
ANNUAL REPORT 2019-2020



SEVA.CA



DEAR FRIENDS OF SEVA CANADA

Steadfast: firm and unwavering in purpose, resolution and faith.

This is the word that most accurately describes our donors, supporters and partners around the world.

The latter half of Seva's 2019/2020 fiscal year was not what we expected – not what anyone expected: a worldwide pandemic and all the heartbreak that came with it.

Even more, we didn't expect the overwhelming generosity and support from our donors who wanted to ensure Seva Canada continues to fight preventable and treatable blindness. You gave us your savings and wages, you sent us cards of support, you asked others for money for Seva, you volunteered at home and in the office (while safely socially distancing) and you called, just to see how we were doing.

We have shared your cards and good wishes with our partners who also send you their gratitude.

Thank you,



Vivian Yin,
Board Chair



Penny Lyons,
Executive Director

In 2019-20, Seva donors helped:

1,197,960 people benefit from accessible eye care services.



88,695 people (47,707 women and 40,988 men) receive sight-restoring cataract surgeries, restoring their dignity, productivity and independence.



ABOUT SEVA

Mission

Seva Canada's mission is to restore sight and prevent blindness in developing countries.

Vision

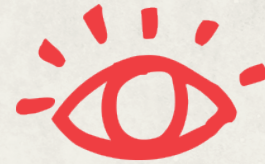
Seva Canada's vision is a world in which no one is needlessly blind or visually impaired.

Guiding Principles

- Our belief in equal access to eye care for all
- Our belief that with adequate resources, all people can meet their own needs
- Our commitment to working with international partners to build local, sustainable eye care programs
- Our respect for cultural, ethnic, spiritual, and other forms of diversity
- Our commitment to inform and inspire Canadians to join us in achieving our mission

HOW YOU'VE HELPED

1,197,960



people benefitted from accessible eye care services

88,695



people received sight-restoring cataract surgeries

54% Women



46% Men



4,341



people received other types of surgeries eg. glaucoma

8,405



people received prescription glasses

TRAINING

3 Ophthalmologists underwent specialty training (pediatric and glaucoma)

3 Doctors underwent ophthalmology training

173 Clinical staff received medical training

20 Ophthalmic Nurses trained

533 Female Community Health Volunteers trained

40 Ophthalmic Assistants trained

300 School teachers trained on visual assessment and primary eye care

5 Ophthalmologists received cataract surgical training

13 Refractionists trained

1,575 people received Eye Health Awareness training on primary eye care

COUNTRY REPORTS

Moving beyond Vision 2020, (the global initiative for the elimination of avoidable blindness, a joint programme of the World Health Organization (WHO) and the International Agency for the Prevention of Blindness (IAPB)), eye care programs must develop strategies to dramatically increase eye care services in most low and middle-income countries. We encourage our program partners to disaggregate data by age, sex, economic level and location to overcome barriers to increased uptake of services and to study the effectiveness of their strategies throughout their region. Seva's strong support for these rigorous health services and health systems studies will continue to make a significant contribution to global knowledge about effective

strategies to reach populations in need. Seva looks forward to collaborating with other international eye care providers to meet the global demand for eye care.

Program data from the past year are shown in the individual country reports. Funding shifts over time as programs mature and become financially self-sustaining. Funds are then used to expand population coverage or add new clinical services.



COMMUNITY EYE CENTRES

The most effective way to increase eye care program utilization in most regions involves establishing Community Eye Centres (CECs). CECs are stand-alone facilities established by an ophthalmologist, staffed by a mid-level ophthalmic professional and support staff, and supplied with sophisticated ophthalmic equipment. They provide a full range of eye care services, usually to an underserved rural population and are self-financed through minimal service fees, paid by those who can afford to pay. By dramatically increasing the use of eye care services by populations, CECs show the greatest promise for meeting the growing demand for eye care services.

GENDER EQUITY

Seva Canada has taken a leadership role in the gender and blindness global initiative. All Seva-supported projects work towards achieving gender equity by focusing on overcoming cultural and economic barriers that prevent access to eye care services. Awareness of the problem has not been enough and much work remains to be done. Moving beyond Vision 2020, we need organizations to prioritize the issue of gender inequity and to encourage both political and social action.



AFRICA

Seva Canada supports eye care services in Africa by partnering with the Kilimanjaro Centre for Community Ophthalmology (KCCO) located in Moshi, Tanzania and Cape Town, South Africa. Seva's partnership with KCCO began in 2001 and Seva donor support currently assists programs in Burundi, Madagascar, Malawi, Tanzania, Ethiopia, and Francophone West Africa to develop and implement population-based eye care services.

With KCCO's expertise, our in-country eye care programs conduct outreach to communities, provide thousands of eye examinations, identify people in need of care and provide sight-restoring cataract surgery. In addition, we support programs to identify and treat chronic eye conditions such as glaucoma and complications from diabetes.

