



Annual Report
2010

Sudan

Gaza

India

Sri Lanka



COVER RATIONALE

As MERCY Malaysia continues its strong commitment to humanitarian aid, the organisation has touched the lives of many around the world. The hand touching the rippling water represents our strength and dedication, creating waves of change throughout the region and reaching those in need as illustrated in the three pictures beneath, which represent medical relief, sustainable health-related development and risk reduction activities for vulnerable communities, in both crisis and non-crisis situation.

CONTENT

MESSAGES 4-7

Message from the Patron

Message from the Chairman of Board of Trustees

Message from the President

INTRODUCTION 8-11

Vision & Mission Statement

Activities in 2010

ABOUT US 12-28

MERCY Malaysia's Strategic Commitments

Humanitarian Accountability

Our Approach: Total Disaster Risk Management (TDRM)

Affiliations

MERCY Malaysia Board of Trustees

MERCY Malaysia Executive Council

Treasurer's Report

Financial Review

OUR WORK 29-84

Malaysia

International

Events, Networking and Trainings

ACKNOWLEDGEMENT 85-91

Secretariat

Field Office Staff and State Chapters

Collaborations

Society Members

Volunteers

FINANCIAL STATEMENT 92-111

Audited Report

GET INVOLVED! 112-115

Afghanistan
Pakistan
Cambodia
Malaysia
Indonesia
China

Message from the Patron



“ As Patron of MERCY Malaysia, I am truly heartened to see such enthusiasm and selfless dedication by each and every member, and I am proud to witness the accomplishments of this home-grown international NGO over the years. ”

The era of globalisation has brought many new challenges to the humanitarian landscape. Any calamity that occurs in any corner of the globe reaches virtually every other corner of the globe in a matter of minutes. Apart from those directly affected by adversity, today, news of adversity affects millions more indirectly. As we have witnessed time and time again, it is also in times of adversity that the beauty of humanity shines through. Today, where disaster occurs, support comes from all parts of the world.

In this sense, 2010 marked a new beginning for MERCY Malaysia. As the organisation entered its eleventh year, heimed under the new President, Dato' Dr. Ahmad Faizal Mohd Perdaus, MERCY Malaysia had broken new ground in its humanitarian work.

MERCY Malaysia, extended its reach further than ever before and responded in new ways to crisis and disaster. It acted as a significant fundraiser following the Haiti Earthquake, and conducted crucial relief work in the aftermath of the earthquake and tsunami in Chile - its first engagement in the Latin American region. The Pakistan Flood and the Mentawai Earthquake and Tsunami, which occurred in succession, also tested the capacity of staff and volunteers. In addition to their Northern Floods project in Malaysia, MERCY Malaysia runs sustainable projects in 14 countries, including India, Cambodia and Myanmar.

As Patron of MERCY Malaysia, I am truly heartened to see such enthusiasm and selfless dedication by each and every member, and I am proud to witness the accomplishments of this home-grown international NGO over the years.

Global economic conditions and environmental changes will continue to challenge and dictate the direction of humanitarian work. With your track record and your evidenced commitment, however, I am confident that you will continue to provide exemplary service and that your supporters will continue to rally to your cause.

I hope MERCY Malaysia will keep inspiring many Malaysians to embark on the path of service to help alleviate the sufferings of fellow human beings, regardless of where they come from, their backgrounds, colour or creed.

I wish all members, staff and volunteers much success in the future.

HIS ROYAL HIGHNESS SULTAN AZLAN SHAH
Sultan of Perak Darul Ridzuan

Message

from the Chairman of Board of Trustees



“ I hope Malaysians will see MERCY Malaysia as an extension of themselves, of that spirit of caring, compassion and giving that wells up in them and makes them respond spontaneously to calls for assistance from those facing tragic situations not of their own choosing. ”

The year 2010 marked my second year as the Chairman of the Board of Trustees. Over the past twelve months, the Board has watched as Malaysia's home grown humanitarian agency continues to serve over a million beneficiaries worldwide and develop into an international non-government organisation.

Your fingers will play hopscotch from one region to the next as you identify all the parts of the world MERCY Malaysia has worked in. Last year alone, its new projects were carried out in a myriad of countries – Bangladesh, Sri Lanka, Haiti, Chile, Indonesia and Pakistan - not to mention Malaysia. Closer to home, MERCY Malaysia has reached out to Myanmarese refugees and people with disabilities; vulnerable segments of society often overlooked in many parts of the world.

MERCY Malaysia's activities reflect the underlying code of humanitarian aid everywhere – that aid and assistance be given regardless of race, religion and nationality. For our volunteers and workers, working under such conditions is almost second nature, coming as we do from a multi-racial, multi-religious, multi-cultural and a multi-lingual society.

The Board meets with MERCY Malaysia's Executive Council members twice a year and trustees are given an overview of all their activities. Having the meetings at the MERCY Malaysia headquarters at Kompleks Dayabumi also gives the Board Members an opportunity to observe at close hand the hard work and dedication of the staff and the important role they are playing in bettering the lives of those unfortunate enough to be caught in a natural disaster or a conflict situation. How fulfilling it must be for all those involved, in one way or another, in assisting the less fortunate amongst us, even if it is in a small way!

The opportunity to do that sometimes comes in a very simple form– one can buy a MERCY Malaysia T-shirt as a token of goodwill or grab some of its flyers to share with family and friends, so that they may also get interested and help out in any way they can. Sometimes it is an obvious act of volunteerism – medical personnel spending hours in difficult conditions providing health care to distraught people caught in a natural disaster.

But in whatever manner we help, the fact remains that we, Malaysians, have been given a unique opportunity to lend a helping hand, on occasions, to some of the most marginalised people in remote areas in the world. Of course, a lot more remains to be done.

I hope Malaysians will see MERCY Malaysia as an extension of themselves, of that spirit of caring, compassion and giving that wells up in them and makes them respond spontaneously to calls for assistance from those facing tragic situations not of their own choosing. Please continue to support us so that we, in turn, can bring a smile on an unhappy face, relieve the agony of pain in some and give hope when all is lost to those near and far. Nothing is nobler than being given an opportunity to make a difference in the lives of those who are victims of nature's fury or man's inhumanity against man.

We in the Board are really delighted and find it a great pleasure to be associated with the work of MERCY Malaysia for such a worthy cause. I hope you will also find it equally rewarding.

TAN SRI DATO' AJIT SINGH

Message from the President



“MERCY Malaysia continued to fulfil its mission in an accountable, transparent and responsible manner while upholding the highest possible standards of practice and ethics in the humanitarian arena.”

Assalamualaikum warahmatullahi wabarakatuh,

Greetings,

This year has been another year of growth, challenges and opportunities for MERCY Malaysia. Throughout 2010, MERCY Malaysia has again encountered and risen above various challenges as it continues to fulfil its mission as a non-profit organisation focusing on providing medical relief, sustainable health-related development and risk reduction activities for vulnerable communities in both crisis and non-crisis situations. In the same breath, MERCY Malaysia continued to fulfil its mission in an accountable, transparent and responsible manner while upholding the highest possible standards of practice and ethics in the humanitarian arena.

The year 2010 was another challenging year operationally for the international humanitarian community especially in dealing with acute humanitarian emergencies. The early part of the year saw major earthquakes occurring half-way across the globe in Haiti and Chile. With its growing maturity and enhanced international positioning and networking, MERCY Malaysia was able to support and respond to both emergencies in an effective yet responsible way. Recognising the logistics nightmare that was unfolding in Haiti as well as the overwhelming aid that was poured into the country especially from neighbouring countries, MERCY Malaysia made a measured decision to respond via raising funds for our partner, MERLIN UK who were in a much better position to deliver aid directly to Haiti. MERCY Malaysia however did respond directly in the emergency phase to the earthquake in Chile as we worked to fill gaps as a result of the already heavy international commitment to Haiti, thus ensuring that we responded purely based on needs. The second half of

the year saw MERCY Malaysia engaged heavily in the worst floods to hit Pakistan in more than 80 years. The flooding in Pakistan was extremely challenging as it combined a major natural disaster occurring in a country with a complex armed insurgency. There was also the usual logistics challenge of working in a geographically varied country like Pakistan. The other challenge was the nature of the floods whereby the long-standing and slowly-unfolding nature of the floods gave the impression that it was not as serious as it really was, although the impact was huge, affecting more than 20 million people at its height. All these factors meant that MERCY Malaysia had to work in difficult circumstances and had to overcome donor fatigue as did most humanitarian organisations who were engaged in this particular disaster response. Towards the end of 2010, we responded to the earthquake in Mentawai in Indonesia, which saw MERCY Malaysia continuing its proud record of responding rapidly to acute emergencies in the region and expanded our mode of operations by responding mainly via maritime means to the Mentawai Islands. Closer to home, MERCY Malaysia responded speedily and effectively to the northern floods which hit the states of Kedah and Perlis late last year. MERCY Malaysia again showed the synergy between staff and volunteers that have been a keystone to MERCY Malaysia's success in responding to emergencies. Apart from staff and volunteers, MERCY Malaysia also worked with partners in Kedah and Perlis as well as with affected local communities.

Throughout 2010, MERCY Malaysia continued to enhance and expand its reach in medium to long-term programmes in

Message from the President

line with its philosophy of providing sustainable health-related development to vulnerable communities. Among the new programmes and projects we initiated in 2010 in this respect were a vaccination program for children of Myanmarese refugees in Malaysia, an extension of a program we have been conducting for several years with UNHCR and Embassy of the Czech Republic; a disaster preparedness program with disabled people in Malaysia; as well as a rainwater harvesting project in Pabna, Bangladesh and the reconstruction of a district hospital in Ampan, Sri Lanka. Among long term programmes enhanced in 2010 were the Cleft Lip and Palate Program (CLIPP), conducted mainly in collaboration with USM as well as our flagship Disaster Risk Reduction (DRR) programme, the nationwide School Preparedness Programme, done in collaboration with the Ministry of Education.

The year 2010 also saw MERCY Malaysia strengthening its relationships and partnerships with international partners. Working trips to both the northern and southern hemispheres saw MERCY Malaysia formalising and enhancing partnerships with MERLIN UK, Save The Children UK, Muslim Aid and Islamic Relief International, while a trip funded by the Australia-Malaysia Institute (AMI) saw MERCY Malaysia going to Australia and initiating partnership discussions with AusAid, CARE Australia and Australian Aid International among others. The initiation of the partnerships with Australasian organisations is groundbreaking as this is the first time this has been done in earnest. Internally, among the professional staff, the internalisation and work towards Humanitarian Accountability Partnership (HAP) re-certification and the production and enhancement of manuals and operating procedures were among the main focus in 2010. This resulted in MERCY Malaysia being well-positioned for HAP re-certification which is due in 2011. I would like to take this opportunity to thank staff and volunteers who helped make this a reality. There was also a resurrection of volunteer involvement and participation in various programmes in Malaysia and abroad culminating in a successful and well-attended Volunteer Appreciation Day on December 5th.

Throughout 2010, continuous efforts were made to achieve two other Key Result Areas apart from operational excellence which are sustainable fundraising and human capital development. Great strides were made in both, but more needs to be done in coming years. While MERCY Malaysia's accounts are as healthy as ever, we need to work harder to both diversify and increase the depth and breadth of our funding base. Likewise, while our staff and volunteers are among the best trained in the region, more needs to be done if we are to achieve true world-class status.

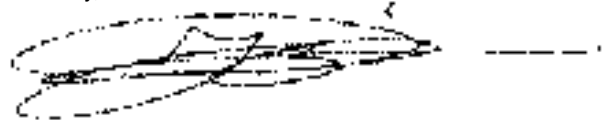
I would like to take this opportunity to thank all our donors, partners and collaborators both at the national and international levels for helping MERCY Malaysia achieve its aims and deliver aid to our beneficiaries as well as strengthen our organisation. I would also like to thank the trustees, excos and management

for ensuring that governance of the organisation continues as it has been at the highest level possible. I would also like to thank the staff and volunteers for their tireless efforts both in the field and in other spheres in ensuring aid we deliver reaches vulnerable communities anywhere we serve them. Last but not least, I would like to thank HRH the Patron for his untiring support and care for MERCY Malaysia.

We still have some way to go, but with all your support, we are confident we will get to where we aspire to be, God Willing. May the Almighty Bless all of you and MERCY Malaysia.

Thank you.

Sincerely,



DATO' DR AHMAD FAIZAL MOHD PERDAUS

Vision

To be outstanding in delivery of medical and humanitarian aid to all

Mission

MERCY Malaysia is a non-profit organisation focusing on providing medical relief, sustainable health-related development and risk reduction activities for vulnerable communities, in both crisis and non-crisis situation.

Core Values

- | | |
|------------------------|---|
| M otivation | We are highly motivated and passionate |
| E xcellence | We do the right things in the right way;
we are accountable to beneficiaries and donors |
| R espect | We show trust and respect in all our interactions |
| C ollaboration | Working with peers, partners & volunteers builds each other's
strengths & enhances the impacts for beneficiaries |
| Y earn to Serve | We will go the extra mile to help those in need |
-

The background of the entire slide is a solid blue color. Overlaid on this background are several sets of concentric circles in a lighter shade of blue. These circles are of varying diameters and are positioned in a way that they overlap each other, creating a dynamic, organic pattern that resembles ripples in water or a stylized sunburst. The circles are most prominent in the upper left and lower right areas, with some smaller ones scattered throughout.

In 2010;

We were present in
14 countries

We reached out to over
1 million beneficiaries

We spent approximately
USD 3.5 million for our
humanitarian services

ACTIVITIES IN 2010

Gaza

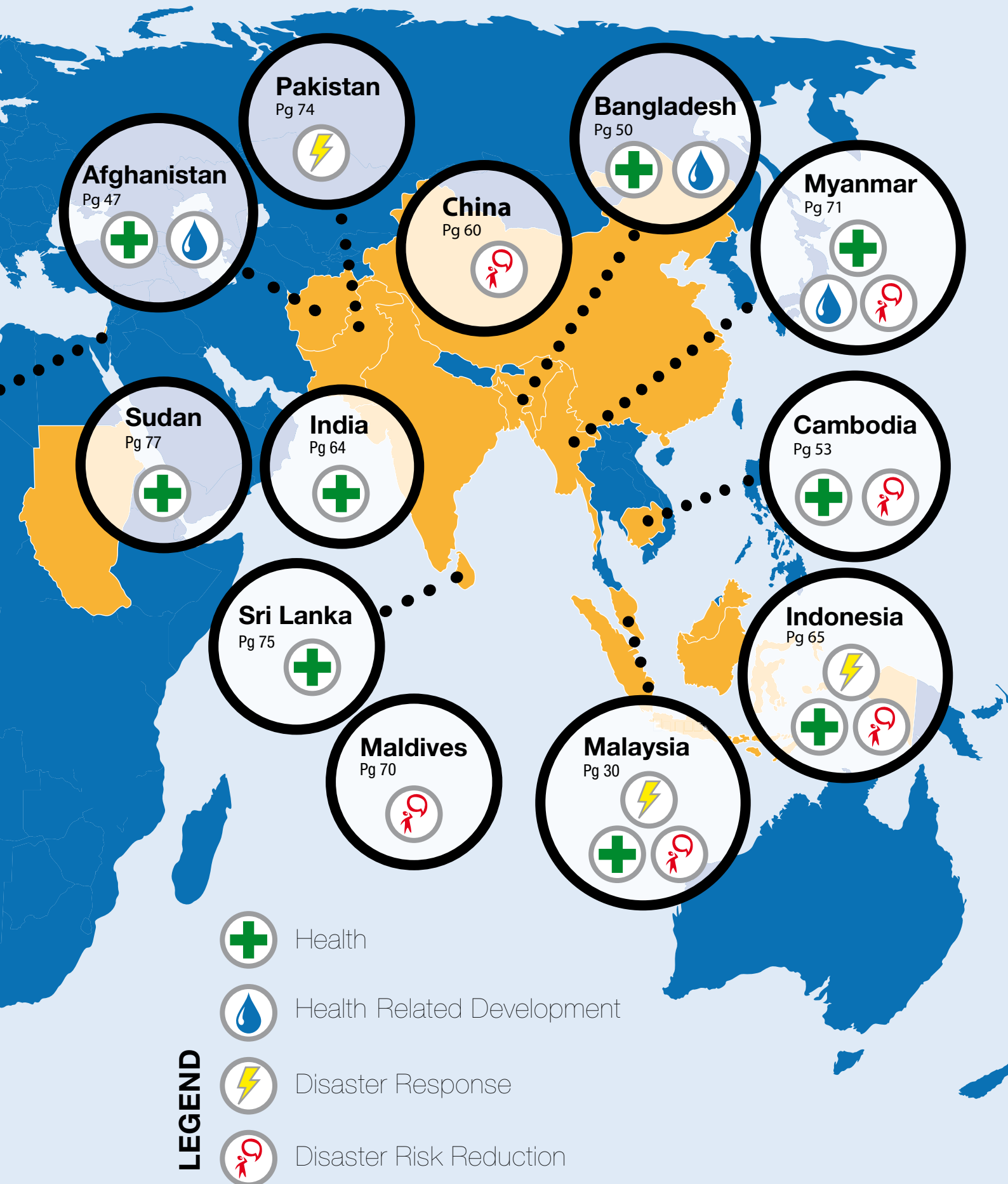
Pg 61



Chile

Pg 59





MERCY Malaysia's

Strategic Commitments



MERCY Malaysia's

Strategic Commitments

In line with our mission, core values and our alliances and partnerships in carrying out our humanitarian work, MERCY Malaysia commits itself to the following principles:

Impartiality

We maintain impartiality in the selection of our staff. The selection of our beneficiaries will be on a purely needs basis and not based on race, religion and political affiliation.

Integrity, Professionalism and High Standards of Practice

We maintain a workforce that will adhere to basic moral and ethical principals. We base our work on internationally accepted standards

Continuous Improvement (of processes, systems and staff development)

We monitor and evaluate our work in order to improve upon our past experiences and provide better humanitarian services as we progress.

Complementary Partnership

We aim to work as much as possible with local partners on the field, enhancing complementary factors between both parties. In and beyond the field, we will work with partners who are responsible, transparent and accountable in accordance with our Principals of Partnership.

Consultative and Participatory

We consult with our beneficiaries and staff and include their feedback into project plans to ensure holistic results.

Ethical Reporting

We maintain the confidentiality of our stakeholders, especially beneficiaries, at all times.

Transparency and Information Provision

We are transparent in sharing information such as financial statements, MERCY Malaysia's constitution, MERCY Malaysia's Humanitarian Accountability Framework, organisational vision, mission, core values and commitments to all stakeholders.

Listening and Responding

We encourage feedback from our stakeholders through our Complaints Response Mechanism and we will be responsive to such feedback. Our response will also include evaluating the feedback to ensure continuous improvement.

Quality Management and Quality Assurance

We continuously review our work and learn from our mistakes and apply our lessons learnt as we progress.

Financial Stewardship

We promote good stewardship of our financial resources and will be transparent about our expenditures.

Health, Safety and Security

We strive to ensure the physical safety and the emotional well-being of the staff and volunteers especially in the line of duty.

Humanitarian Accountability

OUR JOURNEY TO ACCOUNTABILITY

Accountability and transparency measures began to play a significant role in MERCY Malaysia in 2007, when MERCY Malaysia became a member of the Humanitarian Accountability Partnership International (HAP) in 2007. Established in 2003, HAP is the humanitarian sector's first international self-regulatory body.

As a member, MERCY Malaysia commits to comply with the HAP Principles of Accountability and is required to report annually on the progress in implementing its Accountability Workplan. The HAP Standard sets six affordable, realistic and results-critical benchmarks for ensuring that it meets the needs of disaster survivors that drive humanitarian action. This is the only aid standard developed in this way and which meets the ISO guidelines for designing quality standards.

MERCY Malaysia was due to be re-certified in November 2010 but time constraints pushed the certification forward to 2011. In the meantime, under HAP's rigorous system, MERCY Malaysia underwent a Mid-Term Progress Audit (MTPA) in August 2009 and September 2010, in Kuala Lumpur and Bangladesh respectively. The locations were selected on the basis that each audit must include at least one project location, as well as the head office itself.

At the headquarters in Kuala Lumpur, the audit focused on the processes and systems of MERCY Malaysia. In Bangladesh, the Rain Water Harvesting (RWH) project for arsenic-affected communities in Kabariholra, Pabna was selected to be measured against the six benchmarks required in HAP.

What is Accountability?

Accountability is about ensuring responsible use of power. It refers to organisations (or individuals) being held responsible to a particular group for the effects of their actions.

Experienced humanitarian workers in their own right, the HAP auditors from Geneva followed a stringent audit methodology, and involved the following activities:

- (i) documentary review of past audits, headquarters' documentation as well as programme site documents;
- (ii) face-to-face interviews with MERCY Malaysia staff as well as the staff of our implementing partners. Interviews are carried out on project sites as well as in offices;
- (iii) face-to-face interviews with beneficiaries, either individually or in focus groups; and
- (iv) observation of practices and activities.

In Kuala Lumpur, the auditor had the opportunity to interact with majority of the staff at the head office as well as meeting our implementing partner at Rumah Nur Salam. In Bangladesh, the auditor had the opportunity to interact with more than 65 beneficiaries comprising men, women, children and the elderly.

A semi-structured interview approach was used to evaluate all the benchmarks. Particular interest is paid to the complaints-handling mechanism, designed to safeguard beneficiaries from potential exploitation and abuse by aid workers.

Documentation was shared in electronic form a week before the visit, in hardcopy on site, and requested documentation was received post-site visit. In total, both auditors reviewed over 100 documents for both audits.

The initial MTPA in Kuala Lumpur showed up some of MERCY Malaysia's gaps in processes and procedures, as well as the overall direction of the organisation. With significant effort from the staff of MERCY Malaysia to close the gaps, the subsequent MTPA in September 2010 found MERCY Malaysia's **programme site** to be compliant with the 2007 HAP Humanitarian Accountability and Quality Management Standard. One minor non-compliance remained open from the previous MTPA of September 2009 and four new minor non-compliances were opened.

There were no major non-compliances which would impede MERCY Malaysia as it progressed towards re-certification.



Humanitarian Accountability

HAP Humanitarian Accountability and Quality Management Standard 2007

The Six Benchmarks

Benchmark 1: The agency shall establish a humanitarian quality management system

Benchmark 2: The agency shall make the following information publicly available to intended beneficiaries, disaster-affected communities, agency staff and other specified stakeholders:

- (a) organisational background;
- (b) humanitarian accountability framework;
- (c) humanitarian plan;
- (d) progress reports; and
- (e) complaints handling procedures

Benchmark 3: The agency shall enable beneficiaries and their representatives to participate in programme decisions and seek their informed consent

Benchmark 4: The agency shall determine the competencies, attitudes and development needs of staff required to implement its humanitarian quality management system

Benchmark 5: The agency shall establish and implement complaints-handling procedures that are effective, accessible and safe for intended beneficiaries, disaster-affected communities, agency staff, humanitarian partners and other specified bodies

Benchmark 6: The agency shall establish a process of continual improvement for its humanitarian accountability framework and humanitarian quality management system



Beneficiary in Nias project filling in the feedback form to improve MERCY Malaysia's programme



Oh Boon Hann, our volunteer, listening to the beneficiaries' needs on the assessment process in Padang Pariaman



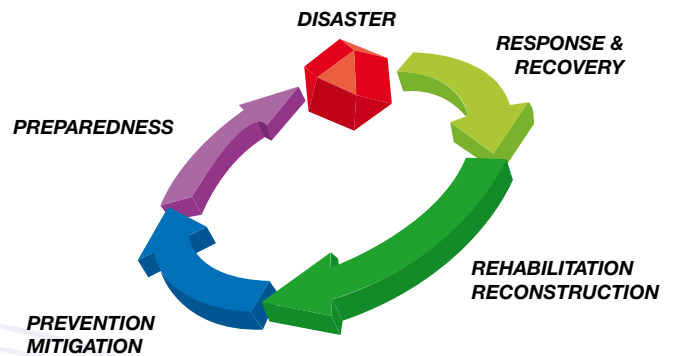
MERCY Malaysia's information displayed at our project location in Bangladesh

Our Approach

Total Disaster Risk Management (TDRM)

Like many international organisations involved in the delivery of medical and humanitarian aid to vulnerable communities, MERCY Malaysia has been actively involved in providing emergency assistance to affected populations.

In January 2005, MERCY Malaysia began implementing its key domestic and international projects and programmes by utilising a holistic approach to manage natural disasters, Total Disaster Risk Management (TDRM).



MERCY Malaysia takes a pro-active approach to natural disaster risk management. After many years of responding to natural disasters after they occur we came to the realisation that we needed to help communities to be prepared before a natural disaster strikes. Although traditionally more attention was paid to the post-disaster phase, we wanted to make sure that we gave equal attention, if not more to the pre-disaster activities.

Total Disaster Risk Management (TDRM) takes a holistic approach to natural disaster risk management. With a balance between the pre-disaster (prevention/mitigation and preparedness) efforts and post-disaster (response and recovery) activities, we can ensure that the root causes and underlying factors that lead to natural disasters are also addressed.

TDRM also puts emphasis on total stakeholder engagement, in line with our strategic commitments. We engage all our stakeholders, especially the beneficiaries to ensure our efforts meet their needs, and we adopt and disseminate local knowledge to improve community resilience.

As such, the work we do covers all four disaster risk management phases. While it is not always possible to label an activity as belonging to a particular phase, what is important is ensuring that our overall impact contributes towards building resilience in all the communities that we touch.

Our Approach

Total Disaster Risk Management (TDRM)



Our humanitarian response provides timely relief to survivors

Our recovery and rehabilitation efforts help affected communities return to their normal daily lives



Prevention and mitigation activities help build resilience in the community



Preparedness in the community helps everyone to be ready for future disasters



Affiliations

No single humanitarian agency is able to respond to all humanitarian needs. Humanitarian actors must collaborate in order to share experiences, learn from each other, and respond effectively to needs.

MERCY Malaysia is affiliated to the following entities in its efforts to create a learning and collaborative culture within the organisation and to encourage continuous improvement in its humanitarian efforts.

The Asian Disaster Reduction and Response Network (ADRRN)



The Asian Disaster Reduction and Response Network (ADRRN) was formed in 2002 to strengthen the collaboration and coordination in disaster management among the Asian NGOs. MERCY Malaysia has played an important role by hosting the Secretariat of the

Network. In addition, Dr Heng Aik Cheng, MERCY Malaysia Executive Council member will serve as Vice Chairperson of the Network from 2011.

The Secretariat has been mainly operated by two MERCY Malaysia members – Advisor to ADRRN and Administrative Assistant to ADRRN. The major roles of the Secretariat are to coordinate with the Representative Office in India and major donors on the programmes and activities and to provide necessary support with financial and accounting matters. ADRRN currently has 36 full members from 13 countries and seven associate members.

