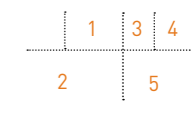
– 1st year orthopaedic trainee

1,2,3

Participants in the orthopaedic surgical principles workshop

4 The DANU Hospital under construction

5 Dr Graham Forward meets with the CEO of the Black Lion Hospital, Dr Mahalet to discuss ways to build capacity through a scholarship and fellowship program



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- 1 Robert Forward checks off the sea container inventory
- 2 Dr Sam Martin teaching students, residents and registrars at the Black Hospital
- 3 Her Excellency, Australian Ambassador to Ethiopia, Ms Lisa Filipetto, opens the training course



Somaliland

“On behalf of Somaliland Government; we really appreciate the role of ADFA for their contribution of health promotion in Somaliland. ADFA has filled wide gap for rehabilitation orthopaedic theatre, laundry rooms and supplied 22 kg washing machine and training of the health work force. The need is still more, please continue to support Somaliland people.”

– Hon Dr. Hussein M Mohamed
The Minister of Health (August 2012)

ADFA has continued to maintain its strong presence in Somaliland through association with the Hargeisa Group Hospital (HGH), the Edna Adan Maternity Hospital (EAMH) and the University of Hargeisa Medical Faculty.

At the same time, ADFA has strengthened its links to NGO's located in Hargeisa, particularly the representatives from the University of Oslo Faculty of Medicine (NNM); medical personnel from Finland (the Finnish Group), the Disability Action Network (DAN) and the Taakulo Somaliland Community (TSC).

1,2 Dr Nasri from Ethiopia and Dr Forward conducted an estimated 250 consultations in two days



“We really appreciate ADFA for its good contribution and assistance to people of Somaliland. We hope to see you in April together with the loved Dr. Graham who wanna make changes the life of the Somali community for building their resilience.”

– Omer Farrah, Director
Taakulo Somaliland Community

ORTHOPAEDIC SURGERY AND TREATMENT

ADFA was fortunate to gain the services of three Ethiopian surgeons for four days of intense surgical operations. With two surgeons devoting two days to approximately 250 consultation cases and ward rounds the team accomplished a huge physical workload while at the same time building capacity with senior and junior doctors, nurses and medical students.

The medical team was greatly appreciated by the Somaliland authorities and hospital staff and at a final farewell dinner, the Minister of Health formally acknowledged their valued contribution to the Somaliland community. As on previous occasions, the team oversaw many difficult and urgent cases including bullet wound fractures and young children with talipes.

The completion of a scoping study on the prevalence of talipes (club foot) in Somaliland will assist ADFA in investigating opportunities to progress the talipes program.

In discussions with the Disability Action Network (DAN) there is scope for ADFA to provide resources such as plaster of paris and sofban; purchasing of boots and braces; teaching opportunities on the ponsetti method of treatment; expanding the program to some rural communities and liaising with HGH and EAMH for further treatment.

OTHER MEDICAL SPECIALITIES

Although HGH is lacking in a number of physical, technical and academic resources, Dr D'Orsogna, a paediatrician cardiologist, was overwhelmed with the level of human endeavour and compassion exhibited by the medical students. Their capacity to learn and absorb information and new equipment methods required discipline at times but not their will to learn.

Building upon Dr D'Orsogna visit, Dr Marangou focussed on the importance of proficient clinical skills through the importance of keeping and utilising bedside observations and considering a wide variety of differential diagnoses.

Over time, the senior presence; flow of skills and the clinical knowledge will increase the capacity of doctors and provide a much more stable learning and teaching environment for the medical students. The development of simple cardiac surgery options; improving catheter lab access and focussing on rheumatic heart disease are potential training programmes for 2014 and beyond.

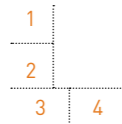
1 Four ADFA team surgeons completed 29 operations in 4 days

2 A screening and treatment program for talipes is an important direction for ADFA

1 2



- 1 Donated Cardiology equipment
- 2 Wheelchairs will increase the mobility of many
- 3 Dr Luigi D'Orsogna instructing in the use of an echocardiogram
- 4 Dr Forward and Edna Adan with Eng. Raschid (c) inspect plans for the new X-Ray Department at the Edna Adan Maternity Hospital



DESPATCHING MEDICAL TEAMS, EQUIPMENT AND SUPPLIES

25 intravenous pump giving sets were gratefully received by Edna Adan's hospital as were a set of intraosseous needles for adults with impossible intravenous access. Infant intraosseous needles went to HGH along with ET tubes which went to both HGH and Edna Adan hospitals. A large supply of Kiwi cap vacuum extractors were given to Edna Adan Hospital.

