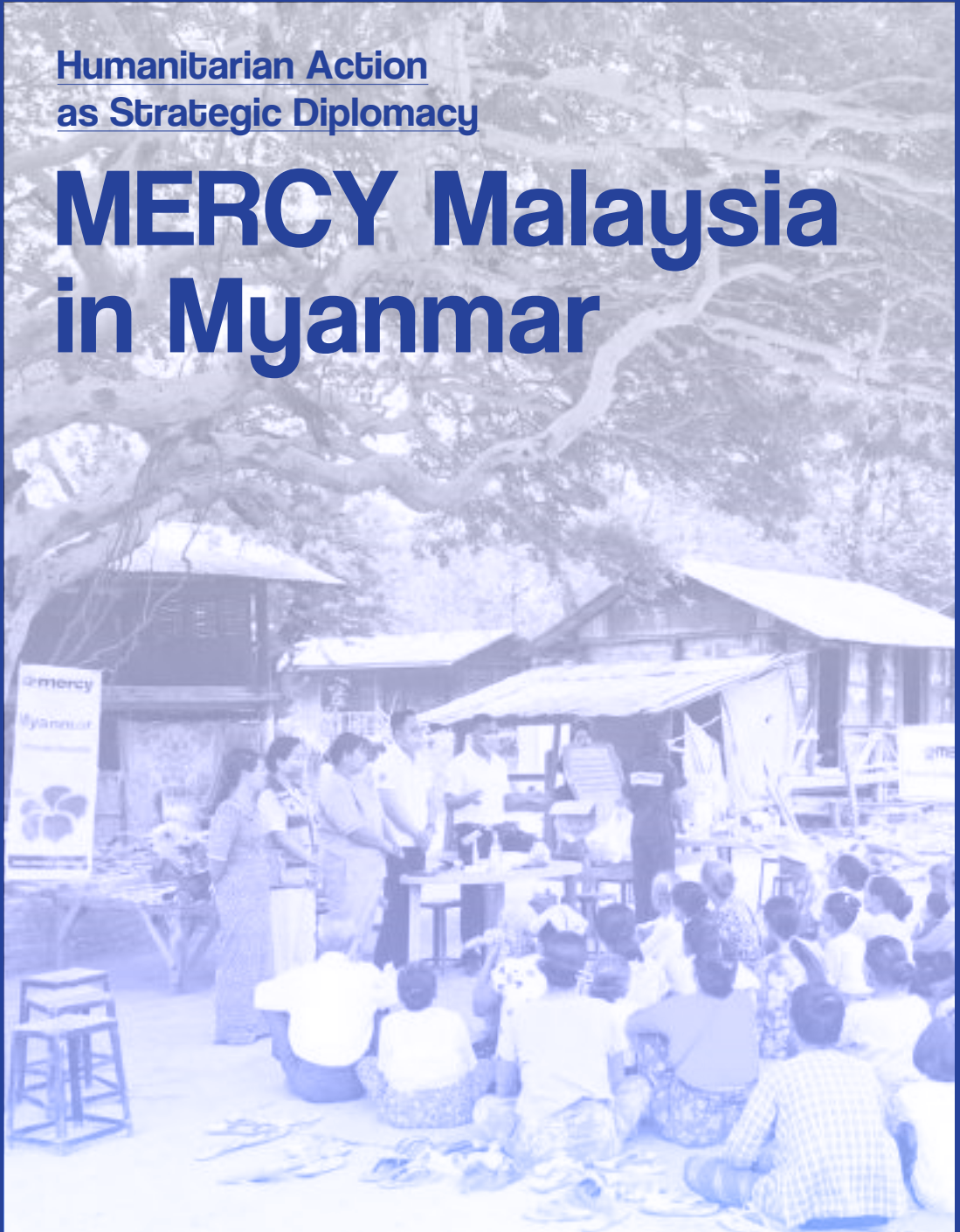


Humanitarian Action
as Strategic Diplomacy

MERCY Malaysia in Myanmar





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MERCY Malaysia's presence in Myanmar over the past 18 years reflects more than a technical commitment to humanitarian service delivery, it embodies the strategic integration of compassion, diplomacy, and resilience-building. In contexts where political pathways remain fragile and formal dialogue is fraught, MERCY Malaysia's principled humanitarianism has helped unlock access, foster trust, and sustain hope. This model positions humanitarian action not merely as response, but as a quiet yet powerful form of diplomacy in practice.