In 2010, ADRRN translated and published a booklet of “DRR Terminology” in nine Asian languages. The original booklet was issued by United Nations International Strategy for Disaster Reduction (UNISDR) and ADRRN was selected as their implementing partner. The UNISDR Terminology aims to promote common understanding and usage of disaster risk reduction concepts and to assist the disaster risk reduction efforts of authorities, practitioners and the public. ADRRN is best placed to implement this activity because of its member strength and large experience of working in the field of Disaster Risk Reduction.

MERCY Malaysia recognises the importance of the role of the Network for the Asian NGOs in order to achieve community resilience to disasters in Asia, and will continue its support to ADRRN as the Secretariat. The members aim to develop capacity for disaster management, to advocate the interests from Civil Society Organisations (CSOs) and to represent the Asian voice at the international platform.

www.adrrn.net



In 2010, ADRRN translated and published a booklet of “DRR Terminology” in nine Asian languages.

Affiliations

The International Council of Voluntary Agencies (ICVA)



The International Council of Voluntary Agencies (ICVA) is a global network of non-governmental organisations (NGOs) that advocates for effective humanitarian action.

Founded in 1962, ICVA brings the experience and views of over 70 national and international NGOs to international policy-making forums. ICVA also provides its members with up-to-date information and analyses on policy developments in humanitarian response and provides support in certain field situations.

An essential feature of ICVA's capacity is its links with NGOs from developing countries. As the only global humanitarian NGO network, membership in ICVA gives NGOs unique opportunities to engage with other actors and each other on humanitarian policy issues, and to make sure the voices of southern NGOs are heard on the international policy level.

www.icva.ch

People In Aid



People In Aid is a not-for-profit membership organisation which aims to improve organisational effectiveness within the humanitarian and development sector worldwide by advocating, supporting and recognising good practice in the management of people.

Established by agencies in the humanitarian and development sector in 1995, People In Aid channels their assistance to organisations within the humanitarian and development work to enhance the organisational impact through better management and support of staff and volunteers.

People In Aid are governed by their members, whose experiences and HR practices shape their activities and have informed the development of the People In Aid Code of Good Practice in the management and support of aid personnel.

www.peopleinaid.org

The Active Learning Network for Accountability and Performance in Humanitarian Action (ALNAP)



The Active Learning Network for Accountability and Performance in Humanitarian Action (ALNAP) was established in 1997, following the multi-agency evaluation of the Rwanda genocide. ALNAP is a collective response by the humanitarian sector, dedicated to improving humanitarian performance through increased learning and accountability.

A unique network, ALNAP incorporates many of the key humanitarian organisations and experts from across the humanitarian sector. Members are drawn from donors, NGOs, the Red Cross and Crescent Movement, the UN, independents and academics.

ALNAP uses the broad range of experience and expertise within its membership to produce tools and analysis relevant and accessible to the humanitarian sector as a whole. ALNAP's workplan is aimed at improving humanitarian performance through learning and accountability, and consists of core activities, project activities and linked activities.

www.alnap.org

MERCY Malaysia

Board of Trustees



Tan Sri Dato' Ajit Singh

Tan Sri Dato' Ajit Singh is currently the Chairman of Nam Fatt Corporation, Malaysia.

In a career spanning over 30 years, he served in various positions in the Ministry of Foreign Affairs and at Malaysian Missions abroad. He was elected the first Secretary-General of ASEAN, which carries the rank of a Minister and served a five-year term from 1993 to 1997. After leaving the Secretariat, he joined the National Petroleum Company, PETRONAS, where he worked as Director, International Business Ventures from 1997 to 1999. He was elected as the Secretary-General of the Boao Forum for Asia and served the organisation from 2001 to 2002. The China-based forum is a private-sector led non-governmental, non-profit organisation set up to promote greater interdependence and economic integration in the Asian region.

In recognition of his services, both Laos and Vietnam awarded him their prestigious Friendship Medals in December 1997. He was also awarded the Panglima Setia Mahkota award by His Majesty the King of Malaysia in 1998. The Indonesian Government awarded him the "Bintang Jasa Utama" in 1999 in recognition of his work in ASEAN and in helping to improve Malaysia-Indonesia relations. In early 2010, he was appointed to the Indian Prime Minister's prestigious Global Advisory Council of Overseas Indian.

He graduated with a B.A. Hons. in History in 1963 from the University of Malaya.



Tan Sri Dato' Ahmad Fuzi Haji Abdul Razak

Tan Sri Dato' Ahmad Fuzi Haji Abdul Razak is the Secretary General for the Permanent Secretariat of the World Islamic Economic Forum (WIEF).

He was previously the Secretary General of the Ministry of Foreign Affairs Malaysia. He joined the Malaysian Diplomatic and Administrative Service in 1972, and served in various capacities at the Ministry of Foreign Affairs, mainly in the Political Division, and at the Malaysian Missions abroad in Moscow, The Hague, Canberra, Washington and Dhaka.

Tan Sri Dato' Ahmad Fuzi is currently the Chairman, Amanahraya-Reit; Chairman, Seremban Engineering Berhad; Executive Chairman, AsiaEP Bhd; Chairman, PKT Logistics (M) Sdn Bhd; Non-Executive Chairman, Sofgen Sdn Bhd; Chairman, Leisure Guide Publishing Sdn Bhd; Independent Non-Executive Director, Puncak Niaga Holdings Berhad; Non-Executive Director, Management Development Institute of Singapore; Member, Board of Trustees, F3 Strategies Berhad; and Member, Advisory Board, Asia Pacific Entrepreneurship Award (APEA).

He is also a Distinguished Fellow, Institute of Strategic and International Studies (ISIS); Distinguished Fellow, Institute of Diplomacy and Foreign Relations; Deputy Chairman, Malaysian Member Committee of the Council for Security Cooperation in the Asia Pacific (CSCAP Malaysia); President, Association of Former Malaysian Ambassadors (AFMA) and Advisor, High School Bukit Mertajam Alumni Malaysia. In recognition of his services to the nation, he was awarded the AMN in 1979, the JSM in 1999, the DSPN in 1999, the DMPN in 2002 and the PSM in 2003.

He holds a Bachelor of Arts Degree (Honours) from the University of Malaya in 1972 and a Foreign Service Course with a Certificate in Diplomacy from Oxford University in 1974.

MERCY Malaysia

Board of Trustees



Toh Puan Dato' Seri Dr Aishah Ong

Toh Puan Dato' Seri Dr Aishah Ong is currently the Pro-Chancellor of University of Malaya (UM).

Toh Puan Dato' Seri Dr Aishah Ong has dedicated most of her life to charitable causes. Among the many causes, she is the Chairman of The Foundation of the National Heart Institute, The New Straits Times Press Charity Fund and the Chairman of Welfare Organisation of Wives of Ministers/Deputy Ministers/Parliamentary Secretary (BAKTI) for BAKTI-MIND Project. She is also the Chairman of the Board of Health Promotion in the Ministry of Health since 2007. Toh Puan Dato' Seri Dr Aishah Ong also plays an integral part in academia as she is a member of International Consultative Council of the International Medical University (IMU) and has served in her current position as the Pro-Chancellor of UM since 2003.

Toh Puan Dato' Seri Dr Aishah Ong was awarded the JMN in 1990, DMPN in 2003, DPMS in 2005, DGPN in 2007 and PJN in 2010 in recognition of her services to the nation.

In 1969, she received her degree in Medicine from the University of London (The Royal Free Hospital).



Dato' Abdul Halim Harun

Dato' Abdul Halim Harun is currently a Fellow of the Association of Chartered and Certified Accountants (UK) and a Member of the Malaysian Institute of Accountants.

Formerly the Group Managing Director and Chief Executive Officer of UMW Holdings Berhad, Dato' Abdul Halim has worked in various capacities at various organisations within the management, accounting and financial fields. Dato' Abdul Halim currently also holds positions as Chairman of the Board of Directors and Directors in various private and public listed companies in Malaysia and overseas. In 2007, he was awarded Malaysia's CEO of the Year by Business Times. He was also a finalist in Asia Business Leaders by CNBC Asia for 2007.

He received his formal education from Universiti Teknologi MARA and Emile Woolf College of Accountancy, United Kingdom.

MERCY Malaysia Executive Council 2008/2011



President

Dato' Dr. Ahmad Faizal Mohd. Perdaus

Dato' Dr. Ahmad Faizal Mohd. Perdaus currently works as a Consultant Physician (Internal Medicine, Respiratory & Sleep) at KPJ Johor Specialist Hospital.

He first joined MERCY Malaysia as a volunteer in 2003, and was elected to the current role in 2010 after acting in interim since August 2009. He was the Head of Drug Rehabilitation and Assistance Programme in Malaysia from 2003 to 2006, and was involved in recent local missions in Johor (2011). His international missions include Sri Lanka (2003), Iran (2004), Sudan (2004, 2008), Indonesia (2005), Pakistan (2005) and Myanmar (2008). He currently sits on the boards of ICVA, HIF and ATHA.

He was previously a Consultant Physician (Internal Medicine & Respiratory) at Hospital Universiti Kebangsaan Malaysia (HUKM). Before that, he served as a Lecturer in Internal Medicine and Respiratory Medicine in the Department of Medicine, Faculty of Medicine, UKM.

He was a Visiting Research Fellow, Woolcock Institute of Medical Research, Sydney, Australia until 2009. He was awarded the Darjah Dato' Paduka Mahkota (DPMP) by HRH Sultan of Perak in 2010. Dato' Dr. Ahmad Faizal earned a master's degree in Internal Medicine (2000), Doctor of Medicine (1992) and Bachelor of Medical Science (1989) from Universiti Kebangsaan Malaysia.



Vice President I

Assoc. Prof Dr Mohamed Ikram Bin Mohamed Salleh

Assoc. Prof Dr Mohamed Ikram Bin Mohamed Salleh currently works as Head of Frontline Medicine Division and Consultant Anaesthesiologist at Cyberjaya University College of Medical Sciences.

He first joined MERCY Malaysia as a volunteer in 1999 and was elected to the current role in 2004. Assoc. Prof Dr Mohamed Ikram has considerable experience in missions in conflict zones such as Kosova (1999), Maluku Island (2000), Afghanistan (2001), Iraq (2003), Sudan (2005) and Gaza (2008). Missions involving natural disasters include the local responses in Malaysia (2005), the tsunami in Aceh and Sri Lanka (2005), Nias Island Earthquake (2005) and Padang Earthquake (2009).

Assoc. Prof Dr Mohamed Ikram has assumed several positions including Group Director of Medical Interest Group Sdn Bhd, Founding CEO of An-Nur Specialist Hospital, Founding Group Director of Kajang Plaza Medical Director Sdn Bhd and Founding Chief Editor of Ar-Rahmah, Persatuan Perubatan Islam Malaysia. Assoc. Prof Dr Mohamed Ikram earned a master's degree in Anaesthesiology from Universiti Kebangsaan Malaysia (2005), and a degree in Medicine from Universiti Sains Malaysia (1988).



Vice President II

Mohd Azman Sulaiman

Azman Sulaiman currently works as a Client Partner at Korn/Ferry International.

He first joined MERCY Malaysia as a volunteer in 2003, and was elected to the current role in 2004. He was involved in local missions in Malaysia (2005 – 2007) as well as international missions in Sudan (2004) and Cambodia (2009).

Azman Sulaiman was previously with the UEM Group Malaysia, where he assumed several positions including Director of Business Development, Chief Executive Officer of MAVTRAC, Director of Group Corporate Affairs, as well as Chief Executive Officer of UEM Foundation.

He was previously on the boards of Costain Group Plc United Kingdom, as well as the Malaysian Industry-Government Group for High Technologies (MiGHT).

Azman Sulaiman earned a master's degree in Business Administration from the Australian National University (1998), master's degree in Geotechnical Engineering from Strathclyde University in Scotland (1992), and a Bachelor of Sciences degree in Applied Geology from the University of Malaya (1989).

MERCY Malaysia Executive Council 2008/2011



Honorary Secretary

Yang Mulia (YM) Raja Riza Shazmin Raja Badrul Shah

YM Raja Riza Shazmin Raja Badrul Shah currently works as a Managing Partner at Messrs Raja Riza & Associates.

She first joined MERCY Malaysia as a volunteer in 2004, and was elected to the current role in 2006. She oversees the legal and compliance matters in MERCY Malaysia. She was involved in local missions in Belum, Malaysia (2008) and Johor (2005) as well as international missions in Aceh (2005, 2006), Yogyakarta (2005), Nias (2008), Maldives (2008) and Myanmar (2009).

YM Raja Riza Shazmin Raja Badrul Shah was admitted as an Advocate and Solicitor of the High Court of Malaya in 2000. She obtained her Diploma in Syariah Legal Practice (DSLPP) from International Islamic University Malaysia (2002), earned her Certificate in Legal Practice (CLP) from Brickfields College (1998) and received her honors degree in Law from University of Glamorgan, Wales, UK (1997).



Assistant Honorary Secretary

Assoc. Prof Dr. Palasuntharam Shanmuhasuntharam

Dr. Palasuntharam Shanmuhasuntharam currently works as an Oral & Maxillofacial Surgeon as well as a Lecturer at the Department of Oral & Maxillofacial Surgery in the Faculty of Dentistry of the University of Malaya.

He first joined MERCY Malaysia as a volunteer in 2003, and was elected to the current role in 2006. He was involved in international missions in Sri Lanka (2005), Syria (2006), North Korea (2008) and Sri Lanka (2009). He is a Fellow Dental Surgeon of the Royal College of Surgeons in Edinburgh, United Kingdom.

Dr. Palasuntharam earned a master's degree in Dental Surgery (Oral & Maxillofacial Surgery) from National University of Singapore (1991), and a bachelor of sciences degree in Dental Surgery from University of Malaya (1987).



Honorary Treasurer

Ir. Amran Mahzan

Amran Mahzan currently works as a Manager for Agropolitan at the East Coast Economic Region Development Council.

He first joined MERCY Malaysia as a volunteer in 2002, and was elected to the current role in 2006. He was involved in international missions in Afghanistan (2002), Aceh (2005), Pakistan (2006) and Sudan (2010).

He is a registered Professional Engineer (P Eng.) on the Board of Engineers Malaysia (BEM) and a Member of the Institution of Engineers Malaysia (MIEM). Amran Mahzan earned a master's degree in Construction Business from International Islamic University Malaysia (2006), and a Bachelor of Sciences degree in Electrical Engineering from the University of Malaya (1994).

MERCY Malaysia Executive Council 2008/2011



Council Member

Dr Heng Aik Cheng

Dr Heng currently works as a Consultant Orthopedic Surgeon and Traumatologist in Sabah Medical Centre.

He first joined MERCY Malaysia as a volunteer in 2002 and was elected to the current role in the same year. He was involved in local missions in Malaysia as well as international missions

in Iraq (2003), North Korea (2004), Sudan (2004), Pakistan (2005), Myanmar (2008), Gaza (2009), Padang (2009) and Chile (2010). He serves in the Board of Asian Disaster Risk Reduction Network (ADRRN) and represents MERCY Malaysia in APG-AADMER, APC-MADRO, ALNAP and HFP.

Dr Heng Aik Cheng previously served on the Board as Directors of Karambunai Corp (2004-2007). In the field of civil society, Dr Heng previously served as a President for the Rotary Club Kota Kinabalu (1998-1999). He is currently the President of The Sabah Society for 2011 to 2012. Dr Heng graduated with a Bachelor in Medicine, Surgery & Art of Obstetrics from Queen's University Belfast and became a Fellow of the Royal College of Surgeons in 1982.



Council Member

Norazam Ab Samah

Norazam Ab Samah is currently the Director and Chief Operating Officer of Dewarisan Dimensi Sdn. Bhd.

He first joined MERCY Malaysia as a volunteer in 2001 and was elected to the current role in 2008. As the Advisor for MERCY Malaysia's Technical Team,

he leads the technical assessment and evaluation of potential reconstruction projects for MERCY Malaysia.

He was the Head of Operations Aceh-Nias (2005-2008), leading reconstruction projects after the tsunami in 2004, as well as the earthquake in Nias in 2008. He was also involved in international missions in Afghanistan (2002), Iraq (2003), Sri Lanka (2003), Iran (2003), Cambodia (2004) and Yogyakarta (2006). Norazam Ab Samah was a Director of Deqarareka Sdn. Bhd. (2000-2006). He earned a bachelor degree in Architecture from Universiti Teknologi MARA (2000), and is currently pursuing a masters degree in Civil Engineering at Universiti Sains Malaysia.



Co-Opted Council Member

Farah Abdullah

Farah Abdullah first joined MERCY Malaysia as a volunteer in 1999, and was co-opted into the Executive Council in 2004.

Formerly the Group Director of Human Resource with the Renong Group, today she continues to help companies

upgrade and sustain their leadership skills in managing the highly knowledgeable and mobile workforce. She was involved in international missions in Aceh (2005).

She is the Founding Director of the Muslim Professionals Forum (MPF), and headed the Education Bureau for the Malaysian Chinese Muslim Association (MACMA) from 2007 to 2009. Farah Abdullah pioneered the early growth of the Malaysian Institute of Management, and is a certified Master Trainer.



Co-Opted Council Member

Dr. Shalimar Abdullah

Dr. Shalimar Abdullah currently works as an Orthopaedic Surgeon at the Department of Orthopaedics of Hospital Universiti Kebangsaan Malaysia.

She first joined MERCY Malaysia as a volunteer in 1999 and was co-opted into the Executive

Council in 2005. She is a Medical Advisor for MERCY Malaysia and functions as the Team Leader for the Emergency Response Unit (ERU). She was involved in international missions in Afghanistan (2002), Cambodia (2003), Kashmir (2005) and Yogyakarta (2006). Dr Shalimar holds the post of Secretary in Malaysian Society for Surgery of the Hand (MSSH) and received her Fellowship in Hand Surgery from Kleinert Institute, Louisville, USA (2010).

She earned a master's degree in Orthopaedic Surgery from Universiti Kebangsaan Malaysia (2005). She received her bachelor of Medical Sciences (1995) and her bachelor of Surgery (1998) from University of Nottingham Medical School, UK.

Treasurer's Report

FINANCIAL STATEMENTS

The Executive Committee are responsible for the preparation and fair presentation of these financial statements in accordance with approved MASB accounting standards in Malaysia for Private Entity and the Societies Act, 1966 in Malaysia.

The last Annual General Meeting has approved the appointment of Azuddin & Co. as our external auditor. They have been working with MERCY Malaysia in the previous years and together we have strived to improve the annual financial reporting.

FINANCIAL PERFORMANCE

For year 2010, the total income received was RM 9.06 million. Total donations received were RM 8.6 million, and income received from other sources was RM 449,000.00. There was a significant drop in the amount of donation received by MERCY Malaysia last year as a sequence of disasters contributed to donor fatigue. The significant drop is made more visible due to a substantial amount of donation received for our work in Gaza in 2009 which added RM 10.5 million to our total income. Chart 1 shows the total income received from 2008 until 2010.

From the RM 8.6 million, the unrestricted fund received was RM 5.3 million, an increase by about RM 535,000. For restricted funds a total of RM 3.3 million was received. Restricted funds are donations received for a particular country or project.

In terms of donation sectors, there were reductions in donation received for all sectors except for donations received from the private sector as shown in Chart 2. Donations and gifts from each sector in terms of percentage is showed in Table 1.

CHARITABLE EXPENDITURE

Our Charitable Expenditure in 2010 adds up to RM 11.2 million as shown in Table 2. By the end of 2010, MERCY Malaysia has delivered our services in 14 countries including Malaysia.

As our main focus, expenditure on medical relief and sustainable health-related development remains as the bulk expenditure in 2010. This contributes a percentage of 67.75% (equivalent to RM 7.6 million) from the total expenditure (Chart 3).

We continued to highlight disaster preparedness programmes by gearing up our efforts in disaster awareness, which increased to 14.31% from 6.13% in the previous year.

OPERATIONAL EXPENDITURE

MERCY Malaysia's operating expenditure has increased compared to previous years due to our expansion of operations and staffing. The operating expenditure percentage has increased to 22% in 2010 from 15% in 2009 but the increase in percentage is mainly due to reduction in project spending.

Last but not least, we would like to express our deepest appreciation to all our supporters including the Executive Council, Management, staff, members, volunteers and donors who has worked with us throughout the year.



IR AMRAN MAHZAN
Honorary Treasurer

Financial Review

TABLE 1 : SOURCE OF DONATION BY SECTOR

	RM	%
Private Sector	5,976,947	69.43
Public	973,710	11.31
Other NGOs	215,081	2.50
International Organisations	841,770	9.78
Government of Malaysia	600,791	6.98
TOTAL DONATION COLLECTED	8,608,299	

TABLE 2 : HOW WE SPENT (TOTAL CHARITABLE EXPENDITURE)

	RM	%
Healthcare & Health-related	7,585,556	67.75
Education	1,022,527	9.13
Disaster Preparedness	1,602,391	14.31
Water, Sanitation & Hygiene	742,842	6.63
Total project cost	10,953,316	
Field office running cost	243,147	2.17
	11,196,463	

CHART 1 : TOTAL INCOME RECEIVED (3-YEAR COMPARISON)



Financial Review

CHART 2 : DONATION RECEIVED BY SECTOR (3-YEAR COMPARISON)

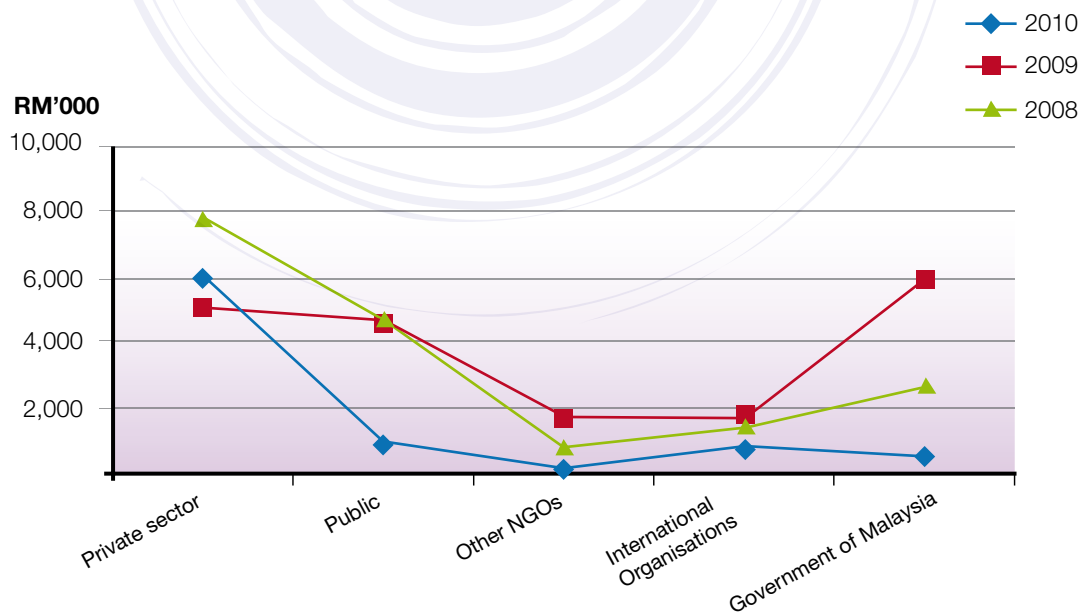
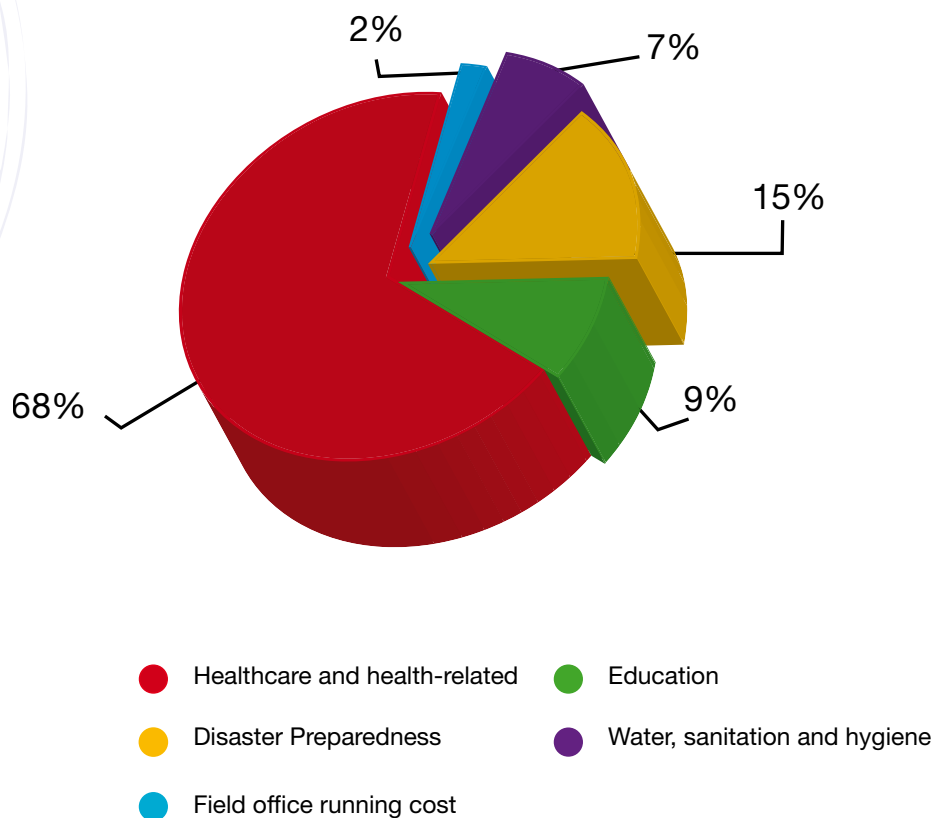


CHART 3 : TOTAL EXPENDITURE BY SERVICES FOR 2010





In 2010, we
carried out 39
sustainable
health-related
development and
risk reduction
programmes in
12 countries

Senior Programme Officer, Wendy Neoh, participating in a Community Meeting in Bihar State, India

The background is a solid dark blue color. It features several abstract, concentric circular patterns in a lighter shade of blue. These patterns are located in the top-left, center, bottom-left, and bottom-right areas of the page, creating a dynamic, organic feel.

Our Work Malaysia



Project	Johor Community Preparedness Programme (JCPP)
Objectives	<ul style="list-style-type: none"> To build a culture of disaster preparedness and resilience in the target communities To strengthen multi-stakeholder partnerships between local government agencies and local communities
Project Partners	<ul style="list-style-type: none"> Majlis Keselamatan Negara (MKN) State Government of Johor District offices of Batu Pahat, Segamat and Kota Tinggi
Activities	3 phases; <ul style="list-style-type: none"> DRR Sensitisation Workshop Town Watching Workshop for local government agencies and communities Implementation of DRR activities at community level
Locations	Districts of Batu Pahat, Kota Tinggi and Segamat
Period	March 2010-March 2011
Accomplishments	3 town-watching workshops for government officials (56 participants); 2 town-watching workshop for local community (134 participants);
Projected Budget*	RM95,689

Background

The Johor Community Preparedness Programme (JCPP) is a community-based project aimed to build a culture of disaster preparedness and resilient in the target communities and to strengthen multi-stakeholder partnerships between local government agencies and local communities.

