



2022
Annual Report



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A message from our Board Chairperson

I wish to welcome you all to our 2022 annual report that highlights in summary some of the key achievements in the year. This year, was as successful as was the last, serving over 1.04 million people living up to our vision “Improved quality of life for communities we serve”. We continued to implement interventions to eliminate Trachoma, supporting the Ministry of Health (MOH) deliver 1.02 million treatments against active Trachoma, enhanced the delivery of comprehensive eye health services in 10 Districts of Luapula Province resulting in 15,772 screened and/or treated during which we restored sight to 597 people. We constructed two health facilities in Mumbwa and Rufunsa districts, that we handed over to the MOH and these will benefit over 5,000 people.

We recorded an increase in grant incomes of 84% from ZMW10,085,780 previous year to ZMW18,554,733, this financial year. We closed with an excess over expenditure of ZMW759,064 compared to ZMW 549,408 the year before. This excess will be invested in institutional capacity to ensure we continue to deliver quality in our programming and grow our portfolio, all within our strategic objectives.

The achievement scored in the year could not have been possible without the support from the Lions fraternity in Zambia and world over, other strategic and funding partners, the Board, committee members and indeed management.

I wish you a happy reading and I look forward to your feedback.

Yours in service

Dr Hastings Eli Chiti

Dr Hastings Eli Chiti
Board Chairperson



Be Inspired

Who we are

LIAZ is a Non-governmental Organization (NGO) registered under the Non-governmental Organization Act of 2009. It is a developmental agency for Lions Clubs International Districts 413 Zambia responsible for design and implementation of long-term, impactful humanitarian service projects. It is an approved public benefit organization under section 41 of the Income Tax Act Chapter 323 of the Laws of Zambia.

VISION

Improved quality of life for communities we serve.

MISSION

Provide equity of access to health, education and empower women, youth, and persons with disabilities by working with partners.

STRATEGIC PRIORITIES



Health

Promote access to equitable health services that include the prevention and treatment of blindness, measles, non-communicable disease with a focus on diabetes, and childhood cancer.



Education

Promote access to equitable education for children and youth to enable them to have an opportunity to achieve their dreams.



Empowerment

Promote the empowerment of women, youth, and persons with disabilities to lead more independent and fulfilling lives.



Disaster Relief

Promote environmental protection and support disaster relief efforts to affected communities.



Institutional Development, Governance, and Leadership

Strengthen organisational capacity for effective and efficient delivery of its' mandate and further commit to decision making and financial stewardship that reflects the organization's values and strategic priorities.



Health

Trachoma Elimination Programme

Trachoma is the leading infectious cause of blindness worldwide. It is caused by a bacterium called *Chlamydia trachomatis* and is one of the known Neglected Tropical Disease (NTDs). Trachoma if left untreated results in visual impairment or blindness. Visual impairment or blindness results in a deterioration of the quality of life of affected individuals and their families, who are normally already amongst the most vulnerable. Women are 4 times more likely to go blind compared to men, probably due to their gender-determined roles in their homes which include taking care of children that may be infected thereby putting them at higher risk of trachoma infection.

In Zambia, Trachoma is a disease of public health concern and was endemic in 56 out of 116 districts at baseline putting a population of over 7 million people at risk of visual impairment and blindness. Of the 56 districts, the highest prevalence of active trachoma was recorded in Gwembe District in Southern Province at 52.9% although Western Province recorded the most number of endemic districts.

In last year, we worked with the Ministry of health (MOH) and other partners to implement activities in line with the recommended World Health Organisation (WHO) SAFE strategy which stands for Surgery for Trichiasis, Antibiotics to treat infection, Facial cleanliness and Environmental improvement to limit transmission to eliminate trachoma. We implemented the following activities.

Partner Coordination Meetings

The MOH convened the NTD review and planning meeting which was facilitated by LIAZ. The meeting drew participation from Government line ministries such as the Ministry of Education, Ministry of Water Development, Sanitation and Environmental Protection and other partners supporting interventions to eliminate NTDs in Zambia. During the meeting it was reported that Zambia had an NTD burden of sixteen (16) out of the twenty (20) known NTDs. The National NTD target is to eliminate at least two NTDs by the year 2026, namely Trachoma and Lymphatic Filariasis (LF).



