





## OUR CORE

- We focus on rapid medical response for the assistance of communities affected by disasters
- We hold ourselves accountable to our donors and beneficiaries
- We recognise the value of working with partners and volunteers
- We provide an opportunity for individuals to serve with professionalism, upholding the Code of Conduct for International Red Cross and Red Crescent Movement and NGOs in Disaster Relief

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## NEW LOGO RATIONALE

MERCY Minib refreshed logo embodies efficiency and effectiveness amidst humility. The logo personifies courage and determination through its clear-cut and minimalist design. The lower case alphabets denotes humility as a value we embrace in our approach to our work with beneficiaries and partners, yet, the bold font signifies our ability to face challenges and to be effective in our work. The Royal Blue signifies calm in times of crisis. The Bright Red shows our commitment and passion in working with disaster affected and impoverished communities. The flower on the logo is the 'Bunga Raya' (hibiscus sinensis) which is the national flower of Malaysia. This denotes MERCY Minib origins as well as pride in being a Malaysian-born, internationally renowned humanitarian organisation, supporting affected communities regardless of race, religion, culture or boundary.



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## CONTENTS

**05.** PATRON'S MESSAGE

07.

PRESIDENT'S MESSAGE

10.

GENERAL MANAGER'S REVIEW

14.

MERCY MALAYSIA EXECUTIVE COUNCIL

**17**.

TREASURER'S REPORT

**22.** 

**HUMANITARIAN ACCOUNTABILITY** 

28.

**COLLABORATIONS** 

**32.** 

TOTAL DISASTER RISK MANAGEMENT

35.

**DISASTER RISK REDUCTION** 

**42**.

**COUNTRY REPORTS** 

**73.** 

**EVENTS** 

80.

SECRETARIAT MEMBERS 2008

81.

THANK YOU

**82**.

MISSION MEMBERS

**87**.

FINANCIAL STATEMENTS



"As Patron of MERCY Malaysia, I am truly proud of its achievements over the years."





MERCY MALAYSIA HAS A FIRM AND PROVEN COMMITMENT TOWARDS ALL ITS BENEFICIARIES AND DONORS. I AM CONFIDENT THAT IT WILL CONTINUE TO ADAPT TO THE TRYING TIMES AHEAD AND NOT COMPROMISE ON ITS BEST ENDEAVOURS IN FULFILLING ITS HUMANITARIAN CAUSE.

In the past year, despite the economic downturn, MERCY Malaysia has continued its noble objectives and has worked with admirable dedication in its life-saving commitments. This is clearly evidenced by its effective and immediate responses to the Myanmar Cyclone Nargis disaster in May 2008 and the Gaza Conflict in late December. Apart from these two major projects, MERCY MALAYSIA continued with its on-going work in Sudan, Afghanistan, Cambodia and Pakistan, among other countries.

As Patron of MERCY Malaysia, I am truly proud of its achievements over the years. Its quick responses to the threats of disasters, both natural and man-made, in providing humanitarian relief for all people regardless of colour, creed or religion, has gained international admiration and recognition. I commend the excellent work done by each and everyone in the Organisation for their unstinting dedication and commitment. Each one of you has made the Nation proud.

As we look forward, there are challenging times for all. The global economic conditions will bring forth even greater problems. As an Organisation, you will face the difficult task of raising funds for your various projects. At the same time, there will be greater demands for your relief work. However, with your track record, I am confident that donors will continue to support you. In this regard, I urge all Malaysians to provide whatever assistance you can to the Organisation so that it can continue to serve humanity, and in so doing alleviate the sufferings of fellow human beings.

MERCY Malaysia has a firm and proven commitment towards all its beneficiaries and donors. I am confident that it will continue to adapt to the trying times ahead and not compromise on its best endeavours in fulfilling its humanitarian cause. As a NGO that exists for vulnerable world communities, the work carried out by MERCY Malaysia is unquestionably important. Let us continue to support MERCY Malaysia's efforts, and let us extend a hand to a community of survivors. Through MERCY Malaysia, let us share the Organisation's spirit – that the service to humanity is service to us.

I once again congratulate MERCY Malaysia for its accomplishments and also wish all members of the Organisation, both staff and volunteers, much success in the future.

H.R.H SULTAN AZLAN SHAH

Nizhh

The Sultan of Perak Darul Ridzuan

"It is a good time for us to work as a humanitarian community in closer partnership amidst limited resources."





## THE TENACITY OF OUR STAFF AND VOLUNTEERS WORKING AMIDST RESTRICTIONS AND NEW CHALLENGES WON MANY HEARTS ESPECIALLY AMONG THE AFFECTED POPULATION.

Peace and Greetings to All.

The year 2008 will be remembered as one with many challenges. From the fuel and food price crises that rocked the world, we witnessed how many communities already struggling to cope with their daily needs are pushed back in their development. Added to this, Asia was once again hit by two major natural hazards resulting in massive loss of life, homes and livelihoods in the aftermath of Cyclone Nargis in Myanmar and the Sichuan earthquake in China.

I was in Myanmar in the early days following Cyclone Nargis and was proud to see how MERCY Malaysia was adaptable to the challenging humanitarian environment and in building new partnerships in the field. The tenacity of our staff and volunteers working amidst restrictions and new challenges won many hearts especially among the affected population. What was very clear to me was the need for MERCY Malaysia to contribute to enhancing local and national capacities in the countries we work in. The very people who are at risk of disasters are the ones who understand the needs and affected people best, and we should be there to support them and build their resilience.

The newly established Disaster Risk Reduction Department at MERCY Malaysia was pivotal in ensuring our goals to be an organisation that practices total disaster risk management are met. Working closely with the Relief Operations Department ensured that our projects transitioned seamlessly from response to recovery to rehabilitation and preparedness. Communities were left stronger than when we found them through disaster

preparedness training and risk reduction strategies including mitigation. Any structure we built was made more earthquake or cyclone-proof and community participation was the cornerstone of success.

I am especially pleased that MERCY Malaysia has been able to work closely with the Ministry of Education in Malaysia to roll out our School Preparedness Programme. Through our membership in the Asian Disaster Reduction and Response Network (ADRRN), we are also able to work with other similar agencies in the region.

In Malaysia, we have been able to focus more on the development side of our work, working closely with the Ministry of Health, UNICEF, UNHCR and other partners to deliver high quality healthcare and outreach programmes. What is even more gratifying is the active participation of Malaysian volunteers, young and not-so-young, in many programmes in Malaysia through the active Chapters in country.

One year after achieving Certification from the Humanitarian Accountability Partnership (HAP), the organisation continues to put in more effort to meet the demands of certification which in essence requires a level of Quality Management in our systems, staff, projects and partners. There is still a lot of work to do to ensure we do not lose momentum and to remind ourselves constantly of the importance of accountability not only to our donors and partners, but even more so to our beneficiaries who will work to assist.

Winning the Special Mention Award for Social Reporting by an NGO in the Annual ACCA MESRA Awards in Malaysia for Accountability and Social Reporting for two years' in a row was a huge recognition for MERCY Malaysia and we will endeavour to work even harder in the years to come.

I am therefore honoured and delighted to share more of our work and achievements with you through this Annual Report 2008 which will cover our activities in 2008 and some activities that cross into the first quarter of 2009. I hope that this report will give you a better understanding on how we have been able to push forward despite many challenges in the past year.

As I close, in the past year till now, the world is facing one of the worst financial and economic crises in the history of mankind. Many of our donors are facing these stresses and the entire NGO community globally is under pressure from dwindling funds. I urge all of you to continue supporting us as best as you can. Our work ensures those who are in a financial crisis every day of their lives receive not only support but also have their resilience built. It is a good time for us to work as a humanitarian community in closer partnership amidst limited resources. We thank everyone who has supported us whether in cash or kind and hope for your continued encouragement and support.

Last but not least, the 2008 annual report features the people who have played a crucial role in making MERCY Malaysia what it is today - our staff and volunteers; and I would like to especially thank all of you for your hard work and dedication.

Thank you.

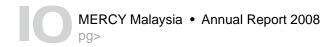
Yours sincerely,

DATUK DR. JEMILAH MAHMOOD

President

"Our work ensures those who are in a financial crisis every day of their lives receive not only support but also have their resilience built."





# GENERAL MANAGER'S

FOR US AT MERCY MALAYSIA, IT WAS A TEST OF OUR ORGANISATIONAL STRENGTH, READINESS AND CAPACITY TO RESPOND TO A COMPLEX CIRCUMSTANCE. IT WAS THE MARK OF A NEW BEGINNING.

#### REINVENTING HUMANITARIAN WORK

Cyclone Nargis did not only cause massive devastation to the people of Myanmar in May 2008; it was a wakeup call for disaster responders and humanitarian workers around the world. As the world sat rigid in shock, continuous lobbying for international humanitarian response from all sectors aggressively took place. And it became apparent that the complexities of developing trust and partnerships in fulfilling the functions of humanitarian aid is key to saving lives in times of disasters.

Cyclone Nargis taught us many things and one key lesson is that, disaster response alone is not enough. It taught us to respect cultures and strive to advocate for political will. It taught us that regional and international partnerships necessitate the quality of service delivery. For us at MERCY Malaysia, it was a test of our organisational strength, readiness and capacity to respond to a complex circumstance. It was the mark of a new beginning.

New beginnings often denote the end of an era. For MERCY Malaysia, 2009 proved to be the start of many new beginnings, lessons learnt from the past providing the strength for the organisation to embark on innovative initiatives as it pursues continuous improvement. In 2008, the organisation augmented its human resource with 20 new recruits at the Secretariat, out of whom 4 are expatriates with expert knowledge on disaster response and preparedness. By the end of 2008, we had the strength of 49 staff at the secretariat. Injecting new blood into a nine-year-old organisation generated fresh ideas and ways of working; not to mention igniting some of

the deep-rooted passion subdued by the hectic day-today tasks of running an international disaster response organisation. And thus the transformation of a young but effective organisation, in its physical presentation to the world while nurturing internal strength.

#### **NEW HEADQUARTERS**

The MERCY Malaysia Secretariat in Kuala Lumpur is now housed in a well equipped new office premise in Kompleks Dayabumi. The office space, measuring slightly over 7,000 square feet, was sponsored by PETRONAS. At the generosity of our donors and the tireless efforts of the Communications and Fundraising Department, MERCY Malaysia's new office was renovated and equipped at a minimal cost. We raised approximately RM350,000 of the total cost of the new office through fundraising efforts.

The new corporate and professional look designed by ArcRadius creates an exciting new environment for a team of dedicated staff. The bright red, open theme of the new office aims to foster a closer relationship among staff and to reflect the professionalism that MERCY Malaysia strives for. For senior staff who had called the three-storey shop lot in Ampang that was our old headquarters home for many years, it was a sad farewell.

To complement the new professional outlook of MERCY Malaysia, the Executive Committee decided to change MERCY Malaysia's logo to reflect the new and more mature direction of the organisation. The new logo reflects the softer side of humanitarian work and embodies the passionate and giving spirit of the staff and volunteers who are the engine of the organisation.

#### DISASTER RISK REDUCTION

The role of the Disaster Risk Reduction (DRR) Department is to introduce DRR as a component in MERCY Malaysia's projects both locally and abroad. DRR is a crucial concept where communities are educated on preventing or minimising the effects of disasters.

Although the department is just over a year old, MERCY Malaysia has successfully implemented DRR projects in Indonesia, Malaysia and Maldives. DRR has the potential to be a large area of MERCY Malaysia's work. Depending on funding availability – which has proven a challenge since the second part of 2008 – we intend to expand our DRR activities to encompass most MERCY Malaysia projects locally and abroad.

#### TECHNOLOGICAL ADVANCEMENT

Congruent to organisational expansion and growth, the need for better information technology systems grew in tandem. In late 2007, MERCY Malaysia approached the (former) Ministry of Science, Technology and Innovation with a proposal to develop and implement an innovative system to assist in managing its response in an effective and efficient manner. The grant was approved in August 2008 and work is currently in progress to develop the first phase of our IT infrastructure development.

#### **GROWING PARTNERSHIPS**

MERCY Malaysia continues to promote regional and global partnerships in 2008. With the support from the Malaysian Technical Cooperation Programme (MTCP), we succeeded in bringing together stakeholders from international governments and civil society via joint training programmes on Disaster Response and Recovery and Community Based Disaster Risk Management (CBDRM). Developing human capital in disaster response with a multi-sectoral approach through the provision of specialised training programmes, is a Malaysian initiative that consolidates the various forms of technical cooperation that has been extended by Malaysia to other developing countries since the 1960s.

Another exciting partnership in 2008 was MERCY Malaysia's coordinating role in the Pandemic Logistics and Learning Exercise (P2LX). In partnership with the World Food Programme (WFP), we provided logistical and management support for the programme, an important initiative geared at responding to a crisis situation triggered by a pandemic such as the H5N1 in a controlled simulation environment. This highly successful exercise received support from other partner organisations such as: the World Health Organisation (WHO), Malaysia's National Security Council (Majlis Keselamatan Negara) and other government agencies.

The programme also saw participation from the United Nations System Influenza Coordination (UNSIC), United Nations Office for the Coordination of Humanitarian Affairs, Action Against Hunger (Action Contre la Faim or ACF), OXFAM, the United States' Centre for Disease Control and Prevention and the United States Agency for International Development (USAID).

MERCY Malaysia was also involved at the 3rd Asian Ministerial Conference on Disaster Risk Reduction in December 2008. With technical support from the Institute of Corporate Responsibility, we coordinated a pre-conference event entitled Public-Private Partnership: Engagement of the Private Sector in Disaster Risk Reduction. The event was an excellent platform to discuss and explore ways for the private and public sectors to work together in the crucial area of Disaster Risk Reduction (DRR) as advocated for in the Hyogo Framework of Action (HFA).

MERCY Malaysia's projects are well documented in this annual report. Our response to Cyclone Nargis was an immense achievement and due recognition must be given to the team of staff and volunteers at the Secretariat and on the field who worked tirelessly round the clock for many months. Through aggressive public relations and communication efforts, we raised RM5.8million for Cyclone Nargis. Other project highlights include the commencement of MERCY Malaysia's Basic Healthcare Clinic at the Zam Zam camp for Internally Displaced Persons (IDPs) in Darfur and the cleft lip and palate surgery project in Bangladesh in partnership with Dhaka Community Hospital.

## HUMANITARIAN ACCOUNTABILITY PARTNERSHIP (HAP)

MERCY Malaysia received the HAP certification in 2007 and subsequently revamped or introduced methods and processes in order to be truly accountable to donors, partners and beneficiaries. Issues in the organisation's policies, procedures and processes were tackled both in the micro and macro-levels. To do this, MERCY Malaysia engaged with two credible organisations: PricewaterhouseCoopers (PwC) and the HAY Group to look into issues of corporate accountability and staff competencies.

As the HAP certification is testament to the organisation's continuous strive for accountability practices, MERCY Malaysia has actively advocated for the accountability of beneficiaries with potential partners via the Asian Disaster Response and Reduction Network (ADRRN), which in turn has led to several member organisations expressing interest to sign up as HAP members.

THE FUTURE OF MERCY MALAYSIA

MERCY Malaysia is primed to be the leading Asian humanitarian agency. Rapid growth has presented us with new challenges. In our quest for professionalism, we struggle to establish parallel development of our human resource to meet the expectations of our partners and donors.

Attracting and retaining talents remain one of our biggest challenges. We are not able to compete with other International NGOs in meeting salary expectations. With a relatively high attrition rate, we struggle to maintain continuity of developmental plans. The opportunity to upscale and expand our services is tremendous, but we are limited to our existing human resource capacity.

Raising funds for the sustainability of the organisation requires creative strategies to attract new "investors". Malaysians are generally reactive donors, thus the relative success of our appeals at the height of a disaster. The organisation needs to strengthen its core funding through

a regular income stream. As the global and national economic climate become increasingly challenging, we face the reality of uncertainties. Whilst we focus on delivering quality services to our beneficiaries, we are not sheltered from severe implications of rising costs and a decline in public and private sector support. The journey for MERCY Malaysia is still far-reaching and not without challenges but with continued support we will rise to them.

