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## Our Impact 2021–22

#### Clubfoot

Number of children treated in

#### Clubfoot

565,575

#### **Medical equipment**

donated

**Medical professionals** 

**Medical technology** 

#### Pieces of COVID-19 PPE

**Air freight shipments** 

Scholarship recipients

Sea containers

**Hospitals supported** 

# Message from the Founder & CEO

2022 was a year of great accomplishment as Australian Doctors for Africa maintained a high level of activity, growing the delivery of equipment by container, air freight and direct purchases from Indian orthopaedic equipment manufacturers.



Dr Graham Forward

The team led by Graeme Wilson and Dawn Edwards have been magnificent – all shipments have arrived; all accounted for; and all delivered to trusted partners.

The Perth office, Madagascar offices and volunteers at all projects have been steadfast, creative and enthusiastic.

Congratulations to you all. Australian Doctors for Africa is built on its commitment to 'train and equip' medical specialists overseas, and we rely upon generosity of spirit and goodwill at all levels.

During tumultuous global times, ADFA has tentatively sounded out the possibilities of engaging with new countries, following our Strategic Plan. South Sudan is the world's newest country and three orthopaedic surgeons have completed the training program in Ethiopia and have returned to Juba. An MOU has been agreed with the Minister of Health and the Board has approved several small, very low risk ways of engaging through a partnership with St Therese Hospital in Nzara.

Congratulations to long time ADFA volunteer, Dr Sue Chapman, who is the recipient of this year's Urological Society of Australia and New Zealand (USANZ) Christchurch Medal, in recognition of urologists who have provided exceptional service and contribution to the improvement of quality of life, through humanitarian endeavours.

Prof David Wood, with CURE International, will conduct a Sarcoma Training Course in Bulawayo, Zimbabwe, and carry out of a scoping study for possible ADFA involvement in the future.

Meanwhile, volunteer visits are likely to resume cautiously to Ethiopia, Somaliland and Madagascar in the second half of 2022, as a prelude to a more comprehensive program in 2023.

Chair, Mr John Bond, is a steady hand and wise counsel to us all. Respect from all Board members, staff, volunteers and donors, and personal thanks from me.



Dr Sue Chapman, USANZ Christchurch Medal recipient 2022.

# Message from the Chair

The global situation has remained extremely challenging, particularly for those less well off on our planet.



John Bond

Whilst western countries are once again open for trade and tourism, it has been a slower path to "normalisation" for the countries of East Africa.

COVID-19 is still a significant challenge for already stretched health systems and now famine is an additional hardship for people is this region. In Tigray, northern Ethiopia, many are now struggling to survive without adequate food and southern Sudan is facing similar circumstances. On top of this, political unrest and fighting are present in Ethiopia, Somalia and South Sudan.

Despite this backdrop, it is heartening to report that medical assignments are about to recommence after a three year hiatus. This has always been the core work of Australian Doctors for Africa and our medical and logistics volunteers have lost none of their enthusiasm. An early trip will be to Madagascar to progress our Endoscopy Centre project which will be the largest development ever undertaken by ADFA and one that promises to improve the lives of thousands of people who suffer from a totally curable condition caused by parasitic infections. There

is much to be done including a large fundraising effort but I'm confident that the drive and determination of Dr Digby Cullen and Dr Graham Forward will see this Centre materialise.

In the absence of medical trips, ADFA has accelerated its scholarship program for post graduate doctors and Fellows and as these qualified surgeons and doctors return to their communities it has a multiplier effect on ADFA's training and moves communities towards being self sustaining which is the ultimate goal of any aid organisation.

In addition, donated medical equipment and supplies have continue to be shipped, sometimes with innovative solutions by Graeme Wilson, our volunteer logistics guru, as container costs have rocketed and ports have clogged up. Somehow he always seems to find a way.

Finally, a word on our corporate restructure, which is now complete. We have 3 new directors. Peter Abery, an experienced and successful international businessman who is also an expert in corporate governance and lectures in this field for The Australian Institute of Company Directors. He has given generously of his time and ADFA has benefitted enormously from his expertise.

Nandini Doreswamy, based in Canberra, brings a unique background having been born in India, practised as a doctor and more recently worked in corporate administration. She has already provided useful links and contacts in India where we both acquire medical equipment and send post graduates for follow up training.

David McCoy is an international businessman with deep connections to

Africa and particularly Madagascar where he is a Director of the largest employer in the country. David has already provided assistance with in-country liaison and sound advice on potential fundraising opportunities.

Our retiring directors must be acknowledged for the outstanding contribution made to ADFA over many years. A big thank you to Dr Kate Stannage, Ian Pawley, Chris Tasker and Graeme Wilson who together with our founder, Dr Graham Forward really deserve credit for what ADFA is today – a highly regarded and effective charity assisting the world's neediest people. It should be noted that all this talent has been retained as they continue to work on the newly formed Management Committee.

I would like to close by thanking our part time staff who seem to do more than a full time job! Dawn Edwards, Rebecca Thompson and Judy Walls are both tireless and efficient, and never ruffled by the unexpected - which you can expect when working in Africa.

### Vision

Improving the health and lives of people in Africa.

### Mission

To develop healthier environments and to build capacity through the provision of voluntary medical assistance; training and teaching doctors, nurses and allied health workers; and improving infrastructure and providing medical equipment.

## Overview

#### Background

Established in 2005, Australian Doctors for Africa (ADFA) is a volunteer medical organisation, providing medical training and services, hospital equipment and infrastructure development for vulnerable communities in East Africa. Our aim is to **train and equip** to enable greater access to medical treatment and contribute to long term sustainable development.