Mass Drug Administration (MDA)

We delivered treatments to 1,026,298 people against active trachoma in 10 districts of Western, Central and Northwestern Provinces. To effectively conduct the MDAs, a total of 208 Health workers drawn from all the facilities from the target districts were trained by national and district level certified trainers. The trained health workers subsequently oriented 2,952 Community Drug Distributors (CDDs) from their respective catchments under the supervision of district level supervisors.



Mwitumwa Sifamwelwa administering the drugs at Sankandi Primary School, Sioma District

We printed Information Education Communication (IEC) posters, held sensitization and awareness meetings with civic and traditional leaders to ensure the community were receptive to the campaign. The twelve districts that participated in the MDAs all officially launched their campaign by conducting colorful events. All the events were officiated by the District commissioners (DCs) and attended by the District Health Director (DHDs), Traditional leaders, representatives from other line ministries, national MDA Trachoma trainers, and the community members at large.



Pupils from Naliowa Day Secondary School lead the invited guests in singing the Zambian national anthem at the MDA launch in Kalabo District

Traditional leaders' involvement in Trachoma MDA

His Royal Highness Chief Ingwe of the Kaonde people of Kasempa District attended the MDA launch at Kankolonkolo Rural Health Centre and encourage the community to take the drugs. To demonstrate his conviction, he took the drug first and in the presence of the community that gathered to witness the launch.



His Royal Highness chief Ingwe taking Azithromycin tablets during the Trachoma MDA

MDA TREATMENT - JULY 2021 TO JUNE 2022



Surveys

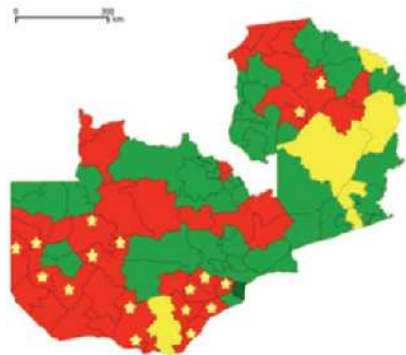
We conducted trachoma surveys in 26 districts representing 18 Evaluation Units (EUs). The surveys were conducted based on a protocol that was approved by the Ministry of Health, University of Zambia Biomedical Research Ethics Committee and National Health Research Authority. The data was collected electronically through android smart phones using purpose built Open Data Kit based application (Tropical Data). To ensure data was collected accurately, data collection teams that comprised a grader and recorder, were trained by Master Trainers assigned by Tropical Data.



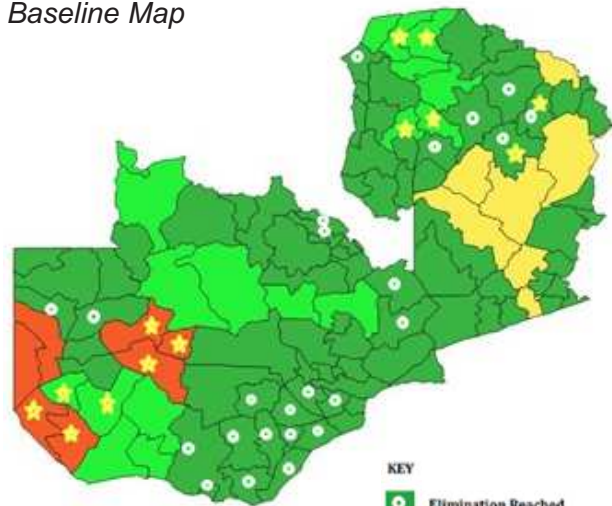
Mr Levy Banda a Trachoma Grader screening a family in Maata Village, Senanga District

Following the data collection and analysis, the results revealed that all the EUs reached WHO elimination threshold of Trachomatous Follicular (TF) below 5% while four EUs had a Trachomatous Trichiasis (TT) prevalence that fell above the required WHO elimination threshold of 0.2%. The maps below give an illustration on progress made to Trachoma Elimination thus far.