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MERCY Malaysia

MERCY Malaysia is a non-profit organization dedicated to providing medical relief, sustainable health development, disaster risk reduction and climate action for vulnerable communities in crisis and beyond. Funded solely by donations, we deliver humanitarian aid locally and internationally. Registered under the Societies Act 1966, our headquarters is in Kuala Lumpur, Malaysia.

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An e-version of this dossier is available at mercy.org.my

Executive Summary

Key messages

- MERCY Malaysia has delivered principled humanitarian assistance in Myanmar since 2008.
- Over 723,000 patient consultations delivered across 7 states.
- Neutral actor with proven access in volatile and restricted regions.
- Humanitarian diplomacy leveraged for access, stability, and trust-building.
- This dossier recommends ASEAN recognize CSOs as key diplomatic intermediaries.

Myanmar's protracted conflicts and recurrent disasters have left over 1 million people highly vulnerable to violence, displacement, and humanitarian crises. Since its first deployment in response to Cyclone Nargis in 2008, MERCY Malaysia has sustained a multi-sectoral humanitarian footprint across seven states—Ayeyarwady, Rakhine, Sagaing, Mandalay, Mon, Bago and Yangon—working in close partnership with Myanmar's Ministry of Health, local authorities and community leaders.

- Over 18 years of continuous engagement.
- 723,014 patient consultations delivered (2012 – May 2025).
- Reconstruction and upgrade of 17 health facilities, including Thet Kal Pyin Station Hospital and multiple Sub-Rural Health Centres.
- Rapid emergency response teams deployed to Cyclone Nargis, Rakhine conflict (2012, 2017), monsoon floods (2015, 2018, 2024) and the 7.7 Mw earthquake (March 2025).

MERCY Malaysia's approach combines emergency relief, long-term recovery and capacity building under its Humanitarian–Development Nexus (HDN) framework. By integrating health, WASH, mental health and psychosocial support (MHPSS), protection, and nutrition interventions, the organization has strengthened community resilience, reduced morbidity and saved thousands of lives. Its locally-designed, multi-hazard Rural and Sub-Rural Health Centre blueprint—adopted by Myanmar's Ministry of

Health in 2008 illustrates MERCY Malaysia's technical leadership in resilient infrastructure.

Beyond field operations, MERCY Malaysia has emerged as a credible diplomatic actor, leveraging over 25 years of experience to reinforce humanitarian diplomacy in Myanmar. Over the past 18 years operating in Myanmar, MERCY Malaysia has:

- Secured operational access through diplomatic channels at Union, State and Township levels.
- Engaged communities via village-level consultations and local outreach.
- Coordinated with UN-OCHA, WHO- EMT and other INGOs to harmonize relief, recovery and development efforts.

This dossier present a concise narrative of MERCY Malaysia's impact, outline the organization's role in humanitarian diplomacy, and propose strategic recommendations for ASEAN and all humanitarian actors to:

- Recognize and protect neutral CSO actors as vital diplomatic interlocutors in conflict-affected contexts.
- Facilitate expedited access and regulatory support for principled humanitarian interventions.
- Integrate humanitarian diplomacy within regional peacebuilding and stability frameworks.

MERCY Malaysia's official registration in 2015 marked a significant milestone—enabling deeper policy engagement, programmatic continuity, and strategic access to affected populations. MERCY Malaysia's sustained, inclusive, and impartial presence underscores its role as a trusted humanitarian actor in Myanmar's evolving landscape. Through sustained service and strategic engagement in Myanmar, we aim to reinforce the critical role of humanitarian action as a tool for trust-building, dialogue and long-term regional stability.