KCCO staff conduct operational research to generate evidence

for policies, programs and practices, particularly those that reduce barriers to care for women and girls. KCCO is also a World Health Organization Collaborating Centre for Trachoma, and was recognized by the Queen Elizabeth Diamond Jubilee Trust for its contribution to trachoma elimination in Tanzania this year.



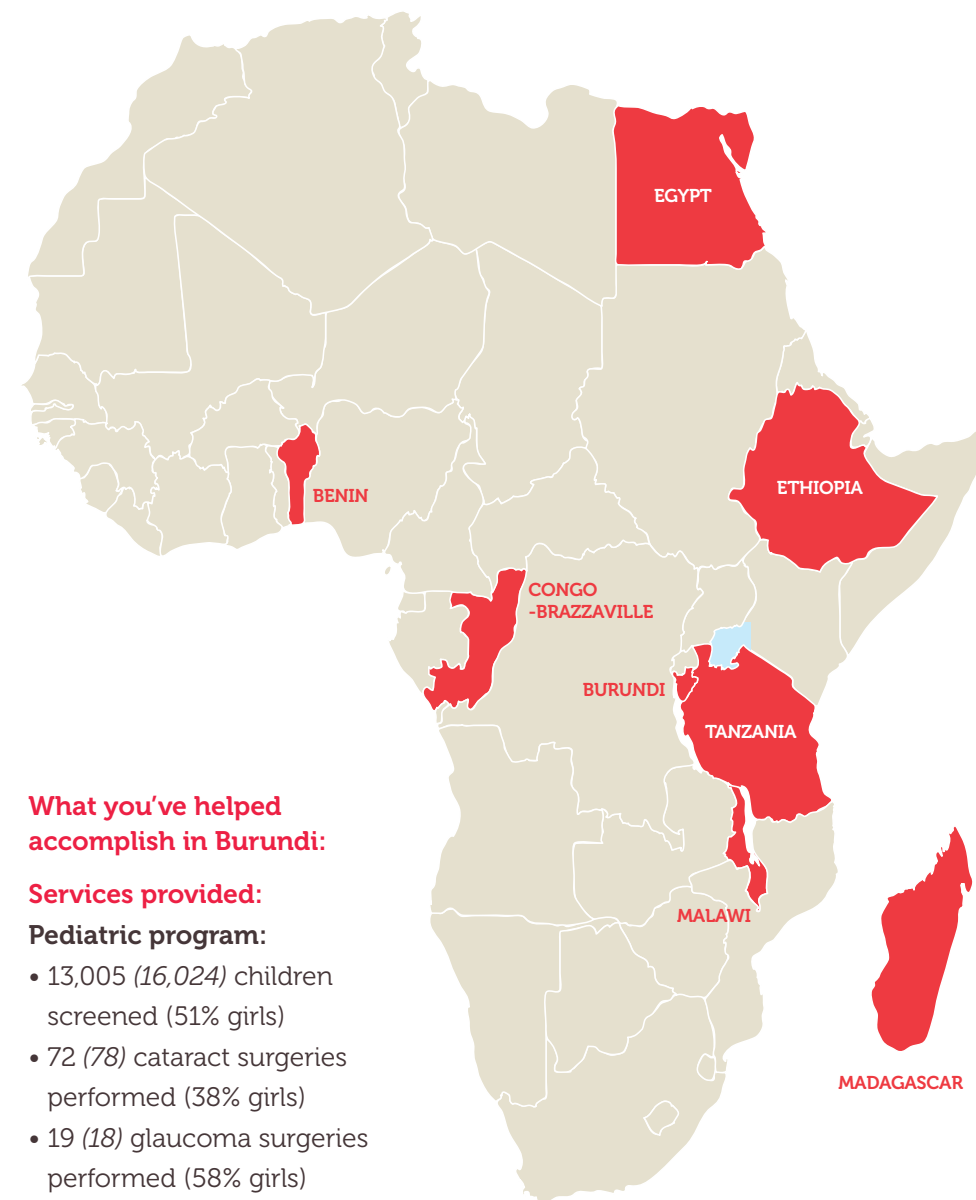
BURUNDI

The Burundi program, led by Dr. Levi Kandeke, encompasses a network of Community Eye Centres (CECs) around the country and a Child Eye Health Tertiary Facility in Bujumbura, providing accessible, high-quality eye care services to thousands of Burundians each year.

Dr. Kandeke, along with an associate ophthalmologist and nursing and administrative staff, manages a referral network for children from the CECs. They also conduct outreach activities to ensure adults and children receive the surgery and other clinical services they need, regardless of their ability to pay.

In addition to managing this program, Dr. Kandeke works with Seva Canada to help eye care institutions in other African countries improve the efficiency, effectiveness and financial sustainability of their programs.

