





## COVER RATIONALE

For the year 2014, our theme is 'The Art of Caring', this was inspired by the crisis that occurred in Gaza and Syria that caused major devastation to their civilians. We witnessed the compassion of the Malaysian people who made aiding those who were affected by the conflict, their utmost priority. The public's contribution did not stop there, the East Coast Floods we experienced in December received astounding response from the Malaysian public. Such goodness was heart warming to MERCY Malaysia and we wanted to dedicate this year's theme to all of whom that shared what they had with those that did not have. Because of them, we were able to reach out to the affected population with humanitarian aid that was critically needed. Despite the disasters, what we saw was overwhelming altruism from the public, domestically and internationally.

MERCY Malaysia understands and appreciates the dedication and continual support of our volunteers in our work. The commitment of volunteers to our missions in Malaysia and overseas produced successful results for our beneficiaries by improving the quality of their lives. The call to serve overrides every barrier, which is why MERCY Malaysia prides ourselves on being a medical relief society whose volunteers come from every walk of life. The willingness of volunteers to selflessly give to those in need is an art form they have perfected.



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### GET INVOLVED!

## MERCY MALAYSIA'S PATRON



**DULI YANG MAHA MULIA  
PADUKA SERI SULTAN PERAK DARUL RIDZUAN  
SULTAN NAZRIN MUIZZUDDIN SHAH IBNI ALMARHUM SULTAN AZLAN MUHIBBUDDIN SHAH  
AL-MAGHFUR-LAH**  
D.K., D.K.S.A., D.K.A., D.M.N., D.K. (Kelantan), D.K. (Selangor), D.K.N.S., D.K. (Perlis),  
Ph.D. (Harvard)

MESSAGES //

## MESSAGE FROM THE CHAIRMAN OF THE BOARD OF TRUSTEES



"The year 2014 has been another demanding period with the occurrence of natural disasters and humanitarian crisis."

**TAN SRI DATO' AJIT SINGH**  
*Chairman of the Board of Trustees*

Dear friends,

MERCY Malaysia remains steadfast in continuously delivering humanitarian aid to the various communities here and abroad that need help. The year 2014 has been another demanding period with the occurrence of natural disasters and humanitarian crisis.

MERCY Malaysia has continued to render support for the communities that were hit by Typhoon Hyan in the Philippines. The initiatives that were undertaken were in the area of Disaster Relief Reduction as well as reconstruction and rebuilding of important establishments; for example, the Bailon Elementary School for children and Ormoc District Hospital.

In the area of humanitarian crisis, MERCY Malaysia provided unrelenting support in Syria with children's winter kit distribution. In Myanmar, MERCY Malaysia has been serving the Kuang Duke Kha Camp since November 2012 providing health care. It has also constructed the Thet Kel Pyin Rural Health Centre that is to provide health care to more than 30,000 people.

In extending our reach further and building our brand identity, MERCY Malaysia has opened an office in the United Kingdom called "MERCY Malaysia United Kingdom" in September 2014. We were honored to have had our Patron, His Royal Highness Sultan Dr. Nazrin Muizzuddin Shah of Perak to grace and launch

MERCY Malaysia UK at the Malaysian High Commission in London. With the opening of MERCY Malaysia UK, we are ready to continue our journey in morphing into a truly world class international humanitarian organization.

We are thankful to all our donors for their noble contributions and hope that we will continue to have your support and involvement as MERCY Malaysia takes on a wide global reach in its humanitarian and disaster relief efforts.

A handwritten signature in black ink, appearing to be 'Ajit Singh', written over a light blue textured background.



MESSAGES //////////////

## MESSAGE FROM THE PRESIDENT



"We are as always, blessed to have your unswerving support and dedication that has enabled us to serve the humanitarian cause with distinction and raise MERCY Malaysia up to another level."

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

Assalamualaikum and greetings,

Dear members of the MERCY Malaysia family,

Alhamdulillah, Praise the Lord Almighty that we are able to meet again after one year to look back at what has been another momentous year for MERCY Malaysia in so many ways. We are as always, blessed to have your unswerving support and dedication that has enabled us to serve the humanitarian cause with distinction and raise MERCY Malaysia up to another level.

We began the year 2014 busy responding to the disaster that was Typhoon Haiyan which had hit the islands of Leyte and Samar in the Philippines in November 2013. Throughout 2014 we were busy doing recovery phase programmes as well as rebuilding and rehabilitating damaged facilities in Ormoc and Tacloban. We also proceeded to do disaster risk reduction (DRR) programs with local communities. We are continuing with both DRR and Reproductive Health (RH) programs till today.

The world was shocked in mid 2014 with another merciless Israeli military campaign in Gaza which led to untold suffering among the long suffering Palestinian people. MERCY Malaysia again responded and managed to deliver aid directly into Gaza. With the funding support we received, we are able to strengthen our programmes and country office structure in Gaza. Apart from the acute crisis in Gaza, MERCY Malaysia continues to respond to the seemingly never-ending crisis in Syria and its terrible humanitarian consequences. The magnitude of the crises in the region meant that MERCY Malaysia needed to upgrade its response and management in the region. To this end, MERCY Malaysia has opened its first regional directorate in the Middle East North Africa region, putting it at par with major international organisations.

In December 2014, Peninsular Malaysia suffered from one of

the worst floods in recent history during the last three weeks of 2014. The worst hit states were Kelantan, Pahang and Terengganu, followed by Perak and Negeri Sembilan. MERCY Malaysia responded in the emergency phase in the four worst-hit states, namely Kelantan, Pahang, Perak and Terengganu. For the first time in the last fifteen years of flood response operations in Malaysia, MERCY Malaysia has had to initiate full-fledged recovery programmes in Kelantan and Pahang as well as rebuilding in Kelantan, followed by DRR programmes which we usually do post-floods in Malaysia. Such was the magnitude of the disaster and the impact it had on the affected population as well as the entire country. I would like to take this opportunity to thank and congratulate our partners, donors and supporters who continue to support us to this day with our efforts. This was also the first time that MERCY Malaysia had numerous opportunities to advocate for better response and preparedness as well as planning practices in disaster management in Malaysia. This made MERCY Malaysia the reference point for many, either in government, the private sector as well as the general public and further enhanced our standing as the country's leading humanitarian organization.

Even during these times of crisis, our on going efforts do not stop. They range from smaller disasters like Typhoon Hagupit in the Philippines as well as smaller floods in Sabah and Sarawak, to ongoing programmes in all the countries where we continue to have medium to long term operations. Towards this end, we depend on you, our partners, donors and supporters to continue your support to us in a sustainable manner. In the interest of sustainable funding, MERCY Malaysia hosted several fundraising events that involved tremendous support from the public. These events also serve as a tools to raise awareness of the criticality of humanitarian crises around the world. Such events include our International Humanitarian Run called My

MESSAGES ///////////////

## MESSAGE FROM THE PRESIDENT

MERCY Run and our Annual Dinner, among others.

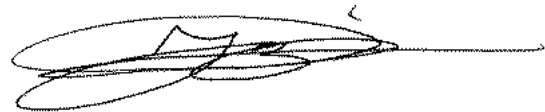
In late November 2014, MERCY Malaysia also organised in collaboration with the Institute of Diplomacy and Foreign Affairs (IDFR) the 3rd Sultan Nazrin Shah Humanitarian Lecture Series, with another high level international humanitarian, Mr Yves Daccord, the Director General of the ICRC as the speaker. It was another event which provided an avenue for advocacy and knowledge and information sharing at the highest level of the humanitarian sector and further cemented MERCY Malaysia's leading role in the region.

The early months of 2015 have been just as challenging and rewarding. As we continue with post-floods recovery and rebuilding work in Kelantan, we have taken a more prominent advocacy role nationally and internationally. In March this year, I had the honour and privilege of being elected as Chair of ICVA (International Council of Voluntary Agencies), the world's biggest and most diverse consortium of international humanitarian NGOs, bringing organisations both from the developed as well as the developing world, it is indeed an honour for MERCY Malaysia and Malaysia as its the first time that someone from outside the developed world has been elected as Chair. It also means that MERCY Malaysia has the opportunity to advocate at the highest levels of the humanitarian sector as the Chair of ICVA has a permanent seat at the IASC Principals meeting,

the highest direction setting body in the sector globally. While I humbly accept this position, I am also aware of the great responsibility that lies ahead and thank everyone in MERCY Malaysia for your support.

