

---

# ANNUAL REPORT 2020-2021

---



SEVA.CA



# DEAR FRIENDS OF SEVA CANADA

Hope is born of passion but it takes stamina to maintain. Your continued passion in support of our eye care programs, amid the pandemic uncertainty, gives hope to us and our partners, around the world. Together we will work to help to rid the world of treatable blindness – because we know how much it matters, and that it can be done.

Our focus for 2021/2022 is 'development with dignity'. *"Dignity is perhaps the one thing that human beings across the globe, in myriad different contexts, most instinctively recognize and long for."* (Jonathan Glennie, Open Democracy).

Seva Canada recognizes that fostering our partner's dignity – giving leadership roles, providing autonomy in decision making and equity in achievement of development – lies at the heart of all our international programs.

Thank you for your trust in and commitment to our work.



**Vivian Yin,**  
Board Chair



**Penny Lyons,**  
Executive Director

## In 2020-21, Seva donors helped:

**788,122** people benefit from accessible eye care services.



**54,902** people (29,574 women and 25,328 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 low- and middle-income countries.

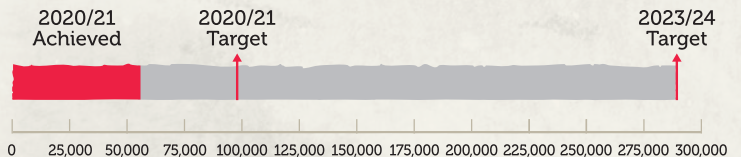
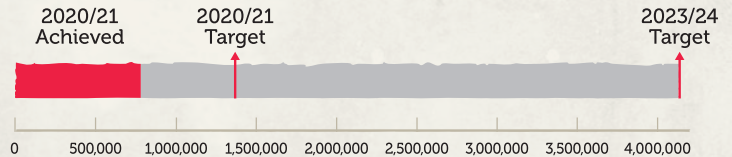
## Vision

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



3,240

people received other types of surgeries eg. glaucoma



3,062

people received prescription glasses



## TRAINING

3 Ophthalmologists underwent specialty training (retina and glaucoma)

1 Ophthalmologist received cataract surgical training

1 Doctor underwent ophthalmology training

20 Ophthalmic Nurses trained

40 Ophthalmic Assistants trained

15 Clinical staff received COVID-19 Preparedness/Safety Training

53 Clinical staff received Virtual Quality Improvement in eye care training

2 Clinical staff received continuing refraction education

609 Female Community Health Volunteers trained

231 School teachers trained on visual assessment and primary eye care

2,632 people received Eye Health Awareness training on primary eye care

---

# COUNTRY REPORTS

---

Over the past year, Seva-supported country programs adapted to the COVID-19 pandemic both to safely provide as much eye care as possible and to maintain their eye care staff despite decreased demand. Almost all programs suspended outreach activities including screening – diagnostic camps and school-based visual acuity testing. Program partners continued to gather data, disaggregated by age, sex, economic level and location, and used it to overcome barriers to service utilization throughout their region. Several partners took advantage of the COVID restrictions to increase their use of online virtual consultations and sharing diagnostic images. These innovations could lead to long-term strategies to serve populations in rural and remote settings. Seva partners will share these innovations with other

local international eye care providers in a continuing effort to meet the global demand for eye care.

Program data from the past year are shown in the individual country reports. Most funding was maintained, despite decreases in service utilization, to maintain staff, purchase needed equipment and to develop innovative tele-ophthalmology programs.





### 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 semi-urban or rural population, and are self-financed through minimal service fees, paid by those who can afford to pay and the sale of eye glasses. By dramatically increasing the use of eye care services, CECs show the greatest promise for meeting the growing demand for eye care services. Several CECs had been planned for opening during the past year, however their development has been delayed to next year due to the pandemic.

### GENDER EQUITY

Seva Canada continues to take a leadership role in the gender and blindness global initiative. All Seva-supported programs work towards achieving gender equity by focusing on overcoming cultural and economic barriers that limit access to eye care services. Awareness of the problem has not been enough to achieve equity. Organizations need 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, Tanzania, and Ethiopia, and to develop and implement population-based eye care services.