MERCY Malaysia's long-standing engagement in Myanmar is not only a demonstration of operational excellence, but a living testament to the power of humanitarian diplomacy. Its sustained presence bridges divides, fosters trust, and upholds dignity—proving that principled humanitarian action remains a vital pathway toward peace, resilience, and regional cohesion.

Background and Context

Key messages

- Myanmar faces multi-layered humanitarian crises: armed conflict, displacement, statelessness, poverty, disasters.
- 78% of national poverty burden lies in Rakhine; over 1.4 million stateless persons.
- Humanitarian access remains constrained—50%+ of IDPs in restricted zones.
- MERCY Malaysia initiated operations in 2008, formally registered in 2015, and is still in solid operations until today.

Myanmar remains one of Southeast Asia's most challenging and multifaceted humanitarian landscapes. Decades of military rule, unresolved ethnic conflicts, inter-communal tensions, and recurrent disasters have compounded the vulnerabilities of its population. More than one million individuals remain at significant risk, including over 1.4 million stateless persons in Rakhine State, many of whom face restricted movement, limited access to basic services, and chronic protection concerns. Humanitarian access remains tightly constrained, with more than half of internally displaced persons residing in areas that are difficult to reach due to regulatory, security, and logistical barriers. Frequent hazards such as flooding, cyclones, droughts, and seismic events further erode fragile health and infrastructure systems, exacerbating an already precarious situation.

MERCY Malaysia's engagement in Myanmar began in 2008, following the devastation of Cyclone Nargis—one of the deadliest disasters in the region—which claimed over 22,000 lives and displaced nearly a million people. What began as an emergency medical response evolved into a long-term, multi-sectoral humanitarian presence. Guided by principled neutrality and community-centred programming, MERCY Malaysia expanded its operations across seven states, delivering healthcare, water and sanitation (WASH), mental health and psychosocial support (MHPSS), nutrition, and disaster risk reduction initiatives. Through close collaboration with Myanmar's Ministry of Health, township-level authorities, and local partners, MERCY Malaysia helped restore vital health infrastructure and strengthen community resilience.

Operational Presence and Timeline

Key messages

- **2008 – 2009:** Cyclone Nargis emergency response, health facility reconstruction.
- **2012 – 2014:** Inter-ethnic violence in Rakhine—mobile clinics, hygiene kits, infrastructure.
- **2015 – 2016:** Flood emergency, surgical missions, mental health training.
- **2025:** Earthquake response in Kyaukse—mobile and Emergency Medical Team (EMT) deployment.

2008 – 2009 | Cyclone Nargis Emergency Response

- Deployed multi-disciplinary teams delivering emergency healthcare, food and non-food aid.
- Reconstructed 2 Rural Health Centres, 8 Sub-Rural Health Centres, 2 Station Hospitals and 1 Township Hospital.*
- Conducted disaster preparedness training for volunteer medical officers.

2012 – 2014 | Rakhine Inter-communal Violence Response

- Constructed 13 health facilities including the Thet Kel Pyin Rural Health Centre in Rakhine State.
- Deployed mobile clinics and distributed hygiene kits, mosquito nets, medicine, food aid and other life-saving assistance to reduce the humanitarian burden of those affected by the conflict.