We are now busy with the Nepal earthquake response and the Rohingya migrant crisis, which I'm sure I will have more to report on the exemplary manner with which our teams have responded in our annual report next year as well as in our upcoming AGM and ANNUAL Dinner. At present, it is suffice for me to say that we had deployed our full field hospital Emergency Response Unit (ERU) in Nepal for the first time in our history, putting us again at par with major international organisations, while we are also the leading NGO in the region at present both operationally and in advocacy with regards to the Rohingya migrant crisis.

I would like to take this opportunity to thank all of our donors, partners, members, volunteers, supporters and colleagues who have made our work possible in delivering aid to our beneficiaries. We look forward to your continued and generous support in our humanitarian provisions here in Malaysia and abroad.



MESSAGES //

## MESSAGE FROM THE EXECUTIVE DIRECTOR



"In 2014, MERCY Malaysia's prominence and stature continued to grow tremendously both locally and internationally."

**AHMAD FAEZAL BIN MOHAMED**  
*Executive Director*

Assalamualaikum warahmatullahi wabarakatuh & Warm Greetings to members, partners, volunteers and supporters of MERCY Malaysia.

In 2014, MERCY Malaysia's prominence and stature continued to grow tremendously both locally and internationally. This is despite the many challenges and expectations that MERCY has had to face throughout the year. We were able to overcome those challenges and grow in our stature by working as a team, staff and volunteers, and also through the outstanding support that we received from our supporters and friends, both locally and internationally.

A major area of focus for MERCY Malaysia is to develop its human capital/resources which includes both staff and volunteers so that the organisation's standards are upheld and delivery of services to the beneficiaries is efficient and transparent. Trainings and induction programmes were offered and done on a regular basis to our volunteers, our partners and supporters. On the field, we trained adhoc volunteers so that they were able to deliver the minimum standard of services to the beneficiaries. In the Kelantan floods, for example, we engaged with numerous adhoc volunteers to assist MERCY Malaysia to deliver food and medical assistance quickly and efficiently to the beneficiaries in remote areas. MERCY Malaysia also extended its cooperation and shared its knowledge with other organisations, locally and internationally, with the common objective of helping the people, for example in Kelantan. We believe that by sharing knowledge, MERCY Malaysia would be able to help develop other organisations in the delivery of humanitarian aid.

In an ever changing humanitarian landscape, MERCY Malaysia has had to continuously improve and adapt its services to the needs of the beneficiaries. The year 2014 witnessed the formalization of the psychosocial "technical team" with about 40 psychologists and psychosocial volunteers offering their

services. They were the main volunteers who had assisted with the MH370 and MH17 air disasters by giving their support to the Malaysia Airlines crew and staff. As we envisage that psychosocial services will be one of our primary focus areas in any disaster, the continued development of the psychosocial team will be very important. In 2014, we also have begun to deliver psychosocial services in two natural disasters, in the aftermath of the Supertyphoon Haiyan in the Philippines and also during the Malaysian floods in Terengganu.

Total Disaster Risk Management continues to be MERCY Malaysia's approach to natural disaster risk management as it provides a balance between pre-disaster activities and post-disaster work. In 2014, MERCY Malaysia continued to work in the Philippines to rehabilitate/rebuild schools and health facilities in the aftermath of supertyphoon Haiyan and have begun to provide temporary/transit homes for the people in Kelantan. Disaster Risk Reduction (DRR) activities were also conducted for the affected communities in Ormoc, Philippines and large scale DRR activities are already being planned to help build the resiliency of the communities in Kelantan. All these activities would not have been possible if it was not for the generosity of our donors, both the general public and the corporate sector, as well as our experienced technical volunteers comprising of engineers and architects.

Raising funds for our activities remains to be the biggest challenge as MERCY Malaysia requires sustainable funding especially for its medium to long term projects. In 2014, sustainable public donation has grown from previous years but needs to grow further to ensure that medium to long term activities can be planned effectively. We have had some notable successes in sustainable funding from corporate donors such as with Maybank Foundation and UMW Berhad, and we will continue to engage with other corporate donors for sustainable funding apart from adhoc disaster funding. Nevertheless, we



MESSAGES ///////////////

## MESSAGE FROM THE EXECUTIVE DIRECTOR

are grateful to all our corporate donors for their generosity without which we would not have been able to continue our work post disaster in several areas such as Kelantan and the Philippines. In 2014, we have continued our strong engagement with international institutional donors to fund our projects in various countries and our efforts have started to bear fruit.

The year 2015 will be another challenging year which we look forward to, as it will also bring hope and opportunities. We will continue to engage strongly with our supporters, volunteers, donors and all stakeholders locally and internationally. We would like to thank all of you for your tremendous support and belief in MERCY Malaysia, a truly Malaysian International non-profit non-governmental organization. Without you, we would not have been able to do what we are expected to do.

I would like to take this opportunity to congratulate our President, Dato' Dr Ahmad Faizal Mohd Perdaus, for being elected as Chairperson of the International Council of Voluntary Agencies (ICVA) in 2015. A tremendous achievement as he is the first Asian to be elected as Chairperson of a global network that comprises of prominent INGOs such as Oxfam, Save the Children and World Vision, to name a few.



INTRODUCTION //////////////////////////////////

## VISION & MISSION STATEMENT

### Vision

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

### Mission

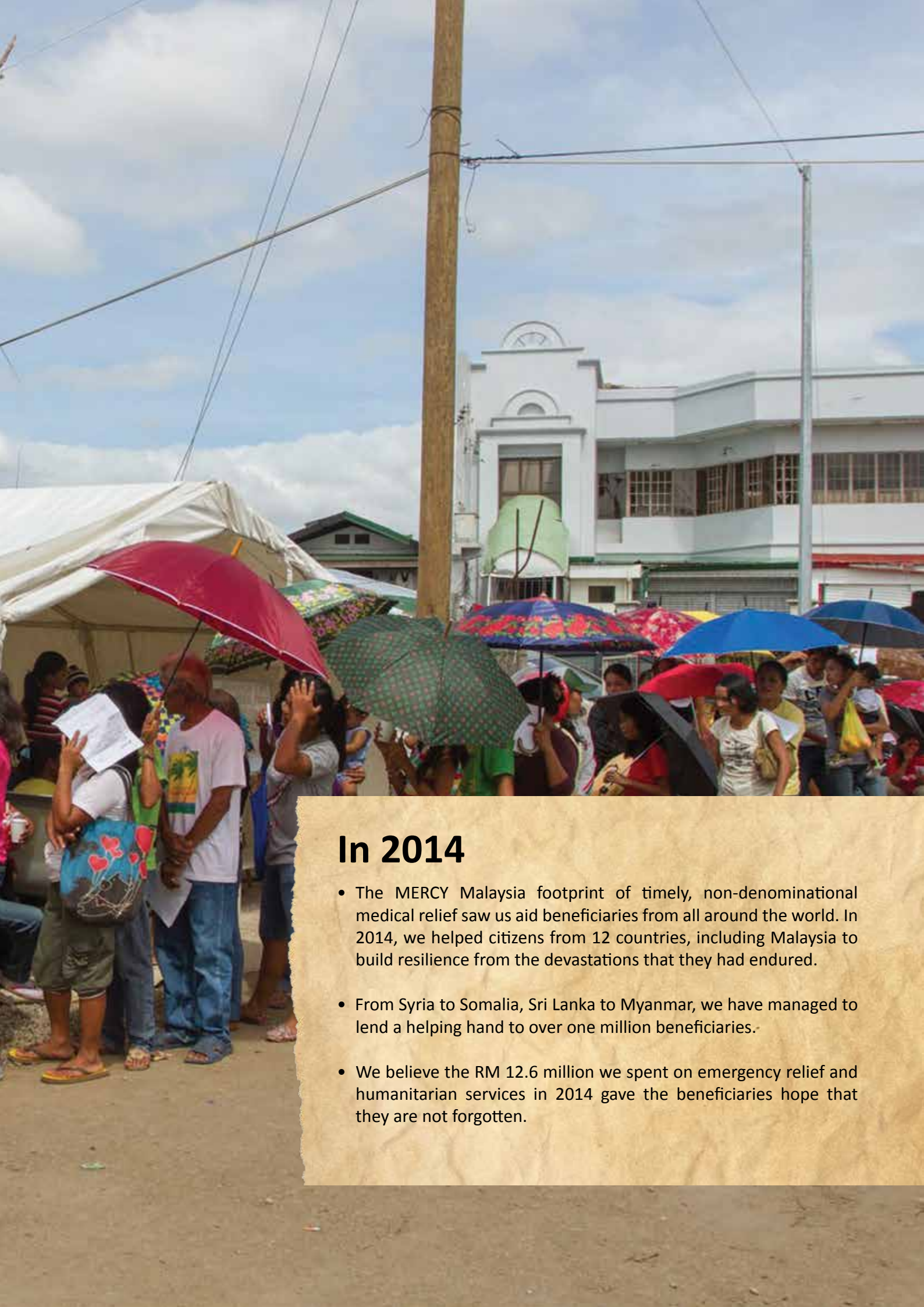
MERCY Malaysia is an international non-profit organisation focusing on providing medical relief, sustainable health-related development and risk reduction activities for vulnerable communities, in both crisis and non-crisis situation.

