



MARANATHA HEALTH

2022

YEAR IN REVIEW

**2022 Annual Report for  
Maranatha Hospitals Aid and Development Fund Inc.  
(Maranatha Health)**

An Australian charity. Registered with Australian  
Charities and Not-for-profits Commission.

ABN: 15 928 552 503  
Maranatha Hospitals Aid and Development Fund Inc.

ABN: 34 290 264 644  
The Trustee for Maranatha Hospitals Aid & Development  
Australia Fund

[www.maranathahealth.org](http://www.maranathahealth.org)



**MARANATHA HEALTH**

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# About Us

Section 1

# Overview

## About us

Maranatha Health is an Australian and Ugandan non-profit organisation that aims to improve health outcomes, empower the poor, and make positive, lasting change.

## Our Motivation

'Maranatha' means 'come Jesus'. We seek to emulate the actions of this revolutionary, who healed the sick, advocated for the oppressed, empowered the poor, and disrupted the status quo.

## Our Vision

Everyone deserves to be well. At Maranatha Health we long to see strong, thriving, healthy and empowered communities taking charge of their futures. Maranatha Health undertakes projects in Uganda that fall into three categories:



- **EMPOWERING**  
Health system strengthening and capacity building.
- **DEVELOPING**  
Community health education and development.
- **HEALING**  
Healthcare provision.

# Values and Approach

## About us

We are committed to ensuring our values and principles underpin all aspects of our work in Australia and Uganda. We are passionate about aid and development programs being evidence-based, community-owned, and genuinely transformative. We believe in holistic, multi-dimensional, and innovative development, and seek to support programs that embody those values.

### Our Values

Justice and equity for the marginalised  
Respect  
Integrity and trustworthiness  
Discipleship  
Creativity  
Prayerful consideration

### Our Guiding Principles

Community partnerships  
Capacity building  
Holistic health and wellbeing  
Advocacy and education  
Transformation  
Reflective practice  
International development best practice



# History

## About us

Maranatha Health began with a dream to improve health care in an under-resourced part of Africa. With incredible support and energy from people in both Australia and Uganda, two entities, with one purpose, were born.

Maranatha Health is a registered charity in Australia governed by a Board of Directors and has an ATO-approved Public Ancillary Fund to receive tax-deductible donations. In Uganda, Maranatha Health is registered as a Not-For-Profit organisation, overseen by a local Board of Directors. These two distinct organisations work together in an interdependent relationship.

In 2011, founders Dr Michael and Kimberley Findlay established Maranatha Health Uganda's first project centre in Kamwenge District, Western Uganda. The centre included a community development hub, out- and in-patient services, and acted as a referral centre for the district. Maranatha Health Uganda quickly became renowned for providing high-quality services, in great demand. External factors later necessitated the clinic moving from its initial location.

A new centre was established in 2015, at Fort Portal, Kabarole District, focusing on children's health and strengthening the broader health system. Current services include a paediatric clinic with an operating theatre, and village health education and advocacy programs. Forty-three Ugandan staff are employed at Maranatha Health Uganda, together with visiting expatriates from Australia and the UK.





# From the Chair

## About us

We find ourselves at the end of another successful year in the history of Maranatha Health. There have once again been formidable challenges but also so much to celebrate. I want to begin by thanking all of you who faithfully supported MH through these difficult Covid years and allowed Maranatha Health not just to survive but to thrive. You will see from our Treasurer's report that this year represented the most successful fundraising year for us. What incredible generosity and faithfulness you have all shown! Thank you!

The Maranatha Health Australia team has again been incredibly well served by our Board of Directors. Despite challenging life events of their own including shifting houses, having babies, sitting specialist exams, returning to overseas work travel and more; they have prioritised Maranatha Health business and given generously of their time. I want to thank them all for their attendance at meetings but also for the head space they give to MH throughout their busy schedules as they scheme and dream about what the next steps are. I also want to thank Fiona Walker for her invaluable contribution as Minutes Secretary at our Board Meetings. Fiona enables all members to participate fully without having to concentrate on note taking, while adding her own occasional pearls of wisdom!

We thank the team at Galpins for their ongoing generosity in providing pro bono book keeping and auditing. They are kind, knowledgeable and responsive. If you're looking for an accountant we couldn't recommend them highly enough! Thanks also to our new Melbourne-based Project Coordinator, Kimberly Hobbs, and wonderful volunteers - Josh, Catherine, Wendy, Sandra among others - who keep the wheels turning on so many important processes!

Lastly but by no means least, we extend our thanks and heartfelt encouragement to the team at Maranatha Health Uganda. We continue to be so impressed by their dedication and commitment to serve their community, even in the face of so many difficulties and limitations. From the front gate of the clinic all the way to the front porch of a distant village home, they treat people with a warmth and compassion that is infectious. We hope that through this report you get a sense of the magnitude of what they have achieved this year despite Covid and myriad other challenges. We are so proud of what they do and feel so privileged to be a part of the wider Maranatha Health family. Our hope this year is to get closer to providing them with the new facility they so desperately need.

On behalf of the Maranatha Health Australia team, and Kim and our family, we send our warm good wishes and say, "Thank you"! We love having you as part of the MH family and we hope you will enjoy the ride wherever it takes us all next!

**Michael Findlay, Chair**







# Our Impact

Section 2

# Overview

## Our Impact

Maranatha Health is passionate about partnering with communities to see children thriving, healthy, and accessing quality healthcare. Thanks to the amazing generosity of our donors, we have continued to have a positive impact this year. Here is a snapshot:



*“At Maranatha I have been helped to understand how malaria presents in children. I regret wasting time in traditional practices, and delaying to bring my child to the hospital, my baby wouldn’t have become severely sick like this. I almost lost her. I will advise the mothers in my village to always seek medical treatment in time than going for traditional healing.”*

Afiya | Mother of Muhairwe, a 2yo girl treated at MH for Malaria, anaemia and dehydration.