MONA HANIM SHEIKH MAHMUD

rough Mahmol

General Manager

#### Sister Che Tah Hanafi

#### Medical Coordinator with MERCY Malaysia (formerly a nursing sister)

Bam, Iran - 2004

Cambodia - 2002, 2007, 2008, 2009 **Missions:** 

Aceh - 2005 Jogjakarta - 2006 Syria & Lebanon - 2007

Bihar, India - 2008, 2009

Pakistan - 2005, 2007 Sudan - 2005, 2006, 2007 Bangladesh - 2007, 2009

Belum, Perak (Local mobile clinics) - 2008, 2009

Tasek Gelugor, Pulau Pinang Hometown:



# MERCY MALAYSIA EXECUTIVE COUNCIL 2008-2009

Seated (from left): Dr. Ahmad Faizal Mohd Perdaus, Datuk Dr. Jemilah Mahmood, H.R.H Raja Dr. Nazrin Shah, H.R.H Sultan Azlan Muhibbuddin Shah, H.R.H Tuanku Bainun binti Mohd. Ali, H.R.H Tuanku Zara Salim, Y.M Raja Riza Shazmin Raja Badrul Shah, Mohd Azman Sulaiman. Standing (from left): Farah Hamzah, Norazam Ab. Samah, Ir Amran Mahzan, Assoc. Prof. Dr. P. Shanmuhasuntharam, Assoc. Prof. Dr. Mohamed Ikram Mohamed Salleh, Dr. Heng Aik Cheng, Mona Hanim Sheikh Mahmud, Dr. Shalimar Abdullah.





#### Muhammad Hapis Bin Jamil Businessman

Missions: Aceh - 2005

Johor - 2007

Gaza, Palestine - 2009

Hometown: Pasir Gudang, Johor

Balakot, Pakistan - 2005 Darfur, Sudan - 2008





OUR WORK IN PROVIDING MEDICAL RELIEF AND SUSTAINABLE HEALTH-RELATED DEVELOPMENT REMAINS THE MAIN FOCUS, ILLUSTRATED BY THE LARGE PERCENTAGE OF 63.33% (EQUIVALENT TO RM 6.1 MILLION) FROM THE TOTAL EXPENDITURE.

#### FINANCIAL STATEMENTS

The Executive Committee is 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 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

Total income was RM 18.2 million, RM 7.5 million more than the previous year. Total donations received were RM 7.7 million more than last year but income from other sources was reduced by RM 138,000.00.

Contributions to the General Fund was RM 3.9 million up by about RM 300,000.00. For restricted funds a total of RM 13.6 million received, up more than RM 6 million from the previous year. The main bulk of restricted funds was for our efforts in Myanmar and Sudan-amounting to more than RM 9 million.

There was a significant increase in donations received from the Public and Government Sector in 2008. Donations and gifts from the Public increased more than

RM 3 million compared to the previous year, amounting to RM 4.7 million. The Government supported us with donations amounting to RM 2.7 million. Donations and gifts received from the Private Sector were RM 7.7 million, comparable with funds received in the previous year. Donations and gifts from each sector in terms of percentage is shown in the table enclosed.

#### CHARITABLE EXPENDITURE

In comparison with 2007, our Charitable Expenditure increased by RM 143,000.00 to a total of RM 9.6 million. It is important to note that although the expenditure did not significantly change, the number of countries where MERCY Malaysia operated is higher than in 2007.

Our work in providing medical relief and sustainable health-related development remains as the main focus, illustrated by the large percentage of 63.33% (equivalent to RM6.1 million) from the total expenditure.

In 2008, we geared up our efforts in water, sanitation & hygiene related programs, which increased to 7.19% from 0.15% in the previous year.

#### **OPERATIONAL EXPENDITURE**

Our operating expenditure elevated from 15% in the year 2007 to 18% in 2008. With the inevitable growth and expansion, we had increased our staff recruitment in order to ensure a successful running of our humanitarian efforts. The number of staff for 2008 was 49 as opposed to 28 in 2007.

Last but not least, we would like to express our deepest appreciation to all our supporters including the EXCO,

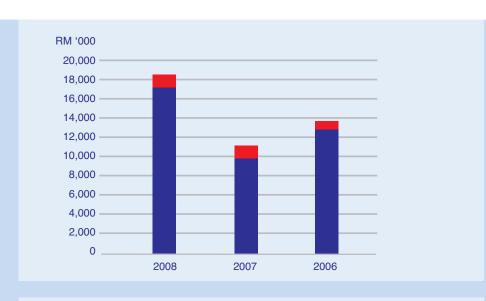
Management, members, pool of volunteers and donors who has worked with us throughout the year.

IK AMKA	N MAHZA
Honorary	Treasurer

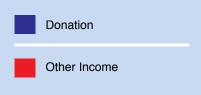
SOURCE OF DONATION BY SECTOR			
	RM	%	
Private Sector	7,756,39	44.31	
Public	4,746,676	27.12	
Other NGOs	832,286	4.76	
International Organisations	1,459,201	8.34	
Malaysian Government	2,708,582	15.47	
TOTAL DONATION COLLECTED	17,503,139		

HOW WE SPENT (CHARITABLE EXPENDITURE)			
	RM	%	
Healthcare & health-related	6,109,257	63.33	
Education	1,896,631	19.66	
Disaster preparedness	288,344	2.99	
Shelter	244,785	2.54	
Water, sanitation & hygiene	693,227	7.19	
Total project cost	9,232,24		
Field offices' running cost	414,320	4.30	
9,646,564			

## FINANCIAL REVIEW

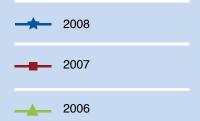


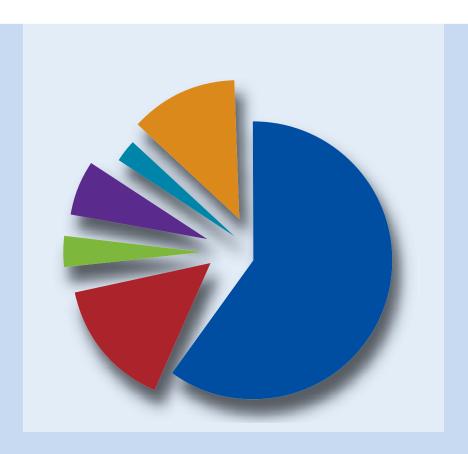




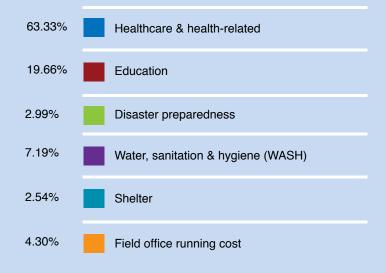


#### DONATION RECEIVED BY SECTOR (3 -YEAR COMPARISON)





## TOTAL EXPENDITURE BY SERVICES FOR 2008



#### **Benjamin Chai Phin Ngit a.k.a. Uncle Ben** (on the right) Entrepreneur and Head of MERCY Malaysia Sarawak Chapter

Sarawak - 2003

Sri Lanka - 2003

Sabah - 2003 - 2008

Missions: Afghanistan - 2003

Bam, Iran - 2004 Infanta, Philippines - 2003

Aceh - 2006

Hometown: Kuching, Sarawak





THE FOLLOWING MERCY MALAYSIA CODE OF CONDUCT IS THE BASIS OF OUR HUMANITARIAN ACCOUNTABILITY FRAMEWORK IN WHICH ALL OUR STAKEHOLDERS - STAFF, VOLUNTEERS, PARTNERS AND PARTNER ORGANISATIONS AND DONORS - SUBSCRIBE AND ADHERE TO WHEN THEY ARE REPRESENTING MERCY MALAYSIA IN ONE FORM OR ANOTHER.

The Code of Conduct will be included in all official documentation including but not limited to - collaterals, manuals, agreements as well as Memorandums of Understanding (MoUs) and Letters of Understanding (LoUs) in the course of their involvement and relationship with MERCY Malaysia in providing humanitarian services.

#### **VISION**

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

#### **MISSION**

To provide medical relief and sustainable health-related development for vulnerable communities

#### **CORE VALUES**

- We focus on rapid medical response for the recovery of communities affected by disasters
- We recognise the value of working with partners and volunteers
- We provide an opportunity for individuals to serve with professionalism, upholding the Code of Conduct for the International Red Cross and Red Crescent Movement and NGOs in Disaster Relief

 We hold ourselves accountable to our donors and beneficiaries

### MERCY MALAYSIA IS A PROUD MEMBER AND/OR SIGNATORY TO:

- · The SPHERE Standards in Humanitarian Aid
- The Humanitarian Accountability Partnership (HAP)
- The International Council of Voluntary Agencies (ICVA)
- Asian Disaster Reduction and Response Network (ADRRN)
- Has Special Consultative Status with the Economic and Social Council (ECOSOC) of the United Nations

# THE CODE OF CONDUCT FOR THE INTERNATIONAL RED CROSS AND RED CRESCENT MOVEMENT AND NON GOVERNMENTAL ORGANISATIONS IN DISASTER RELIEF

As signatory to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non Governmental Organisations in Disaster Relief, MERCY Malaysia Staff and Volunteers must abide to the 10 Principles of the Code of Conduct which are:

- a. The humanitarian imperative comes first.
- Aid is given regardless of the race, creed or nationality
  of the recipients and without adverse distinction of any
  kind. Aid priorities are calculated on the basis of need
  alone.
- c. Aid will not be used to further a political or religious standpoint.
- d. We shall endeavour not to act as instruments of government foreign policy.
- e. We shall respect culture and custom.
- f. We shall attempt to build disaster response on local capacities.
- g. Ways shall be found to involve beneficiaries in the management of relief aid.
- We hold ourselves accountable to both those we seek to assist and those from whom we accept resources.
- Relief aid must strive to reduce future vulnerabilities as well as meet basic needs.

j. In our information, publicity and advertising activities, we shall recognise disaster victims (survivors) as dignified humans and not hopeless objects.

## HUMANITARIAN ACCOUNTABILITY PARTNERSHIP (HAP)

As a Member of HAP, MERCY Malaysia subscribes to the HAP Accountability Principles:

- a. Commitment to humanitarian standards and rights
  - Members state their commitment to respect and foster humanitarian standards and the rights of beneficiaries.
- b. Setting standards and building capacity
  - Members set a framework of accountability to their stakeholders.
  - Members set and periodically review their standards and performance indicators, and revise them if necessary.

#### c. Communication

 Members inform, and consult with, stakeholders, particularly beneficiaries and staff, about the standards adopted, programmes to be undertaken and mechanisms available for addressing concerns.

#### d. Participation in programmes

- Members involve beneficiaries in the planning, implementation, monitoring and evaluation of programmes and report to them on progress, subject only to serious operational constraints.
- e. Monitoring and reporting on compliances
  - Members involve beneficiaries and staff when they monitor and revise standards.
  - Members regularly monitor and evaluate compliance with standards, using robust processes.

- e. Monitoring and reporting on compliances (continued)
  - Members report at least annually to stakeholders, including beneficiaries, on compliance with standards. Reporting may take a variety of forms.
- f. Addressing complaints
  - Members enable beneficiaries and staff to report complaints and seek redress safely.
- g. Implementing partners
  - Members are committed to the implementation of these principles if and when working through implementation partners.

## THE SPHERE STANDARDS IN HUMANITARIAN AID

The SPHERE Project: Humanitarian Charter and Minimum Standards in Disaster Response

Applications and Compliance:

By applying and complying to the Minimum Standards recommended by the Sphere Project, MERCY Malaysia's humanitarian response seeks to align and streamline its provision of services and aid to the common standards, as prescribed below:

- a. Ensuring participation
- b. Initial assessment
- c. Response
- d. Targeting
- e. Monitoring
- f. Evaluation
- g. Aid worker competencies and responsibilities
- h. Supervision, management and support of personnel

## PROTECTION FROM EXPLOITATION AND ABUSE

MERCY Malaysia upholds the UN Secretary General Bulletin on Special Measures for protection from sexual exploitation and sexual abuse (ST/SGB/2003/13).

For purposes of definition, sexual exploitation means any actual or attempted abuse of a position of vulnerability, differential power, or trust for sexual purposes, including but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another.

For the purpose of definition, sexual abuse means the actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.

The Bulletin states the prohibition of sexual exploitation and sexual abuse. Section 3 of the Bulletin is used in the MERCY Malaysia Code of Conduct and is applicable to all MERCY Malaysia staff and volunteers.

The prohibition includes:-

- Sexual exploitation and sexual abuse constitute acts of serious misconduct and are therefore grounds for disciplinary measures, including summary dismissals.
- b. Sexual activity with children (persons under the age of 18) is prohibited regardless of the age of majority or age of consent locally. Mistaken belief in the age of the child is not a defence.
- c. Exchange of money, employment, goods or services for sex, including sexual favours or other forms of humiliating, degrading or exploitative behaviour is prohibited. This includes the exchange of assistance that is due to beneficiaries.

- d. MERCY Malaysia does not allow sexual relationships between workers and beneficiaries since they are based on inherently unequal power dynamics. Such relationships undermine the credibility and integrity of humanitarian aid work.
- e. Where a staff or volunteer develops concerns or suspicions regarding sexual abuse or exploitation by a fellow staff or volunteer, s/he must report such concerns via the reporting mechanisms.
- f. All staff and volunteers are obliged to create and maintain an environment which prevents sexual exploitation and abuse and promotes the implementation of this Code of Conduct.

The prohibitions set out above are not intended to be an exhaustive list. Other forms of sexually exploitative or sexually abusive behaviour may be grounds for administrative action or disciplinary measures including summary dismissal. Volunteers in violation of the above will be dismissed and removed from the MERCY Malaysia volunteer database.

#### PRINCIPLES OF PARTNERSHIP

MERCY Malaysia recognises the advantages of working with the right partners and that its integrity extends to the partners; also meeting the highest standards of accountability and transparency.

In striving to enhance the effectiveness of working with partners and to maximise complementarity due to the different mandates and mission statements of partners, MERCY Malaysia will base the partnership on the following Principles of Partnership (as endorsed by the Global Humanitarian Platform, 12 July 2007):

#### a. Equality

Equality requires mutual respect between members of the partnership irrespective of size and power. The participants must respect each other's mandates, obligations and independence and recognize each other's constraints and commitments. Mutual respect must not preclude organizations from engaging in constructive dissent.

#### b. Transparency

Transparency is achieved through dialogue (on equal footing), with an emphasis on early consultations and early sharing of information. Communications and transparency, including financial transparency, increase the level of trust among organizations.

#### c. Result-oriented approach

Effective humanitarian action must be reality-based and action-oriented. This requires result-oriented coordination based on effective capabilities and concrete operational capacities.

#### d. Responsibility

Humanitarian organizations have an ethical obligation to each other to accomplish their tasks responsibly, with integrity and in a relevant and appropriate way. They must make sure they commit to activities only when they have the means, competencies, skills, and capacity to deliver on their commitments. Decisive and robust prevention of abuse committed by humanitarians must also be a constant effort.

#### e. Complementarities

The diversity of the humanitarian community is an asset if we build on our comparative advantages and complement each other's contributions. Local capacity is one of the main assets to enhance and on which to build. Whenever possible, humanitarian organizations should strive to make it an integral part in emergency response. Language and cultural barriers must be overcome.



## FINANCIAL ACCOUNTABILITY AND TRANSPARENCY

Accountability and transparency are the core principles of the organisation. All staff and volunteers must abide by our accountability procedures and processes, which include adherence to the Treasury and Financial Policies.

MERCY Malaysia is responsible to its stakeholders, which include beneficiaries, donors, staff, volunteers, partners, governments, local authorities, other organizations and the general public who have placed faith in MERCY Malaysia.

