

Annual Report 2010/2011



Leprosy
MISSION NZ

100 years of families helping families

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The Leprosy Mission New Zealand Incorporated Te Mihana Tuwhenua o Aotearoa

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Welcome

“Defend the cause of the weak and fatherless, maintain the rights of the poor and oppressed.” - Psalm 82:3

Our Global Goal: To Eradicate the Causes and Consequences of Leprosy

On behalf of the Leprosy Mission New Zealand Incorporated, we are pleased to present our Annual Report for the 18 month period ending 31st December 2011. We have extended this financial period to 18 months so that we can align our financial year with that of the wider Leprosy Mission International Fellowship.

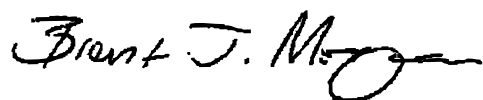
Thanks to the commitment and generosity of our dedicated supporters we have been able to touch the lives of thousands of leprosy-affected individuals and their families living in some of the world's poorest communities – in Ethiopia, India, Nepal, Bangladesh, China and Papua New Guinea. We invite you to read more about our work in these countries in the following pages, supporting people like Krishna from Nepal (page 19) and Geeta and Manajer from India (page 25).

A change to government funding policy in 2010 has meant significantly less government income in this reporting period. Thankfully, increased funding from our supporters has partially offset this – we are deeply grateful for your generosity and commitment. Adjusting to a lower level of government income will put more pressure on our cost to income ratio in the short term. We are responding to this by developing new income initiatives and closely managing our costs.

In 2012 the Leprosy Mission celebrates its centenary in New Zealand. So much has been achieved in the last century but five million leprosy-affected families around the world still desperately need our support. We know that a world without leprosy can be achieved in our lifetime, or our children's lifetime.

Thank you once again for your commitment to our mission.

With God's blessing,



Brent Morgan
Executive Director
Leprosy Mission New Zealand



Ross Dillon
Board Chair
Leprosy Mission New Zealand

About Us

100 Years of Families Helping Families

We are a Christian development organisation that works with leprosy-affected individuals and their families living in some of the world's poorest communities. Established in 1912, we are one of the longest serving and most trusted charities in New Zealand. We are part of the Leprosy Mission International, a leading Christian development organisation that has a presence in over 28 leprosy-affected countries around the world.

Thousands of New Zealanders have been supporting our vital work for 100 years, and we believe the long-standing connection we have with them is unique. It's a connection that is about so much more than giving money – it's about New Zealand families helping families living in the developing world who are disadvantaged by leprosy. This commitment to the Leprosy Mission has been passed down the generations, allowing us to give hope to countless leprosy-affected families around the world.

Our Global Goal is to Eradicate the Causes and Consequences of Leprosy

The Leprosy Mission New Zealand, relying on the grace of God and motivated by Jesus Christ, exists to eradicate both the causes and consequences of leprosy. We work in mutual partnership with individuals, families, communities and organisations to share resources, experience and learning. We actively support the right to a life of dignity for all people.

720 people are diagnosed with leprosy every single day in the developing world. And for every one person who is diagnosed, an entire family is impacted, meaning that thousands of people are affected by the disease and its consequences every day.

Eliminating leprosy from the face of the earth is about so much more than eradicating the disease itself. We are also committed to addressing the extreme poverty that makes families and communities more vulnerable to the disease in the first place. And we aim to break down the stigma surrounding the disease that prevents far too many people from coming forward to be diagnosed and treated, leaving them susceptible to long-term leprosy-related disabilities and further discrimination.

We are so close to completing our mission. In the last 30 years more than 15 million leprosy-affected individuals and their families have been cured, received medical care and been empowered to stand up for their rights. Today, five million families still urgently need our support.

The Work We Do is Diverse. Our Programmes and Services Include:

- Detection and Diagnosis of Leprosy
- Health and Disability Care
- Community Development to Combat Poverty
- Advocacy and Education to Fight Stigma
- Emergency Response and Preparedness

About Leprosy

Leprosy (or Hansen's disease) is caused by bacteria which attack nerves in the hands, feet and face leaving them numb. If left untreated, leprosy can affect the peripheral nerves and cause the fingers and toes to claw inwards. The disease can also attack the eyes, resulting in infections, cataracts and even blindness. Ulcers and infections in the hands and feet are common because bruises, cuts and burns are ignored when the skin loses sensitivity. Untreated infections can become so severe that disfigurement and amputations may result.

People living in poor communities are often highly vulnerable to leprosy. Dirty water, lack of sanitation, poor nutrition and lower standards of living mean people's immune systems are simply not strong enough to fight the disease.

There is a cure, and disability can be completely avoided if leprosy is diagnosed and treated early enough. A combination of drugs, known as multi-drug therapy (MDT), made up of three antibiotics – Dapsone, Clofazimine and Rifampicin – kills the bacteria, and the cure success rate is approximately 99%.

The Leprosy Mission International

The Leprosy Mission is over 135 years old, and was founded in 1874 by Irish missionary Wellesley Bailey.

While on a mission in India, Bailey came across a group of people sitting in isolation under a tree – they had been banished from their village because of their leprosy. He was deeply touched by what he saw and returned home determined to make a difference. Shortly afterwards, the Leprosy Mission was born.

In the early days of the Mission the focus was on treating the medical consequences of the disease. But in the early 1990s it became increasingly apparent that leprosy is as much a social disease as a medical one, and that the 'cure' needed to extend far beyond the initial treatment and address the poverty, stigma and discrimination that too often accompany the disease.

Although detection, diagnosis and treatment are still fundamental to our mission, our programmes and services have evolved over time to address both the causes and consequences of the disease. Today our work is diverse and includes community development, sustainable livelihoods, education and vocational training, advocacy, and emergency response and preparedness.

'The Mission has been born and cradled in prayer. It has been brought up on prayer; it has been nourished on prayer; and prayer has been at the bottom of its success since the first moments of its life.' Wellesley Bailey, Founder of the Leprosy Mission.

For more information on the global reach of The Leprosy Mission International, visit the website: www.leprosymission.org



Achievements in 2010/2011

It has been a challenging but extremely rewarding 18 month period at Leprosy Mission New Zealand. During this time period our loyal supporters have continued to give generously, which has helped us to make up for the short-fall in government funding in this financial period. Thanks to you, we have been able to remit \$2,886,969 to our life changing projects based in India, Bangladesh, China, Ethiopia, Papua New Guinea and Nepal. We cannot thank you enough for joining our Leprosy Mission family on our vital mission, to eliminate leprosy from the face of the earth.

Over the last 18 months our projects have continued to provide essential services and support to thousands of leprosy-affected individuals, their families and their communities. We are also extremely grateful to our partners in the field for their dedication and commitment to ensuring a positive impact on the lives of leprosy-affected people. In the following pages you will find a summary of some of our achievements for 2010/2011.



Bangladesh

Partner: Leprosy Mission Bangladesh

Chittagong Sustainable Development Project

Chittagong Hill Tracts Leprosy and Economic Development Project

Chittagong Integrated Leprosy Service and Stigma Reduction Project

Chittagong Sustainable Development Project

Project Goal: Improved quality of life for people affected by leprosy and physical disability - through economic and social development facilitated through active participation in Self-Help Groups (SHG).

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: Establish sustainable, self-managing SHGs operating to support the economic and social development of people affected by leprosy and physical disability, supported under an umbrella of Federations and an Association.	<ul style="list-style-type: none"> Form 20 new SHGs. Help 140 groups develop the skills they need to run themselves effectively. Run leadership training sessions for 177 group leaders. Train 170 group members on preparing simple business plans. 	<ul style="list-style-type: none"> 17 new SHGs were formed. On-going support and mentoring provided to 137 groups. More than 190 group leaders from 140 groups were trained in leadership and group management. 169 group members received training on preparing simple business plans.
Objective Two: Increase group members' incomes through engagement in sustainable income generation activities.	<ul style="list-style-type: none"> Run 12 business development training sessions for 170 group members. Help 150 group members select an appropriate income-generating activity. 190 small loans issued for people to either start a new business or expand their existing businesses. 	<ul style="list-style-type: none"> More than 100 SHG members received business development training. 75 SHG members received income-generation activity training in small business or vocational training, to meet their individual needs. 115 SHG members were issued with small loans to either expand their current business or start a new income-generation activity.
Objective Three: Increase the engagement of group members in the broader community through improved physical fitness for work, pursuit of new opportunities and increased awareness and exercise of rights and state and social entitlements.	<ul style="list-style-type: none"> Deliver 1,500 protective or other assistive devices to group members with disabilities. Educate 1,200 group members about self-care including looking after wounds, reaction and neuritis. Arrange training on human rights for 100 group and federation members. Run 4 advocacy skills training sessions for 61 group leaders. Provide 1,200 group members with an orientation on basic human rights and disability rights. 	<ul style="list-style-type: none"> 1,559 protective or other assistive devices were provided to group members with disabilities. 975 SHG members were educated about self-care, including looking after wounds, reaction to multi-drug therapy (MDT) drugs and neuritis. Successful human rights training was conducted for 97 group and federation leaders. 74 leaders attended advocacy skills training sessions. 1,123 group members were given orientation on basic human rights and disability rights.