*“Spending time with the MH Community Team, I got an idea of the impact Maranatha is having on local communities. It’s somewhat shocking to see the living conditions of the locals and how simple improvements such as drinking boiled water could save thousands of lives.”*

ChiChi Gao | AfID volunteer financial advisor, on her recent visit to MH Uganda.



# Empowering

## Our Impact: Building capacity

Most of our patients come from a poor background and face many complex health and social issues; borne out of the difficult mix of poverty, scant social support, a lack of power and low health literacy. Patients expect that they won't be given choices and a voice around their health care, and their experiences at other clinics are often disempowering. Maranatha Health is committed to finding ways to provide holistic care: treating the whole person, not just the presenting symptoms in front of us. As part of this program we offer on-site counselling, inpatient health education sessions, nutrition education (including cooking classes) for parents, and a home-visiting program. All these activities allow us to engage with families on a deeper level, to begin to unpack why people are sick, and bring lasting transformation into their lives. This work is made harder by COVID-19 but we have still managed. It has sometimes looked a bit different, and often taken place outside rather than in wards or office spaces.

The compassion of our community team at MH is transforming for patients who are struggling to survive, day after day, in very challenging circumstances. The patients to whom we provide this holistic care are tough; with some support and additional tools, they often manage to improve their lives and the lives of their children, inspiring us along the way!

### BUILDING CAPACITY IN UGANDAN HEALTH CARE

Post-graduate and other professional educational opportunities for Ugandans are limited and can be costly to access. Many of the skillsets needed in Uganda's health system are scarce and there is fewer than 1 doctor per 10,000 people. Where available, skills are often concentrated in urban areas. Maranatha Health Uganda's David Walker Memorial Scholarship Fund allows us to invest profoundly in the lives and careers of dedicated MH staff. The Scholarship Fund makes important professional development opportunities available to Maranatha Health staff so that they can offer much needed skills that benefit the organisation and the wider community.



# Empowering

## Our Impact: Holistic healthcare

Maranatha Health is committed to providing holistic healthcare to the communities it serves. Programs encompass nutrition classes, counselling, an HIV ART (anti-retroviral therapy) program, health education on the wards, family planning advice, and in-home visits provided by the community team.

### IMPACTS 2021/22 FY

- 70 In-home visits
- 20 Health education classes on wards
- 5 Nutrition education sessions
- 60 Patients in HIV/AIDS ART program
- 127 COVID-19 tests
- 28 COVID-19 patients treated and followed up
- We included COVID-19 education in our ward sessions.
- We delivered drugs to most ART patients in their homes during lockdown.
- We supported many vulnerable patients with food support, transport and medical bills.



# Thanks for opening our eyes!

## Our Impact: Innovative health interventions

District Chairman, Mr Rwabuhinga Richard, attended the graduation of 20 Health Advisors (ABs) in Nyamirima Community, whose health education training reached 410 households.

Inspired by success stories, testimonies of changed lives and reduced illnesses in the community, Mr Richard said, *“Thanks to the people of Maranatha for opening our eyes to such innovative health interventions; now we realise that as a district we can help each of our 365 villages to establish teams of Village Health Advisors and prevent diseases from disturbing our people. We had never thought about it, we have many types of advisors in the district, but we never thought about Health Advisors”*.

Improved community health outcomes have already included construction of household sanitation and hygiene structures (latrines, handwashing facilities, drying racks for utensils, rubbish pits) and the broad communication of vital health education to help households control diseases and seek health services when they become ill.



# Afiya's story

## Our Impact: Knowledge for empowerment

One-year-old Afiya\* was often sick and hadn't gained weight for six months. Suffering high fevers and convulsions, when her condition worsened, her mother brought her to the MH clinic. Afiya was admitted with malaria and severe malnutrition. While she was being treated, her mother was taught how to prepare a variety of foods to create a balanced diet and advised to use what was in her means to boost Afiya's immunity. *"Vitamins and vegetables were to be added on every meal."* Afiya's improving health was monitored at her post discharge appointments, with reiterated health and nutrition education. *"After a period of one month we followed up on them in a home visit, the child was found looking healthy; upper arm circumference was in green colour, weight matching with the child's age."*

Afiya's mother was delighted: *"Which kind of a hospital is MH? It cares and follows a poor child to the home as their own. Thank you for loving and caring for the needy like us; if it wasn't for your care my child would have died".*

\*name changed for privacy





# The fight against malnutrition

## Our Impact: Nutrition education changes lives

In the fight against malnutrition, Maranatha Health supports communities with nutrition education, and encourages the construction of household kitchen gardens. Families are encouraged to produce and consume a range of vegetables and nurture their gardens to improve productivity. Attending a cooking demonstration in Kijonjomi Community, 50 parents learned about food preparation, steam cooking, using locally available foods and materials, and maintaining good hygiene while preparing meals. They were taught about food types (“Go, Glow and Grow foods”) and what to feed young children. They appreciated the health education and requested more sessions, while their children eagerly enjoyed the demonstration meal!



*“I didn’t know the nutritious foods good for babies and how to mix them appropriately, today I have learnt new things.”*

*“I have learned to always give my baby boiled water which I wasn’t doing before.”*

*“I realised that I have been starving my child by giving only three meals a day, but today I have learnt how to increase nutrient intake for my child.”*



# Developing

## Our Impact: The Health Advisor Program

Uganda's burden of disease is dominated by communicable diseases such as Malaria, HIV/AIDS, and diarrhoeal diseases, which account for over 50% of illness and death. Many of these diseases can be prevented, managed or kept at bay with important shifts in community attitudes and practices. But this change is complex – there are many barriers to change, and people in rural communities are often focussed on day-to-day survival.

Our community health program trains Village Health Advisors (Abahabuzi B'ebyamagara in the local language) and empowers communities to make changes which prevent disease and encourage healthy behaviour. Remote villages elect 15-20 ABs who work intensively with our community team over the course of a year, becoming local change agents. Each month, a new health message is explored, using contextually designed pictorial resources and in-depth discussion to investigate barriers to change and generate solutions to bring about this change in the community. An AB then works to implement this change in their own household and encourages 20 other households in their village to do the same. Monthly education sessions include nutrition, safe water, hygiene, disease management and Malaria prevention.