2015 – present | Multi-Hazard Emergency and Development Programs

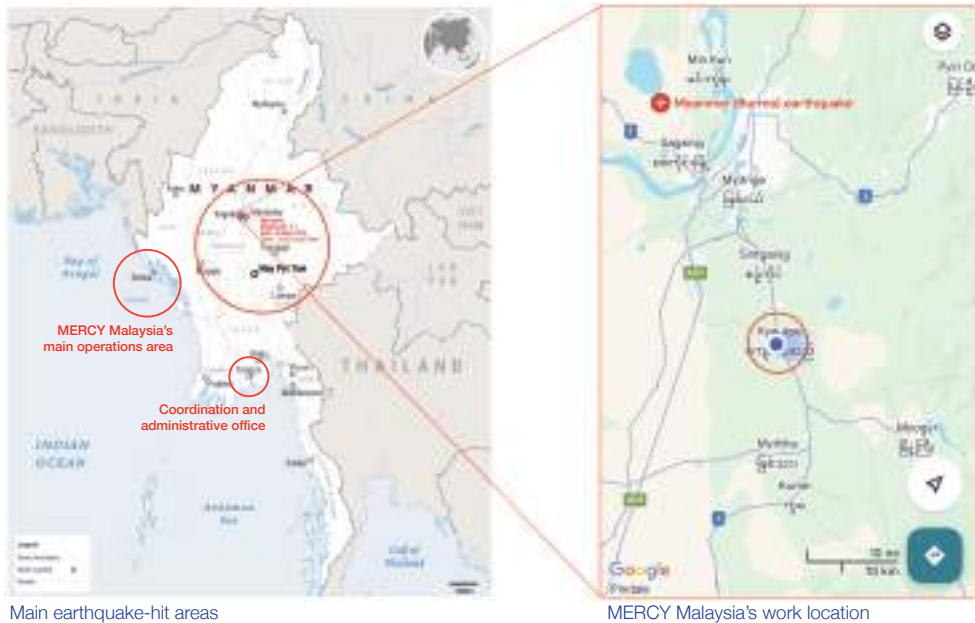
- Monsoon flood responses in Sagaing and Ayeyarwady with >5,000 patients treated.
- Cataract and cleft lip and palate surgeries in Mandalay and Sagaing (annual surgical missions).
- Mental health and psychosocial services training and deployment.
- Harm reduction and awareness programs to reduce risk of drug and alcohol abuse among community.
- Operationalization of clinics and community infrastructure projects.
- Public health education: hygiene promotion for the prevention of waterborne diseases; food safety and nutrition.



This page | In collaboration with Ministry of Health, MERCY Malaysia designed the blueprint for Myanmar's Sub Rural Health Centre, and constructed 2 Rural Health Centres, 8 Sub-Rural Health Centres, 2 Station Hospitals and 1 Township Hospital.

2025 Mandalay Earthquake Response

- 7.7 Mw earthquake in Kyaukse Township (March 2025).
- Rapid deployment of mobile medical teams units.
- Deployment of Emergency Medical Team (EMT) to support emergency and post-emergency healthcare needs.
- Health facility assessment for upgrade and rehabilitation.
- Over 6,000 patients reached; five rural communities served.
- Coordinated with Union, Regional, Township, District, and Village authorities through impartial and neutral engagement, as well as coordination with Malaysian Armed Forces Field Hospital.



Main earthquake-hit areas

MERCY Malaysia's work location

***Rural and sub-rural health centre**

In collaboration with Ministry of Health, MERCY Malaysia designed the blueprint for Myanmar's Sub Rural Health Centre, in the cyclone affected areas of Ayeyrwyady Division in 2008.

The design incorporated earthquake, cyclone and flood risks reduction elements. Key features of the design include the introduction of 16mm reinforcement steel bar standards for cyclone and earthquake resistance, stir-up at different angle to increased resistance to shocks, semi-slab roof around the building which allow people to escape during flash flood and rain water collection for drought season preparedness.

Geographic and Sectoral Footprint

Geographic footprint

Rakhine

Health facilities, mobile/static clinics, WASH, GBV-MHPSS training, IDP services.

Sagaing and Mandalay

Surgical missions, mobile healthcare, flood response.

Ayeyarwady and Mon

Cyclone and flood emergency response, rural healthcare and clinic reconstruction.

Yangon and Bago

Coordination and referral networks, health outreach.

Primary operational sectors

Health

Primary and secondary care, mobile clinics, referrals.

