



Annual Report 2025

**Leprosy defeated,
lives transformed.**



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Report designed by Lankshear Design

Cover photo: Amara is from The Leprosy Mission's facilities in India. A specialised centre for people affected by leprosy and related disabilities.

Photo by Supa Thejan



2025 Overview



◀ Supporters at Lakemba Baptist Church in Sydney after a service addressed by CEO Greg Clarke.

The Leprosy Mission Australia continued to thrive in 2025, thanks to the broad and generous contributions of many stakeholders.

We are grateful for the prayerful support of many Christian churches and communities across Australia and around the world. Over 9,000 churches support The Leprosy Mission worldwide, spread across most denominations both traditional and contemporary.

We also relied on over 20,000 donors this year, 5,655 of whom donated for the first time (thank you!). From regular givers to major donors and everyone in between, this grass-roots support is the reason Leprosy Mission has been able to pursue its goals for 150 years around the world.

We add to their number our treasured shop customers, who purchase our fairtrade items via our website, thereby supporting both our suppliers (who are often drawn from our projects and programmes around the world) and people affected by leprosy as we return profits into the mission.

We celebrate our partnership with the Australian government, through the Australian NGO Cooperation Program (ANCP), which is an essential element of our international work, and which marked its 50th year at the end of 2024.

Our core mission of defeating leprosy and transforming the lives of those affected is carried out through international programmes in six countries where leprosy



◀ Three generations of CEOs—Graham Peck, Sheldon Rankin and Greg Clarke—with long-time supporters Joe and Maria Bast at the Geelong launch of the book, *When Hope Came*.

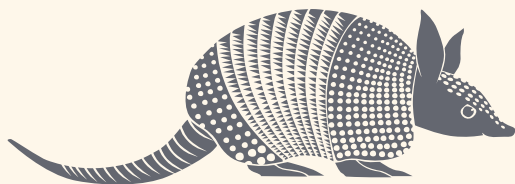
remains a significant challenge. Money raised in Australia supports the work of implementing partners in India, Indonesia, Nepal, Nigeria, PNG and Timor Leste. Leprosy Mission Australia monitors and evaluates this work.

We conduct our work globally in line with a set of values agreed to across The Leprosy Mission Global Fellowship. Because we follow Jesus Christ, we value:

- Compassion – walking alongside those who are suffering
- Justice – seeking what is right, no matter the cost
- Integrity – acting without hypocrisy
- Inclusion – welcoming the marginalised and caring equally for all
- Humility – preferring others over ourselves
- Collaboration – working in partnerships for greater success

With these values, we believe we can see our vision of leprosy defeated and lives transformed in our generation.

Leprosy Mission Australia's strategic plan 2025-2028



Leprosy defeated, lives transformed.

In March 2025 the Leprosy Mission Australia Board approved an exciting new strategy for the next four years. Designed to interact with the Global Strategic Plan of the Leprosy Mission, Australia's plan looks at how we can defeat leprosy while also growing a larger and broader Christian care charity focused on the world's most outcast, needy and neglected people.

Our vision remains the same: Leprosy defeated, lives transformed.

The Leprosy Mission Australia has been blessed with resources and organisational security, thanks under God to our generous donors and supporters. The latest World Health Organisation (WHO) reports indicate that leprosy work is moving from a 'public health' approach (reducing country cases to under 1/10k) to an 'elimination' approach.¹ The Leprosy Mission supports this globally by committing to work towards the Triple

Zero goals outlined in The Leprosy Mission 2025-2030 Global Strategic Plan.

As we pursue this goal, we also recognise that this strategic period for Australia is a good time to prepare the organisation for a 'low leprosy' future. While we strive to complete the mission to defeat leprosy, we also seek opportunities to continue the mission of caring for the outcast, neglected and most in need with Christian compassion, thereby transforming lives.

This necessitates new ways of thinking, including the following particular areas of development:



MISSION

We will increase and diversify our global and local care-focused mission opportunities.

We will continue to pursue the shared goals of The Leprosy Mission Fellowship: following Christ, we want to see leprosy defeated and lives transformed through pursuing the Triple Zero goals. We will also look at opportunities for mission within Australia as well as overseas (i.e. indigenous, migrant, diaspora or remote ministries).



CAPACITY

We will grow the resources we have to do our work by:

- Exploring opportunities to partner, merge or acquire other aligned mission and mission-adjacent ventures where they will stretch our communities of support into new areas.
- Expanding the retail arm and social enterprise work.
- Developing our strategic partnerships with corporations, grants, foundations, and major donors.
- Developing a capital growth strategy based on our real estate holdings and investments.
- Further prioritising and resourcing our bequests programme.



CONTENT

We will be a content rich and hungry organisation.

We will become a content-rich organisation which occupies a central place in Australia. We will communicate with our stakeholders about Christian care for the outcast, those with a disability, and the disadvantaged.

¹ <https://iris.who.int/bitstream/handle/10665/378895/WER9937-501-521.pdf?sequence=1>

The Leprosy Mission Australia has committed to four big strategic aims:

**1.
Being
Christ-centred**



We seek to understand and live out Jesus' teachings in the context of an organisation focused on care for neglected people.

**2.
Delivering
on Zero**



We contribute to global, multi-organisational efforts to eliminate leprosy transmission, prevent disability from leprosy, and end discrimination against people affected by leprosy. This is expressed by The Leprosy Mission globally as our Triple Zero goals, which we have committed to achieve by 2035.

**3.
Partnering
for Impact**



We recognise that our goals are best pursued in partnerships at many levels, both internationally and within Australia. Leprosy Mission Australia will seek best-practice partners that help pursue our mission and improve organisational capability, reach and impact.

**4.
Enabling the
Leprosy Mission
Australia**



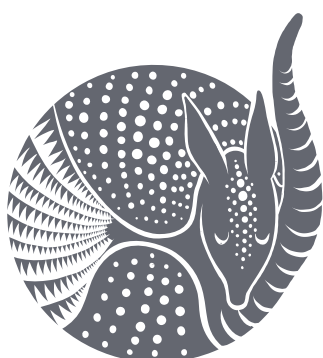
We are committed to strengthening and growing our organisational capacity, capability and culture in order to pursue our current and future mission and objectives.



DIGITAL

We will develop digital dexterity.

We will prioritise digital transformation across the whole organisation to better pursue our mission and serve our internal and external stakeholders.



CULTURE

We will value and nurture our organisational culture.

Founded on our Christian values, we will become an organisation with a culture of professionalism, care, opportunity for growth, and continual training and development for staff. We will aim to develop a workplace that combines flexibility with commitment to the organisation and its mission. We will identify and equip leaders who can activate this ambition. As a Christian organisation, we value diversity, gender equality, equity and inclusion.

With these areas of drive and focus, we believe that the Leprosy Mission Australia will be well equipped to defeat leprosy, continue to care for those affected by it, and grow our work into new areas of need for neglected people.

150 years and beyond

Celebrating progress, community and hope for the future: 150 years of The Leprosy Mission

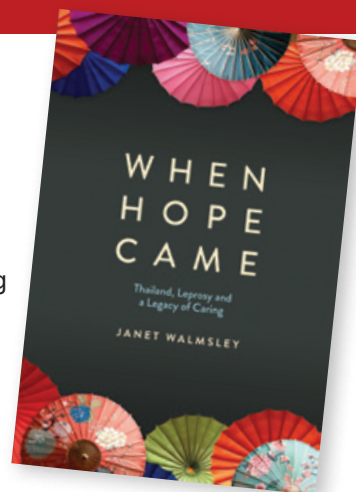
The commemoration of 150 years of The Leprosy Mission continued in the second half of 2024 and into 2025. The work that was started by Wellesley and Alice Bailey in 1874 in Dublin has grown to include 28 countries pursuing the same goal: leprosy defeated and lives transformed. Our mission has always been “born and cradled in prayer”, as the Baileys said at the beginning. We continue to walk in the footsteps of Jesus, caring for the most vulnerable by reaching out to them, however costly it may be.

We took the opportunity to engage our supporters around Australia with major events that saw hundreds of people come together in a spirit of thankfulness and commitment to see our work through to the end.

A highlight was our *Still A Thing 150th Jubilee Conference* in Melbourne in early September, attended by nearly 200 supporters, staff and former staff, current and former Board members, and church and community leaders. The conference included a Thanksgiving Service in The Scots' Church, which was also celebrating its 150th year.

In order to mark the amazing dedication of people serving the leprosy cause, we published Janet Walmsley's charming book on the life and work of Trevor and Heather Smith.

When Hope Came tells their story of working on the remote island sanctuary Chang Mai in Northern Thailand where they spent a lifetime in pioneering medical and social innovations for people affected by leprosy. The book was launched in Geelong, with Heather Smith in attendance. Trevor passed away just months before the launch, following a brief battle with pancreatic cancer, making the event all the more poignant and significant.



▲ TLMA CEO Dr Greg Clarke delivering the opening address at the *Still A Thing 150th Jubilee Conference 2024*.

Photo by Rama Rusman

► Janet Walmsley (author) and Heather Smith at Geelong Book Launch.

Photo by Greg Clarke

▼ TLMA International Programs Officer Eva Lee presenting at our 150th Jubilee Conference.