In November 2009, the first phase of this programme started with a sensitisation seminar held at Universiti Tun Hussein Onn. The seminar introduced DRR concepts and highlighted the key role of the local government in the DRR process. In consultation with MKN and the State Office of Johor, three districts were identified for future activities; Batu Pahat, Segamat and Kota Tinggi.

MERCY Malaysia efforts

A series of follow-up meetings was conducted for the three villages (Kg. Seri Dayung, Kg. Rantau Panjang and Kg. Jawa) from May 2010 to February 2011, to identify potential DRR activities for the communities. The District Offices also played an important role to motivate and encourage the representatives from each village, to ensure they understand the importance of DRR efforts for their communities.

Among the activities identified are developing posters and sign boards with DRR messages, village "Gotong-Royong" (a Malay term for Community Spring Cleaning) with Disaster Awareness Campaign, conducting a community First Aid training session, conducting a School Watching Workshop, developing a DRR brochure that includes local knowledge on disaster preparedness as well as basic First Aid tips.



Participants preparing to present the identified risks and hazards during the workshop



As part of the risk mapping activity, the participants were given a camera to identify the potential risks and hazards in the area

**This figure corresponds to the projected budget of the entire duration and not the actual expenditure for a particular year.*



Johor

Project	Outreach Clinic for Pendatang Asing Tanpa Izin (PATI)
Objectives	To provide primary healthcare for immigrant/detainees in Pekan Nenas Detention Camp, Johor
Project Partners	Jabatan Imigresen Johor
Activities	Our clinic includes; <ul style="list-style-type: none"> • Primary healthcare • Dental healthcare • Deworming • Hygiene Kit distribution • Psychosocial activities
Locations	Pekan Nenas Detention Camp
Period	<ul style="list-style-type: none"> • 6 February 2010 • 24 April 2010 • 10 July 2010
Accomplishments	207 adults and children seen over 3 sessions
Projected Budget	RM 2,332

Background

35 volunteers from various backgrounds involved in setting up the clinics and conducting basic medical health screening, health talks and distribution of hygiene kits. Goodies were also distributed to the children as part of the psychosocial activities for the group.

MERCY Malaysia efforts

During the mission, 207 detainees from the detention camp benefited from the outreach clinic. Few cases were referred to the hospital for further treatment. Good teamwork and participation from the volunteers, immigration officers and the crowd resulted in smooth operation of the programme.

The provision of primary healthcare include;

- Blood Pressure and Glucose check
- General medical check-up for the community
- Provision of medicines

Johor



Project	Outreach Clinic for Rohingya Refugees
Objectives	To provide primary health care for Rohingya refugees in Kota Tinggi and Kulai, Johor
Project Partners	<ul style="list-style-type: none"> • United Nations High Commissioner for Refugees (UNHCR) • The Embassy of the Czech Republic
Activities	Our clinic includes; <ul style="list-style-type: none"> • Primary healthcare • Hygiene Kit distribution • Psychosocial activities
Locations	Kota Tinggi and Kulai
Period	<ul style="list-style-type: none"> • 23 January 2010 (Kota Tinggi and Kulai) • 20 February 2010 (Kulai) • 20 March 2010 (Kota Tinggi and Kulai) • 5 June 2010 (Kota Tinggi)
Accomplishments	667 refugees and their children seen over six sessions
Projected Budget	RM 6,188

Background

Rohingya is one of the minority ethnic groups from the Arkan region of western Myanmar. Many of them became stateless and fled to foreign countries to seek refuge. The total estimated population of the Rohingya refugees in Malaysia is approximately 11,277 according to the data collection in 2007 by the UNHCR-Malaysia Country Operation Plan.

MERCY Malaysia, in collaboration with the United Nations High Commissioner for Refugees (UNHCR), have been conducting outreach clinics to provide medical services to the underserved population such as the Rohingyas.

MERCY Malaysia efforts

77 volunteers from various backgrounds were involved in setting up the clinics and conducting basic medical health screening, medical consultations and distribution of hygiene kits. Goodies were also distributed to their children as part of psychosocial activities for the group.

During the mission, 207 detainees from the detention camp benefited from the outreach clinic. Multiple cases of health issues and illness were detected and referred to the hospital for further treatment.

The provision of primary healthcare includes;

- Blood Pressure and Glucose check
- General medical check-up for the community
- Provision of medicines



Johor

Project	Outreach Clinic with the Change For Charity (CFC)
Objectives	To provide primary health care for indigenous community in Kahang area
Project Partners	Malaysia Airlines and supported by Jabatan Hal Ehwal Orang Asli (JHEOA)
Activities	Our clinic includes; <ul style="list-style-type: none"> • Primary healthcare • Hygiene Kit distribution • Psychosocial activities • Spring cleaning
Locations	Kg. Kuala Sengka and Kg. Air Pasir, Kahang
Period	18-19 June 2010
Accomplishments	120 adults and children seen over one session
Projected Budget	RM 7,202 from MAS CFC Collection Project Fund

Background

This programme is an extension of the 'Change for Charity' fundraising campaign, a collaborative 3-year fundraising effort between MERCY Malaysia and Malaysia Airlines to collect in-flight donations from long-haul flights.

MERCY Malaysia efforts

28 volunteers from MERCY Malaysia and Malaysia Airlines set up the clinics and conducted basic medical health screening, health talks and distribution of hygiene kits. Awareness of reproductive health issues to the indigenous community was also promoted. Volunteers from Malaysia Airlines comprised cabin crews that have championed the collection of funds for 'Change for Charity' campaign on their flights.

The provision of primary healthcare includes;

- Blood Pressure and Glucose check
- General medical check-up for the community
- Provision of medicines

Psychosocial activities include;

- Balloon sculpting for children
- Telematch



Volunteers handing out the hygiene kit items



The village children expressed their happiness at our programme

Kuala Lumpur



Project	Dental and Primary Health care Outreach Clinic for Rumah Nur Salam, Chow Kit
Objectives	To provide primary healthcare and dental services for impoverished or unsupervised children living in the Chow Kit area
Project Partners	Yayasan Salam Malaysia
Activities	Our clinic includes; <ul style="list-style-type: none"> • Primary healthcare • Dental services
Locations	Chow Kit
Period	On-going from the year 2009
Accomplishments	321 children seen over 10 sessions
Projected Budget	RM21,000 from the Yasmin Ahmad Children's Fund

Background

Since 2009, MERCY Malaysia in collaboration with Rumah Nur Salam has set up monthly outreach clinics for impoverished or unsupervised children living in the Chow Kit area.

Rumah Nur Salam is a 24-hour activity centre and a safehouse for marginalised children. It was set up in 2007 by Yayasan Salam Malaysia and the National Welfare Department of Malaysia. The safehouse is able to accommodate about 20 live-in children at a time and receives 90 daycare children daily. Many of the children come from unstable family background with very limited income, and others may be unwanted and abandoned.

Most of the children do not receive regular immunisation and primary health care and have limited access to education.

MERCY Malaysia efforts

The outreach clinic provides primary healthcare and dental services to an average of 30 children per session. To manage the crowd of children as they wait their turn, fun activities are conducted by volunteers in the waiting room in Rumah Nur Salam.

A total of 321 children were seen over 10 sessions held at the activity centre.



Dr. Nadia at the consultation table with one of the children at the activity centre



Kuala Lumpur

Project	Disaster Risk Reduction (DRR) for Persons with Disabilities (PWD)
Objectives	To raise awareness on disaster preparedness among PWDs and their caretakers
Project Partners	3 Disabled Persons Organisations (DPOs): <ul style="list-style-type: none"> • Malaysian Association for the Blind (MAB) • Malaysian Federation for the Deaf (MFD) • Society for the Orthopaedically Handicapped Malaysia (SOCAM)
Activities	<ul style="list-style-type: none"> • 3 DRR sensitisation and introduction workshops with each DPO • 1 workshop with Arbeiter-Samariter Bund (ASB)
Locations	Kuala Lumpur
Period	January 2010–May 2011
Accomplishments	A total of 70 participants for 4 workshops
Projected Budget	RM109,147

Background

In 2009, MERCY Malaysia initiated the project to raise awareness on disaster preparedness among PWDs and their caregivers. Three organisations were approached to establish working collaborations to design specific programme modules and informational material that can be used to support this effort. MERCY Malaysia initiated contact with the Malaysian Association for the Blind (MAB), Malaysian Federation for the Deaf (MFD) and the Society for the Orthopaedically Handicapped Malaysia (POCAM).

MERCY Malaysia efforts

MERCY Malaysia conducted DRR sensitisation and introduction workshops with the staff and volunteers of each DPO to gauge their interest in the subject. The introduction workshop explained why disaster preparedness is important, shared some basic concepts in disaster management, and presented case studies on why it is important to be self-resilient towards disaster threats.

A one-day workshop was held with each DPO in order to identify the unique approaches that are necessary in communicating disaster preparedness and DRR messages, as each organisation caters to people with different sets of abilities. Conducted within 23-26 July 2010, the workshops were mainly facilitated by a consultant specialising in DRR training for PWDs through Arbeiter-Samariter Bund (ASB), a German NGO with operations in Yogyakarta, Indonesia.

A one-day session was conducted with ASB to help improve MERCY Malaysia's capacity in approaching PWDs for DRR. It was attended by DRR staff.

As a result, all three organisations have identified the best approaches and main obstacles in running DRR programmes within their communities and are eager to move forward with the project. A total of 70 people participated in these workshops.



MERCY Malaysia Project and Administration Support Shahril Idris (first from right) with the staff of the Malaysian Federation for the Deaf during the workshop held at their office in Puchong, Selangor



Three of the participants with Arbeiter-Samariter Bund representative Rani Sawitri (first from right) and MERCY Malaysia Project and Administration Support Shahril Idris (second from right) during the workshop conducted in our HQ in Kuala Lumpur

Kedah and Perlis



Project	Response to Northern Flood
Objectives	Providing medical and humanitarian aid to flood survivors in Kedah and Perlis
Project Partners	<ul style="list-style-type: none"> • Petronas • UNFPA • CIMB
Activities	Our response includes; <ul style="list-style-type: none"> • Outreach clinics providing primary health care • Distribution of hygiene kits and water purification sachets • Clean-up operation after flood waters have receded
Locations	Seven evacuation centres in Kedah and Perlis
Period	3–8 November 2011
Accomplishments	<ul style="list-style-type: none"> • Treated 668 patients through outreach clinics at 7 evacuation centres • Distributed over 2,500 hygiene kits at 12 locations in Kedah and Perlis.
Projected Budget	RM 111,558

Background

Said to be the worst flood in 30 years, the northern states of Kedah, Perlis, Terengganu and Kelantan was hit by continuous rain in October 2010. Working in tandem with Majlis Keselamatan Negara (MKN) and local authorities in the region, MERCY Malaysia's relief effort was coordinated by the Northern Region Chapter representative, Major (R) Haji Anuar Abd Hamid.

MERCY Malaysia efforts

We treated 668 patients through our outreach clinics at seven evacuation centres in the region. We also distributed over 2,500 hygiene kits at 12 locations in Kedah and Perlis. Water purification tablets were also given out as clean drinkable water is often in short supply in the event of floods. As the water receded, our flood response was geared towards mass clean-up operations, where pails, mops and detergents were distributed to assist the families returning to their homes.



Northern Region Chapter representative Major (R) Haji Anuar Abd Hamid (first from left) handing out hygiene kits in Kangar, Perlis



Major (R) Haji Anuar Abd Hamid (second from right) handing out hygiene kits in Alor Setar, Kedah



MERCY Malaysia programme officer Saw Yu-Shen (centre), together with CIMB volunteers during the clean-up operations in Kubang Pasu, Kedah



Project	Dental and Primary Health care Outreach Clinic for Orang Asli in Pos Kemar
Objectives	To provide primary health care, growth screening and dental services to Orang Asli
Project Partners	<ul style="list-style-type: none"> • Pharmaniaga Berhad • Jabatan Hal Ehwal Orang Asli (JHEOA) Hulu Perak • Kementerian Kesihatan Malaysia (Hulu Perak) • Village Leader of Pos Kemar
Activities	<ul style="list-style-type: none"> • Primary healthcare • Dental services
Locations	Pos Kemar
Period	December 2010 - December 2012
Accomplishments	Type of treatment provided: <ul style="list-style-type: none"> • Dental - 27 patients • Primary Health care - 22 patients
Projected Budget	RM70,000 (cash and value of medicines)

Background

MERCY Malaysia has been working with Pharmaniaga Berhad since December 2010 to deliver medical and dental assistance to the Orang Asli of the Temiar tribe in the Rancangan Pengumpulan Semula (RPS) Kemar in the Temenggor District of Perak. MERCY Malaysia works closely with the JHEOA and KKM in a complimentary partnership to fill health care provision gaps in the area. The clinic covers up to 15 villages of various sizes in the surrounding area.

The Temiar tribe –numbering between 14,000 to 20,000 people– is one of many groups of Orang Asli (Indigenous People) that live in Malaysia and account for less than 1% of the population.

MERCY Malaysia efforts

MERCY Malaysia runs dental and primary health care outreach clinics and focuses on chronic diseases such as asthma and high blood pressure. Best hygiene practices were also promoted, where toothpastes and toothbrushes were distributed during the sessions.

A total of 49 patients were treated at one clinic in 2010 and the number of patients is expected to increase as the clinic becomes more established in 2011.



Dr. Jean-Li Lim (left) and Dr. Mas Suryalis Ahmad (in cap) admiring a baby at the weighing station



Dr. Jean-Li Lim (right) consulting the village head of Kampung Kapong, Penghulu Hamdan @ Amlan ak Anjang

Perak

Project	Dental Outreach Clinic for Kg. Sungai Tiang
Objectives	To provide a more complete health care service to the residence of Kg. Sungai Tiang, supplementing the Ministry of Health
Project Partners	Yayasan EMKAY
Activities	Providing bi-monthly dental services
Locations	Sungai Tiang
Period	2008-2011
Accomplishments	Treated 104 patients over a course of 3 missions in the year 2010
Projected Budget	RM217,906

Background

Together with Yayasan EMKAY, MERCY Malaysia started the Kg. Sungai Tiang outreach project to supplement the work of Ministry of Health of Malaysia in providing a more complete health care service to the residents of Kg. Sungai Tiang. The project's main focus is to provide bi-monthly dental services as it was the main gap that we identified.

The team focuses mainly on providing dental treatment to the beneficiaries as well as conducting basic dental hygiene education. MERCY Malaysia's outreach clinic in Kg. Sungai Tiang has been received well by teachers of the local secondary school who brought their students for screening and treatment.

MERCY Malaysia efforts

MERCY Malaysia runs dental and primary health care outreach clinics. Best hygiene practices were also promoted, where toothpastes and toothbrushes were distributed during the sessions.



A beneficiary being treated at the dentist's chair



Volunteers busy at the registration counter



Volunteers educating the children about teeth brushing as part of the dental hygiene promotion programme



Selangor

Project	Vaccination Clinic for Myanmar Refugees
Objectives	To provide free vaccination services for Myanmar 'persons of concern'* under the age of 18
Project Partners	<ul style="list-style-type: none"> • UN High Commissioner for Refugees (UNHCR) • Taiwan Buddhist Tzu Chi Foundation Malaysia • Embassy of the Czech Republic
Activities	<ul style="list-style-type: none"> • Informational sessions with the Myanmar communities • Vaccination clinics • Follow-up and engagement sessions through community workers
Locations	Ampang and Selayang
Period	<ul style="list-style-type: none"> • Ampang Clinics – July 2010 to April 2011 • Selayang Clinics – October 2010 to December 2011
Accomplishments	<p>From July to December 2010, over 11 clinics:</p> <ul style="list-style-type: none"> • A total of 877 patients was vaccinated (566 patients in Ampang; and 311 patients in Selayang) • A total of 1,499 vaccine doses were given (894 doses in Ampang, and 605 doses in Selayang)
Projected Budget	RM104,404

Background

MERCY Malaysia has been working with the UNHCR, Taiwan Buddhist Tzu Chi Foundation Malaysia and the Czech Republic since 2007 to deliver medical assistance to the 'persons of concern'* living in Malaysia, in particular the Rohingya Myanmar community. This was initiated to address the challenges they face in Malaysia, specifically in terms of healthcare access and provision.

In July 2010, in collaboration with all the partners, MERCY Malaysia started a vaccination programme for Myanmar living in the Ampang-Cheras and Selayang areas. The target beneficiaries for this vaccination clinic are children of the Myanmar community (aged below 18) who have not received their full course of vaccinations.

MERCY Malaysia provides free vaccination services to protect these children and the communities they live in from the following diseases:

- | | |
|-----------------|----------------------------|
| a) Tuberculosis | f) Mumps |
| b) Diphtheria | g) Rubella |
| c) Pertussis | h) Polio |
| d) Tetanus | i) Haemophilus Influenza B |
| e) Measles | j) Hepatitis B |

MERCY Malaysia is one of the few NGOs in Malaysia that run vaccination outreach clinics due to the complex requirement for the vaccine storage and cold chain process, the associated expenses and the complicated patient data management involved. MERCY Malaysia is fortunate to be the first recipient in Malaysia to receive a technologically advanced vaccine refrigerator which was donated by True Energy, a company based in Wales, UK.

MERCY Malaysia efforts

Informational sessions were held at Ampang and Selayang to raise awareness about the benefits of vaccination, address any concerns the parents might have and to promote our vaccination sessions.

MERCY Malaysia works closely with the people through dedicated Myanmar community support workers, whose role includes following up with return patients to ensure their commitment for subsequent appointments. The community workers also make house visits to counsel parents into getting second and third doses of vaccinations for their children when required. Through the partnership with UNHCR, 3-4 interpreters were provided to assist the patients at the clinics as many of the Myanmar can only speak their native language.



Volunteer vaccinator Nor Elena Ramli vaccinating a Myanmar boy

* This is a generic term used to describe all persons whose protection and assistance needs are of interest to UNHCR.

Sabah



Project	Salt Trail – Trek and Treat
Objectives	<ul style="list-style-type: none"> • To provide basic medical screening, dental care, health education, and promoting reproductive health to the villagers • To promote responsible eco-tourism, recreational activities and to create awareness on the importance of preserving the environment
Project Partners	<ul style="list-style-type: none"> • Partners of Community Organisation (PACOS TRUST) • Sabah Parks
Activities	<p>Our programme includes;</p> <ul style="list-style-type: none"> • Basic medical screening • Dental check and extraction • Pap smear tests • Dispensing reading glasses for adults • Distribution of toothbrushes and soaps • Hygiene and health talks • Survey on alcohol misuse • Distribution of colouring kits for children's activities • Installation of communal toilets
Locations	Villages located along the Salt Trail (from Tikolod, Tambunan to Inobong, Penampang)
Period	4–8 May 2010
Accomplishments	A total of 372 beneficiaries were served in this project
Projected Budget	RM23,107

Background

A fourth jointly-organised 'Trek and Treat' programme by Sabah Parks, MERCY Malaysia Sabah Chapter and Partners of Community Organisation (PACOS TRUST) was held from 4-8 May 2010 along the Salt Trail at the Crocker Range Park. 39 participants including medical doctors, parks rangers, nurse, volunteers, guides and porters were involved in this programme.

Trekking along the trail itself is challenging, with the highest point of the route standing at 1,320 metres and the lowest point measuring at 220 metres above sea level. The rugged track involved trekking through primary jungle and across not less than 8 rivers.

MERCY Malaysia efforts

The main objectives for this programme are to provide basic medical screening, dental care, health education and promoting reproductive health to the villagers. As well as providing primary health care, the programme also aims to promote responsible eco-tourism, recreational activities and to create awareness on the importance of preserving the environment.



Volunteers excited with the good turnout at the registration counter



Dr Ang Kee Wei treating a patient at the dental clinic



Project	Intervention Group for Alcohol Misuse (IGAM) Seminar
Objectives	<ul style="list-style-type: none"> • To be a support group in creating awareness on alcohol-related problems • To provide avenue and support for those with alcohol-related problems • To do early intervention programme to prevent damage due to alcohol misuse affecting social and emotional development of children • To do research on alcohol-related issues in Sabah
Project Partners	n/a
Activities	A seminar covering the following contents: <ul style="list-style-type: none"> • An overview of alcohol-related problems • Motivational Interview, Harm Reduction and Relapse Prevention • What's Alcoholic Anonymous and the 12 STEP programme • Detoxification in General Hospital • Findings of a local study by Universiti Malaysia Sabah and Early Intervention Programme (EIP)
Locations	Kota Kinabalu
Period	27 March 2010
Accomplishments	50 participants attended the seminar
Projected Budget	RM 19,030

Background

Alcohol consumption, especially among the indigenous population, men and women alike are well accepted in Sabah. Alcohol is served generously during celebrations, social gatherings and even during mourning period, and the number of intoxicated persons are traditionally viewed as indicative to the event's success. The cultural background of Sabah exposes many youngsters to alcohol early and it would become a strong habit for them when they reach adulthood.

MERCY Malaysia efforts

A seminar on the need for early intervention to address alcohol-related problems was held in March 2010 by the Intervention Group for Alcohol Misuse (IGAM) Sabah under MERCY Malaysia Sabah chapter.

IGAM would be focusing on providing counselling to alcohol dependants and family members who are victims of alcohol misuse. The intervention group would also be researching on alcohol-related issues in Sabah through its Early Intervention Programme (EIP), where the aim is to prevent alcohol misuse from affecting the social and emotional development of children.

At the end of the seminar participant were divided into two groups:-

- Group 1: To focus on support and counselling for those with alcohol-related problems.
- Group 2: To focus on early intervention programmes to prevent damage due to alcohol misuse affecting social and emotional development of children.

Group 1 will continue to empower the group members by training them on proper ways to support and counsel those with alcohol-related problems.

Sabah



Project	Outreach Clinics at Rural Locations in Sabah
Objectives	To provide basic medical screening, dental care, health education and promoting reproductive health to the villagers.
Project Partners	UMW, together with: <ul style="list-style-type: none"> • PACOS Trust (Kampung Inarad, Kampung Balat) • Borneo Nature Tours (Kampung Sonsogon Magandai) • Sabah Forestry Department (Kampung Balat) • KFC Holdings Berhad (Kampung Balat)
Activities	<ul style="list-style-type: none"> • Providing basic medical care, eye screening and health screening • Performing medical follow-up on previous cases • Giving talks on hygiene and health • Giving talks on alcohol awareness • Dispensing hygiene kit to each family • Distributing colouring kits/toys/books to the children
Locations	Kampung Inarad, Kampung Balat, Kampung Sonsogon Magandai
Period	<ul style="list-style-type: none"> • Kampung Inarad (20-22 August 2010) • Kampung Balat (5-7 November 2010) • Kampung Sonsogon Magandai (24-26 September 2010)
Accomplishments	<ul style="list-style-type: none"> • A total of 567 beneficiaries was served: • Kampung Inarad - 204 • Kampung Balat - 186 • Kampung Sonsogon Magandai - 177
Projected Budget	RM 52,068

Background

The selected villages are part of the seven hardcore poor districts in Sabah, which are also on the nation's top list of hardcore poor areas. Access to health care facilities is difficult, where road infrastructure proves to be one of the many hurdles faced by these communities.

MERCY Malaysia efforts

As most of these are repeat projects, MERCY Malaysia was able to perform some form of medical follow-up and see a stop in communicable diseases. The Sabah Chapter has built a rapport with some of the leaders of these communities and MERCY Malaysia's projects are always warmly welcomed by them. These projects are also eye openers for young medical volunteers from outside the state who are posted here, who may now empathise why it is not easy for a patient from the interior to visit hospitals and other medical institutions.



Wong See Wan (first from left) prescribing medicine to beneficiaries



Sarawak

Project	Outreach Clinics at Rural Locations in Sarawak
Objectives	Bringing medical services to the rural area of Sarawak
Project Partners	UMW
Activities	<ul style="list-style-type: none"> • Providing basic medical care, eye screening and health screening • Performing medical follow-up on previous cases • Giving talks on hygiene and health • Distributing colouring kits/toys/books to the children
Locations	<p>In 2010, Sarawak Chapter carried out 6 visits at 5 locations:</p> <ul style="list-style-type: none"> • Kampung Nyalau - 2 visits (2½ hour drive from Miri) • Kampung Tiris - 1 visit (1½ hour drive from Miri) • Kampung Kelulit - 1 visit (1½ hour drive from Miri) • Rumah Sanjan - 1 visit (2½ hour drive from Miri) • Long Singu - 1 visit (5 hours from Miri, 3½ hour from Asap, Belaga)
Period	January–December 2010
Accomplishments	Treated 823 beneficiaries through our outreach clinics
Projected Budget	RM 87, 943

Background

Due to transportation difficulties, many of the beneficiaries were not able to access medical services as often as the people in urban areas.

The visit to Rumah Sanjan, Suai was done to provide medical relief after their longhouse burned down in August 2010. Long Singu also experienced a fire and both locations received fire risk reduction activities to complement their clinics.



Volunteer dentist Dr. Patrick Tie Sing Ho seen here conducting dental examination while the rest of the patients wait for their turn

MERCY Malaysia efforts

80% of the beneficiaries sought the services for dental health care, particularly for tooth extractions. Most beneficiaries were found to suffer from hypertension and diabetes. They were previously unaware of their conditions until medical attention was brought to them.



Long Singu Longhouse Chief Alung Ju also joined in the preparations for the Fire Risk Reduction programme

Nationwide



Project	Views from the Frontlines (VFL) Malaysia
Objectives	<ul style="list-style-type: none"> • To measure the progress of the five priorities for action items defined by the Hyogo Framework for Action (HFA) Malaysia • To gather the views and opinions at local level
Project Partners	Global Network of Civil Society Organisation for Disaster Reduction (GNDR)
Activities	<ul style="list-style-type: none"> • Participated in Global Conference of CSOs for DRR at GNDR London • Attended the regional coordinating meeting in Phnom Penh, Cambodia
Locations	Nationwide
Period	October-November 2010
Accomplishments	Learning points from the two meetings used for work plan for 2011
Projected Budget	RM 47,850

Background

In 2008, MERCY Malaysia was selected as the National Coordinating Organisation (NCO) by the Global Network of Civil Society Organisation for Disaster Reduction (GNDR) to implement the Views from the Frontlines (VFL) action research in Malaysia.

The VFL focuses on five Priorities for Action defined by the Hyogo Framework for Action (HFA).

MERCY Malaysia has successfully implemented the pilot phase of the VFL survey in Malaysia, approaching local governments and community representatives in areas deemed more at-risk to disasters and getting their views on disaster preparedness.

In 2009, MERCY Malaysia has completed the pilot survey for VFL in Malaysia that contributed to the Global VFL Survey 2009.

MERCY Malaysia efforts

In January 2010, MERCY Malaysia was represented at the Global Conference of CSOs for DRR organised and hosted by GNDR in London, attended by close to 80 network members from around the world – CSOs, government agencies and donor organisations.