12 suture instrument kits were left at the University, but by taking a similar number next year it should be possible for each student to have a kit to practice with rather than sharing.

Enough stethoscopes were taken to ensure all the clinical year students have one. Another 30 Sprague Rappaport stethoscopes will be purchased to ensure that the new clinical year students all have a reasonable quality instrument to listen with.

Australian Doctors for Africa was able to dispatch two sea containers during the last 12 months to Somaliland. The organisation utilised the services of Taakulo Somaliland Community to distribute medical equipment and supplies.

CONSTRUCTING NEW MEDICAL BUILDINGS AND FACILITIES

The association with the Edna Adan Maternity Hospital has been strengthened through ADFA's financial support for a new X-Ray Department at the hospital.

MAINTAINING THE TEACHING PROGRAM AT HARGEISA, SOMALILAND

The medical teams are kept to a busy schedule of clinical ward rounds and formal lectures with bedside teaching in the morning and formal lectures in the afternoon.

While there is a need to identify areas of weakness, such as clinical skills in psychiatry, medical teams heightened clinical awareness and the need for more theoretical basis of medicine with students.

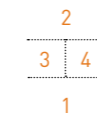
There was also the opportunity to build capacity with residents and medical students through teaching of acyanotic congenital heart disease; assessment and management of heart failure in childhood; basic ECG interpretation; assessment and management of childhood asthma; assessment of heart murmurs in childhood; causes of heart palpitations; diabetic ketoacidosis; tachypnoea; suture training; and assessing and managing coma.



ACKNOWLEDGEMENTS

Significant progress has been made in Somaliland through the efforts of:

- Dr Hussein Muhamed Mohamed, Minister of Health, Somaliland
- Dr Ahmad Osman Asker, Director of Hargeisa Group Hospital
- Dr Mahdi – Clinical Co-ordinator at Hargeisa University Medical School
- Omer Farah – ADFA Somaliland contact for project supervision through the Taakulo Somaliland Community
- Edna Adan Ismail, Director, Edna Adan Maternity Hospital
- Western Cardiology for donated cardiac equipment
- UWA Faculty of Medicine for their continued support towards the teaching program
- The three Ethiopian surgeons Dr Elias, Dr Nasri and Dr Yohannes who gave their time so generously for ADFA



- 1 Dr James Marangou conducting a lecture on the causes of heart palpitations to 5th year medical students
- 2 Dr Don Howarth with medical students
- 3 The site of the ADFA funded X-Ray Department
- 4 Construction is well under way of the X-Ray Department at the Edna Adan Maternity Hospital

GOVERNANCE & INTEGRITY

ADFA has submitted an application for AusAID accreditation

Australian Doctors for Africa is a company with two Directors, Graham Forward and Jeanne Bell. The overall management of Australian Doctors for Africa has been delegated to the Management Committee which is elected at the AGM. The current Chair of the Management Committee is Dr Graham Forward.

At June 2013, the Management Committee comprised the Founder and Principal, Dr Graham Forward together with Ms Jeanne Bell (Finance), Ms Christine Tasker (Logistics), Ian Pawley (Finance) and Helen Asquith (Policy). Each brings business acumen and experience to the organisation through their legal, business, financial, logistic, marketing, administrative and organisational skill sets.

During the year Mr Paul Tye retired from the Management Committee in November 2012 and Mr David Martino (Chair) retired in April 2013. The Committee welcomed the appointment of Ms Helen Asquith at the November AGM.

The Management Committee has met on 11 occasions throughout the year and held the Annual General Meeting in November to re-elect the Management Committee.

MANAGEMENT COMMITTEE	APPOINTED	MEETINGS	
		Eligible to attend	Attended
DR GRAHAM FORWARD	February 2005	11	11
JEANNE BELL	February 2005	11	9
CHRISTINE TASKER	February 2005	11	10
PAUL TYE	August 2009 (Retired November 2012)	5	5
DAVID MARTINO	June 2011 (retired April 2013)	9	7
IAN PAWLEY	June 2011	11	10
HELEN ASQUITH	November 2012	6	5

There are two sub-committees to streamline and implement fund raising activities. Ms Jeanne Bell from the Management Committee chairs and oversees activities of the Events and Incom Committees and reports regularly to the Management Committee.