Photo by Rama Rusman



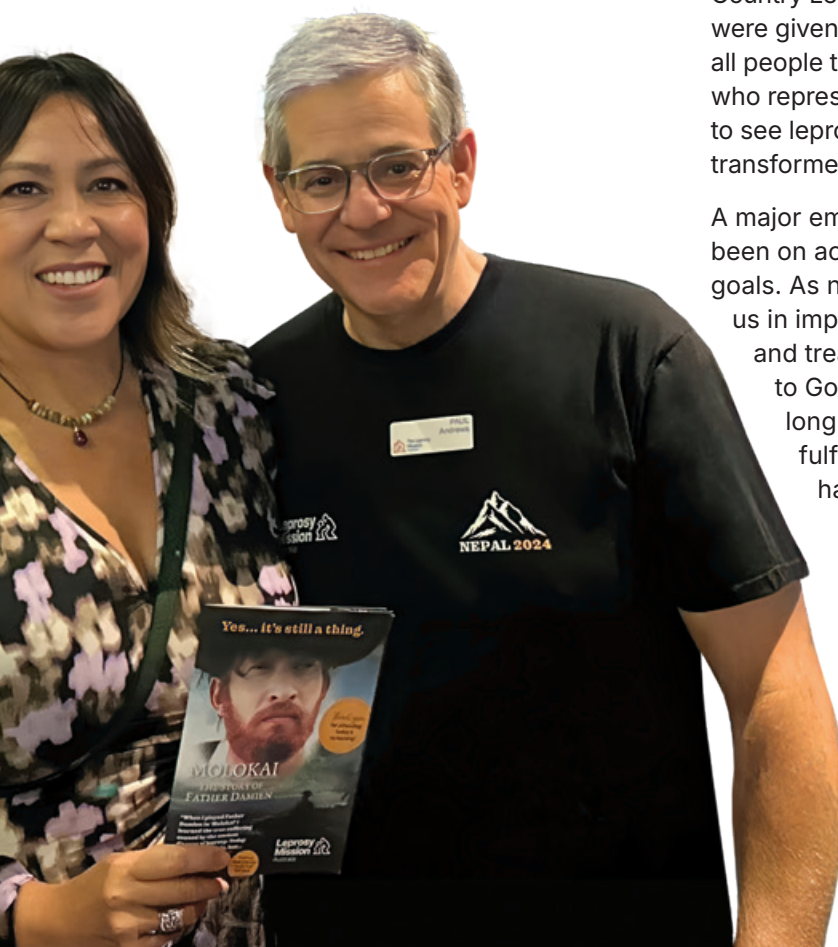


Cast members of Molokai (including Kate Ceberano and David Wenham)

We continued our national 25th anniversary screenings of the movie Molokai, the story of Father Damien (made in 1999), eventually holding 12 events all over Australia, including a 'red-carpet' event in Melbourne attended by one of the actors in the movie, renowned singer Kate Ceberano. It proved to be a wonderful way to reach out to new communities who are surprised to discover that, yes, leprosy is 'still a thing'.



Our 150th mascot, the gorgeous armadillo that graced the Leprosy Mission Australia logo during the year, has proved to be very popular. In fact, he/she has proved to be such a valuable 'surprise and delight' factor in our storytelling that we have decided to keep the armadillo as an enduring part of our branding. Our communications and our shop merchandise feature this little creature



in order to draw in new people to our cause, especially the younger generations. It's great to see the armadillo caps and T-shirts out and about!

Globally, the major 150th celebration was held in New Delhi, India, where the work of The Leprosy Mission commenced. An inspiring week of talks, culminating in a celebration dinner, brought together many of those who have served the cause across many past decades. Attending from Australia were Jenny Ward (Leprosy Mission Australia Chair), Dr Greg Clarke (CEO), Professor Warwick Britton and Annette Britton, Colin and Sally Martin, Helen Fernandes (The Leprosy Mission Global Vice Chair), Pam Packett (former Leprosy Mission Australia Chair) and Alex Packett, Janet Walmsley (author of *When Hope Came*), and Natalie Smith (Trevor Smith's niece and PNG Country Leader). The Wellesley Bailey Awards were given to three outstanding individuals, all people themselves affected by leprosy, who represent the vision of the organisation to see leprosy defeated and lives transformed in the name of Jesus Christ.

A major emphasis during the 150th year has been on accelerating progress towards our goals. As new research and technology aids us in improving the detection, prevention and treatment of leprosy, we give praise to God for the gift of healing and we long for a time when our mission is fulfilled. This commemorative year has provided new enthusiasm and motivation to strive towards that time.

◀ Kate Ceberano with TLMA staff member Paul Andrews (Fundraising & Communications Lead).

Photo by Rama Rusman

▼ A colourful dancing display added a festive touch to the 150th Celebrations in India.

Photo by Greg Clarke



▲ Wellesley Bailey Award Winners at the 150th Celebrations in India.

Photo by Greg Clarke



Report from the Chair



Therefore I tell you, whatever you ask in prayer, believe that you have received it, and it will be yours. Mark 11:24

Our 2025 reporting year has been an exciting time across the Fellowship and here in Australia. Our 150th anniversary celebrations came to a spectacular conclusion in New Delhi, India in November, as CEO Greg Clarke and I joined others from across the Fellowship to commemorate the extraordinary achievements and history of The Leprosy Mission.

A key feature of the meetings and celebrations was the launch of a new global Leprosy Mission Strategy for 2025 – 2030. New strategies mean embracing new directions and new ways of doing things, building on the foundations and success of what has gone before.



▲ Australians were part of the 150th Year celebrations of The Leprosy Mission in New Delhi, India. We were honoured to have Minister Counsellor Carly Partridge from the Australian High Commission, New Delhi join us for the occasion. Pictured with Chair Jennifer Ward, CEO Dr Greg Clarke, and Bosch Professor of Medicine and Immunology at University of Sydney, Warwick Britton.

In Australia, we have made good progress already with our own new Country Strategy, successfully refreshing our brand across all our marketing and fundraising channels,

implementing new IT systems and expanding our global programs to expedite leprosy detection and treatment.

The Gospel of Mark verse reminds us that we must trust in the Lord. He knows what we need. He has already gone before us to smooth our path as our results in 2025 indicate. Total revenue for the year was \$9.7 million, up 21% on 2024, with growth across most income categories. Our social enterprise shop sales increased by almost 30% to \$1.4 million.

None of this would be possible without the amazing contributions and engagement of our supporters. Overall Leprosy Mission Australia connected with 16,959 supporters throughout the year, an increase of 1,408 people.

Our International Programs department has continued to work closely with our Leprosy Mission partners in the delivery of a diverse range of programs across Nepal, India, Indonesia, Timor Leste, Papua New Guinea and Nigeria. We maintain close links with The Leprosy Mission International (TLMI) and the Global Fellowship, participating in regular online meetings as well as travelling when it makes sense to do so.

Our National Council membership has experienced further changes in this year. Life Member Margaret Schneebeil passed away in February 2025. Margaret was a founding member of the Geelong Auxiliary and was appointed a life member in 2018. As a small girl she was sometimes allowed to put the sixpence her mum had saved into a money box that had a girl on the lid who nodded as the coin was put in; this money was for leprosy care.

We are extremely grateful for the service of Denise Scott and Kathrine Jaeschke who have both

resigned. Denise first joined the Eastern Shore Auxiliary in Hobart in 1971 and was instrumental in forming the Toowoomba Auxiliary in 1975 upon her move to Queensland. She was conferred with Life Membership in 2006. Kathrine has been a National Council representative for South Australia since 2021. Living in the northern Yorke Peninsula area has given her the opportunity to speak at various church and fellowship groups in that region and beyond. Many thanks to you both!

The Board of Leprosy Mission Australia also continues to change. It has been a pleasure to welcome Steve Goudswaard, Matt Hornby, Vera Ou-Young and Ian Rennison to the Board of Directors this year. The unique skills and experiences they each bring to the Board have already had an impact on the organisation.

I would also like to acknowledge the many volunteers and supporters of the Leprosy Mission Australia, involved in Auxiliaries, Support Groups, or as local representatives. A special call out to Nicolle Macaitis who has re-joined the National Council and taken on the role of Representative for South Australia. The passion, service and support of our volunteers is essential to our success.

In this time of celebration and new beginnings, what has not changed is the glue that underpins everything we do and holds us together as a Global Fellowship: our shared commitment to Christ. In *Defeating Leprosy and Transforming Lives*, God has our future in mind, he has created our past, and he walks with us in the present. This Annual Report is a wonderful reflection of this.

Jenny Ward
Board Chair

Report from the CEO

When we consider 150 years of hard work, rich and faithful support, and enormous progress towards our ultimate goal, it was well worth continuing our celebrations and special activities into the second half of 2024 and beyond!

We held events around Australia, culminating in a special conference in Melbourne attended by many generations of supporters, staff and directors past and present. As the relatively new CEO, it was a joy to meet so many people on whose shoulders we are now standing and whose dedication is our great inspiration and motivation. Our 150th celebration cake was cut together by the oldest and youngest staff (and former staff) present, marking at least 50 of those 150 years between them!



▲ Supporter (and previous CEO) Stuart Brown cutting the cake with staff member Crystal Nguyen and CEO Greg Clarke.
Photo by Rama Rusman

People have embraced the armadillo as our new 'mascot', bringing surprise and intrigue to potential new supporters and giving us a great way to tell the story that, yes, leprosy is still a thing and we have work to do. It's been wonderful to see people young and old wearing our caps

and T-shirts and getting the word out.

I am grateful to the Leprosy Mission Australia Board of Directors for entrusting a new multi-year strategy to my leadership from January 2025. This strategy answers the question: how do we succeed in the final phase of defeating leprosy, and the ongoing task of transforming the lives of people affected by it? We have committed to several growth initiatives that will enable us to expand our work across the next four years, looking at opportunities in 'leprosy-adjacent' areas of disability care, reducing stigma and caring for the outcast and excluded, and assisting with the defeat of other related 'neglected tropical diseases' (NTDs) that are often found in the course of leprosy care.