### Core Values

<b>Motivation</b>	We are highly motivated and passionate
<b>Excellence</b>	We do the right things in the right way; we are accountable to beneficiaries and donors
<b>Respect</b>	We show trust and respect in all our interactions
<b>Collaboration</b>	Working with peers, partners and volunteers, build on each other's strengths and enhance the impact of beneficiaries
<b>Yearn to Serve</b>	We will go the extra mile to help those in need







## In 2014

- The MERCY Malaysia footprint of timely, non-denominational medical relief saw us aid beneficiaries from all around the world. In 2014, we helped citizens from 12 countries, including Malaysia to build resilience from the devastations that they had endured.
- From Syria to Somalia, Sri Lanka to Myanmar, we have managed to lend a helping hand to over one million beneficiaries.
- We believe the RM 12.6 million we spent on emergency relief and humanitarian services in 2014 gave the beneficiaries hope that they are not forgotten.



## ACTIVITIES IN 2014



### LEGEND



Health-Related Development



Crisis Response



Health - Post Emergency



Disaster Risk Reduction





Afghanistan (Pg.54)



Myanmar (Pg.60)



Cambodia (Pg.57)



Philippines (Pg.68)



Malaysia (Pg.38)



Indonesia (Pg.58)



Sri Lanka (Pg.79)



Somalia (Pg.78)



ABOUT US //////////////////////////////////

## OUR STRATEGIC COMMITMENTS

01

- **Impartiality** – We maintain impartiality in the selection of our staff. The selection of our beneficiaries purely is on a needs basis and not based on race, religion and/or political affiliation.
- **Staff Integrity** – We maintain a workforce who adhere to high moral and ethical principles.
- **Continuous Improvement** – We monitor and evaluate our work in order to improve on our past experiences and provide better humanitarian services as we progress.

02

- **Complementary Partnership** – We aim to work as much as possible with local partners on the field and enhance complimentary factors between both parties. In and beyond the field, we will work with partners who are responsible, transparent and accountable in accordance with our Principles of Partnership.
- **Consultative/Participatory** – We consult with our beneficiaries and staff and include their feedback into project plans to ensure holistic results.
- **Ethical Reporting** – We maintain the confidentiality of our stakeholders, especially beneficiaries, at all times.
- **Transparency/Information Provision** – We are transparent in sharing information of our financial statements, MERCY Malaysia's constitution, MERCY Malaysia's Humanitarian Accountability Framework, organisation missions and core values and commitments to all stakeholders.

03

- **Listening/Responsive** – We encourage feedback from our stakeholders through our Complaints Response Mechanism policy and we respond to all feedback. Our responses include evaluating all feedback to ensure continuous improvement.
- **Quality Management/Quality Assurance** – We continuously review our work and learn from our mistakes and apply our lessons learnt as we progress.
- **Financial Stewardship** – We promote good stewardship of our financial resources and are transparent about our expenditures.
- **Health, Safety and Security** – We strive to ensure the physical safety and the emotional well-being of all staff and volunteers, especially in the line of duty.

ABOUT US //////////////////////////////////

## HUMANITARIAN ACCOUNTABILITY

### Principle of Accountability

#### 1. Commitment to humanitarian standards and rights

- Members state their commitment to respect and foster humanitarian standards and the rights of beneficiaries

#### 2. 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
- Members provide appropriate training in the use and implementation of standards

#### 3. 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

#### 4. 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

#### 5. Monitoring and reporting on compliance

- Members involve beneficiaries and staff when they monitor and revise standards
- Members regularly monitor and evaluate compliance with standards using robust processes
- Members report at least annually to stakeholders, including beneficiaries, on compliance with standards. Reporting may take a variety of forms

#### 6. Addressing complaints

- Members enable beneficiaries and staff to report complaints and seek redress with confidence

#### 7. Implementing partners

- Members are committed to the implementation of these principles, if and when working through implementation partners

ABOUT US //

## CERTIFICATION FROM HAP INTERNATIONAL

As a member of Humanitarian Accountability Partnership (HAP), MERCY Malaysia commits to comply with the HAP Principles of Accountability and is required to report annually on the progress on implementing its Accountability Work Plan.

Established in 2003, HAP is the humanitarian sector's first international self-regulated body. The HAP Standards sets six affordable, realistic and results driven goals – critical benchmarks for ensuring that it meets the needs of disaster survivors that drive humanitarian action. This is the only aid standards developed in this way which meets the ISO guidelines for designing quality standards.

MERCY Malaysia is due to be re-certified in September 2014. MERCY Malaysia's continuous commitment towards improving accountability measures was observed when it undertook re-certification against HAP 2010 Standard in Accountability and Quality Management.

The HAP Audit was carried out in Kuala Lumpur in 7th - 10th October 2014 and in Ormoc City, the Philippines, 13th – 17th October 2014.

HAP Independent Auditors, audited MERCY Malaysia's head office in Kuala Lumpur, Malaysia and the programme site in Ormoc City, the Philippines, for conformity with the HAP 2010 Standards in Accountability and Quality Management (HAP Standard).

The auditors conducted an audit on a sample test basis through an examination of documentary evidence disclosed and through interviews with MERCY Malaysia's Board of Trustees, Executive Council members, Partners, Staff and Volunteers in the Kuala Lumpur offices.

In the Philippines programme site, the auditors interviewed MERCY Malaysia staff, the staff of partners Ormoc District Hospital, Ormoc Central Disaster Risk Reduction Management Council, ECLIPSE, Pagtinabangay Foundation, Hayag Family Development Centre and the Rural Development Institute.

Projects and partners were selected based on the types of partnership with MERCY Malaysia; that the partnership was ongoing and that the projects being implemented represented the different types of activities of MERCY Malaysia.

The HAP Audit report findings of MERCY Malaysia's re-certification audit – a full audit at the head office and programme site - resulted in twenty-one non-compliance; ie two major non-compliance and eighteen minor non-compliance resulting in delay for re-certification.

MERCY Malaysia acknowledges the findings of the audit report and the gaps that are needed to be addressed. MERCY Malaysia will take significant steps in acquiring full compliance within the stipulated period by ensuring Quality and Accountability practices across the Organisation.

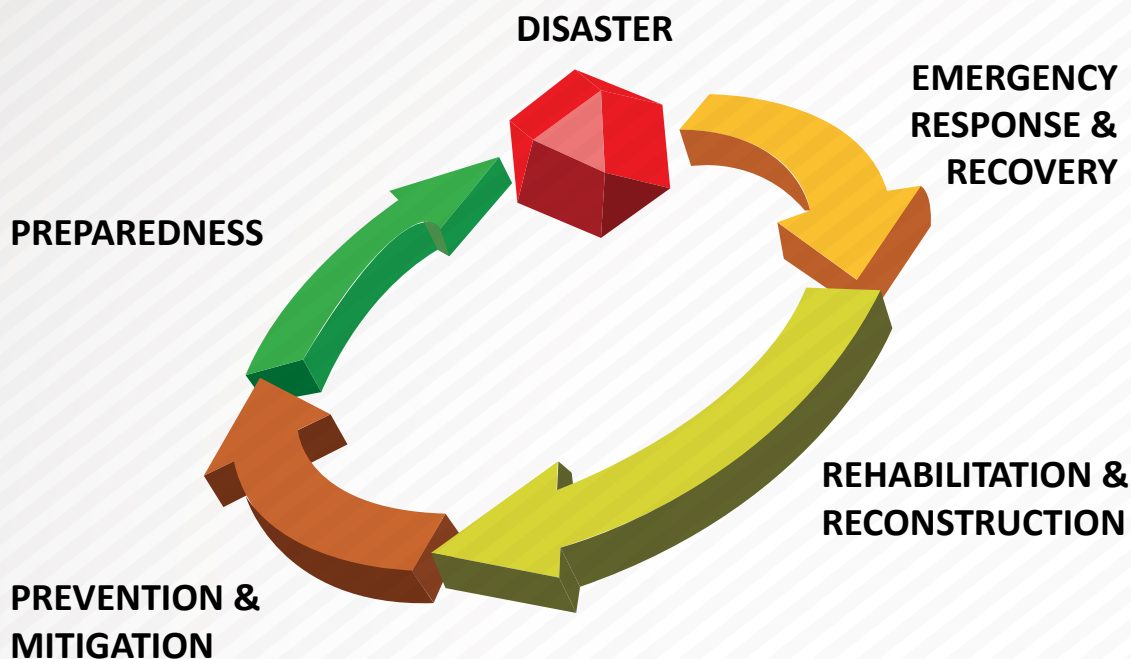




ABOUT US //////////////////////////////////

## OUR APPROACH

Total Disaster Risk Management (TDRM)