#### To uphold this trust we:

- Promote good stewardship of resources, dues and other contributions that are used to pay operating expenses, programme costs, salaries, and employee benefits, and administration.
- Ensure that travel, entertainment and related expenses are incurred on a basis consistent with the mission of MERCY Malaysia and not for personal gain or interests.
- Refrain from using organisational resources for non-MERCY Malaysia purposes.
- Observe and comply with all laws and regulations affecting MERCY Malaysia and the country where we are operating (wherever possible).

#### **CONFIDENTIALITY AND PRIVACY**

Confidentiality is a hallmark of professionalism. We therefore:

- Ensure that all information, which is confidential, privileged or nonpublic, is not disclosed inappropriately.
- Respect the privacy rights of all individuals in the performance of their duties.
- Committed to maintain the confidentiality of complainants and non-retaliation against complainants and to provide an environment where our stakeholders are able to report complaints and seek redress safely.

#### **Hew Cheong Yew a.k.a Eddy, Tin Tun** Senior Programme Officer, MERCY Malaysia

Missions: Aceh - 2005

P. Pinang & Kedah - 2005 Maldives - 2006

Maldives - 2006 Jakarta - 2007 Cambodia - 2007 Nias - 2005 North Korea - 2005 Philippines - 2006 Bengkulu - 2007 Bangladesh - 2007-8 Balakot, Pakistan - 2005 Sulawesi - 2006 Syria & Lebanon - 2006

Darfur, Sudan - 2007 Myanmar - 2008-9

Hometown: Jelebu, Negeri Sembilan



#### **COLLABORATIONS**

IN MERCY MALAYSIA'S EXPERIENCE, NO CONTRIBUTION IS TOO SMALL, AND NO MEASURE OF KINDNESS, TOO MINUTE. AS A NGO WHICH DEPENDS ON NOT ONLY VOLUNTEER AND PUBLIC SUPPORT BUT CORPORATE BACKING AS WELL, MERCY MALAYSIA IS INDEBTED TO ITS PARTNERS WHO HAVE CONTRIBUTED IN MANY VALUABLE WAYS.

The corporate sector continues to demonstrate firm support to MERCY Malaysia in cash, kind and various types of assistance - all which are invaluable to the development of the organisation as well as its effectiveness in delivering assistance where needed.

#### ANIMASIA STUDIO SDN BHD

MERCY Malaysia entered into a partnership with Animasia Studio Sdn Bhd to create awareness on disaster preparedness amongst students using the popular Bola Kampung characters as Ambassadors of MERCY Malaysia's School Preparedness Programme (SPP).

In this partnership, Animasia Studio incorporates "Disaster Awareness" messages into Bola Kampung television episodes. Animasia Studio also contributes creative ideas and artwork design to MERCY Malaysia while developing and sourcing advertising and promotion collaterals such as greeting cards, website and Bola Kampung "Disaster Awareness" clips and flash games.

Animasia Studio, in conjunction with its merchandising partners, will provide Bola Kampung merchandise to be given as gifts to participants of the SPP, a programme which addresses awareness and preparedness by increasing the capacity of schools to respond to natural disasters while also increasing public awareness about the risks of and responses to natural disasters.

#### **CELCOM (MALAYSIA) BERHAD**

Telecommunications giant Celcom signed on as a MERCY Malaysia partner to support the organisation's telecommunications needs both at Headquarters and on the field. This strategic partnership between the two Malaysian organisations, saw Celcom providing MERCY Malaysia with the necessary telecommunication services for its humanitarian efforts in the region. Further to that, Celcom is conducting fundraising initiatives on behalf of MERCY Malaysia, introducing Multimedia Messaging Service projects for two funds, thus far. MERCY Malaysia is also committed to facilitating Celcom's role as a leading telecommunications services in times of crisis.

#### **HAY GROUP**

In 2008, HAY Group Sdn Bhd worked closely with MERCY Malaysia to streamline its human resource department and provided invaluable support through coaching and training of our senior management teams.

HAY group will continue to work with MERCY Malaysia in talent management and human capital development.

#### **MALAYSIA AIRLINES (MAS)**

MERCY Malaysia first entered a partnership with MAS in 2006, which has translated into a long-term collaboration between the organisations. Continuing the Hope for Humanity campaign, MAS continued its sponsorship into 2008 by making available airline tickets for emergency humanitarian missions at no cost or a discounted fare as well as providing a waiver on a set amount of access baggage for missions overseas.

In introducing fundraising initiatives, MERCY Malaysia donation boxes were placed in strategic locations and collections were channelled to the MERCY Humanitarian Fund. To date, from donation boxes positioned at the Golden Lounge KLIA (domestic & international), KLIA ticketing office and KL Sentral ticketing office, MERCY Malaysia has collected a total of RM85,455.08. MAS will continue its effort in supporting these fundraising initiatives.

## MYDIN MOHAMED HOLDINGS BERHAD

Popular home-grown retailer, Mydin Mohamed Holdings Berhad, in partnership with Animasia Studio Sdn Bhd and MERCY Malaysia, is devoting part of its sales of Bola Kampung merchandise to MERCY Malaysia.

MYDIN agreed to channel five per cent of nett Bola Kampung sales to the MERCY Humanitarian Fund – a commitment announced during a three-party tie up between the organisations in a strategy to increase awareness in disaster preparedness.

#### PRICEWATERHOUSECOOPERS (PwC)

In our bid to strive towards a higher level of professionalism, MERCY Malaysia recognises the value of working with partner organisations that subscribe to the practice of sustainable development.

In this regard, MERCY Malaysia is fortunate to work with PwC which has been and remains a committed partner of MERCY Malaysia since 2007.

In 2008, PwC continued to help us further improve our quality management system. PwC worked with MERCY Malaysia to improve the Stakeholder Management Framework, Finance Policies as well as policies relating to compliance with Humanitarian Accountability Partnership principles.

On the other hand, MERCY Malaysia has supported a number of PwC's sustainable development programme including conducting Basic Life Support Courses for PwC employees.

#### UNIVERSITI KEBANGSAAN MALAYSIA

The humanitarian sector is a dynamic sector that is alive and evolving. As a result, research and development in this sector, especially those related to emergency relief efforts and risk reduction is an opportunity that MERCY Malaysia is proud to partner on with Universiti Kebangsaan Malaysia (UKM), one of Malaysia's top research university.

In 2008, MERCY Malaysia and UKM signed a memorandum of understanding to delve into three focus areas: research, education and contribution to the society - providing a mutual platform for students, staff and relief workers to complement and synergise their common humanitarian effort. Such effort has been made possible through a firm and sincere commitment by all and especially the management to imbue a sense of responsibility and care for mankind.

#### **UMW HOLDINGS BERHAD**

In 2008, UMW made a commitment to provide MERCY Malaysia with a grant to assist vulnerable communities in Malaysia. Funds from the grant will specifically be channelled towards long-term health programmes as well as education and capacity development programmes, during and after times of emergency. The grant also includes vehicle sponsorship for MERCY Malaysia Headquarters and the Sabah and Sarawak State Chapters. The vehicles are much needed for MERCY Malaysia's humanitarian operations. Furthermore, the grant will support MERCY Malaysia's Community-Based

Disaster Risk Management programmes, with the long term objective of strengthening vulnerable communities. Going beyond financial contributions, the newly-formed UMW Volunteers teams will undergo special training with MERCY Malaysia to support MERCY Malaysia's local missions, when needed.

















#### Major (R) Hj. Abdul Rashid Mahmud a.k.a Uncle **Retired Army Officer**

Mia Sri Lanka - 2003

Darfur, Sudan - 2004

P. Pinang & Kedah - 2005 Bagh, Pakistan - 2005

Jogjakarta - 2006

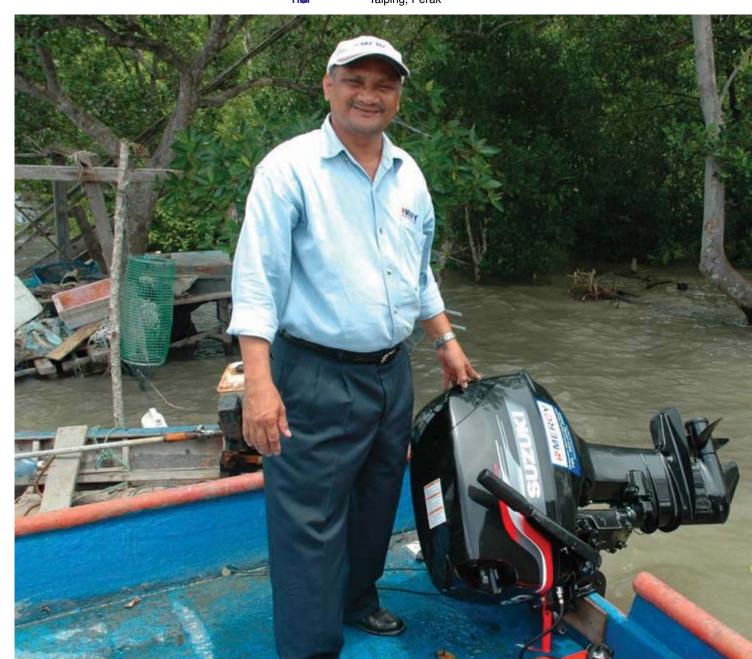
Afghanistan - 2004 Kelantan flood - 2005

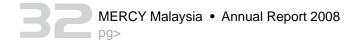
Aceh - 2005

Jogjakarta (Mt Merapi) - 2006

Bihar, India - 2008

Taiping, Perak Hten

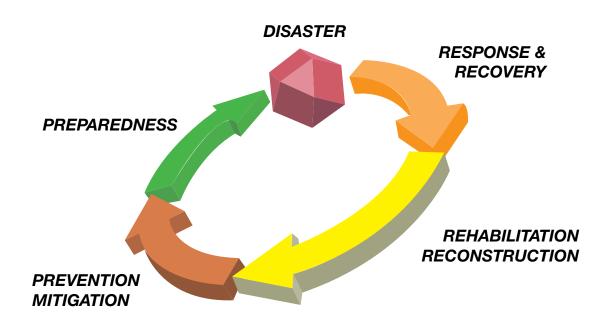




## TOTAL DISASTER RISK (TDRM)

#### TDRM IS THE HALLMARK OF OUR WORK





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. HOWEVER, IN LINE WITH THE HYOGO FRAMEWORK FOR ACTION (HFA), WHICH WAS ADOPTED AT THE WORLD CONFERENCE ON DISASTER REDUCTION IN KOBE, JAPAN IN JANUARY 2005, MERCY MALAYSIA BEGAN IMPLEMENTING ITS KEY DOMESTIC AND INTERNATIONAL PROJECTS AND PROGRAMMES BY UTILISING A NEW APPROACH, TOTAL DISASTER RISK MANAGEMENT (TDRM) IN 2005. TDRM APPLIES DISASTER RISK MANAGEMENT TO ALL THE PHASES OF THE DISASTER MANAGEMENT CYCLE - EMERGENCY RESPONSE, RECOVERY, PREVENTION/MITIGATION AND PREPAREDNESS/READINESS.

HFA outlined five main action points, among them the importance of risk education as an important element to help reduce vulnerabilities. MERCY Malaysia's commitment to TDRM emphasises the importance of discovering a clearer understanding and response to disaster management while also addressing the root causes and underlying factors that lead to disasters.

Phase One of TDRM is Emergency Response. A life-saving phase, its aim is to ensure that an effective response -- rescue efforts, fire fighting, emergency medical assistance and an evacuation procedure -- is in place when a disaster has taken place.

Once all the steps in the Emergency Response phase has taken place, the next phase, that of Recovery, comes into play. This phase involves rehabilitation and disaster-resilient reconstruction efforts as well as appropriate land use planning, industrial rehabilitation planning and livelihood support.

The third phase of TDRM, Prevention/Mitigation emphasises on efforts to prevent or mitigate damage when a disaster strikes. Among the activities related to this phase are the utilisation of seismic resistant technology for rebuilding or retro-fitting, the construction of dikes, replanting of mangroves, forestation and the construction and operation of meteorological observation systems to help prevent and mitigate damage in the event of an earthquake, flood, landslide or storm.

The final phase of TDRM is Preparedness or Readiness. As it is important for any country to be prepared in the event of a disaster, this phase is crucial because it emphasises the importance of hazard maps, food and material stockpiling as well as the preparation of emergency kits, all vital factors that help to minimise the impact of a disaster.

The risk of disasters and its adverse impact can be reduced effectively if balanced attention is placed on all phases of the disaster management cycle.

#### Dr. Lai Fui Boon (on the right) Paediatric Surgeon

Missions:

Afghanistan - 2001 Aceh - 2005 Jogjakarta - 2006

Bam, Iran - 2004 Bagh, Pakistan - 2005 Palestine - 2009

Hometown: Melaka



### DISASTER REDUCTION (DRR)

DISASTER RISK REDUCTION (DRR) INVOLVES ACTIVITIES AIMED AT PROTECTING COMMUNITIES FROM HAZARDS AND MINIMISING THEIR VULNERABILITY TO DISASTER RISKS. IT MOVES BEYOND THE TRADITIONAL DISASTER MANAGEMENT APPROACH OF SIMPLY FOCUSING ON RESPONSE, REHABILITATION AND REBUILDING AFTER A DISASTER EVENT.

### **DRR HAS A TWO-FOLD AIM:**

- to build societies that are resilient to natural hazards;
   and
- to ensure development does not increase vulnerability to hazards.

MERCY Malaysia has introduced several programmes centred on Disaster Risk Reduction amongst vulnerable groups: among Malaysian schoolchildren through the School Preparedness Programme; among schoolchildren and university students in Banda Aceh, Indonesia, and in Maldives, where MERCY Malaysia implemented a Community Based Disaster Risk Management (CBDRM) programme to support the government's efforts to improve disaster preparedness in the island-nation.

DRR has emerged as an essential factor in sustainable development. In the DRR context, development is sustainable if it recognises potential hazards and incorporates measures to reduce a community's vulnerability to these hazards. At a minimum, development activities must not increase a community's vulnerability.

The Hyogo Framework for Action 2005-2015: Building the Resilience of Nations and Communities to Disasters was adopted by 168 countries – including Malaysia – at the UN World Conference on Disaster Reduction in Kobe,

Japan, in 2005. It is a global blueprint that offers guiding principles, priorities for action and practical means for achieving disaster resilience for vulnerable communities.

MERCY Malaysia subscribes to the HFA when implementing DRR policies and community-driven activities.

### INDONESIA TSUNAMI RESOURCE CENTER

The Tsunami Resource Center (TRC) was built within Syiah Kuala University (UNSYIAH) by MERCY Malaysia with funding support by the Force of Nature and opened in July 2007. MERCY Malaysia has conducted four main activities in TRC; drafting a resource book for disaster education, TRC visit day for elementary school children, School Watching Workshop for Elementary Headmasters and Disaster Education Workshop for Education Faculty students of UNSYIAH, Banda Aceh.

The resource book for disaster education was used at Disaster Education Workshop for Education Faculty students to introduce how to teach disaster issues and it would become their guide book when they pursue the teaching job in the future. The four workshops were taken place in November to December 2008. A total number of 484 students participated in the workshops and learned about disaster education.



The Tsunami Resource Centre (TRC) was built within the Syiah Kuala University (UNSYIAH) by MERCY Malaysia with partial funding support from the Force of Nature Aid Foundation.

For the event of "TRC visit day", it was visited by 1280 elementary students from 32 elementary schools in Banda Aceh and Aceh Besar, from July to December 2008. Through the visit, the children learned about disaster and disaster preparedness in a 3-hours-session, through video screening, games and simulation activities.

School Watching Workshop for Elementary Headmasters was conducted on 22nd October 2008 and attended by 24 participants. This workshop aimed to deliver the basic knowledge on disaster and disaster preparedness through risk and hazard mapping practices and obtain their understanding of the importance of disaster education in schools. The headmasters also were encouraged to set up their own disaster management committee at the school level.