Previous year's numbers are in italics within brackets for comparison



What you've helped accomplish in Burundi:

Services provided:

Pediatric program:

- 13,005 (16,024) children screened (51% girls)
- 72 (78) cataract surgeries performed (38% girls)
- 19 (18) glaucoma surgeries performed (58% girls)
- 147 (124) other surgeries performed (48% girls).

MADAGASCAR

Seva Canada donors support four hospitals in Madagascar: Ambohibao (near the capital city of Antananarivo), Tomatave/Toamasina (on the central east coast), Antsirabe (in the central highlands) and Sambava (in the northeast). Each site receives funding for direct eye care service delivery, training, equipment and supplies. Community outreach in these sites, supported by Seva, is essential to ensuring that the primarily rural populations have access to care.



An estimated 140,000 children in Madagascar are blind or visually impaired. Seva is the primary supporter of a comprehensive pediatric program involving all four eye care facilities. In addition to providing financial support for clinical services, supplies and transportation, Seva continues to fund the training of a network of community workers, called Key Informants (KIs), to find and refer children who need eye care. This year,

Seva worked with local staff to publish a study of the KI program. This study will help pediatric programs in low-income settings to adopt and learn from this highly effective approach which increases the number of children accessing services and benefiting from comprehensive follow-up care.

Seva also continues to support the Malagasy programs to achieve financial sustainability

by using an innovative cost-recovery model. The programs now recover 70-101% of their costs, which helps them to offer services free of charge to patients unable to afford care on their own.

What you've helped accomplish in Madagascar:

Services provided:

Pediatric program:

Reported for all 4 programs together:

- 9,358 (9,883) children screened (56% girls)
- 56 (62) cataract surgeries performed (59% girls)
- 113 (75) other surgeries performed (45% girls)

Vakinankaratra Region:

- 12,841 (11,058) people examined and treated (60% women)
- 671 (604) cataract surgeries performed (50% women)

Sava Region:

- 8,722 (8,160) people examined and treated (55% women)
- 426 (633) cataract surgeries performed (44% women)

Atsinanana Region:

- 3,064 (2,894) people examined and treated (58% women)
- 981 (1,060) cataract surgeries performed (52% women)

Facilities & programs supported:

- A national ophthalmic nurse training program that provides 2 years of sub-specialty training for 20 nurses.

MALAWI

Seva supports the pediatric program at the Queen Elizabeth Central Hospital (QECH) in the capital city, Blantyre. With 50% of the population under 16 years of age, this program addresses a substantial portion of the eye care needs in Malawi. The program trains community volunteers and health workers to identify children with visual impairment, implements radio promotion for health education, provides screening and referral services for children needing surgery, and provides refraction and low vision services.

TANZANIA

Tanzania, one of the largest countries in east Africa, has an estimated 137,000 people living with blindness from treatable conditions such as cataract and trachoma. Seva currently supports the Mara and the Ngorongoro Regions in the Northwest.

Seva support is directed towards well-established community



programs, whereby local microfinance groups assist field workers to deliver eye care messaging and ensure those with eye problems, particularly women and girls, utilize available services. This combination has proven particularly effective in increasing the proportion of women and girls receiving eye care which encouraged the program expansion into the Mwanza Region this year.

Trachoma, a disease which disproportionately affects women, is particularly

problematic in the Manyara and Ngorongoro Regions, home to the Maasai, a nomadic and traditionally insular ethnic group. Seva funds the screening and treatment of trachoma in these regions, along with cataract, and relies primarily on the training of local Maasai microfinance groups, led by women, to identify, refer and encourage people to accept corrective surgery.

Seva continues to support the eye department of the District Hospital in Mara. The eye department includes an eye surgeon on a weekly rotation from a neighboring eye unit, two ophthalmic nurses, one

optometrist and one nurse assistant. The District hospital plans to secure a permanent surgeon in the next year. As in other regions, Seva supports community outreach activities along with much needed equipment, surgical supplies and glasses.

What you've helped accomplish in Tanzania:

Services provided:

Mara Region:

- 280 people referred by microfinance members (56% women)
- 6,881 (12,004) people examined and treated (51% women)

- 182 (546) cataract surgeries performed (40% women)
- Ngorongoro District:**
- 4,403 (661) people referred by microfinance members (57% women)
 - 389 (103) cataract and trichiasis surgeries performed (73% women)

Mwanza Region:

There were no microfinance activities in this region.

Training:

The Tanzanian team currently provides training to members of 35 different microfinance groups. This year, an evaluation meeting and refresher training was provided to existing

microfinance members in Mara. In both Mara & Ngorongoro the microfinance members continue to actively refer people in need of care to upcoming outreach screening camps. This year, they referred over **4,683** patients, **57%** of whom were women and girls.

ETHIOPIA

More than 80% of Ethiopians live in rural areas without access to safe drinking water or sanitation. As the second largest country in Africa, there are approximately 858,000 people suffering from blindness and 1.9 million in need of glasses. Trachoma remains endemic in this country as a result of poor water and sanitation conditions.