Bangladesh

Chittagong Hill Tracts Leprosy and Economic Development Project

Project Goal: Reduced poverty in the Chittagong Hill Tracts through elimination of leprosy as a public health issue and the improved health, economic and social situation of people (and communities) affected by leprosy and physical disability.

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: Reduced incidence and prevalence of leprosy.	<ul style="list-style-type: none"> Conduct a survey in target villages to identify cases of leprosy – reach 42,000 people. Run clinics where people affected by leprosy can access multi-drug therapy (MDT) – goal of 1,350 clinic days. 	<ul style="list-style-type: none"> 40,000 people reached through leprosy case finding survey. 1,350 clinic days run as planned.
Objective Two: Improved health of people and communities affected by leprosy and disabilities through: targeted general public health education aiming at better overall community health in areas with high levels of leprosy; improved treatment of leprosy and leprosy-related ill-health; improved care for leprosy-related and general disability with a focus on improved self-care practices.	<ul style="list-style-type: none"> Reach 322 people with ulcer care management in their homes and at clinics. Distribute protective devices to 200 people with leprosy-related disabilities. Undertake awareness raising activities with a goal of reaching 90,200 people. 	<ul style="list-style-type: none"> 322 people received ulcer care management support in their homes and at nearby clinics. Protective devices were distributed to 200 people with leprosy-related disabilities. Awareness activities held which reached more than 100,000 people.
Objective Three: Sustainable, self-managing Self-Help Groups (SHG) operating to support the economic and social development of people (and families) affected by leprosy and physical disability.	<ul style="list-style-type: none"> Form 50 new SHGs with 400 members. Run skills development training for 500 SHG members and individuals. 	<ul style="list-style-type: none"> 48 new SHGs were set up with a total of 401 members. 443 SHGs received skills development training.
Objective Four: SHG members' family incomes increase through engagement in sustainable income generation activities.	<ul style="list-style-type: none"> Increase income for SHG members. 	<ul style="list-style-type: none"> Reports from SHGs show that family incomes are increasing through sustainable income generating activities.
Objective Five: Increased social inclusion and engagement of group members in the broader community through: improved physical fitness for work; pursuit of new social and economic opportunities; increased awareness of rights and state/social entitlements and how to access them.	<ul style="list-style-type: none"> Educate 790 community leaders and tribal/religious leaders about human rights so they can disseminate messages in their communities. Sustain partnerships and networks with three rights-based organisations who are also working to promote the rights of underprivileged people. Educate 370 SHG members about their rights. 	<ul style="list-style-type: none"> Trained 825 community leaders and tribal/religious leaders about human rights. Leprosy Mission's relationship with three NGOs was sustained. 312 SHG members were educated about their human rights.

Bangladesh



Chittagong Integrated Leprosy Service and Stigma Reduction Project

Project Goal: A positive environment exists where there is no stigma attached to leprosy in the communities of Chittagong and Cox's Bazaar so that people who are experiencing leprosy feel confident to come forward and get treatment from the government health system.

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: The Government of Bangladesh is committed and prepared to take over and run the leprosy programme in the Chittagong City Corporation by 2013.	<ul style="list-style-type: none"> • Provide 13 training sessions for 388 government doctors and health staff so they can identify and treat leprosy. • Provide support to three Watch Committees to follow up with leprosy-affected people who use government services. 	<ul style="list-style-type: none"> • 11 training sessions were held for 242 doctors and health staff so they can identify and treat leprosy. • Support was provided to three Watch Committees to follow up with leprosy-affected people who use government services.
Objective Two: Behaviour of the people of Chittagong City Corporation towards leprosy-affected people positively changed by 2013.	<ul style="list-style-type: none"> • Carry out effective mass communication activities to inform the public about leprosy. • Train 90 volunteers to identify leprosy and spread positive messages. 	<ul style="list-style-type: none"> • 12 street plays were held in the slums of Chittagong to raise awareness about leprosy as well as 45 evening slide shows and 23 photo exhibitions. • 505 religious leaders, 431 teachers and 294 NGO staff learnt about leprosy and received training in diagnosis. • 7,970 garment workers in 21 factories took part in awareness raising activities. • 131 volunteers were trained in leprosy diagnosis and treatment.
Objective Three: People affected by leprosy in Chittagong and Cox's Bazaar have access to sufficient and timely treatment with multi-drug therapy (MDT) and simple ulcer care and facilities at the government hospital by 2013.	<ul style="list-style-type: none"> • Ensure leprosy-affected people receive treatment at the government hospital. • Provide counselling and health education to leprosy-affected individuals and their families. 	<ul style="list-style-type: none"> • 203 new cases of leprosy were detected and received counselling and health education. • 224 people attended sessions aimed at advocating treatment for people affected by leprosy at government health facilities. • 220 people affected by leprosy received counselling and health education.

Papua New Guinea – Bougainville

Bougainville Healthy Communities Programme (BHCP)

Partner: Autonomous Bougainville Government

Project Goal: The Bougainville Healthy Communities Programme (BHCP) aims to improve the health of communities in Bougainville through development of a sustainable village-based community health programme linking with Bougainville's formal health structure at the District level.

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: To ensure prevention of disease and access to basic health care at all levels of the community.	<ul style="list-style-type: none"> Refine and finalise BHCP's Monitoring, Evaluation and Learning (MEL) system to measure changes in community health and effect of BHCP activities. Finalise and get approval for TB supporters training curriculum. District Facilitators to undertake special monthly monitoring and identification of TB and leprosy cases. 	<ul style="list-style-type: none"> MEL system has been finalised and completed. The MEL System operated well and changes in community health has been seen. TB supporters training approved and integrated into Village Health Volunteers training programme. 79% of people suspected to have leprosy, 82% of suspected TB cases and 70% of suspected malaria cases underwent appropriate treatment. Immunisation promotion activities saw 4,562 children immunised. 91% of villages have set up village health improvement programmes and are now working within the formal Village Authorities. Special monitoring operating well in Eivo-Torau constituency and under development elsewhere.
Objective Two: To implement a model of community based health care that links clearly into the district and national level health care programmes.	<ul style="list-style-type: none"> Expand the programme into two new districts. Continue to integrate BHCP into Government health structures and systems. Obtain funding contribution to BHCP from the Bougainville Government. 	<ul style="list-style-type: none"> The programme has been successfully rolled out into two new districts. BHCP programme now covers the seven most populated of Bougainville's 13 districts. Integration process has been slow but good relationships have been formed with the district and central government. Working relationships with health workers in all districts getting stronger. In January 2012 K50,000 Kina (approx NZ\$28,000) was given as a funding contribution to BHCP programme from the Bougainville Government.
Objective Three: To ensure that the community is able to identify and meet its own health needs.	<ul style="list-style-type: none"> Provide training for 500 Village Health Volunteers and 200 Village Chiefs so they have the skills and knowledge they need to educate their own communities about health-related issues. Establish Village Committees to provide leadership. Establish common fund so community members can access health services. 	<ul style="list-style-type: none"> 455 Village Health Volunteers and 175 Village Chiefs were trained so they have the skills and knowledge they need to educate their own communities about health related issues. Village governance Committees continue to be set up and are providing strong leadership for community led health improvement activities. Community funds have been established in 24 villages – the essential health needs of community members can now be paid for from these funds.

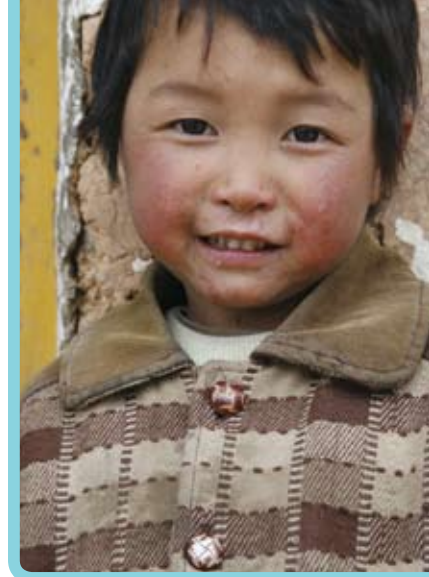
China

Partner: HANDA Rehabilitation and Welfare Association

HANDA Socio-Psychological Empowerment Project in Guangdong and Guangxi Provinces

HANDA Socio-Psychological Empowerment Project in Yunnan

HANDA Capacity Building Project



HANDA Eyesight Saving Project

Leprosy Mission New Zealand is a contributing funder to the HANDA Eyesight Saving Project which targets leprosy-affected people living in remote leprosy villages. A Mobile Eye Unit (a 17-passenger van that was converted into an operating unit where sterile surgery can be conducted) allows a team of doctors and nurses to carry out eye examinations, distribute medicines and undertake eye surgery. Local health care workers are trained to provide follow up care.

Between July 2010 and December 2011, HANDA's Mobile Eye Surgery team spent 148 days travelling to 49 remote leprosy-affected villages in 7 provinces where they:

- Examined and treated 1,200 leprosy-affected people.
- Performed 367 cataract surgeries.
- Performed 358 lens implants.
- Performed 70 plastic surgeries.
- Distributed 32 pairs of reading glasses and 337 pairs of protective glasses.
- Provided 428 people with much-needed prescription drugs.
- Trained 16 health care workers in basic eye care, and provided them with the necessary medicine and tools.



China

HANDA Socio-Psychological Empowerment Project in Guangdong and Guangxi Provinces

Project Goal: Promote dignity and respect of people affected by leprosy so that they can reintegrate into general society.