ADFA is a not-for-profit organisation with no political or religious affiliations, based in Perth, Western Australia, that respects, protects and promotes human rights for all, regardless of race, religion, ethnicity, indigeneity, disability, age or gender.

ADFA currently works in Madagascar, Ethiopia, Somaliland and Comoros, where we have established strong collaborations and stakeholder networks with Ministries, government departments, medical facilities, other non-government organisations and the wider community.

#### Our Approach

ADFA is guided by a 5-year Strategic Plan adopted by the Board in November 2017, and reviewed in July 2021. A new strategic planning process will occur in 2023.

Our approach focuses on building capacity in the health systems of East Africa, through the development staircase:

**Medical Service Provision** – by volunteer medical teams in the specialist areas of orthopaedics, clubfoot, gastroenterology, urology, ENT, and obstetrics/gynaecology.

**Skills Transfer and Training** - through formal, on the job, on-line, and other training opportunities including scholarships and fellowships.

Infrastructure Development and
Equipment – through construction or

renovation of existing infrastructure, and provision of medical equipment and supplies.

Advanced Development – through prevention activities such as clubfoot screening and treatment programs, building partnerships, and support to strategy and policy development.

#### Extending our Reach

ADFA has been exploring opportunities to support the health sector in other countries:

South Sudan – with significant challenges in its struggle for democracy, faces mounting health deficits. ADFA has entered into a Memorandum of Understanding with the Ministry of Health, to consider how it may provide future support in this sector.

Mauritius - ADFA has worked in harmony with the Mauritius Medical Council and the Australian High Commission particularly related to training. ADFA is exploring opportunities with Curtin Mauritius' new nursing school, and the potential for scholarships for nurses from Madagascar.

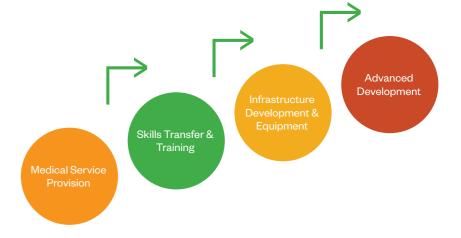
**Zimbabwe** – a Sarcoma Training Course, in association with CURE International UK, is planned for September 2022. Prof David Wood will also undertake a scoping study of potential opportunities for ADFA involvement.

#### Strategic Priorities

During the 2021-22 year, no overseas medical assignments were undertaken, for a second consecutive year. ADFA has continued to focus on its mission and vision, and delivering on its strategic priorities in the following ways:

#### **Current Focus**

- Reduce exposure to COVID-19 for volunteers, staff and overseas medical colleagues.
- Build capacity through provision of medical equipment and supplies to hospitals in East Africa.
- Planning for the likely resumption of overseas medical assignments in late 2022.
- Maintain on-line training seminars and mentoring by ADFA volunteers.
- Additional scholarships to African medical professionals.
- Provision of PPE to collaborating hospitals.
- Collaboration on development of low cost medical equipment and technology.
- Support for partner organisations in Somaliland and potential new partnerships.
- Strengthen ADFA's internal policies and practices to reflect best practice.
- Strong engagement with ADFA supporters and volunteers through a range of media.



# Sharmarke's Story





Sharmarke was born with a clubfoot deformity of the right foot. He and his family live in a small village close to the Somaliland border with Ethiopia.

The family are livestock herders like many other families in the area. They have 5 children including Sharmarke. Sulekha, his older sister was born with bilateral clubfoot deformity and was treated by Diversity Action Network (DAN), a partner of Australian Doctors for Africa, in 2015.

Sharmarke was brought to DAN's big plans clubfoot clinic in Hargeisa in November 2021 when he was 7 months old. Ponseti treatment was started and after 5 weeks of manipulation and weekly plasters, a tenotomy procedure was undertaken to maximize the correction. The tenotomy was done by an orthopedic surgeon based in Hargeisa Group Hospital, who was trained by ADFA. Plaster

castings continued, followed by the use of a prosthetic brace to prevent the recurrence of the deformity. The family now is back home and Sharmarke will be able to walk like any other child.

Sharmarke's mother expressed her happiness when the child's foot deformity was fully corrected. She has big plans for him in the future and wants Sharmarke to enrol in the local school when he reaches school age. Without the treatment provided by DAN, and supported by ADFA, children like Sharmarke would suffer life-long disability.

## Comoros

837,000



ADFA volunteers treating a baby with clubfoot.

ADFA's program in the Comoros traditionally involves 2 medical visits per year to support the local health sector, particularly in the area of orthopaedics, clubfoot and rickets.

ADFA has a strong partnership with the Caritas Hospital in Moroni, with which it works to deliver treatment and training to improve local medical capacity. The impact of the COVID-19 pandemic on our program has been significant, prohibiting travel and thus medical support to patients and training to doctors in Comoros for more than 2 years.

However, ADFA has used the time to continue to strengthen its systems, and maintain its relationships with partners such as Caritas Moroni so that upon the relaxation of border restrictions work may restart seamlessly.

To this end, ADFA provided vital medications to Caritas during the year to contribute to their outstanding work in responding to health needs in the community. This project was generously supported by Ausplow Farming Systems.

ADFA volunteers have maintained contact with their medical colleagues in Comoros, providing mentoring and support, where possible.