With KCCO's mentorship, 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 surgeries. In addition, they support programs to identify and treat chronic eye conditions such as glaucoma and complications from diabetes.

KCCO staff, supported by Seva Canada, conduct operational research to generate evidence for policies, programs and practices, particularly those that reduce

barriers to care for women and girls. *"The partnership with Seva Canada allows KCCO to be on the leading edge of innovation for improving eye care in Africa."* – Dr. Paul Courtright, Kilimanjaro Centre for Community Ophthalmology founder and Director.

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 last year.



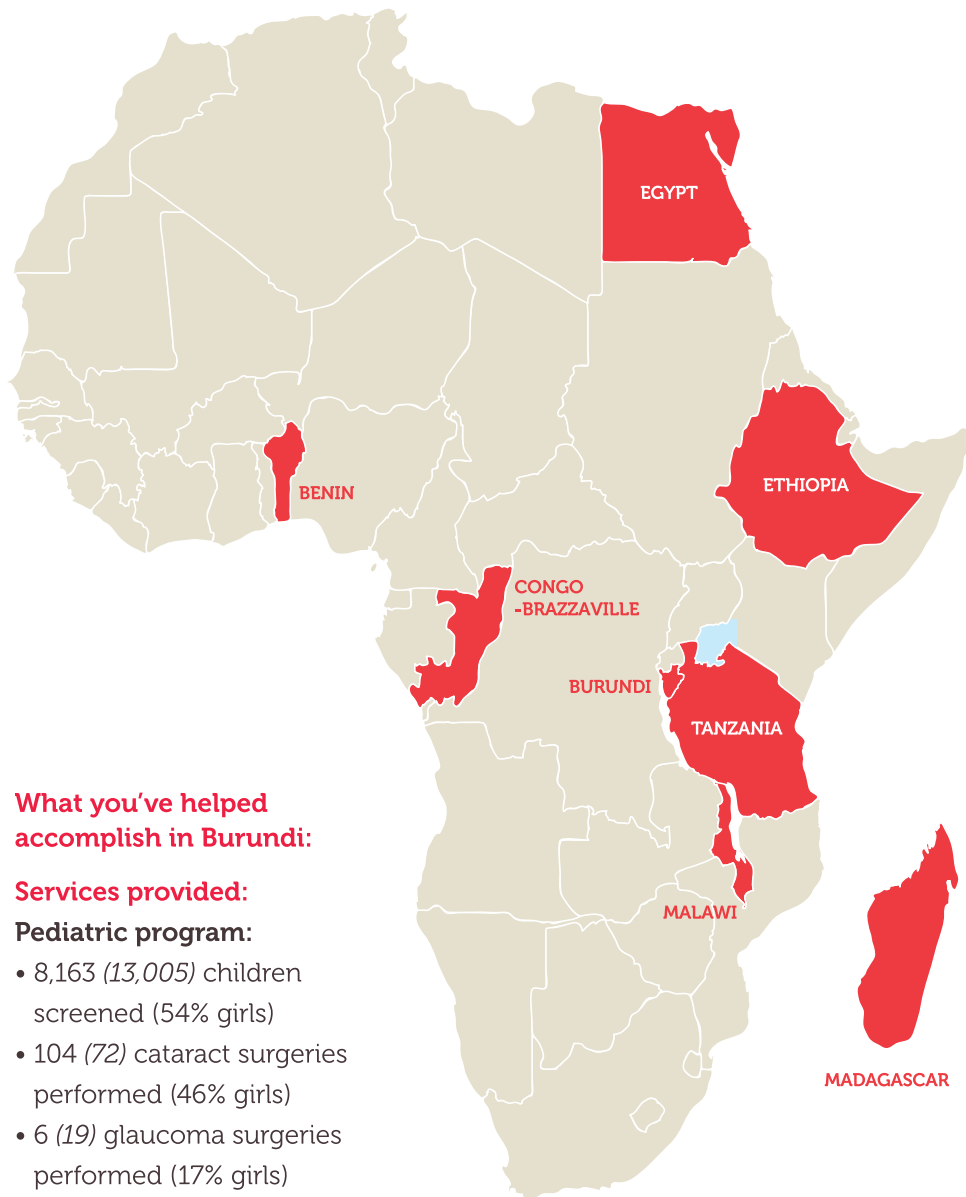


## BURUNDI

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.