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

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

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

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

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

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

ABOUT US ///////////////

## OUR APPROACH

Total Disaster Risk Management (TDRM)

Our humanitarian **EMERGENCY RESPONSE** and **RECOVERY** provides timely relief to survivors



**PREPAREDNESS** in the community helps everyone to be ready for future disasters



**DISASTER**



Our **REHABILITATION** and **RECONSTRUCTION** efforts help affected communities return to their normal daily lives



**PREVENTION** and **MITIGATION** activities help build resilience in the community

ABOUT US //

## AFFILIATIONS

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

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



### The Asian Disaster Reduction and Response Network (ADRRN)

The Asian Disaster Reduction and Response Network (ADRRN) was established in 2002 to strengthen collaboration in disaster response and risk reduction among the local civil society in the Asia-Pacific region. MERCY Malaysia plays the important role of hosting the Secretariat of the Network. Indeed MERCY Malaysia's Executive Committee Member, Dr. Heng Aik Cheng has been the Vice Chairperson of the Network since 2011.

The Secretariat is operated by two MERCY Malaysia staff members – an ADRRN Programme Officer and an ADRRN Finance Advisor. The major roles of the Secretariat are to coordinate with the Representative Office in India, network members and major programme donors in key activities and to provide necessary support in financial and accounting matters. ADRRN currently has 36 Core Members and 14 Associate Members from 21 countries. With a strong footprint in the region, the network works unrelentingly with its members to strengthen the ability of communities to combat disasters; provide humanitarian assistance such as food, water, shelter and health care; protect critical facilities such as schools and hospitals; create awareness on disasters and risk reduction, advocate for policy changes; and improve the capacity of community-based organisations.

In 2010, ADRRN published a booklet titled Disaster Risk Reduction (DRR) Terminology in nine Asian languages. The original booklet was issued by the United Nations International Strategy for Disaster Reduction (UNISDR) and ADRRN was selected as their implementing partner to translate it to suit the Asian context. The UNISDR booklet aims to promote common understanding and usage of DRR concepts and to assist the DRR efforts of authorities, practitioners and the public. ADRRN was best placed to implement this activity due to its members' strength and vast experience in working in the field of DRR.

The network still continues to coordinate such activities among its membership for more effective disaster response and risk reduction in the region. This also includes collaboration with strategic partners such as UNISDR and United Nations Office for the Coordination of Humanitarian Affairs (UNOCHA) in order to the build long-term resilience of affected and at-risk communities. ADRRN is now working with different stakeholders in the Philippines

in its response to Typhoon Yolanda, in efforts to strengthen the engagement and coordination between the local civil society and the national humanitarian architecture.

MERCY Malaysia recognises the importance of the role of a network for Asian civil society organisations (CSOs) in order to achieve community resilience ahead of disasters in the Asia-Pacific region and will continue to support ADRRN as its Secretariat. Together, we aim to continue to develop local and national CSO capacities for disaster management and to advocate for the interests of the civil society at national, regional and international levels.

[www.adrrn.net](http://www.adrrn.net)



*In 2010, ADRRN translated and published a booklet of "DRR Terminology" in nine Asian languages*



### The International Council of Voluntary Agencies (ICVA)

The International Council of Voluntary Agencies (ICVA) is a global network of non-governmental organisations (NGOs) which advocates for effective humanitarian action by strengthening humanitarian policy and advocacy. In 2015, MERCY Malaysia's president, Dato' Dr Ahmad Faizal Mohd Perdaus became the first Asian to be elected as Chairperson of the Organisation and will serve in his post for the next 3 years.

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

An essential feature of ICVA is its links with NGOs from developing countries. As the only global humanitarian NGO network; membership in ICVA gives NGOs unique opportunities to engage with other actors and each other on humanitarian policy issues.



ABOUT US //

## AFFILIATIONS

ICVA makes sure the voices of southern NGOs are heard at the international policy level. MERCY Malaysia has been on the Board of ICVA for three consecutive terms, a great honour and recognition of MERCY Malaysia's role and position in the wider humanitarian world and in being a leading voice from the Global South. MERCY Malaysia President, Dato' Dr. Ahmad Faizal Mohd Perdaus is currently the Vice-Chair of ICVA.

[www.icva.ch](http://www.icva.ch)



### People In Aid

People In Aid is a not-for-profit membership organisation which aims to improve organisational effectiveness within the humanitarian and development sectors worldwide. People in Aid advocates, supports and recognises good practice in the management of people.

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

People In Aid are governed by their members, whose experiences and human resource practices shape their activities and have informed the development of the People In Aid 'Code of Good Practice' in the management and support of aid personnel. MERCY Malaysia is a full active member of People In Aid and is working towards certification in the near future.

[www.peopleinaid.org](http://www.peopleinaid.org)



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

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

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

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

[www.alnap.org](http://www.alnap.org)

### Global Health Cluster

The Global Health Cluster (GHC), under the leadership of the World Health Organisation (WHO), is made up of more than 30 international humanitarian health organisations that have worked together over the past four years. The GHC was established in 2005, as part of the humanitarian reform process. It has built partnerships and mutual understanding and developed common approaches to humanitarian health actions.

The GHC's mission is to build consensus on health priorities and related best practices, and to strengthen system-wide capacities to ensure effective and predictable responses. The GHC works together with their partners on global, regional and country levels to improve the effectiveness, predictability, accountability and response time of humanitarian health actions based on need assessments. At the country level, partners work together to monitor situations, jointly assess and analyse information, prioritise interventions, build both strategies and implementation plans and when required, mobilise joint resources to ensure scarce resources are maximised and only invest in complementary services, without duplication.

The active GHC members are represented by 6 United Nations agencies, 24 International Non-Governmental Organisations (INGOs), 4 donor agencies, 2 academic institutes, 2 International organisations International Federation of Red Cross and Red Crescent Society and International Organisation of Migration (IFRC and IOM) the CDC and the Public Health Agency of Canada.

[http://www.who.int/hac/global\\_health\\_cluster/en/](http://www.who.int/hac/global_health_cluster/en/)



### Humanitarian Accountability Partnership

Established in 2003, Humanitarian Accountability Partnership (HAP) International is the humanitarian sector's first international self-regulatory body. It is a multi-agency initiative, working to improve the accountability of humanitarian action to people affected by disasters and other crises. HAP members range from agencies with a mandate of emergency relief and development activities to institutional donors. All are committed to meeting the highest standards of accountability and quality management.

HAP's strategic directive is building quality, accountability and programme results. By improving agency accountability in a systemic way, programme quality, impact and outcomes will also be enhanced. The essential tools for driving this virtual circle are the application of a programme quality management system, reinforced through shared learning and independent verification. All stakeholders, intended beneficiaries, affected communities, donors and agencies alike, make measurable gains as a consequence of the work undertaken by the partnership.

<http://www.hapinternational.org/>



ABOUT US //

## MERCY MALAYSIA BOARD OF TRUSTEES



**Tan Sri Dato' Ajit Singh**

Tan Sri Dato' Ajit Singh was a former Malaysian diplomat who had also served as the Secretary General of the Association of Southeast Asian Nations (ASEAN) from 1993-1997.

During the course of his career as a diplomat that spanned over 30 years, he served in various positions in the Ministry of Foreign Affairs including at Malaysian Missions in Canberra, Addis Ababa (Ethiopia) and New York. He served as Malaysia's Ambassador in Vietnam, Austria, Brazil (with concurrent accreditation to Bolivia, Colombia, Peru and Venezuela) and Germany.