WASH

Latrine construction, clean water systems, hygiene education.

MHPSS

Community counselling, psychological first aid.

Emergency preparedness

Training and capacity building, kit distribution, infrastructure reinforcement and upgrades.



Operational Impact and Programmatic Depth

Key messages

- 723,014 patient consultations delivered.
- 25+ health facilities built/upgraded.
- 360 latrines, 250 hygiene kits, clean water systems.
- 200+ surgeries performed (cataract, cleft lip/palate).
- Ministry of Health adopted MERCY Malaysia's health infrastructure designs.
- Community trust built through culturally sensitive engagement.

MERCY Malaysia maintains a robust humanitarian presence in Myanmar, with sustained operations spanning multiple states and sectors. Through mobile clinics, rehabilitated health facilities, and community-based outreach, the organization delivers inclusive healthcare solutions in displacement zones, disaster-affected regions, and underserved rural communities.

Operating in locations such as Rakhine and Mandalay, MERCY Malaysia has supported maternal health, child nutrition, trauma recovery, and mental health services, while empowering community health workers with training and tools for localized care delivery. The organization's efforts in harm reduction and public health education underscore its commitment to holistic care, particularly for vulnerable groups such as stateless persons, internally displaced populations, and those affected by substance abuse.

MERCY Malaysia's adaptability in times of crisis—from natural disasters to disease outbreaks—reflects its operational depth and preparedness. In collaboration with local health authorities, township administrations, and international agencies such as WHO, UNODC, and UNICEF, it has consistently ensured coordinated aid delivery, referral systems, and integrated programming that bridges emergency relief with longer-term resilience-building.

This sustained engagement reinforces MERCY Malaysia's legitimacy as a neutral humanitarian actor, trusted by both communities and institutional stakeholders. The organization's principled presence across religious, ethnic, and political fault lines positions it as a credible partner in advancing humanitarian diplomacy within ASEAN's evolving framework.

Service Delivery Milestones

- 723,014 patient consultations (2012–2025) via static and mobile clinics.
- Over 25 health facilities constructed or rehabilitated, including:
 1. Thet Kel Pyin Sub-Rural Health Centre
 2. Upgraded facilities in Sagaing and Mandalay
 3. Multi-purpose clinic infrastructure designed for multi-hazard resilience

Emergency Response and Recovery

- Deployed teams during Cyclone Nargis, Rakhine inter-ethnic conflict, monsoon floods, and 2025 Mandalay earthquake.
- Distributed tens of thousands of hygiene kits, food and non-food items, mosquito nets, shelter materials.
- Rolled out mental health and psychosocial support (MHPSS) services post-disaster, including psychological first aid and community counselling.

Innovation in Health Infrastructure and Services

- Developed the Rural and Sub-Rural Health Centre blueprint recognized by Myanmar's Ministry of Health.
- Provided capacity-building to frontline responders and medical staff on:
 1. Gender-based violence (GBV) protection
 2. Mental health integration
 3. Disaster-responsive primary healthcare

Community Engagement and Localized Impact

- Trained hundreds of community volunteers and health workers.
- Conducted targeted outreach on hygiene, seasonal illness, and reproductive health.
- Sustained presence in volatile zones without politicization.



Humanitarian Diplomacy and Strategic Relevance

Diplomatic credentials

- Recognized partner of various stakeholders in Myanmar.
- Sustained operations across ethnic and religious divides.
- Leveraged Malaysia's ASEAN Chairmanship and bilateral diplomatic channels.

Strategic value

- Humanitarian action as non-political dialogue.
- MERCY Malaysia as ASEAN's regional CSO model for diplomacy through service.

Strategic partnerships and coordination

- Active coordination with UN OCHA, WHO, UNICEF, UNODC, ICVA, AHA Centre, NADMA and ADRRN.
- Joint health assessments, medical referrals, logistics pooling.
- Capacity-building with local health departments.
- Bilateral facilitation by Malaysian Embassy and ASEAN partners and networks.