### What you've helped accomplish in Burundi:

#### Services provided:

##### Pediatric program:

- 8,163 (13,005) children screened (54% girls)
- 104 (72) cataract surgeries performed (46% girls)
- 6 (19) glaucoma surgeries performed (17% girls)
- 221 (147) other surgeries performed (43% girls).

## MADAGASCAR

Seva Canada donors support four hospitals in Madagascar: Ambohibao (near the capital city of Antananarivo), Atsinanana (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 70-80% 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:**

**Pediatric program:**

Reported for all 4 programs together:

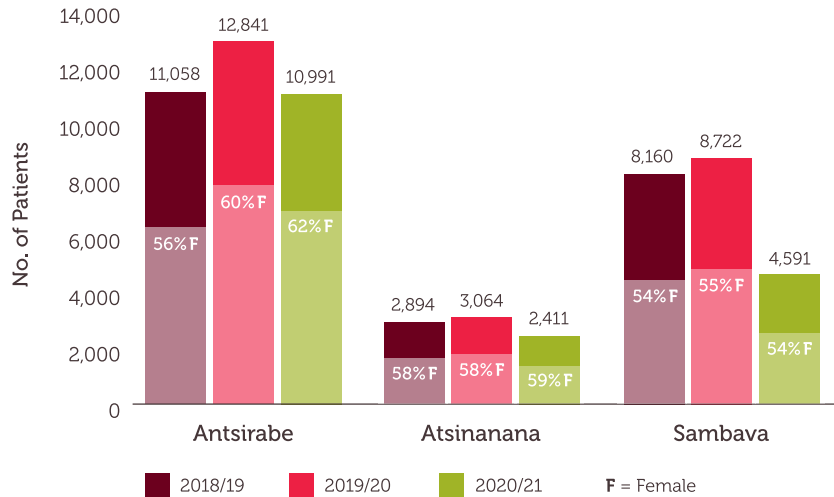
- 8,430 (9,358) children screened (53% girls)
- 58 (56) cataract surgeries performed (45% girls)
- 55 (113) other surgeries performed (45% girls)

**Facilities & programs supported:**

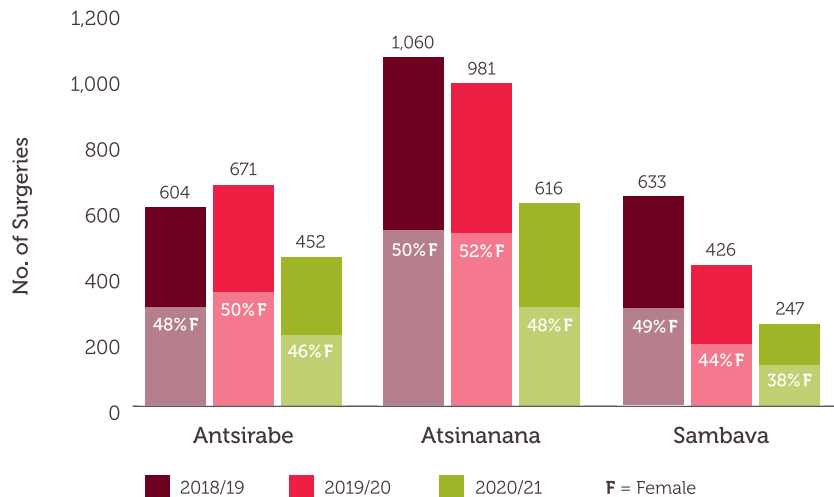
A national ophthalmic nurse training program that provides 2 years of sub-specialty training for 20 nurses.