Trachoma Endemicity Maps



Baseline Map



Current, June 2022



Dr Consity Mwale(Principal Investigator) orients the Graders and Recorders on Sampling at a meeting, Kabwe District.

56
Districts
Endemic

22
Elimination
Achieved



Health

Comprehensive and Inclusive Eye Care Programme

The comprehensive and inclusive eye care programme aims to enhance the delivery of eye health services at primary and secondary level hospitals. This is achieved through enhancing human resource capacity by providing scholarships for midlevel staff to train as Ophthalmic Clinical officers and nurses, provision of appropriate technology that is diagnostics and curative equipment and instrument, sensitizing and raising awareness of the community and the provision of medical commodities used to offer free eye services. The overall goal is to prevent avoidable blindness and promote the rights of those who are blind or visually impaired so they could live an independent life.

Service Delivery

A total of 15,843 people were screened and or treated in 10 districts of Luapula Province. Out of the total number screened, 595 cataract surgeries (sight restoring) were conducted. In addition, we supported the screening of 1,036 school going children and those found with minor eye conditions were treated whilst those needing further treatment were referred.

Human Resource

We awarded scholarships to four (4) health workers for a Diploma in Ophthalmic Nursing (DON) course. The four health workers were from Samfya, Milenge, Chipili and Chembe districts of Luapula Province. They completed their training in June 2022 and were trained at Sheikh Zayed Eye Care Centre in the Gambia.



The four health staff that graduated in Gambia (L-R, Othniel Limwany, Maivune Simpungwe, Paul Mumba and Tabitha Mpundu

Seven (7) health staff were trained as Trainer of Trainers (TOT) in Primary Eye Care (PEC). The trained staff who were from Samfya, Chifunabuli, Nchelenge, Chiengi, Mansa subsequently oriented RHC In-Charges based at all Health Centres in their respective Districts under the supervision of the Master Trainer Dr Chisanga Chelu. 107 Health Centre In-Charges in Chiengi, Mansa, Chifunabuli, Chipili, Chembe, Samfya and Milenge districts were oriented in Primary Eye Care (PEC). The programme will continue to orient all the health workers with the aim of covering all the 10 target Districts. The PEC training aims to build capacity on how to promptly identify, diagnose and treat minor eye diseases at primary level.

Infrastructure, Equipment, and Instruments

In line with the MOH National Eye Health Strategic Plan list of essential equipment and instruments for second level hospitals, we donated equipment and instruments that included Slit lamps with applanation tonometer, A&B Scan, Handheld tonometers, refraction sets, Direct and Indirect ophthalmoscopes to mention but a few. The equipment was donated to Chembe, Milengi, Chipili, Samfya, Nchelenge, Chifunabuli and Mansa. This equipment and instruments would enable Chembe, Milengi, Chifunabuli and Chipili establish functional eye clinics. It would also enhance accurate diagnoses and improve quality outcomes, hence preventing blindness.



Meeting participant (Ophthalmic staff) demonstrates the application of medication to the eye during the PEC training

Four (4) staff were trained in project management to enhance efficiency and effectiveness in the management of the projects in the target areas. Of the four, two were from LIAZ and the other two health staff from Mansa and Nchelenge districts. The training was held at the Mbarara University and Referral Hospital Eye Centre (MURHEC) in Mbarara, Uganda.



Ln Emmanuel Kangwa handing over equipment to Acting Luapula Province Permanent Secretary Mr. John Mwash



Dr. Chansa (Ophthalmologist) Screening a Patient at Mansa General Hospital.

Information and Publicity

To ensure that everyone (women, elderly, disabled and vulnerable groups) are well informed about their health needs and that demand is created, various information sharing, and publicity methods were used.

We held awareness meetings with traditional and civic leaders in Samfya and Chifunabuli Districts to ensure they were well acquainted and became advocates of the program in their respective communities. We also supported airing of eleven (11) radio programs in Nchelenge, Chiengi, Samfya and Mansa. The programs featured health workers who explained the various eye conditions, treatment, and prevention. The programs also featured cataract champions who gave testimony of how their lives had changed after undergoing surgery. Additionally, the champions encouraged others with similar conditions to seek health services from qualified health institutions. We printed 1,680 information, Education and Communication posters on eye health. The posters were printed in English and local language and placed in centers of population aggregation. Further, we commemorated the World Sight Day and the International Day for Persons with Disabilities (IDPD) during which we advocate for prioritization of eye health services through increased budget allocation and the rights of people living with disabilities respectively.