The program includes comprehensive monitoring and evaluation so MH can measure improvements over time and discover what is and isn't working well. In communities with Village Health Advisors, people report less sickness; households have appropriate sanitation; communities have better access to primary healthcare; families use mosquito nets far more frequently; and health and nutrition knowledge improves enormously! The communities we work with are deeply committed to this program and notice its impact in their households.

### IMPACTS 2021/22 FY

- 162 ABs trained
- 2175 Families impacted
- 9 Villages engaged
- 46 Latrines built
- We were able to purchase face masks for all ABs in the program.
- We designed COVID-19 messages for communities to encourage hand washing, social distancing and face

masking. Many households introduced hand washing facilities at the home entry for all visitors.



# Masani's story

## Our Impact: Developing kitchen gardens

Masani\* is 68 years old and lives in Kitaka village, north of Fort Portal in the foothills of the Rwenzori mountains. Maranatha Health has been implementing its Community Health Advisor (AB) Program in Kitaka for six months.

Masani says her health advisor explained the benefits of having a kitchen garden and she decided to try establishing one. The garden she planted to feed her family of seven now also gives her an extra income. Masani sells her surplus vegetables to neighbouring households and at the weekly village market: *"I bought one tin of small eggplant seeds and bedded them. It's now four months but I earn money weekly from selling vegetables and I get enough vegetables for my family!"*

Masani is grateful Maranatha's AB program is being rolled out in her village and appreciates the health messages shared with her every month. She says it is great information that will create positive change in her community.

\* name changed for privacy



# Tippy-taps

## Our Impact: Developing good hygiene practices

Tippy taps are simple and cost-effective handwashing stations built from local materials. They have great potential to improve health outcomes for people living in rural settings where waterborne diseases are common, like the communities Maranatha Health serves. In these communities, most households lack adequate sanitation and essentials like soap and water for handwashing. Without readily available facilities, neglecting hand hygiene is very common. Residents frequently get waterborne diseases and gastrointestinal illnesses, like diarrhoea or stomach problems.

Failure to wash hands – before and after preparing food, before eating or feeding a child; and after visiting the toilet or changing and cleaning up a child who has done – increases the risk of contracting or spreading gastrointestinal and respiratory-related diseases. Inadequate sanitation and hygiene cause the majority of childhood diseases MH treats, and child deaths every day.

Tippy-taps are low-cost, simple, easy to construct and they do not depend on a piped water supply. It uses a small Jerry-can, plastic container or gourd filled with water and suspended from a wooden frame. A string is attached to the neck of the Jerry-can and tied to a piece of wood at ground level. Pressing on this piece of wood with the foot, tips the Jerry-can, releasing a stream of water through a small hole. Soap is suspended from the frame beside the Jerry-can. Tippy-taps use very little water, and only the soap is touched, which avoids cross-contamination of the Jerry-can.

Maranatha Health has made Tippy-taps the technology of choice for reducing illnesses and deaths associated with lack of water, inadequate handwashing stations and poor hygiene practices. The majority of people who learn about their health benefits build a Tippy-tap station immediately. Participants report its effectiveness in increasing handwashing and preventing illness in their families. Use of soap increases, and habitual post-latrine handwashing improves, when soap and water are readily available.



# Healing

## Our Impact: Health Services

Quality universal health coverage for children is essential to the wellbeing of a community. In rural Uganda, impoverished women and children fall sick often. Under-nourishment, inadequate treatment and insufficient health services exacerbate poverty and illness, often leading to further hardship and sickness. This debilitating cycle leads to high rates of morbidity and mortality in children: One in every 19 children die before their first birthday.

Maranatha Health is passionate about providing high quality, affordable health care to ensure children can thrive. Our clinic's reputation as a place of compassion and excellence continues growing.

### HEALTH SERVICES

The inpatient facility currently provides 30 paediatric beds and an additional six beds for adult patients. It is staffed by one doctor and 14 nurses and supported by three lab technicians, five clinical officers, one counsellor and three administrative staff. Over the last 12 months, Viral RTIs, Malaria, Pneumonia, Acute Diarrhoea and Urinary Tract Infections were the top five conditions for which inpatients were treated.

### IMPACTS 2021/22 FY

- 2315 Inpatients treated
- 10025 Outpatients treated
- 15994 Lab tests run
- 607 Gastrointestinal patients treated
- 140 Blood transfusions given
- 891 Malaria patients treated
- We were able to purchase a number of COVID-19 PPE and Test Kits.
- We improved our COVID-19 screening protocols and COVID-19 patient care (treatment and counselling).



# Kabornero's Story

## Our Impact: Acute and preventative healthcare

One-year-old Kabornero\* from Buhesi was critically ill when she was brought to the MH clinic in Fort Portal. Her mother tells their story:

*"Kabornero presented with fevers and I bought pain killers thinking they would help. The next day she got weaker, lost appetite, vomited and fevers increased. I continued to think the medicine I had bought will help my child. On the third day, I rushed her to the nearby clinic, there were many patients and the health workers took time to see my baby until she started convulsing. My baby was dying, I got scared and started crying, I called my husband who told me to rush her to Maranatha clinic. Reaching at Maranatha I thought my baby was already dead, I even called my relatives telling them she had passed on. Health workers started immediately to treat my baby and kept giving me hope that she will be fine. Within two hours Kabornero got up. I am very happy; this is my first time to Maranatha. I have liked the way health workers care for everyone; they gave me hope when I had lost hope. Maranatha saved my child, they taught me to take my child to hospital immediately they fall sick. I will always do that because I almost lost Kabornero due to delaying her in the village clinics."*

Kabornero was suffering from severe Malaria. A week before she fell ill, her mother too had been suffering, but didn't think it would spread to other household members. And before they fell sick, she had washed her mosquito net but not rehung it over the bed. With education she received from Maranatha, Kabornero's mother can now help protect her family from diseases like Malaria.