In recognition of his services, both Laos and Vietnam awarded him the prestigious Friendship Medals in December 1997. He also was awarded the Panglima Setia Mahkota award, which carries the title of "Tan Sri" by His Majesty the King of Malaysia in conjunction with His Majesty's Official Birthday on June 6, 1998. The Indonesian Government awarded him the "Bintang Jasa Utama" in February 1999, in recognition of his work in ASEAN and helping to improve Malaysia-Indonesia relations.

In 1997 he joined the National Petroleum Oil Company (PETRONAS) as a Director of International Business Ventures for two years.

He was elected the first Secretary-General of the Boao Forum for Asia in February 2001. He is now the Advisor to IJM Corporation Berhad for its India Business, Advisor to the Malaysia-India Business Council and a member of the Malaysia-India CEO Forum, set up by the two Governments.

In early 2009, he was appointed to the Indian Prime Minister's Global Advisory Council of Overseas Indians. In January 2011, the Indian Government awarded him India's highest award for an overseas Indian, the Pravasi Bharatiya Samman Award.

He is married to Puan Sri Enid Lee and has three children, Adrienne, Alan and Annette Singh.



**Toh Puan Dato' Seri Hj. Dr. Aishah Ong**

Toh Puan Dato' Seri Hj. Dr. Aishah Ong joined MERCY Malaysia as one of the members of the Board of Trustees.

Currently, Toh Puan Dato' Seri Hj. Dr. Aishah Ong is a Director of the Board of the MPO (Malaysian Philharmonic Orchestra, Petronas) and a Trustee of the Dewan Filharmonik Petronas and also a Director of the Board of Nestle (M) Bhd. She received her higher education from the University of London in 1969 and graduated with the qualification of a Medical Doctor.

Toh Puan Dato' Seri Hj. Dr. Aishah Ong has also been holding the position of Pro-Chancellor of the University of Malaya since 2003, after serving as the Chairman for many years. She is Chairman of the IJN Foundation, the Welfare Committee of BAKTI, and Chairman of the Malaysian Health Promotion Board at the Ministry of Health. She is a Patron and a Founding Trustee of the Alzheimer's disease Foundation of Malaysia and a Founding Trustee of the Cancer Research Initiatives Foundation (CARIF), a Trustee of the Tun Abdul Razak Foundation, the National Council of Women's Organisations (NCWO) and the Women's Aid Organisation and last but not least, Trustee of the Media Prima Humanitarian Fund.

In 2003, she was awarded the Darjah Yang Mulia Pangkuan Negeri (DMPN) by the Penang Governor which carried the title Dato'. In 2005, she was awarded Darjah Dato' Paduka Mahkota Selangor (DPMS) by the Selangor state government and in 2007, the Penang State Government awarded her with Darjah Gemilang Pangkuan Negeri (DGPN). She was also awarded with Anugerah Saudari Islam Cemerlang (2008) by the Department of Islamic Development Malaysia (JAKIM) and the Golden Heart Award (2008) by Bumiputra Designers' Association and the Malay World Foundation.

ABOUT US //

## MERCY MALAYSIA BOARD OF TRUSTEES



**Tan Sri Dato' Ahmad Fuzi Haji Abdul Razak**

Tan Sri Dato' Ahmad Fuzi Haji Abdul Razak was previously the Secretary-General of the Ministry of Foreign Affairs Malaysia. He joined the Malaysian Diplomatic and Administrative Service in 1972, and served in various capacities at the Ministry of Foreign Affairs, mainly in the Political Division, and at the Malaysian Missions abroad in Moscow, the Hague, Canberra, Washington and Dhaka.

Tan Sri Ahmad Fuzi has previously also served as Director General, Institute of Diplomacy and Foreign Relations Malaysia; Ambassador-at-Large; Malaysia's Representative to the ASEAN High Level Task Force (HLTF) on the Drafting of the ASEAN Charter and Malaysia's Representative to the High Level Panel (HLP) on the Drafting of the Terms of Reference of the ASEAN Human Rights Body.

Tan Sri Ahmad Fuzi is currently, Secretary-General of the World Islamic Economic Forum Foundation (WIEF) and Chairman, Amanahraya-Reit Managers Sdn Bhd; Seremban Engineering Berhad; Ranhill Energy and Resources Bhd; Theatre Management Associates Sdn Bhd; Optima Capital Sdn Bhd; Sofgen (Malaysia) Sdn Bhd and ACE Holdings Sdn Bhd.

Tan Sri Fuzi is also a member of the Board of Directors of Maybank Islamic Bhd; Maybank Islamic Asset Management Sdn Bhd; Puncak Niaga Holdings Berhad; Management Development Institute of Singapore; Alstar Solutions Sdn Bhd and WEROS Technology Sdn Bhd as well as Advisor, Xadarcorp Sdn Bhd.

Tan Sri Ahmad Fuzi is currently also a Distinguished Fellow, Institute of Strategic and International Studies (ISIS) and Institute of Diplomacy and Foreign Relations; Deputy Chairman, Malaysian Member Committee of the Council for Security Cooperation in the Asia Pacific (CSCAP Malaysia); Member, Board of Trustee, MERCY Malaysia, Perdana Global Peace Foundation (PGPF) and F3 Strategies Bhd; Member, Institute of Advanced Islamic Studies (IAIS) and Advisor, Asia Pacific Entrepreneurship Award (APEA), Malaysia-Myanmar Chamber of Commerce and High School Bukit Mertajam Alumni Malaysia.

In recognition of his service to the nation, he was awarded the AMN (1979), the JSM (1999), the DSPN (1999), the DMPN (2002) the PSM (2003) and the DSLJ (Brunei Darussalam.)



**Professor Tan Sri Dato' Dzulkifli Abdul Razak**

Dzulkifli Abdul Razak (or for short, Dzul) is the currently the 14th President of the International Association of Universities (IAU), a UNESCO-affiliated organisation, based in Paris.

Currently, he is an Honorary Professor at the University of Nottingham; and holds the Chair of Islamic Leadership at Islamic Science University (USIM) in Malaysia. He also chairs the Steering Council of the Right Livelihood College Global Secretariat based in the University of Bonn, Germany. Of late he has been appointed as select member to the 2015 Hamburg Transuniversity Leaders Council, a think tank of the future of higher education. He was also made a member of Global Leadership Initiative at the School of Frontier Sciences, University of Tokyo, Japan.

His other involvements internationally include being a member of the Asia-Europe Meeting (ASEM) – Advisory Education Hub Committee since 2007, Executive Council of the Association of Commonwealth Universities (2006-2011) and a member of the Board of Trustees in MERCY Malaysia.

Dzul is a Fellow of the Academy of Sciences Malaysia (FASc), the World Academy of Art and Sciences (FWAAS) and the Malaysian Institute of Malaysia (FMIM). He is also an Honorary Lifetime member of Asian Academy of Management.

He is a weekly columnist for Malaysia's oldest daily in Malaysia, The New Straits Times, since 1995; and more recently The Sun, an English daily with the largest circulation

ABOUT US //

## MERCY MALAYSIA BOARD OF TRUSTEES



**Tan Sri Datuk Johan Jaaffar**

Tan Sri Johan Jaaffar is the Chairman of Media Prima Berhad since 30 April 2009. He is also the Chairman of the following subsidiaries within Media Prima Group namely Sistem Televisyen Malaysia Berhad (STMB), Synchrosound Studio Sdn Bhd (Synchrosound Studio), One FM Radio Sdn Bhd (OneFM), Primeworks Studios Sdn Bhd (PWS), Big Tree Outdoor Sdn Bhd (BTO) and Alt Media Sdn Bhd (Alt Media). He is also currently a columnist for the New Straits Times.

In MERCY Malaysia, Tan Sri Johan serves as one of the members of Board of Trustees, contributing his expertise and time to assist with MERCY Malaysia's humanitarian work. Previously, Tan Sri Johan was the Chairman of the Board of Dewan Bahasa & Pustaka (DBP) Group Chief Editor in Utusan Melayu (M) Berhad and sat in the board member of various organisations such as Malaysian Business Council, Multimedia Super Corridor, Multimedia Development Council, ASWARA, Yayasan Anak-anak Yatim Malaysia and Sindora Berhad.

Aside from that, Tan Sri Johan is also Chairman of the Consultation and Corruption Prevention Panel (an independent panel under the Malaysian Anti-Corruption Commission (MACC), a board member of Perbadanan Tabung Pendidikan Tinggi Nasional (PTPTN), Laureate Malaysia Advisory, *Majlis Penasihat Pendidikan Kebangsaan* and he also sits in the National Unity Consultative Council (NUCC).