Health

Non-Eye Health Programme

Our overall humanitarian goal is to alleviate suffering, save lives and make the world a better place for everyone to live by supporting interventions that promote access to basic needs which include Health, nutrition, education and housing, among others. Through these interventions, we deliver services that address unmet human needs while targeting vulnerable populations and communities in the Country.

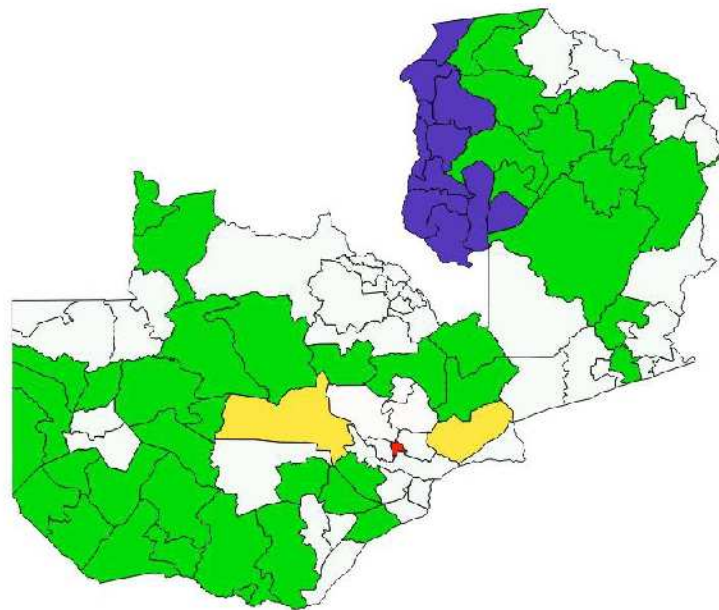
During the year with support from Lions Clubs International Multiple District 104E and with counterpart funding from Lions Clubs International Foundation (LCIF), we constructed additional facilities at Kayumweyumwe Health Post in Nambala Ward of Mumbwa District. The facilities constructed at K1, 379, 060.66 included mothers' shelter, 1 staffhouse, 2 VIP toilets, electrification of the Health post and installation of water and solar pump. This was the second phase having constructed the Health post, a staffhouse and incinerator earlier. The Health centre is benefiting approximately 2,500 of people from Nambala Ward. We also handed over 120 desks to Kayumweyumwe school which is situated next to the Health Centre.



Kayumweyumwe Mothers' Shelter

Further, with funding from Varre Jul, we constructed a Health centre at Chamulimba in Rufunsa District. The Health centre comprising of a health post, one staffhouse, water amenities and an incinerator was constructed at total cost of ZMW1,302,000. The centre will benefit 2,500 people and will bring the health services close to the community.

Operational Areas 2021 – 2022



KEY

- Comprehensive and Inclusive Eye Care Programme
- Trachoma Elimination Program
- Non – Eye Health Programme
- Lions Aid Zambia Office



OUR IMPACT

Ophthalmic Nursing Training begins to bear fruit

The Government of the Republic of Zambia through the National Eye Health Strategic Plan aims to reduce avoidable blindness through the provision of quality eye health services as close to the family as possible. The Ministry of Health (MoH), however, notes that human resource for eye health in Zambia is inadequate and that the distribution of the human resource is uneven with the concentration being along the line of rail.

The above implies that eye health services are not available in areas that lack human eye health resource, a situation that worsens vision impairment and leads to avoidable blindness. It is against this background that Lions Aid Zambia (LIAZ) with support from the Lions Clubs International Foundation (LCIF) offered scholarships to 5 General Nurses and Clinical Officers to study Ophthalmic Nursing in the Gambia, with a view to establish eye health services in Milenge, Chipili, Chembe, Mwense and Lunga through Samfya District.

Fortunately, the training of health staff as ophthalmic nurses is already yielding results in the targeted areas.