We have also recognised the need to be a louder and more visible care organisation and are pursuing ways of telling our story through media channels, exciting marketing campaigns, and the development of our shop as the premier online Fairtrade retailer in Australia.

We have supported significant work in six countries around the world and travelled alongside our partners as they have struggled through landslides (Nepal), economic strife (Nigeria),



▲ Staff member Josephine Fam in Malaysia. Photo by Peter Hung

systemic challenges (India) and more. We deeply value our collaboration with The Leprosy Mission Global Fellowship, as well as other agencies who share the same vision that we have.

There are indeed challenges: fundraising is tough in the current global environment and changing attitudes to international aid and development have a ripple-effect on our work. We continue to make the case that, in order to follow the teaching and example of Jesus Christ, we must commit ourselves to sacrificial love and care for the world's most vulnerable people. And we must go out of our way to seek and find them.

Thanks are due to our Chair, Jenny, for her consistent support and guidance, along with our new and continuing Board members, who all play an important role in the leadership of the organisation. I also want to note my remarkable senior leadership team, who are deeply experienced professionals, at the same time as being kind, thoughtful and fine walking examples of our organisation's values.

And thanks of course to the many people who support us through prayer, giving, attending our events and helping to spread the news about our work. You are the fuel to our mission engine, and without you we simply can't continue to see leprosy defeated and lives transformed.

With you, it is something we can imagine in our lifetime.

A handwritten signature in black ink that reads 'Greg Clarke'.

Greg Clarke
CEO



Triple Zero

The Triple Zero is a universal strategy adopted by organisations working towards the elimination of leprosy.

The Leprosy Mission Australia has integrated the three goals into our work, recognising that the achievement of these components is key to accomplishing our vision.

Each of our projects progresses one or more aspects of Triple Zero. Under each project, you will see the thematic area/s of alignment marked with the symbols below:



"Thank you for NLR and also Australian people who have given support for us in this village also in the Kuningan district, we really appreciate your support, especially those who are affected by leprosy, so now we can have a solution about how to prevent and control leprosy in our village." – Johan, Indonesia

Photo by Daniel Christiansz



by 2035

Transmission of leprosy must be stopped if disease elimination is to be achieved. To disrupt transmission, cases must be identified and treated early. As the early symptoms of leprosy are quite mild, they can easily be missed or misdiagnosed. Proactive case finding activities and increasing leprosy diagnostic and management skills within the health system are important to achieving this goal. Child cases of leprosy are a sign that there is active transmission in a community. As a result, some of our projects have started to increase their focus on school screening.



Disability will be prevented as we increase leprosy awareness and more people receive early diagnosis. Unfortunately, disabilities acquired prior to treatment cannot be reversed, when people are diagnosed too late. As a result, they are often left with permanent, potentially debilitating ulcers and disabilities that impact their ability to participate meaningfully in daily life. If not managed properly these effects can become worse, leading to severe infections or amputations.

Self-care, preventative tools and assistive devices can reduce the impact of disability and prevent further injury. In severe cases, reconstructive surgery and fitting of artificial limbs after amputation is required.



Leprosy has long been a stigmatised disease due to misinformation that causes fear in communities. In some countries, there are laws that exacerbate the discrimination and exclusion of persons with leprosy.

To reduce discrimination, communities need to be educated on the true facts about the disease and be mobilised to support leprosy patients on their journey to recovery. Persons with leprosy often need to be supported to rebuild their self-esteem, and obtain suitable livelihoods and economic opportunities to help them regain the status they lost due to leprosy.

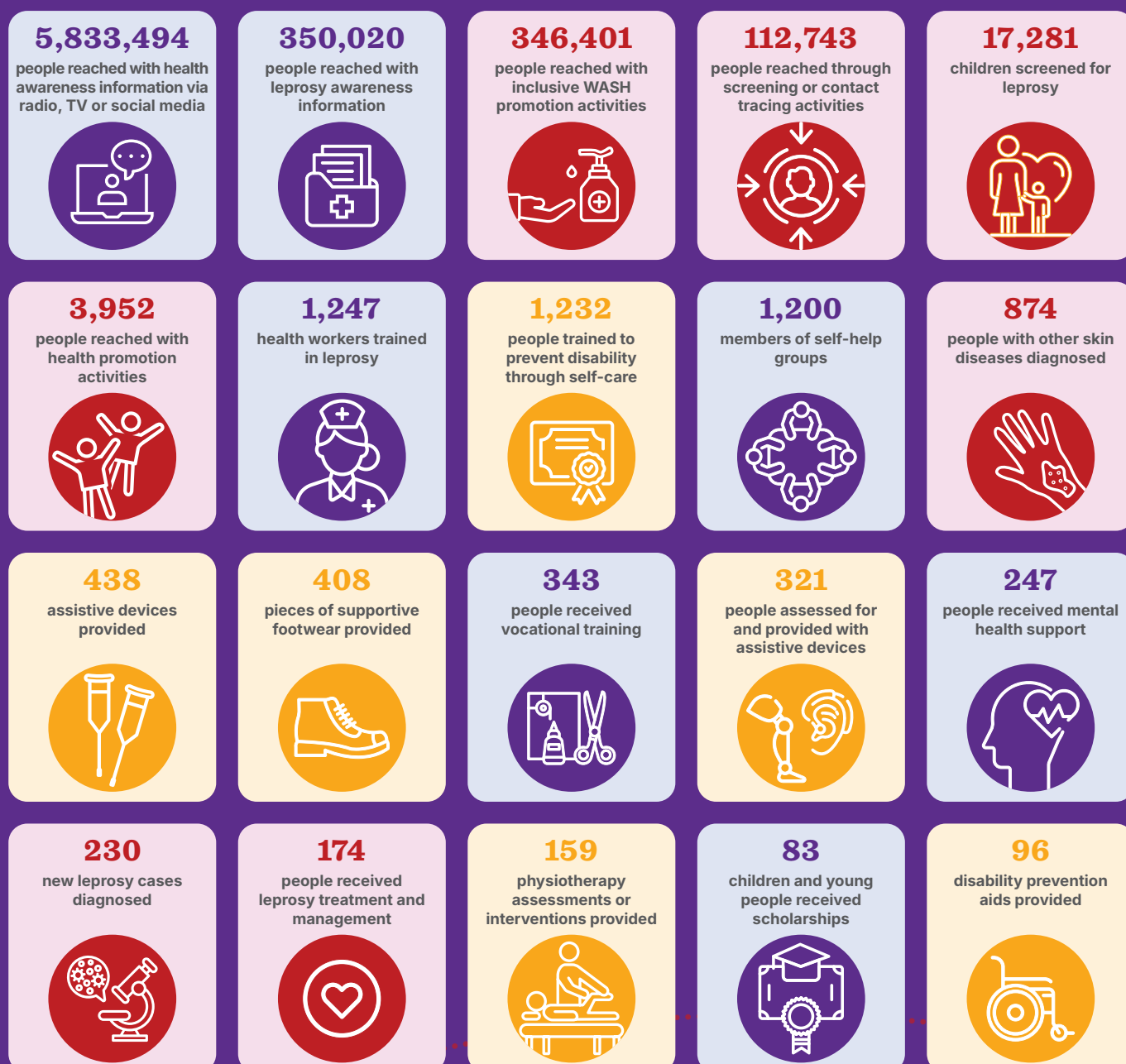


Your impact

Highlights from home



Your Overseas Impact



Where we work

Project acronyms	Project Name	Partner	Project locations	Date/ Duration
ECISNTD	Enhanced Care for Integrated Skin NTDs	The Leprosy Mission Nigeria	Benue, Nasarawa, Zamfara – Nigeria	2024-2029
CID	Co-creating Inclusive Development	The Leprosy Mission Trust India	Chidambaram – India	2024-2029
VTC	Vocational Training Centre	The Leprosy Mission Trust India	Faizabad – India	2023-2027
Tertiary Education	Nepal Tertiary Education	The Leprosy Mission Nepal	Across Nepal	2022-2027
SCU	Self Care Unit	The Leprosy Mission Nepal	Kathmandu – Nepal	2023-2028
SPROUTS	Strengthening Pathways for Economic Resilience through Opportunities to Communities for Sustainability	The Leprosy Mission Nepal	Nawalparasi – Nepal	2024-2029
SEED	Supporting Empowerment through Education Development	The Leprosy Mission Nepal	Bagmati province – Nepal	2023-2032
JLR	Jhapa Leprosy Reduction	Nepal Leprosy Fellowship	Jhapa – Nepal	2022-2027
LFV	Leprosy Friendly Villages, Desaku	Yayasan NLR Indonesia	Kuningan – Indonesia	2022-2025
UL	Urban Leprosy, Kotaku	Yayasan NLR Indonesia	Bekasi – Indonesia	2022-2025
ELETRA	Ending Leprosy Transmission in Oecusse-Ambeno	Misaun Lepra – Timor Leste	Oecusse – Timor Leste	2024-2029



Project evaluations

Jhapa Leprosy Reduction: mid-term evaluation



Triple Zero Goals



Sustainable Development Goals



The Jhapa Leprosy Reduction (JLR) project works in Eastern Nepal with a focus on reducing child leprosy rates. The JLR project implemented a school screening approach. This was an innovation for the region where, traditionally, the Ministry of Health and Ministry of Education did not work collaboratively on health projects. The school screening approach identifies not only leprosy cases, but other health conditions that may have gone undetected for many years. Additionally, students are taught to spot the signs and symptoms of leprosy. The increased education has resulted in students identifying suspected cases amongst their family members and neighbours and bringing them to the project team or local clinic for leprosy screening. As child cases were being identified, the project implemented an additional approach of child cluster active case detection where they mapped the location

of leprosy cases, and concentrated screening efforts on areas where there were several child cases in close proximity.