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: People affected by leprosy are accepted and included into general society by the end of the project.	<ul style="list-style-type: none"> • Increase the general public's understanding of leprosy and people affected by leprosy. • Get more people living in the communities surrounding leprosy villages to engage in normal social activities with people affected by leprosy including engaging in business activities with them. • Change the public's attitude towards people affected by leprosy, with a focus on, and use of, mass media and volunteers. 	<ul style="list-style-type: none"> • 10,000 copies of a range of printed materials about leprosy were distributed to increase the general public's understanding of leprosy and people affected by leprosy. • Eight public education events were held at local colleges. • Three public photo exhibitions by people affected by leprosy were held at local colleges to change the public's attitude towards people affected by leprosy. • Four public awareness raising activities were held in towns surrounding leprosy villages. • 22 groups of volunteers visited leprosy villages to also help change the public's attitude towards people affected by leprosy. • HANDA strengthened its relationship with the media. 68 positive stories on leprosy were reported on TV and in newspapers to help change the public's attitude towards people affected by leprosy.
Objective Two: Enhanced community connectedness, self-confidence and mutual support among people affected by leprosy by the end of the project.	<ul style="list-style-type: none"> • Support and mentor people affected by leprosy to develop skills and confidence to better identify their own needs and take responsibility for supporting each other to meet those needs. • Support and mentor people affected by leprosy to improve their self-confidence, mutually support each other and engage in normal social activities. • Develop a more harmonious atmosphere and mutual self-help spirit in leprosy villages. 	<ul style="list-style-type: none"> • HANDA's social workers made 156 village visits to help villagers identify their needs and challenges, provide one-on-one counselling and set up interest/hobby groups. • Social events were held in villages and 65 villagers took part in visits to nearby cities. • 2,137 villagers received self-care training and 32 general health education activities were held to support and mentor people affected by leprosy. • Six groups were established focussing on different interesting skills, not only to enrich the lives of people, but also provide a platform for them to display their special talents.
Objective Three: People affected by leprosy have improved access to social services through local level government recognition and practice of Central Government Health and Welfare Policy by the end of the project.	<ul style="list-style-type: none"> • Train, support and encourage government Dermatology Institutes and government departments to identify/respond to needs of leprosy-affected people. • Advocate for the Dermatology Institutes and government departments to support HANDA's work in the leprosy villages. 	<ul style="list-style-type: none"> • Through communication with the government, HANDA's prosthesis project was supported by the Guangdong Disabled Persons' Federation to make 35 new prostheses. • People affected by leprosy who lived in Daqin Island in Guangdong were given attention by local government. They moved to Si'an hospital and now live in safe houses with better conditions. • Villagers in Guangdong have lodged their request to government for a subsidy increase, and villagers in three areas in Guangxi requested the government to cover their basic medical insurance costs.

China

HANDA Socio-Psychological Empowerment Project in Yunnan

Project Goal: To eliminate the discrimination towards leprosy and promote the dignity and respect of people affected by leprosy so they can reintegrate into society.

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: Improved public awareness about leprosy and people affected by it.	<ul style="list-style-type: none"> Carry out publicity and awareness-raising activities to enable the public to have a better understanding about leprosy and people affected by leprosy. Carry out activities to improve acceptance of residents in leprosy villages from neighbouring communities. Advocate and provide information to Government departments to promote their understanding and acceptance of HANDA's work. 	<ul style="list-style-type: none"> Publicity and awareness raising activities were held in four communities neighbouring leprosy villages, and in eight colleges. Through blog posts and distribution of newsletters, the equivalent of NZ\$5,000 was raised to support scholarships for people living in leprosy villages. People in neighbouring communities were invited and attended wedding ceremonies and parties held in leprosy villages to improve the acceptance of residents in leprosy villages from neighbouring communities. Government officials were invited to participate in seven HANDA activities, and HANDA was invited to the Yunnan Centre for Disease Control's annual meeting. Villagers in three districts successfully lobbied the government for an electricity supply for their village.
Objective Two: Self-confidence and mutual help among people affected by leprosy is uplifted and strengthened.	<ul style="list-style-type: none"> Encourage people affected by leprosy to actively take part in social activities and contribute their ideas and thoughts. Promote mutual help among people affected by leprosy. Support and mentor people affected by leprosy to improve their self-recognition and gain the confidence to voice their own needs. 	<ul style="list-style-type: none"> People from the leprosy villages participated in awareness raising activities, telling the audiences their own stories and selling their products. Leprosy-affected people took initiative and invited HANDA to organise awareness raising activities in their neighbouring communities. Village exchange activities were held to encourage mutual help among people affected by leprosy. Village level management groups were set up to address village affairs. Medical emergency aid funds were initiated in three villages.
Objective Three: Volunteers participate in anti-discrimination activities and actively take more responsibility.	<ul style="list-style-type: none"> Volunteers visit villages and get involved in HANDA activities. Improve the capability of volunteers so they can organise activities independently. 	<ul style="list-style-type: none"> 24 anti-discrimination activities were organised by HANDA's volunteer team. 105 volunteers took part in village activities organised by HANDA. Eight training sessions were held for volunteers. They now have the capacity to organise activities independently.

China

HANDA Capacity Building Project

Project Goal: HANDA will have high accountability and sustainability so that it can meet the needs of people affected by leprosy, stigma and discrimination.

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: HANDA has a strong and effective governance body consisting of diverse members.	<ul style="list-style-type: none"> Revise and improve the roles and duties of Committee members. To improve oversight, Committee members conduct village-visit activities and get involved in other HANDA activities. Committee members attend exchanges and trainings with other NGOs. 	<ul style="list-style-type: none"> Terms of Reference not finalised due to ill-health of key Committee members. Eight visits were made to six villages. Four Committee members attended three exchange meetings held with other NGOs.
Objective Two: HANDA staff members have good capability in project development and management to meet the needs of the targeted population.	<ul style="list-style-type: none"> Project management training for staff. Participatory and Community Development training for staff. Training on social work principles, values and skills for all staff. 	<ul style="list-style-type: none"> A complete monitoring and evaluation system was developed and is now applied to all aspects of programme work. 11 staff received project management training to meet the needs of the targeted population. Three HANDA social workers attended a three-day training in Beijing and began providing training and mentoring supervision to all six social workers.
Objective Three: HANDA is able to mobilise local resources and has diversified funding resources.	<ul style="list-style-type: none"> Training for fundraising staff on fundraising skills and strategy. Fundraising activities to be undertaken: Charity evening ball (in cooperation with local enterprises), Charity Fairs in universities and communities, Charity evening concert in a university and a Photo Exhibition. 	<ul style="list-style-type: none"> Training undertaken for fundraising staff and successful fundraising activities took place. HANDA received an award, equivalent to NZ\$190,000, for being a quality Chinese philanthropic organisation. Partnership developed with Guangdong provincial dermatology institute to jointly carry out and fund 50 eye surgeries.
Objective Four: HANDA has an effective management and communication system within the organisation to ensure effective operation and stable development.	<ul style="list-style-type: none"> Training for two personnel staff on human resource management. Training for key staff on public relations. Development of a management communications system. 	<ul style="list-style-type: none"> Consultant company developed a human resource management system. Public relations training provided to 10 staff. Management communication system developed to ensure effective operation and stable development.

Nepal

Partners: Leprosy Mission Nepal, Kopila and WATCH (Women Acting Together for Change)
Capacity Building of CAP Nepal and Strengthening of Co-operatives Project
Kopila Community Psychological Wellbeing Project
WATCH Organising for Accessing Rights and Resources Project
Anandaban Hospital Laundry Project



Capacity Building of CAP Nepal and Strengthening of Co-operatives Project

Project Goal: To have strong and sustainable local grassroots institutions who are working for the socio-economic empowerment and health of people affected by leprosy, people with physical disabilities and people who are marginalised and/or are 'Dalits' (low caste) in the Bara district.

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: Co-operatives are strengthened and participants and members have opportunities for economic development and savings.	<ul style="list-style-type: none"> Organise two coordination and monitoring meetings with Village Development Committees' (VDC) co-operatives for 40 people. Conduct six volunteer meetings. Arrange an exposure visit to co-operative members for 35 people. Arrange income generation training and trades for co-operatives according to need. e.g. bee keeping, vegetable farming, pig/goat raising etc. Provide human resource support to co-operatives (10 volunteers to be partly supported). 	<ul style="list-style-type: none"> Two coordination and monitoring meetings were undertaken for 43 people (21 male 22 female). Four volunteer meetings held (5 male 5 female each time). 31 people (11 male 20 female) visited a successful co-operative, mentoring process is on-going. The minimum income of the co-operatives is NPR5,000 (Nepalese Rupees) and maximum is NPR20,000 per month. Some co-operatives now paying NPR 6,000 remuneration to their volunteers per month.
Objective Two: Increased health awareness on leprosy, TB, Malaria and STI/HIV/AIDS and safe motherhood for targeted population groups in 16 Village Development Committees (VDCs) to reduce communicable diseases.	<ul style="list-style-type: none"> Organise training on different health issues for 31 Self Help Group (SHG) members – 50% M/F. Organise comprehensive Training of Trainers (ToT) on different diseases and safe motherhood for 31 SHG members. Produce newsletter and communication materials. 	<ul style="list-style-type: none"> A training course was held for 18 SHG members on different health issues (6 male 12 female). Training of Trainers (ToT) was conducted for 17 SHG members (10 male 7 female) on different diseases and safe motherhood. 2,000 copies of newsletters produced and distributed.
Objective Three: More girls and disabled children are in school due to promotion and provision of equal access to formal education within 16 VDC areas.	<ul style="list-style-type: none"> Organise leadership development training for 31 SHG members. Conduct 10 advocacy/awareness raising meetings for 200 VDC level stakeholders. 	<ul style="list-style-type: none"> One training conducted for 25 SHG members (6 male 19 female). 10 meetings with parents/community conducted for 177 members (119 male 58 female).
Objective Four: The developed institutional capacity of CAP Nepal at district level.	<ul style="list-style-type: none"> Establish and develop training centre with kitchen garden. Conduct process/dynamic monitoring and develop strategic guidelines. 	<ul style="list-style-type: none"> A new training centre has been established where training on how to run a poultry, piggery and vegetable farm has been undertaken for leprosy-affected people. The project has developed its own employment and financial manual.