The 'TRC visit day' was visited by 1280 elementary students from 32 elementary schools in Banda Aceh and Aceh Besar where the children learned about disaster and disaster preparedness in a 3-hour session, through video screenings, games and simulation activities.

### MALAYSIA SCHOOL PREPAREDNESS PROGRAMME

MERCY Malaysia continued its School Preparedness Programme in 2008 and expanded the coverage. School Preparedness Programme aims to promote a culture of disaster preparedness among school children and to increase capacity of schools and students to respond to disasters. The programme consists of two major activities: School Watching Workshop and School Response Preparedness Training. The School Response Preparedness Training will start in 2009. The team of the trainers and facilitators for these activities is also established with support of volunteers.

The training of trainers' workshops for teachers under School Watching Workshop were held in Sepang, Ipoh, Kapit, Kota Bharu and Batu Pahat in January - August 2008. A total of 331 teachers attended this 2 days workshop and learned about disaster and hazard mapping techniques.

Another 5 workshops were conducted for students under School Watching Workshop in Kota Tinggi district in November 2008. 200 students were selected from five schools in the district, including SMK Taman Kota Jaya, SMK Tun Habab, SMK Laksamana, SMK Bandar and SMK Tan Sri Jaafar Albar.

MERCY Malaysia School Preparedness Programme has received tremendous support from the Ministry of Education for the year 2008. MERCY Malaysia continues its effort to create disaster awareness in school with the teachers and students.

Furthermore, in November, MERCY Malaysia has signed a MoU with Animasia Sdn. Bhd, a creative content company. Based on the MoU, it became possible for MERCY Malaysia to use the characters of "Bola Kampung" as message ambassadors for the coming School Preparedness Campaign 2009/2010.



Another five workshops were conducted under the School Watching Workshop in Kota Tinggi district in November 2008 where 200 students were selected from five schools in the district.



### SCHOOL SAFETY INITIATIVES

MERCY Malaysia together with our local partner in Maldives, Care Society, conducted a school safety programme with technical support from SEEDS India. The programme aimed to build standard in existing schools together with the surrounding community to be prepared for natural disasters and emergencies.

The programme includes a sensitization workshop for teachers on disaster preparedness and a school wide drill, where teachers and students learnt and practiced skills on fire safety, rescue, evacuation and first aid.

The programme was piloted in Kaafu Kaashidoo school, and later implemented at four additional schools, namely Haa Alifu Ihavandhoo School, Raa.Ungoofaru School, Laamu Fonadhoo School and Gaafu Alifu Villingili School, from July to October 2008. The programme was also supported by the island office, Maldives police service and the local health center.



MERCY Malaysia together with Care Society, conducted a school safety programme with technical support from SEEDS India that is aimed at building standard in existing schools together with the surrounding community to be prepared for natural disasters and emergencies.



### MALDIVES COMMUNITY BASED DISASTER RISK MANAGEMENT (CBDRM) PROGRAMME

The Maldives is regularly exposed to natural hazards such as storms, drought, heavy rains and storm surges caused by cyclones in the southern Indian Ocean. The northern Atolls have a greater risk of cyclonic winds and in the south there is a risk of earthquakes.

The 2004 Indian Ocean tsunami struck the Maldives resulting in over 80 deaths. In addition 30% of the population of 300,000 were displaced, 25% of the 200 inhabited islands were severely damaged and 10% were totally destroyed; 14 islands had to be evacuated; total losses were estimated at US\$472 million equating to 62% of GDP.

With funds from the Malaysian Ministry of Finance MERCY Malaysia is implementing a Community Based Disaster Risk Management Project in support of the Maldives' government's efforts to improve disaster preparedness in the island-nation. The project aims to engage target communities to develop Island Disaster Management Plans for their islands.

During the two year project, Island Disaster Management Plans will be developed with the community on 4 islands in Haa Alifu and Haa Dhaalu Atolls, the two northernmost Atolls of the Maldives. The project will benefit some 15,500 people on these four islands.

In developing the Plan each community must identify the hazards and vulnerabilities confronting their community and develop solutions to reduce the disaster risk and therefore make their island safer. In addition a Disaster Management Committee on each island will be created and taskforces will be formed to conduct response activities in the event of a disaster on their island.







The School Safety Programme included a sensitisation workshop for teachers on disaster preparedness and a school wide drill, where teachers and students learnt and practiced skills on fire safety, rescue, evacuation and first aid.

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Finally MERCY Malaysia, along with its implementing partner in the Maldives, Care Society, will work with the communities to develop a 3-month community-based disaster risk reduction project, implementing one of the solutions identified by the community to make their island safer when they were preparing the Island Disaster Management Plan.

During 2008, the Maldives CBDRM Programme was developed in consultation with the National Disaster Management Centre in the Madives. MERCY Malaysia and Care Society, a Maldives-based NGO signed an MOU, agreeing to jointly implement the project. The first phase of the project has been implemented in the two target islands in Haa Alifu Atoll. The project will be completed by April 2010.







MERCY Malaysia is implementing a Community Based Disaster Risk Management Project in support of the Maldives' government's efforts to improve disaster preparedness in the island-nation that aims to engage target communities to develop Island Disaster Management Plans for their islands.

### COUNTRY



### OVERVIEW (MALAYSIA)

## MALAYSIA

MERCY MALAYSIA REMAINED ACTIVE ON THE HOMEFRONT AND CONTINUED ITS WORK OF RUNNING VARIOUS HEALTH SERVICES WHILE ALSO OFFERING HUMANITARIAN AID, AWARENESS-RAISING AND CAPACITY-DEVELOPMENT PROGRAMMES. AMONG THE CRUCIAL PROGRAMMES IT RAN IN MALAYSIA IN 2008 WAS THE SCHOOL PREPAREDNESS PROGRAMME. A PROJECT THAT ALLOWS MERCY MALAYSIA TO UTILISE THE VAST EXPERIENCE IT HAS GAINED IN DEALING WITH CALAMITIES THROUGHOUT THE WORLD. THE PROGRAMME IS DESIGNED TO HELP THE NATION'S SCHOOLS TO MINIMISE THE RISKS POSED BY NATURAL DISASTERS, SUCH AS THE SEASONAL FLOODS IN MANY PARTS OF THE COUNTRY. MERCY MALAYSIA ALSO CONTINUED TO BE ACTIVE IN THE RUNNING OF MOBILE CLINICS, SOME OF WHICH WERE IMPLEMENTED IN COOPERATION WITH PARTNERS, AMONG THEM UNHCR (THE OFFICE OF THE UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES), AGENSI ANTI-DADAH KEBANGSAAN (AADK) AND THE MINISTRY OF **HOME AFFAIRS (KKDN).** 

### SCHOOL PREPAREDNESS PROGRAMME

Continuing its work in promoting a culture of disaster preparedness among school children and increasing the capacity of schools and students to respond to disasters, MERCY Malaysia continued its School Preparedness Programme in 2008 and expanded its coverage to several states in the country.

Designed to facilitate disaster management planning in schools, the School Preparedness Programme teaches simple, hands-on activities to school children to prepare them to take responsibility for their safety in the event of an emergency.

The School Preparedness Programme is divided into two programmes; School Watching and School Response Preparedness. Both are designed to promote a culture of disaster preparedness and increase the capacity of schools and students to respond to disasters.

School Watching takes into account the fact that local communities are the best source of knowledge and information about the risks and hazards around them. The School Watching Programme, a tool for conducting "Community-Based Hazard Mapping", sees school



The School Preparedness Programme is designed to facilitate disaster management planning in schools and teaches simple, hands-on activities to school children in order to prepare them to take responsibility for their safety in the event of an emergency.

communities identifying hazards and risks in and around the schools and then devising solutions to make it a safer place. School Response Preparedness Training is set to begin in 2009. The team of trainers and facilitators for these activities have been established with the support of volunteers.

The training of trainers' workshops for teachers, which falls under the domain of the School Watching Workshop, were held in Sepang, Ipoh, Kapit, Kota Baru and Batu Pahat from January to August 2008. A total of 331 teachers attended the two-day workshops and learned about disaster and hazard mapping techniques.

Another five workshops were conducted for students in the Kota Tinggi district in November 2008. Two hundred students were selected to attend the workshop from five schools in the district, among them Sekolah Menengah Kebangsaan Taman Kota Jaya, Sekolah Menengah Kebangsaan Tun Habab, Sekolah Menengah Kebangsaan Laksamana, Sekolah Menengah Kebangsaan Bandar and Sekolah Menengah Kebangsaan Tan Sri Jaafar Albar.

Because of its efforts to create disaster awareness in schools among teachers and students, MERCY Malaysia's School Preparedness Programme received tremendous support from the Ministry of Education.

In November 2008, MERCY Malaysia signed a Memorandum of Understanding (MoU) with Animasia Sdn. Bhd, a creative content company. The MoU has given MERCY Malaysia the opportunity to use the characters of "Bola Kampung" as message ambassadors for the School Preparedness Campaign of 2009/2010.

### **MOBILE CLINIC SERVICES**

MERCY Malaysia continued its partnership with The Office of the United Nations High Commissioner for Refugees (UNHCR), the UN Refugee Agency, and ran 11 mobile clinics in Klang to offer primary healthcare to the stateless as well as marginalised communities. Refugee populations live in abject poverty, often in over-crowded, unhygienic conditions and are unable to seek public or private medical care as they cannot afford it. In 2008, MERCY Malaysia treated approximately 700 patients at the mobile clinics.

MERCY Malaysia continued to be active in the running of mobile clinics, some of which were implemented in cooperation with partners.

MERCY Malaysia also continued its work with Agensi Anti-Dadah Kebangsaan (AADK) in a programme that was first implemented in 2006 to provide primary health care and medical consultation to ex-drug users (patients in drug rehabilitation programmes) in the Klang Valley. In 2008, MERCY Malaysia ran nine mobile clinics and treated 306 patients.

An ongoing partnership with the Ministry of Home Affairs (KKDN) also saw MERCY Malaysia involved in a mobile clinic service to provide basic primary health care to the prisoners at Tempat Tahanan Perlindungan (TTP) Kamunting. In 2008, 336 prisoners were treated at seven mobile clinics run at the facility.

MERCY Malaysia also worked with Nur Salam, an organisation dedicated to improving the quality of life of the marginalised children of the Chow Kit area in Kuala Lumpur. At the mobile clinics it ran for the children, MERCY Malaysia provided dental and primary health services. Approximately 300 children were treated at 10 mobile clinics held between February 2008 and February 2009.

Another mobile clinic project run by MERCY Malaysia saw it extending its services to assist the Orang Asli community who live in the Belum Forest. The Belum Forest Health Promotion saw MERCY Malaysia working in a complementary partnership with the mobile clinics run by the Perak State Health Department to offer dental services, hygiene promotion and reproductive health services to the community in question. Between March 2008 and February 2009, 430 people were treated at 11 mobile clinics. This project was funded by the Emkay Foundation.



The Belum Forest Health Promotion saw MERCY Malaysia working in a complementary partnership in the mobile clinics run by the Perak State Health Department to offer dental services, hygiene promotion and reproductive health services to the Orang Asli community.

### HUMANITARIAN ASSISTANCE PROGRAMME AND HYGIENE KIT DISTRIBUTION, FEDERAL LAND CONSOLIDATION AND REHABILITATION AUTHORITY (FELCRA) NASARUDDIN, BOTA, PERAK

MERCY Malaysia funded the distribution of 80 hygiene kits and seven sets of cooking utensils to the community of FELCRA Nasaruddin in Bota, Perak who had been badly affected by a storm. The distribution of the kits was undertaken by 10 Universiti Teknologi MARA (UiTM) students and six UiTM staff on October 12, 2008. The programme was also designed to study the psychosocial needs of the people in the settlement, particularly the students of Sekolah Kebangsaan Agama Al-Mujahidin.





MERCY Malaysia funded the distribution of hygiene kits and seven sets of cooking utensils to the community of FELCRA Nasaruddin in Bota, Perak, who had been affected by the storm.

### **OVERVIEW** (AFGHANISTAN)

# **AFGHANISTAN**

MERCY MALAYSIA BEGAN ITS AID EFFORTS IN AFGHANISTAN IN OCTOBER 2001 WHEN THOUSANDS OF CIVILIANS WERE DISPLACED TO RELIEF CAMPS. SINCE THEN, MERCY MALAYSIA HAS ADOPTED A MULTI-FACETED APPROACH ENCOMPASSING HEALTH PROGRAMMES, VOCATIONAL TRAINING, INFRASTUCTURE BUILDING AND EDUCATION TO EMPOWER THE LOCAL POPULATION. WHILE ITS INITIAL EFFORTS WERE CONFINED TO PROVIDING EMERGENCY HEALTH CARE. MERCY MALAYSIA'S BASE IN KANDAHAR PROVIDES HEALTH SERVICES AS WELL AS EDUCATIONAL AND LIVELIHOOD DEVELOPMENT TO THE INHABITANTS OF THE COUNTRY'S TROUBLED SOUTHERN REGION. ITS THREE CORE PROJECTS CONTINUE TO BE THE COMPREHENSIVE HEALTH CLINIC, MERCY LITTLE CALIPH AND THE VOCATIONAL TRAINING CENTRE, ALL OF WHICH ARE LOCATED IN KANDAHAR. ALL THESE ACTIVITIES ARE CARRIED OUT BY LOCAL STAFF WHO OVER THE YEARS HAVE BEEN TRAINED AND DEVELOPED TO FORM THEIR OWN NON-**GOVERNMENTAL ORGANISATION (NGO) CALLED HEWAD UNITED DEVELOPMENT ORGANISATION (HUDO).** 

### COMPREHENSIVE HEALTH CLINIC (CHC)

Formerly known as the Mother and Child Health Care Centre (MCH), the Comprehensive Health Clinic was first set up in July 2003 and is located in Kandahar City District 3. Implemented at the request of the government of Afghanistan and the Ministry of Public Health (MOPH), the clinic is run by 18 local staff and focuses on providing emergency health care and a list of comprehensive services to those living in the Kandahar province. The clinic handles mainly gynaecological, obstetric and pediatric cases as well



The women and children at MERCY Malaysia's centre in Kandahar are given hygiene and health education during class breaks.



The Vocational Training Centre has a staff strength of 10 and was established in January 2003 to equip women trainees with some form of technical skills to help supplement her family's income.

as providing family planning and vaccination services. It is also equipped to handle laboratory examinations and ultrasound scanning as well as for the detection of bacterial diseases, a common occurence in the southern region of Afghanistan. The Comprehensive Health Clinic handles approximately 80 to 100 patients daily and 2008 was a record year for the clinic as it treated almost 56,000 patients.

In order to develop the capacity of the local community, MERCY Malaysia also runs programmes for local women to train them to become health workers, a project endorsed by the Ministry of Public Health.

In November 2008, MERCY Malaysia's health programmes in Kandahar were granted the Certificate of Excellence by the Afghanistan Ministry of Public Health.

### VOCATIONAL TRAINING CENTRE (VTC)

Located at the Chowk Madad District 5, Kandahar, the Vocational Training Centre (VTC) has a staff strength of 10 and was established in January 2003 to equip women trainees with some form of technical skills to help supplement their families' income. There are four skills





The Comprehensive Health Clinic is run by 18 local staff and handles mainly gynaecological, obstetric and pediatric cases as well as providing family planning and vaccination services.

to choose from -- carpeting, tailoring, embroidery and handcrafting. For women of all ages, graduates of the centre receive certificates and tools related to their newly-acquired skill upon completion of the course.

This project allows women access to livelihood development. A total of 445 women graduated from the centre from January 2008 until March 2009.

### **MERCY LITTLE CALIPH (MLC)**

Established in October 2003 in District 5, Kandahar, MERCY Little Caliph provides pre-school education for 30 children aged between five and 10. Using a syllabus that is approved by the country's Ministry of Education, the children at the centre are taught basic Pashto, Dari, English, introductory Mathematics and Islamic studies each semester.