Mr. Maivune Simpungwe, one of the beneficiaries of the ophthalmic training in Gambia, is already making a difference in Milenge District by providing eye care services that were previously not available in the District.

Between August and December 2022, Mr. Simpungwe screened 592 people, conducted 1 cataract surgical outreach camp where 35 cataract surgeries were conducted and trained 11 Rural Health Centre (RHC) In-Charges in Primary

Eye Care (PEC). Additionally, he referred 28 eye patients to Mansa General Hospital.

Mansa General Hospital (MGH) Medical Superintendent Dr. Chisanga Chelu confirmed having received 28 referrals from Milenge adding the other trained staff have also been ably managing eye conditions and referring some to MGH Eye department.

Mr. Simpungwe, who is now raising awareness about the availability of eye care services in the district, thanked LIAZ for sponsoring him for the ophthalmic training. "I am grateful to LIAZ for the training opportunity that has enabled me to effectively deliver the needed eye health services," Simpungwe said.

Meanwhile, the other health staff that were trained together with Mr. Simpungwe are equally providing the eye care services in Samfya, Chembe and Chipili districts.

With support from the government, the eye care services that have been established as a result of the ophthalmic training in the Gambia will most likely be sustained beyond the project life of the Comprehensive Eye Health Project.



Mr. Simpungwe screening a patient at Milenge District Hospital

Overcoming all barriers to reach the marginalised communities in Ngabwe District



According to recent statistics, the prevalence of blindness in Zambia ranges from 2.2% to 4.4% which implies that there are 339,081 to 678,162 people who are either visually impaired or blind within a population of 16 954 051. The leading causes of blindness are cataract (53.2%), glaucoma (19.0%), trachoma (5.7%), refractive errors (15.3%), corneal

opacity (3.6%), and retinal disorders (3.2%). All of these causes of vision impairment are preventable or treatable with early detection and management, as well as cost-effective interventions encompassing promotion, prevention, treatment, and rehabilitation. The majority of eye health services are delivered through primary health care levels, in accordance with the government policy of delivering health services through the primary health care approach.

To address the needs associated with eye conditions and vision impairment, Lion Aid Zambia (LIAZ) has continued to collaborate with the government and other eye care partners to build up efforts to combat eye diseases, especially trachoma, in Zambia.

Recently, LIAZ in collaboration with the Ministry of Health reached out to communities in Ngabwe District to screen them for trachoma. Mutoshi Kahokola, an Ophthalmic Clinical Officer from Solwezi General Hospital's eye clinic who supports the work being carried out by LIAZ, said he has been a trachoma Grader for five years.

"Despite the distances we travel, I have witnessed smiles, satisfaction, and gratification from the communities I have served." "Working with Lions Aid Zambia, I have witnessed their determination, resilience, objectivity, and passion in what they do to ensure communities are reached," says Mr Kahokola.

Mr Kahokola and other graders have had a difficult time reaching out to some communities due to poor road networks.

"As trachoma survey team (Grader and Recorder), it is not always easy for us to overcome all barriers to ensure communities are screened for trachoma. We traveled for four hours on gravel road, an hour on a banana boat, and 30 minutes on a motorcycle as this

was the only way to get to Muyanje Village on Ngabwe District's Chilwa Island of Ngabwe District, which is about 150 kilometers from Kabwe," he said. Mr Kahokola (Grader) and Wilson Ngulube (Recorder) traveled cheerfully, motivated by the communities' warm welcome and willingness to be screened in that area.

Mr Ngulube, a registry clerk at the Provincial Health Office in Chipata, Eastern Province, has been a recorder since 2016 and praises LIAZ for its role in improving eyesight in Zambian communities.

"The Ministry of Health, through Lion Aid Zambia has positively changed people's lives by bringing health services to their doorsteps in various communities throughout Zambia in activities such as Trachoma screening," says Mr Ngulube.

He encourages the community to work with and support the health workers who visit their homes for screening in order to help the Ministry of Health achieve its target and goals of universal coverage and a trachoma-free Zambia.

