2016 KEY NUMBERS

6 800 000 people have directly benefited from OPC's actions and those of its partners

72 335 ophthalmic consultations inGuinea, Mali and Niger where comprehensive eye care program are ongoing

9 000 cataract surgeries performed with an averaged post-surgical visual acuity greater than 3/10 of 91%

8 national programs for ocular health have implemented activities conceived with and supported by the OPC

new eye care unitshave been upgraded and equipped

68 is the total number of eye care units throughout Frenchspeaking Africa, which have benefitted from the OPC

12,5 Is the average number of people employed in 2016: 3 in Paris, 5 in Bamako in Mali and 4.5 in N'Diamena in Chad.



eHealth for post-surgery quality control - Chad - OPC 2017

OPC's FINANCING

Various sources of funding

L'association s'appuie sur deux sources de financement : la générosité du public – faite de dons et legs -, et les subventions provenant d'organismes publics (DfID, agence gouvernementale britannique de développement international) ou privés (fondations). Ainsi, les comptes de l'OPC peuvent sembler différents de ceux d'autres ONG françaises de même envergure.

Financial transparency is OPC's fundamental management objective, so as to respond, at any time, to query or audits of the organizations from which it receives grants. OPC's accounts are open to audits ordered from international donors up to six years after the end of a given contract. As per French law, OPC's accounts are certified by an independent auditor, published in the French Official Journal and on OPC's

Public generosity

Public generosity is essential to OPC not only to channel funding to its programmes but also to reassure the international donors which support the programmes developed by OPC. These donors verify that OPC is able to implement some aspects of a given program before participating. Without the public's generosity, OPC would lose its attractiveness.

The search for international donors

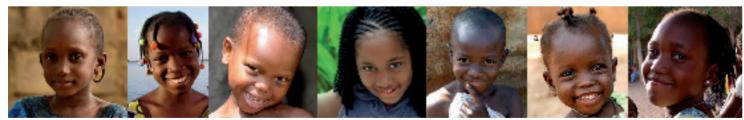
The complexity, cost, scope and impact of OPC's programmes is such that it requires the use of substantial funding. OPC is part of several international alliances to advocate for the most neglected people and countries and to remain visible to international donors and agencies for either funding or potential synergies.

The reserve policy

Thinking about sustaining OPC's activities, on December 2015 the Board of Directors adopted the principle of a reserve policy, which aims to ensure continuity of activities of the Paris headquarters and the regional offices, in the absence of funding for a period of one year. The result for the year 2015 helped to provide this reserve with an amount equivalent to 50% of the surplus. It wasn't the case in 2016 as no surplus was available.

The accounting for the annual use of the collected resources

The annual use of collected resources (CER, in French) is an integral part of the financial statements certified by the auditor, and that of OPC is established in accordance with these rules



MEMBERS OF THE BOARD OF DIRECTORS

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Joint commission n°: ISSN 2108-8608



Pr Gilles Renard

IDEAS LABEL

Caring about the transparency of its accounts and activities, OPC has decided to undertake the IDEAS certification, obtained in December 2015, which attests

to the implementation of good practices in governance, financial management and programme efficiency.





Organisation for the Prevention of Blindness

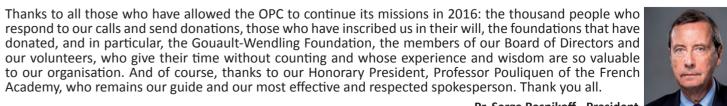


Evolution and partnerships

Although not a "quiet river", 2016 was another good vintage, both in terms of results and the strengthening of our organisation. Despite the difficulties, we have continued to progress in terms of people who benefit from our actions and those of our partners in the field. I would like to highlight some of the successes and the recent work in progress :

- > The fight against trachoma continues to be a major factor in our fight against blindness. In Chad, nearly two and a half million people have been treated with antibiotics and nearly 9,000 people have been operated in the 11 health districts in which we operate. These results suggest that we can eliminate trachoma in Chad before 2020. In CAR, the OPC is still struggling to continue supporting the national program. And yet, despite a particularly difficult situation, the 2016 campaign has treated 790,000 people in the 4 targeted regions and the training of trichiasis operators is expected to begin during the second semester of 2017.
- > At the internal level, the OPC has completed the procedures to ensure that it operates in compliance with current standards, whether in the voluntary sector or that of its international partners. And for greater efficiency, the OPC has improved its organizational chart and its operating mode.
- > The strengthening of our partnerships is obviously a central aspect. In this regard, the Lions Clubs International Foundation has continued to trust us by supporting our work in Chad, Mali and Cameroon. The British government, through DfID - its international development agency - supports us in Chad in an increasing number of districts. In a recent evaluation, the agency noted that the OPC was particularly effective and had the best results in all the countries where DfID supports the fight against trachoma, a source of legitimate pride for our teams. But the expansion of our circle of partners is a priority. Thus, «The END Fund» supports us in an increasing number of countries in the fight against neglected tropical diseases. Our partnerships are also strengthened with Brien Holden Vision Institute in the field of visual impairment and school health, and with the Théa Foundation, which has agreed to support us in CAR and probably elsewhere. We must deserve their trust.