In addition, he is also a committee member of National Academic Award under the Ministry of Education Malaysia and Local Authority Transformation Programme under the Ministry of Urban Wellbeing, Housing and Local Government.

Tan Sri Johan is also an Adjunct Professor at Limkokwing University of Creative Technology since 2011 and Universiti Utara Malaysia since 2012. He was also a Resident Writer at University Technology Malaysia (UTM) for a year from July 2012.



**Mrs. Gaik Wong**

Gaik is the founder and the director of The Chicken Rice Shop ("TCRS"). She has more than 40 years of experience in the Food and Beverage, including franchised and chain store operations. Prior to being a founder/director of TCRS, she was the Chief Operating Officer cum Director of KFC Holdings Bhd. She played a major role in developing KFC into a household name in Malaysia.

The TCRS group operates a chain of more than 90 restaurants in Malaysia and Singapore under the 5 brands of "The Chicken Rice Shop, DubuYo (formerly Dubu Dubu), Sweet Chat, Relish and Pancake House". The first Restaurant of TCRS was opened in 2000, and with the planned opening of another 25 restaurants will have 120 restaurants as at 31st December 2015.

The Chicken Rice Shop is the leading Halal chain of chicken rice restaurants in Malaysia.

TCRS currently has in its employment a total of 1,400 employees and the group is very pleased to be able to provide employment and at the same time contribute to the growth of the domestic economy through the respective food businesses the group has developed over the years.

Apart from TCRS's objective of building the respective businesses, store growth and revenue, it is the commitment of the group to be a good and responsible corporate citizen of Malaysia. As such contributions are being made to deserving charities in cash and kind on a regular basis. A significant sum is allocated annually to deserving charities, like orphanages and old folk's homes.

Gaik is an active member of the National Association of Women Entrepreneurs of Malaysia ("NAWEM") and is always ready and available to mentor young entrepreneurs and share her experiences with them.

She was nominated in 2004 as Innovative Entrepreneur of the Year.

Gaik Wong is a member of the Board of Trustee of Mercy Malaysia and is also a member of the Board of Montfort Boys Town.

ABOUT US //

## MERCY MALAYSIA BOARD OF TRUSTEES



**Dr. Elizabeth Lee Fuh Yen**

Dr. Elizabeth Lee Fuh Yen is the Senior Executive Director of the Sunway Education Group. Since her appointment in 1992, the Sunway Education Group has developed from just one institution, Sunway College which had a student population of less than 1,000 to a dynamic group of twelve institutions, catering to more than 25,000 students.

Educated and trained in the U.K. in Multi-Cultural Education, Elizabeth read her M.Phil. in Education at the University of Cambridge. Her Cambridge links see her actively involved in the Oxford & Cambridge Society of Malaysia of which she is a past President.

A veteran in the field of private higher education provision, Elizabeth also serves on National Higher Education Research Institute (IPPTN) and the International Academic Advisory Council (IAAC) of Jeffrey Cheah Institute on Southeast Asia. She sits on the Board of Management of the Master Builders Association of Malaysia Education Fund and also the Board of Trustees of MERCY Malaysia. A thought leader in her own right, her recent international invitations to speak include the Harvard Business School, University of Oxford and the University of Edinburgh.

In August 2014, she was conferred the Doctor of Laws (Honoris Causa) by the University of Nottingham for her immense and exceptional contributions to education in Malaysia. Her other international and national awards include the Visionary Women Leadership Award at the 2nd World Women Leadership Congress & Award (WWLCA) in Mumbai (2015), Most Impactful Leadership Contribution Award at Malaysia Most Impactful Awards 2014 by Asia Success Inc and the Outstanding Asian Women Community Contribution Award from Malaysia Women's Career Building Association in 2011.

In her personal capacity, she has written and edited a number of children's English storybooks for early language learning. Her culinary interests find her serving on the National Council of the Confrerie de la Chaine des Rotisseurs, Baillage de Malaisie, where she is the Baili Regional for the state of Perak.

Elizabeth is married to Mr Cheah Ming Chiew, a Company Director. They have three daughters, aged between 16 years and 20 years.



ABOUT US ////////////////

## MERCY MALAYSIA EXECUTIVE COUNCIL



### In front: Sitting from left

1. Dr. Heng Aik Cheng
2. Yang Mulia (YM) Raja Riza Shazmin Raja Badrul Shah
3. Dato' Dr. Ahmad Faizal Mohd. Perdaus
4. Ir. Amran Mahzan, *PMP*

### Not in the photo

1. Mr Sam Tee Kam Bee
2. Mr Harmandar Singh

### Back: Standing from left

1. Dr. Jitendra Kumar S.N. Tejani
2. Assoc. Prof. Dr. Mohammad Iqbal bin Omar
3. Ar. Mohamad Ayof Bin Bajuri
4. Dr. Hariyati Shahrina Abdul Majid
5. Dr Norzila Mohamed Zainudin
6. Assoc. Prof. Dr. Shalimar Abdullah
7. Dr. Mohamed Ashraff Bin Mohd Ariff

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## MERCY MALAYSIA EXECUTIVE COUNCIL



**Dato' Dr. Ahmad Faizal Mohd. Perdaus**  
*President*

Dato' Dr. Ahmad Faizal Mohd. Perdaus obtained his Bachelor of Medical Science in 1989 from Universiti Kebangsaan Malaysia, followed by his Master's degree in Internal Medicine in 2000. He was accredited as a Respiratory Physician in 2003. He is now attached to KPJ Johor Specialist Hospital as a Consultant Physician (Internal Medicine, Respiratory and Sleep Medicine). He previously was a Consultant Physician (Internal Medicine and Respiratory Medicine) at Hospital Universiti Kebangsaan Malaysia (HUKM), where he also served as a Senior Lecturer in Internal Medicine and Respiratory Medicine in the University's Faculty of Medicine. He was a Visiting Research Fellow at the Woolcock Institute of Medical Research, Sydney, Australia from 2006 to 2009.

His involvement with MERCY Malaysia began in 2003, when he signed on as a volunteer. He was made a member of MERCY Malaysia's Executive Council in the same year. He headed the Drug Rehabilitation and Assistance Programme in Malaysia from 2003 to 2006, before being elected as President in 2010, after acting in interim since August 2009. He was re-elected in 2011. In 2014, he was also appointed to the Board of Trustees for MERCY Malaysia UK (MMUK).

Dato' Dr. Ahmad Faizal's tours of duty include Sri Lanka (2003), Iran (2004), Sudan (2004, 2008), Indonesia (2005, 2006), Pakistan (2005), Myanmar (2008), Syria (2013) and Philippines (2013). He currently sits on the boards of Humanitarian Innovation Fund (HIF), Advanced Training Program on Humanitarian Action (ATHA) and Professionals in Humanitarian Assistance and Protection (PHAP), of which MERCY Malaysia is a member.

He became the first Asian to be elected as Chairperson of the International Council of Voluntary Agencies (ICVA). ICVA is on the Inter-Agency Standing Committee (IASC) as one of three NGO representatives globally. The IASC is the highest decision making and direction forming body in the humanitarian world and is chaired by the Under Secretary General (USG) for humanitarian affairs/Emergency Relief Coordinator (ERC) of the United Nations (UN).



**Dr. Heng Aik Cheng**  
*Vice President I*

Dr. Heng Aik Cheng is currently a Consultant Orthopaedic Surgeon and Traumatologist at the Sabah Medical Centre. He joined MERCY Malaysia as a volunteer in 2002, and was elected to the Executive Council in the same year and appointed Vice President 1 in June 2014. He has been involved in local missions within Malaysia and international missions to Iraq, North Korea, Sudan, Pakistan, Myanmar, Indonesia, Gaza, Chile and the Philippines. He serves on the Board of the Asian Disaster Risk Reduction Network (ADRRN) and represents MERCY Malaysia in the ASEAN Agreement on Disaster Management and Emergency (AADMER) Partnership Group (APG). Asia Pacific Conferences on Military Assistance to Disaster Relief Operations (APC- MADRO), Active Learning Network for Accountability and Performance (ALNAP) and Humanitarian Futures Programme (HFP). In the field of civil society, Dr Heng has served as President for the Rotary Club Kota Kinabalu (1998-1999). He was the President of The Sabah Society from 2011 to 2012. Dr Heng graduated with a Bachelor in Medicine; Surgery and Art of Obstetrics from Queen's University Belfast and became a Fellow of the Royal College of Surgeons in 1982.