## Ethiopia

POPULATION 123.5 m



Infection Control Training, Wolaita Sodo, January

#### Medical Support

We are looking forward to our overseas medical assignments program resuming in late 2022. In lieu of visiting medical teams, we continued to support hospitals and orthopaedic departments with the provision of medical equipment, orthopaedic implants and training.

"The training you gave to our OR nurses had a very positive impact for our service improvements. Your autoclave and implant donation also helped us so much. We are in much expectation to improve the service we provide to our patients with your valuable donation. Thank you ADFA for your genuine effort in prevention of disability in our area."

Dr Abinet Hailemariam, Assistant Professor of Orthopedic Surgery, Wolaita Sodo

#### **On-line Training**

In August 2021, ADFA was invited to present remotely at the Ethiopian Society of Orthopaedics and Traumatology (ESOT) Annual Scientific Meeting. The session covered Upper Limb Orthopaedics and Trauma and reached 200 attendees. Many thanks to Orthopaedic Surgeons, Dr Paul Jarrett, Prof Andrew Mattin, Dr Aaron Tay and Dr Travis Falconer for presenting six very interesting lectures, and to Dr Graham Forward, session moderator, and Jake Warman, on-line organiser.

In October 2021, Orthopaedic surgeons, Dr Graham Forward and Dr Michael Wren, presented four remote sessions at the AO Alliance / ADFA Basic and Pre-basic Orthopaedic Courses, attended by 75 Orthopaedic residents.



Dessie Hospital Sea Container, April 2022.

#### **Infection Control Training**

During the year, ADFA's Ethiopia training team, Eyerusalem Amanu Legesse and Wondimagegn Tilahun Tefera, delivered Infection Control Training Courses at three regional hospitals in Wolaita Sodo, Hossana and Hawassa. Over 50 theatre nursing staff attended the 4 day training sessions, which included hand hygiene and standard precautions; sterilising, care and maintenance of instruments; prevention of fracture related infections; and sanitation of an operating environment. The Hospital and participant feedback has been very positive, with an increased level of understanding and changes in practice introduced.

#### **Equipment Provision**

Large quantities of orthopaedic implants, and donated Stryker drills, attachments, batteries and chargers were provided to hospital orthopaedic departments in Bahir Dar, Gondar, Wolaita Sodo, Hossana and Addis Ababa. "It is with great honor and joy when I inform you that we have received the orthopedics implants sent to us from ADFA. I would like to extend my heartfelt appreciation on behalf of my department and Tibebe Ghion Comprehensive Specialized Hospital for your invaluable support." (Dr Bahru, Head Department of Orthopedics & Traumatology, Bahir Dar University)

Support continued for the new orthopaedic wards at the Wachemo University Nigist Eleni Mohammed Memorial Referral Hospital in Hossana with delivery of a

donated anaesthesia machine, drills, pneumatic torniquets, orthopaedic implants and instruments.

An autoclave was purchased for Tikur Anbessa (Black Lion) Hospital, Addis Ababa, to improve sterilisation of operating instruments and implants.

During the year, Dr Biruk L Wamisho, the Head of Orthopaedics and Traumatology at Tikur Anbessa Hospital was elevated to full professorship at Addis Ababa University. ADFA has been by his side since his return from fellowship in Malawi and together have seen the amazing development of orthopaedics and traumatology in Ethiopia under his leadership. ADFA was represented by video link at his moving inauguration reception.

#### **Dessie Hospital Support**

In response to the conflict in Ethiopia, ADFA was requested to assist in the rehabilitation of the looted and damaged Wollo University Dessie Referral Hospital, located 400 km north of the capital, Addis Ababa. ADFA sent a sea container of donated medical equipment, including operating tables, anaesthesia machine, hospital beds and mattresses, wheelchairs, PPE and theatre supplies, which will support an operating theatre and refurbishment of wards. A new autoclave and a large shipment of orthopaedic implants were also donated.



#### Urology

Whilst our main focus in Ethiopia is on orthopaedics, we were invited to contribute to the National Strategic Plan for the development of Urology services. Dr Sue Chapman, a long time volunteer and Madagascar Urology team lead, and Dr Graham Forward, gave on-line presentations to the Urology Society of Ethiopia Annual General Meeting. "We as a Urology Society of Ethiopia and myself personally feel honored having you on our AGM. We are deeply indebted with your commitment. Thank you so much." (Dr Andualem Deneke Beyene, Consultant Urologist & Program Officer, Urology Society of Ethiopia)



Equipment donated to Aabet Hospital.

## Madagascar

29.6 m



Prof Rado Ramanampamonjy receiving gastro equipment.



Nurse Cath Poole - mainstay of Gastroenterology.

ADFA has been working in Madagascar since 2005 and it represents ADFA's largest program. Over the years, the volunteer program to Madagascar has grown significantly, and the clubfoot clinics have been resilient in the face of the pandemic, which after more than 2 years, has taken its toll on the medical sector and the community in Madagascar.

#### **Medical Support**

ADFA trains and equips facilities in a number of regions in Madagascar.

Medical volunteers provide treatment and training in the areas of orthopaedics, gastroenterology, urology, ENT, and obstetrics/gynaecology. Volunteer medical assignments to Madagascar have been suspended since early 2020.

However, our specialist volunteers have been providing mentoring and support to their Malagasy colleagues where possible via digital communications.

An on-line training seminar was conducted by ADFA's ENT team in November 2021, with 15 Malagasy consultants and residents participating.