\* names changed for privacy



# Nantumbwe's Story

## Our Impact: Breaking barriers

Nantumbwe\*, is from Kitumba village, about 30km away from Maranatha Health's clinic. Nantumbwe was 11 months old when she presented with severe acute malnutrition with oedema (symptoms of swollen body, legs, stomach and face).

*"At first, I couldn't understand what was happening to my baby, she was not adding weight and was getting weaker despite feeding her every day. She didn't play like other kids. After some weeks, she started swelling the legs, cheeks and stomach. I thought my baby was bewitched or having traditional diseases. My neighbour advised me to take her to the nearby clinic but the nurse couldn't manage Nantumbwe's situation and told me there is a clinic for children in Fort Portal, called Maranatha. It was very hard getting there because of the Corona lockdown. I had to get a travel permit from the local council chairman, and after a day I had to travel on a motorcycle from Bunyangabu district to Fort Portal. This was a tough experience for me and my baby. **At Maranatha, the health workers cared for both of us.** They told me Nantumbwe was malnourished and needed nutrients - they started giving her milk and other packed foods. Within a week the swelling on her body reduced. **The counsellor talked with me and my husband about our daughter's condition and advised us on how to feed her at home. We were taught about the different types of food to feed Nantumbwe. We appreciate this service because we didn't know how to properly feed our baby and we could not get this knowledge anywhere.** Now we are ready to go home, we have been given more foods to feed Nantumbwe from home and a day has been set for us to come back to the clinic. The biggest challenge we have is transport. Travelling on a motorcycle from home to Maranatha is very expensive and tiring and you are stopped many times by police along the way, but for our child's life, we have to come."*



# Reflections

## Vale Gadson Saturday

With heavy hearts, MH grieved the passing of long term staff member Gadson Saturday in 2022.

“Gadson has been with us since the very early days of Maranatha Health in Kamwenge, in 2012. He has served MH diligently and with great loyalty, in the laboratory working alongside his good friend and colleague, Joshua. Gadson was a kind-hearted, gentle man. He was also a man with a strong, unwavering faith.



We have many memories of the Maranatha staff discussing matters of faith in the lunch room, and always Gadson was clear and unapologetic about what he believed to be true. Not only was this the case, but he was able to express his views without judgement towards others - instead he just lived by the values that he professed - day in and day out, walking humbly with his God.

Gadson was a man of kindness, compassion and humility. He always made sure that his patients were treated with love and care, and made friends easily. Gadson had a beautiful smile, and he loved to laugh. He dedicated himself to working hard in the Maranatha laboratory, and then to his studies, funded partly through the MH Scholarship Fund.

We say farewell to our dear friend, who has left us much too early. We feel grateful to have known him and send love to his wife and family as they feel his absence daily. We join with those gathered today in celebrating a life that was well lived but ended too soon.”

– Excerpt from Michael and Kim’s speech at Gadson’s burial



# Reflections

## Vale Dr Martin Situma

Maranatha Health honours the life, work and legacy of Dr Martin Situma, who passed away in July 2022, aged 45. His compassion and dedication were inspiring and his contributions to improving healthcare in Uganda, incalculable. He will be missed.



Dr Martin Situma spent his life serving Ugandan children and families, training new surgeons and working tirelessly to bring hope and healing to those in low-resource areas. He was an exceptionally skilled and dedicated surgeon, devoted teacher, tireless advocate, consummate servant leader, humble with great integrity, and a true pioneer for paediatric surgery in rural Uganda and Africa. His direct efforts saved or altered the lives of tens of thousands of children.

– UCSF Centre for Health Equity in Surgery and Anaesthesia

We at Maranatha Health are deeply saddened to hear about the passing of Dr Martin Situma. One of only a few Paediatric Surgeons in all of Uganda, he worked tirelessly to provide care for children in the Western region. Over the years, Dr Situma operated on many, many children at the Maranatha Hospital Theatre and other hospitals in the region, to ensure that children would have access to essential, life-saving surgery. We long and pray for a day when paediatric surgeons are not so rare in Uganda, and children always have access to surgery when they need it!

– MH Founder Kim Findlay

Martin was a superb surgeon, a compassionate healer, a consummate teacher, and a servant leader. But much more, he was a man of great faith, a devoted husband and father, and a precious friend to many of us. Martin's untimely passing is a tremendous loss to all – family, friends, colleagues, and the entire paediatric surgical community. His legacy will however live on, continuing to be a model for upcoming generations of surgeons committed to saving and improving the lives of African children through surgical care.

– Pan African Pediatric Surgery Association





# Our Work

Section 3

# Australian Board

## Our Work

Maranatha Health's Australian Board provides governance, fulfils compliance requirements and most importantly provides resources given from donors to ensure that the work in Uganda continues to thrive. Our major focus is related to building and engaging with our supporter base to raise funds, in-kind donations of goods and expertise, and undertaking promotional activities. In 2021/22, support for various aspects of operations has been provided by the Finance, Business and Compliance Team, the Project Coordinator (volunteer), Fundraising consultants, and various volunteers.



Michael Findlay  
Chair



Garry Hodge  
Deputy Chair, Treasurer



Dr Joe Inauen  
Public Officer, Minute Secretary



Hannah Ferrari



Jeremy Brown



Karen Baker



Jackson Jaensch

\*For more details on our board members, their expertise and experience, please visit [www.maranathahealth.org/governance](http://www.maranathahealth.org/governance)

# Volunteers

## Our Work

Local Volunteers are a crucial part of Maranatha Health's Australian operations. Many individuals and corporate groups contributed their time and skills to ensure we efficiently carry out administrative functions to further the Maranatha Health vision in Uganda.

We thank the following volunteers most sincerely for their commitment:

<b>Kim Findlay</b>	MH Coordination; Donor engagement
<b>Catherine Carr</b>	Prayer Team Coordinator
<b>Gaynor Johnson</b>	Printing and editing
<b>Sandra Findlay</b>	Donor relations
<b>Wendy Hampel</b>	Data entry, donor receipting
<b>Michelle Juers</b>	IT Consultant / System Administrator
<b>Josh Curtis</b>	Website structure and content
<b>Karen Baker</b>	Fundraising consultancy (before joining the board)

**Galpins Accountants, Auditors and Business Consultants** for their book-keeping and auditing services

The wonderful people who have raised funds in a variety of creative ways for MH this year. You have made a difference and we are proud of you!