As the project is now halfway through implementation, a mid-term evaluation was conducted to review the current progress and evaluate the effectiveness of this new approach.

The evaluation identified that the project model was highly effective and reported that the direct impacts on persons with leprosy were significant, with the evaluation attributing multiple leprosy diagnoses and their prevented disabilities to the specific work of the project.

The project has established strong relationships with the local communities and government officials. This has resulted in reduced fear and stigma in the community, with the evaluation reporting that persons with leprosy are now confident to publicly disclose their diagnosis. Additionally, the project's work with the local disability persons organisation has resulted in the group taking ownership of the leprosy program and making it their responsibility to make their community a leprosy free area.

Due to the project's positive relationships with local communities, they were invited by the community to expand their screening activities into private religious schools, such as the Islamic madrasas and Buddhist teaching schools. This was an unexpected, but positive, addition that allowed the project to expand their coverage.

The project is working to ensure gender equal access to project activities. A rise in the proportion of female leprosy cases being identified is evidence of improving access to activities for women.

Project participant Noor keeps her face veiled to hide from the stigma of leprosy.

Photo by Daniel Christiansz





The evaluation identified strong support from the government to implement leprosy activities, with some municipalities already allocating budget for leprosy work. This demonstrates positive indicators for sustainability beyond the life of the project. However, the evaluator also noted the heavy reliance of the government on the project's leprosy expertise for the diagnosis and confirmation of leprosy cases. If not addressed, this could impact the continued implementation of a leprosy control program at project completion. Whilst health workers are confident in referring suspected cases, they currently lack confidence in diagnosis.

The report also identified the challenges of the porous border with India, such as cross-border infections, and close-knit minority groups who are often unwilling to accept external services but are suspected to have hidden leprosy cases.

The evaluation report also provided several recommendations including:

- Expand project locations to non-intervened high endemic municipalities to increase impact of interrupting disease transmission
- Offer mental health support
- Expand leprosy training to other types of health professions (for example: traditional healers)
- Provide advanced training and exposure visits of government staff to strengthen technical knowledge
- Establish a more efficient data collection system
- Expand screening activities into more private schools
- Implement strategies to reach children who have dropped out of school
- Strengthen case-based surveillance to ensure systematic contact tracing and coverage of all index leprosy cases

(Top Left): students receive leprosy education at a school as part of the school screening program.

(Top right): Sisters Shanti and Shruti waving at project staff as they come for a visit to their home.

(Middle Left): After receiving leprosy training, a government health worker checks Shanti's skin for leprosy patches.

(Middle right): Shanti gets ready for school.

(Bottom two photos): Shanti receives training in self-care from the project staff to better care for her wounds from leprosy.

Photos by Daniel Christiansz and Paul Andrews



Project updates



Triple Zero Goals



Sustainable Development Goals



► Our staff member, Eva Lee, attending a meeting at a newly formed Self-Help Group in Nepal.

Photo by Sabitra Kandel

In conjunction with the Triple Zero strategy, our projects contain elements that target one or more key thematic areas. Our work against our key thematic areas is described in the following pages.

Advocacy

Advocacy is often required in different aspects of leprosy activities to advance the Triple Zero strategy. The Leprosy Mission Australia supports advocacy work across a range of activities and at different levels of government. These advocacy activities are embedded into projects and are often conducted to complement project activities.

Leprosy Mission Australia supported projects work closely with country governments and other civil society organisations to demonstrate and advocate for the improved integration of quality leprosy service delivery within the government health system.

Within our community-based projects, individuals with leprosy and disabilities are educated on how to appropriately self-advocate for their rights in their community and to the government. The Strengthening Pathways for Economic Resilience through Opportunities to Communities for Sustainability (SPROUTS) project has advocated and supported two local municipalities to develop policies for the running of Self-Help Groups within their communities. This strengthens the capacity of the local municipalities to support and monitor the group activities of local groups.

In Indonesia, under the Leprosy Friendly Villages (LFV) project, successful advocacy to the Kuningan district led to the approval of a regulation mandating the implementation of leprosy control programs in all villages. Building on this achievement, the project has begun coordinating the drafting of a presidential policy to implement leprosy control programs at the national level. If successfully passed, this will provide the formal basis for different levels of government, as well as community lobbying, to link policy to funding.

Furthermore, the LFV project expanded their advocacy to other villages not included within the project target locations, for the replication of the LFV approach. At the completion of the year, 10 new health centres are currently replicating the LFV approach using government budgets to maintain the program.

Highlights

- In Indonesia, 10 villages replicated the LFV approach.
- In Nepal, 2 municipalities developed Self-Help Group regulation guidelines.
- The Urban Leprosy Project, in partnership with the Indonesia Midwives Association and Indonesian Employers Association, has resulted in successful integration of leprosy screening for pregnant women and company staff.
- In Oecusse, Timor Leste, project staff currently participate in and advise on cross border discussions regarding establishing a Memorandum of Understanding with West Timor, part of Indonesia, for the sharing of health data.
- In Nepal, project staff are supporting the government to revise the national leprosy manual.
- In Nigeria, advocacy by the project for increased integration of mental health has resulted in the establishment of a mental health section within the Department of Health.



Tertiary Education Student Anjail along with TLM Nepal Country Leader, Shovakhar Kandel, meeting The Duchess of Edinburgh.

Photo courtesy of TLM Nepal



Education

Ensuring children and young people affected by leprosy have access to education opportunities is vital to their livelihood opportunities, confidence, mental health and social inclusion. Many participants experience discrimination and disadvantage due to leprosy or disability. Across our projects, students are supported from early education through to tertiary studies or vocational training in Nepal and India. Recognising the disadvantage faced by female students, our projects ensure a large proportion of seats are reserved for female students. Outreach programs have also been established in India, where short course education is delivered to female students in their villages, to reduce time spent away from home and the distance they are required to travel to access education.

This year, we have transitioned our support from the Vocational Training Centre (VTC) at Vadathorasalur to VTC Faizabad in India and onboarded new students in our Tertiary Education Scholarship program in Nepal.

The counselling program for students under the SEED and Tertiary Education programs continued to expand, offering counselling for challenges with academic studies and competing pressures to drop out of school for early marriage or foreign employment. Counselling was also extended to family members to help them understand the importance of education and the environmental needs to support students to complete homework and study within the home. Due to counselling efforts, dropouts from our SEED scholarship program reduced significantly this year, with only one student dropout.

This year a new system of self-reflective monitoring using the techniques of photo voice (a research methodology) was introduced to our Tertiary Education students to trial increased engagement of students in self-monitoring of progress. All students continue to progress in their

undergraduate studies. Their areas of study include Bachelors of Business Administration, Nursing, Social Work, Public Health and Civil Engineering.

Australian supporters participating in our Nepal trip had the pleasure of spending an afternoon with students from the Tertiary Education program. This was an opportunity for students to gain confidence in conducting presentations, practise their English-speaking skills and share about their hobbies and interests.

Challenges for women's employment continue after graduation from the VTCs due to cultural demands for women to take additional time off from paid employment to complete household tasks during festivals. The VTCs worked with potential employers to negotiate working conditions for women that allowed for additional leave to cover these demands. Successes were achieved with some companies now happy to offer these conditions, but negotiations continue with several large companies.

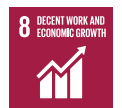
Highlights

- 400 students were supported with education (251 female students).
- 239 students graduated from various levels of education and training.
- New trades and innovations: VTC students successfully converted a fuel vehicle into an electric vehicle.

Triple Zero Goals



Sustainable Development Goals



Project updates



Triple Zero Goals



Sustainable Development Goals



Health Care

Provision of quality health care and rehabilitation services is essential for the reduction of leprosy transmission and disability. The health care services provided by our projects often extend to treating other conditions such as skin diseases and neglected tropical diseases (NTDs).

Seven of our projects, spanning all countries we support, have components of health system strengthening. This is done in close partnership with governments to train health workers, and provide health services and assistive technology. Three new projects partnering with the government to strengthen leprosy control programs commenced this year in Timor Leste, India and Nigeria.

The Enhanced Care for Integrated Skin NTDs (ECISNTD) project commenced in Nigeria, supporting the government to work towards eliminating NTDs as a public health problem. Two custom made mobile tricycles capable of taking basic health supplies to remote and hard to reach areas have been manufactured and deployed. These tricycles have been invaluable in outreach programs and have supported the diagnosis of skin conditions that would previously have been missed. The production of more mobile tricycles is planned for the coming year.

The Co-creating Inclusive Development (CID) project commenced in India. This project expands on the achievements accomplished under the previous Inclusive Empowerment project (2019-2024). The CID mobile rehabilitation van continued operations in India, travelling to new communities to demonstrate the effectiveness of this model of service provision. This year, the project had a particular focus on reaching fishing communities with leprosy screening, basic health care and awareness.

The commencement of the Ending Leprosy Transmission in Oecusse-Ambeno (ELETRA) project in Oecusse, Timor Leste, introduced and integrated a leprosy control

program within the existing health system. The project conducted a health determinant survey across Oecusse to identify the challenges faced by people affected by leprosy which revealed malnutrition and low literacy levels to be common co-existing factors for people living with leprosy.