The second batch of MLC students completed their primary education on February 25th, 2008.

### **OVERVIEW** (BANGLADESH)

# BNGLADESH

ON NOVEMBER 15, 2007, CYCLONE SIDR INDUCED THUNDERSTORMS AND STORM SURGES INTO CENTRAL BANGLADESH. WITH WIND SPEEDS OF UP TO 240 KM PER HOUR, THE CYCLONE CAUSED EXTENSIVE DAMAGE TO THE SOUTHERN DISTRICTS OF THE COUNTRY AS IT MOVED ITS WAY NORTH ACROSS CENTRAL BANGLADESH. IN TOTAL, 31 OUT OF 64 DISTRICTS WERE AFFECTED BY THE CYCLONE'S WRATH WITH 8.5 MILLION PEOPLE AFFECTED BY THE NATURAL DISASTER AND 3,300 DEAD.

BANGLADESH'S MAIN WATER SOURCE IS FROM PONDS AND MANY WERE CONTAMINATED BY DEBRIS, FALLEN LEAVES, BRANCHES AND OTHER ORGANISMS. GALACHIPA UPAZILLA IN THE PATHUAKHALI DISTRICT WAS ONE OF THE WORST-HIT AREAS AND BECAUSE OF ITS REMOTE SETTING, IT WAS UNDER-SERVED BY THE HUMANITARIAN ASSISTANCE COMMUNITY.

### WATER, SANITATION AND HYGIENE (WASH) PROJECT

Phase Two of the WASH Project took place at Galachipa Upazilla from December 2007 to March 15, 2008. Its aim was to provide safe drinking water and sanitation for cyclone-affected areas by cleaning the area's ponds and repairing latrines. The project was designed to assist the 3,000 most affected families, with an average family size of eight. Information on the families most in need of aid was obtained through discussions with local authorities.

Among the benefits of the project was ensuring that the affected families would be given access to safer drinking

water while also receiving hygiene education through leaflets and community education programmes. Sanitation was also improved with the repair of latrines. The key difference in this project was the holistic approach that included Health Education sessions being carried out in the village courtyard and at schools. The topics covered included hand washing, toilet cleaning (cleaning tools and detergent were provided at each repaired latrine), healthy cooking practices, proper disposal of garbage and the home-made preparation of rehydration fluid with salt and sugar for use during diarrhoea. This project was funded by the Kingdom Foundation of Saudi Arabia through the UN Office for the Coordination of Humanitarian Affairs (UNOCHA).





Phase Three of the WASH Project is aimed at providing sustainable safe water supply and latrines, strengthening and sustaining the operation and maintenance mechanisms of the installed WASH systems and improving knowledge in communities.

Phase Three of the WASH Project began in February 2008 and is ongoing until May 2009. Covering Galachipa Upazila and Sarakhola Upazila in the districts of Patuakhali and Bagherat, it is aimed at providing sustainable safer water supply and latrines, strengthening and sustaining the operation and maintenance mechanisms of the installed WASH systems and improving knowledge in communities, local governments and sustainable institutions regarding WASH, Health, Disaster Management and Livelihood.

The project not only helped to clean ponds but also provided the first two Pond Salt Filters as safe water options in the district. The project was implemented in seven villages, with 4,098 families located in underdeveloped and remote areas gaining from the exercise.



Among the benefits of the project was ensuring that the affected families would be given access to safer drinking water while also receiving hygiene education through leaflets and community education programmes.



Information on the families most in need of aid was obtained through discussions with local authorities.

### CLEFT LIP AND PALATE (CLIPP) PROJECT

This is a capacity development project which began in October, 2008, in partnership with the Dhaka Community Hospital (DCH). The project aims to treat and correct cleft lip and palate defects among the underprivileged population of Bangladesh. It also aims to provide training of the DCH staff and assist the hospital in establishing a centre for reconstructive surgery.

During the first week of the project, 51 children were treated by MERCY Malaysia's volunteer surgeons and nurses. This will be an ongoing project, scheduled until 2011.





The Cleft Lip and Palate Project aims to treat and correct cleft lip and palate defects among the underprivileged population of Bangladesh.

### CAMBDIA

### OVERVIEW (CAMBODIA)

MERCY MALAYSIA CONTINUED ITS EFFORTS TO IMPROVE HEALTH SERVICES IN CAMBODIA BY ADDRESSING PROBLEMS RELATED TO INFANT MORTALITY, A MOVE THAT IS IN KEEPING WITH THE COUNTRY'S POLICY OF REDUCING ITS MORTALITY RATE, SUPPLYING MEDICAL EQUIPMENT, IMPROVING THE FACILITIES OF HEALTH CENTRES IN THE KINGDOM AS WELL AS OFFERING TRAINING AND REFRESHER COURSES TO STAFF OF SEVERAL HEALTH CENTRES.

### ANGKOR HOSPITAL FOR CHILDREN (AHC), SIEM REAP

MERCY Malaysia's contribution to the Angkor Hospital for Children (AHC) in Siem Reap included supplying a ventilator to the hospital's Intensive Care Unit (ICU), a crucial piece of medical equipment that is used daily at the hospital.

MERCY Malaysia is involved in an ongoing project on Oral Rehydration Therapy (ORT) at the hospital until July 2011. MERCY Malaysia's involvement in the project includes financially supporting the running of an ORT corner, training and information development for health workers and ORT services and education for families.

### SUPPLY OF MEDICAL EQUIPMENT TO THE NATIONAL MATERNITY & CHILD HEALTH CENTRE (NMCHC), PHNOM PENH

MERCY Malaysia supplied medical equipment in the form of two neonatal ventilators and patient monitors each to the National Maternity & Child Health Centre (NMCHC), the sole and top referral hospital for Obstetrics & Gynaecological (O&G) cases in Cambodia. The hospital conducts approximately 7,000 deliveries a year.

The project to supply medical equipment, which was implemented in close collaboration with NMCHC and the Kingdom of Cambodia's Ministry of Health, will help to improve the quality of service at the hospital.

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The first phase of MERCY Malaysia's assistance to the Kampong Tralach Referral Hospital includes capacity development of the hospital's staff of ultrasound technicians through a three-month ultrasound training course in Phnom Penh.

### UPGRADING OF REPRODUCTIVE HEALTH SERVICES AT KAMPONG TRALACH REFERRAL HOSPITAL (KTRH), KAMPONG CHNNANG PROVINCE

The first phase of MERCY Malaysia's assistance to the Kampong Tralach Referral Hospital in Kampong Chnnang Province, which took place from July 9 to 24, 2008, had the objective of improving facilities at the hospital through minor renovations of the existing labour room and other general upgrading work, supplying medical equipment and an ambulance as well as developing the capacity of the hospital's ultrasound technicians through a three-month training course in Phnom Penh.

MERCY Malaysia's efforts saw an improvement of services at the hospital's labour and delivery room as a result of renovation works that converted one-bedded rooms to two-bedded units while quality of service improved as a result of the availability of new medical equipment. The hospital's list of services provided was also improved with the availability of the new ambulance while staff knowledge was broadened as a result of their exposure to ultrasound training.

The second phase of the project, which took place from November 23 to December 5, 2008, saw MERCY Malaysia handing over dental items and additional medical items to KTRH.

The project, which was implemented in close cooperation with the hospital and the Kingdom of Cambodia's Ministry of Health, will benefit the residents of the Kampong Tralach district and its surrounding areas, estimated to be approximately 164,000 people.

### UPGRADING OF HEALTH CENTRES IN THE KAMPONG LEANG DISTRICT

MERCY Malaysia's involvement in the upgrading of health centres in Kampong Leang involved three centres in particular -- Kampong Hav Health Centre, Svey Rumpear Health Centre and Chronok Health Centre. Along with the Prolay Meas Health Centre, the four health centres serve approximately 43,760 people.

MERCY Malaysia handed over medical equipment, a speedboat ambulance, a motorcycle ambulance, drugs and supplements to the Kampong Hav Health Centre while one motorcycle ambulance each was supplied to Svey Rumpear Health Centre and Chronok Health Centre.

MERCY Malaysia is continuing its work at Kampong Hav Health Centre and a refurbishment exercise was completed at the end of May 2009.

Refresher Training Programmes have been conducted for staff at Kampong Hav Health Centre, Prolay Meas Health Centre, Svey Rumpear Health Centre and Chronok Health Centre. Session One was conducted from February 23 to February 27, 2009, while Session Two was held from March 2 to March 6, 2009. A total of 38 staff attended the courses conducted by trainers from the Kampong Chhnang Provincial Health Department.

The first round of the Outreach Programme was conducted in the second week of April 2009. In each round of the Outreach Programme, different topics were selected and highlighted to the community.







MERCY Malaysia handed over medical equipment, a speedboat ambulance, a motorcycle ambulance, drugs and supplements to the Kampong Hav Health Centre in the district of Kampong Leang.

### OVERVIEW (INDIA)

NDIA

LARGE AREAS OF THE SUPAUL, MADHEPURA, ARARIA, SAHARSA AND KATIHAR DISTRICTS WERE BADLY AFFECTED BY THE FLOODS OF AUGUST 2008. THE FLOOD SITUATION RESULTED BECAUSE OF A BREACH OF THE EASTERN KASHI EMBANKMENT IN NEPAL. MORE THAN 3.7 MILLION LITRES OF WATER FLOWED THROUGH THE BREACH, THUS FLOODING HUNDREDS OF VILLAGES IN THE NORTHERN REGION OF BIHAR. THE LIVES OF THREE MILLION PEOPLE WERE AFFECTED WITH 50 REPORTED TO HAVE PERISHED AS A RESULT OF THE FLOODS. MORE THAN 225,000 HOUSES WERE DESTROYED WHILE 44,000 WERE DAMAGED AS A RESULT OF THE FLOODS.

### **EMERGENCY RESPONSE - BIHAR**

After a 15-day assessment period, MERCY Malaysia set up base in the Madhepura district, reportedly one of the worst hit areas of the floods, to provide health care facilities for the flood-affected population of the Madhepura district as well as for those from the northern region of Supaul and Araria. MERCY Malaysia worked with local partners, SEEDS India and Doctors For You (DFY).

During the three-month programme, which took place between November 15, 2008, and January 25, 2009, MERCY Malaysia and its partners provided health facilities such as static and mobile clinics while also organising deworming exercises for children under 10, health education sessions and distributing blankets to villagers from Raghunathpu in preparation for the winter season.

The mobile clinic service covered 42 villages and served 17,142 patients. Health education and reproductive health care for women were carried out at the mobile clinics.

The static clinic was located at Gwalpada village in the Madhepura district and served 12,109 people.

MERCY Malaysia decided to extend and intensify the project until the end of 2009. This will ensure sector-wide equitable, quality health care for the population in the region, especially for the poor in Saharsa, one of the most affected districts in Madhepura. MERCY Malaysia is installing a health centre in Sonbarsa Block to serve a population of 176,546 people. This district has a high number of malnourished children and communicable diseases, especially malaria, tuberculosis and HIV. MERCY Malaysia will work through SEEDS India and DFY during the course of the project.





MERCY Malaysia and its partners provided health facilities such as static and mobile clinics while organising deworming exercises for children under 10.



Health education sessions covering topics such as hand washing, hygienic cooking practices, proper disposal of garbage and family planning for women were carried out at the mobile clinics.



MERCY Malaysia distributed 500 blankets to villagers from Raghunathpu in preparation for the winter season.

### OVERVIEW (INDONESIA)

# INDONESIA

MERCY MALAYSIA CONTINUED ITS RECONSTRUCTION AND REHABILITATION PROJECTS IN THE COUNTRY WHILE OFFERING ITS EXPERTISE IN THE AREA OF HOSPITAL MANAGEMENT. IT ALSO IMPLEMENTED A NUMBER OF DISASTER PREPAREDNESS ACTIVITIES AT THE TSUNAMI RESOURCE CENTRE IN ACEH.

### RUMAH SAKIT UMUM (RSU) GUNUNG SITOLI, NIAS

MERCY Malaysia was appointed to manage the masterplan for the reconstruction of the Rumah Sakit Umum (RSU) Gunung Sitoli, the main referral hospital in Nias. Phases One and Two of the project were completed in 2005 and 2006 while Phase Three were completed in 2008.

MERCY Malaysia was also involved in a project that focused on Total Hospital Facilities Management at RSU Gunung Sitoli. The project involved training of the hospital's personnel to ensure sustainability, providing waste management facilities at the hospital and ensuring hospital cleanliness by providing training on clinical waste management and cleaning and engineering services.



MERCYMalaysia was appointed to manage the reconstruction of the Rumah Sakit Umum (RSU) Gunung Sitoli, the main referral hospital in Nias.



MERCY Malaysia completed a new building complex consisting of hostel rooms, class rooms, a dining hall, multi-purpose hall, administration office and a prayer hall at the Kayee Kunyit Orphanage Centre.

### **KAYEE KUNYIT ORPHANAGE CENTRE**

MERCY Malaysia completed a new building complex consisting of hostel rooms, classrooms, a dining hall, a multi-purpose hall, an administration office and a prayer hall at the Kayee Kunyit Orphanage Centre. This orphanage is unique as the children are taken care of by the local community as well.

### RUMAH SAKIT UMUM DAERAH (RSUD) ARGA MAKMUR

Following the Bengkulu Earthquake that rocked the west coast of Sumatra on Sept 12, 2007, MERCY Malaysia deployed its first team to the area within the week, with a second team arriving nine days later. Both teams distributed hygiene kits and mosquito nets to minimise the risk of water and blood-borne diseases.

The earthquake also damaged many of RSUD Arga Makmur's buildings. The hospital, which serves more than 100,000 patients (more than 24 per cent of the residents of Bengkulu Province) yearly, continued to serve its role as the only district hospital in Bengkulu Utara despite the structural damage it had incurred.



Students from 32 elementary schools in Banda Aceh and Aceh Besar visited the Tsunami Resource Centre and learned about disaster and disaster preparedness through video screenings, games and simulations activities

Immediately following the earthquake, MERCY Malaysia provided aid in the form of medical equipment to the hospital but in 2008, it focused on the rehabilitation and renovation of a number of the hospital's damaged buildings to provide a safe environment for its staff and patients. Among the affected buildings that were refurbished and repaired were the Accident & Emergency (A&E), Administration, and Operating Theatre (O.T) buildings.

The rehabilitation and renovation project, which saw a workforce of 38 men, was completed and handed over in November 2008.

### ACTIVITIES AT TSUNAMI RESOURCE CENTRE (TRC)

The Tsunami Resource Centre (TRC) was built within Syiah Kuala University (UNSYIAH) by MERCY Malaysia with funding support from the Force of Nature Foundation. Four activities were conducted by MERCY Malaysia -- the drafting of a resource book for disaster education, TRC visit days for elementary school children, School Watching Workshops for Elementary Headmasters and Disaster Education Workshops for Education Faculty students of UNSYIAH, Banda Aceh.

The resource book for disaster education is used at Disaster Education Workshops for students of the Education Faculty to teach disaster management. It will serve as a guide book for the students as they pursue their teaching careers in the future. In 2008, four workshops took place in November and December 2008 with a total of 484 participants learning about disaster education.



The Tsunami Resource Centre is built within the Syiah Kuala University (UNSYIAH) by MERCY Malaysia with funding support by the Force of Nature Foundation.

Approximately 1,280 elementary students from 32 elementary schools in Banda Aceh and Aceh Besar visited the Tsunami Resource Centre from July to December 2008. They learned about disaster preparedness through videos, games and simulation activities.

The School Watching Workshop for Elementary Headmasters was conducted on 22nd October, 2008, and was attended by 24 participants. The workshop is aimed at delivering the basic knowledge on disaster preparedness through risk and hazard mapping practices and to impart the importance of disaster education in schools. The headmasters were also encouraged to set up their own disaster management committees at the school level.