As always, we thank all of you who are part of the MH family and continue to give generously of your resources and time; those who fundraise, pray, educate, and share about MH in your networks. Maranatha Health's work is only made possible by your generosity and investment.



# Volunteers

## Our Work: Dr Ian Daly & ChiChi Gao

### In Uganda

Maranatha Health's Uganda Volunteer Program welcomes skilled volunteers and students wishing to undertake placements of various length and purpose in Uganda. Volunteers are led through a thorough process of screening, preparation, support and debriefing to ensure placements are as beneficial as possible. Please contact us for details of future opportunities.



We would like to especially thank two volunteers who had a wonderful impact on our work in-country this past year:

Our thanks to Dr Ian Daly, who spent three months working alongside our clinical staff in Uganda, providing support and training to our team. Dr Ian's work was deeply appreciated and he is already missed!

Also, a big thank you to our ongoing volunteer, ChiChi Gao, who has been working very closely with our finance team. ChiChi lives in the UK and was placed with MHU by AfID (Accountants for International Development). She has been an incredible resource and support in strengthening MH's financial and accountability systems and processes; and empowering our team in this work. Thanks, ChiChi!





# Our Finances

## Section 4

# Treasurer's Report

## Our Finances

I am pleased to provide this Financial Report for 2021-2022.

As Treasurer, I conduct my role with the assistance of Jeremy Brown and Joe Inauen, who, together with myself, make up the Finance Team. I would like to thank Jeremy and Joe for their assistance in finance matters, and the work they do on behalf of Maranatha Health.

Both bookkeeping and audit roles have once again been done this financial year (FY) by separate areas of Galpins Accountants, free of payment. We thank Galpins for their commitment and generosity.

### **A year of surplus**

Similar to 2020-21, COVID-19 has continued to impact both the local and global economy this FY. Despite this, Maranatha Health Australia has had an excellent financial result. The Board and volunteers over the past 12 months have continued the work started in previous years, in diversifying and expanding funding sources and endeavouring to communicate well with donors.

The surplus this year was \$151,228, significantly higher than our budgeted surplus of \$8,054. The surplus was achieved because of the following:

- Unspecified donations were \$83k over budget
- A donation to our general account of 50k
- Total donations \$386,292 (last year \$323,366)

This surplus will be available for use in future years for the building program, and to ensure better health outcomes for the people of Uganda.

Towards the latter part of the last FY, we saw a marked increase in costs in Uganda, particularly in medical supplies and salaries, and this has continued into the current FY, which is a reflection of global inflationary pressures. This, combined with the expansion of our community program, has meant funds sent to Global Development Group (GDG) have seen a gradual increase, as follows:

- 2020-21 FY: \$196,150
- 2021-22 FY: \$228,100
- 2022-23 FY budget: \$280,400





# Treasurer's Report

## Our Finances

### Overheads minimised

The \$228,100 sent to GDG represents 96.1% of total expenditure. The remaining 3.9% (\$9,185) is primarily insurance, wages and online funding cost (see breakdown below).

Late in last year's FY, we appointed Kimberly Hobbs as Co-ordinator for 1 day per week, to contribute towards the essential activities of Maranatha Health Australia. Total expenses for FY 2022-23 will be approximately \$22k, about 7% of expenditure.

Credit for our excellent financial result this year can be attributed to the outstanding support from our donor base, many of whom continue to donate to Maranatha Health year after year. It is also important to recognise the extensive amount of volunteering (book keeping, administration, donor relations) that contributes to Maranatha Health's Australian operations.

The Maranatha Australia Board ensured funds requested by Maranatha Health Uganda were forwarded through GDG, so the hospital could continue to operate smoothly.

### A healthy financial position

Funds on hand and donations receivable at 30/6/22 were \$563,832 compared with \$412,381 at the same time last year. This is enough to fund the Maranatha Health operations in Uganda for over 12 months. Some of these funds are earmarked for the proposed building program. As with many Not For Profits, the majority of our donations come to us at the end of the financial year, so our cash reserves will ensure we are able to manage our existing and future obligations.

### Funding the building project

A separate account (through GDG) was launched in June, 2018 to facilitate purchase of a parcel of land nearby to the current Maranatha Health Clinic in Fort Portal, and to engage architects to develop a master plan for a purpose built medical clinic at the site. At 30/6/22 approximately \$272k had been donated, and \$184k spent to purchase and fence the land and engage architects, leaving \$89k on hand in this account. We thank those people who have contributed to this account to enable the purchase of the land and associated costs.

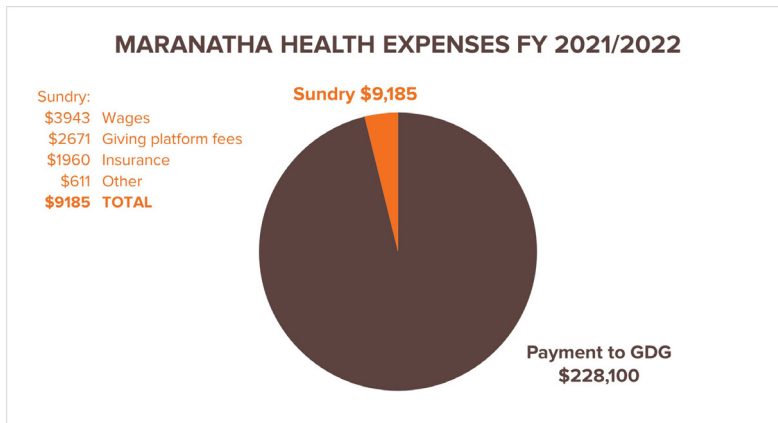


# Treasurer's Report

## Our Finances

Plans and approximate estimates of costs of the building were completed a couple of years ago, but, because of the impact of COVID globally, and in particular in Uganda, we had to put this project on hold. We are now about to engage with architects again in Uganda to plan and cost the project. This will be an exciting and large project for Maranatha Health. To fund this capital building project, in addition to the funds and pledges already received, we anticipate additional funding will come from a variety of new sources, including significant benefactors and corporate entities.