In Ethiopia, Seva supports a community outreach program in Bahir Dar, in the Amhara Region. In addition to providing funds for outreach, supplies and consumables, Seva supports KCCO staff to train microfinance members to identify, promote, refer and support people, particularly women and girls,



who face barriers to accessing eye care services.

Seva Canada also supports the eye department of the government hospital in Bahir Dar, led by Dr. Hiwot Degineh and her team of health professionals, by providing funds for specialized training, surgery, glasses and medicine. This year, Dr. Hiwot completed glaucoma surgical training in Nepal. Surgical activities will increase in the coming year with Dr. Hiwot on-site year-around.

What you've helped accomplish in Ethiopia:

Services provided:

Bahir Dar:

- 21,588 (18,118) people examined (36% women)
- 441 (740) cataract surgeries performed (42% women)

Training:

Microfinance members received a refresher training course and continue to network widely to find and refer people in need of care to upcoming outreach screening camps this year.



FRANCOPHONE WEST AFRICA

Seva Canada's two partners in West Africa, Dr. Amadou Alfa Bio in Benin and Dr. Freddy Geraud Ngabou in Congo Brazzaville, continue to strengthen their outreach programs through Community Eye Centres (CECs).

CECs provide high-quality, affordable and accessible eye care services to rural populations and, using an innovative funding model, are becoming financially self-sustaining. Seva Canada continues to mentor partners

in West Africa to improve the productivity and cost-recovery of their CECs, which provide glasses, medicine and access to surgical services to thousands of patients each year.

EGYPT

Egypt possesses the technical and human resource capacity to restore the sight of its 570,000 residents who are blind, 58% of whom are women. However, due to inadequate awareness, access and acceptance, available eye care services are rarely used, even when they're free.

Through the Nourseen Foundation, an Egyptian eye care NGO dedicated to serving the country's rural poor, Seva donors support cataract services and trachoma-prevention programs in Menia Governorate, a region in Middle Egypt.

Seva donors also support the development of the Nourseen Foundation, particularly its community ophthalmology network, which uses mobile caravans to find, treat, refer and transport patients to the hospital for eye care.



Seva's partner in India, the Aravind Eye Care System, is a world leader in high-quality, high-volume, sustainable, community-oriented eye care. Its innovative financial structure allows fees from paying patients to subsidize services for poor

patients. Aravind's creative cross-funding model is now the standard in all Seva-supported programs.

Aravind acts primarily as a training and consulting resource to Seva's partners worldwide.

This training and mentoring covers the entire range of eye care from architecture and administration to all clinical services and equipment maintenance. Many of Seva's partners have themselves become training institutes based on Aravind's teachings. Seva collaborates with Aravind to conduct epidemiologic and community-based research through shared research grants.

This year, the Community Eye Centre established in Gingee, India, in collaboration with Aravind, provided eye care services to the rural population.



What you've helped accomplish in India:

Services provided:

Gingee Community Eye Centre:

- 7,973 (1,778) people examined
 - 1,152 children screened (46% girls)
 - 6,831 adults screened (50% women)

- 370 (100) cataract surgeries performed (52% women)
- 1,081 (317) patients received prescription glasses
 - 152 children received glasses (47% girls)
 - 929 adults received glasses (51% women)



An estimated 72,000 Guatemalans are blind, primarily from cataract, and another 354,000 are severely visually impaired and in need of prescription glasses. Visualiza

Eye Care System, Seva's partner in Guatemala, provides approximately 30% of the cataract surgeries in the country with only 2% of the nation's ophthalmologists. Seva supports

Visualiza's clinical services, community outreach activities, and childhood blindness programs including surgeries and school-based eye care programs that primarily provide glasses.

Previous year's numbers are in italics within brackets for comparison



CAMBODIA

Seva supports eye care programs in 5 provinces with a total population of 3.8 million people – about 1/4 of the country's population. The programs include Eye Units in provincial government hospitals and the non-governmental Angkor Hospital for Children in Siem Reap as well as community outreach programs. The clinical services focus on cataract surgery and training of local doctors, nurses, administrators and support staff. Seva Canada funds are concentrated in the Banteay Meanchey Province. Eye Unit staff include an ophthalmologist, a refractionist and 3 ophthalmic nurses. The community ophthalmology program has 2 full-time field workers who travel by motorcycle to remote areas to find and screen patients and arrange referrals for those

with eye problems to outreach screening and surgical camps or to the base hospital. Seva Canada pays for medicine, supplies and the cost of transportation for poor patients from villages throughout the province to and from the Eye Unit. Seva Cambodia, in collaboration with the Maddox Jolie-Pitt Foundation (MJP) and the Battambang Provincial Health Department, established a Community Eye Centre (CEC) in Samlot Commune within the Boeng-Run Health Centre. Seva Canada donors provided the refraction equipment for the CEC. This Community Eye Centre is Cambodia's first eye care facility providing permanent services to a rural community. It focuses on visual acuity screening, the provision of glasses, diagnosis and treatment of minor conditions

and referral of more complex cases to the Eye Unit at the Battambang Referral Hospital.