## MALDIVES

### OVERVIEW (MALDIVES)

OFTEN DESCRIBED AS THE IDEAL TROPICAL HOLIDAY DESTINATION BECAUSE OF ITS AMAZING BEAUTY AND MORE THAN A THOUSAND ISLANDS, THE PICTURE-PERFECT ISLAND NATION OF THE MALDIVES IS OFTEN STRUCK BY CALAMITY IN THE FORM OF STORMS, DROUGHT, HEAVY RAINS AND STORM SURGES CAUSED BY CYCLONES IN THE SOUTHERN INDIAN OCEAN. THE NORTHERN ATOLLS OF THE ISLAND FACE A GREATER RISK OF DAMAGE FROM CYCLONIC WINDS WHILE THE SOUTH OF THE ISLAND IS VULNERABLE TO EARTHQUAKES.

THE DECEMBER 26, 2004 INDIAN OCEAN TSUNAMI REAKED HAVOC ON THE ISLANDS AND CAUSED MORE THAN 80 DEATHS. THIRTY PERCENT OF THE NATION'S POPULATION OF 300,000 WERE DISPLACED WHILE 25 PER CENT OF THE 200 INHABITED ISLANDS WERE SEVERELY DAMAGED WITH 10 PER CENT OF THE COUNTRY'S ISLANDS COMPLETELY DESTROYED. FOURTEEN ISLANDS WERE EVACUATED AND TOTAL LOSSES WERE ESTIMATED AT US\$472 MILLION, EQUATING TO 62% OF THE COUNTRY'S GROSS DOMESTIC PRODUCT (GDP).

### POST TSUNAMI PROJECT – COMMUNITY BASED DISASTER MANAGEMENT (CBDRM)

With funds from the Ministry of Finance, MERCY Malaysia has implemented a Community Based Disaster Risk Management (CBDRM) programme in support of the Maldives' government's efforts to improve disaster preparedness in the island-nation. The project is aimed at engaging target communities in the development of Island Disaster Management Plans.

The Maldives CBDRM Programme was developed in 2008 in consultation with the National Disaster Management Centre in the Maldives. MERCY Malaysia and Care Society, a Maldives-based NGO, signed Memorandum Of Understanding (MoU) agreeing to jointly implement the project.

During the two-year project, Island Disaster Management Plans will be developed with the community on four islands in the Haa Alifu and Haa Dhaalu atolls, the two northernmost atolls of the Maldives. The project will benefit some 15,500 people on the four islands.





Together with Care Society, MERCY Malaysia conducted a School Safety Programme which aimed at improving building standards in existing schools while also ensuring that the surrounding community was prepared for natural disasters and emergencies.



In the course of developing the Island Disaster Management Plans, each community was asked to identify the hazards and vulnerabilities confronting their community and develop solutions to reduce disaster risk.

In the course of developing the Plan, each community was asked to identify the hazards and vulnerabilities confronting their community and develop solutions to reduce disaster risk, which would make their island safer. In addition, a Disaster Management Committee on each island was created and task forces formed to conduct response activities in the event of a disaster.

MERCY Malaysia, along with its implementing partner in the Maldives, Care Society, will work with the communities to develop a three-month community-based disaster risk reduction project, implementing one of the solutions previously identified by the community to make their island safer in their Island Disaster Management Plan.

The first phase of the project has been implemented in the two target islands in Haa Alifu atoll. The project will be completed by April 2010.

### **SCHOOL SAFETY INITIATIVES**

MERCY Malaysia & Care Society jointly conducted a School Safety Programme in the Maldives between July and October 2008 with technical support from SEEDS India. The programme was aimed at improving building standards in existing schools while also ensuring that the surrounding community was prepared for natural disasters and emergencies.

The programme included a sensitisation workshop for teachers on disaster preparedness and a school-wide drill where teachers and students learnt and practiced skills on fire safety, rescue, evacuation and first aid.

The programme was piloted at the Kaafu Kaashidoo school and later implemented at four additional schools, namely Haa Alifu Ihavandhoo School, Raa.Ungoofaru School, Laamu Fonadhoo School and Gaafu Alifu Villingili School. The programme was supported by the island office, Maldives police service and local health centre.





The school safety programme included a sensitisation workshop for teachers on disaster preparedness and a school-wide drill where teachers and students learnt and practiced skills on fire safety, rescue, evacuation and first aid.

### OVERVIEW (MYANMAR)

## MYANMAR

THE WORST NATURAL DISASTER TO STRIKE MYANMAR, CYCLONE NARGIS, A SEVERE TROPICAL CYCLONE THAT LANDED ON MAY 2, 2008, LEFT A TRAIL OF DEATH AND DESTRUCTION IN ITS WAKE. WINDS OF UP TO 240 KM PER HOUR WREAKED HAVOC ACROSS A 30,000 SQ KM AREA, CLAIMING THE LIVES OF MORE THAN 22,000 PEOPLE AND LEAVING UP TO A MILLION OTHERS HOMELESS.

MERCY MALAYSIA WAS QUICK TO RESPOND TO THE TRAGEDY, SENDING ITS FIRST RELIEF TEAM TO MYANMAR ON MAY 8, 2008. IT FOCUSED ON PROVIDING EMERGENCY HEALTH SERVICES TO CYCLONE SURVIVORS AND LATER REBUILT DAMAGED HEALTH FACILITIES IN AFFECTED AREAS IN THE DEDAYE TOWNSHIP. WHEN ITS AID EFFORTS MOVED FROM THE EMERGENCY TO THE RECOVERY STAGE, IT ALSO CONDUCTED PSYCHOSOCIAL TRAINING COURSES FOR HEALTH PRACTITIONERS IN DEDAYE.

### PROVISION OF COMPREHENSIVE HEALTH SERVICES IN NGAPUDAW AND MAWLAMYINGYUN

Working with Save The Children Myanmar, MERCY Malaysia was involved in providing health care and medicine to survivors of Cyclone Nargis through mobile clinics in Ngapudaw and Mawlamyingyun. Between May 19, 2008, and December 1, 2008, medicine was distributed in the two areas.

### RECONSTRUCTION OF HEALTH FACILITIES IN DEDAYE TOWNSHIP, AYERYARWADY DIVISION

An area severely hit by Cyclone Nargis, many of the health facilities consisting of Rural Health Centres (RHC), Sub Rural Health Centres (SRHC), Station Hospitals and a Township Hospital in Dedaye Township were damaged. MERCY Malaysia is involved in the rebuilding of two RHCs, eight SRHCs, two station hospitals and a township hospital in the division. The first project was to rebuild the Chaung Hpyar SRHC, a facility completely destroyed by the Cydone. Reconstruction work on four other facilities -





Working with Save The Children Myanmar, MERCY Malaysia was involved in distributing medicine to survivors of Cyclone Nargis at mobile clinics.

Toe (RHC), Hle Seik Chaung Gyi (SRHC), Ah Kei Chaung Wa (SRHC) and Pyan Doe (SRHC) - began in December 2008 while rebuilding efforts on Taung Tan (SRHC), Taw Kyaik (SRHC), Ywa Tan Shey (SRHC) and Ma Yaung Nouk (SRHC) began in January 2009.

Reconstruction projects still pending in the township include the Kyonda Station Hospital, Dedaye Township Hospital, Su Ka Lat (RHC), Kyan Da (Station Hospital) and Ne Young Gar (Station Hospital). The total cost of the reconstruction exercise is almost RM4 million. All reconstructed health facilities will be cyclone-proof and hospital and community preparedness training programmes for communities will be included.

### CAPACITY DEVELOPMENT PROGRAMMES

Together with the Myanmar Medical Association (MMA), the only professional non-governmental organisation (NGO) of doctors in Myanmar, MERCY Malaysia conducted a training course for voluntary medical officers and general practitioners who were involved in Cyclone Nargis relief activities. The first of the courses was offered from July 21 to 23, 2008 while the second was held from July 29 to 31, 2008. A total of 150 participants attended each session.

As MERCY Malaysia's aid efforts moved from the emergency to recovery stage in Myanmar, two sessions of a Psychosocial Training course were held in Dedaye. The courses - held from November 19 to 21, 2008, and November 24 to 26, 2008 - were attended by 24 participants in each session.

### SETTING UP TEMPORARY SUB-RURAL HEALTH CENTRES (SRHCs) IN DEDAYE

MERCY Malaysia set up tents to provide reproductive health services offered by midwives in cyclone-affected areas in Dedaye. The tents were transferred to Dedaye on January 15, 2009, and sent to Ah Kei Chaung Gyi, Toe and Chaung Hypar. The project was funded by a grant from the Norwegian Ministry of Foreign Affairs.



MERCY Malaysia is involved in the rebuilding of two Rural Health Centres, eight Sub-Rural Health Centres, two station hospitals and a township hospital in the Ayeyarwaddy Division.



Together with The Myanmar Medical Association, MERCY Malaysia conducted a training course for voluntary medical officers and general practitioners who were involved in Cyclone Nargis relief activities.

### **OVERVIEW** (Palestine)

THE ISRAEL-GAZA CONFLICT BEGAN WHEN ISRAEL LAUNCHED A MILITARY CAMPAIGN IN THE GAZA STRIP ON DECEMBER 28, 2008. DESCRIBED AS THE GAZA MASSACRE, THE PALESTINIAN MINISTRY OF HEALTH (MOH) FIGURES AS OF 31 JANUARY, 2009 STATED THAT 1,380 PALESTINIANS DIED AS A RESULT OF THE CONFLICT, AMONG THEM 431 CHILDREN AND 112 WOMEN. THESE FIGURES DID NOT INCLUDE THOSE WHO DIED DUE TO THE LACK OF ACCESS TO REGULAR HEALTH CARE (INCLUDING OBSTETRICS CARE AND TREATMENT FOR CHRONIC DISEASES). FIGURES ALSO INDICATED THAT 5,380 PEOPLE WERE INJURED AS A RESULT OF THE CONFLICT, AMONG THEM 1,872 CHILDREN AND 800 WOMEN. NEWS REPORTS SAID THAT MORE THAN 400,000 GAZANS WERE LEFT WITH NO RUNNING WATER WHILE TENS OF THOUSANDS WERE LEFT HOMELESS.

### **GAZA EMERGENCY RESPONSE**

MERCY Malaysia sent its first team to Gaza on December 31, 2008, to conduct a rapid assessment of the humanitarian needs of the people affected by the conflict. The team consisted of medical surgeons and logistics personnel. In total, MERCY Malaysia sent seven teams to the conflict area and focused on the supply of medical supplies and medicine to the embattled region.

The disruption of medical services in Gaza prompted MERCY Malaysia to draw up a comprehensive plan of action to help address the pressing needs faced by the Palestinian people. The Israeli attacks had caused severe damage and the limited health services in Gaza were completely overwhelmed. Hospital wards were not only packed with the large number of patients but were in dire need of resources

Following the approval for MERCY Malaysia across the Rafah border, the advance medical team made its way into Gaza to initiate MERCY Malaysia's specialist medical and surgical services. The seven teams sent by MERCY Malaysia were tasked with ensuring a continuous shipment of medical aid into the Gaza Strip as well as providing direct support and intervention where it was needed

MERCY Malaysia focused on providing aid in the form of medical supplies and medicines to Gaza. It supplied medical equipment, surgical sets and medicines such as sedative agents, antibiotics, intravenous solutions and pain killers.



MERCY Malaysia focused on providing aid in the form of medical supplies and medicines to Gaza such as medical equipments, surgical sets, medicines, sedative agents, antibiotics, intravenous solutions and pain killers.





MERCY Malaysia is continuing its aid efforts in 2009 which include rehabilitation of hospitals and the training of medical specialists.

### **OVERVIEW** (PAKISTAN)

AN EARTHQUAKE WITH A MAGNITUDE OF 6.4 HIT THE BALUCHISTAN PROVINCE IN SOUTHWESTERN PAKISTAN ON OCTOBER 29, 2008. A US GEOLOGICAL SURVEY LISTED THE EPICENTRE OF THE QUAKE AS THE CHILTAN MOUNTAINS, 80 KM NORTHWEST OF QUETTA. THE MOST SEVERELY AFFECTED AREAS WERE THE MOUNTAINOUS REGION EXTENDING FROM ZIARAT, ABOUT 110 KM NORTHEAST OF QUETTA AND PISHIN AS WELL AS THE AREA FROM QILLA ABDULLAH TO CHAMAN (A TOWN LOCATED ALONG THE AFGHANISTAN BORDER). REPORTS STATED THAT THE WORST HIT AREAS WERE KHANAZAI AND TOPA ACHAKZAI IN EASTERN PISHIN DISTRICT. AND THE WACHUN KAWAS AHMADAN AND GOGAI VILLAGES IN THE ZIARAT DISTRICT. FREEZING TEMPERATURES IN THE REGION SAW THE HUMANITARIAN COMMUNITY FOCUSING ON THE DISTRIBUTION OF WINTERISED TENTS AND THE CONSTRUCTION OF TRANSITIONAL SHELTERS. MERCY MALAYSIA WAS INVOLVED IN THE DISTRIBUTION OF WARM CLOTHING, BLANKETS AND HEATING STOVES TO THE AFFECTED PEOPLE IN THE REGION.

### MERCY MALAYSIA BASE CAMP OPERATIONS, DISTRICT ZIARAT, 'GOGAI' QUETTA, PAKISTAN

MERCY Malaysia set up field operations centre camp on November 1, 2008 in 'Gogai' Quetta with a team of seven people. The main aim of the project was to provide shelter, health education and economic development services to the disaster-affected inhabitants of the area. The project, which ran until November 30, 2008, saw MERCY Malaysia providing warm blankets, complete kitchen sets (crockery), stoves and sweaters to the affected community in the region.







MERCY Malaysia was involved in the distribution of warm clothing, blankets and heating stoves to the people affected by the earthquake that hit the Baluchistan Province in southwestern Pakistan.

### **OVERVIEW** (SUDAN)

### SUDAN

THE CONFLICT IN THE DARFUR REGION OF SUDAN CAUSED A MAJOR HUMANITARIAN CRISIS, WITH POPULATION DISPLACEMENT AND THE SUSPENSION OF LIVELIHOOD ACTIVITIES. AS A RESULT OF THE CONFLICT, AN ESTIMATED 2.7 MILLION VILLAGERS HAVE HAD TO FLEE FROM THEIR HOMES TO CAMPS OR OTHER VILLAGES FOR SAFETY. MERCY MALAYSIA HAD BEEN WORKING IN EL GENEINA, WEST DARFUR, SINCE 2004, AND HANDED OVER THE PROJECT TO LOCAL HEALTH AUTHORITIES IN 2006.

THE DARFUR HUMANITARIAN MISSION INCLUDED THE SETTING UP OF A BASIC HEALTH CENTRE (BHC), DONE IN 2007 THE IMPLEMENTATION OF MERCY MALAYSIA'S WATER, SANITATION AND HYGIENE (WASH) PROGRAMME AND A RURAL HEALTH REHABILITATION PROJECT. THESE HAVE BEEN DELAYED UNTIL SECURITY IMPROVES IN THE AREAS.

### BASIC HEALTH CENTRE (BHC), ZAM ZAM INTERNALLY DISPLACED PERSONS (IDP) CAMP

MERCY Malaysia provides healthcare services on the west side of Zam Zam Camp, which is located about 15 km south of El-Fasher, Darfur. It has a fluctuating population of approximately 60,000 persons. MERCY Malaysia built the BHC which is managed by nine local health staff consisting of a doctor, two medical assistants, three nurses, a lab assistant, a midwife and a pharmacist.

Construction of the BHC began in March 2008 and was completed on April 30, 2008. The centre, which began operating on May 3, consists of an Outpatient

Department (OPD) to cater for routine medical cases, a basic laboratory, a small dispensary for the distribution of medicine, a 20-bedded ward for patients who need to be referred to a hospital for secondary healthcare services as well as an ante-natal and post-natal consultation room, delivery room, vaccination room and training centre.