The Finance team and Board continue to consider ways to practise good stewardship. This ensures donors can give with confidence, knowing most of the funds are sent to Uganda where they can make a difference to the lives of Ugandans.



\*Global Development Group (GDG) takes responsibility for the Ugandan project according to Australian Overseas Aid Gift Deduction Scheme (OAGDS) rules, providing a governance role and assisting in the areas of planning, monitoring, evaluating and auditing.

We thank all of the loyal Maranatha Health supporters who have partnered with us over the past year and continue to do so. We have been heartened by the support we have seen, especially during May and June for EOFY giving. We look forward to the future, as we continue to resource the vision in Uganda.

**Garry Hodge,**  
Treasurer



# Financial Statements

Our Finances

**MARANATHA HOSPITALS AID AND DEVELOPMENT FUND  
FINANCIAL ACCOUNTS  
FOR THE YEAR ENDED 30 JUNE 2022**

**including financial statement for the public ancillary fund  
MARANATHA HOSPITALS AID AND DEVELOPMENT AUSTRALIA**

Galpins



**MARANATHA HOSPITALS AID AND DEVELOPMENT FUND AUSTRALIA  
INCORPORATED  
FINANCIAL ACCOUNTS  
FOR THE YEAR ENDED 30 JUNE 2022**

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**MARANATHA HOSPITALS AID AND DEVELOPMENT FUND AUSTRALIA  
INCORPORATED  
FOR THE YEAR ENDED 30 JUNE 2022**

**STATEMENT BY THE BOARD**

In the opinion of the Board of Maranatha Hospitals Aid and Development Fund Australia Incorporated:

- (a) the Association is not a reporting entity because there are no users dependent on general purpose financial statements. Accordingly, as described in note 1 to the financial statements, the attached special purpose financial statements have been prepared for the purposes of complying with the requirements of the Australian Charities and Not-for-profits Commission Act 2012 to prepare and distribute financial statements to the members of Maranatha Hospitals Aid and Development Fund Australia Incorporated;
- (b) the attached financial statements and notes thereto comply with the Australian Charities and Not-for-profits Commission Act 2012, the Accounting Standards as described in note 1 to the financial statements, the Australian Charities and Not-for-profits Commission Regulation 2013 and other mandatory professional reporting requirements;
- (c) the accompanying balance sheet as at 30 June 2022, income and expenditure statement and Notes to the financial statements for the year ended 30 June 2022 as set out on pages 3 to 6 are properly drawn up so as to give a true and fair view of the Association's financial position as at 30 June 2022 and of its performance for the financial year ended on that date;
- (d) as at the date of this statement there are reasonable grounds to believe that Maranatha Hospitals Aid and Development Fund Australia Incorporated will be able to meet its debts as and when they fall due;
- (e) no officer or no firm of which an officer is a member or no corporation in which an officer has a substantial financial interest has received or become entitled to receive a benefit as a result of a contract between the office, firm or corporation and Maranatha Hospitals Aid and Development Fund Australia Incorporated; and
- (f) no officer has received directly or indirectly any payment or other benefit of a pecuniary value other than remuneration payments to employees and reimbursements of out-of-pocket expenses in relation to Maranatha Hospitals Aid and Development Fund Australia Incorporated.

Signed in accordance with a resolution of directors made pursuant to section 60.15 (2) of the Australian Charities and Not-for-profits Commission Regulation 2013;

Signed in accordance with the resolution of the Board of Directors



Michael Findlay  
Chairperson

15/10/2022



Garry Hodge  
Treasurer

5/11/2022

**MARANATHA HOSPITALS AID AND DEVELOPMENT FUND AUSTRALIA INCORPORATED**  
**BALANCE SHEET**  
**AS AT 30 JUNE 2022**

	2020-21	2021-22	Note
	\$	\$	
<b>ASSETS</b>			
<b>Cash and Cash Equivalents</b>			
General Fund	10,580	73,712	b
Public Ancillary Fund	305,466	78,967	c
Term Deposit	50,000	359,400	
<b>Total Cash &amp; Cash Equivalents</b>	<b>366,046</b>	<b>512,079</b>	
<b>Trade and Other Receivables</b>			
Donations receivable	46,336	50,371	
<b>Total Trade and Other Receivables</b>	<b>46,336</b>	<b>50,371</b>	
<b>Fixed Assets</b>			
Plant & Equipment	-	1,412	
Plant & Equipment Accumulated Depreciation	-	(28)	
<b>Total Fixed Assets</b>	<b>-</b>	<b>1,384</b>	
<b>Total Assets</b>	<b>412,382</b>	<b>563,834</b>	
<b>LIABILITIES</b>			
Employee-related liabilities	-	593	
GST Liabilities	-	(369)	
<b>Total Liabilities</b>	<b>-</b>	<b>224</b>	
<b>Net Assets</b>	<b>412,382</b>	<b>563,610</b>	
<b>EQUITY</b>			
Accumulated Funds	277,038	412,382	
Current Year Surplus/Deficit	135,344	151,228	
<b>Total Equity</b>	<b>412,382</b>	<b>563,610</b>	

The accompanying notes form part of these financial statements



**MARANATHA HOSPITALS AID AND DEVELOPMENT FUND AUSTRALIA INCORPORATED**  
**INCOME & EXPENDITURE STATEMENT**  
**FOR THE YEAR ENDED 30 JUNE 2022**

	2020-21	2021-22	Note
	\$	\$	
<b>INCOME</b>			
Donations	323,366	386,293	a
Fundraising income	2,432	1,468	
Interest	1,485	752	
Overhead (GDG) & Volunteer Contributions	-	-	
Other income	10,000	-	
<b>Total Income</b>	<b>337,283</b>	<b>388,513</b>	
<b>EXPENSES</b>			
Bank fees	20	16	
Employee-related expenses	1,109	3,943	
Fundraising expenditure	2,534	2,671	
Project contributions	196,150	228,100	
Insurance	1,827	1,960	
Software expenses	-	237	
Communication & promotion	300	330	
Depreciation	-	28	
Other	-	-	
<b>Total Expenses</b>	<b>201,940</b>	<b>237,285</b>	
<b>Net Surplus / (Deficit)</b>	<b>135,344</b>	<b>151,228</b>	