#### Spotlight on Gastroenterology

ADFA's Gastro Team, over many years, helped establish and maintain 6 endoscopy units at hospitals in Antananarivo, Toliara, Antsirabe, and Fianarantsoa. The team has provided training of local medical personnel, and ensured the supply of much needed equipment, including scopes, brushes, clips and other essential material. This year, support has extended to the provision of Personal Protective Equipment (PPE), including gowns, masks, gloves, and face shields, which has been essential in defence of medical staff against COVID-19.

A world class Endoscopy Treatment and Training Centre is a priority project for Antananarivo, and ADFA is busy with planning and fundraising to achieve this goal.



Young child during clubfoot treatment in Toliara.



ADFA Technician undertaking Ponseti treatment.



Young child after clubfoot treatment in Toliara.

#### Clubfoot

ADFA manages and staffs Clubfoot Clinics in Toliara and Ampanihy, and supports the government's program in Fianarantsoa. The aim of the clinics is to provide clubfoot screening and treatment to infants and children to reduce the risk of lifelong disability and to lower the burden of caregiving on families. ADFA supports all three clinics with equipment and supplies, including boots and plaster, and Dr Kate Stannage (Clubfoot Program Manager) provides training and mentoring in Ponseti treatment. In November 2021, ADFA imported 300 prosthetics from South Africa for use in treatment of children.

During the period, 141 babies and children were successfully treated for clubfoot, a great result, given the challenges that families have faced in engaging with health services during the pandemic.

ADFA staff in Madagascar have played a key role in supporting all ADFA's programs in country, including the clubfoot clinics, and have done a wonderful job in maintaining the program in the face of such uncertainty.



## Somaliland

5.7 m



Delivery of PPE to Hargeisa Group Hospital.

"We express our appreciation to the ADFA team for this timely assistance and continuous support to HGH." Dr Askar, HGH Director.

#### Medical Support

Somaliland continued to face significant challenges due to the pandemic prompting ADFA to assist Hargeisa Group Hospital (HGH) with a large quantity of Personal Protective Equipment (PPE) and other equipment. Supplies included 10,000 face masks, 27,000 pairs of gloves, 150 oxygen masks, thermometers and pulse oximeters.

The Orthopaedics team at HGH received two kits of orthopaedic implants and instruments, along with donated drills, to improve surgical outcomes for their patients.

In June 2022, a sea container was packed and sent from Australia to Somaliland, carrying nearly 4,000 kg of donated medical equipment valued at approx. A\$204,000. A variety of equipment was sent including wheelchairs and patient trolleys, autoclaves, ventilators, arthroscopy stacks, patient monitors, a diathermy machine, and other surgical equipment, supplies and instruments. This equipment was destined for HGH, Edna Adan Hospital, Diversity Action Network, and Taakulo Somali Community.

Included in the container was a prototype C-arm Image Intensifier (x-ray), which had been developed in Australia particularly for use in resource poor contexts, and was sent to HGH for their collaboration in terms of testing. Also in the container was another equipment prototype – a low cost ventilator developed in response to the pandemic, which HGH had also agreed to test (more information on these technology collaborations on page 19).

ADFA's collaboration with HGH continues to grow, and planning has begun for a joint project also involving Himalaya Cataract Project and DAK Foundation, to treat cataracts in the population in Hargeisa next year.

Taakulo Somali Community, a long and valued partner, assisted ADFA greatly throughout the year, including sourcing and delivering PPE, receiving the container of medical equipment from Australia, and distribution to ADFA's partner hospitals and organisations. Due to the growing support that ADFA provides to Somaliland, ADFA has provided increased organisational capacity to Taakulo to assist with these programs.



Wheelchairs for Kids donation happily received.

Child in treatment for clubfoot.

#### Clubfoot Program

Diversity Action Network (DAN) is a non-government organisation working across Somaliland promoting the protection, inclusion and participation of vulnerable people. DAN has partnered with ADFA for many years, to deliver clubfoot screening and treatment for babies and children in Hargeisa, Borama, Burao and Erigavo. During the year DAN successfully treated 69 children (21 girls & 48 boys) and organised 17 tenotomies, a procedure often required to ensure full recovery from clubfoot. An important activity is raising awareness about DAN's clubfoot treatment services with medical professionals in the regions. Over the year, 90 medical staff participated in awareness raising sessions in Borama, Burao and Hargeisa, which will assist in encouraging more families to bring their children to DAN's clinics.

The sea container sent from Perth in June contained 20 wheelchairs specially designed for children. These were very generously donated by Wheelchairs For Kids, a not-for-profit organisation based in Perth, which has strongly supported our work over the years. These wonderful wheelchairs are life changing for disabled children and their families.

#### Scholarships

ADFA has continued its scholarship program during the year, supporting 20 Somaliland doctors in their specialist training in Ethiopia (4 women & 16 men), and an additional 5 Somaliland medical students, the majority studying at Edna Adan Hospital (4 women & 1 man). Further information regarding the Scholarship Program can be found on page 16.



Unloading sea container of donated medical equipment in Hargeisa

## Scholarship Program



Dr Hana & Dr Manal studying orthopaedics at Jimma University Hospital.



Dr Mohamed Farah studying ENT at St Paul's Hospital Millennium Medical College.

Now in its eighth year the ADFA Scholarship Program, developed to support capacity building and upskilling in the Somaliland healthcare system, has expanded from doctors studying various specialities receiving a living allowance scholarships and medical students receiving tuition fees to include scholarships awarded to doctors to complete Orthopaedic Fellowships in India.