Academy, who remains our guide and our most effective and respected spokesperson. Thank you all.



2016 ACTIVITIES

Eve health

In Mali, the implementation of the comprehensive eye care program, developed with the technical assistance of the OPC in the region of Ségou, saw the number of patients treated increase from 14,872 in 2015 before OPC's intervention to 24,421 in 2016. More than 1,440 people have recovered their sight after a cataract surgery, for which in 93% of cases, postoperative visual acuity was greater than 3/10.

In Guinea, the comprehensive eye care program implemented in three eastern regions of the country (Kankan, N'Zérékoré and Faranah) resulted in 26,524 patients treated with 5,518 of them operated on with cataract and 84 with glaucoma. Post-operative visual acuity was above 3/10 in 91% of the cases.

In Niger, the comprehensive eye care program implemented in two regions - Tahoua and Tillabéry - resulted in the rehabilitation of 8 eye care centers (2 regional hospitals and 6 health centers), allowing for 23,251 patients to be treated, of which 1,200 recovered their sight after a cataract surgery. In 88% of the cases, post-operative visual acuity was greater than 3/10.

In Cameroon, two national workshops were organized: the first for the restitution of the WHO survey on the management of diabetic retinopathy and diabetic patients and the second for the definition of a national cost recovery mechanism for cataract surgery. These two events led to recommendations for the development of national public health policies supported by the civil society.

Trachoma

In Chad, the program set to eliminate blinding trachoma is implemented in four regions: Guéra, Salamat, Sila et Ouaddaï. Nearly 14,100 eyelids were operated by 45 surgeons trained by the OPC and two and a half million people received antibiotic treatment.

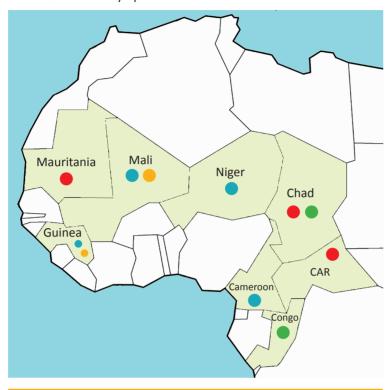
In the Central African Republic, despite the currently difficult conditions, 790,000 people from M'Bomou, Basse-Kotto, Sangha-Mbaéré and Lobaye regions have received antibiotic treatment.

In Mauritania, an epidemiological surveillance survey showed that none of the targeted areas had a prevalence of trachoma that would require any further preventive action.

Onchocerciasis and lymphatic filariasis

In Congo, 421,700 et 125,270 people have received treatments against onchocerciasis and lymphatic filariasis respectively.

In Chad, 2,9 million people have received treatments against onchocerciasis and lymphatic filariasis.



Training

Au Mali, four six-month long internships were awarded to students in the final semester of the Certificate of Specialized Studies in Ophthalmology at the African Tropical Ophthalmology Institute in Bamako. Under supervision, students have operated a total of 700 cataracts with post-visual acuity above 89%.

In Guinea, 3 six-month long internships have been awarded to students at the end of their training in the DESSO (postdoctoral research in ophthalmology program) at the University of Conakry.

Field activities, planned and supported by OPC, including training, are validated and implemented by the Ministries of Health of the partner countries.

NEGLECTED PEOPLE NEED YOU!

Going where the needs are the greatest

Founded in 1978, OPC is a French NGO that is currently active in Francophone Africa to preserve the sight of the most vulnerable populations. The choice of Francophone Africa is dictated by the fact that this region receives ten times less development assistance for health than Anglophone Africa. OPC is currently present in seven countries of Central and West Africa.

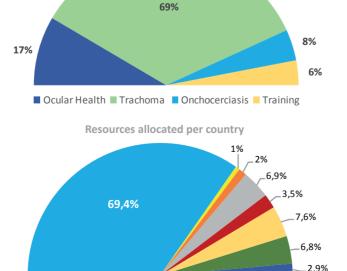
Preserving the sight of the poorest

Working alongside its partners - ministries of health and civil society - OPC's mission is to transfer knowledge in public health ophthalmology, fight against eye diseases and sustain national eye care programs for the benefit of the poorest.

OPC is:

- Recognised as a public service interest organisation by the French government
- In an official working relation with the World Health Organisation (WHO)
- A member of Coordination Sud (France)
- Member of many international organisations such as :
 - International Agency for Blindness Prevention (IAPB)
 - WHO Alliance for the Global Elimination of blinding trachoma (GET)
 - International Coalition for Trachoma Control (ICTC)

Resources allocated per programme



■ Chad ■ Benin ■ Cameroon ■ Mali ■ CAR ■ Congo ■ Guinea ■ Niger

Accounting for the use of resources (as of 12.31.2016 in euros)

The year 2016 ends with a slight deficit of €17K.