Kopila Community Psychological Wellbeing project

Project Goal: The people, especially women and children, of the 10 Village Development Committees (VDCs) of Syangja district of Western Nepal have increased psycho-socio-economic wellbeing through access to professional community based psychological support.

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: Community capacity is strengthened by the creation of a trained network of community members in 10 VDCs who understand the causes and consequences of psychological trauma and actively promote a professional psycho-socio-economic support programme.	<ul style="list-style-type: none"> Conduct orientation to 300 parents group members on psychological trauma, leprosy and disability. Conduct orientation to 400 school children on psychological trauma, leprosy and disability. Train 250 key people in the community to identify people with psychological trauma, leprosy and disability. Conduct an orientation to 40 school teachers on the signs and diagnosis of leprosy. 	<ul style="list-style-type: none"> Orientation for 362 members conducted. Training for 1,346 children conducted on psychological trauma, leprosy and disability. Training for 386 key community people conducted. 249 teachers have been trained in identifying the signs of leprosy and diagnosis of leprosy.
Objective Two: A psychologically healthy society exists because community members, including children, understand psychological wellbeing and are advocates and active participants in the promotion of socially inclusive, affirming behaviour.	<ul style="list-style-type: none"> Conduct 1,600 homework clubs. Provide educational support to 300 needy children. Support the formation of 20 new children's clubs. Peer support for children to undertake Hero Booking/Group action Plan. 	<ul style="list-style-type: none"> 1,583 homework clubs monitored and maintained (old and new). 558 children received material support such as books and uniforms. 357 children placed in new clubs. Peer support has been given to 357 children where they have been taught positive affirmations to build self-esteem.
Objective Three: Community members, including children, who are most in need of psychological and psychiatric treatment have been diagnosed, provided with counselling support and referred to the most appropriate services available.	<ul style="list-style-type: none"> Holistic wellbeing training to health workers. Holistic wellbeing training to school teachers. Child to Child Theatre for Development training teachers (70). Referral and medicine for new and old clients (30). 	<ul style="list-style-type: none"> Nine holistic wellbeing training courses have been held for health workers. Holistic wellbeing training was held for 19 teachers and 70 children. 35 people received referral and medicine for leprosy.
Objective Four: Community members who have experienced, recently recovered from, or are at risk of psychological trauma can provide an income for themselves and their families and keep their children, both boys and girls, in school.	<ul style="list-style-type: none"> Conduct group mobilisation and micro-finance management training to 200 Self-Help Group (SHG) members. Conduct vegetable farming training for 200 Parents Group members. Support for 100 people for agricultural based micro-businesses initiatives. Provide seed money support to 10 Parents Groups. 200 SHG members trained in goat keeping. 	<ul style="list-style-type: none"> Mobilisation and micro-finance management training has been undertaken for over 200 SHG members. Vegetable farm training has been undertaken for 155 SHG members. 32 SHG members received training for agricultural based micro-businesses initiatives. 250 SHG members received funds to buy more vegetable seeds to plant and generate an income. 200 people received training in goat keeping and rearing.

WATCH Organised for Accessing Rights and Resources Project

Project Goal: Marginalised people, including women, people affected by leprosy, people with disabilities, HIV and other socially excluded people are assured of equal rights and access to community resources.

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: The social and economic status of at least 100 of the poorest and most disadvantaged people and their families will improve through participation in a holistic integrated family development action plan.	<ul style="list-style-type: none"> • Identification of people with leprosy (200-300) and disabilities (300-400) to be selected for group formation. • Mapping of local and personal resources. • Once identified, undertake development action plan for 100 individuals. • Help and support for implementation of the development plan of 100 individuals, and follow up support of 90 from the previous year. 	<ul style="list-style-type: none"> • 308 people with leprosy have been identified and 894 people living with leprosy disabilities have been selected for group formation. • 100 assets identified from personal/household to outside community resources. • Developed plans for 100 individuals. Project staff monitored, mentored and supported all 190 targeted families.
Objective Two: Form groups of people affected by leprosy, disability and poverty. This will enable solidarity and collective action, access to knowledge and their rights, and management of their resources.	<ul style="list-style-type: none"> • Identification of poorest areas (approx. 40) along with people with leprosy and disabilities. • Conduct home visits to 1000 identified families and discussion on group formations. • Conduct 25 wellbeing rankings to identify poorest within area and identify resources and issues needing community action. • Conduct 50 small and 25 large group discussions for visioning and charter making. • Formation of 25 new groups. 	<ul style="list-style-type: none"> • 67 poorest areas along with people with leprosy and disabilities have been identified. • Home visits to 1,289 people with disabilities and 647 affected with leprosy were conducted. • 30 wellbeing rankings were undertaken to identify the poorest area and identify resources and issues needing community action. • Conducted 67 small group and 30 large group discussions for visioning and charter making. • 30 new Self-Help Groups (SHG) have been formed. This has enabled solidarity and collective action for all members of the SHG, access to knowledge and their rights, and management of their resources.
Objective Three: Two new district level organisations of marginalised people formed with the existing six district level organisations, develop and strengthen relationships between each other for empowerment and strategically organised collective action at district level in order to access rights and resources.	<ul style="list-style-type: none"> • Help make two charters (leprosy-affected in Nawalparasi and people with disability in Kapilvastu) and register with government as organisations. • Help conduct two general assemblies of new organisations (attendance about 170 people). • Help develop organisational vision and action plans, and support to implement. • Conduct 24 street dramas for awareness. • Support individuals to get ID cards (for people with disabilities, leprosy, old age, etc.) so that they can access benefits from government. 	<ul style="list-style-type: none"> • Charters have been developed but organisations are not registered yet. • Attendance at 2 general assemblies of new organisations by 286 people. • Organisational vision and action plans have been developed. • 32 community dramas undertaken. • All identified individuals have received ID cards (for people with disabilities, leprosy, old age, etc.) so that they can access benefits from government – even though government benefits are proving hard to get.
Objective Four: To involve target groups and federations in local level community development and action.	<ul style="list-style-type: none"> • Organise and run leadership training for 60 people. • Engage 90 families and 98 rural women in income generating activities. • Run mobile clinics for basic primary health care – reach 2000 people. 	<ul style="list-style-type: none"> • Leadership training held for 57 people. • 63 families and 98 rural women engaged in income generating activities. • Primary health mobile clinics reached a total of 982 people.

Nepal

Anandaban Hospital Laundry

Project Goal: Establish a new laundry at Anandaban Hospital, Kathmandu, to effectively cater for the laundry requirements of a 110 bed hospital.

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: Establish a new laundry at Anandaban Hospital, Kathmandu, to effectively cater for the laundry requirements of a 110 bed hospital.	<ul style="list-style-type: none"> Build a new laundry on the existing site with new equipment to meet the increasing patient numbers at Anandaban Hospital. 	<ul style="list-style-type: none"> New laundry built on existing site to meet hospital requirements.





Krishna Bhadur

Over the last 18 months, *Families 4 Families* supporters have been making a real and lasting difference in the lives of people like Krishna.

Krishna was diagnosed with leprosy 28 years ago by a Leprosy Mission team doing a house to house survey in his village. When he was first diagnosed, other people in the village would not talk to him or eat with him. Krishna was given multi-drug therapy (MDT) and suffered no on-going disabilities. He and his family received tremendous support from the Leprosy Mission, including a low-interest loan and a scholarship for his youngest daughter to buy school fees, uniform and books.

Because it was so long ago, Krishna no longer has to deal with any stigma or discrimination. But recently, Krishna's eldest daughter Suntali was diagnosed with leprosy. Her husband left her and she has had to move in with Krishna with her young children. This has put a great burden on Krishna who is very worried about how he is going to feed all of the family.

With the Leprosy Mission's help, Krishna is hoping that he can borrow some more money to buy buffalos, to sell their milk at the local market to provide for his family.

Ethiopia

Partner: ENAPAL (Ethiopian National Association of Persons Affected by Leprosy)

Addis Ababa Regional Association Empowerment Project

ENAPAL Capacity Building Project

Ambo and Hawassa Building Self-Reliant Communities Project

Addis Ababa Regional Association Empowerment Project

Project Goal: Local ENAPAL groups in Addis Ababa are empowered in self-advocacy through the promotion of their development initiatives so they have a strong voice to claim their rights against stigma and discrimination.