**SERVICES PROVIDED:**

**Screening for Eye Disease**



**Cataract Surgeries**



## UGANDA

Dr. Simon Arunga has created two Community Eye Centres (CECs) in Southwestern Uganda; the first in Mbarara in 2018 and the second in Rukungiri in 2021 – both with support from Seva Canada. The CECs provide quick and easy access to quality eye screening and examination, encourage the local population to uptake eye care services and provide eye health education. Creating permanent eye care facilities in hard to reach areas is cheaper, provides better access to care and is more sustainable than traditional outreach methods. Additional CECs are planned in Fort Portal, the capital of the Rwenzori area that serves a population of approximately 5 million people from 6 districts in western Uganda and also borders with underserved areas of the Democratic Republic of Congo.



## 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 neighbouring 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.

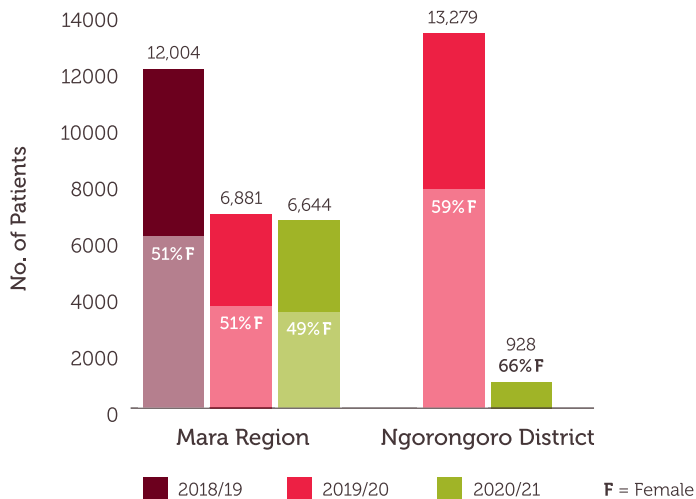
**What you've helped accomplish in Tanzania:**

**Training:**

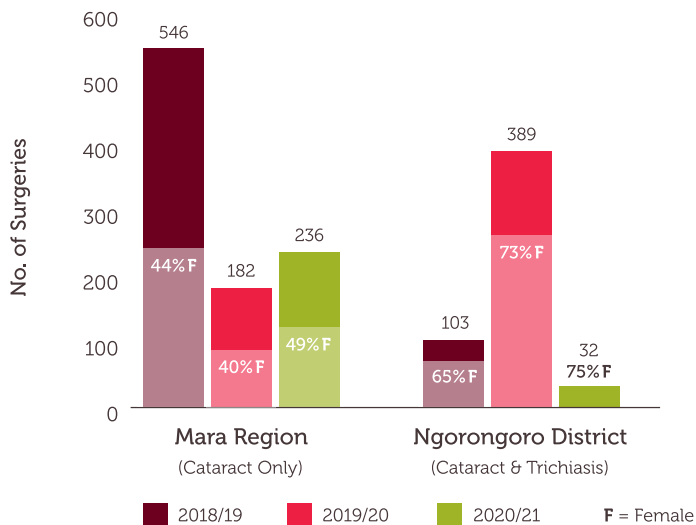
The Tanzanian team currently provides training to members of 35 different microfinance groups. This year, an evaluation meeting and refresher training was provided to 30 existing microfinance members. In both Mara & Ngorongoro the microfinance members continue to actively refer people in need of care to upcoming outreach screening camps. This year, they referred **189** patients, **74%** of whom were women and girls.

**SERVICES PROVIDED:**

**Screening for Eye Disease**



**Eye Surgeries**



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



## 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.

### What you've helped accomplish in Ethiopia:

#### Services provided:

##### Bahir Dar:

- 14,277 (21,588) people examined (41% women)
- 617 (441) cataract surgeries performed (45% 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.