Throughout the year, the organisation has built upon the solid framework of policies, processes and procedures to foster a culture of strong governance and compliance. The internal systems of management are well established.

The Management Committee has ensured the implementation of the Strategic Plan has continued so that the vision, mission and strategic priorities have been focused and monitored; overseen their execution through an operational plan; approved budget requirements; determined policy procedures and processes for ethical behavior, integrity and respect for others; outlined roles and responsibilities for internal and external personnel and monitored the performance of the medical teams.

As Founder and Principal, I would like to acknowledge the contribution of Mr Paul Tye for his commitment, support and expertise to Australian Doctors for Africa over the past three years. His input has been invaluable to the Management Committee.

I would also like to recognise Ms Pat Owens who coordinated and maintained our information and management database and been instrumental in providing guidance and direction.

Finally, Mr David Martino has been inspirational in guiding the organisation and ensuring that there is an adherence to strong governance and accountability processes. I thank him for his strong and professional contribution.

Dr Graham Forward (Chair)

Delegates involved in the strategic planning day



Medical Team Visits

September 2012	BLACK LION HOSPITAL, ETHIOPIA Dr Tim Fletcher Dr Sam Martin	April 2013	BLACK LION HOSPITAL, ETHIOPIA Dr Graham Forward Dr Tim Keenan Dr Mike Wren Dr James Marangou Mr Paul Tye	May/June 2013	TULEAR, MADAGASCAR Dr Li-On Lam Dr Simon Zilko Mrs Lucy Harris Ms Cassie Smith
October / November 2012	TULEAR, MADAGASCAR Dr Graham Forward Dr Digby Cullen Dr Sue Chapman Dr Rhys Clark Dr Paul Smith Ms Catherine Poole Dr Zoe Wake		HARGEISA, SOMALILAND UWA Medical School Prof. Ian Puddy Dr Don Howarth Dr Rashmi Patel Dr Sarah Hodson Em. Prof David Allbrook		
November 2012	HARGEISA, SOMALILAND UWA Medical School Dr Luigi D'Osorgna Dr Don Howarth		HARGEISA, SOMALILAND Dr Graham Forward Dr James Marangou Paul Tye Dr Elias Ahmed (Ethiopian Orthopaedic Surgeon) Dr Nasridin Yusuf (Ethiopian Orthopaedic Surgeon) Dr Yohannes Nigussie (Ethiopian General Surgeon)		

Areas of Expertise

ORTHOPAEDIC

Dr Tim Fletcher
Dr Sam Martin
Dr Graham Forward
Dr Tim Keenan
Dr Mike Wren
Dr Li-On Lam
Dr Elias Ahmed
Dr Nasridin Yusuf

GENERAL SURGERY

Dr Yohannes Nigussie

UROLOGY

Dr Sue Chapman

GASTROENTEROLOGY

Dr Digby Cullen

ANAESTHETICS

Dr Paul Smith

PAEDIATRIC REGISTRAR

Dr Zoe Wake

TEACHING (UNIVERSITY OF WESTERN AUSTRALIA)

Dr Luigi D'Osorgna (Paediatric Cardiologist)
Dr Don Howarth (General Physician)
Prof Ian Puddey (Dean, School of Medicine)
Dr Rashmi Patel (Anaesthetist)
Dr Sarah Hodson (Emergency Physician)
Em Prof David Allbrook (General Teaching)

REGISTERED/THEATRE NURSES

Catherine Poole
Lucy Harris

ORTHOPAEDIC REGISTRAR

Dr Rhys Clark
Dr Simon Zilko

PHYSICIAN REGISTRAR

Dr James Marangou

OTHER

Paul Tye (Logistics)
Cassie Smith (Research)

Management Committee

DR GRAHAM FORWARD

Dr Graham Forward has been the driving force behind Australian Doctors for Africa since the first official medical team went to Somalia in February 2005. Bringing a wealth and mix of business and medical acumen to the organisation, Graham's standing with the orthopaedic community both in Western Australia and Australia has enabled the growth of medical teams to continue. Recognised as the Australian of the Year in the 2010 Shire of Peppermint Grove Awards, Graham has numerous other recognition awards for his humanitarian endeavours. He has held various medical positions within the Australian Orthopaedic Association (WA).