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: To set up a support system, using surplus income from the four grain mills and the women's livelihoods and business activities, for the severely disabled, elderly and extremely poor members of the Addis Ababa Association.	<ul style="list-style-type: none"> • One Social Worker employed to facilitate and manage all activities. • Conduct a survey at six Local Associations to identify the poorest families. 	<ul style="list-style-type: none"> • A Social Worker has been employed to facilitate and manage all activities including supporting the elderly, education grants and assisting with loan services. • Support provided to: 30 elderly, 100 school children and 45 loan service clients.
Objective Two: To create a revolving loan service, using surplus income from the four grain mills and women's livelihoods and business activities, for members of the Addis Ababa Association.	<ul style="list-style-type: none"> • Training on loan management, administration, planning, marketing, and basic business skill development will be given to at least 50 people. • 50 members will be provided with credit and savings loans (10 funded from Association profits; 40 from project funds, with the Project proportion declining in subsequent years), and members will begin income generation activities. 	<ul style="list-style-type: none"> • 45 Association members prepared to take up loans (25 male 20 female). • Seven members of the Addis Ababa regional Association Executive Committee were trained on loan management, administration, planning, marketing, and basic business skill development for seven days. • 45 members have benefited from loans funded by this project. The funds have helped members purchase income-generation businesses to sustain their livelihood in the long run: 11 market stalls, 6 shops, 1 fruit selling business, 3 poultry businesses, 2 sheep rearing businesses, 7 bakers, 7 grain merchants, 5 members are selling second-hand clothing, 2 members are selling shoes and 1 person has set up an ox rearing business.

Ethiopia



ENAPAL Capacity Building Project

Project Goal: Creation of a strong ENAPAL, from grassroots to national level, that stands for the rights of persons affected by leprosy, for full participation, equal opportunities and improved quality of life in civil society in Ethiopia.

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: ENAPAL has increased capacity at national, regional and local level to be a voice locally, nationally and internationally for the rights of its membership through growing training, monitoring, advocacy and mentoring skills and capacity.	<ul style="list-style-type: none"> • Conduct training in Monitoring, Evaluation, and Learning (MEL) practice (11 people, five days of training). • Facilitate improved governance of ENAPAL through the ENAPAL annual General Assembly meeting with training days included (80 people, 5 days). • Finish preparing the next five years Strategic Plan. • Develop fundraising proposal for purchase of land and constructing new offices for the local government and ENAPAL stakeholders and donors to increase ENAPAL's sustainability. 	<ul style="list-style-type: none"> • Training conducted in MEL practice for six staff by resource people from Handicap International. • The 12th General Assembly held on March 24-26, 2011 was attended by 61 local leaders and 7 national executive Board members. • Strategic plan completed and approved by 12th General Assembly in March 2011. • The government authorities have approved the provision of 2000 m² land for ENAPAL to own and this is expected to be handed over to ENAPAL in 2012.
Objective Two: All members from ENAPAL's 63 branch Associations, and other marginalised and disabled people relating with ENAPAL, have improved integration, security, equal rights and sustainable livelihoods by the end of this project.	<ul style="list-style-type: none"> • Conduct training for national, regional and local Association leaders and members. 	<ul style="list-style-type: none"> • 60 local Association members received five days training in market strategy and business planning; 77 Association members received project planning, monitoring, evaluation and learning training. • 129 Association members received gender training.
Objective Three: Civil society and government bodies in Ethiopia have improved awareness and acceptance of leprosy-affected and other marginalised people.	<ul style="list-style-type: none"> • Continued use of print and radio and TV programmes on different issues of awareness and advocacy on leprosy issues. 	<ul style="list-style-type: none"> • 5,000 copies of 'The Truth' magazine have been distributed to communities within Ethiopia and partners abroad during World Leprosy Day celebrations. • "The Voice" National Radio programme (20 minutes/ 2 weeks, 480 minutes / year) was broadcasted in cooperation with Ethiopian Radio and TV Agency (radio coverage of 96% of the country). • TV Drama with leprosy theme entitled BERHAN (LIGHT) was on air every week for one month which helps raise awareness of leprosy and improve acceptance of leprosy-affected and other marginalised people.

Ethiopia

ENAPAL - Ambo and Hawassa Building Self-Reliant Communities Project

Project Goal: Contribute towards enhancement of integrated “stigma free” communities with increased livelihoods for persons affected by leprosy who have self-reliance and social dignity.

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: Grain milling, grain selling and Injera selling businesses are sustainable for Ambo local branch Association in three years’ time generating wider business activities, providing income, employment and social interaction for the 83 members, with 415 family members, and the wider community.	<ul style="list-style-type: none"> Secure land from local government, prepare design of grain mill, employ construction supervisor and commence construction. 	<ul style="list-style-type: none"> Useable land was received from the Ambo City Administration and was used to prepare for a grain mill. Grain mill house plan designed with bill of quantities specification. Electric line supply is requested from Ethiopian Electric Power Corporation. One meeting was held with all of the beneficiaries present and it was agreed to follow the advice of the Co-operative office. An application was submitted to the co-operative office of Ambo City Administration to certify the grain milling service under the existing saving and credit co-operative of Ambo branch Association of ENAPAL.
Objective Two: Ambo local Associations and its members have clear organisational (management and governance) structures with the capacity to manage, control and decide their own affairs (self-reliance) and contribute to ENAPAL and society as a whole.	<ul style="list-style-type: none"> Establish operational systems for use of profits generated by local Association small businesses. Employ sales and credit facilitators. 	<ul style="list-style-type: none"> Start-up meetings held with Association members on the establishment of management and governance structures.
Objective Three: The National Association has increased capacity to provide on-going support and advice for the development of business initiatives and income generation activities for the benefit of all members.	<ul style="list-style-type: none"> Not planned for this time period, as many income generation activities have still to be initiated. 	<ul style="list-style-type: none"> Not undertaken yet, as many income generation activities have still to be initiated.
Objective Four: To improve 50 Hawassa members’ economic conditions by enabling them access to financial services through a saving and credit co-operative.	<ul style="list-style-type: none"> Organise consultation meetings with beneficiaries and stakeholders. Establishing linkage with the local government administration co-operative organisation and promotion office. Begin pre-loan saving with beneficiaries. Establish (license) the co-operative legally after fulfilling the necessary requirements. Develop modalities and formats for the delivery of services. 	<ul style="list-style-type: none"> Hawassa local branch members have decided to proceed with registration of saving and credit co-operative. 48 members are registered. Formal procedure of setting up the co-operative has been initiated. 48 members are saving ETB10 (Ethiopian Birr) per month. Dejen saving and credit co-operative is established by 48 willing members. License was issued by Hawassa City Administration co-operative office. Bylaws were prepared which outlined the rules of the co-operative on membership, leadership, savings, loans etc. Executive Committee, Loan Approval Committee, Arbitration Committee and Education and Information Committee elected. The 48 members, leaders and the staff were given 6 days training on the co-operative rules and leadership, and saving and credit principles and rules. A local credit facilitator has collected loan applications and is helping with business plans for those who have applied.

India



Partner: Leprosy Mission India

Empowerment of Village Women in Rural Uttar Pradesh

Empowering Communities to Address their Own Issues in Andhra Pradesh

Community Leprosy Hospital in Muzaffarpur

Vocational Training Centre in Faizabad

Empowerment of Village Women in Rural Uttar Pradesh

Project Goal: Socio-economic and political empowerment of rural women affected by leprosy, disability and other forms of marginalisation in the districts of Allahabad, Barabanki, Sitapur and Rae Bareli in Uttar Pradesh.

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: Awareness/ advocacy: The women in the targeted community will gain legal and political awareness and organisational strength to deal with gender and other critical issues in the communities.	<ul style="list-style-type: none"> Conduct training for staff community volunteers, and women's groups. Undertake advocacy and awareness focussed activities. 	<ul style="list-style-type: none"> 20 community volunteers have been trained on advocacy, leprosy and disability. 40 volunteers have been trained on leadership and general community health. 20 community volunteers trained in organising Self-Help Groups (SHG) and book keeping. 40 women's groups were organised so the members can gain legal and political awareness and organisational strength to deal with gender and other critical issues in the communities. Each group has between 12 and 15 members. 70 street plays and 45 puppet shows were organised as part of awareness on leprosy, disability, gender issues and SHGs.
Objective Two: Health and Education: The women in the targeted communities will improve their knowledge, attitude and skills to seek better health care and education services thereby making improvement in their overall health and education.	<ul style="list-style-type: none"> Conduct Leprosy and General Disability Focussed Activities. 	<ul style="list-style-type: none"> 4 leprosy awareness camps were held with 250 participants at each camp. 240 wall paintings (undertaken by villagers themselves) in 40 villages with messages on leprosy, disability and community health. Conducted 4 self-care camps for leprosy-affected people; 84 (planned 50) attendees were screened for leprosy and disability; 16 new cases of leprosy were identified.
Objective Three: Income Generation: The women in the targeted community will effectively make use of local resources, public services and opportunities for creating assets and improving their livelihoods.	<ul style="list-style-type: none"> New SHGs will be established. Existing SHGs strengthened and 15-20 potential entrepreneurs will be identified and given training and mentoring in financial aspects of business and trained in business planning. 	<ul style="list-style-type: none"> 26 new SHGs have been established. 66 women (including teenagers) have attended training courses on sewing/tailoring and crochet classes. All of the attendees are now able to start up their own income generating activities. 15 sewing machines provided on loan basis. More than 500 fruit saplings were supplied in 30 villages. 2 Livestock Health and Fertility camps held where 20-30 animals were examined and treated. 38 volunteers given an orientation on animal health as livestock is one of the main sources of income for the low income families.