MERCY Malaysia's approach to humanitarian action is deeply rooted in neutrality, cultural sensitivity, and non-partisanship. In Myanmar's complex landscape, MERCY has:

- Maintained uninterrupted access through diplomatic channels and local relationships.
- Operated in ethnically diverse, politically sensitive regions without affiliation or judgment.
- Engaged constructively with Ministries of Health, Social Welfare, and Relief & Resettlement.

ASEAN-level Influence

- MERCY Malaysia is one of the few ASEAN-based CSOs able to deliver humanitarian aid in Myanmar at scale.
- Its presence aligns with the Five-Point Consensus (5PC) and region-wide diplomacy.
- Trusted by ASEAN Coordinating Centre for Humanitarian Assistance on Disaster Management (AHA Centre), ASEAN member states and local authorities to deliver needs-based, impartial services.

Strategic Coordination

- Collaborated with UN OCHA, WHO, UNICEF, UNODC, ICVA, AHA Centre, NADMA and ADRRN for joint assessments and coordinated response.
- Engaged local township departments for health campaigns and infrastructure maintenance.
- Reinforced bilateral goodwill through embassy-led facilitation, site visits, and capacity exchange.

MERCY Malaysia's humanitarian diplomacy model is anchored on three interdependent pillars—**access, acceptance, and advocacy**—each vital to delivering effective aid in fragile, politically complex environments like Myanmar.

Access is the first threshold earned through years of consistent, principled engagement. MERCY Malaysia has secured operational entry across restricted zones by aligning with local governance structures, maintaining neutrality, and deploying culturally sensitive teams. This enables timely presence in communities often bypassed by formal systems.

Acceptance goes deeper than permissions. It reflects trust built through proximity, empathy, and shared resilience. MERCY's community-led programming, respectful outreach, and collaborative design with local authorities have made it a preferred humanitarian partner across ethnic, religious, and geographic divides.

Advocacy elevates these efforts beyond implementation, bringing humanitarian narratives to the policy table. MERCY represents regional civil society in strategic forums, articulating the voice of affected populations and advocating for protection, access, and ethical engagement under ASEAN frameworks.

Together, these pillars transform humanitarian action into diplomacy-in-practice, strengthening not just the delivery of aid, but the architecture of regional peace and solidarity. MERCY Malaysia exemplifies how a values-driven CSO can navigate crisis with compassion and convert service into strategic influence.

Challenges and Policy Recommendations

Challenges to humanitarian access

- Restricted zones and operational constraints.
- Bureaucratic delays, shifting registration policies.
- Lack of formal protections for neutral NGO actors.
- Fragmented coordination mechanisms.

Strategic recommendations to ASEAN

- Recognize neutral NGOs as humanitarian diplomatic actors.
- Establish protected access corridors for aid delivery.
- Enhance cross-border coordination among ASEAN responders.
- Embed humanitarian diplomacy in ASEAN stability frameworks.

Despite MERCY Malaysia's achievements, several systemic barriers continue to constrain humanitarian action in Myanmar:

Operational Challenges

- Restricted humanitarian access zones, particularly in Rakhine and northern regions.
- Fluid regulatory environment impacting NGO registration and reporting.
- Insufficient protective frameworks for neutral actors operating in conflict-affected areas.

Policy Recommendations to ASEAN

- Recognize NGOs as strategic diplomatic actors in conflict settings, and integrate them into Track II diplomacy pathways.
- Facilitate safe and timely access for humanitarian organizations through ASEAN-led humanitarian corridors and diplomatic assurances.
- Support cross-border coordination and resource pooling among ASEAN NGOs and governmental bodies.
- Embed humanitarian diplomacy into ASEAN peacebuilding tools and post-conflict recovery frameworks.
- Institutionalize protection mechanisms for humanitarian actors operating in complex environments, including joint ASEAN-CSO safety protocols, risk management platforms, and field coordination guidelines.
- Establish an ASEAN Civil Society Humanitarian Contact Group, tasked with facilitating regular dialogue, joint assessments, and early response coordination between CSOs and ASEAN member states.