It was agreed that the VFL initiative was critical and essential, especially in terms of stakeholder engagement, information gathering and promoting collaboration for effective disaster risk reduction. Although the pilot phase has much room for improvement, the VFL was deemed unique as it encourages dialogue and engagement from various stakeholders at all levels; local, national and international.

A regional coordinating meeting was held in Phnom Penh, Cambodia, from 1-4 November 2010, attended by National Coordinators from Malaysia (MERCY Malaysia), Thailand, Philippines, Indonesia, Cambodia, Nepal, India, Pakistan, Bangladesh, Afghanistan and Cambodia. The discussion was centered particularly on the approach, method and means for each country representative to support each other on the implementation of the next phase of the VFL in the regions of South Asia and South East Asia. The meeting was hosted by Save the Earth Cambodia, who is also our ADRRN partner.

MERCY Malaysia has started discussions with GNDR regarding the next phase of the VFL which will begin early 2011. As a whole the VFL hopes to gather and represent local opinion on DRR from across developing nations in the world to a wider audience at the national and international level.



All the participants of the Global Network Workshop in London



Nationwide

Project	School Preparedness Programme
Objectives	<ul style="list-style-type: none"> • To promote a culture of disaster preparedness • To increase capacity of schools and students to respond to disasters
Project Partners	<ul style="list-style-type: none"> • Ministry of Education, Malaysia • Pintar Foundation, MISC through Akademi Laut Malaysia (ALAM)
Activities	<ul style="list-style-type: none"> • School Watching Workshops • School Response Preparedness Workshops • Training of Trainers for MM volunteers
Locations	Johor, Kelantan, Kuala Lumpur, Perak, Sarawak, Terengganu, Negeri Sembilan, Melaka
Period	January-November 2010
Accomplishments	<ul style="list-style-type: none"> • 23 workshops, total of 908 participants (General Fund) • 35 schools covered through Pintar Foundation, a total of 1,400 participants
Projected Budget	RM 281,490

Background

MERCY Malaysia continues to support the Safe School initiative of Ministry of Education by organising the School Watching Workshops (SWW) across the country. The workshops aim to increase the participants' understanding of the importance of disaster preparedness and to provide practical experiences in preparing risk and hazard maps in schools through various exercises.

In 2009, MERCY Malaysia was approached by the PINTAR Foundation to assist them in initiating their school programmes. Both parties agreed on a collaborative working arrangement to strengthen the capacity of disaster preparedness in school children.

MERCY Malaysia efforts

MERCY Malaysia conducted 20 School Watching Workshops in six states, including Kuala Lumpur, Kelantan, Terengganu, Perak, Johor and Sarawak in which a total participation of 771 students. Through the collaboration with Pintar Foundation, from April to July 2010, MERCY Malaysia covered a total of 34 schools participating in the series of School Watching Workshop. In 2010, a total of 2,308 students were trained in the school watching techniques.

A survey conducted among the participants showed that nearly 83% of the students agreed that the workshop changed their perception on disasters because they now know the importance of being prepared. The SWW is therefore an effective tool to spread the idea and knowledge on disasters and preparedness to the communities, as children become active advocates and messengers on disaster preparedness in the society.

MERCY Malaysia also piloted the School Response Preparedness (SRP) Workshop, another component in the School Preparedness Programme. The workshop aimed to provide practical, hands-on activities in schools and will engage students to take responsibility for their own safety and the safety of others during emergency and crisis situation.

MERCY Malaysia developed the modules for the SRP workshop in consultation with partner SEEDS India and discussions with our volunteers. The target group for this workshop is the secondary school students and the workshops were piloted in Melaka, Negeri Sembilan and Terengganu. MERCY Malaysia also received support from ALAM cadets as facilitators at these workshops. 150 students from SMK Rahmat, Melaka; SMK Pasir Panjang, Port Dickson and SMK Lembah Bidong, Setiu Terengganu participated in the workshops.



Participants from SMK Rahmat, Melaka during the hazard mapping module of the SRP Workshop

The background is a solid dark blue. It features several abstract, concentric circular patterns in a lighter shade of blue. These patterns are located in the top-left, center, bottom-left, and bottom-right areas of the page, creating a sense of depth and movement.

Our Work International

Afghanistan

Project	Comprehensive Health Clinic (CHC)
Objectives	<ul style="list-style-type: none"> To respond to emergency, primary and reproductive health (RH) needs To implement the Extended Programme of Immunisation (EPI) to combat polio and measles as well as the Integrated Management of Child Illness (IMCI) programme to decrease child mortality in the catchment area To set up, at the request of the MOPH, a Direct Observation Treatment System (DOTS) room where, in addition to medication, food would also be distributed to tuberculosis patients To render safer home deliveries by training Lady Health Workers
Project Partners	Ministry of Public Health (MoPH)
Activities	<ul style="list-style-type: none"> Attending to a large number of OPD & RH cases on a daily basis Performing laboratory examinations and ultrasound scanning Expanded Programme of Immunisation (EPI) via a mobile team Health education which include topics like infection prevention, early detection of TB & the benefits of vaccination
Locations	Kandahar City
Period	On-going since 2005
Accomplishments	<ul style="list-style-type: none"> 70,704 patients were attended to at the CHC in 2010 and all children under five coming to the facility were checked in line with IMCI routines Around 5,654 lab exams were done, allowing the identification of up to 18 types of diseases suffered in the population Some 35,846 women and children were immunised with BCG, TT, OPV, DPT, Hep B, Hib & measles vaccines
Projected Budget*	USD 127,557 / RM 419,663

Background

For close to ten years, Afghanistan has been embroiled in a conflict that has caused immeasurable suffering among the civilian population. MERCY Malaysia started operations in Kandahar City, Afghanistan, in 2001 to fill the gaps in the existing healthcare provision in the city, focusing especially on reproductive health.

In 2005, at the request of the Afghan Ministry of Public Health (MoPH), it opened the present-day Comprehensive Health Clinic (CHC) in District 3, as an expansion of an earlier mother and child health facility.

MERCY Malaysia efforts

Throughout 2010, though the security situation in Kandahar Province remained precarious, the CHC continued, improved and expanded its services.

In 2010 alone, the CHC managed 129 vaccination outreach clinics for EPI campaigns, with the EPI team earning top place in a comparative study by the MoPH for the Kandahar region.

In addition, the CHC continues to deliver a high standard of reproductive health with a complete set of labour room equipment and ultrasound facilities to detect potential childbirth complications.



A newborn baby being weighed at the maternity ward

* For all our projects, this figure corresponds to the projected budget of the entire project duration and not the actual expenditure for a particular year. Amounts given in both currencies are reasonable estimates subject to exchange rate fluctuations

Afghanistan



Project	MERCY Little Caliph (MLC)
Objectives	To prepare children, both boys and girls, for primary school
Project Partners	n/a
Activities	<ul style="list-style-type: none"> • Conducting classes in basic Pashto, Dari, English, Islamic studies and Mathematics based on a syllabus approved by the Department of Education • Vaccinating the children and providing them with food supplements to improve their health and nutritional status
Locations	Kandahar City
Period	Ongoing since 2003
Accomplishments	<ul style="list-style-type: none"> • Since its inception, four batches of 30 children each have completed the course, the latest one in October 2010
Projected Budget	USD 6,880 / RM 22,635

Background

Started in October 2003, MERCY Little Caliph provides pre-school education for batches of 30 children aged between five and 10. MLC began as a service to make it easier for patients, particularly women, to come to our clinic as well as to our Vocational Training Centre (VTC). Its premises are situated in the Comprehensive Health Clinic building.

MERCY Malaysia efforts

The courses run for two years at a time, covering classes one to two. Classes are offered for six to seven months at a time, six days a week, three-and-a-half hours per day. Refreshments are also provided to pupils during class, supplementing their daily meals with nutritious food.

Even though this project does not fall within the confines of MERCY Malaysia's main focus areas, it is considered a worthwhile contribution to the country's efforts to build a better educated and healthier youth segment among its population.



MERCY Malaysia's Afghanistan Field Office Staff Fazal Omer Agha with two of the children



An everyday scene at the MLC primary school



Afghanistan

Project	Vocational Training Centre (VTC)
Objectives	To equip needy women, particularly widows and women heading-families, with skills allowing them to better fend for themselves economically
Project Partners	<ul style="list-style-type: none"> • Department of Social Affairs and Women Affairs • UN World Food Programme (WFP)
Activities	<ul style="list-style-type: none"> • Training in tailoring, embroidery, carpet weaving and handicraft • Training in basic accounting, management and marketing techniques • Upon completion of the course, to provide the graduates with certificates and tools related to their newly-acquired skills
Locations	Kandahar
Period	Ongoing since 2003
Accomplishments	<ul style="list-style-type: none"> • Since its inception, 633 trainees have graduated from the VTC • In 2010, 72 trainees completed their respective courses in April and 58 in October
Projected Budget	USD 76,351 / RM 251,195

Background

Although the conflict in Afghanistan has affected the population as a whole, women who make up close to 50% of the population have suffered the most. A large number of widows and female heads of the families do not have access to livelihood development.

MERCY Malaysia efforts

Initially set up at the request of the Department of Social Affairs and Women Affairs, the VTC has ten staff, including four female trainers and a project manager in charge of administration, communication and security.

Both trainees and trainers receive food aid once every two months courtesy of World Food Programme (WFP).

The VTC has received many commendations from the Department of Social Affairs and Women Affairs and has been used as an example of successful capacity building for women in the community. The majority of graduates go on to find work in other NGOs, cottage industries and private enterprises or factories where they are paid either on commission or wage basis. This can mean a substantial increase to their family income and empowers them in the current climate of war and uncertainty.



Carpet weaving class at the vocational training centre



Embroidery class at the vocational training centre

Bangladesh



Project	Cleft Lip and Palate (CLIPP) Project
Objectives	<ul style="list-style-type: none"> To treat and correct cleft lip and palate cases among the underprivileged segment of the population To build capacity among the local staff related to CLIPP surgery
Project Partners	<ul style="list-style-type: none"> Dhaka Community Hospital (DCH) Universiti Sains Malaysia (USM)
Activities	<ul style="list-style-type: none"> To conduct free CLIPP reconstructive surgery To conduct CLIPP-related lectures and experience sharing sessions with local medical staff
Locations	Dhaka
Period	October 2008–March 2012 (9 missions)
Accomplishments	A total of 113 patients were treated in 2 missions (56 in March and 57 in October; target to operate on at least 50 patients in each mission)
Projected Budget	USD 189,534 / RM 610,298

Background

Clefts are a major problem in developing countries where millions of children as well as adults suffer from this untreated condition. They are often subjected to social stigma and therefore have to live a life filled with isolation and shame. In Bangladesh alone, there are about 200,000 untreated CLIPP cases. In a country of 150 million and having only 15 plastic surgeons, some of our CLIPP patients are adults.

Founded in 1988, the Dhaka Community Hospital (DCH), a trust-owned non-profit organisation has been providing an integrated and sustainable healthcare delivery system at an affordable cost in both urban and rural areas. Its partnership with MERCY Malaysia dates back to the post-Cyclone Sidr relief operation in November 2007.



Three-year-old Fahim, before and after a right cleft lip repair operation

MERCY Malaysia efforts

The CLIPP Project, planned for three years, is being undertaken in partnership with the DCH as well as Universiti Sains Malaysia which has generously contributed specialised staff on a volunteer basis as well as financial support. One important aspect of the project is the transfer of knowledge and expertise to local surgeons and nurses in the management of cleft patients as well as pre- and post-operative procedures.



Plastic Surgeon Prof. Ahmad Sukari Bin Halim (right) operating on a palate patient, assisted by a local DCH surgeon



Bangladesh

Project	Rainwater Harvesting (RWH) in Arsenic-affected Communities
Objectives	<ul style="list-style-type: none"> • To provide safe arsenic-free water to the arsenic-affected community • To encourage community participation in the RWH system
Project Partners	Dhaka Community Hospital (DCH)
Activities	<ul style="list-style-type: none"> • Commencing material mobilisation and installation of RWH units • Conducting water tests of the stored water • Conducting training sessions for the owners of the RWH units in their operation and maintenance • Forming a Management Committee for each targeted village to strengthen sense of ownership
Locations	Four villages in Pabna (Ruppur, Birahimpur, Durgapur, Sagorkandi)
Period	March–August 2010
Accomplishments	<ul style="list-style-type: none"> • Installation of 100 RWH units for 210 families • Monthly water testing after the installation of the RWH units
Projected Budget	USD 60,000 / RM 193,200

Background

In Bangladesh, some 30-40 million people are drinking arsenic-contaminated water and another 70 to 80 million people are potentially at risk. Although water from deep tube wells and improved dug wells are said to be free from arsenic contamination, excessive exploitation of ground water should be avoided as it is the main reason of arsenic contamination.

Rainwater remains the largest untapped source of water. Pabna, for example, receives more than 2,300 mm/year of rainfall, concentrated during the monsoon season between June and October. Rainwater Harvesting (RWH) allows for this natural supply of clean water to be stored in a safe and sustainable way.

MERCY Malaysia efforts

In close collaboration with the DCH (which gained expertise in RWH through previous projects supported by UNICEF), MERCY Malaysia has been striving to reduce the people's dependency on arsenic-contaminated water by installing RWH units in the selected communities and by training the beneficiaries in their proper use and maintenance. With 100 RWH unit in operation, approximately 1,000 people are able to benefit from the project, as each unit can store and supply a capacity of 3,000 litres of water. Majority of these units are on a sharing basis to maximise the number of villagers receiving arsenic-free water.

As well as the construction of RWH units, sessions on health and hygiene topics and kit distribution were also performed to encourage better practices among the targeted families.



One of the RWH units completed in 2010. The rain water is collected from roof gutters and flowed into the unit via water pipes (top right). The community withdraws water from the tap (bottom left)

Bangladesh



Project	Health and Hygiene Education Programme
Objectives	<ul style="list-style-type: none"> To increase knowledge in the target community of issues related to basic health, hygiene, water and sanitation To provide the beneficiaries with relevant hygiene items
Project Partners	Dhaka Community Hospital (DCH)
Activities	<ul style="list-style-type: none"> Developing and distributing the relevant Information, Education and Communication (IEC) materials to the participants Distributing the relevant hygiene items to the family representatives during the health and hygiene education sessions
Locations	Pabna District
Period	June-September 2010
Accomplishments	A total of 210 family representatives received basic knowledge on the topics presented & a set of hygiene kits items to encourage better hygiene & sanitation practices.
Projected Budget	USD 9,836 / RM152,574

Background

The World Health Organisation (WHO) estimates that 80% of all diseases in the world are attributable to unsafe water and insufficient sanitation. Many of them are preventable by access to clean water and proper knowledge of health and hygiene practices.

In Bangladesh alone, some 125,000 children under five die every year owing to diarrheal diseases. 88% of these are attributed to an unsafe water supply, inadequate health and hygiene practices.

MERCY Malaysia efforts

Realising that practice of good sanitation, water quality and hand washing can reduce diarrheal diseases and hence help lower the morbidity of children, MERCY Malaysia - in close collaboration with the DCH - initiated the health and hygiene education programme in the hope of lowering the incidence of diarrheal diseases among the beneficiaries.

Some of the topics covered during the education programme was rainwater use, prevention of diarrhea, personal hygiene and birth preparedness.



Trainer from Dhaka Community Hospital demonstrating proper hand-washing techniques

Supplementing the education programme, each family representative also received a set of hygiene items as follows:

- bucket (20 litres)
- mug
- water pot
- water purification tablets
- oral rehydration salt solutions
- toothbrushes
- toothpaste
- soap
- soap cases
- toilet brush
- disinfectant
- washing detergent
- nail clippers
- towels
- hygiene kit bag



Cambodia

Project	Oral Rehydration Therapy (ORT) Corner in Angkor Hospital for Children (AHC)
Objectives	To promote the use of Oral Rehydration Salt (ORS) to treat dehydration cases resulting from diarrhea
Project Partners	Angkor Hospital for Children (AHC)
Activities	<ul style="list-style-type: none"> • Setting up of ORT Corner to treat mild dehydration • Educating families of the children on safe and appropriate use of using ORS at home
Locations	Siem Reap Province
Period	Since 2005
Accomplishments	1,852 children were treated (average of 154 children per month)
Projected Budget	USD 8,000 / RM 25,760

Background

Oral rehydration therapy involves the replacement of fluids and electrolytes lost during an episode of diarrheal illness.

ORT can prevent about 90% of child deaths from diarrheal dehydration, and currently helps save more than 1 million children's lives each year.

Using this effective, simple and cheap way of feeding children with frequent small amounts of ORS, thousands of children in Cambodia will be less likely to die from diarrheal diseases.

MERCY Malaysia efforts

Since 2005, MERCY Malaysia has been working with AHC, a community health facility that provides healthcare services especially for children in setting up and supporting an ORT Corner, under the supervision of trained nursing staff.

In addition to the direct care of children, families are also educated on the safe and appropriate use of using ORS at home.



A mother feeding her child the ORS at the ORT Corner

Cambodia



Project	Employment of OPD Service Assistants at Angkor Hospital for Children (AHC)
Objectives	To built capacity through the employment of local service assistants
Project Partners	Angkor Hospital for Children (AHC)
Activities	Two non-medical staff will help with routine tasks and free up more time for the doctors and nurses to see children and parents
Locations	Siem Reap Province
Period	June 2010–May 2011
Accomplishments	Increase in job skills and knowledge of two entry-level OPD staff
Projected Budget	USD 5,000 / RM 16,100

Background

Working under the direct supervision of the Nursing Manager, the two non-medical OPD Service Assistants assigned duties include:

- Calling patients into exam rooms, retrieving medical records and transporting lab slips;
- Ensuring family education pamphlet boxes are full and educational videos are aired consistently;
- Providing directions and escort assistance as needed to lab, x-ray, dental clinic, etc;
- Keeping nurses informed of any family concerns;
- Housekeeping and cleaning duties when required; and
- Act as interpreter for visiting volunteers on certain occasions.

Each assistant is scheduled to attend hospital-based English classes three times a week where English language textbooks as well as electronic Khmer-English dictionaries are provided to supplement classroom learning.



One of the Service Assistants, Lay Chanveasna (right) assisting the dentist

MERCY Malaysia efforts

MERCY Malaysia recognises the OPD Service Assistant as an entry-level position. Hence, this project also looks on ways to increase job skills and knowledge of these employees, providing them the opportunity for growth and advancement to a higher position either at AHC or other organisations.

The two staff have started taking on more responsibilities in AHC, like assisting dentists in basic dental duties.



Lay Chan Veasna and Lam Lao together with our senior programme officer, Wendy Neoh



Cambodia

Project	Upgrading of Aoral Health Centre
Objectives	<ul style="list-style-type: none"> To improve the quality and coverage of the general medical services of the health centres To promote and disseminate best hygiene practices and health education to the surrounding communities
Project Partners	n/a
Activities	<ul style="list-style-type: none"> Monthly Outreach Programmes (OP) and distribution of iodised salt and soap Donation of medical equipments & medicine Reconstruction of health facilities Refresher Training Programme Awareness Raising Programme for Traditional Birth Attendants (TBAs) Donation of a second-hand ambulance for referral cases Donation of a motorcycle for usage during monthly OPs
Locations	Aoral District, Kampong Speu Province
Period	April 2010–June 2011
Accomplishments	<ul style="list-style-type: none"> A total of 8,639 participants attended the OP sessions Total no. items distributed; 11,246 iodised salt, 8,675 soap, 1,565 towels 25 TBAs attended the Awareness Raising Programme 34 health centre staff participated in the Refresher Training Programme Increase in the number of patients compared to 2009 (outpatients by 40%, inpatients by 34%, number of deliveries by 46%)
Projected Budget	USD 189,600 / RM 610,512

Background

Located 48 km from the capital city of Phnom Penh, the Aoral District is accessible by land transport. With a total population of 20,217 spread over the district area of over 2,000 km², approximately 4,500 families are vastly scattered in 69 villages, some of which become inaccessible by road during the rainy season, and located remotely from each other.

With a population density of 10 person per square kilometer, the dispersal of the beneficiaries present a unique problem in ensuring accessible and timely health care services. Logistical barrier is also a challenge faced by these villagers to obtain health care services. Some of the health centres under this district lack health centre staff, medicine and medical equipment. All project activities were planned with close consultation with Kampong Speu Provincial Health Department (PHD) and Kampong Speu Operational District (OD) to maximise the impact on the targeted beneficiaries.

MERCY Malaysia efforts

Through this project, MERCY Malaysia reconstructed the Aoral Health Centre, added an additional block for a maternity ward and donated medical equipments, medicines, an ambulance and a motorcycle for the health centre staff to carry out the monthly Outreach Programme sessions to the villagers.

Besides upgrading the health infrastructure, MERCY Malaysia also focused on strengthening the knowledge and capacity of the health centre staff. A marked improvement was observed in

the performance of the staff after the training programme. Some of the topics covered were immunisation, birth preparedness, diabetes and dengue fever. Information obtained from this training programme was disseminated by these health centre staff to the community members through the monthly Outreach Programme sessions. A total of 26 villages from three different communes were covered. These sessions were well-received by the villagers as the topics discussed were relevant to their daily lives and proved to be a useful source of information.



MERCY Malaysia EXCO Member Norazam Ab Samah (first from left) handing over to Pen Sambo (second from right) an ambulance and a motorbike. Looking over is Hen Heang, MERCY Malaysia Health Project Coordinator in Cambodia (second from left) and Dr Say Savy (right).

Cambodia



Project	Upgrading of Health Centres in Kampong Leang District
Objectives	<ul style="list-style-type: none"> To improve the quality and coverage of the general medical services of the health centres To promote and disseminate best hygiene practices and health education to the surrounding communities through Outreach Programmes (OP)
Project Partners	n/a
Activities	<ul style="list-style-type: none"> Conducted refresher training for the health centre staff (applicable for all health centres) Upgraded the facilities of the health centres through renovation works (applicable for Kampong Hav HC only) Equipped the health centre with relevant medical equipments and drugs (applicable for Kampong Hav HC only) Strengthened the existing referral system by putting in place motorcycle and / or motorboat ambulances Hygiene education & distribution of iodised salt & shampoo
Locations	Four health centres (Kampong Hav, Chranouk, Svay Rumpear, Pralay Meas)
Period	February 2009-March 2010
Accomplishments	<ul style="list-style-type: none"> 36 health centre staff participated in the Refresher Training Programme A total of 11, 948 participants attended the OP sessions: Total no. items distributed; 27,350 iodised salt and 10,200 shampoo sachets
Projected Budget	USD 136,335 / RM 438,998

Background

Kampong Chhnang Province is situated in the centre of the country and is beside the Tonle Sap. The total land surface is 5,521 km² covering eight districts, 69 communes, 561 villages and about 596,000 people. There is one Provincial Hospital, one referral hospital and 29 health centres in Kampong Chhnang Province. Of the eight districts, assessment was focused on Kampong Leang.

Generally, the conditions of the health centres are poor and there is limited access to the nearest hospital. The journey to Kampong Tralach Referral Hospital (KTRH), the nearest referral hospital from Kampong Leang consists of a short boat ride from the port followed by an hour journey by land.



The health centre is equipped with solar panels

MERCY Malaysia efforts

In continuation of the project from 2009, three Outreach Programme (OP) sessions were conducted from January to March 2010, covering 17 villages each month.

Apart from the OP, MERCY Malaysia also handed over one batch of drugs and supplements to Kampong Hav Health Centre in January 2010. We also handed over the completed refurbishment works of Kampong Hav Health Centre to the officials in Kampong Chhnang Provincial Health Department on 15 October 2010. An additional batch of drugs and supplements were also supplied at another session due to the large amount of demand from patients in that area. In addition, they receive a year's supply of gas tanks from MERCY Malaysia in aid of their vaccination activities.



The HC Chief interviewed for a documentary in 2010. In the background is the Kampong Hav Health Centre and one of the tuk-tuk ambulances that was donated by MERCY Malaysia.



Cambodia

Project	Supply of an additional used ambulance and accessories to Kg Tralach Referral Hospital (KTRH)
Objectives	To strengthen the referral services of the hospital
Project Partners	Kg Chhang PHD and KTRH Director
Activities	Handing-over of second-hand ambulance
Locations	KTRH
Period	October 2010
Accomplishments	Further strengthening the referral system of KTRH, as per required by the high demands of cases needing referrals in the targeted area
Projected Budget	USD 20,000 / RM 64,400

Background

On many occasions, the hospital experienced duplication of cases to be referred simultaneously and therefore in need of a second ambulance to cater to the increasing number of cases travelling in and out of the hospital.

MERCY Malaysia efforts

Since the handover of the first used ambulance to KTRH, it has been able to send emergency cases to and from the hospital especially for delivery and trauma cases. This has helped KTRH in establishing its presence by being able to provide transportation for such cases.

Fuel and maintenance costs from the usage of the vehicle will be arranged by the hospital from the fee charged to patients. This self-sustaining system enables the hospital to continue to fully utilise the ambulances.



The second hand ambulance that was donated to Kg Tralach Referral Hospital

Cambodia



Project	School Preparedness Programme (SPP)
Project Partners	Save the Earth Cambodia (STEC)
Activities	<ul style="list-style-type: none"> • Capacity training of STEC staff by MERCY Malaysia • Training of Teachers by STEC • School Watching Workshop for students • Training of Trainers for lecturers from the Provincial Teachers' Training Centre (PTTC) and School Watching Workshop (SWW) for trainee teachers of PTTC • Develop educational materials on DRR in local language
Locations	Battambang (Chhnal Moan Secondary School, Daun Bar Secondary School, Hob Secondary School, Thab Peday Secondary School, Preah Phose Secondary School, Kaos Krala High School and Pedagogy Provincial Teacher Training centre)
Period	10 months
Accomplishments	<ul style="list-style-type: none"> • A total of 194 secondary and high-school students were trained in school watching • 41 teachers and 30 lecturers were trained as trainers in school watching • 230 trainee teachers were trained in school watching • Developed SWW Trainers' Manual and SWW notes
Projected Budget	USD 28,000 / RM 90,160

Background

Cambodia is particularly prone to annual river flooding during the monsoon-raining season as well as tropical storms, droughts and forest fires. High water of flood washes away dams, dikes and distribution structures, destroys crops and livestock, damages homes, temples, schools, clinics, roads and other community infrastructure; and can also cause loss of human lives.



Participants in discussion during the School Preparedness Programme

MERCY Malaysia efforts

Together with a local partner, Save the Earth Cambodia, MERCY Malaysia shared the knowledge and experiences in implementing the SPP in Malaysia.

SPP Cambodia was piloted in Kaos Krala, Battambang, involving one teacher training centre, one high school and five secondary schools. Six village leaders, six commune leaders and six members from the school management committee also participated in the programme.

Similar to the SPP conducted in Malaysia, the programme aims to increase participants' understanding on the importance of disaster preparedness and to provide practical experiences in preparing risk and hazard maps in school through various exercises. In Battambang, the materials were adapted to the local language and focused on local risks, hazards and disasters.