Empowering Communities to Address their Own Issues in Andhra Pradesh

Project Goal: Enhanced socio-economic and political empowerment of vulnerable communities, especially affected by leprosy and disability in the Vizianagaram and Vishakhapatnam districts of Andhra Pradesh.

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: Advocacy: The targeted communities become conscious of the critical issues including leprosy and disability in the communities plus gain organisational strength with efficient and effective local leadership by 2014.	<ul style="list-style-type: none"> Identify and commission staff and Community Volunteers. Conduct training of staff and Community Volunteers. 	<ul style="list-style-type: none"> 42 community volunteers have been recruited (38 female 4 male) to plan, implement, facilitate and monitor activities in 116 selected villages (around 200 hamlets and small villages). 42 volunteers were provided training on leprosy, disability aspects and strengthening of Self-Help Groups (SHG). 29 leprosy ulcer cases referred to hospitals and health centres. 34 leprosy-affected people are receiving 35kg of rice from the government shop at a discounted price because of Leprosy Mission's advocacy. 4 leadership programme workshops were conducted for 74 SHGs (148 leaders, at least 65% women) to assist and strengthen the SHG leadership.
Objective Two: Women's Empowerment: The women in the targeted communities will gain legal and political awareness and organisational strength to deal with gender and other critical issues in the community.	<ul style="list-style-type: none"> Conduct training and sensitisation on legal and political issues pertaining to gender and disability. 	<ul style="list-style-type: none"> 290 SHG members trained on "Gender and Disability in Family" (4 workshops for 2 days). 11 training programmes were conducted (1 day each) for 234 women on women's rights and entitlements.
Objective Three: Health and Education: The people in the targeted community gain access and improve their knowledge, attitude and skills to seek better health care and education services thereby making improvement in their overall health and education by 2013.	<ul style="list-style-type: none"> Training and sensitising staff representatives on key health issues among women, teenagers and the disabled. Health Camps and awareness programmes. 	<ul style="list-style-type: none"> 2 training programmes of 2 day duration were held for 220 staff, volunteers and government health workers on leprosy disease, symptoms, treatment and self-care. 39 Health and Education Committees consisting of 289 member were formed. 35 self-care groups were formed with 158 members. Health awareness programmes were conducted in 10 schools with 93 teachers and 3,033 school children attending. Nine health camps and awareness programmes were conducted.
Objective Four: Income generation: The people in the targeted villages effectively make use of local resources, public services and opportunities for creating assets and improving their livelihoods by 2013.	<ul style="list-style-type: none"> Conduct Entrepreneurship Development Programme. 	<ul style="list-style-type: none"> SHG members have been introduced to banks to establish a relationship – 3 groups received bank loans of Rs 50,000, Rs 50,000 and Rs 100,000 respectively and the group members have purchased some cows and goats (4 cows and 23 goats). 24 SHG members (leprosy-affected and disabled) were referred to a local NGO that specialises in micro-finance.



Geeta and Manajer

When Geeta was seven years old, people in her community would spit on her and throw hot water at her, because of her clawed hands – even though she had been cured of leprosy. It was very hard on her family, who were spat on as well. Eventually they were treated so badly by their neighbours her parents decided to take Geeta to the Missionaries of Charity where the nuns could take care of her. She has not seen her family since. But through the Leprosy Mission, Geeta met other people who understood her struggles, including her husband, Manajer.

She was 15 years old when the nuns introduced her to Manajer; they married a few years later. Manajer also had leprosy when he was a child and has been left with deformities in his hands and feet caused by nerve damage.

Manajer works part time as a security guard at the Missionaries of Charity and part time as a rickshaw puller. Both Geeta and Manajer belong to a Leprosy Mission supported Self-Help Group (SHG) and hope that soon they will be able to take a loan and set up a small business in the village to earn more money.

All three of their children are at school and doing well. Raj and Sangeeta both received education scholarships from the Leprosy Mission that cover their fees, uniforms and school books. Geeta and Manajer are hoping that one day Deepak will train to become a doctor.

India

Community Leprosy Hospital in Muzaffarpur

Project Goal: Enhanced comprehensive quality health care for people affected by leprosy. Hospital services include:

- Diagnosis of new leprosy cases
- Leprosy treatment
- Admission of leprosy-affected people with complications
- Reconstructive surgery and prevention of disability
- Ulcer management
- Physiotherapy services
- Eye surgeries
- Dermatology services
- Counselling services
- Pre and post-test counselling for HIV/AIDS
- Community camps for marginalised people and families

OBJECTIVES	ACHIEVEMENTS
Objective One: Provide high quality, comprehensive specialised leprosy services.	<ul style="list-style-type: none">• 496 people were newly diagnosed with leprosy.
Objective Two: Provide secondary care services in Dermatology and primary care in Ophthalmology.	<ul style="list-style-type: none">• 49 leprosy-affected people had reconstructive surgery.• 336 leprosy-affected people received ulcer care.• 209 leprosy-affected people were treated for reaction and Neuritis.• 688 pairs of protective footwear were provided to leprosy-affected people.
Objective Three: Increase health awareness (especially about leprosy) in the target community.	<ul style="list-style-type: none">• Community camps were held for leprosy-affected people and their families.



Vocational Training Centre in Faizabad

Project Goal: Families affected by leprosy and disability achieve enhanced earning capacity on a sustainable basis and are in the main stream of society.

OBJECTIVES	PLANNED ACTIVITIES	ACHIEVEMENTS
Objective One: Impart marketable vocational skills to people affected by leprosy and disability.	<ul style="list-style-type: none"> • Offer a wide range of courses including computing, electronics, car mechanics and sewing. • Select students from leprosy-affected families in Leprosy Mission projects across India. 	<ul style="list-style-type: none"> • 14 different vocational courses were conducted for 178 students. The courses covered training in computing, electronics, car mechanics and sewing. • 77% of all students were from leprosy-affected families and communities.
Objective Two: Enhance the socio-economic status of people affected by leprosy and disability through skills training and employment.	<ul style="list-style-type: none"> • Appoint Placement Officers to help graduates secure jobs that utilise their new skills. 	<ul style="list-style-type: none"> • 91% of graduates obtained their first job with salaries of at least Rs 4,000 (NZ\$100).
Objective Three: Enrich the lives of people affected by leprosy and disability through provision of additional activities such as counselling and life-skills training.	<ul style="list-style-type: none"> • Encourage students to participate in extra-curricular activities such as sport and music. • Offer counselling, self-care training and life-skills training to people affected by leprosy and disability. • Raise awareness about leprosy in the community to reduce stigma and discrimination. 	<ul style="list-style-type: none"> • A range of extracurricular activities were conducted including spiritual camps, student retreats, sports and music, literary studies and daily devotions.
Objective Four: Encourage people affected by leprosy and disability to be self-sufficient.	<ul style="list-style-type: none"> • Run a loan scheme to help graduates set up their own businesses. • Establish an Alumni Association to provide ongoing support to graduates. 	<ul style="list-style-type: none"> • 10 new self-care groups were formed. • 22.5% of total course costs met by income generated from students.

Financial Statements

Statement on Corporate Governance

The Board is responsible for preparing financial statements that give a true and fair view of the financial position of the Leprosy Mission New Zealand at the end of a financial year and the operating results for that year. The external auditor is responsible for expressing an opinion on the financial report, based on a review and assessment of the conclusions drawn from evidence obtained in the course of the audit.

The financial statements set out in this report have been prepared by management in accordance with generally accepted accounting practice. They are based on appropriate accounting policies which have been consistently applied and supported by reasonable judgements and estimates.

The Board

The Board retains full and effective control over the Society, monitors executive management and ensures that decisions on material matters are in the hands of the Board.

Audit Committee

The audit Committee is composed of members of the Resource Committee. The external auditor has access to this Committee and has met with the Committee following completion of the audit for the 18 months ended 31 December 2011. Matters considered included a review of the financial statements and accounting policies, the effectiveness of management information and other systems of internal control and the auditor's findings. The auditor will be appointed each year based on recommendations of the audit Committee.

Internal Control

To fulfil its responsibilities, management maintains adequate accounting records and a system of internal controls which is monitored periodically. No breakdowns were identified in the systems of internal control for the 18 months ended 31 December 2011. After reviewing internal financial reports and budgets, the Board believe that the Leprosy Mission New Zealand will continue to be a going concern in the foreseeable future. For this reason they continue to adopt the going concern basis in preparing the financial statements.