Joyce Ngambi regains her sight



In Zambia, the prevalence of blindness ranges from 2.2 to 4.4%, which implies that 431,437 to 862,874 are visually impaired or blind, with

cataracts accounting for 50% of all cases, followed by glaucoma, trachoma, refractive errors, corneal opacities, and diabetic retinopathy, to name a few. Luapula province in Zambia is one of the most affected by avoidable blindness.

The Ministry of Health, in collaboration with Lions Aid Zambia, Pyott Foundation and Lion Club International Foundation has been working to reduce avoidable blindness in Luapula province.

Joyce Ng'ambi, 55, of Mansa District, has suffered blindness since 2019, until recently when she got her eyesight back after a successful operation at Mansa General Hospital. She explains that she suffered from blindness in 2019 and she was taken to the hospital in 2021.

"I used to sell Kapenta at the market and when I started experiencing bleary vision, I thought that maybe it was due to staying long hours in the sun light that was distorting my vision. In the end I completely lost my vision and that is how my son took me to the hospital," She explains.

Joyce underwent bilateral cataract surgery at one of the cataract surgical outreach camps in Mansa and is now a Comprehensive Eye Health Project beneficiary. She describes how her life has improved since her sight was restored following successful eye surgery.

She gives thanks to God and the medical personnel that have assisted restore her sight.

More details are in this interview: <https://liaz.co.zm/joyce-ngambis-story/>

Board of Directors

Board of Directors



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Dr Hastings Eli Chiti



Vice Board Chairperson
Dr Grace Chipalo Mutati



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Ms Christine Kasonde



Board Member
Counsel Mudford Mwandenga



Board Member
Eng Robinson Misitala



Board Member
Eng Sanjay Balid



Board Member
Dr Lillian CM Musonda



Board Member
Dr Peter M Mangani

Ex-officio



Executive Director
Mr Nicholas Mutale



District Governor 2021-2022
Mr Emmanuel Kangwa

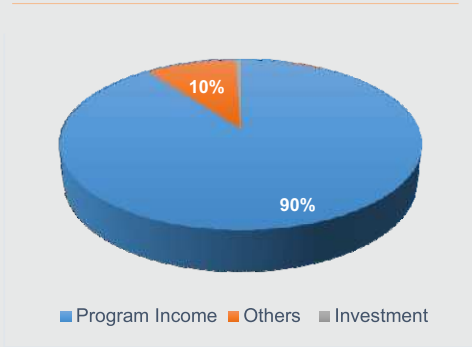


Magnifying Lions

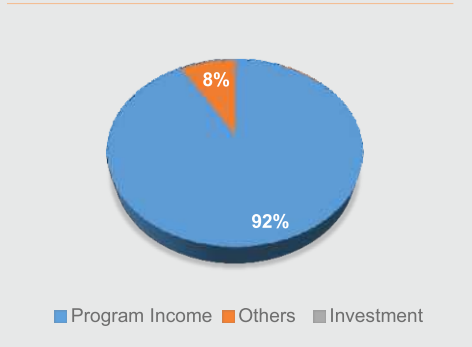


Income by Fiscal Year (ZMW)

2021 - 2022

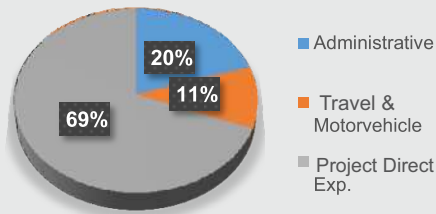


2020 - 2021

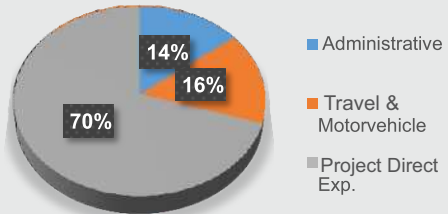


Expenses by Fiscal Year (ZMW)