Chile

Project	Primary Health Care (PHC) and Psychosocial Intervention
Project Partners	Municipality and Family Healthcare Centre of Constitución
Activities	<ul style="list-style-type: none"> • Worked with Cerro Alto Family Health Centre and provided PHC coverage to affected people housed at temporary settlements • Worked with Psychosocial Teams of Cerro Alto Family Health Centre and Hospital • Constitución on psychosocial intervention
Locations	Constitución
Period	24 March–16 April 2010
Accomplishments	Treated 407 patients supplementing efforts from Project Partners
Projected Budget	USD 17,208 / RM 55,410

Background

The Chile earthquake occurred on 27 February 2010 rating a magnitude of 8.8 on the Richter scale. It ranks as the sixth largest earthquake ever to be recorded by a seismograph and strongly felt in six Chilean regions. The earthquake triggered a tsunami which devastated several coastal towns in south-central Chile and tsunami warnings were issued in 53 countries.

MERCY Malaysia efforts

Through the assessment team that went to Chile on 6 March 2010, MERCY Malaysia was requested to temporarily supplement PHC system with a medical team to work with the local teams in PHC centres, three PHC sub-centres and 11 outreach clinics. We were also asked to deploy experienced psychosocial specialists as external resource worker to help set up proper mental health response systems and participate in psychosocial sessions in Constitución and Iloca.



Dr Sharima Ruwaida Abbas carrying out psychosocial activities with local children in Chile



Volunteers assessing the health status of a beneficiary

China



Project	Child-Led Disaster Risk Reduction (DRR)
Objectives	To design and implement DRR projects to build resilience towards disasters
Project Partners	Save the Children (UK), China Programme
Activities	<ul style="list-style-type: none"> • Building DRR capacity of Save the Children staff • Training children, teachers and community volunteers in DRR to become peer educators in their respective schools and communities • Facilitating the community-led implementation of action plans to enhance school and community safety
Locations	Sichuan Province, particularly the counties of An and Pingwu
Period	April 2009–April 2011
Accomplishments	As of 2010, this project has reached out to more than 5,000 children and 3,500 community members in 26 schools and seven communities
Projected Budget	USD 170,000 / RM 547, 400

Background

The Sichuan earthquake in 2008 left catastrophic effects in China. 45 million people were affected and almost 80 percent of buildings collapsed in many areas. In 2006, the government of China enacted The Opinions for Strengthening Disaster Risk Reduction Work in School. However, since the voice of children are not portrayed actively in disaster preparedness plan or policies, SCUK China Programme together with MERCY Malaysia embarked on the 2-year Child-Led Disaster Risk Reduction project in Sichuan.

MERCY Malaysia efforts

Beginning of April 2009, MERCY Malaysia supported SCUK China Programme in acquiring technical knowledge to improve the capacities of their team in DRR. The DRR team of SCUK China Programme conducted a series of trainings with children and communities in the counties of An and Pingwu in the Sichuan province.

The children were trained in DRR as peer educators together with community volunteers. The project has encouraged not just children, but also the local communities, school authorities and local government agencies to learn more about disaster preparedness and awareness. Among the DRR efforts taken at the community level include developing promotional materials such as booklets and posters, as well as physical improvement in the form of railings, water catchment and other facilities that significantly improve disaster preparedness in schools and communities.



One of the DRR workshops with child peer educators in session



First Aid training with the kindergarten teachers



Project	Reconstruction of El-Wafa Hospital
Project Partners	El-Wafa Medical Rehabilitation and Specialised Surgery Hospital (El-Wafa Hospital)
Activities	<ul style="list-style-type: none"> • Reconstruction of three main buildings • Added new facilities to support rehabilitation efforts for the physically disabled
Locations	Gaza City
Period	8 November 2009–10 June 2010
Accomplishments	<ul style="list-style-type: none"> • Expansion in number of beds, from 51 to 90 • Construction of gyms, swimming pools and training halls for various forms of professional therapy
Projected Budget	USD 506,162 / RM 1,629,842

Background

The conflict in late 2008 has further deepened the humanitarian crisis facing the people of Gaza. The attacks caused severe damage to facilities and buildings including El-Wafa Hospital - one of the major health facilities in Gaza - leaving the limited health services in Gaza completely overwhelmed.

Before the attacks, El-Wafa Hospital was the only hospital with rehabilitation facilities in Gaza and Gaza City. It had the state-of-the-art equipments, was the only rehabilitation centre for the population of Gaza and conducted outreach programmes to serve the population in other vicinities.

MERCY Malaysia efforts

MERCY Malaysia started the construction of El-Wafa Hospital on 8 November 2009 and the project was completed on 10 June 2010. The project involves rehabilitation and reconstruction of three main buildings of the hospital which was destroyed and severely damaged. We also added a new therapeutic garden in the hospital compound, a new and improved water filtration system for the entire hospital and a new central Uninterruptible Power Supply (UPS) system for the operating theatre.



El-Wafa Surgery Building before (left) and after (right) the reconstruction efforts



MERCY Malaysia Field Office Staff Dr Khamis El Essi with a suggestion box in the El-Wafa Hospital

Gaza



Project	El-Wafa Medical Rehabilitation Outreach Programme
Project Partners	El-Wafa Charitable Society
Activities	House visits for medical rehabilitation to patients registered with El-Wafa Hospital
Locations	Rafah City
Period	July 2009–October 2011
Accomplishment	<ul style="list-style-type: none"> • 202 patients completed their sessions and was able to continue their daily activities normally • Provided 12,044 therapeutic sessions to the beneficiaries • 129 cases were provided with technical aids and orthotic equipments (wheelchairs, crutches, braces, etc.) • 272 cases were prescribed medication • 40 cases were referred to other programmes for more medical-related services
Projected Budget	USD 200,790 / RM 646,544

Background

Disability has become a major issue for Palestinians who survived the prolonged war. Most of the injured become disabled while majority of victims that were hit by random shelling experience severe physical and psychological effects.

El-Wafa Hospital, being the only fully equipped rehabilitation facility in the Gaza Strip is currently the main medical centre for the victims of war to obtain post-medical treatments. The outreach programme extends the rehabilitation services to the people in the southern part of Gaza, since El-Wafa Hospital is located up north and access to the hospital would be challenging for the patients.

MERCY Malaysia efforts

This project is the first medical rehabilitation outreach programme for MERCY Malaysia. MERCY Malaysia, in collaboration with El-Wafa Charitable Society reaches out to those in South of Gaza Strip every day. The team travels to Rafah City to do a house-to-house visit to provide medical rehabilitation in terms of physiotherapy, occupational therapy and primary health services to the patients who have registered with the hospital.

Based on our evaluation and further assessments and recommendations from El-Wafa Hospital after the 12-month duration, there are still needs for outreach medical rehabilitation services for the population in Rafah. In view of this, the project continued for another year, beginning November 2010 to October 2011.



MERCY Malaysia Planning and Development Senior Adviser Dr Paul Mettler (first from right) with the staff of El-Wafa Medical Rehabilitation Outreach Programme



Project	Emaar Psychosocial Programme at the Al-Amal Centre for Care and Psychological Consultation
Project Partners	Emaar Society
Activities	<ul style="list-style-type: none"> • Conducted a field survey of the Southern Governorate • Initiation of services for the target group • Through the centre and home visits the following services and programmes were offered: <ul style="list-style-type: none"> - Psychotherapy - Pharmacotherapy - Counselling • Initiation of new services for the target group: <ul style="list-style-type: none"> - Electroencephalography (EEG) - Speech Therapy • Produced publications and conducted promotional sessions
Locations	Khan Younis
Period	August 2009–June 2011
Accomplishments	<ul style="list-style-type: none"> • 42 cases treated with EEG • 1231 cases seen by the speech therapy unit • Presented findings of a study entitled, “Indicators of psychological disturbance to the residents of the border areas of South of the Gaza Strip” • Positive response from the target group for community programmes, especially the Student Support Programme
Projected Budget	USD 107, 360 / RM 345, 700

Background

The continuous conflict in this region has affected the victims psychologically which scars them deeply for many years. They need intense efforts to rebuild their character and relieve them of their suffering. The efforts should also consider their culture and norms in order to provide the much needed support.

MERCY Malaysia signed an MoU with Emaar Society in June 2009. In August 2009, the team established the Al Amal Centre for Care and Psychological Consultation and by September 2009, the centre was up and running.



A psychologist from the Al-Amal Centre (first from left) visiting one of the beneficiaries (in yellow) outside her home

MERCY Malaysia efforts

Since its inception, this programme has successfully attended to over 1,150 families and provided specific psychotherapy to over 530 individuals.

In addition to existing services, the Al-Amal Centre has introduced two new services to the community. The electroencephalography (EEG) services at the Al-Amal Centre is the first to be available in the southern region where previously the target group would spend substantial sums to receive this service elsewhere. The speech therapy unit was also well-received, especially to treat children with hearing problems.

The community programmes carried out by the Al-Amal Centre was also received positively. The Student Support Programme was especially effective in approaching adolescents in need of psychosocial support.

India



Project	Primary Healthcare and Maternal and Child Healthcare, Biratpur Health Centre in Bihar
Objectives	<ul style="list-style-type: none"> • To provide the beneficiaries with basic health facilities • To reduce the rate of maternal and infant mortality rates by promoting safe pregnancy and delivery • To promote and disseminate best hygiene practices and health education to the surrounding communities.
Project Partners	SEEDS India
Activities	<ul style="list-style-type: none"> • Primary healthcare • Maternal and Child Healthcare • Community meetings • DRR Trainings
Locations	Biratpur Health Centre, Saharsa District, Bihar
Period	Three years
Accomplishments	<ul style="list-style-type: none"> • Total Outpatient Department (OPD) cases: 22,192 • New OPD cases: 15,844 • Total Antenatal Care (ANC): 544 • Total Postnatal Care (PNC): 43 • Deliveries: 20
Projected Budget	USD 339,800 / RM 1,094,156

Background

Following MERCY Malaysia's response to the floods when the eastern embankment of the Kosi River breached back in 2008, MERCY Malaysia embarked on this project as a long-term effort to provide quality primary health care to the community of Biratpur and other neighbouring rural areas in the Saharsa district. MERCY Malaysia's health centre is located in one of the least developed regions in Bihar. As most of the men now work in other states of India, the majority of the people left in the villages are women, children and senior citizens.

Mortality rates of infants and children have risen substantially together with the maternal and mortality ratio. Malnutrition among children is a serious problem in the district as is the spread of communicable diseases - especially malaria and tuberculosis - among the community.

As the nearest hospital is more than an hour away by car, MERCY Malaysia's presence is essential in providing accessible health care services to the community of Biratpur and the adjoining rural areas.

MERCY Malaysia efforts

In addition to healthcare services, we carry out community meetings and health outreach programmes with the communities in the villages located within a 5 km radius of the health centre. A total of 25 villages were reached through the meetings where various topics such as family planning, teenage pregnancies, immunisation, personal hygiene and basic home first aid were discussed. Training of Traditional Birth Attendants (TBAs) were conducted at the health centre and risk reduction activities were also carried out with the surrounding schools.



Local Staff Dr. Vinay Kumar treating a patient at the clinic



Project	Capacity Building for Local Authorities and Civil Society Organizations (CSOs) on DRR in Indonesia
Objectives	To build DRR capacities in local governments in Java
Project Partners	Society for Health, Education, Environment and Peace (SHEEP)
Activities	<ul style="list-style-type: none"> • Capacity Building Workshops with 17 CSOs in Indonesia on CBDRM • Capacity Building Workshops with 20 Local Government representatives from Java on having synergy with CSOs • Gathering best practices and good case studies from CSOs in Indonesia based on experiences after • CBDRM workshop with SHEEP and MERCY Malaysia
Locations	Yogyakarta
Period	<ul style="list-style-type: none"> • Phase 1: April 2009-January 2010 • Phase 2: April 2010-April 2011 (estimated)
Accomplishments	Compilation of best practices from CSOs' CBDRM activities from MERCY Malaysia and SHEEP's last collaboration in 2009. Owing to the Mount Merapi eruptions, publication was delayed to 2011
Projected Budget	USD 37,000 / RM 119,140

Background

In 2009, MERCY Malaysia and the Society for Health, Education, Environment and Peace (SHEEP) entered into a partnership to work on Community Based Disaster Risk Management (CBDRM) capacity building with CSOs who work with local communities.

Through a series of planned trainings and workshops, MERCY Malaysia looks to develop capacities as well synergy between CSOs and local governments to encourage more effective working relationships in reducing the risks and vulnerabilities of communities across Indonesia. Local governments in Java were selected to pilot the effort, in hopes that the experience and best practices can later be replicated in other parts of Indonesia.



Participants preparing to present during the workshop held in Yogyakarta

MERCY Malaysia efforts

Officials from the Disaster Management Agency (provincial and district level), local authorities (both from the executive and legislative side), and other relevant agencies from 15 districts across four provinces in Java attended a Regional Workshop on DRR for Local Governments to discuss current efforts and future ways of strengthening disaster preparedness in Indonesia as well as collaboration and engagements with other stakeholders. 20 participants attended this two-day workshop in Yogyakarta.

MERCY Malaysia's collaboration with SHEEP extends to developing information, education and communication (IEC) materials – including simple games - targeted at a wider audience, from schools to DRR practitioners. A compilation of best practices from our activities together is now being developed for publishing in hopes that these initiatives can be shared and replicated in Indonesia and across the region.

Indonesia



Project	Revising Local Action Plan and Empowering Journalists on Information Dissemination
Objectives	<ul style="list-style-type: none"> • To define lessons learnt from previous disaster management systems • To revise the Padang City local DRR Action Plan • To develop a support system for journalists involved in disaster reporting
Project Partners	Komunitas Siaga Tsunami (KOGAMI)
Activities	<ul style="list-style-type: none"> • Workshop on information gathering and setting the main objectives for the DRR Action Plan revision with key stakeholders • Consultation meeting with key stakeholders and public consultation workshop • National workshop for journalists in disaster reporting and development of a guidebook for such journalists
Locations	Padang
Period	April 2010 – March 2011
Accomplishments	<ul style="list-style-type: none"> • Information gathering workshop conducted in May 2010 • Drafting of the revised Action Plan initiated, should be finalised in the first quarter of 2011 • Conducted a workshop for journalists from around Indonesia to raise awareness about disaster reporting • Planning for a guidebook on the proper methods and ethics in disseminating information about disasters, publication of book is scheduled for 2011
Projected Budget	USD 50,880 / RM 153,172

Background

Based on the 2004 tsunami experience, the city of Padang was pro- active in preparing the Disaster Risk Reduction Action Plan in 2007. After the 2009 earthquake, it was felt that the Plan needed to be improved to be more effective in disaster mitigation.

MERCY Malaysia efforts

Following MERCY Malaysia's response to the Padang earthquake in September 2009, a partnership was formed with KOGAMI through the Asian Disaster Reduction and Relief Network (ADRRN) to focus on additional DRR initiatives that needed to be taken in Padang.

Together with KOGAMI, MERCY Malaysia supported the process of revising the Padang City DRR Action Plan in collaboration with the authorities and other stakeholders, at the same time conducted a workshop for journalists from around Indonesia to raise awareness about disaster reporting. A guidebook was mooted to document the proper methods and ethics in disseminating information about disasters, and is scheduled for publication in 2011.



MERCY Malaysia Disaster Risk Reduction Programme Officer Ashaari Rahmat in discussion with the participants of the workshop



Indonesia

Project	Mentawai Earthquake and Tsunami Relief
Objectives	To provide emergency medical and non-medical relief to the affected islanders
Project Partners	n/a
Activities	Mobile clinics, distribution of family hygiene kits, mosquito nets, and food and drinking water
Locations	Pagai Selatan, Sikakap, Pagai Utara and Sipora Selatan, Mentawai Islands
Period	October–November 2010
Accomplishments	Within seven days; <ul style="list-style-type: none"> • 557 patients were treated in 10 villages • 1,000 family hygiene kits • 1,000 mosquito nets were handed over to the local authorities for distribution • 99 cartons of instant noodle and 91 cartons of bottled water was distributed
Projected Budget	USD 22,050 / RM71,000

Background

On 25 October 2010, a 7.2-magnitude earthquake struck off the Mentawai Islands in West Sumatra. It triggered a tsunami of up to three metres high, reaching as far as 400 metres from the beach and affecting the three sub-districts of Sikakap, Pagai Utara and Pagai Selatan. On 27 October, there were two strong aftershocks (5.2 and 5.1, respectively).

MERCY Malaysia efforts

MERCY Malaysia deployed an assessment team on 28 October. On 31 October, a second team was dispatched to assist with the relief efforts. With the challenging weather conditions, combined with the dispersal of beneficiaries on different islands on the archipelago, the MERCY Malaysia team island-hopped on a 60-foot Arimbi cruiser to provide medical and humanitarian assistance.

The team travelled around the affected area to offer primary healthcare services and to distribute family hygiene kits -containing locally procured items such as towels, sanitary pads, soap and washing detergent- as well as food and drinking water. In addition, mosquito nets were handed over to the local authorities for distribution to the affected communities.



MERCY Malaysia EXCO Member Norazam Ab Samah (fifth from right) handing over the aid for 45 families of Tumale



Local volunteer (left) treating beneficiaries

Indonesia

Project	Training in Total Hospital Facility Management (THFM) for Rumah Sakit Umum (RSU) Gunung Sitoli, and Professional Development and Capacity Building for RSU Nursing Staff
Objectives	To enrich the hospital staff's knowledge of common practices in other hospitals as per international standards
Project Partners	<ul style="list-style-type: none"> • Radicare • Pusat Perubatan Universiti Kebangsaan Malaysia (PPUKM)
Activities	Providing training in THFM and capacity-building for hospital staff
Locations	Gunung Sitoli, Nias, and Kuala Lumpur
Period	2008–July 2011
Accomplishments	In 2010, 125 hospital staff underwent a variety of trainings both in Nias and Kuala Lumpur, thus bringing the total number of certified participants to 244.
Projected Budget	USD 38, 820 / RM 125,000

Background

On 28 March 2005 an 8.7-magnitude earthquake struck off the west coast of northern Sumatra. 1,346 people lost their lives, 220 of them in Gunung Sitoli, the largest town on Nias Island. Hundreds of buildings were destroyed and nearly half of Gunung Sitoli's population fled the town.

MERCY Malaysia efforts

MERCY Malaysia was appointed to manage the master plan for the reconstruction of the RSU Gunung Sitoli, the main referral hospital in Nias. It was completed in 2008.

Since then, MERCY Malaysia has, in close collaboration with its two partners, focused on THFM and capacity development of the hospital by offering a multitude of trainings to its staff.

As a result of these trainings, six new departments could be set up at the hospital, namely;

- Central Sterile Supply Department (CSSD)
- Facilities Engineering Maintenance Services (FEMS)
- Biomedical Engineering Maintenance Services (BEMS)
- Clinical Waste (CW)
- Cleansing Services (CS)
- Linen and Laundry Services (LLS).



A nurse participating in the standard emergency procedure during the training facilitated by PPUKM in Rumah Sakit Gunung Sitoli, Nias



Radicare staff giving a presentation on Total Facilities Hospital Management in Rumah Sakit Gunung Sitoli, Nias



Indonesia

Project	Reconstruction of Community Health Centre (CHC) Gasan Gadang
Objectives	To reconstruct an earthquake resistant CHC
Project Partners	n/a
Activities	The reconstruction was carried out in coordination with the Department of Health, the Department of Public Works and the Government of the Padang Pariaman District
Locations	Gasan Gadang, Padang Pariaman, West Sumatra
Period	December 2009 – May 2010
Accomplishments	The reconstruction proceeded as planned and the CHC was handed over to the District Health Office on 22 May 2010
Projected Budget	USD 268,758 / RM 865,400

Background

On 30 September 2009, a 7.6-magnitude earthquake struck off the coast of Padang, West Sumatra. The death toll was estimated at more than 1,100 and some 1,200 persons were seriously injured. An estimated 250,000 households were affected through the total or partial loss of their homes and livelihoods. The worst affected regency was that of Padang Pariaman where six CHC, serving close to 450,000 people, were badly damaged and needed to be rebuilt.

MERCY Malaysia efforts

Subsequent to its immediate emergency response, MERCY Malaysia obtained approval to reconstruct the CHC in Gasan Gadang, Padang Pariaman, which has a catchment area of some 2,500 households and provides primary as well as mother and child health care.

Construction began in late 2009 following the signing of an MOU with the Regent of Padang Pariaman. In addition to the main administrative building, the centre also includes housing for doctors and paramedics.

The official handover on May 22, 2010, was attended by Bapak Muslim Kasim, the Regent of Padang Pariaman, Pn. Norlin Othman, the Medan-based Consulate General of Malaysia, and Dato' Dr. Ahmad Faizal Mohd. Perdaus, the President of MERCY Malaysia.



Front view of the completed health centre in Gasan Gadang



Regent of Padang Pariaman, Bapak Muslim Kasim cutting the ribbon to launch the handover ceremony on 22 May 2010. With him are Consulate General of Malaysia, Norlin Othman and MERCY Malaysia President Dato' Dr. Ahmad Faizal Mohd. Perdaus



Project	Maldives Community-based Disaster Risk Reduction Management
Objectives	<ul style="list-style-type: none"> • To increase disaster preparedness for island communities • To engage community members to take positive steps to reduce their disaster risk
Project Partners	CARE Society Maldives
Activities	Participatory risk assessment, fire and safety training, first-aid training, task force training and drills at local schools.
Locations	Islands of Baarah, Dhidhdhoo, Kulhudhufushi & Nolvivaram
Period	24 months (ended in June 2010)
Accomplishments	<ul style="list-style-type: none"> • 393 community members, 50 teachers and 320 students were trained • 15,000 people in the 4 islands benefited from this project
Projected Budget	USD 40,555 / RM 130,586

Background

In December 2004, Maldives was affected by the Indian Ocean tsunami. While the death toll was less than 100, the impact was nonetheless dramatic – 25% of inhabited islands were severely damaged or destroyed; 10% were totally destroyed; 14 islands had to be evacuated; and total losses were estimated at USD 472 million equating to 62% of the nation's Gross Domestic Product (GDP).

MERCY Malaysia efforts

MERCY Malaysia started the initial assessment in 2008 and in 2010, the project was at the final phase. The project activities were focused on preparation of an Island Disaster Management Plan and conducting a Community-based Disaster Risk Reduction (CBDRR) project. Together with our project partner, we implemented the Island Disaster Management Committees Risk Reduction and Contingency Plan for the communities.



A participant learning the proper way of using a fire extinguisher



Participants are also taught how to effectively carry an unconscious person as part of the training



Participants planning the evacuation route



Myanmar

Project	Reconstruction of 13 Health Centres in Myanmar
Objectives	To provide the Dedaye township with a cyclone-resistant health infrastructure
Project Partners	Ministry of Health
Activities	<ul style="list-style-type: none"> • Reconstruction and rehabilitation of 13 health facilities • Health promotion activities • Purchase of two boats for midwives to carry out their duties in villages not reachable by land
Locations	Dedaye township, Ayeyarwaddy delta
Period	December 2008–November 2010
Accomplishments	The reconstruction/rehabilitation, carried out in collaboration with a local contractor, was completed on schedule
Projected Budget	USD 195,816 / RM 630,528

Background

In May 2008, Myanmar's Ayeyarwady delta was devastated by cyclone Nargis. An estimated 2.4 million people were affected and 37 townships in the Ayeyarwady and Yangon Divisions were badly affected.



Nauk Pyan Doe Sub-rural Health Centre



The maternity ward at the Dedaye Township Hospital

MERCY Malaysia efforts

With the agreement of the Ministry of Health of Myanmar, MERCY Malaysia's volunteer technical team drew up plans to reconstruct and rehabilitate 13 health facilities based on the build-back-better principle on land donated by the affected communities. The actual construction work was carried out by a local contractor with the support of the respective communities.

Village

Type of Health facility:

- | | |
|------------------|-------------------------|
| 1. Chaung Hpyar | Sub-rural Health Centre |
| 2. Toe | Rural Health Centre |
| 3. Ah Kei | Sub-rural Health Centre |
| 4. Chaung Gyi | Sub-rural Health Centre |
| 5. Nauk Pyan Doe | Sub-rural Health Centre |
| 6. Ma Yan Nauk | Sub-rural Health Centre |
| 7. Taw Chaik | Sub-rural Health Centre |
| 8. Su Ka Lat | Sub-rural Health Centre |
| 9. Ne Young Kar | Station Hospital |
| 10. Ywa Tan Shey | Sub-rural Health Centre |
| 11. Kyonda | Station Hospital |
| 12. Thoung Dan | Sub-rural Health Centre |
| 13. Dedaye | Township Hospital |

Myanmar



Project	Water, Sanitation and Hygiene (WASH) Project
Objectives	<ul style="list-style-type: none"> • To promote personal hygiene as a mechanism for disease prevention • To encourage the communities involved to seek proper medical treatment at local health facilities by making them understand the risks involved by not properly using medication as well as traditional remedies
Project Partners	n/a
Activities	<ul style="list-style-type: none"> • Health promotion campaign carried out in collaboration with local township hospitals • Distribution of hygiene kits
Locations	Five sessions on health promotions: <ul style="list-style-type: none"> • two villages in Kunyangon Township • two in Khawmu Township • one in Yangon Township One hygiene kit distribution in one village in Kunyangon Township
Period	September 2010 (ongoing, expected completion in 2011)
Accomplishments	<ul style="list-style-type: none"> • A total of 790 persons participated in the health promotion campaign • A total of 260 hygiene kits were distributed
Projected Budget	USD 134,291 / RM 432,417

Background

Following the completion of the reconstruction and rehabilitation of 13 health facilities in the Dedaye Township at the end of 2010, MERCY Malaysia has decided to shift its focus on disease prevention by organising health promotion campaigns.

MERCY Malaysia efforts

Started in late 2010, this project will also include the construction of latrines as well as the provision of safe wells in two selected resettlement areas (Kunyangon and Khawmu) for survivors of Cyclone Nargis in May 2008.