What you've helped accomplish in Cambodia:

Services provided:

Seva partner Eye Units:

- 29,429 (35,513) outpatients examined (52% women)
- 8,130 (12,074) eye surgeries performed including 3,902 (6,869) for cataract (60% women)

Seva Cambodia & Eye Unit staff:

- 33,321 (49,954) patients screened through field workers (65% women)
- 16,489 (60,152) children examined through school screenings and 170 (1,798) children received free glasses (56% girls)
- 2,248 (2,548) patients received free glasses (49% women)

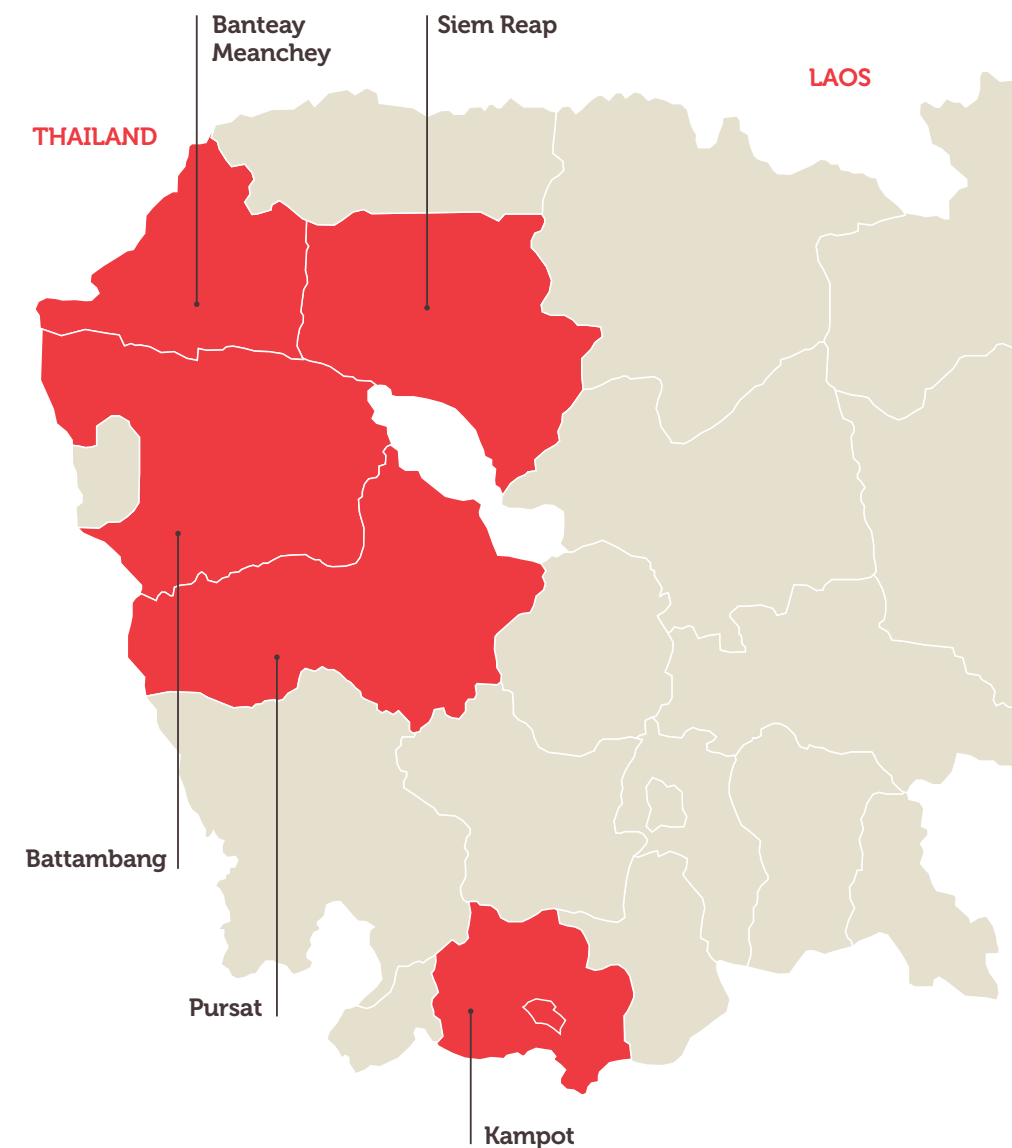
Samlot Commune:

- 230 (116) patients screened (29% women)
- 79 (88) patients received free glasses (25% women)

Training:

Professional training programs:

- 173 (19) Eye Unit/clinical staff received continuing medical education
- 13 (16) Eye Unit/clinical staff received continuing refraction education
- 1,575 (1,038) community leaders received Eye Health Awareness Training
- 2 (3) doctors received ophthalmology residency training



Previous year's numbers are in italics within brackets for comparison



NEPAL

Nepal is a small, mountainous country with a population of almost 29 million people. Despite being one of the world's least-developed nations, and struggling with almost continuous political instability, it has developed a strong national eye care program that serves Nepal and several adjacent northern Indian states.