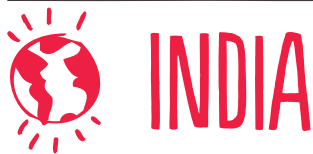
## EGYPT

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:**

- 7,576 (7,973) people examined
- 334 (370) cataract surgeries performed
- 632 (1,081) patients received prescription glasses



# 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 programs provide comprehensive medical and surgical eye care services including glasses and trains 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:**

**Training:**

**Professional training:**

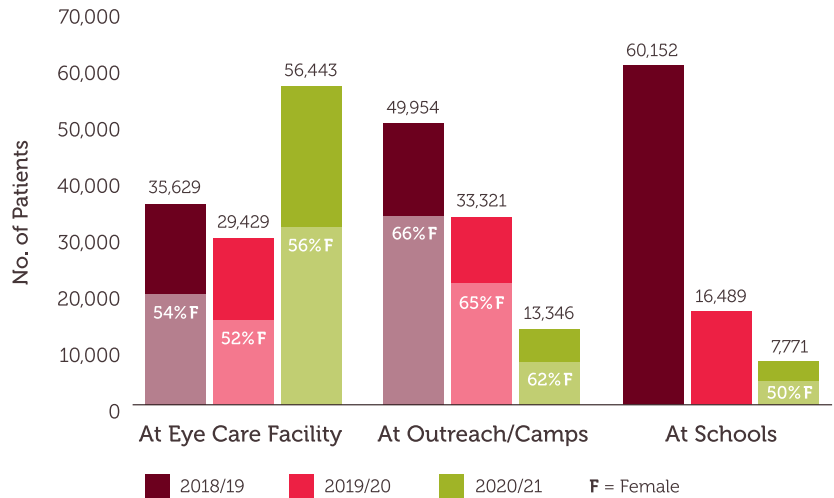
- 1 (2) doctors received ophthalmology residency training
- 2 (13) Eye Unit/clinical staff received continuing refraction education
- 15 Eye Unit/clinical staff received COVID-19 Preparedness/Safety Training
- 53 Eye Unit/clinical staff received Virtual Quality Improvement in eye care training

**Community-based training:**

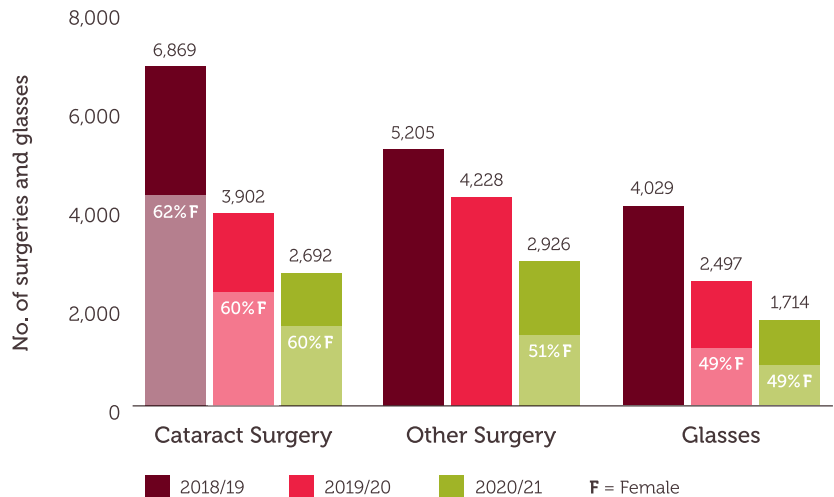
- 2,602 (1,575) people received Eye Health Awareness Training on primary eye care
- 128 school teachers received training on visual assessment and primary eye care