Our hygiene kit contains the following items:

- | | |
|---------------------------|--------------------------|
| - slippers | - combs |
| - T-shirts | - nail clippers |
| - panties | - antiseptic shower soap |
| - longyi (Burmese sarong) | - detergent |
| - sanitary pads | - mugs |
| - towels | - buckets |
| - toothbrushes | - water filters |
| - toothpastes | - packing bag |



MERCY Malaysia's Myanmar Field Office Staff Phyu Phyu Khin (standing, right) conducting the health and hygiene promotion programme



Myanmar

Project	School Safety Disaster Education & Community-based Mangrove Rehabilitation Project
Objectives	To create awareness about DRR and build resilience among communities at risk
Project Partners	Mingalar Myanmar
Activities	<ul style="list-style-type: none"> • Training of Mingalar Myanmar staff in school watching workshops and monitoring their implementation • Training by Mingalar Myanmar of local volunteers and teachers to conduct workshops locally • Supporting a community-based mangrove rehabilitation workshop to create awareness of mangroves as protection against storm surges and erosion • Early warning workshops and simulation exercises to identify hazards and to respond accordingly • Development and distribution of DRR information material and upgrading of infrastructure and utilities (jetties and generators)
Locations	Ayeyarwady delta (Bogalay, Pyapon and Dedaye townships)
Period	April 2010–March 2011
Accomplishments	<ul style="list-style-type: none"> • Student and teachers produced self-assessed hazard maps and action plans for disaster mitigation as well as emergencies during school hours • Mangrove replanting started in the respective target areas • Villages set up specific committees (e.g. warnings, rescue, village security, first aid and food security)
Projected Budget	USD 118,000 / RM 379,960

Background

In May 2008, Myanmar's Ayeyarwady delta was devastated by Cyclone Nargis, in part because there was no proper early warning system in place and the inhabitants of the delta had not been adequately trained in disaster risk reduction.

In 2009, MERCY Malaysia initiated the Community-based Disaster Risk Management (CBDRM) programmes with Mingalar Myanmar, our local NGO partner. Following the 2009 workshops, Mingalar Myanmar then conducted activities on the ground with at-risk communities in villages in three townships. With Mingalar Myanmar, MERCY Malaysia's CBDRM efforts resulted in at-risk communities taking pro-active disaster preparedness measures.

MERCY Malaysia efforts

In 2010, we decided to continue our CBDRM efforts in Myanmar by expanding existing activities. We decided to include schools as part of the key beneficiary groups, as well as to diversify DRR initiatives in communities through activities such as mangrove rehabilitation, early warning workshops, minor infrastructure repairs and dissemination of IEC materials.



A Mingalar Myanmar staff (standing, in yellow) conducting an Early Warning Workshop with the local community

Pakistan



Project	Relief Efforts in response to Pakistan Flood
Objectives	To provide humanitarian assistance to flood survivors through medical services and hygiene campaign
Project Partners	Pakistan Islamic Medical Association (PIMA) & PATTAN Development Organisation
Activities	<ul style="list-style-type: none"> • Setting up of four static clinics and three mobile clinics throughout Pakistan • Distribution of 1,000 hygiene kits to families displaced by the flood • Hygiene education, hygiene campaign and awareness
Locations	Charsada, Pabbi, Kot Adu, Sindh, Malakund, Mangora, Bunnair, Banda Mulla Khan
Period	8 August-31 December 2010
Accomplishments	58,494 patients were treated
Projected Budget	USD 107,764 / RM 347,000

Background

The 2010 Pakistan floods began in late July 2010, resulting from heavy monsoon rains in the Khyber Pakhtunkhwa, Sindh, Punjab and Balochistan regions of Pakistan and affected the Indus River basin. Approximately one-fifth of Pakistan's total land area was underwater and according to Pakistani government data the floods directly affected about 20 million people, mostly by destruction of property, livelihood and infrastructure, with a death toll of close to 2,000.

Statistics from our static and mobile clinics throughout Pakistan:

AREA	STATIC	MOBILE	TOTAL
Charsada	5,599	5,352	10,951
Pabbi	14,161	11,722	25,883
Kot Adu	11,297	5,835	17,132
Sindh	4,528	n/a	4,528
Total	35,585	22,909	58,494

Distribution of hygiene kits:

SESSION / LOCATION	NO OF KITS
Pabbi, Nowshera	200
Malakund, Swat	200
Mangora, Swat	250
Bunnair, Swat	200
Banda Mullaha Khan, Peshawar	150
Total	1,000

MERCY Malaysia efforts

MERCY Malaysia responded to the call for assistance and set up static and mobile clinics throughout Pakistan, distributed hygiene kits and conducted Hygiene Education Session with the beneficiaries prior to the distribution of the hygiene kits to promote good hygiene practices amongst the communities in our efforts to reduce the spread of diseases.



A local staff at the Charsadda static clinic dispensary treating children. A total of 5,599 cases were treated at the clinic



MERCY Malaysia's local project assistant Zahid Tanoli Bashir (second from right) and volunteer doctor Dr Jitendra Kumar treating patients at the Nowshera static clinic



Sri Lanka

Project	Outreach Clinics and Hygiene Programme in Jaffna district, the Northern Province, Sri Lanka
Objectives	To maintain the provision of basic health services for the new and old returnees
Project Partners	<ul style="list-style-type: none"> • Consortium of Humanitarian Agencies (CHA) • Ministry of Health, Sri Lanka • Ministry of Foreign Affairs, Malaysia
Activities	<ul style="list-style-type: none"> • Running of outreach clinics at five selected locations • Distributing hygiene kits at the clinics • Promoting and disseminating best hygiene practices and health education
Locations	Eluvathivu, Allapiddy, Ampan, Mandativu, Maruthenkerny
Period	February 2010–June 2012
Accomplishments	<ul style="list-style-type: none"> • Treated 12,597 patients in 2010 • Distributed hygiene kits and conducted hygiene promotion to 1,304 households in Mandaitivu, Allaipiddy, Manatkandu and Eluvathivu
Projected Budget	USD 279,604 / RM 900,324

Background

From March until December 2009, MERCY Malaysia has been working at the camps for Internally Displaced Persons (IDPs) in Menik Farm, Vavuniya. Since the conflict abated in November 2009, the Government of Sri Lanka has allowed over 150,000 IDPs from Menik farm and an additional 100,000 persons from other camps to return to their respective villages in the Northern Province where proper medical care is not available.

It is crucial to continue providing medical services to the returnees. The outreach clinics have been running in five locations in Jaffna, addressing the primary health care services and needs of the returnees as they transition into resuming normal life in the community.

In partnership with CHA, we provide health services in the areas recommended by the Regional Directorate of Health Services (RDHS) of Sri Lanka. We work side by side with local authorities and the community to engage with the returnees, and to assist capacity-building all our volunteers are locally recruited from the community.

MERCY Malaysia efforts

We have treated 12,597 patients in 2010 and distributed hygiene kits to 1,304 households in Mandaitivu, Allaipiddy, Manatkandu and Eluvathivu. The distribution of hygiene kits were done along with the hygiene promotion in the village by our staff and volunteers.



Dr. Sivanadiyan Sivaruban (right), a local staff in the Ampan Primary Health Care Clinic consulting a beneficiary



Pharmacist Punniyamoorthy Manoharan (left) at the dispensary counter at the Allaipiddy Primary Health Care Clinic

Sri Lanka

Project	Reconstruction of Ampan Divisional Hospital in Jaffna
Objectives	<ul style="list-style-type: none"> • To reconstruct and equip a fully restored provincial health centre in Ampan • To strengthen the health services of the whole eastern part of Jaffna
Project Partners	<ul style="list-style-type: none"> • Consortium of Humanitarian Agencies (CHA) • Ministry of Health, Sri Lanka • Ministry of Foreign Affairs, Malaysia
Activities	<ul style="list-style-type: none"> • Secured MoU with implementing partners • Secured vendors • Produced drawings • Secured approval from local authorities • Site possession, site clearing, building works and external works
Locations	Ampan, Jaffna
Period	February 2010–April 2011
Accomplishments	<ul style="list-style-type: none"> • Project is 74% completed; • Site possession and site clearing (100% completed) • Building works (most activities between 50-80% completion) • External works (most activities 80-90% completion)
Projected Budget	USD 239,130 / RM 770,000

Background

From March until December 2009, MERCY Malaysia has been working at the camps for Internally Displaced Persons (IDPs) in Menik Farm, Vavuniya. Since the conflict abated in November 2009, the Government of Sri Lanka has allowed over 150,000 IDPs from Menik farm and an additional 100,000 persons from other camps to return to their respective villages in the Northern Province where proper medical care is not available.

The Ampan Divisional Hospital in Jaffna was abandoned for many years after sustaining significant damage from the 2004 Indian Ocean Tsunami and exacerbated by the conflict. Once rebuilt, the hospital will be able to provide maternity care and primary health care to the people in Ampan, and much of the eastern part of Jaffna. Ampan hospital will at least give benefit to 10,000 beneficiaries from the surrounding areas.



The Ampan Divisional Hospital before reconstruction began

MERCY Malaysia efforts

Together with our partners, we aim to refurbish the damaged hospital as the returnees transition into resuming normal life in the community. We are reconstructing the main hospital building, the maternity building, including the quarters for nurses, midwives and doctors.

The reconstruction work commenced on 19 October 2010. Progress was continuous but was affected by weather conditions, where heavy rain caused floods which have disrupted the scheduled activities.

Donation of medical equipment and furniture will also be included as part of the project. This project is to be completed in April 2011.



MERCY Malaysia EXCO Member Norazam Ab Samah (first from right) with other volunteers surveying the location



Sudan

Project	Basic Health Centre in IDP Camp
Objectives	<ul style="list-style-type: none"> • To improve the healthcare of Internally Displaced Persons (IDPs) • To reduce the morbidity and mortality rate among the community
Project Partners	<ul style="list-style-type: none"> • United Nations Population Fund (UNFPA) • UNICEF
Activities	Full range of Primary Health Care (PHC), health education, reproductive health services, and referral services to El-Fasher Hospital seven hours a day, six days a week
Locations	Zam Zam, Darfur
Period	January-December 2010
Accomplishments	<ul style="list-style-type: none"> • Treated 51,679 patients throughout the year, an increase of 3% compared to 2009 • Full range of PHC elements were carried out and most communicable diseases remained below the emergency threshold
Projected Budget	USD 285,404 / RM 919,000

Background

In 2004, a conflict occurred in Darfur, causing a state of emergency in this region of Sudan. The conflict involved several groups opposing the Government which led to a major humanitarian crisis, leaving much of their population displaced and most livelihood activities were suspended. Villagers were forced to flee from their homes to camps or other villages for safety and to meet their basic needs. In addition, unfavourable climate conditions have disrupted the process of maintaining livelihood and thus, the population became more vulnerable both in the camps as well as in the rural areas.

In 2009, many NGOs were expelled from Sudan, causing a big gap in humanitarian aid. MERCY Malaysia continues to play a major role in providing primary healthcare in Zam Zam as the influx of Internally Displaced Persons (IDP) continues.

MERCY Malaysia efforts

The MERCY Malaysia North Darfur Health Programme focuses on improving the healthcare of Internally Displaced Persons (IDPs) and to reduce the morbidity and mortality rate among the community.

An average of 180 to 200 patients from the Zam Zam IDP camp was treated each day. MERCY Malaysia also provided a stand-by vehicle as an ambulance service that operates from 9am to 3pm for cases that need to be referred to a hospital, either to the El-Fasher Teaching Hospital or El-Fasher New Hospital.



MERCY Malaysia's Head of Relief Operations, Hew Cheong Yew (first from left) with two of the local staff of the Basic Health Centre



A local staff giving out prescriptions at the outpatient department

The background is a solid dark blue. It features several abstract, concentric circular patterns in a lighter shade of blue. These patterns are located in the top-left, center, bottom-left, and bottom-right areas of the page, creating a sense of depth and movement.

Events, Networking and Trainings

Events

Volunteer Appreciation Day

More than 200 volunteers and their family members joined MERCY Malaysia employees for a gathering in conjunction with the International Volunteer Day, designated by the UN to be commemorated on 5 December every year.

The luncheon was held at the Intekma Resort and Convention Centre in Shah Alam to celebrate the contributions of the volunteers for their time and effort for MERCY Malaysia.

Volunteers from all walks of life were able to meet and share their volunteering experiences with each other, and there were also fun games, quizzes and lucky draws to entertain the audience.

MERCY Malaysia President, Dato' Dr. Ahmad Faizal Mohd Perdaus said the organisation was honoured to be chosen as one of the platforms to provide opportunities for Malaysians to contribute, adding that the culture of volunteerism is not new in the context of Malaysian society.



From left Gaelle Linard, Sulaiman Kamaruddin, and Sivashanmugam Seetha Reddy



An overview of the elegant luncheon held at Intekma Resort and Convention Centre in Shah Alam

Events

26th ALNAP Annual Meeting: The Role of National Governments in International Humanitarian Response to Disasters

Hosted by the Red Cross and Red Crescent Movement and supported by MERCY Malaysia, the 26th ALNAP Annual Meeting focused on the relationship between the international humanitarian system and national governments. The meeting was held from 16-18 November 2010 at the Putra World Trade Centre in Kuala Lumpur and attended by almost 100 delegates from 20 countries around the world.

Building on existing and new research by ALNAP and others, the meeting brought together a range of key humanitarian and government actors with the specific aim of exploring better ways of collaborating in disaster response. In order to facilitate dialogue between humanitarian practitioners and representatives from national governments, ALNAP invited officials from Asian, African and Latin American countries, many of whom have the experience of responding to humanitarian crises within their borders.

The meeting was opened by H.E. Dato Misran Karmain, Deputy Secretary-General, ASEAN who identified the importance of events such as this for ALNAP in achieving its strategic objective to expand its global reach and engagement in order to better promote humanitarian learning.

The keynote speaker, Dr. Bhichit Rattakul, Executive Director, Asian Disaster Preparedness Center shared his thoughts on the importance of Preparing for Disaster Response, by both national governments and humanitarian agencies.

Further external perspectives were explored as Dato' Johan Raslan, Executive Chairman of PricewaterhouseCoopers Malaysia, presented on how humanitarian organisations and the corporate sector can make collaboration work. Dr. Heng Aik Cheng, representing MERCY Malaysia, presented his experiences from working on the Asia Pacific Conference on Military Assistance in Disaster Related Operations.

The two-day meeting was concluded with a third day for the ALNAP Full Members' information exchange. Highlights include the launch of the Humanitarian Innovations Fund (HIF) and an update on recent inter-agency real-time evaluations, including OCHA's Haiti Real Time Evaluation.



Day One of the ALNAP meeting in session



Dato' Johan Raslan, Executive Chairman of PricewaterhouseCoopers Malaysia addressing the audience

Networking

Exploring Collaborative Opportunities in Humanitarian Aid with a focus on Medical Relief, Water Sanitation & Hygiene and Risk Reduction Programmes: A Grant from the Australia-Malaysia Institute

MERCY Malaysia applied for a grant from the Australia-Malaysia Institute (AMI) in May 2010 to explore Collaborative Opportunities in Humanitarian Aid with a focus on Medical Relief, Water Sanitation & Hygiene and Risk Reduction Programmes. On June 2010, MERCY Malaysia was awarded the grant and entered into an agreement on 24 June 2010.

A sum of AUD 17,000 was granted to achieve the immediate objectives of MERCY Malaysia's networking and experience sharing:

1. Exchange ideas with Australian NGOs and other key relevant Australian stakeholders
2. Explore opportunities for collaboration with Australia-based Humanitarian agencies for projects based in Australia and/or around the Asia-Pacific region
3. Explore opportunities for capacity development programmes for MERCY Malaysia in Australia and/or around the Asia-Pacific region
4. Tap into funding or grant opportunities from foundations and institutional funders based in Australia

These objectives relate to the following areas; Disaster Response, Funding Opportunities, Rapid Deployment/Emergency Response Teams and Field Hospitals, Volunteer Management, Water, Sanitation & Hygiene (WASH), Disaster Risk Reduction as well as Communications and Fundraising Management.

In the trip to Australia (6-13 November 2010), MERCY Malaysia representatives comprised:

1. Dr. Ahmad Faizal Mohd Perdaus, President (trip duration: 7-8 November 2010)
2. Assoc. Prof. Dr. P. Shanmuhasuntharam, Asst. Honorary Secretary (trip duration: 9-13 November 2010)
3. Mas Elati Samani, then Head of Communications and Strategic Engagement
4. Mohamed Ashaari Rahmat, Programme Officer (DRR)
5. Maria Lauranti, Programme Officer (ROD)

The team met various organisations to exchange ideas, explore opportunities for collaboration, capacity development and fundraising. Amongst the organisations met are; AusAid, CARE Australia, Australian Aid International, Volunteering Victoria, RedR Australia, Australian Red Cross, PricewaterhouseCoopers Australia, LaSallian Foundation, Fundraising Institute Australia, Uniting World, Center for Volunteering, Action Aid Australia, and Fred Hollows Foundation.



Jon Burrough, Director of Humanitarian and Emergency Response Section and Shireen Sandhu, Director of Humanitarian Policy Section, Africa, Humanitarian and Peace Building Branch. Both represent the Australian Agency for International Development (AusAid).



Dato' Dr. Ahmad Faizal Mohd Perdaus and Mohamed Ashaari Rahmat in the discussion with AusAid

Trainings

Malaysian Technical Cooperation Programme (MTCP)

MERCY Malaysia conducts two training courses every year since 2008 under the Malaysian Technical Cooperation Programme (MTCP). In line with the spirit of South-South Cooperation, Malaysia through MTCP shares its development experiences and expertise with other developing countries. Previously managed by the Economic Planning Unit (EPU) of the Prime Minister's Department, it has since been transferred under the auspices of the Ministry of Foreign Affairs in 2010.

The participants consists of representatives from both governments and NGOs. The training courses organised by MERCY Malaysia in 2010 are:

- 1) Disaster Response and Recovery (1-9 June): this course was attended by 17 participants from 11 countries.
- 2) Community-based Disaster Risk Management (27 September - 1 October): this course was attended by 15 participants from 10 countries.

The training has allowed both the Malaysian government and MERCY Malaysia to establish, strengthen and maintain a good networking relationship with the participants.

<http://mtcp.kh.gov.my>



Malaysian Technical Cooperation Programme



A participant looking closely at some exposed wires during the Town Watching activity on 30 September 2010 in Kuala Lumpur



Hazard Mapping along parts of Jalan Tun Perak in Kuala Lumpur

Trainings

VOLUNTEER INDUCTION PROGRAMME (VIP)

OBJECTIVES:

- To share MERCY Malaysia's mission, vision and core values
- To inculcate the true spirit of volunteerism and professionalism among participants
- To provide a brief background of MERCY Malaysia's medical and humanitarian aid and relief programmes
- To obtain feedback from volunteers about their expectations and concerns
- To develop a compassionate and professional team of volunteers

Attendance: 222 **No. of Sessions:** 6



BASIC MISSION TRAINING (BMT)

OBJECTIVES:

- To develop committed relief workers
- To promote understanding of relief work, operations and volunteer roles and responsibilities
- To develop basic skills and knowledge, that can be applied specifically on a mission or as a general knowledge
- To build up mental strength and commitment when going on relief mission to any disaster area
- To promote team spirit and leadership quality under trying conditions

Attendance: 99 **No. of Sessions:** 3



EMERGENCY RESPONSE UNIT (ERU)

The trainings for ERU are split into two sections; the ERU Lecture Series and Field Training Exercise.

Objectives of the ERU Lecture Series:

- To introduce the ERU
- To introduce the Humanitarian Accountability Framework for MERCY Malaysia, the International Humanitarian Law, and other standards defining humanitarian work
- To provide information on safety and security, psychosocial aspects and means of communications
- To state general expectations of disaster medicine

Objectives of the Field Training Exercise:

- To expose participants to the hardware aspect of the ERU (equipment, transportation, storage and running of the field hospital)

Attendance : 63 (combined)

No. of Sessions : 2 (1 Lecture, 1 Field Training)





Acknowledgement



Secretariat as of May 2011

PRESIDENT'S OFFICE

Siti Zaliha Ibrahim
Acting Executive Assistant

SECRETARIAT

Takako Izumi
Acting Head

State Chapter Management

Mohammad Fadzli Saari
State Chapter Liaison Officer

Planning & Development

Dr. Paul A Mettler
Senior Advisor

Monitoring & Evaluation (M&E)

Nisha Sabanayagam
Senior M & E Officer
Siti Zaliha Ibrahim
Compliance Officer

COMMUNICATIONS & FUNDRAISING

Juanita Johari
General Manager
Shuhada Rosdi
Communications Officer
Zurina Ismail
Communications Officer
Aizuddin Othman
Communications Officer
Wan Nur Azliana Wan Azmi
Donor Management Assistant

FINANCE

Mohd Azizi Othman
Senior Finance Officer (Acting Head)
Noorazila Ahmad
Finance Officer
Sarah Saila Haroun
Finance Assistant
Mohd Syazwan Shah Md. Yusof
Finance Assistant

OPERATIONS (ROD, DRR, VMD)

Takako Izumi
General Manager

Relief Operations (ROD)

Hew Cheong Yew
Head of Department
Mohammad Said Alhudzari Ibrahim
Senior Programme Officer
Neoh Siew Ping, Wendy
Senior Programme Officer
Maria Lauranti
Programme Officer
Saw Yu-Shen
Programme Officer
Jessica Wong Ming Shi
Programme Officer
Nur Azizah Anuarul Aini
Programme Support Officer
Elizabeth Wee Siew Siew
Programme Officer (Sarawak Chapter)
Madeline Theresa Tang
Admin Assistant (Sabah Chapter)
Raja Manickam Krishnasamy
Senior Logistics Officer
Kesavan Arumugam
Logistics Officer
Sayid Zulkifli Tuan Johan
Logistics Assistant

Health Department

Dr. Wan Nurdiana Zaireen Wan Zainal Abidin
Health Coordinator
Sister Che Tah Hanafi
Medical Coordinator
Azli Hj. Abd Latif
Medical Assistant

Volunteer Management (VMD)

Abdul Rahim Manja
Head of Department
Collin Abel Nathan
Volunteer Management Officer
Noor Ain Zaira Hasnan
Volunteer Management Assistant

Disaster Risk Reduction (DRR)

Puteri Rohayu Megat Mohamed Yusof
Senior Programme Officer (Acting Head)
Mohamed Ashaari Rahmat
Programme Officer
Anisha Rachel Mathan
Programme Officer
Yesotha a/p Balakrishnan
Programme Officer
Siti Safiah Mohammad
Assistant Programme Officer
Shahril Idris
Project & Administration Support

HR MANAGEMENT & ADMINISTRATION

Norhazlina Mohamed
HR Officer
Rosnehaida Azly Abd Rani
Procurement cum Admin Officer
Khairur Rijal Jamaluddin
Admin Assistant
Hasnizan Hashim
Dispatch cum Office Support
Sharifah Shafiqah Syed Toko Khairuddin
Receptionist cum Office Assistant
Sayidah Kamil
Office Assistant

The following people have since left us, but their contributions remain. Thank you for your support.

Abdul Halim Ahmad • Anuradha Gunaratnam • Azlin Hashima Mt Husin • Elliane Arriany Mustapha • Esma Azura Masrol • Lina Taib • Mas Elati Samani • Maznor Maznan • Mega Nopija Khalidi • Mohd Radzi Jamaludin • Mohd Shaharuddin Asmani • Mok Wai Ling, Mandy • Muhammad Azrul Jamil • Muhammad Fitri Muhammad Hashim • Muharam Petrus • Nadiah Johari Ramzan • Nasha Akhir Shah • Noor Azlin Mohd Yahya • Noor Hayati Abd Latif • Noraini Aziz • Nur Syuhada Sible • Nurul Nadia Jaafar • Rabiul Ilham Abd Hardy • Rafi Suhaila Rahim • Roslinya A. Latip • Ruziah Kassim • Sharida Suhaila Abdul Shukor • Sharlina Adnan • Siti Zaleha Abdullah • Sufidawati Sarbini • Umar Abdul Azeem Brett Patterson • Zairulshahfuddin Zainal Abidin

Field Office Staff

We are proud to work with the local staff of the countries that we operate in. Thank you for supporting us in carrying out our missions.

AFGHANISTAN

Base Camp

Fazal Omer Agha
Khalil Ullah Mujaddadi
Saeed M. Sadiq
Ahmad Shah
Mohammad Sadiq
Hazrat Wali

Comprehensive Health Clinic

Mohammad Hasham
Abdul Quahir 'Sadate'
Mohammad Alam 'Kakar'
Fida Muhammad
Mohammad Haroon
Haleema Sharefi
Fariqa
Mena
Mohammad Azim
Marzia
Mohammad Nadar
Fateema Bibi
Shereena Bibi
Raziah Bibi
Gul Chera
Sheer Mohammad
Atta Muhammad
Mohammad Sadiq
Aminullah

MERCY Little Caliph

Ghulam Farooq Mujaddadi

Vocational Training Centre

Mohammad Yousaf
Marzia
Khatera
Bassia
Shakila
Gul Sima
Samiah
Ameer Jan
Jan Mohammed
Mohammad Karim

EGYPT

Ahmed Hosni Mahmode

CAMBODIA

Hen Heang

GAZA

Dr. Khamis El Essi

INDONESIA

Azrim Mirza

MYANMAR

Phyu Phyu Khin

PAKISTAN

Abdul Rauf s/o Shah Muhammad

SUDAN

Khartoum Liaison

Mutasim Mohamed

Base Camp

Abderahman Zakaria
Yagoub Ismail Yagoub
Mustafa Hassan Tiyrab
Addalla Adam Abdalla
Faethia Abdelrahman
Fatima Abdalla

Basic Health Centre

Dr. Suleiman Mohamed
Mubarak Mohamed Mater
Hassan Ibrahim Adam
Najwa Osman Bukhary
Zainab Saeed Mohamed
Fatima Ahmed Adam
Farouq Adam Abdalla
Ibrahim Mohamed Ahmed
Abdalla Goma Abdalla
Megbola Mohamed Elnour
Amena Kharif Adam
Hanan Madani Elhag
Elzaki Abdalla Mohamed
Abdalla Eisa Salih
Mohamed Ali Mohamed
Mohamed Abdulmaged Ali
Hassaballa Moamed Mater
Nura Ahmed Adam
Hawa Ismail Omer
Fatima Abakar Ibrahim
Bushara Bayn Awad
Ali Ibrahim Ahmad
Mubarak Hugar Tika
Nura Suliman Ismail
Arafa Ibrahim Garar
Laymon Ishag Khaer

MERCY Malaysia State Chapters

Our domestic responses and programmes would not be made possible without the support of our State Chapters. We are proud to work with state representatives who coordinate various projects with care and dedication. Thank you for your support!

JOHOR

Chapter Coordinator : Noor Hayatti Ismail
Treasurer : Dr Abdul Rahim Abdul Yusoff
Secretary : Dr Wan Fadilah Wan Ismail
Committee Members : Dr Sa'diah Atan

SABAH

Chapter Head : Dr Helen Lasimbang
Treasurer : Adrian Lok
Secretary : Margaret Chin
Committee Members : Justina Eddy Anita Malek

SARAWAK

Chapter Head : Benjamin Chai Phin Ngit
Treasurer : Veronica Wong
Secretary : Dr Safarina Joblee
Committee Members : Frances Fam Cheau Shin Jennie Soh

Collaborations

In our experience, no contribution is too small, and no measure of kindness too minute. MERCY Malaysia recognises the value of working with partners, and as a non-profit organisation, we rely solely on funding and donations from organisations and generous individuals to continue our services to provide humanitarian assistance to our beneficiaries. Thank you to our supporters for their tireless contribution and collaboration in our humanitarian work.