During the year ADFA supported a total of 27 scholarships recipients:

Twenty doctors are enrolled in speciality training in Ethiopia:

- Sixteen male Doctors studying Orthopaedics (6), ENT (1), General Surgery (5), Neurosurgery (3) and Urology (1).
- Four female Doctors studying Orthopaedics (2) and Obstetrics & Gynaecology (2).

One male doctor is studying Obstetrics & Gynaecology at Makerere University in Kampala, Uganda.

Two medical students (1 female) are training in colleges in Addis Ababa, Ethiopia.

Four medical students (1 male and 3 females) are studying at Edna Adan University Hospital in Somaliland.

ADFA continues to receive more requests for support than can be met.

The Scholarship Committee assesses the potential recipients and awards as many as possible within the constraints of mentoring and funds availability.

ADFA is appreciative of the continuing commitment of the Scholarship Committee.

#### **Fellowships**

Fellowships are the final stage of ADFA's scholarship program for advanced specialised training and building capacity in the African health care system. Two ADFA candidates have begun the process to take up fellowship positions in Orthopaedic and Traumatology at the Ganga Hospital in Coimbatore India, commencing in July 2022.



Dr Said Osman Dahir (Orthopaedic Surgeon).



Dr Bashir Abdi Ibrahim (General Surgeon).

#### Graduations

The medical student attending Africa Medical College in Ethiopia completed his studies in December 2021 and returned to South Sudan. The four medical students at Edna Adan University in Somaliland will complete their studies in August 2022.

In December 2021 two scholarship recipients competed their studies in Orthopaedics and General Surgery.

At the beginning of his Orthopaedic specialty training in February 2018, Dr Said Osman Dahir was awarded an ADFA Scholarship. Four years later, he has graduated and returned to work at Edna Adan and Hargeisa Group (HGH) Hospitals in Somaliland.

"I am very glad being the third Orthopaedic Surgeon for my country trained through Australian Doctors for Africa scholarship. This scholarship means a lot to me and my needy Somaliland community. For me this scholarship means that I have reached my ambition and my dream to become orthopaedic surgeon as well as it was changed my thinking as a physician and person. For my community, it increases accessibility of orthopaedic care for the poor as well as rich patients. Training local physicians is much better than giving foreign donation, and ADFA gave me training which is lifelong donation for my career. This scholarship armed me with knowledge and skills that I will use to treat my needy patients and to train young Somaliland physicians." (Dr Said)

Dr Bashir Abdi Ibrahim was two years into his General Surgery training before receiving an ADFA scholarship in June 2019. He has now completed his specialty training and aims to become a competent and committed General Surgeon.

"As you aware the significant needs of my country and people for general surgeon, I would like to fill that gap as much as I can. In the future, I would like to work in public hospitals in order to teach and train young Somaliland physicians and treat needy patients." (Dr Bashir)

# Graeme's Story

### **GRAEME WILSON**

Volunteer,

"Being involved with ADFA has been a wonderful journey and I feel very fortunate to be part of a vibrant and forward thinking organisation."



It all started when ADFA requested shipping and logistical support from the company where I worked. ADFA, and the energetic Robert Forward, would organise volunteers to pack containers of medical equipment, and we would send them to their final destination in Ethiopia, Somaliland or Madagascar.

As I moved towards semi-retirement, volunteering with ADFA felt like a good fit. The ethos displayed by Graham Forward and the medical volunteers was exceptional. Sharing my 47 years of logistics experience was an opportunity for me to give back.

It is very rewarding to receive good quality medical equipment, and pack and deliver containers to support medical teams in hospitals in developing countries. This process has raised many interesting challenges, and over time we have streamlined our processes to ensure the efficient and effective use of donated

funds by ADFA. Since 2008, when I initially became involved, and later as an ADFA Board member, we have packed and shipped some 59 containers to our partners overseas.

When COVID arrived, we expected that we would need to go into hibernation from a logistics perspective. How wrong we were - instead this past 30 months has been our busiest period ever, moving equipment and necessary supplies, including PPE, in different ways to assist our partners and their communities during that difficult time.

## Low Cost Technology Development

ADFA has collaborated with a number of technology companies which have been seeking to develop low cost but highly efficient medical equipment. ADFA has supported these initiatives through testing equipment in controlled settings with partner hospitals, to potentially allow for wider distribution of low cost alternatives.

#### C-arm Image Intensifier



A C-arm Image Intensifier, or x-ray machine, provides particular benefits to orthopaedic surgeons due to its agility and flexibility, allowing multiple x-rays to be undertaken during surgery from a multitude of angles, providing greater precision and better outcomes for patients. This equipment, however, is extremely expensive.

A project was initiated to develop a low-cost durable model but of similar quality to those currently on the market. This project was driven by Dr Des Soares, an Orthopaedic Surgeon in Queensland, and Mick Caratti of Lycopodium, an international engineering firm, along with Alloytech Pty Ltd. ADFA has partnered with Hargeisa Group Hospital (Somaliland) to undertake testing. A successful outcome will provide significant benefits for hospitals, surgeons, and most importantly for patients in developing countries.

#### LycoVent Ventilator



In response to the pandemic and the global shortage of ventilators, Lycopodium in collaboration with Dr Anna Negus and Dr Paul Sadleir, embarked upon the development of a low-cost ventilator for use in emergency situations, but also suitable for resource poor environments. After clinical trials at Sir Charles Gairdner Hospital in Perth, ADFA has partnered with two East African hospitals to test the ventilator where the need for such a device is significant, not only in response to the pandemic but more broadly to supplement the limited healthcare options available.