The BHC provides medical consultation for primary health care cases and is equipped to conduct lab tests and provide medicine for patients. It also offers referrals for patients with chronic illnesses, complicated delivery cases, ante-natal and post-natal consultations and training. The referral system at the camp was established by MERCY Malaysia in partnership with Relief International (RI) and

the World Health Organisation (WHO). The centre has a standby vehicle to act as an ambulance service to ferry complicated cases to the secondary hospital.

The centre, which is open six days a week, serves an average of 600 people weekly. By December 31, 2008, the BHC had treated 20,000 patients. MERCY Malaysia's staff members at the centre have also been sent for relevant training in the areas of HIV awareness, preparedness for the rainy season, cholera training, malaria prevention and basic training for midwives.

This programme is supported by a grant from the Ministry of Foreign Affairs, Malaysia.



MERCY Malaysia built the Basic Health Centre on the west side of Zam Zam Camp which is administered by nine medical staff consisting of a doctor, two medical assistants, three nurses, a lab assistant, midwife and pharmacist.



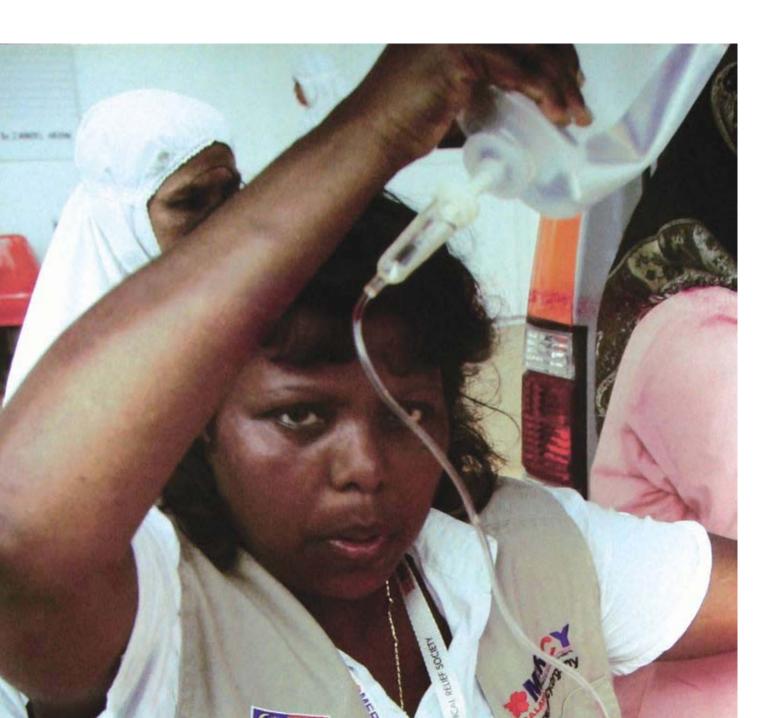


The Basic Health Centre provides medical consultation for primary health care cases and is equipped to conduct lab tests and provide medicine for patients.

## Ranjidam A/P Govindasamy a.k.a Mrs. Kent Paediatric Nurse, based in Nottingham, UK

Missions: Aceh - 26 January 2005 to 7 February 2005

Hometown: Melaka



## **EVENTS**

## PRE-CONFERENCE EVENT AT THE 3RD ASIAN MINISTERIAL CONFERENCE ON DISASTER RISK REDUCTION

In partnership with the National Security Council and Institute of Corporate Responsibility, MERCY Malaysia organised a pre-conference workshop at the 3rd Asian Ministerial Conference on Disaster Risk Reduction on December 1, 2008. The workshop was entitled "Public-Private Partnership: Engagement of the Private Sector in Disaster Risk Reduction". The event was held to explore ways and opportunities for the private and public sectors to work together in the crucial area of Disaster Risk Reduction (DRR).



The Hyogo Framework for Action (HFA) recognises that the private sector is an important factor that must be engaged for successful Disaster Risk Reduction. The key areas identified in the HFA for private sector engagement include risk financing and reducing underlying risk factors (risk assessment, early warning systems and fostering a culture of disaster prevention).

The messages emphasised that because the private sector is part of the community where it operates, it faces the same threats from natural hazards as the rest of the community.

Private-public partnerships provide an opportunity for the private sector to contribute to, and participate in, reducing the disaster risk facing their business, employees, neighbours and the whole community. The private sector can play an important role in improving the resilience of the community.

The pre-conference event highlighted ways in which DRR could be an integral part of Corporate Responsibility (CR) and was an avenue to share experiences from the Asian region of private sector involvement in DRR.

It also explored the challenges of public-private partnerships at the national and local levels and helped to reinforce the importance of the private sector in embracing DRR.

The pre-conference event was co-chaired by MERCY Malaysia President Datuk Dr Jemilah Mahmood and Dato' Johan Raslan, Executive Chairman of PricewaterhouseCoopers Malaysia and Chairman of the Corporate Responsibility Institute Malaysia.





The pre-conference event highlighted ways in which Disaster Risk Reduction (DRR) could be an integral part of Corporate Responsibility and provided an avenue for participants to share experiences from the Asian region of private sector involvement in DRR.

The event was run in three parts: Corporate Social Responsibility and Disaster Risk Reduction, Ensuring Business Continuity and Innovation in Disaster Risk Reduction.

## PANDEMIC LOGISTICS AND LEARNING EXERCISE (P2LX)

The threat of the Avian Influenza is one that should not be shunned, especially at a time when the threat of a new strain of the H5N1 virus is a near possibility.

As such, the world Health Organisation (WHO), and World Food Programme with MERCY Malaysia, organised the Pandemic Logistics and Learning Exercise (P2LX) geared at responding to a crisis situation triggered by a pandemic such as the Avian Influenza (or more commonly known as bird flu) in a controlled simulation environment.

The simulation exercise centred on the following scenario:

The epidemic of the highly pathogenic avian influenza is caused by a new strain of H5N1, and has led to the virus spreading more rapidly in early 2006 than any other virus in recorded history. The flu then sweeps across three continents and infects and kills many people. The virus' ability to mutate and the risk of it becoming efficiently transmissible from human to human could trigger a global human influenza pandemic.

The Field Simulation Exercise enabled participants to gain a clearer understanding of their roles in the interagency logistics mechanism vis-a-vis their respective agencies and to highlight various areas of an intervention in a pandemic situation. It acted as a learning tool as it allowed the participants to apply their skills and knowledge in a real-life situation.

At the end of the exercise, participants were able to:

- determine and be familiar with procedures for the safe clearance and handling of relief supplies during a pandemic situation
- ii) identify transportation requirements and coordinate inter-agency logistics operations;
- iii) manage the distribution of relief supplies in a quarantined area within the affected location.

P2LX was held from November 24 to December 1, 2008, and this successful exercise also received support from Malaysia's National Security Council (Majlis Keselamatan Negara).







One of the aspects of the training programme, the Field Simulation Exercise, enabled participants to gain a clearer understanding of their roles in the inter-agency logistics mechanism vis-a-vis their respective agencies and to highlight various areas of an intervention in a pandemic situation.

The programme saw participation from the United Nations System Influenza Coordination (UNSIC), United Nations Office for the Coordination of Humanitarian Affairs, Action Against Hunger (Action Contre la Faim or ACF), OXFAM, the United States' Centre for Disease Control and Prevention and the United States Agency for International Development (USAID).

A number of observers were also present during the training exercise including officials from the Malaysian Government.

## MALAYSIAN TECHNICAL COOPERATION PROGRAMME (MTCP)

At the end of 2007, MERCY Malaysia was selected to run programmes under the Malaysian Technical Cooperation Programme (MTCP). MTCP, which emphasises on the development of human capital through the provision of training in various areas, is a Malaysian initiative that consolidates the various forms of technical cooperation that has been extended by Malaysia to other developing countries since the 1960s and organises technical cooperation activities on a systematic and sustained basis. It is funded by the Economic Planning Unit of The Prime Minister's Department.

In 2008, MERCY Malaysia identified and initiated two courses for the MTCP: Disaster Response and Recovery and Community Based Disaster Risk Management (CBDRM). The former was held from March 18 to March 26, 2008, while the latter was held from August 11 to August 17, 2008, both at the Legend Hotel in Kuala Lumpur.

Participants at both courses comprised of government officials and representatives from non-governmental organisations from developing countries. In 2008, countries represented at these courses included Sri Lanka, Sudan, Seychelles, Indonesia, Vietnam, Cambodia, Thailand, Myanmar, Afghanistan, Pakistan, Brazil, Philippines, Tajikistan, Uganda, Mongolia, Iran, Bangladesh and Nepal.





The Disaster Response and Recovery and Community Based Disaster Risk Management (CBDRM) courses both focused on creating awareness, reducing vulnerabilities and building capacities for communities to be more resilient when facing and preparing for a disaster.





Participants of the CBDRM course highlighted the benefits of the Town Watching activity, an exercise which saw them walking around certain areas to identify risk factors and identify ways to mitigate the problem.

Both courses focused on creating awareness, reducing vulnerabilities and building capacities for communities to be more resilient when facing and preparing for a disaster. Feedback from participants indicated that they had gained a lot of insight from the courses.

Participants at the Disaster Response and Recovery course said that they had obtained a clearer understanding of the risk of disasters and how it could be significantly reduced through actions and policies.

Meanwhile, participants of the CBDRM course highlighted in particular the benefits of the Town Watching activity, an exercise which saw them walking around certain areas to identify risk factors and map out and identify ways to mitigate the problem.

At the end of the courses, participants mapped out Action Plans for the next six months with the application of methods identified throughout the programme.

Feedback from participants at both courses indicates that the programmes promote a better understanding of disaster management among developing nations. We are assured in the knowledge that these programmes will contribute to increased resilience in vulnerable countries in the developing world.

## MERCY MALAYSIA FINDS A NEW HOME

In 1999, MERCY Malaysia had its humble beginnings in a small room at its Founder's office in Ampang Puteri Hospital. When MERCY Malaysia was registered as a Society and its core functions began to take shape, so did the need for a proper office location.

In 2002, MERCY Malaysia occupied one floor of a shop lot in a busy area in Ampang Point, Kuala Lumpur. As the work grew, so did our need for more employees, which translated into the need for more space. Two years later, we occupied another floor, and two years after that, a third.

The organisation has grown even further – in terms of staff strength, the number of projects and in quality. In line with our growth and expansion, MERCY Malaysia moved into a new 7,050 square foot office in Kompleks Dayabumi, Kuala Lumpur, on Sunday, July 6, 2008.

It was a day of mixed emotions as senior staff bade a sad farewell to the shop lot in Ampang and moved into the spanking new office in Kompleks Dayabumi.

The move would not have been possible if not for two main donors: Petronas, who sponsored the venue for our new dwelling and ArcRadius Sdn Bhd, who designed it pro-bono.

Other sponsors who donated generously in cash and kind were:

MISC Berhad
Euro Space System Sdn Bhd
Carpet Ideas Sdn Bhd
Atlas Hifi Corp (M) Sdn Bhd
Scomi Group Berhad
Sagasteel Equipment Sdn Bhd
MML Marketing Sdn Bhd
Floor Depot Sdn Bhd
Tricubes Berhad
Sun-Blinds (M) Sdn Bhd
Lightcraft KL Sdn Bhd
Celcom Mobile Sdn Bhd

MERCY Malaysia graciously thanks all contributors for believing in our vision and supporting us in our growth.









## Syed Zahid bin Syed Mohamad (on the left) Procurement Executive

Missions: Bam, Iran -4

Aceh -@

P. Pinang & Kedah - 4 Bagh, Pakistan - 2005 Palestine - 4

Kedah flood - 2004 Bagh, Pakistan -8 Johor - 2007

Jogjakarta (Mt Merapi) - 2006

Kuala Lumpur Hometown:





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General Manager Mona Hanim Sheikh Mahmud IT Officer Mohd Zamri Mohd Zin

**PLANNING & DEVELOPMENT** 

Head Planning & Development Zuraidah Mian

Research & Accountability

Officer Norshamshiah Ali Afandi

**PROJECT MANAGEMENT OFFICE** 

Compliance Officer Siti Zaliha Ibrahim

**COMMUNICATIONS & FUNDRAISING** 

Head, Communications &

Fundraising Shamini Darshni d/o Kaliemuthu

Senior Officer Events &

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Senior Officer Publications &

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**Head Relief Operations** Dr Paul Mettler **Deputy Head Relief Operations** Rossimah Mohamed

Consultant & Head Operations

AcehNias Norazam Ab Samah

Senior Programme Support

Officer Maria Lauranti Relief Operations Officer Hew Cheong Yew Relief Operations Officer Wendy Neoh Siew Ping Relief Operations Officer Hafidzi Ahmad Bunian Relief Operations Officer Elliane Arriany Mustapha Relief Operations Officer Mohd Said Alhudzari Ibrahim Relief Operations Officer Muhammad Fitri Muhammad

> Hashim Erman Taib

Programme AssistantSudan Administrative Assistant Rita Fazlin Awang @ Ibrahim Kriss Wong Siew Fung a/p Hin Relief Support Officer Medical Coordinator Dr Wan Nurdiana Zaireen **Health Coordinator** Sister Che Tah Hanafi

Senior Officer Logistics Raja Manickam s/o Krishnasamy

Logistics Officer Norzi Ahmad **DISASTER RISK REDUCTION** 

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Programme Assistant Research & Programme

Assistant Mohamed Anshaari Rahmat

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Special Project Officer Noor Azlin Mohd Yahya

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Management Senior Officer HR Receptionist cum Admin Office Assistant cum Driver

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Office Assistant cum Driver

**Training Officer** Volunteer Management Officer

Volunteer Management Officer

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Savidah Kamil Sakthy Sivam d/o Kanapathipillai Siti Zaleha Abdullah Noor Hayati Abd Latif Zurina Ismail

## THANK YOU

MERCY Malaysia's work in the humanitarian field would not be possible without the support of many individuals, corporations and organisations.

We offer grateful thanks to all the businesses and people who have contributed to making MERCY Malaysia a recognised name all over the world. Without our donors, volunteers and supporters, we are nowhere.

MERCY Malaysia extends our utmost gratitude to YOU for believing that together, we can save lives and alleviate suffering.



MERCY Malaysia would not be wat it is today if not for its most precious asset -its completely altruistic volunteers. Sacrificing time, energy, sweat, blood and tears, they toil all hours of the day, more often than not in challenging conditions, saving lives, bringing hope and cheer to the beneficiaries of each mission.

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Ahmad Fitri Mohd Ramli

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## **CAMBODIA**

Ahmad Fauzi bin Abd Rahman Intan Jasmine Binti Ismail Sister Che Tah Hanafi Wendy Neoh Siew Ping

## 1. Dr Abdul MalikBin Abdul Gaffor

Missions: Sarawak - 2005 Sri Lanka - 2005 Aceh - 2005 Bagh, Pakistan - 2005 Jogjakarta - 2006 Sulawesi - 2006

Hometow: Pulau Pinang

## 2. Dr Siti Hajar Binti Ayub

Missions: Johor - 2006, Facilitator for BMT Hometow: Selangor

## 3. Hafizah bt Mohd Latif, Lecturer, UiTM

Missions: Johor - 2006, Facilitator for BMT, Maran, Pahang - 2007 Pakistan - 2008 Hometow: Kuala Lumpur

## 4. Razali Kamisan, Lecturer, UiTM

Missions: Johor - 2006, Facilitator for BMT Hometow: Bekok, Johor

## 5. Salehan Ismail, Lecturer, UiTM

Mission: Johor - 2006, Hometow: Batu Pahat, Johor

## **6. Tajul Edrus Nordin,** Lecturer, UiTM

Missions: Aceh - 2005, Johor - 2006, Facilitator for BMT Hometow: Perak

## 7. Khairul Azhar Zainuddin, Lecturer, UiTM

Missions: Johor - 2006 Hometow: Seremban, Negeri Sembilan

## 8. Dzulkarnaen Bin Ismail, Lecturer, UiTM

Missions: Aceh - 2006 Pakistan - 2006 Nias - 2006 Johor - 2006 Facilitator for BMT Facilitator for School Watching Hometow: Melaka

## 9. Ar. Azman Bin Zainonabidin, Lecturer, UiTM

Missions: Aceh - 2005 Nias, Pakistan, Johor - 2007 Facilitator for BMT Hometow: Perak



## FINANCIAL SIATEMENTS

**88.** SOCIETY INFORMATION

**89.** AUDITORS' REPORT

91. EXECUTIVE COUNCIL REPORT

**93.**STATEMENT BY EXECUTIVE COUNCIL

**94.** STATUTORY DECLARATION

95 BALANCE SHEET

**96.** STATEMENT OF INCOME AND EXPENDITURE

97.