Regional Solidarity in Response to the Myanmar Crisis

The protracted displacement of Rohingya populations across Southeast and South Asia, driven by systemic violence, statelessness, and humanitarian neglect, has created multi-jurisdictional health and protection needs. MERCY Malaysia has responded with a transnational approach that recognizes the interconnected nature of the crisis, delivering coordinated humanitarian assistance in Myanmar, Bangladesh, and Malaysia.

Myanmar

In Rakhine State, MERCY Malaysia has sustained operations across IDP camps and displacement zones, offering maternal and child healthcare, trauma treatment, and primary medical services. With mobile clinics, health facility upgrades, and community health education, the organization has reached tens of thousands of displaced Rohingya and host community members, reinforcing its commitment to neutrality, dignity, and inclusive care delivery.

Bangladesh

In Cox's Bazar, the world's largest refugee settlement, MERCY Malaysia operated a Comprehensive Primary Healthcare Centre in Camp 15 for five years (2019–2024). This facility served over 50,000 patients annually, providing essential health services and public health education to Rohingya refugees. Through sustained donor support and strategic partnerships, MERCY Malaysia bolstered health access, reduced mortality risks, and strengthened local capacity for disease prevention and response.

Malaysia

As thousands of Rohingya and Myanmar refugees continue to seek protection within Malaysia, MERCY Malaysia's Qatar Fund for Development (QFFD) Clinics project plays a crucial role in ensuring healthcare equity for displaced populations. Located in Ampang and Kajang, these clinics—operated in collaboration with QFFD, Qatar Charity, Yayasan Kebajikan Negara (YKN), and other partners.

Together, these initiatives reflect MERCY Malaysia's commitment to reducing humanitarian burden across the migration continuum—from crisis zones to host countries—through strategic, principled engagement. By addressing health needs at every stage of displacement, MERCY Malaysia reinforces the vital role of civil society in advancing protection, health equity, and regional stability.

Conclusion

Humanitarian Action as a Diplomatic Instrument for Regional Peace and Resilience

MERCY Malaysia's presence in Myanmar over the past 18 years reflects more than a technical commitment to humanitarian service delivery—it embodies the strategic integration of compassion, diplomacy, and resilience-building. In contexts where political pathways remain fragile and formal dialogue is fraught, MERCY Malaysia's principled humanitarianism has helped unlock access, foster trust, and sustain hope. This model positions humanitarian action not merely as emergency response, but as a quiet yet powerful form of diplomacy in practice.

As a neutral civil society organization deeply rooted in ASEAN, MERCY Malaysia has operated across ethnic, religious, and geographic divides—delivering needs-based assistance with dignity and impartiality. Whether serving communities in post-cyclone zones, conflict-affected territories, or disaster epicentres, its interventions have built respectful relationships with township authorities, national ministries, and local health systems. These experiences underscore the role humanitarian actors can play as credible intermediaries in complex settings—helping to navigate uncertainty, cultivate social cohesion, and reinforce regional stability.

MERCY Malaysia's diplomatic engagement is embedded not in grand gestures, but in steady presence, trust-building, and consistent service across fragmented spaces. Within ASEAN's evolving humanitarian architecture, it provides a tested pathway for integrating humanitarian diplomacy into the broader regional agenda. Through its field-proven model of access, acceptance, and advocacy, MERCY Malaysia demonstrates how service-oriented organizations can operate with legitimacy, influence policy, and catalyse coordination—without compromising neutrality.

As ASEAN confronts humanitarian challenges shaped by protracted crises and climate threats, MERCY Malaysia's model offers a timely blueprint for principled, community-led diplomacy. It is a reminder that healing begins not only with medicine, but with presence, trust, and an unwavering belief in shared humanity.



Humanitarian Action as Strategic Diplomacy