JEANNE BELL

Jeanne Bell provides financial and organisational skills and as Chair of the Events and InCom Committees provides direction, experience, expertise and acumen for fund raising events and activities. Appointed in 2005, Jeanne has a background in the commercial building construction industry having held the position of financial controller for a private building construction company for over 12 years. A background in Applied Science, Jeanne has been associated with several community service organisations.

CHRISTINE TASKER

Christine Tasker is Practice Manager and Personal Assistant to Dr Graham Forward and has held this position for 21 years. Christine is an inaugural member of the Management Committee of Australian Doctors for Africa. She brings strong administration skills to the organisation and is prominent in the logistics of liaising with and co-coordinating the volunteer medical teams. Christine is a proactive member in fund raising activities and functions. Prior to her current position, Christine nursed at SJOGH Subiaco, Hollywood Hospital, King Edward Hospital, Morawa District Hospital and the Red Cross Blood Transfusion Service.

HELEN ASQUITH

Helen Asquith joined Australian Doctors for Africa in November 2012.

Helen is a highly experienced and regarded health planner, with 20 years health planning and project management experience gained on some of some of Western Australia's largest health campuses, including St John of God Health Care's Subiaco and Murdoch Hospitals, the Fiona Stanley Hospital and the Midland Heath Campus.

Helen is a graduate of UWA and has been associated with other community service organisations. She brings strong practical and managerial skills to the organisation and has finalised ADFA's application for AusAID accreditation.

IAN PAWLEY

Ian Pawley started working with Australian Doctors for Africa in 2009, and was invited to join the Management Committee in 2011. He has been primarily assisting ADFA in its quest for accreditation with the Australian Government and financial management.

Ian has an Honours degree in Economics from London University and has had a distinguished career in high schools and senior colleges. He has also lectured at Curtin University, for the Securities Institute of Australia, University of W.A. Extension courses and The Stock Exchange. For the past 17 years he has been Director of a Building company. Ian brings a varied business background to ADFA and is looking forward to the challenges of sustaining ADFA's unique position as a high quality charity and its wonderful record of assisting people in Africa.

DAVID MARTINO

Chair – retired in April 2013

PAUL TYE

Retired November 2012

Australian Doctors for Africa is a member of the Australian Council for International Development (ACFID) and is a signatory to the ACFID Code of Conduct, which is a voluntary, self-regulatory sector code of good practice.



The Code of Conduct requires members to meet high standards of corporate governance, public accountability and financial management

More information on the Code, including how to make a complaint, can be obtained from ACFID

by visiting www.acfid.asn.au or emailing code@acfid.asn.au.

Australian Doctors for Africa also has a process for handling complaints which can be activated by phoning 08 388 1148 or emailing the Founder gforward@inet.net.au.



Robert Forward and Christine Tasker were presented with Certificates of Appreciation on behalf of the Somaliland Minister of Health for their valuable contributions towards the Somaliland community.

FINANCIAL REPORTS

It is our pleasure to present the financial position of ADFA which has seen continued sound operational and financial performance for its core activities.

Australian Doctors for Africa has been fortunate to maintain all our fully funded programs and services during 2012-13 partly due to contributions and donations from volunteers and the fact that ADFA has no significant administrative overheads. Our financial support has come from many fronts, including the unfaltering generosity of our individual corporates, donors and members; a Government grant through the AusAID Direct Aid Program; donation of goods in kind; and three major fund raising events. Our hard work in developing relationships over recent years has proved instrumental in helping us counteract the global financial crisis.

Australian Doctors for Africa recognises the significant contribution from several anonymous donors whose contributions has enabled ADFA's projects to be fulfilled.

KEY REVENUE AND EXPENDITURE ITEMS

- Revenue from general donations and memberships totalled \$97,941.05
- Revenue from fund raising events totalled \$60,150.45
- The cost of overseas training workshops and hospital administration costs decreased from \$16,357 to \$11,912.00 over the previous year
- Capital works with hospital projects were the most dominant expense at 38.5% followed by medical team visits at 25.7%
- The sea container costs have been maintained at 4.9%
- Administration costs relating to ADFA's activities were 8% due to insurance, bank fees, printing, fund raising expenses and general administrative expenses
- The voluntary nature of ADFA's operations does not incur any salary costs

STATEMENT OF FINANCIAL POSITION

Key movement in assets included earmarking over \$300,000 for a specific building project in Ethiopia.