STATEMENT OF CHANGES IN CHARITABLE FUNDS

**98.** CASH FLOW STATEMENT

**99.**NOTES TO THE FINANCIAL STATEMENTS



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

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

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HONORARY SECRETARY	Raja Riza Shazmin Raja Badrul Shah
ASSISTANT HONORARY SECRETARY	Assoc. Prof Dr. P. Shanmuhasuntharam
HONORARY TREASURER	Ir. Amran Mahzan
COMMITTEE MEMBERS	Dr. Heng Aik Cheng Assoc. Prof. Dr. Mohamed Ikram Mohamed Salleh Norazam Ab Samah
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



## TO THE MEMBERS 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 2008 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 Committee of the Association is 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's 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.





## TO THE MEMBERS 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 2008 and of its financial performance and cash flow 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 Association have been properly kept in accordance with the provisions of the Act.

### **Other Matters**

This report is made solely to the members of the Association, 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** 

azuddin&co.

Kuala Lumpur, Date: 18 May 2009 AZUDDIN BIN DAUD

Partner

2290/08/010/ (J)



Norazam Ab Samah



## 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 2008

The Executive Council has pleasure of submitting their report and the audited financial statements of the Society for the financial year ended 31 December 2008.

## **Executive Council of the Society**

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

PRESIDENT	Datuk Dr. Jemilah Hj Mahmood
VICE PRESIDENT I	Dr. Ahmad Faizal Mohd Perdaus
VICE PRESIDENT II	Mohd Azman Sulaiman
HONORARY SECRETARY	Raja Riza Shazmin Raja Badrul Shah
ASSISTANT HONORARY SECRETARY	Assoc. Prof. Dr. P. Shanmuhasuntharam
HONORARY TREASURER	Ir. Amran Mahzan
ORDINARY COMMITTEE MEMBERS:	Dr. Heng Aik Cheng Assoc. Prof. Dr. Mohamed Ikram Mohamed Salleh

## 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)

## Statutory information on the financial statements

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

- 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 2008 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, DATUK DR. JEMILAH BINTI HJ MAHMOOD and DR. AHMAD FAIZAL MOHD PERDAUS 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 2008 and of its results of operation and cash flow for the year ended on that date.

On behalf of the Executive Council:

DATUK DR. JEMILAH BINTI HJ MAHMOOD

President

Kuala Lumpur, Date: 18 May 2009 DR. AHMAD FAIZAL MOHD PERDAUS

Vice President I

## STATUTORY DECLARATION BY HORARY 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 18 May 2009
)

IR. AMRAN BIN MAH<del>ZAN</del>

BEFORE ME: AFFANDI BIN AHMAD W567 PESURUHJAYA SUMPAH MALAYSIA



## **BALANCE SHEET AS AT 31 DECEMBER 2008**

	Note	2008 RM	2007 RM
		RIVI	RIVI
ASSETS			
Non-current assets			
Property, plant and equipment	5	1,369,224	629,498
Current assets			
Inventories	6	314,746	356,552
Other receivables	7	825,985	307,120
Cash and cash equivalents	8	18,859,874	13,455,547
		20,000,605	14,119,219
LIABILITIES			
Current liabilities			
Other payables	9	458,466	304,743
		458,466	304,743
		100, 100	33 1,7 13
Net current assets		19,542,139	13,814,476
		20,911,363	14,443,974
Financed by:			
Charitable funds		20,911,363	14,443,974

## STATEMENT OF INCOME AND

## STATEMENT OF INCOME AND EXPENDITURE FOR THE YEAR ENDED 31 DECEMBER 2008

	Note	2008 RM	2007 RM
INCOME			
Donation	10	17,503,139	9,859,566
Annual fund raising dinner	11	127,092	387,204
Membership fee	12	2,100	300
Other income	13	626,530	506,979
		18,258,861	10,754,049
Less: EXPENSES		10,200,001	10,70 ,70 10
CHARITABLE EXPENDITURE	14	9,646,564	9,503,275
OPERATING EXPENSES	15	2,144,908	1,683,432
		11,791,472	11,186,707
SURPLUS/(DEFICIT) BEFORE TAX		6,467,389	(432,658)
TAXATION	16		
SURPLUS/(DEFICIT) AFTER TAX		6,467,389	(432,658)

## STATEMENT OF CHANGES IN CHARLABLE FUNDS

## STATEMENT OF CHANGES IN CHARITABLE FUNDS FOR THE YEAR ENDED 31 DECEMBER 2008

	2008	2007
	RM	RM
Balance as at 1 January	14,443,974	14,876,632
Surplus/(deficit) for the year	6,467,389	(432,658)
Balance as at 31 December	20,911,363	14,443,974
Charitable funds consist of:-		
General fund	6,791,900	6,532,631
Resricted funds:-		
Afghanistan	-	90,247
Bangladesh	517,143	479,005
Cambodia	466,539	288,483
China	659,087	-
Lebanon	-	183,515
Malaysia	1,514,900	1,197,243
Maldives	315,220	558,319
Myanmar	4,334,786	-
North Korea	-	16,777
Pakistan	2,714,607	2,740,381
Palestine	291,091	-
Philippines	-	53,401
Special Project	289,769	117,492
Sri Lanka	-	140,000
Sudan	2,444,340	334,878
Tsunami	571,981	1,711,602
	14,119,463	7,911,343
	20,911,363	14,443,974
	<del></del>	

# CASH FLOW STATEMENT

## CASH FLOW STATEMENT FOR THE YEAR ENDED 31 DECEMBER 2008

	2008	2007
	RM	RM
Cash flow from operating activities		
Surplus/(deficit) before tax	6,467,389	(432,658)
Adjustment for:		
Depreciation	252,576	201,483
Interest income	(505,562)	(378,788)
Loss on disposal and written off property, plant and equipment	15,986	35,163
Surplus/(deficit) before working capital changes	6,230,389	(574,800)
Changes in working capital:	44.000	(407.005)
Changes in inventories	41,806	(127,385)
Other receivables	(518,865)	(78,213)
Other payables	153,723	211,395
Cash generated from/(used in) operating activities	5,907,053	(569,003)
Interest received	505,562	378,788
Net cash generated from/(used in) operating activities	6,412,615	(190,215)
Cash flow from investing activities		
Proceeds from disposal of property, plant and equipment	1,980	-
Purchases of property, plant and equipment	(1,010,268)	(141,086)
Net cash used in investing activities	(1,008,288)	(141,086)
Net increase/(decrease) in cash and cash equivalents	5,404,327	(331,301)
Cash and cash equivalents at beginning of year	13,455,547	13,786,848
Cash and cash equivalents at end of year	18,859,874	13,455,547
Cash and cash equivalents comprise:		
Cash and bank balances	2,412,192	1,387,244
Deposit with licensed banks	16,447,682	12,068,303
	18,859,874	13,455,547

## 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 and sustainable health related development 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. Change of name

On 4 November 2008, the Society changed its name from Persatuan Bantuan Perubatan Malaysia (Malaysian Medical Relief Society) to Persatuan Bantuan Perubatan Malaysia (Malaysian Medical Relief Society) (MERCY Malaysia).

## 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 those 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.

Subscription in arrears of 2 years and more and where in the opinion of Executive Council these debts are no longer recoverable from its members are written off to the statements of income and expenditure.

## (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%



## **NOTES TO THE FINANCIAL STATEMENTS**

### 4. Summary of significant accounting policies (continued)

## (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.

## (e) Income recognition

Income from donation is recognised in the period in which the Society is entitled to receipt 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 mobile clinics 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 General Fund and Restricted Fund.

General Fund is an unrestricted 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.

# NOTES TO THE FINANCIAL STATEMENTS

## 4. Summary of significant accounting policies (continued)

## (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 the end of the financial year, at the approximate exchange rates prevailing at that date. All exchange gains and losses are taken up in the Income Statement.

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

	RM	RM
Foreign currency:-	31.12.2008	31.12.2007
1 US Dollar	3.67000	3.37700
1 Pakistan Rupee	0.05000	0.05510
1 Sri Lanka Rupee	0.03001	0.03029
1 Jordanian Dinar	4.57740	4.76892
1 Australian Dollar	2.45000	2.98300
1 Euro	4.75000	4.94080
1 Chinese Yuan Renminbi	0.53000	0.45652
1 Japanese Yen	0.03900	0.03040
1 Sudanese Dinar	NA	0.01669
1 Indonesian Rupiah	0.00036	0.00036
1 Philippine Peso	0.07424	0.07944
1 Saudi Dirham	1.00000	0.92388
1 Singapore Dollar	2.44000	2.33222
1 Swiss Franc	3.22000	3.09120
1 Pound Sterling	5.56000	6.94380
1 Thai Bhat	0.11000	0.10950
1 India Rupee	0.07600	0.08528
1 Bangladesh Taka	0.05500	0.04890
1 Vietnam Dong	0.00022	0.00021
1 Myanmar Kyat	0.00300	NA
1 Yemen Riyal	0.01830	NA
1 Maldives Rufiyaa	0.30000	NA

## (j) Development cost

The development costs incurred during the year are expensed off to profit and loss accounts as charitable expenditure based on projects carried out during the year.

## **NOTES TO THE FINANCIAL STATEMENTS**

## 5. Property, plant and equipment

	Furniture	Computer	Office		Motor	Air	Security	Medical	
	and fitting	and EDP	equipment	Renovation	vehicle	conditioner	equipment	equipment	Total
	RM	RM	RM	RM	RM	RM	RM	RM	RM
Cost									
Opening balance	52,064	186,614	160,682	66,030	582,433	25,855	9,000	109,853	1,192,531
Additions	197,049	418,332	78,190	316,697	-	-	-	-	1,010,268
Disposal/Written off	(16,967)	-	(1,080)	(63,626)	-	-	-	-	(81,673)
Closing balance	232,146	604,946	237,792	319,101	582,433	25,855	9,000	109,853	2,121,126
Depreciation									
Opening balance	26,414	76,468	62,605	37,692	306,163	16,842	4,322	32,527	563,033
Charge for the year	31,956	41,925	21,952	43,636	91,999	3,550	1,080	16,478	252,576
Disposal/Written off	(13,565)	-	(1,000)	(49,142)	-	-	-	-	(63,707)
Closing balance	44,805	118,393	83,557	32,186	398,162	20,392	5,402	49,005	751,902
Net book value									
At 31 December 2008	187,341	486,553	154,235	286,915	184,271	5,463	3,598	60,848	1,369,224
At 31 December 2007	25,650	110,146	98,077	28,338	276,270	9,013	4,678	77,326	629,498
Depreciation charge for the year ended 2007	10,159	30,503	19,052	13,204	109,583	4,153	1,080	13,749	201,483

# NOTES TO THE FINANCIAL STATEMENTS

## 6. Inventories

	2008 RM	2007 RM
At Cost:		
Emergency Response Unit (ERU)	189,669	211,867
Merchandise	88,546	123,466
Mobile Clinics	36,531	21,219
	314,746	356,552

## 7. Other receivables

	RM	2007 RM
Other debtors, deposit and prepayment Advance to mission members and basecamp	495,875 330,110	162,130 144,990
	825,985	307,120

## 8. Cash and cash equivalents

	2008	2007
	RM	RM
Cash in hand	278,450	129,241
Cash at bank	2,133,742	1,258,003
Deposit with licensed banks	16,447,682	12,068,303
	18,859,874	13,455,547

## **NOTES TO THE FINANCIAL STATEMENTS**

9.	Other payables		
		2008	2007
		RM	RM
	Other creditors and accruals	458,466	304,743
		458,466	304,743
10	Donation		
	Solution		
		2008	2007
		RM	RM
	General fund	3,958,363	3,609,071
	Restricted fund	13,669,879	6,267,366
	Less: Fundraising costs	(125,103)	(16,871)
		17,503,139	9,859,566
11.	Annual fund raising dinner		
		2008	2007
		Z008 RM	2007 RM
		1100	11101
	Donation received	166,700	482,691
	Less: Expenses	(39,608)	(95,487)
		127,092	387,204

# NOTES TO THE FINANCIAL STATEMENTS

## 12. Membership fee

	2008	2007
	RM	RM
Life membership Ordinary membership	1,500 600	300
	2,100	300

## 13. Other income

	2008 RM	2007 RM
Interest received Sale of merchandise Gain on foreign exchange Others	505,562 47,215 - 73,753	378,788 60,877 59,547 7,767
	626,530	506,979

## 14. Charitable mission expenditure

Charitable expenditure by mission are as follows:-

2008	2007
RM	RM
545,772	662,882
45,525	2,363
901,388	270,625
736,444	36,712
244,785	-
2,473,914	972,582
	545,772 45,525 901,388 736,444 244,785

## **NOTES TO THE FINANCIAL STATEMENTS**

## 14. Charitable mission expenditure (continued)

	2008 RM	2007 RM
Balance carried forward	2,473,914	972,582
India	141,592	_
Jakarta Flood	, -	67,250
Korea	55,771	-
Malaysia	706,934	835,394
Maldives	243,099	87,475
Myanmar	1,921,844	-
Pakistan	258,367	117,098
Palestine	110,379	125,858
Philippines	131,737	-
Special projects	1,185,607	544,298
Sudan	1,103,895	165,322
Sumatera Earthquake	277,550	245,111
Tsunami	989,704	5,370,560
Vietnam Typhoon	-	100,721
Yemen	46,171	-
Yogyakarta		871,606
	9,646,564	9,503,275

# NOTES TO THE FINANCIAL STATEMENTS

## 15. Operating expenses

Included in operating expenses are:-

	2008	2007
	RM	RM
Audit fee	10,000	8,000
Depreciation	153,836	122,928
Loss on foreign exchange	10,160	-
Loss on disposal and written off property, plant and equipment	15,986	5,040
Office rental	98,990	75,468
Staff costs (Note 17)	1,401,146	936,054
Warehouse rental	18,012	18,900

## 16. 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.

### 17. Staff costs

	2008	2007
	RM	RM
EPF and SOCSO	132,141	99,926
Medical	5,904	7,538
Salaries and allowances	1,263,101	828,590
	1,401,146	936,054
Number of employees (excluding Executive Council) at the end of financial year	44	28

## **NOTES TO THE FINANCIAL STATEMENTS**

## 18. Development cost

Development costs incurred during the year are expensed off as charitable expenditure based on projects carried out during the year are analysed as follows:

	2008	2007
	RM	RM
a) Tsunami Aceh		
I. Healthcare	-	1,088,184
II. Education	-	460,404
	<del></del>	1,548,588
b) Tsunami Sri Lanka		-
I. Healthcare	-	225,952
	<del>-</del>	225,952
c) Tsunami Nias		
I. Healthcare	<u></u> _	2,062,300
		2,062,300
d) Yogyakarta		
I. Healthcare	<del>-</del> _	844,565
	<del>-</del> _	844,565
e) Sudan Darfur		
I. Healthcare	111,843	-
	111,843	_
f) Sumatra		
I. Healthcare	272,180	_
	272,180	_
TOTAL	384,023	4,681,405
IVIAL	304,023	4,001,405

## MERCY MALAYSIA POTURES



Rapid Assessment Course, held at Malaysian Peacekeeping Training Centre, Port Dickson, Negeri Sembilan, Malaysia.

























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