The accompanying notes form part of these financial statements



**MARANATHA HOSPITALS AID AND DEVELOPMENT FUND AUSTRALIA INCORPORATED**  
**STATEMENT OF CHANGES IN EQUITY**  
**AS AT 30 JUNE 2022**

	<b>Accumulated Funds</b>	<b>Note</b>
	\$	
<b>BALANCE AT 1 JULY 2020</b>	277,038	
Surplus for the Year	135,344	
<b>BALANCE AT 30 JUNE 2021</b>	<u><u>412,382</u></u>	
<b>BALANCE AT 1 JULY 2021</b>	412,382	
Surplus for the Year	151,228	
<b>BALANCE AT 30 JUNE 2022</b>	<u><u>563,610</u></u>	

The accompanying notes form part of these financial statements





**MARANATHA HOSPITALS AID AND DEVELOPMENT FUND AUSTRALIA INCORPORATED**  
**CASH FLOW STATEMENT**  
**FOR THE YEAR ENDED 30 JUNE 2022**

	2020-21	2021-22
	\$	\$
<b>Cash flows from Operating Activities</b>		
Receipts from donors	314,626	383,726
Payments to suppliers and employees	(202,003)	(237,033)
Interest received	1,485	752
Depreciation	-	(1,412)
<b>Net cash flows from operating activities</b>	<b>114,108</b>	<b>146,033</b>
<b>Net increase/(decrease) in cash and equivalents</b>	<b>114,108</b>	<b>146,033</b>
Cash and equivalents at the beginning of the year	251,938	366,046
Cash and equivalents at the end of the year	<u><u>366,046</u></u>	<u><u>512,079</u></u>

The accompanying notes form part of these financial statements



**MARANATHA HOSPITALS AID AND DEVELOPMENT FUND AUSTRALIA INCORPORATED**

Public Ancillary Fund - ABN 34 290 264 644

**Financial Statement - July 2021 through June 2022**

	\$
<b>Opening Balance at 1 July 2021</b>	<b>401,802</b>
PAF Accounts	355,466
PAF Donation Receivable	46,336
<b>Opening Balance</b>	<b>401,802</b>
<b>Receipts</b>	
Donations	310,974
Fundraising	-
Interest	750
<b>Total Receipts</b>	<b>311,724</b>
<b>Payments</b>	
Disbursements to Global Development Group	221,900
Other Costs	2,875
Bank, Merchant and Fundraising Fees	13
<b>Total Payments</b>	<b>224,788</b>
<b>Closing Balance as at 30 June 2021</b>	<b>488,738</b>
PAF Bank Accounts	438,367
PAF Donations Receivable	50,371
<b>Closing Balance</b>	<b>488,738</b>



**MARANATHA HOSPITALS AID AND DEVELOPMENT FUND AUSTRALIA INCORPORATED  
FOR THE YEAR ENDED 30 JUNE 2022**

**NOTES TO THE FINANCIAL STATEMENTS**

**Note 1: Summary of Significant Accounting Policies**

**Basis of Preparation**

The members of the Board have prepared the financial report on the basis that the Association is not a reporting entity as there are unlikely to exist users who are unable to command the preparation of reports tailored so as to satisfy specifically all of their information needs. Accordingly, this "Special Purpose Financial Report" has been prepared for the purposes of complying with the requirements of the Australian Charities and Not-for-profits Commission Act 2012 to prepare and distribute financial statements to the members of Maranatha Hospitals Aid and Development Fund Australia Incorporated.

These financial statements are presented in Australian dollars (\$), and have been prepared in accordance with the recognition and measurement requirements specified by the Australian Accounting Standards and interpretations issued by the Australian Accounting Standards Board (AASB) and the disclosure requirements of:

AASB 101 Presentation of Financial Statements

AASB 107 Statement of Cash Flows

AASB 108 Accounting Policies, Changes in Accounting Estimates and Errors

AASB 1048 Interpretation and Application of Standards

AASB 1054 Australian Additional Disclosures

These Financial Statements do not conform with International Financial Reporting Standards as issued by the International Accounting Standards Board ('IASB').

The financial report has been prepared on an accruals basis and is based on historical costs and does not take into account changing money values.

**Income Tax**

The Association is exempt from income tax pursuant to the Income Tax Assessment Act 1997. Accordingly, Australian Accounting Standards AASB 112 has not been applied and no provision for income tax has been included in the financial reports.

**Goods & Services Tax (GST)**

**The Association is not registered for GST.**

**Note 2: Other Explanatory notes to the financial statements**

- a. Comprises donations paid to the Association. While there is no liability attached to these donations, there is a requirement in the Association's constitution that these funds are applied for the purposes of the Association. There is also a requirement that funds received into the Ancillary Fund are applied for the purposes of the Fund as approved by the Australian Taxation Office.
- b. The Association holds a bank account for receiving monies and paying its operating costs and funding its overseas project.
- c. The Association holds a second bank account for its partnership with Global Development Group (GDG). GDG has Deductible Gift Recipient Status and the project is approved as part of this. Donations are received into this account and are tax deductible for the donor. Funds in this account are only ever paid to GDG and only for the purposes of undertaking the overseas project.
- d. The Association holds some assets which have been contributed in kind by individuals and other organisations. The value of these assets is low and due to the cash basis of the Association's accounting systems, these assets have not been recognised.





## INDEPENDENT AUDITOR'S REPORT

To the members of Maranatha Hospitals Aid and Development Fund Australia Inc.

### Report on the Audit of the Financial Report

#### Qualified Audit Opinion

We have audited the accompanying financial report of Maranatha Hospitals Aid and Development Fund Australia Incorporated (the Association) which comprises the balance sheet as at 30 June 2022, income and expenditure statement, statement of changes in equity and statement of cash flows for the year then ended, notes comprising a summary of significant accounting policies and the Statement by the Board.