**SERVICES PROVIDED:**

**Screening for Eye Disease**



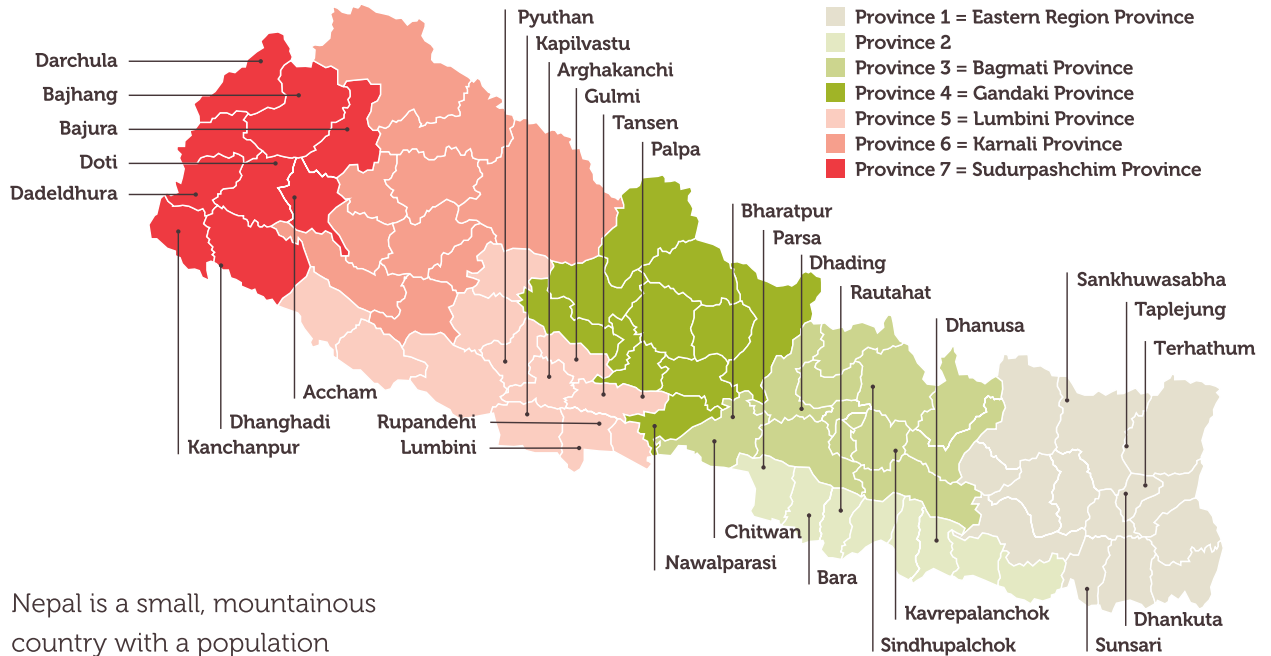
**Treatment of Eye Disease**



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 poorest 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:**