Corporate



Academic and Networking Institutions



UN Agencies



Embassies



Foundations



Society Members

As a non-profit organisation, MERCY Malaysia upholds good governance as part of its commitment in ensuring transparency and accountability in its humanitarian work. As a registered society, we are governed by the Societies Act (1966) and the Constitution of MERCY Malaysia.

In compliance with the Societies Act, we are required to prepare financial statements to be made public and tabled at our Annual General Meeting (AGM). We hold our AGM on the final Saturday in June of every year, where all members are invited to attend to examine the financial statement, vote on matters arising and to vote for or stand up as a candidate for the Executive Council.

We are grateful for your membership, and your participation in our governance continues to ensure that we do our best in our humanitarian work. Thank you.

Life Members

Abd Aziz, Dr. • Abd Rani Osman, Dr. Hj. • Abdul Latiff Mohamed, Dr. • Abdul Malik Bin Abdul Gaffor, Dr. • Abdul Muin Ishak, Dr. • Abdul Rahim Abdul Majid • Abdul Rashid Mahmud, Major (R) Hj. • Abdul Razak K.V. Koya Kutty, Dr. • Abdul Wahab Bin Tan Sri Khalid Osman, Dr. • Abu Aswad Alhaji Joned • Adrian Lok • Afidalina Tumian • Ahmad Faizal Mohd Perdaus, Dato' Dr. • Ahmad Ismail • Ahmad Zaidi Ahmad Samsudin • Aishah Ali, Dr. • Aishah Binti N. Abu Bakar • Al-Amin Mohamad Daud, Dr. • Aminudin Rahman Mohd. Mydin, Dr. • Amran Mahzan, Ir. • Anas Hafiz Mustaffa • Aniz Aryati Kasim • Anuar Abdul Hamid, Major (R) Hj. • Ashar Abdullah, Dato' Dr. • Azah Harun • Azlin Hashima Mt. Husin • Azizah Arshad, Dr. • Azmil Hj. Mohd. Daud, Hj. • Azry Mohd Ali • Badorul Hisham Abu Bakar • Balakrishnan a/l Amathelingam • Basmullah Yusof, Dr. • Benjamin Chai Phin Ngit • Bilkis Abd Aziz, Dr. • Chai Chin Pee • Che Tah Hanafi • Cheong Yee Tsing, Dr. • Damina Khaira • Dilshaad Ali Hj. Abas Ali, Dr. • Edward Hew Cheong Yew • Fairuz Ashikin, Dr. • Fara Suzeera Abdul Rashid • Farah Abdullah • Faridah Abu Bakar, Dr. • Faridah Akmar Ibrahim • Faridah Osman • Fatimah Mahmood • Fauziah Hj. Mohd. Hassan, Dr. • Fauziah Md Desa • Fawzia Hanoum Ariff • Fuziah Md Zain • Ghazali Abdul Wahab, Dr. • Gunalan a/l Palari @ Arumugam, Dr. • Habibah @ Norehan Haron • Hairol Othman, Dr. • Hamidah Ismail, Dr. • Hanita Ramuy • Hariyati Shahrina Bt. A. Majid, Dr. • Harlina Mohamed Lani • Hasnah Hanapi @ Hanafi, Datin • Hasri Samion, Dr. • Helen Benedict Lasimbang, Dr. • Heng Aik Cheng, Dr. • Ho Tze Hock, Dr. • Humairah Samad Cheung, Prof. Dr. • Ibrahim Umbichi Moideen • Inderjeet Kaur, Rani • Jamilah Shaikh Mohd Jain • Jemilah Mahmood, Tan Sri Datuk Dr. • Justina Eddy • K. Sockalingam • Kamariah Mohamad Kontol • Kamarul Azahar Mohd Razali • Kamaruzaman Abdullah • Kamat Norit • Khairul Anuar Jaafar • Khairul Azman Md Khalid, Dr. • Krishna Kumaran A/L A. Ramasamy, Dr. • Kursiah M. Razali, Dr. • Lai Fui Boon, Dr. • Lau Seth Kiong • Liew Kiew Lian, Dr. • Lili Suriani Hj Mian • Lily Kartina Karim • Lim Eng Pitt • Lim Woi Meng (Jimmy) • Loh Sit Fong • Mahani Idris Daim, YBhg Toh Puan • Mahdzir Md. Isa • Mohd. Suhaimi @ Sam Sulong, Major • Margaret Chin Pau Jin • Mariah Zainatul Maknun A. Zahidin • Mimi Iznita Mohamed Iqbal • Mohamad Ismail Ali, Dr. • Mohamed Hatta Shaharom, Prof. Dr. • Mohamed Hawari Hashim • Mohamed Ikram Mohd Salleh, Assoc. Prof. Dr. • Mohamed Nazrine Alias • Mohd Hamzah Kamarulzaman, Dato Dr. • Mohd Khalit Bin Othman • Mohd Rafee Md. Aris • Mohd Rohisham Zainal, Dr. • Mohd Shah Awaluddin • Mohd Shaharuddin Asmani • Mohd. Ali Md. • Mohd. Azman Sulaiman • Mohd. Nazli Mohd Zahid @ Kamarul Zaman, Dr. • Mohtar Ibrahim, Dr. • Muhammed Faisal Abdul Wahab • Muhd Taufiqurrahman Jemain, Dr. • Musa Bin Mohd Noor • Musa Mohd. Nordin • Namof Jamelah Mohd Ibrahim • Nasaruddin Abdul Aziz, Dr. • Noor Filzah Binti Zubir • Noor Janah Abdullah • Noor Siah Idris, Dr. • Nooraini Mohamed Ismail, Dr. • Nor Halimahtun Hassan Maasom • Nor Khairiah Md. Kenali, Dr. • Nora Azizi Uzir • Noraini Md. Desa • Norazam Ab Samah, Hj. • Norfaiezah Arshad • Norhairani Abdul Wahab • Norherah Syed Omar, Dr. • Norizan Rajak • Norly Ismail, Dr. • Nur Farinda Ibrahim • Nurahan Maning, Dr. • P. Shanmugasantharam, Assoc. Prof. Dr. • Puteri Rohayu Megat Mohamed Yusof • Puziah Md. Zain • Raja Abdul Aziz Raja Musa • Raja Riza Shazmin Raja Badrul Shah • Rakiyah Ahmad • Rasheedah Abu Bakar • Risnawati Yassin • Roslan Harun, Dr. • Rosnah Abdul Aziz • Rowani Mohd Rawi, Dr. • Rugayah Mohamed, Professor Dr. • Safarina Joblee, Dr. • Saiah Abdullah, Dr. • Salina Umar • Sarah Haniza Dato' Abdul Ghani, Dr. • Sarudin Bin Rohseli • Segaran, Dr. • Sejahratul Dursina @ Chomel Mohamad • Shahrudin Saamin, Dr./Ph.D • Shahrir Hashim • Shaik Taufik Shaik Yusoff • Shalimar Abdullah, Dr. • Shareen Shariza Dato Abdul Ghani • Sharida Suhaila Abdul Shukor • Sharifah Sakinah Syed Hassan • Sharimah Ruwaida Abbas • Sharizad Hj. Shamsuddin • Sharlina Adnan • Siti Sarah Md. Zhahir • Siti Zainab Ibrahim • Sri Kumar, Datuk Dr. • Suhaila Rahim • Suhaireen Suhaiza Dato' Abdul Ghani • Susan Binti Abdullah @ Susan Shamin, Datin • Suzain Datuk Hj. Suhaimi, Dr. Hj. • Syed Abdul Haris B. Syed Mustapa • Syed Hashim Tuan Long • Syed Mohd. Adeeb Syed Jalil Jalaludin • Tan Choi Wah • Tan Hooi Chien, Dr. • Tan Sim Hwee • Tee Kam Bee (Uncle Button) • Tunku Azela Tunku Aziz • Tunku Sara Tunku Ahmad Yahaya • Usmirah Ahmad • Wan Adleen Shahril Wan Hanafi • Wan Badrul Shah Wan Husain • Wan Fadhliah Wan Ismail, Dr. • Wan Hazmy Che Hon, Dr. • Wan Nik Wan Ismail, Dato' • Wan Nurdiana Zaireen Wan Zainal Abidin • Wan Raimah Wan Abdul Kadir • Yang Wai Wai • Yazid Bin Zahid • Zainab Kassim, Dr. • Zainal Mohamed • Zakinah Zainuddin • Zaleha Abdullah Mahdy, Prof. Dr. • Zamaliah Md Juah • Zamzam Zainuddin • Zariahah Mohd Zain, Dr. • Zubidah Bt. Ab. Hamid • Zulaiha Ismail, Dr. • Zuraidah Mian • Zurina Ismail

Ordinary Members*

Azizah Ismail • Chuan Mei Ling • Huwaida Abdul Halim, Dr. • Jennie Soh • Juraini Jamaludin • Mohamed Nazir Abu Bakar, Dr • Mohd Yusree Mohd Rodzi • Muhsin P. K. Ahamed • Rosleena Anin Rozalee @ Zahari • Saminah Mustakim • Shahridan Mohd Fathil, Dr. • Wan Rafidah Awang Isa • Wan Zakiah Wan Yusof • Zainudin Hj. Ahmad

* Care as been taken to publish names of ordinary member whose annual subscription are up-to-date.
Please inform us if your name is missing.

Volunteers

Volunteers are the backbone of our organisation. Thank you to all our volunteers for supporting us in our humanitarian efforts.

Domestic Mission

Johor (Johor Community Preparedness Programme, Change for Charity – Kuala Sengka), Kuala Lumpur (Outreach Clinic in Rumah Nur Salam), Perak (Outreach Clinic in Pos Kemar, Kg. Sg. Tiang), Sabah (Salt Trail, Outreach Clinic in Pulau Mantanani, Kg. Inarad, Kg. Sonsogon Magandai, Kg. Balat, Kinabatangan), Sarawak (Outreach Clinic in Kg. Kuala Nyalau, Kg. Tiris, Long Luar), Selangor (Vaccination Clinic, Fundraising for 1 Utama Shopping Complex), Northern Flood Relief, Packaging of Hygiene Kits, School Watching Workshop, School Response Preparedness, Town Watching

Abdul Muhaymin Mazeni • Abdullah Haneef Taha • Abel Boon Yoong Neng • Adam Gabriel McKenna • Adam Mohd Alias • Adi Fadzilan • Adrian Lok • Afidah Osman • Agnesia A. Sapati • Ahmad Akmaluddin Mazlan • Ahmad Alfian Hashim • Ahmad Tahir Mohd Said • Aiman Basir • Aizat • Aliah Mohd Tarmizi • Alice Sai Phaik Choo • Alicia Lucy Koh • Alvin Tay Jun Yew • Amal Sharifiza Sharuddin • Ameir Nur Ihsan Ibrahim • Amelia Ngu • Angela Esther George • Angelina Tan Wen Ching • Anisha Rachel a/p Mathan • Anita @ Ani binti Abdul Malek • Anna Letchumy Ponniah • Anuar Othman • Ar. Azman Zainon Abidin • Areena Abdullah • Arthur Francis Kan • Asma Nur Kamarul Azman • Assoc. Prof. Dr. Noor Ibrahim Mohamed Sakian • Azhani binti Zulkifli • Azizi Azizan • Bapthileking Anak Toking • Becky Wong Pui Kuan • Bede Rukasim • Belayau ak Jambi • Bhavani A/P E Balasingam • Bybiana Anak Michael • Carolina Tay • Chai Seet Nee • Chai Sheau Ping • Che Roziana Mohd Roni • Che Siti Badriah Che Sab • Chee Chit Yee • Chee Fook Wah • Chen Kah Lu • Chia Anak Ramli • Chia Kah Yie • Chia Pui Ying @Irene • Chow Kai Wai @Karen • Danial Wong Sing Lee • Daniel Ng Ying Kin • David Lim Meng Young • Diana Binti Lanhi • Doulianah Manjuil • Dr Amrizan Abdul Wahid • Dr Ana Vetriana Abdul Wahab • Dr Ang Kee Wei • Dr Annapurny Venkiteswaran • Dr Aswani Rashid • Dr Asyifah Md Zaki • Dr Bong Mei Fong • Dr Chai Siew Cheng • Dr Charlene Malakun • Dr Chen Tai Ho • Dr Cheong Joo Ming • Dr Chin Siew Yee • Dr Dayang Siti Yuhana A.M. Yusof • Dr Edwin See Un Hean • Dr Elsonmond Vick Duin • Dr Fong Voon Hoong • Dr Giew Wei Li • Dr Gilkriss Ewe Yean Hsiang • Dr Gnanambikai Devi Selvarurai Pillay • Dr Goh Kheng Wee • Dr Grace Wong Yi Li • Dr Halimah Shamsuddin • Dr Hasni Md. Zain • Dr Helen Benedict Lasimbang • Dr Helen Ngu Fong Lin • Dr Ibrahim Abu Samah • Dr Janice Lee Siaw Yun • Dr Jeremy Robert Jinuin Jimin • Dr Jitendra Kumar A/L Shantilal Narbehan Tejani • Dr Julie Eileena Abdul Razak • Dr Karen Pamela Soh • Dr Karina Razali • Dr Lee Jen Ping • Dr Lee Thian Chai • Dr Look Mei Ling • Dr Marjorie Stephen • Dr Maryam Mohd Fauzi • Dr Maryana Bt Musa • Dr Mas Suryalis Ahmad • Dr Megat Muhamed Faisal bin Ismail • Dr Michael Wong Sze Liang • Dr Mohd Rosli Majid • Dr Monica Ropotoh • Dr Muhammad Munawar Mohamed Hatta • Dr Nadia Mohd. Mustafah • Dr Nazariah Aiza Harun • Dr Ng Siah Huat • Dr Norherah Syed Omar • Dr Norliza binti Ismail • Dr Nurdidi Zainudin • Dr Nurfaizya Shamsuddin • Dr Nurul Ain Ahmad Jamallullail • Dr Ong Li Sze • Dr Patrick Tie Sing Ho • Dr Rosalind Jotin • Dr Sa'diah Atan • Dr Sangeetha Siniae • Dr Selvaraj Kollandayan • Dr Sharon Oh Yeok Gim • Dr Si Lay Khaing • Dr Siti Hajar Ayub • Dr Sofiah Mat Ripen • Dr Suryasmi Duski • Dr Sylvester Peter Nansi • Dr Tai Yi Pinn • Dr Tan Hooi Chien • Dr Tan Sek Wan • Dr Tan Sheng Chai • Dr Teng Wei Woon • Dr Teo Ik Hui • Dr Tiruna Sevi A/P Siva Sanbu • Dr Vasanthakumar S Selvarajah • Dr Vashanti A/P Palanivalu • Dr Wan Fadhliah Wan Ismail • Dr Wan Nur Diana Zaireen Wan Zainal Abidin • Dr Wong Chu Ping • Dr Yong Chee Shion • Dr David Hii King Chuong • Dzulkarnaen Ismail • Ee Chai Seah (Alice) • Elaine Ling • Elaine Wee Siew Xian • Elizabeth Wee Siew Siew • Erwan Saniran • Esma Azura Masrol • Evangeline J Sinagoh • Faisal Ahmad Hashimy • Fakhrul Radhi Mohd Fazli • Farida Mohd Salleh • Farisha Rahman • Fatima Merza Abdula Tawasil • Florian Herbert • Frances Fam Cheau Shin • Fransisca Agaitari • Gaele Linard • Geetha Vijakumara • Ghaza A/L Naian • Haezreena Begum Abdul Hamid • Hafiz Ali Abdul Manap • Hafiz Ariff Hashim • Haidah Haji Sahad • Hairul Nizam Mohd Hussin • Halimatus Sa'diyah Kamarudin • Harith Abdul Malek • Hartini Alias • Haseleena Mohd Arif • Haslina Hashim • Hasliza Hashim • Hasnizan bin Hashim • Hasuzilawati Hamzah • Helen Yong Fui Eng • Henry Jugah • Hj Tajul Edrus Nordin • Huang Chee Xuan, Gary • Hyldha Tan • Iqbal Ryu Zakaria • Ir Hj Zairulshahfuddin Zainal Abidin • Irma Rafeah Ahmad • Ismail bin Ibrahim • Iznyy Ismail • Izrahayu Che Hashim • Izzad Emir Ismail • Jaianand J Tejani • Janice Lee Siaw Yun • Jean Li Lim • Jeffry Salleh • Jennie Soh Yan Khoo • Jenny Chai Shiau Shiau • Jerry Ong Cheong Beng • Jessica James • Jessica Wong Ming Shi • John Lee Wei Chen • Johnstan Tan • Joseph bin Gombis • Joshua Tu Tuong Chung • Jubili Anilik • Judy Liew Ye Ling • Juli Asna Jasmin • Junia Anilik • Juraida Jamaluddin • Justina Eddy • Kamahalinawati Kamaruddin • Kasuma Jamaluddin • Kavita Sailesh Bavasi • Kelly Ong Geok Kim • Khairul Masnizam Abdullah • Khaliesah Asmaa Khalid • Kimberly Chok Soo Kim • Kong Hui Choo • Krijah Naidu (Asha) • Kuan Li Lian • Lastin bin Garatam • Lee Choon Meei • Lee Hua Yik (Bryan) • Lee Jian Yuan • Lim Chia Yi • Ling Nee Nee • Lisa Marenlette • Logesvari • Loke Hai Yuan • Lonnie Sipai • Low Ee Vien • Low Wen Zhen • Lucy Siew Lek Geok • Lydia Pook Ying Ying • Mahendran Sharma Jairam • Mahidi Bab • Majalan Bin Maidin • Major (B) Hj. Anuar Abd Hamid • Mak Hiew Lye • Mardiana @ Laila Ramli • Margaret Selina ak Paie • Mariani Zainal • Martin Anak Jandom • Mary Abas • Mastura Salpidin • Maufiza Abd. Rahman • Mejar (B) Mohamad Don Cheang • Melody ak Jilin • Michele Wee Sing Yee • Mike Sim Ching Ping • Mohamad Izani Abdul Hamid • Mohamed Ashaari Rahmat • Mohammad Shamim Mohammad Shakir • Mohd Adidi Mohd Baki • Mohd Afiq Mohd Amin • Mohd Aizuddin Ahmad • Mohd Akhir Mohd Arif •

Volunteers

Mohd Ali Idris • Mohd Azmee Ismail • Mohd Fitri Ezwan Ahmad Baki • Mohd Fyrolikram Othman • Mohd Hadzrie Hamdan • Mohd Nazli Ariffin • Mohd Nazrine Alias • Mohd Radzi Jamaludin • Mohd Ridzwan Mohd Said • Mohd Shaharuddin Asmani • Mohd Shukri Mohd Arif • Mohd Zaid bin Md Sharif • Mohd Zaidi Abd Samad • Molly Sim • Monica Belulok • Muhamad Faizal Zulkifli • Muhamad Nizam Rahman • Muhammad Ali Hanafiah Abu Hanifa • Muhammad Faiz bin Kamarudin • Muhammad Faiz Mazni • Muhammad Faizal Zulkifli • Muhammad Farid Nazer Muhammad Faruqu • Muhammad Fitri Bin Muhammad Hashim • Muhammad Izzat bin Zainal Abidin • Muhammad Syafiz Bin Ahmad Ismani • Muhammad Syamir bin Abu Hassan • Mustaqim bin Muhammad Salleh • Nabila Iryani Ahmad • Nada Syazana • Nadiyah binti Ismail • Narayanan a/l Sankaran Nair • Nasa Janting • Nawal Saudah Samsudin • Nazliah Fahmi • Nelly G. Genove • Ng Sze Yunn (Cheryl) • Nik Madiah Mohammad Al-Faisal • Nina Hoklai Bt. Hat • Noor Bathi Badarudin • Noor Hayati Abd Latif • Noor Hayatti Ismail • Noor Janah Abdullah • Noor Syaera Nasir • Noorlaili Shazlin Mohammad Sulai • Nor Aziah Mohammad Shaari • Nor Azizah Malik • Nor Azhar Sulaiman • Nor Elena Ramli • Nora Mohd Ali • Norfarhana Md Daud • Norfatin Atikah Mohd Fadzil • Norfazila Yazan • Norisam bin Jamaludin • Norizan Ahmad • Norliza Mohd. Fadzil • Nur Aqilah Binti Abdullah • Nur Aqilah Rosli • Nur Atiqah Abu Talib • Nur Azizah Anuarul Aini • Nur Azrina Binti Isa • Nur Faranida Binti Mustafa • Nur Fathiyah Mohd Khir • Nur Lela Musrom • Nur Shahirah bt Mohd Adib • Nurfarhana binti Md Daud • Nurfatin Atikah Fadzil • Nurkhirunnisa bt Adinan • Nurul Ashikin Abd Manaf • Nurul Faraain bt Itam Ahmad • Nurul Farhain bt Mazni • Nurul Fatimah Sharulnizam • Nurul Nadia binti Jaafar • Oh Boon Han • Ong Ai Jun • Ong Hui Phing • Pein Cheong Lee • Poulina Jawi • Puteri Rohayu Megat Mohamed Yusof • Quah Joo Lee • Rabiul Ilham Bin Abdul Hardy • Rafeeza Talib • Rafidah Mashudi • Rafii Mohd Daud • Rathi Devi A/P Muthukrishnan • Razali Kamisan • Ritchie Charles Teo • Rohani Mat Saman • Rose Punpun • Roslinya A Latip • Rosliza Ali • Rosnehaida Azly Abd Rani • Roszarita Zainal Abidin • Rozita Mohd Hatta • Rustam Omar • Sabeda D Siagian • Sanna Sultan Shah • Sarah Salla Haroun • Setow Chi • Shahril Idris • Shahrizal Mohd Isa • Shakuntala Devi A/P Thangavallu • Shareena Bibi Mohd Arif • Sharifah Fatin Syed Seth • Shartina Gallery • Shuhada Rosdi • Sithaniya Mohan • Siti Fatimah Mohd Nor • Siti Nashrah Nur binti A Malek • Siti Norbaria Sally Pick Thall Tan • Siti Nur Nasihin Azimi • Siti Royany Ariff • Siti Zaliha Ibrahim • Stella Kong Sih Fen • Subathra Jeyabalan • Sulaiman Kamarudin • Sunita S. Sothi • Sunitha Vimalaswaran • Surendiran Rajkumar • Suzanah Abdullah • Syed Abdul Haris Syed Mustapa • Tajol Rosli • Tan Heng Yie (Zest) • Tan Seng Hock • Tan Sun Mee • Tejinder Kaur Didar Singh • Tena Surana Anak Jem • Tengku Karina • Tengku Mohd Kamil • Tengku Nur Amirah Tengku Kamarulzaman • Teoh Pei Kheng • Teoh Shu Woan • Thomas Asing • Tie Teck Kim • Ting Chui Lin • Toh Li Mae • Umar Abdul Azeem Brett Patterson • Valerie Sim Rhyme Shye • Veronica Wong Poh Ting • Victor Wong • Vimala Sangari Nathan • Voni Natasha Sunarko • Voon Yit Kian • Wan Hasmat Wan Hassan • Warzieda Ahmad • Wendy Neoh Siew Ping • Wilson Sulong Ak Richard • Wong Ling Cheang • Wong See Wan • Zailina Ahmad Jailani • Zainal Haji Ali • Zarina Bibi Mohd Ariff • Zora Sharon Chan Mei Ching • Zuhri Yuhyi • Zulhilmi Sharizal • Zulkifli Mohd Zain

International Mission

Bangladesh, Cambodia (Change for Charity), Chile, Indonesia (Mentawai, Medan, Nias, Padang), Myanmar, Sudan, Sri Lanka, Pakistan

Anita Abd Malek @ Ani • Ar. Azman Zainonabidin • Ariffin Abdul Manaf • Aslina Mohamed Yasin • Arshad Ariffin • Ariffin Yasir • Azrim Mirza • Che Mahmud bin Mohd Nordin • Chee Fook Wah • Cmdr (R) Raja Manickam Krishnasamy • Dato' Dr. Ahmad Faizal Mohd Perdaus • Dr. Hasnul Zamani Haroon • Dr. Heng Aik Cheng • Dr. Ho Loon Shin • Dr. Jefri Irwan Gunawan Harris • Dr. Jitendra Kumar a/l Shantilal Narbehan Tejani • Dr. Khoo Teng Lye • Dr. Leong Kin Fon • Dr. Mahamarowi Omar • Dr. Mohammad Iqbal Omar @ Ye Htut • Dr. Mohd Nikman Ahmad • Dr. Normala Basiron • Dr. Ruwaida Isa • Dr. Suhaida Md. Noor • Dr. Wan Azman Wan Sulaiman • Dr. Wan Mohd Nazaruddin Wan Hasssan • Dzulkarnaen Ismail • Harithan Nordin • Hartini Abdullah • Hashimah Husin • Ho Siew Eng • Ir. Ariffin Abdul Manaf • Ir. Amran Mahzan • Ir. Hj. Zairulshahfuddin Zainal Abidin • Ir. Mohamad Hanafi Ramli • Ismadi Ismail • Kalsom Yahya • Khairul Malim • Khairul Masnizam Abdullah • Mariana Hashim • Mega Nopija Khalidi • Mohamad Ayof Bajuri • Mohd Hafiz Mohd Amirrol • Mohd Hamzi Tarmizi • Mohd Shaharuddin Asmani • Muhammad Hapis Jamil • Murni Othman • Murza Murad • Noor Janah Abdullah • Nor Hasanah Yahya • Hj. Norazam Ab Samah • Hj. Tajul Edrus Nordin • Normah Abdullah • Parimala Devi a/p Munusamy • Prof. Dr. Ahmad Sukari Halim • Ir. Razali Idris • Roslinya A Latip • Santhna Letchmi Panduragan • Siti Zuhaida Hussein • Sharida Suhaila Abdul Shukor • Sharima Ruwaida Binti Abbas • Sr. Yusof Hassim • Syed Abdul Haris Bin Syed Mustapa • Syed Zahid Syed Mohamad • Tan Yok Mui • Yacob Ali • Zakariya Ibrahim • Zulaili Zainal Abidin • Zuraidah Mian

Financial Statement

93 SOCIETY INFORMATION

94 AUDITORS' REPORT

96 EXECUTIVE COUNCIL REPORT

97 STATUTORY INFORMATION

98 STATEMENT BY EXECUTIVE COUNCIL

99 STATUTORY DECLARATION

100 BALANCE SHEET

101 STATEMENT OF INCOME AND
EXPENDITURE

102 STATEMENT OF CHANGES IN
CHARITABLE FUNDS

103 CASH FLOW STATEMENT

104 NOTES TO THE
FINANCIAL
STATEMENTS

Society Information

PERSATUAN BANTUAN PERUBATAN MALAYSIA (MALAYSIAN MEDICAL RELIEF SOCIETY) (MERCY MALAYSIA)

(Registered under the Societies Act, 1966)

(Society No.: 1155)

PRESIDENT	Dato' Dr. Ahmad Faizal Mohd Perdaus
VICE PRESIDENT I	Assoc. Prof. Dr. Mohamed Ikram Mohamed Salleh
VICE PRESIDENT II	Mohd Azman Sulaiman
HONORARY SECRETARY	YM Raja Riza Shazmin Raja Badrul Shah
ASSISTANT HONORARY SECRETARY	Assoc. Prof. Dr. Palasuntharam Shanmuhasuntharam
HONORARY TREASURER	Ir. Amran Mahzan
ORDINARY COMMITTEE MEMBERS	Dr. Heng Aik Cheng Norazam Ab Samah
CO-OPTED MEMBERS	Dr. Shalimar Abdullah Farah Abdullah
REGISTERED OFFICE	Level 2, Podium Block Kompleks Dayabumi, City Point Jalan Sultan Hishamuddin 50050 Kuala Lumpur
AUDITORS	Azuddin & Co. (AF 1452) Chartered Accountants
BANKERS	CIMB Bank Berhad RHB Bank Berhad Malayan Banking Berhad

Auditors' Report

INDEPENDENT AUDITORS' TO THE MEMBER OF PERSATUAN BANTUAN PERUBATAN MALAYSIA (MALAYSIAN MEDICAL RELIEF SOCIETY) (MERCY MALAYSIA)

(Registered under the Societies Act, 1966)

(Society No.: 1155)

Report on the Financial Statements

We have audited the financial statements of MERCY Malaysia, which comprise the balance sheet as at 31 December 2010 of the Fund, and the income statement, statement of changes in accumulated fund and cash flow statement for the year then ended, and a summary of significant accounting policies and other explanatory notes.