In our opinion, except for the possible effects of the matters described in the Basis for Qualified Opinion paragraph, the accompanying financial report of Maranatha Hospitals Aid and Development Fund Australia Incorporated is in accordance with the Australian Charities and Not-for-profits Commission Act 2012, including:

- (i) giving a true and fair view of the company's financial position as at 30 June 2022 and of its financial performance for the year then ended; and
- (ii) complying with Australian Accounting Standards and the Australian Charities and Not-for-profits Commission Act 2012.

We confirm that the independence declaration required by the Australian Charities and Not-for-profits Commission Act 2012, which has been given to the directors of the company, would be in the same terms if given to the directors as at the time of this auditor's report.

#### Basis for Qualified Opinion

It is not practicable for the Association to maintain an effective system of internal control over receipts and other fundraising activities until their initial entry in the accounting records. Our audit in relation to these items was limited to amounts recorded. Consequently, we were unable to determine whether any adjustments to these amounts were necessary.

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Report section of our report. We are independent of the Association in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 Code of Ethics for Professional Accountants (the Code) that are relevant to our audit of the financial report in Australia, and we have fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

#### Responsibilities of the Directors for the Financial Report

The directors of the company are responsible for the preparation of the financial report that gives a true and fair in accordance with Australian Accounting Standards and the Australian Charities and Not-for-profits Commission Act 2012 and for such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the directors are responsible for assessing the Company's ability to continue as a going concern, disclosing, as applicable, matters relating to going concern and using the going concern basis of accounting unless management either intends to liquidate the Company or to cease operations, or has no realistic alternative but to do so.

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Galpins Trading Pty Ltd  
ABN: 89 656 702 886

## **Auditor's Responsibility for the Audit of the Financial Report**

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

As part of an audit in accordance with Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Association's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Association's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Association to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

## **GALPINS ACCOUNTANTS, AUDITORS & BUSINESS CONSULTANTS**



**Luke Williams** CA, CPA Registered Company Auditor

Partner

31 October 2022







# Our Partners

Section 5

# Our Partners

## GLOBAL DEVELOPMENT GROUP

Maranatha Health is proud to be a local and in-country partner with **Global Development Group** (ABN 57 102 400 993). GDG is an Australian NGO approved by the Minister for Foreign Affairs to carry out quality humanitarian projects with approved partners, providing aid to relieve poverty and provide long-term solutions.



The funds Maranatha Health raises in Australia are sent to GDG, which forwards them to Maranatha Health Uganda, the in-country partner implementing projects 'J704N Maranatha Capacity Building, Uganda' and 'J1004N Maranatha Building Project'.

Global Development Group (GDG) takes responsibility for the Ugandan projects according to Overseas Aid Gift Deduction Scheme (OAGDS) rules; providing governance and assisting in the areas of planning, monitoring, evaluation and auditing; to ensure the projects are carried out to OAGDS requirements.

The following projects are managed by Global Development Group (GDG):

### **J704N Maranatha Capacity Building, Uganda**

From its base in Western Uganda, Maranatha Health Uganda uses a broad set of initiatives to address the underlying causes of ill-health and the injustice of an under-resourced health system. Projects there are significantly focused on preventative health measures and capacity building.

### **J1004N Maranatha Building Project**

In 2018, Maranatha Health Uganda was able to purchase land in Fort Portal, with the support of the MH Australia Board and private donors. We plan to construct a purpose-built facility to enable expansion of our clinical and community programs. More information about this project can be found via <https://maranathahealth.org/ourwork/building-for-the-future>.





# Our Partners

## CORPORATE PARTNERS

We are very fortunate to have partnerships with the following entities which provide us with professional expertise and services, financial and in-kind donations; for which we are very grateful:



**Galpins Accounting, Auditors and Business Consultants** provides us with pro-bono accounting and audit services.



**DREAMIN Foundation Inc.**, a charitable organisation set up by the Rotary Club of Prospect Inc., provides a variety of ongoing financial and in-kind support.



**Maptek**, a provider of innovative software, hardware and services for the mining industry, continues to provide MH with pro-bono printing services.



**Insight Global Health Group** is a University of Adelaide medical students' organisation providing financial support and supporting students who undertake placements at the MH Hospital in Uganda.



**Milchem Group** specialises in commercial management for the engineering industry in construction, mining, infrastructure and industrial projects; and it provides MH with financial support.



**Knightsbridge Baptist Church** provides financial and venue support. A strong core group of supporters provide donations, community fundraising and prayer support.



**Good Shepherd Lutheran Church and School**, Para Vista, are missionary partners and encourage members to support MH work.



**Broadview Baptist Church** provides financial support and kindly offers its venue for MH events.



**Ashburton Baptist Church** provides financial support through its Global Mission budget, sharing news and information about MH with the church community.



**Accounting for International Development** provided vital financial management training and development to our Ugandan team, empowering them with greater capacity to deliver more sustainable programs.







# Contact Us

Section 6

# Contact Us

## Contact us:

2a Bretwalder Ave, Leabrook, SA 5068

[contact@maranathahealth.org](mailto:contact@maranathahealth.org)

[www.maranathahealth.org](http://www.maranathahealth.org)

[www.facebook.com/MaranathaHealth/](https://www.facebook.com/MaranathaHealth/)

0414 440 498 Garry Hodge (Treasurer)

## Financial Support:

### **Make a donation**

[www.maranathahealth.org/give](http://www.maranathahealth.org/give)

### **Become a MararanathaPARTNER**

[www.maranathahealth.org/partner](http://www.maranathahealth.org/partner)

### **Leave a bequest**

[www.maranathahealth.org/bequest](http://www.maranathahealth.org/bequest)

## Volunteer:

If you would like to get involved in Maranatha Health's work either in Australia or Uganda, visit our website or send an email to [contact@maranathahealth.org](mailto:contact@maranathahealth.org)







MARANATHA HEALTH