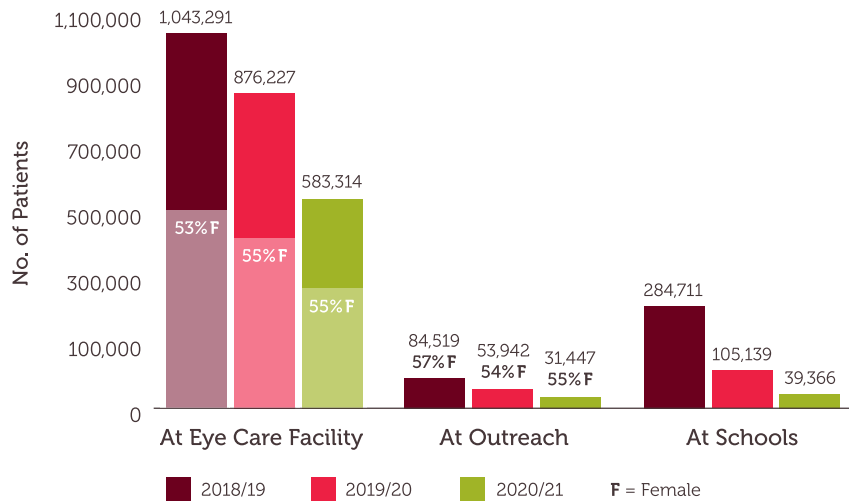
**Training:**

**Professional training programs (capacity building):**

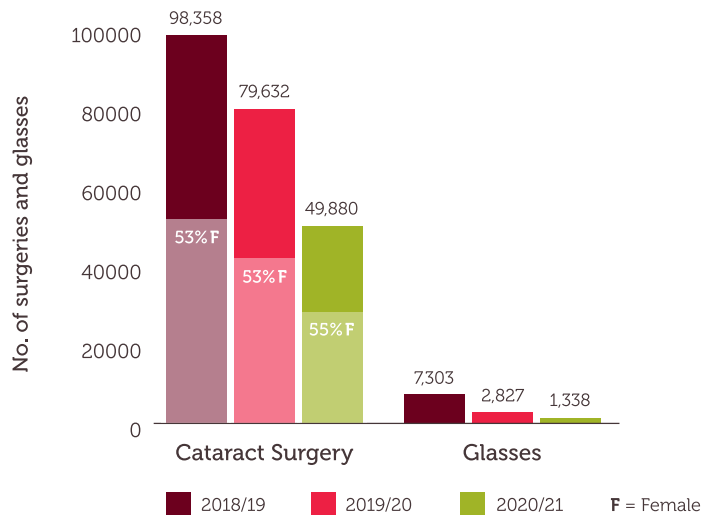
- A 3-year ophthalmic assistant training program continues at Bharatpur Eye Hospital (40 students/year)

**SERVICES PROVIDED:**

**Screening for Eye Disease**



**Treatment of Eye Disease**





**Professional training:**

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

**Community-based training:**

- 609 (533) Female Community Health Volunteers received training on primary eye care

- 103 (300) 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.



TIBET  
AUTONOMOUS  
REGION

NEPAL

Lhasa

BHUTAN

BURMA

AMDO

KHAM

Dartsedo

# A, B, SEE



6-year-old Kaushila from Nepal lives alone with her mother while her father searches for work to support their family. Over the last 3 years, Kaushila's vision has gotten progressively worse making it difficult for her to succeed in school and help her mother care for the household and livestock.

When Kaushila's mother was a child she wasn't given the chance to go to school and

learn to read. She dreams of a better future for her daughter and worries constantly about her daughter's happiness and potential employment opportunities if she can't see clearly in class and get a good education.

Knowing that Kaushila and her mother can't travel easily on their own, or leave their animals, her uncle decided to take her to the Butwal Lions Eye Hospital for an eye exam. There, Kaushila was diagnosed with farsightedness and prescribed prescription glasses free of charge.

When Kaushila put on the glasses she was so happy and surprised to see everything clearly! She smiled sweetly and thanked the hospital team and Seva for restoring her sight and for the gift of her glasses. She couldn't wait to catch up on

all her schoolwork now that she would be able to read her textbooks.

Her uncle was grateful to the eye care team and hoped *"my niece will be able to secure a top position in her class now that she can see!"*



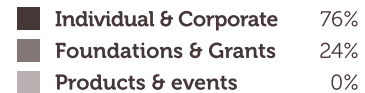
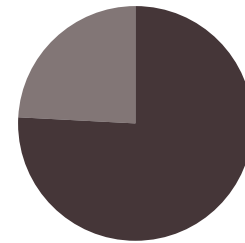
# FINANCIALS

## STATEMENT OF OPERATIONS AND CHANGES IN NET ASSETS FOR THE YEAR ENDED JUNE 30, 2021

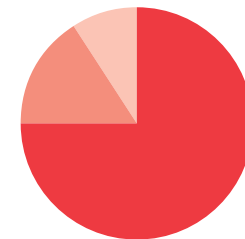
REVENUE	2020/2021	2019/2020
Project grants and contracts	520,818	200,017
Donations and awards	1,634,304	1,170,540
Donations In-Kind	-	638
Special events, presentations & net merchandise sales	4,446	12,326
Interest and other income	8,240	6,664
	<b>2,112,841</b>	<b>1,414,564</b>
<b>COST OF GOODS SOLD</b>		
Opening inventory	8,167	7,941
Purchases	946	965
Closing inventory	(7,941)	(8,167)
	<b>1,172</b>	<b>739</b>
	<b>2,111,669</b>	<b>1,413,825</b>
<b>EXPENSES</b>		
Program payments	962,759	586,154
Program administration	265,833	256,586
Fundraising	257,730	230,829
General administration	149,419	150,870
	<b>1,635,741</b>	<b>1,224,439</b>
<b>EXCESS OF REVENUE OVER EXPENDITURES</b>	<b>475,928</b>	<b>222,258</b>
<b>NET ASSETS, BEGINNING OF THE YEAR</b>	<b>526,505</b>	<b>304,247</b>
<b>NET ASSETS, END OF YEAR</b>	<b>1,002,433</b>	<b>526,505</b>