Statement of Financial Performance

STATEMENT OF FINANCIAL PERFORMANCE FOR THE 18 MONTH PERIOD ENDING 31 DECEMBER 2011

THE LEPROSY MISSION NEW ZEALAND INCORPORATED

Incoming Resources	Notes	18 months 2011 \$	12 months 2010 \$
Donations Income	4f(i),8	2,429,486	1,509,198
Trusts/Corporates	4f(i)	221,937	55,640
Bequests	4f(ii)	1,521,723	902,233
Interest and Other Income	4f(iii)	58,885	55,873
NZ Government Grants from MFAT ¹	4f(i),9	933,775	2,141,080
TOTAL INCOMING RESOURCES		\$ 5,165,806	\$ 4,664,024

Resources Expended			
Overseas Ministry	9	2,886,969	2,679,252
Education		153,513	209,742
Marketing and Promotion		1,443,376	763,799
Administration		276,965	258,583
Depreciation	4b	59,421	71,400
TOTAL RESOURCES EXPENDED		\$ 4,820,244	\$ 3,982,776
Surplus/(Deficit) for the year		\$ 345,562	\$ 681,248
Less: Transfer to Reserves	14f	(\$ 77,957)	0
General Funds carried forward		\$ 267,605	\$ 681,248

The accompanying notes form an integral part of these financial statements.

1. Ministry of Foreign Affairs and Trade

Statement of Changes in Equity

STATEMENT OF CHANGES IN EQUITY FOR THE 18 MONTH PERIOD ENDING 31 DECEMBER 2011

THE LEPROSY MISSION NEW ZEALAND INCORPORATED

	Notes	18 months 2011 \$	12 months 2010 \$
Balance at beginning of year		1,376,571	680,991
Ethiopian Building Fund	14a	-	(5,000)
Lend n Mend	14c	(6,000)	(310)
Leprosy Social Research Fund	14d	-	(28,689)
Reserves	14f	81,870	48,331
(Deficit)/Surplus for the year		267,605	681,248
BALANCE AT END OF YEAR		\$ 1,720,046	\$ 1,376,571

The accompanying notes form an integral part of these financial statements.



Statement of Financial Position

STATEMENT OF FINANCIAL POSITION AS AT 31 DECEMBER 2011

THE LEPROSY MISSION NEW ZEALAND INCORPORATED

	Notes	18 months 2011 \$	12 months 2010 \$
CURRENT ASSETS			
Bank Accounts, Cash and Deposits	10	2,648,828	883,332
Accounts Receivable and Prepayments	4d	94,947	83,971
		\$ 2,743,775	\$ 967,303
CURRENT LIABILITIES			
Less Current Liabilities – Accounts Payable	4e	124,550	118,130
Less Funds committed for future remittances	11	1,389,740	
WORKING CAPITAL		\$ 1,229,485	\$ 849,173
NON CURRENT ASSETS			
Equipment, Furniture and Fixtures, Motor Vehicles	12	31,271	70,890
Advances (Share of Partnership)	13	443,837	441,037
Investments	4c(i)(iii)	15,453	15,470
TOTAL NON CURRENT ASSETS		\$ 490,561	\$ 527,398
TOTAL ASSETS		\$ 1,720,046	\$ 1,376,571
EQUITY			
General Funds	14b	1,223,354	955,749
Lend n Mend Fund (Restricted)	14c	47,845	53,845
Leprosy Social Research Fund	14d	4,311	4,311
Restricted Capital Fund	14e	314,335	314,335
Reserves	14f	130,201	48,331
TOTAL EQUITY		\$ 1,720,046	\$ 1,376,571

The accompanying notes form an integral part of these financial statements.



Grant Pollock CA
TREASURER



Ross Dillon LLB (Hons), MCom Law (Hons)
CHAIRMAN

Cash Flow Statement

CASH FLOW STATEMENT FOR THE 18 MONTH PERIOD ENDING 31 DECEMBER 2011

THE LEPROSY MISSION NEW ZEALAND INCORPORATED

	18 months 2011 \$	12 months 2010 \$
CASH FLOWS FROM OPERATING ACTIVITIES		
Donations and bequests	4,162,170	2,449,567
Government Grants	933,775	2,141,080
PAYMENTS		
Remittances made to overseas ministries	(1,497,229)	(2,679,252)
Payment to suppliers and employees	(1,867,434)	(1,284,638)
NET CASH FROM OPERATING ACTIVITIES	\$ 1,731,282	\$ 626,757
CASH FLOWS FROM INVESTING ACTIVITIES		
Interest	58,885	55,873
Purchase of non-current assets	(21,871)	(4,108)
Advance to partnership	(2,800)	0
NET CASH FROM INVESTING ACTIVITIES	\$ 34,214	\$ 51,765
Net increase in cash and cash equivalents	1,765,496	678,522
Cash and cash equivalents at beginning of period	883,332	204,810
CASH AND CASH EQUIVALENTS AT END OF PERIOD	\$ 2,648,828	\$ 883,332
RECONCILIATION WITH REPORTED OPERATING SURPLUS		
Reported surplus/(loss)	345,562	681,248
Depreciation	59,420	71,400
Less Interest Income	(58,885)	(55,873)
(Increase)/Decrease in Accounts Receivables	(10,976)	(17,504)
Increase/(Decrease)in funds committed to remittances	1,389,740	0
Increase/(Decrease)in Accounts Payable	6,420	(52,514)
NET CASH INFLOW FROM OPERATING ACTIVITIES	\$ 1,731,282	\$ 626,757

The accompanying notes form an integral part of these financial statements.

Notes to the Financial Statements

For the 18 month period ending 31 December 2011

1. Reporting Entity

The Leprosy Mission New Zealand Incorporated is a charitable organisation, based in Auckland, Incorporated under the Charitable Trusts Act 1957 and registered under the Charities Act 2005 as Charities Registration No. CC37638. It provides essential services and support to people experiencing the causes and consequences of leprosy. The Leprosy Mission New Zealand is represented on the Leprosy Mission International Board based in Brentford, UK.

LMNZ physical address: The Leprosy Mission New Zealand Incorporated
591 Dominion Road, Balmoral, AUCKLAND 1041

2. Date of Authorisation

During the last financial year a decision was taken by the Board to change the balance date to 31 December. This would align our reporting period with the International office, who we work alongside in a global partnership. The current financial statements of the Leprosy Mission New Zealand are for the 18 month period ended 31 December 2011. As a consequence of the change in balance date the amounts in the financial statements are not entirely comparable (NZIAS 1, Para 36). These statements will be authorised for issue after the Board meeting on 31 March 2012.

3. Statement of Compliance and Basis of Preparation

The financial statements have been prepared in accordance with Generally Accepted Accounting Practice in New Zealand (NZ GAAP). They comply with New Zealand equivalents to IFRSs (NZ IFRSs) and other applicable Financial Reporting Standards, as appropriate for public benefit entities that qualify for, and apply, differential reporting concessions.

The Leprosy Mission New Zealand is a public benefit entity that raises funds together with New Zealand government grants for leprosy related work undertaken overseas. The Leprosy Mission New Zealand is required by its constitution to prepare general purpose financial statements.

The Leprosy Mission New Zealand qualifies for differential reporting concessions as it does not have public accountability and it is not large. All available differential reporting exemptions allowed under the Framework for Differential Reporting for Entities Applying New Zealand Equivalents to IFRSs Reporting Regime have been applied, except for:

- NZ IAS 12.NZ5.3: the Leprosy Mission New Zealand has not used the rates of depreciation permitted for income tax purposes because we are a tax exempt entity.
- NZ IAS 18.NZ6.1: the Leprosy Mission New Zealand's financial statements are prepared on a GST exclusive basis.
- NZ IAS 18.35(b): the Leprosy Mission New Zealand has disclosed each significant category of revenue.

The financial statements are presented in New Zealand Dollars (NZD) rounded to the nearest dollar.

The financial statements are prepared on the historical cost basis.

The accounting policies set out below have been applied consistently to all periods presented in these financial statements.

4. Accounting Policies

(a) Owned Assets

Assets comprise furniture and fixtures, office equipment and vehicles in addition to an interest in the Missions Centre Partnership of which the Leprosy Mission New Zealand owns a 50% share at 591 Dominion Road. Except for interest in the Missions Centre Partnership, all assets have been recorded at cost less accumulated depreciation.

(b) Depreciation

Depreciation is calculated so as to write off the cost of furniture and fixtures, office equipment and vehicles, on a straight-line basis over the expected useful economic lives of the assets concerned.

The estimated useful lives of assets are as follows:

- Computers and software – 3 years
- Furniture and Fixtures – 5 years
- Motor vehicles – 5 years

(c) Investments

- The policy of the Mission is to make available all possible funds for immediate leprosy work. Specific funds are invested so as to only utilise the interest when received.
- Investments are shown in the Statement of Financial Position at the lower of cost or market value.
- The Leprosy Mission New Zealand's investments comprise cash together with 300 shares in Pacific Gas and Electric Company which were bequeathed to the Leprosy Mission New Zealand by a supporter. The fair value of quoted securities is determined based on bid prices at the balance sheet date. The book value of this investment remains unchanged from 2003. However as at 12 January 2012 the last sale listed on the New York Stock Exchange was USD 41.65 per share. Dividends with an average of US 0.39 cents per share was paid out in 6 installments for the 18 month period to December 2011 totalling NZ\$ 707.90.
- The Mission has a third share of a 5 share interest in freehold land in the Maori Freehold Land known as Anakiwi No. 10 Block.

(d) Receivables

Receivables are recognised at the original invoice amount less impairment losses. This balance is made up of prepayments and GST.

(e) Payables

Trade and other payables represent liabilities for goods and services provided to the Leprosy Mission New Zealand and which have not been paid at the end of the financial year. Given their short term nature, the carrying values of trade and other payables are considered a reasonable approximation of their fair values.