The Self Care Unit, Anandaban Hospital Nepal, commenced operations in a new building for the first 3 months of the new year following a landslide at Anandaban Hospital which led to forced evacuation of the new building. Fortunately, all patients were safely rescued. Whilst the building itself was undamaged from the landslide, the surrounding land became too unstable for safe patient access to the building. The self-care unit has temporarily shifted to another part of the hospital. Plans are underway for the future location of the unit. Patients continue to receive training in ulcer care, safe cooking and farming methods.

Assistive technology

The provision of assistive technology, such as artificial limbs, prosthetics and tools for daily functioning are central to the rehabilitation and inclusion of people with leprosy and other disabilities.

In India, Nigeria, Nepal, and Timor Leste, our projects, including community-based projects, provide free assistive devices to patients to reduce impairment and further disability.

With the commencement of the CID project in India, a new assistive technology fabrication workshop was established to provide custom prosthetics, aids and custom-made shoes for persons living with disabilities. Occupational therapy students from the local university have also received training at the workshop to learn these practical skills. The unit continues

► A project participant in Nigeria receives a custom made prosthetic leg.

Photo courtesy of TLM Nigeria





(Left): A project participant in India being fitted for a prosthetic leg for the first time, by our staff at the fabrication workshop.

Photo courtesy of TLM Trust India

(Right): Timorese doctors receive specialist leprosy training at Anandaban Hospital, Nepal, as part of our work to increase leprosy skills within the government health sector in Timor Leste.

Photo courtesy of TLM Nepal

to experiment with 3D printing techniques to increase efficient and effective production of assistive devices. This year, the project successfully supported a local district government to adopt the use of 3D foot scanning technology to increase accuracy in the customisation of shoes. Leprosy patients can now access custom made shoes through their local government.

The self-care unit introduced the provision of a self-care kit to all admitted patients and continued to supply customised shoes and prevention of disability aids (e.g. cup holders, wash basins). Patients are taught how to use these tools effectively during their stay at the unit and are required to demonstrate competency in their use of the aids prior to going home.

Health worker training

Expertise in leprosy diagnosis and management is essential for the improvement of quality health services. Capacity-building for health workers is an integral component of all our community-based projects. This includes the training of doctors, nurses, midwives, laboratory technicians and general health staff in leprosy awareness, diagnosis and treatment, depending on their roles.

This year, 11 doctors from Timor Leste were sent to Anandaban Hospital, Nepal to receive intensive leprosy diagnostic and management training. Upon returning to Oecusse, Timor Leste, 13 new cases were found within several weeks due to the increased accuracy in leprosy diagnosis. This surpassed the annual number of cases found in the previous year. With the support of the newly trained doctors, the project has rolled out a new leprosy training manual to ensure standardised and accurate leprosy training for health workers.

In Indonesia, the strong partnership between the medical association and the Urban Leprosy, Kotaku (UL) project has resulted in the inclusion of a leprosy training module within the professional development program. Private doctors attending leprosy training will now receive credit points to contribute to their professional accreditation. This has resulted in high interest from doctors and required the project to expand their support area to cater for the increased interest. As a result, the UL project has seen an increase in leprosy referrals by private doctors who identified 40% of new cases in the district this year.

To reach all diverse ethnic, cultural and minority groups, a diverse range of health workers must be trained. In Indonesia and Nepal, female volunteer health workers form an important part of the basic health workforce. They are the frontline health workers who have intimate knowledge of the local community and are trusted by the diverse people groups under their care. Both the SPROUTS and LFV projects conduct regular education and refresher training to support the female volunteer health workers to increase accuracy in identifying and referring suspected leprosy cases.

Highlights

- 2,031 people provided with basic health services through mobile services
- 1,128 people trained in self-care
- 331 people provided with mental health support
- 901 assistive aids provided
- 777 health workers trained
- 260 female volunteer health workers trained



Project updates



Triple Zero Goals



Sustainable Development Goals



(Right): A health worker trained in leprosy, by our project team, provides leprosy awareness training in the community in Oecusse, Timor Leste.

Photo courtesy of Misaun Lepra, Timor Leste

Community awareness and inclusion

Misinformation, fear, and discrimination remain significant barriers to the community participation of persons affected by leprosy. These factors hinder early diagnosis and reduce the willingness of individuals with leprosy to access health services. All our community-based projects include activities to increase community awareness of leprosy and reduce leprosy stigma. This is done in a variety of culturally appropriate ways tailored to the specific culture within the project communities, including cultural shows about leprosy, dances, posters, school education and health worker run community education.

Below are some examples of awareness raising events that took place this year.

In Nigeria, the team conducted interviews on local radio where local community members called in to ask questions about leprosy and other Neglected Tropical Diseases. They estimated that the interviews conducted on local radio reached over 5 million people.

As part of World Leprosy Day celebrations, the ELETRA project conducted a march along the main street in Pante Makassar, Oecusse, to raise awareness of the discrimination faced by persons with leprosy. Additionally, they hosted a school trivia contest where students from the surrounding schools attended to compete on their knowledge about leprosy.

The CID mobile van broadcasted health education on the television attached to their van during community outreach activities to share health messaging to the local community.

The Jhapa Leprosy Reduction (JLR) and SPROUTS project utilised the painting of health messaging artworks on walls in



community areas, such as at health centres and schools, where local community members passing by can read about the signs and symptoms of leprosy.

The LFV and UL projects enlisted the support of past leprosy patients to share about their leprosy journey during presentations to health officials and influential community members to raise awareness on the impact of leprosy on the lives of people within their communities.

Highlights

- Radio interviews on leprosy reaching an estimated population of 5,833,494
- 3,505 people reached with health promotion
- 2,935 reached with leprosy awareness
- 612 people reached with Water, Sanitation and Hygiene education





Screening

All community-based projects have a component of skin screening. This is done through different approaches depending on each country's existing networks and infrastructure. All skin screening activities are completed in partnership with local governments and community members. Skin screening activities not only uncover hidden leprosy cases but also identify other skin conditions such as scabies, Buruli ulcers, psoriasis and vitiligo.

In Eastern Nepal, the JLR project continues to conduct school screening. With the large focus on school screening over the past 2 years, the project has now identified areas where there are high concentrations of child cases. This year, the project focused on comprehensive screening in these communities to identify hidden cases, uncovering approximately 30% of the cases found in the region.

In Nigeria, there are limited dermatologists, resulting in limited access to specialist skin care outside of the capital. The ECISNTD project conducted mass community skin and health camps in rural and remote areas where people with different types of skin conditions can access free specialist dermatological support. At these camps, communities could also access consultations and medication for other conditions such as malaria, typhoid, hypertension and general infections. The mobile tricycles were of great benefit in these camps as they provided private consultation areas for patients requiring body examinations. Due to regular health

promotional activities that built community trust in the project, the skin and health screening camps have been highly popular and on one occasion, medication ran out due to the high volume of patients.

At the commencement of the ELETRA project, door to door household skin screening activities were conducted with close contacts of past leprosy patients as part of the baseline assessment. A significant number of new leprosy cases were found, including child leprosy cases and Grade 2 disabilities, clearly demonstrating the existence of many hidden leprosy cases and sustained, high transmission in the region.

The LfV and UL projects in Indonesia continued to partner with the local governments to mobilise health cadres to conduct community screenings in informal settlements and villages. Post Exposure Prophylaxis (PEP) was introduced in the villages in Kuningan to accompany community screening events. When given to close contacts of new leprosy cases, PEP reduces the risk of infection.

The commencement of the SPROUTS project saw mass skin screening campaigns being carried out in all targeted project locations. These screening camps uncovered several leprosy cases in addition to a wide range of other skin diseases.

Highlights

- 95,040 people screened for skin conditions
- 14,527 children screened

Australian Aid

Triple Zero Goals



Sustainable Development Goals



(Left): In Indonesia, a female health volunteer provides information to a patient about the signs and symptoms of leprosy.

Photo by Daniel Christiansz

(Right): In Nigeria, tricycles like these are now used to provide mobile screening services in rural and hard to reach areas.

Photo courtesy of TLM Nigeria

Project updates



Triple Zero Goals



Sustainable Development Goals



After goat rearing training, a project participant receives a goat to help start her animal husbandry business.

Photo by Supa Thejan



Livelihoods

In Nepal, our SPROUTS project provides livelihood support to persons affected by leprosy, lymphatic filariasis, disability and those from marginalised communities through the Self-Help Group approach. The SPROUTS project commenced this year with a brand-new team. Implementation commenced halfway through the year, to ensure sufficient orientation for the new team and establishment of Memorandum of Understandings with provincial and local governments.

This year the project established 13 Self-Help Groups for people from disadvantaged backgrounds and people with leprosy and other disabilities. The team has commenced group discussions for forming group goals and supporting participants with understanding the expectations of the group.

The project continues to provide some technical and financial support to the cooperatives established under the previous IMPACT project to ensure long term sustainability of the groups.

With a focus on mutual support and sustainability, The Leprosy Mission established a forum for cooperatives and self-help groups established by The Leprosy Mission Australia over the past 15+ years. The goal of the forum is to create opportunities for mutual learning and a platform for stronger advocacy on topics of concern for the groups.