Seva's complete audited financial statements are available online at [seva.ca/publications/annual-reports](http://seva.ca/publications/annual-reports)

### SOURCES OF SUPPORT



### YOUR DONATIONS AT WORK



---

# LOOKING AHEAD: DIGNIFIED DEVELOPMENT

---

Seva Canada changed its mission statement from:

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

to:

'Seva Canada's mission is to restore sight and prevent blindness in **low- and middle-income countries.**'

The change recognizes that words like 'developed' and 'developing' are no longer appropriate or applicable adjectives for the people or places we serve. Instead, the new mission statement simply describes where we work. Development is what we do.

To Seva Canada, development is not simply measured by program growth and the number of patients successfully served. More importantly, development must advance human dignity both for local eye care professionals and the very poor people they often serve.

Can we measure dignity? No, but we can all recognize it when it is afforded to us. It involves agency, equality, individuality and respect. It betters all of our lives and leads to a level of mutual gratitude, trust, and loyalty, that sustains so many of us working with Seva Canada for so many years and for those who will continue the work.





# OUR THANKS

## **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

BMO Trust Company

Canada Helps

Canadian Association of Gift  
Professionals - Vancouver Island

Charitable Impact Foundation (Chimp)

Cidel Trust Company

Crossroads United Church

Ewald Family Foundation

Funke-Furber Fund through the  
Victoria Foundation

G10 Foundation

Gift Funds Canada

GiftPact Foundation

Gordon Dunn & Colleen Miller Dunn  
Fund, held at Vancouver Foundation

Heronbrook Foundation

Karuna Fund, held at Nicola Wealth  
Private Giving Foundation

Lewis & Ruth Sherman Charitable  
Foundation

Link Charity Canada Inc

Moira and David Foundation

Ottawa Community Foundation

Pratt-Johnson Family Fund, held at  
Nicola Wealth Private Giving Foundation

Provincial Employees Community  
Services Fund

Raymond James Canada Foundation

Sisters of Charity Centre

SpencerCreo Foundation

Strategic Charitable Giving Foundation

TD Canada Trust Private Giving  
Foundation

The Amir Malekyazdi Foundation

The Benevity Community Impact Fund

The Bob and Judy Hager Family Fund,  
held at Vancouver Foundation

The Grayross Foundation, held at  
Vancouver Foundation

The NWM Private Giving Foundation

The Zacks Family Charitable Foundation

United Way of Calgary

United Way of Greater Toronto

United Way Winnipeg

Vancity Community Foundation

## **Corporate Supporters**

Acculogic Technologies Inc.

Amevie

Atlas Pots Ltd

AWA International Business Corp

Clearly

Colpitts Ranches Proprietorship

Dandy Contacts

Digital Hot Sauce

Dr. Amin Sajjan Inc

Essex Insurance Agency Inc

GROWN Sustainable Wooden Eyewear

I For An Eye

In Sight Optical (Burnaby) Inc

Kafei Interactive Inc

Lepik Construction Ltd

Mail-O-Matic Services Ltd

Miraflex Glasses

Parananda Traders

R. Dale Nicoll Inc

Reid Hurst Nagy Inc

SAS Construction

SCWH Holdings Ltd

See & Be Seen Eyecare

SIPCO Innovations

Thermohair Inc

Trans Canada Insurance Marketing Inc  
(TCIM)

### **Seva Canada's Board:**

#### **Chair Of The Board**

Vivian Yin, M.D.

#### **Board Members**

Kanya Adam

Paul Courtright

David Fine, M.D.

Jill Guthrie

Katie Judson

Sasipriya (Sashi) Karumanchi

Harish Krishnan

Glen Leader

David Roberts

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.

©Deanne Berman

©Ellen Crystal Photography

©Jon Kaplan

©Julie Nestingen

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



---

SEVA CANADA SOCIETY  
100 – 2000 W. 12<sup>TH</sup> 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