Executive Council Members' Responsibility for the Financial Statements

The Executive Council of the Society are responsible for the preparation and fair presentation of these financial statements in accordance with approved MASB accounting standards in Malaysia for Private Entity and the Societies Act, 1966 in Malaysia. This responsibility includes: designing, implementing and maintaining internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with approved standards on auditing in Malaysia. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on our judgment, including the assessment of risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, we consider internal control relevant to the Fund preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Fund internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the committee, as well as evaluating the overall presentation of the financial statements.

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

Auditors' Report

INDEPENDENT AUDITORS' TO THE MEMBER OF PERSATUAN BANTUAN PERUBATAN MALAYSIA (MALAYSIAN MEDICAL RELIEF SOCIETY) (MERCY MALAYSIA)

(Registered under the Societies Act, 1966)

(Society No.: 1155)

Opinion

In our opinion, the financial statements have been properly drawn up in accordance with approved MASB accounting standards in Malaysia for Private Entity and the Societies Act, 1966 in Malaysia so as to give a true and fair view of the financial position of the fund as of 31 December 2010 and of its financial performance and cash flows for the year then ended.

Report on Other Legal and Regulatory Requirements

In accordance with the requirements of the Societies Act, 1966 in Malaysia, we also report that in our opinion the accounting and other records and the registers required by the Act to be kept by the Society have been properly kept in accordance with the provisions of the Act.

Other Matters

This report is made solely to the members of the Society, as a body, in accordance with the Societies Act, 1966 in Malaysia and for no other purpose. We do not assume responsibility to any other person for the content of this report.



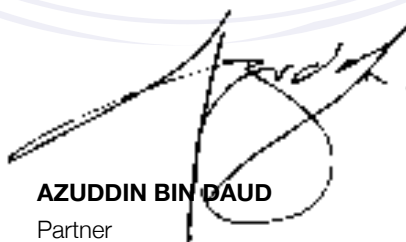
AZUDDIN & CO.

AF 1452

Chartered Accountants

Kuala Lumpur,

Date: 27 May 2011



AZUDDIN BIN DAUD

Partner

2290/08/012/ (J)

Executive Council Report

PERSATUAN BANTUAN PERUBATAN MALAYSIA (MALAYSIAN MEDICAL RELIEF SOCIETY) (MERCY MALAYSIA)

(Registered under the Societies Act, 1966)

(Society No.: 1155)

Executive Councils' report for the year ended 31 December 2010

The Executive Council have pleasure in submitting their report and the audited financial statements of the Society for the financial year ended 31 December 2010.

Executive Council of the Society

The Executive Council who served since the date of last report are:

PRESIDENT	Dato' Dr. Ahmad Faizal Mohd Perdaus
VICE PRESIDENT I	Assoc. Prof. Dr. Mohamed Ikram Mohamed Salleh
VICE PRESIDENT II	Mohd Azman Sulaiman
HONORARY SECRETARY	YM Raja Riza Shazmin Raja Badrul Shah
ASSISTANT HONORARY SECRETARY	Assoc. Prof. Dr. Palasuntharam Shanmuhasuntharam
HONORARY TREASURER	Ir. Amran Mahzan
ORDINARY COMMITTEE MEMBERS	Dr. Heng Aik Cheng Norazam Ab Samah
CO-OPTED MEMBERS	Dr. Shalimar Abdullah Farah Abdullah

Statutory

Information On The Financial Statements

PERSATUAN BANTUAN PERUBATAN MALAYSIA (MALAYSIAN MEDICAL RELIEF SOCIETY) (MERCY MALAYSIA)

(Registered under the Societies Act, 1966)

(Society No.: 1155)

Before the financial statements of the Society were made out, the Executive Council took reasonable steps:-

- i) to ascertain that action had been taken in relation to the writing off of bad debts and the making of provision for doubtful debts and have satisfied themselves that all known bad debts have been written off and no provision for doubtful debts is required; and
- ii) to ensure that any current assets which were likely to be realised in the ordinary course of business including their value as shown in the accounting records of the Society have been written down to an amount which they might be expected so to realise.

At the date of this report, the Executive Council are not aware of any circumstances: -

- i) that would render the amount of bad debts written off inadequate to any substantial extent or that would render it necessary to make any provision for doubtful debts, in the financial statements of the Society; or
- ii) that would render the value attributed to the current assets of the Society misleading, or
- iii) which have arisen which render adherence to the existing method of valuation of assets or liabilities of the Society misleading or inappropriate, or
- iv) not otherwise dealt with in this report or the financial statements, that would render any amount stated in the financial statements of the Society misleading.

At the date of this report there does not exist:-

- i) any charge on the assets of the Society that has arisen since the end of the financial year which secures the liabilities of any other person, or
- ii) any contingent liability in respect of the Society that has arisen since the end of the financial year.

No contingent liability or other liability of the Society has become enforceable, or is likely to become enforceable within the period of twelve months after the end of the financial year which, in the opinion of the Executive Council, will or may substantially affect the ability of the Society to meet its obligations as and when they fall due.

In the opinion of the Executive Council, the results of the operations of the Society for the financial year ended 31 December 2010 have not been substantially affected by any item, transaction or event of a material and unusual nature nor has any such item, transaction or event occurred in the interval between the end of that financial year and the date of this report.

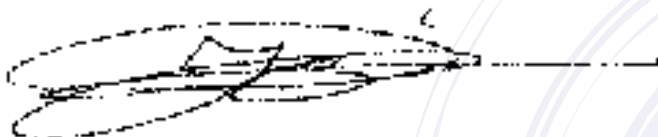
Statement By Executive Council

PERSATUAN BANTUAN PERUBATAN MALAYSIA (MALAYSIAN MEDICAL RELIEF SOCIETY) (MERCY MALAYSIA)

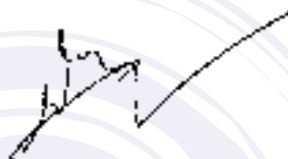
(Registered under the Societies Act, 1966)
(Society No.: 1155)

We DATO' DR. AHMAD FAIZAL MOHD PERDAUS and ASSOC. PROF. DR. MOHAMED IKRAM MOHAMED SALLEH being President and Vice President I of PERSATUAN BANTUAN PERUBATAN MALAYSIA (MALAYSIAN MEDICAL RELIEF SOCIETY) (MERCY Malaysia) state that, in the opinion of the Executive Council, the financial statements set out on following pages, are drawn up in accordance with applicable approved accounting standards in Malaysia so as to give a true and fair view of the state of affairs of the Society at 31 December 2010 and of its results of operation and cash flows for the year ended on that date.

On behalf of the Executive Council:



.....
DATO' DR. AHMAD FAIZAL MOHD PERDAUS
President



.....
ASSOC. PROF. DR. MOHAMED IKRAM MOHAMED SALLEH
Vice President I

Kuala Lumpur,
Date: 27 May 2011

Statutory Declaration By Honorary Treasurer

PERSATUAN BANTUAN PERUBATAN MALAYSIA (MALAYSIAN MEDICAL RELIEF SOCIETY) (MERCY MALAYSIA)

(Registered under the Societies Act, 1966)
(Society No.: 1155)

I, IR. AMRAN BIN MAHZAN, being the Honorary Treasurer primarily responsible for the accounting records and the financial management of PERSATUAN BANTUAN PERUBATAN MALAYSIA (MALAYSIAN MEDICAL RELIEF SOCIETY) (MERCY Malaysia), do solemnly and sincerely declare that the financial statements set out on following pages are, to the best of my knowledge and belief, correct and I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the Statutory Declarations Act, 1960.

Subscribed and solemnly declared by the abovenamed
IR. AMRAN BIN MAHZAN at Kuala Lumpur
in the state of Federal Territory on 27 May 2011

)
)
)



IR. AMRAN BIN MAHZAN

BEFORE ME:



Balance Sheet

BALANCE SHEET AS AT 31 DECEMBER 2010

	Note	2010 RM	2009 RM
ASSETS			
Non-current assets			
Property, plant and equipment	5	986,577	1,357,812
Current assets			
Inventories	6	571,057	443,820
Other receivables	7	826,041	805,494
Cash and cash equivalents	8	15,521,249	21,082,345
		16,918,347	22,331,659
LIABILITIES			
Current liabilities			
Other payables		171,508	649,735
		171,508	649,735
Net current assets			
		16,746,839	21,681,924
		17,733,416	23,039,736
Financed by:			
Charitable funds		17,733,416	23,039,736

The accompanying notes form an integral part of these financial statements.

Statement Of Income And Expenditure

STATEMENT OF INCOME AND EXPENDITURE FOR THE YEAR ENDED 31 DECEMBER 2010

	Note	2010 RM	2009 RM
INCOME			
Donation	9	8,558,171	18,961,438
Annual fund raising dinner	10	50,128	121,826
Membership fee	11	5,890	2,280
Other income	12	443,036	564,155
		<u>9,057,225</u>	<u>19,649,699</u>
Less: EXPENSES			
CHARITABLE EXPENDITURE	13	11,196,463	14,964,010
OPERATING EXPENSES	14	3,167,082	2,557,316
		<u>14,363,545</u>	<u>17,521,326</u>
(DEFICIT)/SURPLUS BEFORE TAX		(5,306,320)	2,128,373
TAXATION	15	<u>-</u>	<u>-</u>
(DEFICIT)/SURPLUS FOR THE YEAR		<u>(5,306,320)</u>	<u>2,128,373</u>

The accompanying notes form an integral part of these financial statements.

Statement of Changes In Charitable Funds

STATEMENT OF CHANGES IN CHARITABLE FUNDS FOR THE YEAR ENDED 31 DECEMBER 2010

	2010 RM	2009 RM
Balance as at 1 January	23,039,736	20,911,363
(Deficit)/Surplus for the year	(5,306,320)	2,128,373
Balance as at 31 December	17,733,416	23,039,736
Charitable funds consist of :-		
Unrestricted fund	5,689,129	7,567,823
Restricted funds:-		
Bangladesh	251,936	409,089
Cambodia	335,478	62,537
China	42,670	389,379
Haiti	212,313	-
India	252,804	-
Malaysia	1,359,839	1,255,151
Maldives	22,531	226,512
Mentawai	196,985	-
Myanmar	1,222,024	2,045,432
Padang	41,555	502,354
Pakistan	758,830	483,337
Palestine	5,594,291	7,620,456
Philippines	139,035	161,073
Special Project-ADRRN	393,798	568,512
Sri Lanka	659,626	-
Sudan	560,572	1,518,723
Tsunami	-	229,358
	12,044,287	15,471,913
	17,733,416	23,039,736

The accompanying notes form an integral part of these financial statements.

Cash Flow Statement

CASH FLOW STATEMENT FOR THE YEAR ENDED 31 DECEMBER 2010

	2010 RM	2009 RM
Cash flows from operating activities		
(Deficit)/Surplus before tax	(5,306,320)	2,128,373
Adjustment for:		
Depreciation	400,173	406,957
Interest income	(304,503)	(387,736)
Loss on disposal and written off property, plant and equipment	1,000	14,088
(Deficit)/Surplus before working capital changes	(5,209,650)	2,161,682
Changes in working capital:		
Changes in inventories	(127,237)	(143,544)
Other receivables	(20,547)	20,491
Other payables	(478,227)	191,269
Cash(used in)/generated from operating activities	(5,835,661)	2,229,898
Interest received	304,503	387,736
Net cash(used in)/generated from operating activities	(5,531,158)	2,617,634
Cash flows from investing activities		
Proceeds from disposal of property, plant and equipment	250	73,967
Purchases of property, plant and equipment	(30,188)	(469,130)
Net cash used in investing activities	(29,938)	(395,163)
Net(decrease)/increase in cash and cash equivalents	(5,561,096)	2,222,471
Cash and cash equivalents at beginning of year	21,082,345	18,859,874
Cash and cash equivalents at end of year	15,521,249	21,082,345
Cash and cash equivalents comprise:		
Cash and bank balances	2,696,595	3,728,138
Deposit with licensed banks	12,824,654	17,354,207
	15,521,249	21,082,345

The accompanying notes form an integral part of these financial statements.

Notes To The Financial Statements

1. Principal Objects/Activities

The Society is a non-profit organisation, humanitarian and charitable body registered under the Societies Act, 1966, focusing on providing medical relief, sustainable health related development and disaster risk reduction activities for vulnerable communities. The principal objectives of the Society are:

- (a) to provide humanitarian aid and in particular medical relief and Water, Sanitation and Hygiene (WASH) programme to vulnerable communities within Malaysia or anywhere throughout the world as and when the need arises;
- (b) to promote the spirit of goodwill, volunteerism, and humanitarianism among members and volunteers of the Society;
- (c) to educate the public on aspects of humanitarian assistance, disaster management and risk reduction; and
- (d) to liaise with various local and international relief organisations, agencies, host governments and or other interested societies to assist in achieving these objectives.

2. Date of authorisation of financial statements

The financial statements were authorised for issue by Executive Council 27 May 2011.

3. Basis of preparation of the financial statements

The financial statements of the Society have been prepared in accordance with the provisions of the Societies Act, 1966 and the applicable Approved Accounting Standards issued by the Malaysian Accounting Standards Board.

The financial statements are presented in Ringgit Malaysia ("RM").

Notes To The Financial Statements

4. Summary Of Significant Accounting Policies

(a) Basis Of Accounting

The financial statements of the Society are prepared under the historical cost convention. The financial statements comply with the applicable approved accounting standards in Malaysia.

(b) Membership Subscription And Admission Fee

Ordinary membership subscription is payable annually before the accounting financial year. Only that subscription which is attributable to the current financial year is recognised as income. Subscription relating to periods beyond the current financial year is taken up in the Balance Sheet as subscription in advance under the heading of current liabilities. Subscription is payable in full irrespective of the date of resignation of members during the financial year. Life membership fee is recognised upon admission.

Membership admission is recognised upon approval by Executive Council of the respective applications.

(c) Property, Plant And Equipment

Property, plant and equipment are stated at cost less accumulated depreciation and impairment losses.

Property, plant and equipment are depreciated on a straight-line basis to write off the cost of the assets over the term of their estimated useful lives.

The principal annual rates of depreciation used are as follows: -

Air conditioner	20%
Computer and EDP	20%
Furniture and fittings	20%
Medical equipment	15%
Motor vehicle	20%
Office equipment	12%
Renovation	20%
Security equipment	12%

(d) Cash And Cash Equivalents

Cash and cash equivalents consist of cash in hand, at bank and fixed deposits with licensed banks. Cash equivalents comprise highly liquid investments which are readily convertible to known amount of cash which are subject to an insignificant risk of change in value. The Society has adopted the indirect method of Cash Flow Statement presentation.

Notes To The Financial Statements

4. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

(e) Income Recognition

Income from donation is recognised in the period in which the Society is entitled to receive and where the amount can be measured with reasonable certainty.

Interest income and other trading income are recognised on accrual basis.

(f) Inventories

Inventories consist of merchandise, Emergency Response Unit (ERU) and outreach clinic items valued at the lower of cost and net realisable value. Cost is determined by first-in first-out basis.

(g) Impairment Of Assets

The carrying values of assets are reviewed at each balance sheet date to determine whether there is any indication of impairment. If such an indication exists, the asset's recoverable amount is estimated. The recoverable amount is the higher of an asset's net selling price and its value in use, which is measured by reference to the discounted future cash flows. Recoverable amount are estimated for individuals assets or, if it is not possible, for the cash-generating unit to which the asset belongs.

An impairment loss is charged to the Income Statement immediately. Any subsequent increase in recoverable amount of an asset is treated as reversal of previous impairment loss and is recognised to the extent of the carrying amount of the asset that would have been determined (net of depreciation or amortisation, if applicable) had no impairment loss been recognised. The reversal is recognised in the statement immediately.

(h) Charitable Funds

Charitable funds consist of Unrestricted Fund and Restricted Funds.

Unrestricted Fund is a general fund that is available for use at the Executive Council's discretion in furtherance to the objectives of the Society.

Restricted Funds are subject to particular purposes imposed by the donor or by nature of appeal. They are not available for use in other Society's activities or purposes.

(i) Foreign Currency Translations

Transaction in foreign currencies are translated into Ringgit Malaysia at the exchange rates prevailing at the transaction dates or, where settlement has not yet taken place at end of the the financial year, at the approximate exchange rates prevailing at that date. All exchange gains and losses are taken up in the Income Statement.

Notes To The Financial Statements

4. Summary Of Significant Accounting Policies (Continued)

The principal closing rates used in the translation of foreign currency amounts are as follows:

Foreign currency:-	RM 31.12.2010	RM 31.12.2009
1 US Dollar	3.22000	3.44000
1 Brunei Dollar	2.45000	2.46000
1 Pakistan Rupee	0.03830	0.04360
1 Myanmar Kyatt	0.00360	0.00310
1 Sri Lanka Rupee	0.02910	0.02980
1 Australian Dollar	3.17000	3.08000
1 Euro	4.24000	5.02000
1 Chinese Yuan Renminbi	0.47930	0.49980
1 Japanese Yen	0.03840	0.03800
1 Sudanese Pound	1.41000	1.52000
1 Indonesian Rupiah	0.00037	0.00036
1 Philippine Peso	0.07820	0.07330
1 Singapore Dollar	2.45000	2.44000
1 Swiss Franc	3.28000	3.36000
1 Pound Sterling	5.07000	5.59000
1 Thai Bhat	0.11400	0.10270
1 India Rupee	0.07230	0.07420
1 Bangladesh Taka	0.04670	0.04940
1 Egypt Pound	0.54000	-
1 Maldives Ruffiya	0.26030	0.27040

Notes To The Financial Statements

5. Property, plant and equipment

	Furniture and fitting RM	Computer and EDP RM	Office equipment RM	Renovation RM	Motor vehicle RM	Air conditioner RM	Security equipment RM	Medical equipment RM	Total RM
Cost									
Opening balance	233,676	757,644	229,389	319,101	697,615	6,645	9,000	72,853	2,325,923
Additions	4,003	14,668	7,517	-	-	4,000	-	-	30,188
Disposal/Written off	-	-	(1,500)	-	-	-	-	-	(1,500)
Closing balance	237,679	772,312	235,406	319,101	697,615	10,645	9,000	72,853	2,354,611
Depreciation									
Opening balance	90,587	242,400	108,108	96,004	370,078	2,891	6,482	51,561	968,111
Charge for the year	45,614	137,966	25,709	63,818	113,216	1,842	1,080	10,928	400,173
Disposal/Written off	-	-	(250)	-	-	-	-	-	(250)
Closing balance	136,201	380,366	133,567	159,822	483,294	4,733	7,562	62,489	1,368,034
Net book value									
At 31 December 2010	101,478	391,946	101,839	159,279	214,321	5,912	1,438	10,364	986,577
At 31 December 2009	143,089	515,244	121,281	223,097	327,537	3,754	2,518	21,292	1,357,812
Depreciation charge for the year ended 2009	45,782	129,729	25,879	63,818	128,221	1,523	1,080	10,928	406,957

Notes To The Financial Statements

6. Inventories

	2010 RM	2009 RM
At Cost:		
Emergency Response Unit (ERU)	461,212	367,264
Merchandise	94,772	67,886
Outreach Clinics	15,073	8,670
	<u>571,057</u>	<u>443,820</u>

7. Other Receivables

	2010 RM	2009 RM
Other debtors, deposit and prepayment	184,122	376,854
Advance to mission members and basecamp	641,919	428,640
	<u>826,041</u>	<u>805,494</u>

8. Cash And Cash Equivalents

	2010 RM	2009 RM
Cash in hand	179,437	297,079
Cash at bank	2,517,158	3,431,059
Deposit with licensed banks	12,824,654	17,354,207
	<u>15,521,249</u>	<u>21,082,345</u>

9. Donation

	2010 RM	2009 RM
Unrestricted fund	5,557,990	4,967,056
Restricted funds	3,282,904	14,221,092
Less: Fundraising costs	(282,723)	(226,710)
	<u>8,558,171</u>	<u>18,961,438</u>

10. Annual Fund Raising Dinner

	2010 RM	2009 RM
Income received	195,270	306,556
Less: Fundraising costs	(145,142)	(184,730)
	<u>50,128</u>	<u>121,826</u>

Notes To The Financial Statements

11. Membership Fee

	2010 RM	2009 RM
Entrance fee	150	-
Life membership	3,700	-
Ordinary membership	2,040	2,280
	<u>5,890</u>	<u>2,280</u>

12. Other Income

	2010 RM	2009 RM
Interest received	304,503	387,736
Sale of merchandise	33,083	24,937
Others	105,450	151,482
	<u>443,036</u>	<u>564,155</u>

13. Charitable Mission Expenditure

Charitable expenditure by mission are as follows : -

	2010 RM	2009 RM
Afghanistan	707,143	648,412
Assessment	6,386	-
Bangladesh	489,544	193,893
Cambodia	610,780	497,341
China	346,709	269,708
Chile	119,008	-
India	272,196	310,820
Malaysia	949,248	737,090
Maldives	203,981	88,708
Medan and Acheh	36,219	-
Mentawai	101,947	-
Myanmar	1,228,938	3,287,735
Padang	1,040,376	457,823
Pakistan	434,342	2,234,320
Palestine	2,045,160	3,201,253
Philippines	24,914	230,673
Special Project - ADRRN	823,314	397,598
Sri Lanka	482,000	1,032,045
Sudan	958,151	933,767
Tsunami	194,335	342,624
Yogyakarta	121,772	100,200
	<u>11,196,463</u>	<u>14,964,010</u>

Notes To The Financial Statements

14. Operating Expenses

	2010 RM	2009 RM
Audit fee	11,000	11,000
Depreciation	307,351	289,596
(Gain)/Loss on foreign exchange	(9,919)	2,482
Loss on disposal and written off property, plant and equipment	1,000	14,088
Office rental	80,345	87,082
Staff costs (Note 16)	1,866,255	1,534,748
Warehouse rental	105,500	33,000
	<hr/>	<hr/>

15. Income Tax Expense

No taxation provided in the financial statements, as the Society is tax exempted under Section 44(6) of the Income Tax Act, 1967.

16. Staff Costs

	2010 RM	2009 RM
EPF and SOCSO	185,433	152,532
Medical	25,655	12,892
Salaries and allowances	1,655,167	1,369,324
	<hr/>	<hr/>
	1,866,255	1,534,748
	<hr/>	<hr/>
Number of employees (excluding Executive Council) at the end of financial year	46	44
	<hr/>	<hr/>

The background is a solid dark blue. It features several sets of concentric circles in a lighter shade of blue. One large set is in the top left, another large set is in the bottom left, and a smaller set is in the bottom right. A single, smaller concentric circle is positioned in the center-left area.

Get Involved!

Merchandise

Donate to MERCY Malaysia today!

As a non-profit organisation, MERCY Malaysia relies solely on funding and donations from organisations and generous individuals to continue our services to provide humanitarian assistance to our beneficiaries. Your contribution could make a difference in someone's life. No matter how small, it goes a long way.

All cash donations are tax deductible (applicable only to donations made within Malaysia).

If you do not receive your tax-exempted receipt within 2 weeks of your contribution, do notify us and we will attend to your request immediately. Please call our HQ at +603 2273 3999 or email us at info@mercy.org.my.

You, too, can help MERCY Malaysia achieve better humanitarian causes. Donate now!

To donate, visit

www.mercy.org.my

Put a smile on a loved one's face and help support our humanitarian work by purchasing MERCY Malaysia merchandise. Proceeds are channelled to our General Humanitarian Fund, where it will be used to support our on-going programmes locally and overseas.



Foldable Umbrella ◀
RM 15 each

Memo Pad ▼
RM 25 each

Car Sticker ▶
1 for RM 8
3 for RM 20

Notebook & Notepad Set ◀
Notebook only: RM 12
Notepad only: RM 7
Notebook & notepad set: RM 19

Travel Cubery Set ▲
RM 15 each

T-Shirts ▶
Available in black, white and red
(Sizes: S, M, L, XL)
RM 25 each

For further enquiries and to place orders, please contact us at 03 2273 3999 or email info@mercy.org.my

Join Us!

JOIN OUR SOCIETY

We are constantly on the lookout for society members who share our vision and commitment to our humanitarian work, regardless of race, religion or background. As a member, you will be able to witness and be involved in the governance of MERCY Malaysia as a society.

VOLUNTEER WITH US

Volunteers are the backbone of MERCY Malaysia. We are constantly looking for volunteers who have the passion, drive and professionalism while supporting our humanitarian efforts. We are proud to work with individuals that go beyond the call of duty to contribute their time and expertise to assist us in continuing our humanitarian work.

FUNDRAISE FOR US

As a non-profit organisation, MERCY Malaysia relies solely on funding and donations from organisation and generous individuals to continue our services to provide humanitarian assistance to our beneficiaries. From small-scale events to national campaigns, we are always open to opportunities of collaborating with partners who share our vision and commitment to our humanitarian work.

GROW YOUR CAREER

A career with MERCY Malaysia provides individuals with an opportunity to serve vulnerable communities while developing a profession within the humanitarian field. We are always on the lookout for outstanding team members who share our vision and commitment and willing to grow their talents with us.

Join Us!



To find out more, visit
www.mercy.org.my



facebook.com/MERCYMalaysia



twitter.com/MERCYMALAYSIA

www.mercy.org.my



Malaysian Medical Relief Society (Reg. No. 1155),
Level 2, Podium Block
Citypoint, Kompleks Dayabumi
Jalan Sultan Hishamuddin
50050 Kuala Lumpur, Malaysia
Tel: +603-2273 3999 Fax: +603 2272 3812
Email: info@mercy.org.my