The investment portfolio continues to provide a dividend.

Australian Doctors for Africa does not have any current liabilities.

STATEMENT OF CASH FLOWS

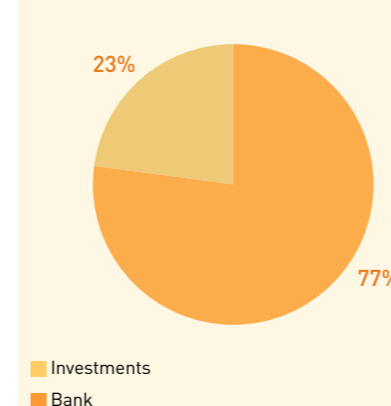
The statement of cash flows indicates a positive trend although there has been increased investment in hospital administration related activities and the number of medical team visits.

In summary, some of the key achievements were:

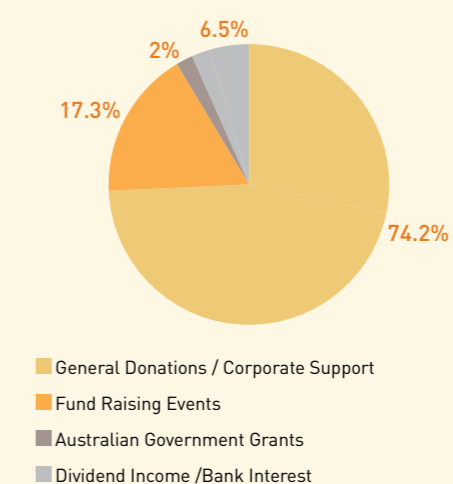
- A continuation of overseas training programs
- Continuation of our sea container programme
- An increase in the number of capital works projects at hospitals
- An increase in the number of medical team visits
- A stabilisation in the number of medical practitioners from 30 to 31 over the previous year

ADFA has continued to maintain a strong balance sheet and is financially well positioned to meet its ongoing commitments for 2013-2014.

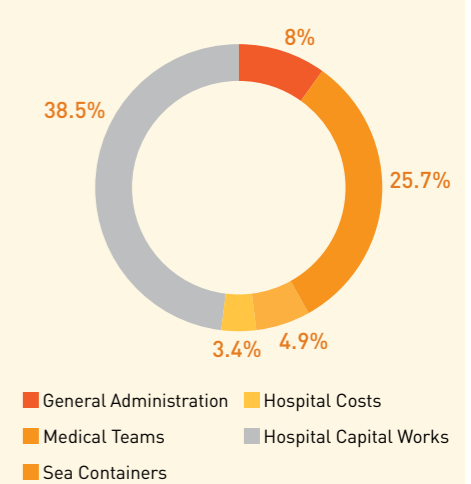
ASSETS



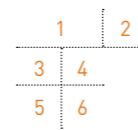
SOURCE OF REVENUE



WHERE OUR FUNDS WERE SPENT



FUND RAISING



- 1 Farewell ceremony to the UWA Medical School teaching team in Hargeisa
- 2 Dr Usuf examines a patient at the Hargeisa Group Hospital
- 3 Dr Simon Zilko with young patients in Tulear
- 4 The renovated operating theatre at the Hargeisa Group Hospital
- 5 TSC supervising the unloading of a container in Hargeisa
- 6 Dr Forward consulting at the Hargeisa Group Hospital



During the last twelve months, there have been three significant fund raising events.

There were two significant fund raising events in November 2012.

Ms Cherrie Genat organised the second Sponsors Golf Day at the Royal Fremantle Golf Club. ADFA is very grateful for the time and effort put into this event and thank all the players and corporate sponsors who supported the occasion.

Once again, ADFA was indebted to the generosity of Peter and Tanya Young who opened their garden as part of their corporate social responsibility to charities. Guests were entertained by young musician students from St Hilda's private girls school.