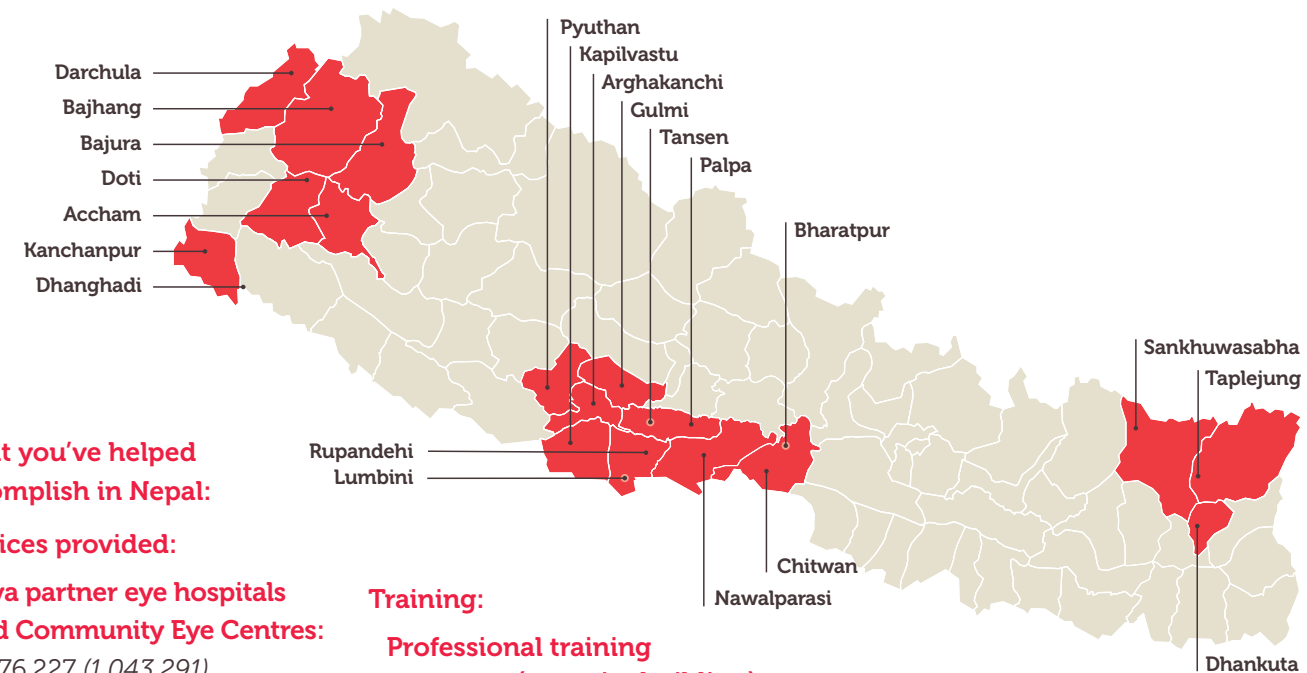
Seva works through an in-country office with staff that provide technical, program development and managerial

support to an ever-expanding network of facilities and activities that include the most remote and rural populations. The network includes 43 eye care facilities (2 tertiary hospitals, 10 secondary hospitals and 31 Community Eye Centres in 23 of Nepal's 77 Districts) stretching from far western to far eastern regions.

Program expansion emphasizes the development of local training programs for all levels of ophthalmic personnel

(ophthalmologists, specialist ophthalmologists, optometrists, orthoptists, ophthalmic assistants, and ophthalmic nurses). New initiatives are underway to provide local training programs for eye care management and community ophthalmology.

Program development increasingly includes diagnosis and treatment of chronic diseases like diabetic retinopathy and glaucoma, and establishing community-based pediatric programs, both of which are extremely challenging in a poorly functioning general health care system.