# Governance and Integrity

Australian Doctors for Africa is a proprietary limited company with two Directors, Dr Graham Forward and Mr John Bond. The overall management of Australian Doctors for Africa, however, is entrusted to the Board.

The organisation has a voluntary Chief Executive Officer (Dr Graham Forward) and three part-time staff (2.1 FTE). The current Chair of the Board is Mr John Bond, a prominent local, national and international businessman.

In the latter half of 2021, a review of ADFA's governance structure was undertaken by an experienced governance specialist, which resulted in a restructuring of the Board. Three new board members were appointed, following the resignation of four of ADFA's long standing board members, who were warmly thanked for their outstanding dedication to the organisation. Fortunately for ADFA, they continue to engage with the organisation as members of the Management Committee or in a program advisory capacity. Each new board member brings business acumen,

governance, and other experience to the organisation through their diverse skill sets and provide their services on a voluntary basis

From November 2021, the Board comprised:

- Mr John Bond, Chair
- Dr Graham Forward, Founder and CEO
- Mr Peter Abery
- Dr Nandini Doreswamy
- · Mr David McCoy

The Board met on ten occasions throughout the year.

Board Member	First Meeting	Resigned	Meetings	
			Eligible to Attend	Attended
John Bond	February 2016		10	10
Dr Graham Forward	February 2005		10	10
Peter Abery	November 2021		7	4
Dr Nandini Doreswamy	November 2021		7	4
David McCoy	November 2021		7	7
lan Pawley	June 2011	October 2021	3	2
Kate Stannage	February 2016	October 2021	3	2
Christine Tasker	February 2005	October 2021	3	3
Graeme Wilson	February 2014	October 2021	3	3



Infection Control Training in Hossana operating theatre.



The Board has appointed two Committees which include:

# the Clinical Governance Committee, comprising Dr Shirley Bowen (Chair), Dr Rob Storer and Dr Graham Forward, who ensure best practice and medical governance for our activities; and

#### the Scholarship Committee, comprising Dr David Samuels (Chair), lan Pawley, and Rebecca Thompson, who review and recommend the most appropriate medical scholars to receive support from ADFA.

The organisation continues to strengthen its policies and procedures to foster a culture of strong governance and compliance with ACFID guidelines. The internal systems of management are now well established and implemented by an experienced office team.

The Board has ensured that the implementation of the Strategic Plan has continued with some agility amidst the dynamic COVID-19 environment. The Board has continued to assess risk, review and approve programs, approve budget requirements, review new and revised policies, and overseen adherence to ACNC and ACFID regulations and guidelines.

#### Board

**Dr Graham Forward** is a Western Australian Orthopaedic Surgeon with primary medical degree of The University of Western Australia, and fellowship of the Royal Australian College of Surgeons and fellowship of the Australian Orthopaedic Association (AOA).

Following the tsunami of Boxing Day 2004, Graham assembled an emergency and traumatology team to provide assistance in Bosaso, Somalia, at the request of local doctors and surgeons. From that visit in February 2005, Australian Doctors for Africa was incorporated as an organisation to help sustainable development of surgical, medical and health services in Africa.

Graham continues as a busy Orthopaedic Surgeon in Perth and includes outreach to the Kimberley region of Western Australia, and Cocos (Keeling) and Christmas Islands.

Recognition has been received by the Order of Australia (AM), the John Curtin Medal, the G M Bedbrook Oration of the AOA, Australia Day Citizen of the Year, nomination for the Australia of the Year (WA) and the Ethiopian Society of Orthopaedics and Traumatology Award.

**John Bond** is one of the founders of Primewest, a national property investment business, and has been instrumental in its growth and development over the last 25 years. His background spans law, investment banking as well as property investment and development. He holds board and equity positions in a range of companies in diverse sectors including Lexus of Perth, Energy-Tec and Core Vision

He holds degrees in Law and Commerce from The University of Western Australia and is a Corporate Member of the Property Council. He was the founding Chairman of The Fathering Project, a not-for-profit organisation focusing on the importance of a father figure in children's lives. He was previously a board member of the Art Gallery of Western Australia Foundation and the Martu Charitable Trust.

John has been a supporter of, and passionate about ADFA since visiting Ethiopia with Graham Forward and witnessing first hand the tremendous impact it has on the lives of local people and has been Chair of the Board since February 2016.

Peter Abery is a professional director and a business, governance and strategy consultant. He provides advice to boards on a variety of matters including strategy, board performance evaluations, board and committee structures, board and CEO relationships, and effective board governance practices and processes.

He has been an education facilitator for the Australian Institute of Company Directors for the past twelve years on their various public and in-boardroom courses.







Training with Dr Michael Wren.

His consulting services have covered business turnaround strategies and implementation, mergers and acquisitions, organisational structure, business efficiency and effectiveness, and coaching of senior executives.

He has held various chief executive roles in Australia, the UK and South Africa. He has worked with private equity, start-up businesses, privately owned businesses, listed companies and in mergers and acquisitions. He has held a number of non-executive company director and chair roles of publicly listed, unlisted, private and NFP companies.

Peter Abery holds a M Sc Electrical Engineering, an MBA and has completed the International Senior Management Program at the Harvard Business School. He is a Fellow of the Australian Institute of Directors.