(f) Income

- Grants and Donations
Grant and donation income is recognised as income when it becomes receivable unless the Leprosy Mission New Zealand has a liability to repay the grant if the requirement of the grant or donation is not fulfilled. A liability is recognised to the extent that such conditions are unfulfilled at the end of the reporting period.
- Bequests
Bequests are recognised in the statement of financial performance when received.
- Finance Income (interest and dividend Income)
Interest is recognised in the statement of financial performance as it accrues, using the effective interest method. Dividend income is recognised in the statement of financial performance when the right to receive payments is established.

5. Emergency Grants

Interest is recognised in the statement of financial performance as it accrues, using the effective interest method. Dividend income is recognised in the statement of financial performance when the right to receive payments is established.

6. Income Tax

The Leprosy Mission New Zealand is wholly exempt from New Zealand income tax and gift duty having fully complied with all statutory conditions for these exemptions.

7. Goods and Services Tax

The statement of financial performance has been prepared so that all components are stated exclusive of GST. All items in the statement of financial position are stated net of GST, with the exception of receivables and payables, which are stated inclusive of GST.

8. Donation Income

This income is made up of the following

	18 months 2011 \$	12 months 2010 \$
Appeal Donations	1,647,063	966,287
Partners Programme	490,907	261,270
Moneyboxes	146,844	95,568
General Donations	144,672	186,073
TOTAL	\$ 2,429,486	\$ 1,509,198

9. Overseas Ministry and Grants

	18 months 2011 \$	12 months 2010 \$
KOHA Grants	0	1,566,000
SDF Grants ²	182,767	0
Bilateral Grants	751,008	393,775
Private Funds	1,953,194	719,477
TOTAL	\$ 2,886,969	\$ 2,679,252

² Sustainable Development Fund

It is LMNZ's policy to advise the Leprosy Mission International office of donations received for specified purposes.

10. Cash and Cash Balances

Cash comprises deposits with The Bank of New Zealand. A gift of \$ 5,000 (2010-\$ 5,000) is invested with a financial institution on the instructions of the donor.

11. Funds Committed For Future Remittances

Further grants from MFAT (Ministry of Foreign Affairs and Trade) of \$ 730,352 for a project in Bangladesh and \$ 659,388 for a project in Papua New Guinea were received but will be remitted after balance date.

In the previous accounting year \$ 181,305 for a project in Papua New Guinea was remitted in this financial period.

12. Equipment, Furniture and Motor Vehicles

	Cost	Current Year	Accumulated	Written Off	Carrying
	Depreciation		Amount		
2011					
Equipment	313,725	44,409	292,118		21,607
Furniture	64,617	11,812	60,286		4,331
Motor Vehicles	44,019	3,200	38,686		5,333
TOTAL	\$ 422,361	\$ 59,421	\$ 391,090		\$ 31,271
2010					
Equipment	312,606	53,993	264,092	2,300	46,214
Furniture	64,617	11,033	48,474		16,143
Motor Vehicles	53,458	6,374	35,486	9,439	8,533
TOTAL	\$ 430,681	\$ 71,400	\$ 348,052	\$ 11,739	\$ 70,890

13. Advances – Share of Partnership

	18 months 2011 \$	12 months 2010 \$
LMNZ share of original purchase price	220,000	220,000
The cost of subsequent improvements	72,500	72,500
BALANCE AS PER RESTRICTED CAPITAL	\$ 292,500	\$ 292,500
Add Other Advances:		
Capital purchases	19,670	19,670
LMNZ share of original purchase price	32,639	32,639
Advance towards roof consultancy and signage	9,245	9,245
Advance of 50% cost of roof	86,983	86,983
Advance towards maintenance fund	2,800	0
TOTAL ADVANCES	\$ 443,837	\$ 441,037

- A valuation of the building for insurance purposes was carried out by Seagar and Partners (Auckland) Ltd in October 2011 and the reinstatement estimate was stated as \$ 1,640,000 with an inflationary provision of \$ 150,000.
- A valuation from the Auckland City web site had the following values:

Land Value	\$ 1,170,000
Value of Improvements	\$ 710,000
CAPITAL VALUE	\$ 1,880,000

These advances are repayable in the event of the Leprosy Mission New Zealand withdrawing from the partnership.

14. Equity

The equity of LMNZ comprises the following:

(a)

Ethiopian Building Fund	2011 \$	2010 \$
Balance at beginning of year	0	5000
Less: Funds remitted	0	(5000)
Balance at end of year	0	0

(b)

General Funds	2011 \$	2010 \$
Balance at beginning of year	955,749	274,501
Add: surplus for the year	267,605	681,248
Balance at end of year	\$ 1,223,354	\$ 955,749

(c)

Lend n Mend Fund	2011 \$	2010 \$
Balance at beginning of year and may be repayable to the lender on demand	53,845	54,155
Less: Monies paid back or transferred to bequests	(6,000)	(310)
Balance at end of year	\$ 47,845	\$ 53,845

(d)

Leprosy Social Research Fund	2011 \$	2010 \$
This was established to provide funds for research into leprosy related issues	4,311	4,311
Balance at end of year	\$ 4,311	\$ 4,311

(e)

Restricted Capital Fund	2011 \$	2010 \$
Short term deposits	21,835	21,835
Advances to Mission Centre Partnership	292,500	292,500
Balance at end of year	\$ 314,335	\$ 314,335

(f)

Reserves	2011 \$	2010 \$
Balance at beginning of year	48,331	0
Add: 5% of bequest income received	76,086	47,258
Add: interest earned on deposits	5,784	1,073
Balance at end of year	\$ 130,201	\$ 48,331

Auditor's Report

To the readers of the Financial Report of the Leprosy Mission New Zealand Incorporated

I have audited the Financial Report on pages (28 to 32). The Financial Report provides information about the past financial performance of the Leprosy Mission New Zealand Incorporated and its financial position as at 31 December 2011. This information is stated in accordance with the accounting policies set out on pages (33 to 37).

Governing Body Responsibilities

The Board, as the governing body, is responsible for the preparation of a financial report which fairly reflects the financial position of the Leprosy Mission New Zealand Incorporated as at 31 December 2011.

Auditor's Responsibilities

It is my responsibility to express an independent opinion on the financial report presented by the Leprosy Mission New Zealand Incorporated and report my opinion to you.

Basis of Opinion

An audit includes examining, on test basis evidence relevant to the amounts and disclosures in the financial report. It also includes assessing:

- The significant estimates and judgements made by the Leprosy Mission New Zealand Incorporated in the preparation of the financial report, and
- Whether the accounting policies are appropriate to the Leprosy Mission New Zealand Incorporated's circumstances, consistently applied and adequately disclosed.

I conducted my audit in accordance with generally accepted auditing standards in New Zealand except that my work was limited as explained below. I planned and performed my audit so as to obtain all the information and explanations which I considered necessary. I obtained sufficient evidence to give reasonable assurance that the financial report is free from material misstatements, whether caused by fraud or error. In forming my opinion I also evaluated the overall adequacy of the presentation of information in the financial report. Other than in my capacity as auditor I have no relationship with or interest in the Leprosy Mission New Zealand Incorporated.

Qualified Opinion

The Leprosy Mission New Zealand Incorporated's income included donations from moneyboxes. Owing to the nature of this source of income there were no satisfactory procedures which I could adopt to confirm independently that all amounts to the Leprosy Mission New Zealand Incorporated were properly received.

In My Opinion

- Proper accounting records have been kept by the Leprosy Mission New Zealand Incorporated as appears from my examination of their records.
- Except for the inability of being able to independently confirm the moneybox donations received, the financial report in pages (28 to 32) complies with generally accepted accounting practice and gives a true and fair view of the financial position of the Leprosy Mission New Zealand Incorporated as at 31 December 2011 and the results of its operations for the 18 month period ended on that date.

My audit was completed on 28 February 2012 and my qualified opinion is expressed at that date.



Robert J Gilmour, MMS, B Com, CA, MIIA
Auckland

Thank You

On behalf of people and families affected by leprosy we would like to thank every single one of you who have supported us on our mission.

We would like to acknowledge all of our financial supporters including individual donors, those who have passed away and so thoughtfully remembered us in their Will, the International Development Group of MFAT (formally known as NZAID), businesses and suppliers, and the following trusts: The David Ellison Charitable Trust, Danesmead Charitable Trust, Zelda Roberts Charitable Trust, PC and HPW Green Charitable Trust and The Emma Sellars Charitable Trust.

Over the last 18 months our volunteers have donated a staggering 22,500 hours of their time, and we cannot begin to express just how much of a difference this has made to our work. We would also like to thank our Prayer Partners for continuing to remember our work in their prayers.

We are very thankful for the on-going commitment of our Committee members, our Society members and our dedicated Board members who give their time and support so willingly.

Finally we would like to thank our field partners and the global Leprosy Mission Network for all of their hard work and support.





Leprosy
MISSION NZ
100 years of families helping families



Leprosy Mission New Zealand

PO Box 10227, Dominion Rd
Auckland 1446, New Zealand
591 Dominion Rd, Balmoral
Auckland 1041, New Zealand

P +64 9 630 2818

FP 0800 862 873

F +64 9 623 1865

E enquiries@leprosymission.org.nz

W www.leprosymission.org.nz

Facebook Leprosy Mission New Zealand

Twitter @LeprosyNZ

Registered Charity Number CC 37638