What you've helped accomplish in Nepal:

Services provided:

Seva partner eye hospitals and Community Eye Centres:

- 876,227 (1,043,291) outpatients examined (55% women)
- 67,005 (85,731) cataract surgeries performed (53% women)

Seva-supported eye camps:

- 53,942 (84,519) patients screened (54% women)
- 12,627 (13,579) cataract surgeries performed (55% women)

School screening program:

- 105,139 (284,711) children examined
- 2,827 (7,303) patients received free glasses

Training:

Professional training programs (capacity building):

- A 3-year ophthalmic assistant training program continues at Bharatpur Eye Hospital (40 students/year)

Professional training:

- 1 (1) ophthalmologist began a retina fellowship
- 1 (1) ophthalmologist began a pediatric fellowship
- 2 (0) ophthalmologists received a glaucoma fellowship
- 2 (1) ophthalmologists received a small incision cataract surgery (SICS) fellowship

- 1 (1) hospital staff received phacoemulsification operating theatre assistant training
- 1 (0) ophthalmologist received training in phacoemulsification

Community-based training:

- 533 (921) Female Community Health Volunteers received training on primary eye care
- 300 (582) school teachers received training on visual assessment and primary eye care





TIBETAN AREAS OF CHINA

The Tibetan population endures harsh weather, high altitude, strong ultraviolet rays and a sporadic food supply with very little access to health care. These conditions result in a high prevalence of eye disease and low utilization of available eye care services.

In the past year, Seva support focused on the Tibetan areas of Qinghai, Sichuan, Gansu and Yunnan provinces, working through the Kham Eye Centre in Dartsedo.

The Kham Eye Centre provides high-quality eye care and acts as a referral centre and training institute for the region. Seva supports community ophthalmology activities throughout the Ganzi Prefecture, with an approximate population of 1 million. The Kham Eye Centre works within local government hospitals and Health Bureaus to establish clinical services, train local doctors, as well as to plan, conduct and manage outreach camps in remote areas.

What you've helped accomplish in the Tibetan Areas of China:

Services provided:

- 13,452 (7,315) outpatients examined
- 2,085 (1,280) cataract surgeries performed in eye camp settings and the Kham Eye Centre (62% women)
- 2,000 (1,787) children received free glasses



Training:

- 2 ophthalmologists received 6 months of small incision cataract surgical training
- 1 doctor received 6 months of ophthalmology training

Previous year's numbers are in italics within brackets for comparison

RESTORING SIGHT AND INDEPENDENCE



For the last two years, Mahabu Mallah in Khadwabangai, Nepal, has been at home doing nothing but sitting in darkness, all because he cannot see. He used to be an active farmer, husband and father, who took pride in providing for his family. Now he relies on his wife, Draupati, and their two children to care for him and the household.

One day, an outreach team from the Butwal Lions Eye Hospital was in his village

promoting an upcoming screening camp. Upon hearing about the screening camp, Mahabu was excited, nervous and hopeful. He wanted to be able to see again so he could be independent and able to provide for his family.

At the screening camp, the hospital team discovered that Mahabu had a cataract in his left eye and recommended that he be transported to the eye hospital for surgery. Mahabu was happy to hear that his vision could be fixed but worried about the cost. He knew he couldn't afford treatment, especially since he hadn't been able to work for the last couple of years. The eye care team counselled Mahabu and explained that his surgery would be covered by Seva. Relieved, Mahabu boarded the

bus with the other patients going to the Butwal Lions Eye Hospital for sight-restoring surgery, free of charge.

The next day, when Mahabu's eye patch was removed, he was shocked. He couldn't believe that he could see everything around him. "Thank you and blessings to the hospital team and Seva for restoring my sight!" he exclaimed. "Now I can help take care of my family and do all the daily work just like before!"



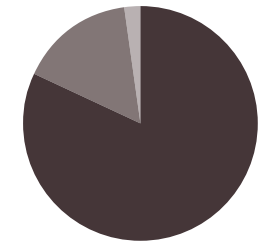
FINANCIALS

STATEMENT OF OPERATIONS AND CHANGES IN NET ASSETS FOR THE YEAR ENDED JUNE 30, 2020

	2019/2020	2018/2019
REVENUE		
Project grants, contracts & awards	200,017	313,689
Donations	1,170,540	1,644,451
Donations In-Kind	638	3,997
Special events, presentations & net merchandise sales	12,326	65,603
Interest and other income	6,664	1,329
	1,414,564	2,029,069
COST OF GOODS SOLD		
Opening inventory	7,941	8,963
Purchases	965	2,198
Closing inventory	(8,167)	(7,941)
	739	3,220
	1,413,825	2,025,849
EXPENSES		
Program payments	586,154	1,093,315
Program administration	256,586	332,560
Fundraising	230,829	264,213
General administration	150,870	181,994
	1,224,439	1,872,082
EXCESS OF REVENUE OVER EXPENDITURES	222,258	153,767
NET ASSETS, BEGINNING OF THE YEAR	304,247	150,480
NET ASSETS, END OF YEAR	526,505	304,247

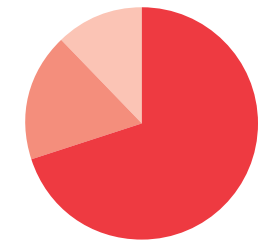
Seva's complete audited financial statements are available online at seva.ca/publications/annual-reports

SOURCES OF SUPPORT



Individual & Corporate	82%
Foundations & Grants	16%
Products & events	2%

YOUR DONATIONS AT WORK



Program	70%
Fundraising	18%
Administration	12%

LOOKING AHEAD

IT'S ALL DONE WITH PEOPLE

"It's all done with people." Seva has recognized this for over 40 years. Now it's a catchphrase of the World Health Organization (WHO).