Dr Nandini Doreswamy has significant experience in leadership, management, health, and technology. She holds an MBBS, a Masters in General Surgery, an MBA, and accreditations in technology, projects and leadership. Her areas of interest include governance, risk, health, technology, climate change, and sustaining human relevance in an Al-driven future. She is committed to all aspects of equality, including racial and cultural equality and respect, equity for indigenous peoples, and gender/nongender equity.

Nandini was nominated by the federal government as a Distinguished Talent and granted Australian citizenship on this basis. She is a Graduate of the Australian Institute of Company Directors and a Chartered Fellow of the Institute of Managers and Leaders (Australia and New Zealand).

David McCoy's African adventure began as an exchange student in the late 1980s in South Africa.

David brings his 30-year global business experience to the ADFA Board. He is the Executive Chairman of TZMI, a globally recognised consulting firm that supports the world's opaque minerals and metals industries, particularly in the titanium

David has worked for clients in over 70 countries, including many African nations. He is a Chartered Professional Engineer (Chemical Engineering) and has a Master of Engineering Management (International Finance major) and a Graduate of the Australian Institute of Company Directors.

David has three teenage kids, is an enthusiastic junior AFL coach and a "completing the race is winning" triathlete.

#### Accountability

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

ADFA also has a process for handling complaints, available on our website. which can be activated by phoning 08 6478 8951 or emailing the CEO at ceo@ausdocafrica.org.

Australian Doctors for Africa is a registered charity with the Australian Charities and Not-for-profits Commission (ACNC) and complies with the regulations of the ACNC through governance self assessments, Annual Information Statements and financial reports.

ADFA is also endorsed as an income tax exempt charitable entity and endorsed as a Deductible Gift Recipient under the Income Tax Assessment Act 1997.





# Directors' Concise Financial Report

The Concise Financial Report is an extract from the Financial Statements and has been prepared in accordance with AASB 1039 and the requirements set out in the ACFID Code of Conduct. For further information on the Code please refer to the ACFID website www.acfid.asn.au.

The financial statements and specific disclosures included in the Concise Financial Report have been derived from the Financial Statements. The Concise Financial Report cannot be expected to provide as full an understanding of the financial performance, financial position and finance and investing activities of the company as the Financial Statements. Further financial information can be obtained from the Financial Statements which is available free of charge on the Australian Doctors for Africa website www.ausdocafrica.org.

During the 2022 financial year, Australian Doctors for Africa had no transactions for international political or religious proselytisation programs.

The Concise Financial Report includes both cash and non-cash income and expenditure. The value of non-cash items is calculated in accordance with guidelines set by the Department of Foreign Affairs and Trade.

The financial reports reflect another successful year delivering COVID-19 adapted advanced development programs in our target countries. I draw attention to the following:

#### **Special Purpose Financial Report**

The Board have agreed that Australian Doctors for Africa is a non-reporting entity and financial reports should be presented as Special Purpose Financial Statements.

#### **Tax Concession**

The company is a Public Benevolent Institution endorsed to access fringe benefits and income tax exemption.

#### Grants

Grants which have specific performance obligations attached to them are initially recognised as a liability and subsequently reclassified as Revenue when the performance obligations are met. Grants which do not have sufficiently specific performance obligations are recognised when the entity obtains control over the funds, which is generally at the time of receipt.

#### **Non-monetary Donations**

Non-monetary donations make up a substantial proportion of the company's income and expenditure for 2022, a total of \$422,977 (2021: \$811,999). Donations of medical equipment and supplies are valued according to a written policy adopted by the Board. Donated services, such as airline flights and freight, are valued at current cost. Voluntary labour is based on rates determined by the Department of Foreign Affairs and Trade.

Our strong financial position will enable us to maintain our current programs and continue expanding new projects. Our low administration costs allow us to ensure the maximum amount of supporter donations are allocated to direct program delivery, assisting those most in need in East Africa.