Highlights

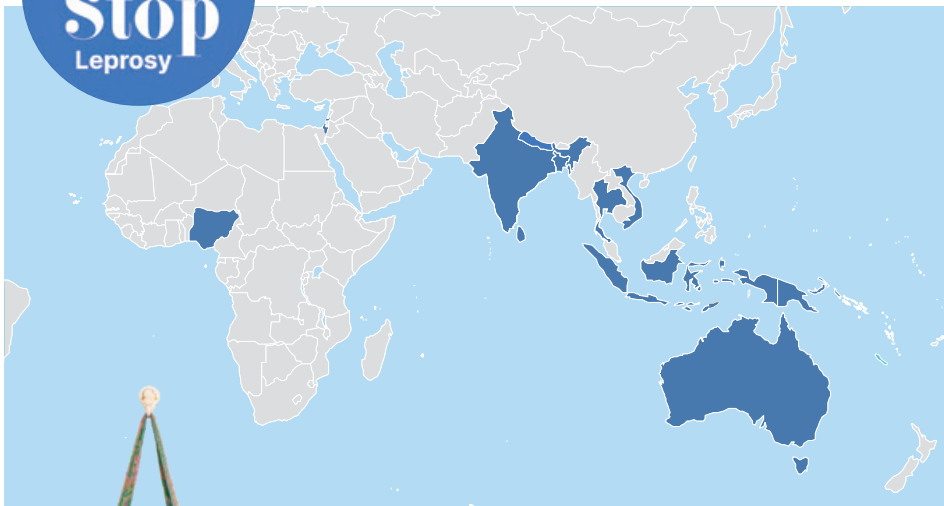
- 1,200 people supported in Self Help Groups



The Leprosy Mission Social Enterprise Shop

When you Shop to Stop Leprosy, you are not only purchasing products, you are helping to achieve all of the following:

- Providing livelihoods for artisans affected by leprosy
- Supporting organisations that help people affected by leprosy and disability
- Supporting The Leprosy Mission projects in partner countries
- Improving living standards of communities in developing countries
- Ethical sourcing of Fair Trade products
- Supporting local Australian businesses
- Supporting sustainable products and practices for a positive effect on the environment




The map below shows where our overseas partner producers are located. We are committed to minimising modern slavery in our operations and supply chain. So we work hard for your support to go towards our partner producers and seek in turn to help their workers earn a dignified income or gain access to much needed social and medical care.

COUNTRIES WHERE PRODUCT IS MADE


Bangladesh
India
Israel/ Palestine
Nepal
Indonesia
Nigeria
Sri Lanka
Thailand
Vietnam
Australia




Achievements from the past year include:




\$160k
Purchases from World Fair Trade organisations employing artisan producers




\$71k
Purchases from organisations that work with artisans affected by leprosy and disability



\$8k
Purchases from artisans directly linked to Leprosy Mission Australia projects



\$445k
Purchases that supported Australian local businesses



23%
of products sold purchased from overseas artisans

The Leprosy Mission Social Enterprise Shop

How Chameli Found Her Place at New SADLE

When Chameli was just 9 years old, she was diagnosed with leprosy. She had eight younger siblings whom she took care of. But after her diagnosis not even her family would go near her. She was treated as an outcast in her village and had to beg on the street for food and money. After living in a situation like this, can you imagine how life-changing it would be to find a job tailored just for you?

Chameli travelled a long way to get treatment for her leprosy. She was able to get Multi-Drug Therapy (MDT) and returned to her village after being healed. But she continued to have complications. She kept getting terrible ulcers on her legs, and they would not heal. So she returned to Pokhara and stayed.

She met other people who had leprosy and was able to be part of a community that understood her. Her ulcers could be treated and kept under control, even though they still impacted her life. She was also able to get in contact with New SADLE.



Chameli has very weak fingers, and lots of ulcers still form in her legs.

Because of this, it's difficult for her to do a lot of work. New SADLE helped her learn how to do traditional Batik painting—something she can do without stressing her body too much. Now she makes beautiful batik designs like the ones you can see on these cards!

Chameli now has community and stability. She can now earn a dignified income. She also met another leprosy patient, named Basu. Chameli and Basu got married, and their two sons have been able to get work and education because their parents are no longer struggling.

Handmade With Love

Everyone should have the chance to feel empowered, no matter where they are or what challenges they face. That's why our handmade products are carefully crafted by artisan producers across the world.



Cure and care for people affected by leprosy and disability



Provide a dignified source of income for people impacted by leprosy and poverty



Provide livelihoods for artisans facing poverty



Support sustainable products and practices



Support Australian suppliers and local businesses



Cure and care for people affected by leprosy and disability

With every purchase, you help provide a dignified source of income for these incredibly talented artisan producers who are often ostracised and marginalised, as well as a way for them to give back to their communities.

We're proud to offer high-quality, ethically sourced products that support those who need it the most. By purchasing our handmade items, you can make a positive impact on the lives of those affected by leprosy, poverty and disability, and change their story from one of suffering to one of hope!



How a Chicken Changes Lives

Rima has had a lot of jobs to take care of her family. Running a hotel, a kiosk shop, a tailoring service, taxis, and farming—anything she could to earn enough money. It's been difficult to build a sustainable business, but this is where a chicken has been life-changing!

When Rima's husband passed away, she had to sell the business they ran together. She learned tailoring and started to repair clothes and teach people to sew. Using some of her profits, she tried to run a taxi service with tuk-tuks. However, due to the theft of one vehicle she had to close the business. She started to grow rice, and other crops when she could. Rima has had to work hard and manage her money carefully to keep her family supported.

Then she learned about the local Self-Help Group (SHG) from Leprosy Mission staff. Through the SHG, she was able to get training to manage her business and money, and deal with problems like the climate and natural disasters. She was able to get a loan to grow her tailoring business and has already been able to repay it. This is also how she got her life-changing chickens.

Rima was trained and given some chickens to start her business. She has some chickens for laying eggs, and breeds others to sell chickens. In 6 months, she's been able to sell 10 chickens and many more eggs to her community!

"I feel I'm now more independent than I was previously, thanks to the Leprosy Mission support," Rima says. "I'm very confident in my ideas and presenting them to others."

By receiving a chicken as a Gift of Love, Rima was able to create a stable income and financial security. Who knew that a chicken could be so life-changing!

Woven with Strength and Hope

Shila's journey began with determination. As a teenager, she left her rural village behind and travelled to Kathmandu, Nepal with a friend to chase the hope of work and a better future. She found her first job spinning yarn in a garment factory. It was hard work, far from home, but she never gave up.

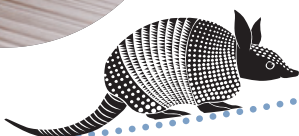
Everything changed when she was introduced to New SADLE. In 2010, she joined as a trainee Dhaka weaver. What started as a job became a craft she could take pride in. She was finally doing something meaningful, surrounded by a team that understood and supported her.



Her husband, Gopal, is affected by leprosy and works in the paper section at New SADLE. The organisation gave them both more than jobs, it gave them dignity. Their two sons were able to go to school thanks to education support from New SADLE. Today, one of them is working in a vehicle workshop and dreams of working overseas. The other has trained as a Thangka painter and now shares his talent through his art.

At 50, Shila weaves with pride and joy. She weaves beautiful Dhaka fabric with skill. Her income helps support her family, and her heart is full knowing her work brings joy to people around the world.

Photos by Supa Thejan



Thank you

Healing Hands, Humble Heart: The Legacy of Dr Paul Roche

By Anne Lim



Photos supplied
by the family

When Australian immunologist Dr Paul Roche first set foot in Nepal in the 1980s, he could not have imagined how deeply the country and its people would shape the course of his life.

Paul receives his PhD in Sydney in February 1994, with Dr Warwick Britton.



What began as a season of service with Interserve alongside his new wife, Marlene, became a lifelong calling that combined science, faith, and compassion.

Marlene, Simon, Saskia and Paul visit Nepal in 2007, opposite Anandaban.



In 1986, with their young daughter in tow, Paul joined The Leprosy Mission's Anandaban Hospital near Kathmandu. There he rode his motorbike daily over treacherous mountain roads to reach the Mycobacterial Research Laboratory. Applying the tools of immunology, he sought to understand how leprosy damages the body and how to prevent nerve injury. His groundbreaking research earned him a PhD from the University of Sydney, but it was his humility and quiet perseverance that left the greatest mark.

Nepal called the family back again in 1996, when Paul became Research Director at Anandaban. He not only advanced studies on drug resistance but also trained young Nepali scientists, laying foundations that continue today. Later, as Superintendent of Green Pastures Hospital in Pokhara, he guided its transformation into a centre for disability and chronic disease care, including spinal injuries and palliative care.

After returning permanently to Canberra in 2016, Paul was unable to resume work due to a long illness. On 9 January 2024, he passed away aged 68, with Marlene by his side.

Through every role, Paul carried a deep conviction shaped by Isaiah 58: to "loose the chains of injustice" and serve the poor. His wife, Marlene, recalls, "His heart was so much into making things better for people. It was a privilege to love the Nepali people as God loved them."



Updates and gratitude from Nepal

The Year 2024 has been a year of mixed feelings at The Leprosy Mission Nepal as our hopes to serve the needy people are rising; in the meantime, the challenges by the natural calamities such as the landslides and wildfire have tested our resilience and hopes. We have requested all to pray as we take next steps about the future of Anandaban Hospital. Also, we have requested all to extend the wisdom and guidance for the work that lies ahead. Despite so many hurdles, our spirits for services have not diminished:

"We are hard pressed on every side but not crushed; perplexed, but not in despair; persecuted, but not abandoned; struck down, but not destroyed."
2 Corinthians 4:8-9

With the support from kind-hearted and generous people from Australia, we have built the retaining walls and improved the drainage system and therefore have been able to protect the buildings and trauma center and main OPD buildings. At the moment we have been delivering some of the services from these buildings.

Once more, we request you to continue to extend wisdom and guidance as we are facing the hurdles. Lastly yet more importantly, we extend the gratitude to the team of The Leprosy Mission Australia and the brothers and sisters who have been continuously supporting us for the restoration of Anandaban Hospital.

Shovakhar Kandel

Country Leader, The Leprosy Mission Nepal

► The aftermath of the landslide, leading away from the Leprosy Wards towards the Training and Technical Unit.