2021 - 2022

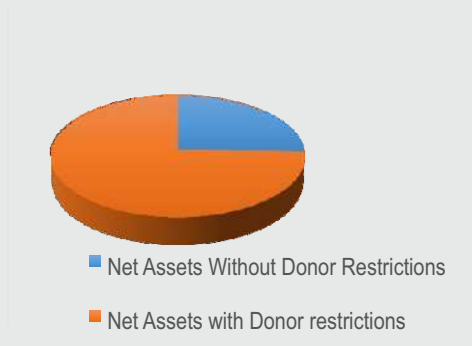


2020 - 2021

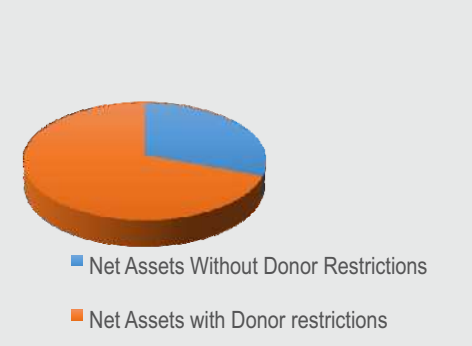


Total Net Assets by Fiscal Year (ZMW)

2021 - 2022



2020 - 2021



Statement of Comprehensive Income and Expenditure

For the year ended 30th June, 2022

Zambian Kwacha	2022	2021
Income	18,551,778	10,085,780
Exchange (losses) gain	(228,147)	42,706
Total Income	18,323,631	10,128,486
Operating expenditure	17,567,522	9,594,776
Excess income over expenditure from operating activities before taxation	756,109	533,710
Income Tax expenses	0	0
Excess income over expenditure for the year	759,109	533,710
Other comprehensive income	0	0
Total comprehensive excess income over expenditure for the year	756,109	533,710

Statement of Financial Position

For the year ended 30th June, 2022

Zambian Kwacha	2022	2021
ASSETS		
Current assets		
Treasury Bills	731,468	0
Other receivables	211,894	187,987
Cash and cash equivalents	4,862,467	2,113,593
	<u>5,805,829</u>	<u>2,301,580</u>
Non-current assets		
Property, plant and equipment	168,957	194,869
	<u>168,957</u>	<u>194,869</u>
Total Assets	<u>5,974,786</u>	<u>2,496,449</u>
FUND AND LIABILITIES		
Fund and reserves		
Accumulated fund	1,521,259	765,150
Total accumulated fund	<u>1,521,259</u>	<u>765,150</u>
Non-current liabilities		
Deferred income	3,727,752	1,484,645
	<u>3,727,752</u>	<u>1,484,645</u>
Total current liabilities		
Other payables	725,775	246,654
Total liabilities	<u>725,775</u>	<u>246,654</u>
Total current liabilities and accumulated funds	<u>5,974,786</u>	<u>2,496,449</u>

Statement of Cash flow

For the year ended 30th June, 2022

Zambian Kwacha	2022	2021
Cash inflows from operating activities		
Excess of income over expenditure.	756,109	533,710
Bank interest	(85,006)	(1,506)
Depreciation	57,227	50,964
	<u>728,330</u>	<u>583,168</u>
Changes in working capital		
(Increase) other receivables	(23,907)	(2,846)
Increase in other payables	479,121	229,254
Cash generated from operations	<u>455,214</u>	<u>226,408</u>
Net cash inflows generated from operating activities	<u>1,183,544</u>	<u>809,576</u>
Cash flow from investing activities		
Payments to acquire fixed assets.	(31,315)	(228,639)
Treasury Bills	(731,468)	0
Net cash outflow on investing activities	<u>420,761</u>	<u>580,937</u>
Cash flows from financing Activities		
(Decrease)Increase in deferred income	2,243,107	(560,906)
Interest received during the year	85,006	1,506
Increase in cash and cash equivalents	<u>2,748,875</u>	<u>21,537</u>
Cash and cash equivalents at 1 st July 2021	2,113,593	2,092,056
Cash and cash equivalents at 30th June 2022	<u>4,862,467</u>	<u>2,113,593</u>

Our Partners

Organizations that provide financial and technical support in the last one-year.



Lions Clubs International
FOUNDATION



REPUBLIC OF ZAMBIA
MINISTRY OF HEALTH



Lions Clubs International
MD104 Norway



Våres Jul



Deutsches Komitee
zur Verhütung von
Blindheit



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All donations go directly to making a
difference for our cause.

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OUR VALUES

*Honesty, Commitment, Respect for All,
Team Work, Kindness, Fairness, and Professionalism*

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