There are several reasons for this:we have not benefited from exceptional legacies (€638K in 2015), therapeutic prevention activities in Chad returned to normal with a distribution of drugs rather than two in 2015, resulting in a reduction of the management fees perceived; And finally, we saw a slight increase in expenditure, again in Chad, because of an underestimation of the cost of trichiasis surgery, not financed by our financial partner, LCIF. The cause is exogenous: it is due to the explosion of consumables' costs on the local market, with the increase of the taxes on imported goods

Donations by mailing remain identical to 2015:

- Mailing costs represent 46 % of the donations, whereas they were 47 % in 2015. They are therefore stable but the collection rate decreases from 10.5 % to 8.58 %. This is because OPC's donors' target is faithful, sensitive to health problems in Africa and generous since the average donation remains at €57 (versus €56 in 2015).
- ➤ To recruit new donors in France, OPC invested in a prospecting mailing, for a cost of €26.5K, which covered more than 53K potential donors and generated €7.7K of revenue. There is a slight decrease in the number of donations through direct bank withdrawals, but the average donation went up (€12.36 vs. €11.97 in 2015).

The resources distribution coming from our different donors has changed since this year the UK-Department for International Development (DFID) accounted for 79 %, the «Lions Club International Foundation» (LCIF) 20% when they were at a strict parity in 2015. The new US partner, «The END Fund», which was approached at the end of 2015, now accounts for 1% of resources from international donors.

ORIGIN OF FINANCIAL RESOURCES		
Public generosity - Donations & Legacies	220 213	9%
Private funds	1 691 482	65%
Miscellaneous revenue	29 725	1%
Reversal of provisions	33	0%
Forward dedicated fund	631 554	24%
Budgetary overruns	17 540	1%
TOTAL (€)	2 590 547	100%

ALLOCATION OF THE RESOURCES COLLECTED IN 2016			
Programmes	2 260 999	87%	
Programmes to be realised	127 618	5%	
Fundraising costs	144 259	6%	
Running costs	57 671	2%	
TOTAL (€)	2 590 547	100%	

ALLOCATION OF RESOURCES COLLECTED AMONG THE PUBLIC IN 2016			
Programmes	182 450	60%	
Fundraising costs	94 077	31%	
Running costs	27 946	9%	
TOTAL (€)	304 473	100%	

EVALUATION OF VOLUNTARY & INKIND CONTRIBUTIONS			
Inkind contributions	None		
Inkind donations	None		
TOTAL (€)	None		

For the second year in a row, the clear majority of our resources are devoted to programmes activities (92 %), while fundraising and operating costs remain well under control (6 and 2 % respectively) at the same level as in 2015. The strategic plan 2016-2020, adopted in 2014, scrupulously implemented, is therefore bearing fruit.

Considering the unit costs of intervention on the ground by our international donors, already sensitized, will allow us to achieve a balanced account without the contribution of any legacy. More so as new mechanisms for resources mobilisation are currently being studied.

M. Gérard Bédos - Trésorier

FINANCIAL TRANSPARENCY

ACCOUNTING FOR THE ANNUAL USE OF COLLECTED RESSOURCES

- Resources coming from public generosity: resources resulting from mailings, direct donations, pre-authorised banking debits, and legacies.
- Private funds: these come from three partners essentially (DfID 79%, LCIF 20% et The END Fund 1% of collected private funds).
- Reversal of funds: funds collected from the public, unused in 2015, but used for programme activities in 2016.
- Programmes : expenses directly attributable to programmes and share of in-house costs inherent to programmes implementation.
- Running costs: they include expenses incurred by the general services.
- Fundraising costs: they include expenses for mailing, research and/or renewal of partnerships, communication, as well as costs set for general public communication and sensitization such as the internet website.

Statement of accounts (as of 12.31.2016 in euros)

ASSET	2016	2015
Capital assets	7 353	13 694
Other receivables	359 180	381 933
Cashflow	1 481 868	2 008 484
Prepaid expenses	11 596	64 839
Inventory	55 301	129 200
Total (€)	1 915 298	2 598 150

EQUITY	2016	2015
Accumulated surplus	989 030	1 006 569
Dedicated funds	783 718	1 287 654
Other debts	95 538	246 982
Deferred income	50 000	56 943
Total (€)	1 915 298	2 598 150

- Capital assets: office equipment, desktops, laptops and office furniture.
- Nontrade receivables: amounts expected in 2017 in relation with the 2016 campaign.
- Cash-flow: down €526,616
- Term deposit: €1.000K
- Deferred assets: 2016 expenses linked to the following year
- Accumulated surplus: restricted resources from identified contributors; cumulative assets definitively acquired; down€17,540
- Earmarked funding: down€503,936It represents resources allocated by donors to projects, which could still be used in accordance with the commitment made to them.
- Other debts: amounts due to service providers and national social entities
- Deferred revenues: resources acquired in 2016 for programme activities to be delivered the following year