Photo by Mafe Gomez

Giving thanks

This year we received bequest gifts from the following estates:

Florence Agnes Todd
Charitable Trust

The Edwin and Elizabeth
Batchelder Trust

The Estate of the late Grace
Joy Blanket

The Estate of the late Isabelle
Irene Churchward

The Estate of the late Beryl
Rose Dahlenburg

The Estate of the late Miss
Pauline Fischer Darlington Trust

The Estate of the late Edward
Deacon Lang

The Estate of the late Paul
Leslie Duncan

The Estate of the late Jessie
May Hall

The Estate of the late Erica
Coral Hammond

The Estate of the late Raymond
Arthur McGahy

The Estate of the late Berilyn
Miller-Morrison

The Estate of the late Harold
Trevor Mower

The Estate of the late Margaret
Ann Osmand

The Estate of the late Edith Quick

The Estate of the late Robert
Charles Parham

The Estate of the late Beryl
Miller Scott

The Estate of the late Jenny
Auguste Thompson

The Estate of the late Maureen
Valerie Thompson

The Estate of the late Philip
Hamilton Wollaston

The Estate of the late Jean
Margaret Wright

The Harding Beneficiary Fund

The Ida Maud Webster McDonald
Perpetual Charitable Trust

The Lynette and John Gates
Charitable Endowment

The Mary Janette Pearce
Endowment

The Mounsey Charitable Trust

The Ronald K White Charitable
Trust Fund



Board of Directors

The Leprosy Mission Australia is governed by a Board of Directors comprised of members from various fields of expertise within the community. Members include representatives from international development, mission, financial, human resources, promotional and marketing fields, with a commitment to our Christian mission, vision and values.



Jennifer Ward

MBA, BEcon (Hons),
Post Grad Dip, GAICD

Appointed Director
23 October 2016

Appointed Board
Chair 15 October 2022

Chair of the
Governance and Risk
Committee

Member of Finance,
Audit & Investment
Committee



Paul de Mare

BComm, Higher Dip:
Accounting, MComm:
Tax, CA

Appointed Director
10 October 2020

Appointed Finance
Director 7 December
2020

Chair of Finance,
Audit & Investment
Committee

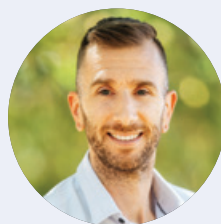


Stephen Goudswaard

BCom, CMA,
GradDipInnov&
ServMgt, Associate
Certified Coach

Appointed Director
1 July 2024

Member of
Governance & Risk
Committee



Matthew Hornby

Grad Cert Mus; BTh;
MBA; MMktg; MTh

Appointed Director
1 July 2024

Member of Finance,
Audit & Investment
Committee

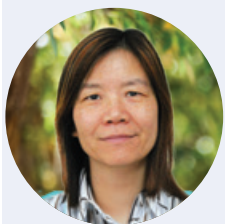


Rev. Kevin Keegan

GradCertNFP
Management;
Grad.DipTh, BTh,
TAE40110 Cert IV
Training &
Assessment, Cert.
Ministry Consultancy,
Cert.Ordination

Appointed Director
9 February 2015

Member of
Governance & Risk
Committee



Dr Judy Louie

PhD(Acc), MBus(Acc),
GradDip(Acc),
BSc, CPA

Appointed Director
23 October 2016

Member of Finance,
Audit & Investment
Committee



Dr Angeline Low

PhD, M Mgt, BEcon
(Hons), MAICD

Appointed Director
25 June 2018

Member of Finance,
Audit & Investment
Committee

Member of
Governance & Risk
Committee

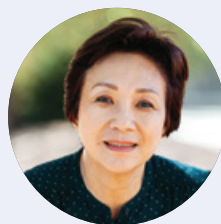


Dr Mark Morley

BA (Arabic),
BComm, MInt'IBus,
SJD (Law).

Appointed Director
27 September 2021

Member of Finance,
Audit & Investment
Committee

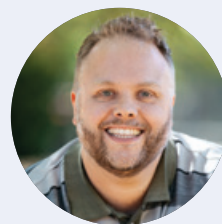


Vera Ou-Young

BBus, Post Grad Dip,
GAICD, CAANZ,
CTA, FCPA

Appointed Director
1 July 2024

Member of Finance,
Audit & Investment
Committee



Ian Rennison

Appointed Director
1 July 2024

Member of
Governance & Risk
Committee



Governance

The Leprosy Mission Australia Board has established sub-committees to develop board efficiency and effectiveness to support activities in the following areas:

Governance and Risk Committee (GRC)

The Governance and Risk Committee is responsible for the effectiveness of the board structures and membership ensuring the highest standards are met, including Board education and development and CEO appointment and performance. It also takes responsibility for the management of risk including review of the policies and compliance in accordance with relevant regulatory requirements.

Finance, Audit and Investment Committee (FAIC)

The Finance, Audit and Investment Committee is responsible to monitor and report on the overall financial performance and health of the organisation, advising the Board on the audit and overseeing the management of the investment portfolio.

Membership of Leprosy Mission Australia

The Board are accountable to the members who gather at the National Council.

General Members	State Representatives	Life Members
Shivani Astley	New South Wales	From time-to-time honorary Life Membership is awarded to individuals who have made a significant contribution to the work of the Leprosy Mission Australia over many years and who have a deep and abiding interest in the work that we do. The following people are Life Members:
Warwick Britton	Sally Martin	
Jennifer Cavanough	Janet Walmsley	
Paul de Mare	Queensland	
Peter Geddes	Derek Hume	
Steve Goudswaard	Judy Satish	
Matt Hornby	South Australia	
Kevin Keegan	Kathrine Jaeschke (resigned AGM 2024)	
Judy Louie	Nicolle Macaitis (appointed AGM 2024)	
Colin Martin	David Marshman	
Steve Meredith	Jenny Marshman	
Angeline Low	Tasmania	
Mark Morley	Margaret Mead	
Vera Ou-Young	Victoria	
Pam Packett	Joe Bast	
Ian Rennison	Maria Bast	
Chrisy Savvides	Western Australia	
Denise Scott (resigned AGM 2024)	Heather Newton	
Adam Walker		
Jennifer Ward		



The Leprosy Mission Australia

ABN: 52 354 004 543

Independent Audit Report to the members of The Leprosy Mission Australia

Opinion

The summary financial statements, which comprise the summary statement of financial position as at 30 June 2025, the summary income statement and summary statement of changes in equity for the year then ended are derived from the audited financial report of The Leprosy Mission Australia for the year ended 30 June 2025.

In our opinion, the accompanying summary financial statements are consistent, in all material respects, with the audited financial report.

Summary Financial Statements

The summary financial statements do not contain all the disclosures required by the Australian Accounting Standards – Simplified Disclosures and the *Australian Charities and Not-for-profits Commission Act 2012*. Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial report and the auditor's report thereon. The summary financial statements and the audited financial report do not reflect the effects of events that occurred subsequent to the date of our report on the audited financial report.

The Audited Financial Report and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial report in our report dated 3 September 2025.

Directors' responsibility for the Summary Financial Statements

The directors are responsible for the preparation and presentation of the summary financial statements.

Auditor's Responsibility

Our responsibility is to express an opinion on whether the summary financial statements are consistent, in all material respects, with the audited financial report based on our procedures, which were conducted in accordance with Auditing Standard ASA 810 Engagements to Report on Summary Financial Statements.



Saward Dawson



Peter Shields
Partner

Blackburn

Date: 18 September 2025

Financial summary

Finance overview for the financial year ending 30 June 2025

The Leprosy Mission Australia (TLMA or the Company) achieved a surplus for the year of \$262,435 (2024: \$182,084) which includes a non-monetary adjustment of \$266,484 (2024: \$170,660) to reflect its financial assets at its fair value at year end.

We have raised \$9,670,988 in total revenue through our faithful and generous supporters in donations, bequest gifting and buying merchandise from our shop including an Australian government grant of \$1,431,836 from the Department of Foreign Affairs and Trade. Revenue has increased 21% against last year.

This financial year, the Company has continued its support to six countries—India, Indonesia, Nepal, Nigeria, Papua New Guinea and Timor-Leste. We were able to spend \$3,348,690 (2024: \$2,949,976) on program implementation and \$1,403,183 (2024: \$1,029,749) in community education. This has enabled our project partners to provide aid to help people affected by leprosy and disabilities.

Our overall financial health

We are thankful that the financial health of the Company is sound with a strong balance sheet (as summarised in the Statement of Financial Position) with net assets of \$12,821,425 (2024: \$12,558,990) including cash equivalents of \$1,406,294 and financial assets of \$3,668,966 which are ungeared and actively managed using specialist advice to achieve long-term market growth with competitive returns.

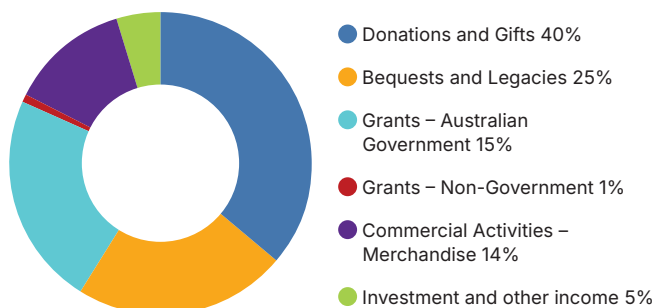
Our financial objectives in 2025-26 are to focus on building and increasing the Company's capacity to meet our new Strategic Aims of maximising project commitments and impact while embarking on future growth opportunities. We will continue to keep a tight control on non-project expenditure to maximise effective use of resources. Together with our supporters and partners, we will defeat leprosy and transform lives affected by leprosy.