The 'Little Feet Walk' in May is now in its sixth year and continues to be the major fund raising event on the ADFA calendar. Funds from the event are directed towards the talipes program in Ethiopia and Madagascar. Continuing with the backdrop of the Cottesloe foreshore the walk attracted 250 participants and a major corporate sponsor.

ADFA are particularly appreciative of those who continually support our work. ADFA would like to recognise the contribution of the Events and InCom Committees in organising events and the number of volunteers who assisted with their implementation.

Throughout the year, Australian Doctors for Africa has been well assisted through donations from corporate partners, and we would like to recognise the following:

Smith + Nephew, for their ongoing support for our talipes program; the EK Foundation for their generous assistance with airfares; Air Mauritius for their valued contribution towards excess luggage and air freighting

equipment; Primewest Management for their donation and project management acumen; the management team of Regis Resources for their significant donation; and Ansell Health for surgical gloves.

This year, we have accumulated a great deal of medical equipment as part of our sea-container priority. It is estimated that the value of donated medical goods and equipment shipped in sea containers and pallets was just under \$1m.

This year, we continued to monitor the volunteering model to better evaluate the value of the hours that ADFA volunteers provide.

Ian Pawley and Jeanne Bell, Management Committee

ACKNOWLEDGEMENTS

The backbone of the Events Committee, Jill Goetze, Susan Readhead, Sami Tadros, Susie Penco and Genevieve Ellison, who have worked tirelessly throughout the year putting together the organisation and logistics necessary to make the fundraising events so successful.

Christine Tasker for her organisational, administration and data information skills and coordination of medical team visits.

The InCom Committee members, Geoff Potter, David Price and John Cochrane for their corporate knowledge and networks.

Mr Robert Forward and David Cribb for their immense efforts in organising the collecting, storage and loading of medical equipment and supplies for the sea container programme.

Megan Aitken and Sandie Jupper (volunteers) for their assistance in the ADFA office and newsletters.



ADFA Chair, David Martino, and Ms Tanya Young at the opening of the Garden Soiree.

FINANCIAL NOTE

The 2012-13 financial reports for Australian Doctors for Africa have been fully audited by Somes Cooke Chartered Accountants. The account received an unqualified audit opinion which complies with legislative and financial requirements and reporting standards. A full copy of the audited accounts is held at the Australian Doctors for Africa office and principal place of business at 219 Onslow Road, Shenton Park, Western Australia.

SPONSORS AND CORPORATE DONATIONS

As a charity and volunteer organisation, ADFA relies heavily on the financial donations of its members, fund raising activities, sponsors and the corporate sector. Australian Doctors for Africa is very grateful for everyone's support, commitment and financial contribution as these have been vital in maintaining ADFA's sustainable operations.



We are extremely grateful to the Emirates Airline Foundation who has supported ADFA through complementary air travel to transport our medical teams to Ethiopia. In addition they have provided excess baggage weight so that the medical teams can carry vital medical supplies and medicines.



A significant contribution from Coopers Investors has afforded opportunities to provide services to the General Hospital in Tulear, Madagascar.



Peter Connor from Snap Printing West Perth continues to provide ADFA with printed stationery in the form of brochures, newsletters, flyers, posters, enlarging and laminating. They have supported ADFA since its conception and over the last 12 months have made a significant in-kind donation.



We thank Air Mauritius for their continued support in providing excess baggage for the medical team visits to Madagascar.



Donated plaster of paris bandages for the screening and treatment of talipes.



Ansell Asia Pacific has donated examination, surgical, cleaning and food processing gloves.



This is a voluntary organisation that works in partnership with ADFA to provide wheelchairs for children based on world health guidelines.

We also have strong advocacy, financial, in-kind or product donation support from many other organisations that are recognised below.

JULIAN RANDALL WEBSITE
SOMES & COOKE CHARTERED ACCOUNTANTS

TOLIARA SANDS MINING
MALAGASY MINERALS
HELLENIC SEWING GROUP

SUNSET
OLYMPUS
DHL EXPRESS & SERVICE CONTAINERS
SALAMARK

DAVID HEWITT & CO
GILBERT & TOBIN

ADFA would like to acknowledge the significant contribution of Chil3 in the design and production of this document.
chil3.com



Australian Doctor for Africa
Volunteer medical team working in Ethiopia, Somaliland
and Madagascar.
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Registered charity DGR Status
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