ABOUT US //

## MERCY MALAYSIA EXECUTIVE COUNCIL



**Norazam Ab Samah**  
*Vice President II (21st June - 30th September 2014)*

Norazam Abdul Samah made it to Top 10 of Malaysia's list of towering personalities for consistently going above and beyond the call of duty. This is especially true, given that he, an architect by training and profession, has shown great dedication to the medical relief society of which he is Regional Director.

Despite being the Chief Executive Officer and Executive Director of AZAMAS Engineering Consultant, which he founded with his spouse, Norazam is deeply dedicated to the work that needs to be done after medical emergencies have been addressed.

He joined MERCY Malaysia in 2001 when he volunteered for a relief mission to Afghanistan. He was elected to the Executive Council in 2002 and was elected Vice President II in 2011. He is also the advisor to MERCY Malaysia's Technical Team.

He was also appointed as Vice President II from 21st June 2014 – 30th September 2014. Norazam was then selected as the Regional Director on the 1st October 2014.

As Head of Operations for MERCY Malaysia in Indonesia from 2005 until 2008, he had successfully designed and managed the construction and completion of 27 projects in Indonesia.

His most outstanding achievement was to design a master plan for the Nias General Hospital which was damaged in the earthquake of 2008. The master plan managed to attract founders from Japan, China and Singapore who contributed to the rebuilding of the hospital's infrastructure with a sum of USD \$15 million.

The graduate of Universiti Teknologi Mara has had vast experience in humanitarian and relief work, having volunteered for missions to Afghanistan, Pakistan, Sudan, Iraq, Iran, Palestine, Syria, Bosnia, Cambodia, Myanmar, Sri Lanka, Indonesia, and more recently to Turkey, Japan and Somalia.

Norazam is currently pursuing his master's degree in Policy and Disaster Management at the South East Asia Disaster Prevention Research Institute, Universiti Kebangsaan Malaysia.



**Yang Mulia (YM) Raja Riza Shazmin Raja Badrul Shah**  
*Honorary Secretary*

YM Raja Riza Shazmin Raja Badrul Shah is the Managing Partner of Messrs Raja Riza & Associates, established in 2004. She first joined MERCY Malaysia in 2004 as a volunteer and was elected to her current position back in 2006. She oversees the organisation's legal and compliance matters in addition to overlooking the Monitoring and Evaluation department, as well as the Communications and Fundraising department in MERCY Malaysia. She has been the Advisor for the MERCY Malaysia's Annual Fundraising Dinner for the past five years. Raja Riza Shazmin has been involved in local missions to Belum, Perak and Johor as well as international missions to Aceh, Yogyakarta, Nias, Maldives and Myanmar. In 2014 she was appointed a trustee of MERCY Malaysia UK (MMUK).

She was admitted as an Advocate and Solicitor of the High Court of Malaya in January 2000. She obtained her Diploma in Syariah Legal Practice (DSLPL) from International Islamic University Malaysia in 2002 and earned her Certificate in Legal Practice (CLP) from Brickfields College in 1998. She received her Honours Degree in Law from University of Glamorgan, Wales, and United Kingdom in 1997.

ABOUT US //

## MERCY MALAYSIA EXECUTIVE COUNCIL



**Dr. Hariyati Shahrma Abdul Majid**  
*Assistant Honorary Secretary*

Dr. Hariyati Shahrma Abdul Majid is an academician at the Department of Psychology, Kulliyyah of Islamic Revealed Knowledge and Human Sciences, International Islamic University Malaysia (IIUM).

In December 2004, she joined MERCY Malaysia as a volunteer, where she was deployed to Sri Lanka after the Indian Ocean Tsunami. She was elected to her current role as the Assistant Honorary Secretary in 2011. She has been deployed to both local and international missions including Kashmir, Jogjakarta, Myanmar, Somalia, and the Philippines with her psychosocial team to help develop the capacity of local communities with related psychological intervention. She currently leads the psychosocial team in Ormoc, Philippines after Typhoon Haiyan and is also providing psychosocial support to those affected by the MH 370, MH17 and Air Asia QZ 8501 incidents. Dr. Hariyati had served different administrative roles in International Islamic University of Malaysia (IIUM) including Head of Department and Deputy Dean. Her latest post is Director of Office of Industrial Links and Community Relations Division. She is a life member of MERCY Malaysia, the American Psychological Association and the Malaysia Diabetes Educators Society. She obtained her PhD in Psychology (Health) in 2001 and MSc in Applied Psychology from the University of Surrey in the UK (1996) and her BSc, in Psychology at the University of Wisconsin Madison in the USA in 1992.



**Ir. Amran Mahzan**  
*Honorary Treasurer*

Ir. Amran Mahzan was elected the Honorary Treasurer of MERCY Malaysia in 2006. He is currently the Senior Manager, Projects at Kemuncak Facilities Management (KFM) Projects Sdn Bhd. At KFM Projects, Ir. Amran specialises in High Performance Green Building and High Performance Workplace development and is now involved in major High Performance Green Building retrofitting work for the Government of Malaysia. Ir. Amran began his involvement with MERCY Malaysia as a technical volunteer for Mission No 8 to Afghanistan in 2002. There, he assisted in repair and upgrading works for MERCY Malaysia's Health Centre in Spin Boldak. He was also part of the assessment team that entered Kandahar to gauge the possibility of working in Afghanistan.

Involved with MERCY Malaysia throughout the organisation's formative years, Ir. Amran initially actively participated in many fund-raising and awareness programmes for MERCY Malaysia, setting the precedent for the highly successful Annual Fundraising Dinners. He has been deployed on missions to Aceh, Pakistan and Sudan. He has also been involved with the Drug Rehabilitation Programme conducted in 2003 by MERCY Malaysia.

Ir. Amran graduated from the University of Malaya with a Bachelor's degree in Electrical Engineering. He holds a Masters in Business Administration (Construction Business) from the International Islamic University, Malaysia. He is a registered professional with the Board of Engineers, Malaysia and a Member of the Institute of Engineers Malaysia. He is a certified Project Manager Professional from PMI. In 2014, Amran was appointed to the Board of Trustees for MERCY Malaysia UK (MMUK).



ABOUT US //

## MERCY MALAYSIA EXECUTIVE COUNCIL



**Assoc. Prof. Dr. Shalimar Abdullah**  
*Committee Member*

Assoc. Prof. Dr. Shalimar Abdullah joined MERCY Malaysia as a volunteer in 1999 and was co-opted into the Executive Council in 2005. She is a specialist surgeon in the Department of Orthopaedics at Hospital Universiti Kebangsaan Malaysia. She is a Medical Advisor for MERCY Malaysia and functions as the Team Lead for the Emergency Response Unit (ERU). She was involved in international missions to Afghanistan, Cambodia, Pakistan, Yogyakarta, Japan and Philippines. Assoc. Prof. Dr. Shalimar holds the post of Secretary in the Malaysian Society for Surgery of the Hand (MSSH), and received her Fellowship in Hand Surgery from Kleinert Institute, Louisville, USA in 2010. She earned her master's degree in Orthopaedic Surgery from Universiti Kebangsaan Malaysia in 2005. She received her bachelor of Medical Sciences in 1995 and her bachelor of Surgery in 1998 from University of Nottingham Medical School, United Kingdom.



**Mr Sam Tee Kam Bee**  
*Committee Member*

Tee Is the owner of Uncle Button Clown Supplies & has been in the industry for 20 years. He joined MERCY Malaysia in 2004 as a life member and volunteer. His first assignment was in Bam, Iran after the 2003 December earthquake. He partnered with a psychologist by using his skills in entertaining ie: Clowning & ballooning to bring humour as a form of therapy. He was engaged in several missions such as the Indian Ocean Tsunami, Pakistan, Sichuan, Taiwan and the floods in the east coast of Malaysia. Tee is a S.E.A Regional Director for World Clown Association (WCA) as well as the president for Association of Clowns Malaysia ( WCA ). He is also a member of Clown of America International (COAI) and International Fellowship of Christian Magician. He is frequently invited to lecture, facilitate, and perform in the US, Taiwan, Singapore, India and many other parts of Asia. He shares the vision of volunteerism while using his special skills to partner with mission organisations to engage with the young and old in order to alleviate suffering through the power of joy and laughter. He loves his job and his motto for life is: 'A Happy HEART, Does good like a Medicine'

ABOUT US //

## MERCY MALAYSIA EXECUTIVE COUNCIL



**Ar. Mohamad Ayof Bin Bajuri**  
*Committee Member*

Ar. Mohamad Ayof Bin Bajuri is currently an Architect at RMA Design Team Sdn. Bhd and a registered professional with Board of Architect Malaysia (LAM). He was elected to the Executive Council of MERCY Malaysia in 2014.