For a full copy of our financial statements, please contact our office at 1800 537 767 or email us at hello@leprosymission.org.au.

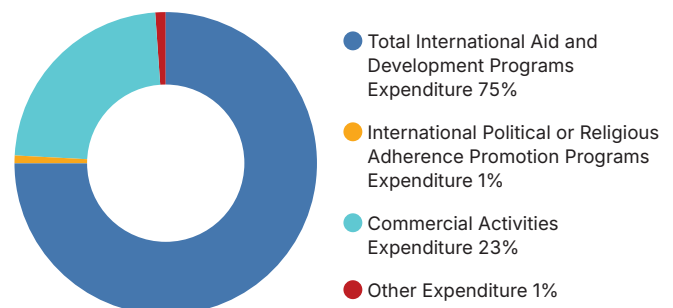
Alternatively you can also visit the ACNC website: <https://www.acnc.gov.au/charity/charities/ba121149-39af-e811-a963-000d3ad24077/documents/>

The charts represent our income and expenditure as a proportion of the totals. Each category is adapted from the summary financial statements within this report and is based on the definitions approved in the ACFID Code of Conduct.

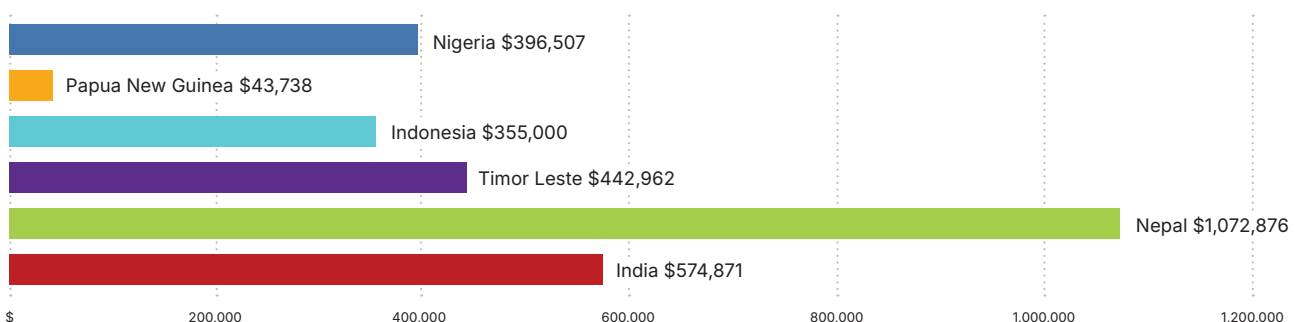
Where do our funds come from?*



Where did we spend the money?*



Funds to supported countries



*Source: Audited TLMA Financial Statements for the year ended 30 June 2025, amounts are in Australian Dollars.

Financial summary

Statement of Income and Expenditure and Other Comprehensive Income

For the Year Ended 30 June 2025

Amounts shown in Australian Dollars

REVENUE	2025	2024
	\$	\$
Donations and Gifts		
• Monetary	3,857,559	3,472,296
Bequests and legacies	2,405,950	1,530,576
Grants		
• DFAT	1,431,836	1,452,349
• Others	41,080	-
Commercial Activities Income - Merchandise	1,406,461	1,085,339
Investment income	519,405	468,440
Other income	8,697	6,352
TOTAL REVENUE	9,670,988	8,015,352
EXPENDITURE		
International Aid and Development Programs Expenditure		
International Programs		
• Funds to International Programs	(2,885,954)	(2,476,530)
• Program Support Costs	(462,736)	(473,446)
Community Education Costs	(1,403,183)	(1,029,749)
Fundraising Costs		
• Public	(1,558,511)	(1,320,817)
• Government, Multilateral and Private	(10,557)	(9,837)
Accountability and Administration	(775,008)	(640,956)
Total International Aid and Development Programs Expenditure	(7,095,949)	(5,951,335)
International Political or Religious Adherence Promotion Programs Expenditure	(107,271)	(87,594)
Commercial Activities Expenditure	(2,165,853)	(1,755,639)
Other Expenditure	(39,480)	(38,700)
TOTAL EXPENDITURE	(9,408,553)	(7,833,268)
Surplus for the year	262,435	182,084
Other comprehensive income		
Items that will not be reclassified to profit or loss		
Gain on property revaluation	-	556,880
Total Other Comprehensive Income for the year	262,435	738,964

Statement of Financial Position

As at 30 June 2025

Amounts shown in Australian Dollars

ASSETS	2025	2024
	\$	\$
Current Assets		
Cash and cash equivalents	1,406,294	1,750,341
Trade and other receivables	1,450,640	182,719
Inventories	334,107	234,861
Financial assets	3,668,966	4,238,514
Other assets	216,283	66,380
Total Current Assets	7,076,290	6,472,815
Non-current Assets		
Right-of-use assets	8,327	12,323
Property, plant and equipment	6,518,001	6,549,048
Intangible assets	64,659	77,145
Total Non-Current Assets	6,590,987	6,638,516
TOTAL ASSETS	13,667,277	13,111,331
LIABILITIES		
Current Liabilities		
Trade and other payables	495,718	262,250
Short-term provisions	309,437	247,908
Lease liabilities	4,092	3,845
Total Current Liabilities	809,247	514,003
Non-Current Liabilities		
Long-term provisions	31,875	29,516
Lease liabilities	4,730	8,822
Total Non-Current Liabilities	36,605	38,338
TOTAL LIABILITIES	845,852	552,341
NET ASSETS	12,821,425	12,558,990
EQUITY		
Reserves	7,318,537	7,318,537
Retained earnings	5,502,888	5,240,453
TOTAL EQUITY	12,821,425	12,558,990

Financial summary

Statement of Changes in Equity

For the Year Ended 30 June 2025

Amounts shown in Australian Dollars

2025	Retained Earnings	Asset Revaluation Reserve	TLMA Investment Fund	Total
	\$	\$	\$	\$
Balance at 1 July 2024	5,240,453	6,194,117	1,124,420	12,558,990
Surplus for the year	262,435	-	-	262,435
Balance at 30 June 2025	5,502,888	6,194,117	1,124,420	12,821,425

2024	Retained Earnings	Asset Revaluation Reserve	TLMA Investment Fund	Total
	\$	\$	\$	\$
Balance at 1 July 2023	5,058,369	5,637,237	1,124,420	11,820,026
Surplus for the year	182,084	-	-	182,084
Gain on property revaluation	-	556,880	-	556,880
Balance at 30 June 2024	5,240,453	6,194,117	1,124,420	12,558,990

Accountabilities and memberships



Australian Government

Department of Foreign Affairs and Trade



The Leprosy Mission Australia is fully accredited by the Australian Government's Department of Foreign Affairs and Trade (DFAT), meeting all the standards required. DFAT is responsible for managing Australia's overseas aid program.

As an accredited agency, we receive government funds for a number of our programs through the Australian NGO Cooperation Program (ANCP). The Leprosy Mission Australia raised \$1 for every \$5 provided by the Australian Grant. We are grateful to both ANCP and our supporters who through their combined funding increased the impact of our projects. The projects that received contributions from ANCP are identified with the Australian Aid logo above.



The Leprosy Mission Australia is a member of the Australian Council for International Development (ACFID) and as a signatory to the Code, is committed to full adherence to the ACFID Code of Conduct. Leprosy Mission Australia participates in a number of ACFID's Communities of Practice that provide a platform for members to collaborate on issues relating to international development. More information about the ACFID Code of Conduct may be obtained from ACFID's website: www.acfid.asn.au.

If you have any concerns relating to Leprosy Mission Australia's compliance with the ACFID Code of Conduct, complaints can be made directly to ACFID by emailing code@acfid.asn.au. Further information can be found at acfid.asn.au/code-of-conduct/complaints/



We are registered as a charity and Public Benevolent Institution with the Australian Charities and Not-for-profits Commission (ACNC).



Australian Disability Development Consortium

We are committed to disability-inclusive development and contribute to advocacy activities in the Australian Development sector.



The Leprosy Mission Australia is a member of the Fair Trade Association of Australia and New Zealand, a network of organisations that support fairness in price and wages, improved market access and poverty alleviation.



We are an organisational member of the Fundraising Institute of Australia (FIA), the national peak body representing professional fundraising in Australia. We adhere to and comply with FIA's Principles and Standards of Fundraising Practice.



The Leprosy Mission Australia is also a member of Missions Interlink, a network of Australian Christian agencies actively engaged together in effective cross-cultural and global mission.



We are proud to be a **Social Traders Certified Social Enterprise**, officially recognised for placing purpose before profit. This certification affirms our commitment to reinvesting profits into healthcare, education, sustainable livelihoods and community projects that support people affected by leprosy, poverty and disability—creating measurable, lasting social impact.

FEEDBACK

If, for any reason, you are not happy with your dealings with Leprosy Mission Australia, you may lodge a complaint with us:

By telephone (Freecall):
1800 LEPROSY (1800 537 767)

By email:
hello@leprosymission.org.au

By Post:
Private and Confidential
Board Chair
The Leprosy Mission Australia
PO Box 293
BOX HILL VIC 3128

We welcome feedback of all kinds, and have a formal complaints process.

To provide feedback, read our complaints policy, or to lodge a complaint, please email.

The Leprosy Mission Australia is located on the lands of the Wurundjeri People of the Kulin Nation, and this report was designed on the lands of Wallumedegal. We wish to acknowledge the traditional owners of this land, and give our respect to their Elders past, present and emerging.



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