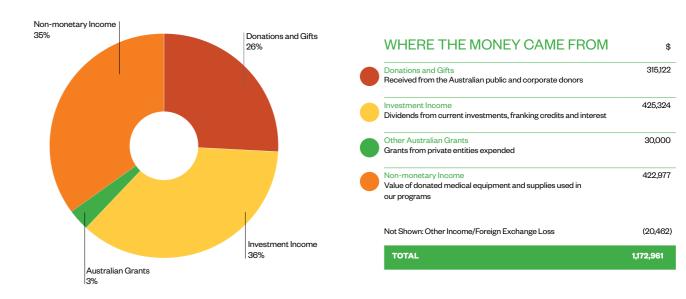
**Dr Graham Forward** Founder & CEO

# Concise Financial Report

CONCISE FINANCIAL REPORT		
For the Financial Year Ended 30 June 2022		
	2022	202
	\$	
STATEMENT OF CHANGES IN EQUITY		
Opening Equity	3,481,029	2,343,96
Transfer to Asset Revaluation Reserve	(581,000)	949,00
Net Surplus for the Year	(63,289)	188,06
CLOSING EQUITY	2,836,740	3,481,02
STATEMENT OF FINANCIAL POSITION		
ASSETS		
Current Assets		
Cash Assets	1,139,886	1,066,04
Current Tax Assets	128,663	107,80
Total Current Assets	1,268,549	1,173,85
Non-current Assets	1,200,049	1,173,00
Other Financial Assets	1,753,000	2,334,00
Total Non-current Assets	1,753,000	2,334,00
TOTAL ASSETS	3,021,549	3,507,85
LIABILITIES	0,02.,010	5,551,55
Current Liabilities		
Payable	32,573	(1,66
Provisions	32,144	23,70
Unexpended Grants/Donations	111,700	20,10
Total Current Liabilities	176,417	22,04
Non-current Liabilities	110,411	22,07
Provisions	8,392	4,78
Total Non-current Liabilities	8,392	4,78
TOTAL LIABILITIES	184,809	26,82
NET ASSETS	2,836,740	3,481,02
EQUITY	2,030,140	3,401,02
Contributed Equity	2	
Asset Revaluation Reserve	1,118,000	1,699,00
Retained Surplus	1,718,738	1,782,02
TOTAL EQUITY	2,836,740	3,481,02
	_,,,,,,,,,	-,,
STATEMENT OF COMPREHENSIVE INCOME		
REVENUE		
Donations and Gifts		
Monetary	315,122	335,28
Non-monetary	422,977	811,99
Grants		
Australian Grants	30,000	90,00
Investment Income	425,324	357,59
Foreign Exchange Profit (Loss)	(957)	(2,99
Government COVID-19 Subsidies	-	50,00
Other Income	(19,505)	
TOTAL INCOME	1,172,961	1,641,88
EXPENDITURE		
International Aid and Development Programs Expenditure		
Funds to International Programs	552,369	446,16
Program Support Costs	154,481	112,66
Accountability and Administration	106,423	82,99
Non-monetary Expenditure	422,977	811,99
TOTAL EXPENDITURE	1,236,250	1,453,82
Surplus (Deficit) from Ordinary Activities	(63,289)	188,06

## Financial Overview

The income and expenditure totals shown below are taken from the Concise Financial Report.





Note: Figures are rounded to the nearest per cent.

Note: Figures are rounded to the nearest per cent.

### LESLEY MEKAY CA

**CHARTERED ACCOUNTANT & REGISTERED COMPANY** 

EAST PERTH WA 6004

#### INDEPENDENT AUDITOR'S REPORT to the members of Australian Doctors for Africa Pty Ltd

#### Report on the Concise Financial Reports

I have audited the concise financial report of Australian Doctors for Africa Pty Ltd for the year ended 30 June 2022 as contained in the 2022 Annual Report which has been prepared in accordance with AASB 1039 and the ACFID Code of Conduct and other statutory requirements. The concise financial report is an extract from the full financial report. My opinion does not cover other information included in the Annual Report.

#### Directors' Responsibility for the Financial Report

The Directors are responsible for the preparation and fair presentation of the financial reports in accordance with Australian Accounting Standards, the Australian Charities and Not-for-profits Act 2012 and the ACFID Code of Conduct and for such internal control as the governing body determines is necessary to enable the preparation of financial reports that are free from material misstatement, whether due to fraud or error.

#### Auditor's Responsibility

My responsibility is to express an opinion on the financial reports based on my audit. I conducted my audit in accordance with Australian Auditing Standards. Those standards require that I comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance about whether the financial reports are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial reports. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial reports, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial reports in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the Directors as well as evaluating the overall presentation of the financial reports.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

#### **Opinion**

In my opinion, the concise financial reports present fairly, in all material respects, the financial position as at 30 June 2022 and the financial performance for the year then ended in accordance with Australian Accounting Standards and comply with AASB 1039 Concise Financial Reports and the requirements of the Australian Charities and Not-for-profits Act 2012 and the ACFID Code of Conduct.

#### **Emphasis of Matter**

I draw attention to Note 1 to the detailed financial report which describes the revenue recognition policy. My opinion is unmodified in respect of this matter.

#### **Auditor Independence Declaration**

In conducting my audit, I have complied with the independence requirements of the Corporations Act 2001 and Division 60 of the Australian Charities and Not-for-profits Act 2012.

16 September 2022

Listing R. M. Kay

## Grants and Corporate Support



ADFA acknowledges the support of the Australian Government through the Direct Aid Program.



For all their extraordinary assistance with storage and logistics.



We are extremely grateful to The Emirates Airline Foundation for long standing and loyal support.



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



For their financial support which has enabled many projects to be fulfilled.



Financial assistance and pharmacy products for our programs in Madagascar.



Bases Resources has supported ADFA in Madagascar through transport, executive support services and funding.



BlackEarth Minerals has supported ADFA in Madagascar through office and program support.



Becky Chilcott at Chil3 for design and production of Annual Reports.

#### We also have strong advocacy and in-kind support from:

Royal Wolf, logistics assistance

Lesley McKay, Chartered Accountant and Registered Auditor

**Lycopodium and Mick Caratti**, for collaboration in low cost technology development projects

#### Medical equipment and supplies donated by:

AxisHealth

Ansell

Boston Scientific

BSN Medical

Clinical Innovations Australia

Cook Australia

DAK Foundation

Defries Industries

DS Biomedical Karl Storz

Olympus

Smith & Nephew

Stryker

Uniforms West

Wheelchairs for Kids

7eiss Australia

Zeiss Australia
Zimmer Biomet

and many public and private hospitals

#### Financial support from:

Ausplow Pty Ltd

Jack Goodacre & Susan Sheath

onn Bond

L & R Uechtritz Foundation

Max Montgomery

Mimi & Willy Packer

Mutual Investments Pty Ltd

Old Money Pty Ltd

Pearce Family

Peter Woods

Peter Woods

Richard & Lesley Lockwood

Running Water Ltd

Sock It To Sarcoma

The Dalkeith Rotary Charitable Trust The Harry Secomb Foundation

The Very Good Foundation

and many other private and corporate donations