"Integrated People-Centered Eye Care", according to the WHO, is when the people using eye services are equal partners in planning, developing and monitoring their care to ensure it meets their needs.

From its inception, Seva has involved local people who understood the needs of their community, adopted and adapted available eye care services, and ensured the entire population had access to high-quality care. Neither new drugs or technologies are going to eliminate most of preventable and treatable blindness – only people can do that.

In Africa, where there was a significant shortage of trained eye care personnel, Seva Canada funded a wide range of training programs – from engaging Maasai women as local eye care advocates to specialty training of pediatric eye surgeons.

In India and Nepal, Seva has coached a network of young, bright researchers to determine the frequency and causes of eye diseases and to evaluate the impact of their programs on those conditions.

In Uganda, Seva helped a young entrepreneur develop a plan to build Community Eye Centres in every rural district near his home town. Now he is seeking adventurous local and international investors.

COVID-19 has made Seva Canada's innovative local eye care personnel even more important. Despite the added complexity and challenges, our program partners continue to find ways to ensure people get the eye care they need, and deserve.



OUR THANKS 2019-20

On behalf of the Seva Canada Staff

Penny Lyons, Executive Director

Dr. Ken Bassett, Program Director

Deanne Berman, Marketing & Communications Director

Paul Crosby, Development Director

Heather Wong-Mitchell, Operations Manager

Foundations & Grants

A.L. GRAY Foundation

Abundance Canada

BCGEU Diane L. Wood International Solidarity and Humanity Fund

Benefaction Foundation

Canada Helps

Charitable Impact Foundation (Chimp)

Gift Funds Canada

GiftPact Foundation Inc

Gladys H. Dunn Fund

Grace Chen-En Christian Church

Grayross Foundation

Health Sciences Association of British Columbia

Heronbrook Foundation

Lewis & Ruth Sherman Charitable Foundation

Link Charity Canada Inc.

Moira and David Foundation

Nicola Wealth Gives Back

Provincial Employees Community Services Fund

Raymond James Canada Foundation

Rotary Club of Qualicum Beach Sunrise Society

Sisters of Charity Centre

Spencer Family Fund

SpencerCreo Foundation

TD Canada Trust Private Giving Foundation

The Benevity Community Impact Fund

The Buddhist Place

The Karuna Fund

The NWM Private Giving Foundation

The Parish of St Philip's, Vancouver

The Somerset Foundation

The Zacks Family Charitable Foundation

United Way East Ontario

United Way of Greater Toronto

Vancity Community Foundation

Vancouver Foundation

Vancouver Kiwanis Welfare Foundation

Corporate Supporters

Acculogic Technologies Inc.

Amevie

Angel Food Investments Ltd

AWA International Business Corp.

C. Heaney & Associates

Cidel Trust Company

Dakota Lenspro

Digital Hot Sauce

Fidelity Investments Canada ULC

filkollinz.com

Firefly Books Ltd.

Goren, Marcus, Masino & Marsh

GROWN Sustainable Wooden Eyewear

I For An Eye

Kafei Interactive Inc.

Mail-O-Matic Services Ltd

Murphy Oil Company Ltd.

Reid Hurst Nagy Inc

Sanderson + Welsh Planning Ltd.

SIPCO Innovations

Smith & Wright Opticians

The Bar Method

Thermohair Inc

Seva Canada's Board:

Chair Of The Board

Vivian Yin, M.D.

Board Members

Karen Chalmers

Paul Courtright

Charles Diamond

Sasipriya (Sashi) Karumanchi

Harish Krishnan

Glen Leader

David Roberts

Phairis Sajjan

Neil Smith

Laura Spencer

Martin Spencer, M.D.

Honourable Patrons

The Honourable Janet Austin, OBC
Lieutenant Governor of British Columbia

The Honourable Lloyd Axworthy

The Right Honourable Adrienne
Clarkson

Photo Credits

These photographers have generously donated their photographs to this annual report.

Our heartfelt thanks go to them for their contributions.

©Brian Harris

©C. Stephanie Glotman

©Darrell McKay

©Ellen Crystal Photography

©Jon Kaplan

©Rebecca Gaal

The Standards Program Trustmark is a mark of Imagine Canada used under licence by Seva Canada.



SEVA CANADA SOCIETY
100 – 2000 W. 12TH AVE,
VANCOUVER, BC, V6J 2G2

TEL: 604-713-6622
TOLL-FREE: 1-877-460-6622

ADMIN@SEVA.CA

REGISTERED CHARITY
#13072 4941 RR0001



SEVA.CA