His involvement with MERCY Malaysia began as a technical team volunteer in 2003. He has been involved in many international missions, including in Pakistan, Myanmar, Aceh, Nias, Jogjakarta, Sri Lanka, Philippines. Locally Ar Mohamad Ayof was involved with the recent floods on the east coast. He has worked with many consultants in designing, constructing and coordinating for the building of new schools, houses as well as public utilities.

Ar. Mohamad Ayof graduated from Universiti Teknologi Malaysia with a Bachelor of Architecture in 1994. Today, he sits at the Board of Directors of RMA Design Team Sdn. Bhd. and runs a successful architecture firm in Kuala Lumpur.



**Dr. Jitendra Kumar S. N. Tejani**  
*Ex Officio*

Dr Jitendra Kumar S.N. Tejani is a renowned private General Practitioner in Pulau Pinang, practising for over 20 years. He first volunteered for MERCY Malaysia in 2004 in the Indian Ocean Tsunami response. He has been an Executive Council member for MERCY Malaysia since 2011. Locally, Dr Jitendra has contributed his medical expertise to Borneo, Perak and the recent floods in Kelantan. Internationally, he has been deployed for missions that include Sri Lanka, Indonesia, Pakistan, Turkey, Jordan and Philippines. His passion for volunteerism has also inspired his children who are also registered volunteers in MERCY Malaysia. He earned his Bachelor of Medicine and Surgery (MBBS) at University Malaya in 1979. He is a past Vice President of the Medical Society, a member of the Rotary Club and has been the President of the Rotary Club of Tanjong Bungah for the past 21 years.

ABOUT US //

## MERCY MALAYSIA EXECUTIVE COUNCIL



**Mr. Harmandar Singh**  
*Ex Officio*

Harmandar Singh, or better known as Ham, has been in marketing and brand communications for more than 30 years. He has created more than 400 commercials and won over 50 local and international creative awards.

In 1980, Mr Ham received his Higher Group Diploma in Marketing in London and in 2007, he pursued his Master in Business Administration in the University of London.

Since then he has shaped major contribution to the marketing industry as the founder and organiser of the Malaysian Media Conference, Malaysia Chief Marketing Officers (CMO) Conference, and the Creative All-Stars Conference.

Mr Ham served as a columnist for the national newspaper for more than 11 years as a highly respected commentator on marketing and brand communications under the pen-name SLEDGEHAMMER to over a million readers every week.

Mr Ham joined MERCY Malaysia in 2014 as an Executive Council Member while also holding other positions such as the Director of Product of the Year in Malaysia, Singapore and Indonesia. He has made tremendous contributions to MERCY Malaysia with his marketing expertise to help raise funds to support our humanitarian aid.

His extensive work in the marketing world has won him the Association of Accredited Advertising Agents (4As) Malaysia inaugural Chairman's Award for making significant landmark contributions to Malaysia's brand and marketing industry over the past decade.

To this day, website articles and magazines published by his company is read by over 35,000 professionals across Malaysia, Singapore and Indonesia.



**Assoc. Prof. Dr. Mohammad Iqbal bin Omar**  
*Ex Officio*

Assoc. Prof. Dr. Mohammad Iqbal bin Omar @ Ye Htut, is an Associate Professor of School of Mechatronic Engineering, Universiti Malaysia Perlis (UniMAP).

He joined MERCY Malaysia in 2006 as a volunteer for a monthly Health Clinic that was held in Kg Jawa, Klang for Rohingya refugees clusters in collaboration with UNHCR. Since then he has volunteered in various projects with MERCY Malaysia. Even before volunteering with MERCY Malaysia, he has provided his services to other organisations since the 1990's to aid affected communities.

His abilities has contributed to the effectiveness of our projects that included humanitarian assistance to health needs assessments, as well as health programmes that was organized in Pakistan, Myanmar, Indonesia, Japan, Libya, Somalia, Syria, Bosnia and of course in our very own country, Malaysia.

In 2012, he participated in UNHCR's dialogue on Refugee Protection that was held in Geneva, Switzerland. Assoc.Prof. Dr Iqbal has a profound background in the medical field and has devoted a tremendous amount of his time to providing medical aid to those affected by disasters or conflict.

After completing his MBBS in 1985, he spent 3 years in Clinical Research Unit for Cerebral and Complicated Malaria, Department of Medical Research, Yangon, Myanmar. Before joining University Malaysia Perlis, he spent most of his professional career as a Medical Officer in various hospitals and institutes. In 2004, he received his Master in Medicine from Edith Cowan University, Australia, specialising in Geriatric Medicine.

ABOUT US ////////////////

## MERCY MALAYSIA EXECUTIVE COUNCIL



**Dr. Mohamed Ashraff Bin Mohd Ariff**  
*Ex Officio*

Dr. Mohamed Ashraff Bin Mohd Ariff is currently the Trauma and Orthopedic surgeon subspecializing in Arthroplasty based in Universiti Kebangsaan Malaysia Medical Center (UKMMC).

He joined MERCY Malaysia as an Ex Officio member in 2014, contributing his medical expertise to MERCY Malaysia.

He graduated with a Bachelor of Medicine and Bachelor of Surgery (MB ChB) from University of Otago, New Zealand. While studying in New Zealand he also gained some professional medical experience working in several different surgical disciplines. The 9 years he spent studying and working in New Zealand has developed a sense of awareness and awakening him towards civic responsibility and social welfare, arousing his interest and decision of supporting humanitarian causes. During the infamous Typhoon Haiyan that hit the Philippines, Dr. Mohamed Ashraff Bin Mohd served under MERCY Malaysia as an orthopedic surgeon in 2014 providing medical aid to those affected.

He then returned to Malaysia working and training as orthopedic medical officer in Hospital Kuala Lumpur for 7 years.

Dr. Mohamed Ashraff Bin Mohd Ariff furthered his studies at Universiti Kebangsaan Malaysia (UKM) obtaining a Masters of Surgery (Orthopaedics) and graduated as an Orthopedic Surgeon and Traumatologist. He was posted to Hospital Batu Pahat as a clinical specialist before settling in Universiti Kebangsaan Malaysia Medical Center (UKMMC) as a Traumatology and Orthopedic Surgeon.



**Dr Norzila Mohamed Zainudin**  
*Ex Officio*

Dr. Norzila Mohamed Zainudin is a Senior Consultant Paediatrician and Paediatric Respiratory Physician of the Respiratory Unit and Paediatric Institute of Hospital Kuala Lumpur.

She holds a Master's Degree in Medicine in Paediatrics from Universiti Kebangsaan Malaysia in 1985, and an AM (Malaysia) in 1999. She also went through subspecialty training in Paediatric Respiratory.

In MERCY Malaysia, Dr. Norzila Mohamed is one of the Ex-Officio Members and dedicated time and expertise to serve the affected community. She provided medical services for MERCY Malaysia and gone for medical mission in Syria in 2013 and late 2014.

In Ministry of Health, the respectable Dr. Norzila Mohamed Zainudin is the head of Paediatric Respiratory Service. Aside from that, she is also the member of Paediatric Respiratory Subspecialty Board, a Board Member of Lung Foundation Malaysia since 2013. She is also active as a Committee Member of Hati Nurani – Wife of Honorable Deputy Prime Minister and was involved in the construction of School in Hospital Project (Sekolah Dalam Hospital) in Malaysia.

Previously she has voluntarily worked with Mercy Mission 15 on mission to Azad Kashmir from the 24th of December, 2005 until the 6th of January 2006, serving as a medical volunteer.



ABOUT US //

## TREASURER'S REPORT

### FINANCIAL STATEMENTS

The Executive Committees of the Association are responsible for the preparation and fair presentation of these financial statements in accordance with Malaysian Financial Reporting Standards, International Financial Reporting Standards and Society Act, 1966 in Malaysia. This responsibility includes: designing, implementing and maintaining internal control relevant to the preparation of financial statements that are free from material misstatement, whether due to fraud or error; selecting and applying appropriate policies; and making accounting estimates that are reasonable in the circumstances.

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

### FINANCIAL PERFORMANCE

MERCY Malaysia improved the annual donation income in 2014 by 35% or RM5.8 million compared to previous year. Total income received was RM23.1 million made up of RM22.6 million from donations and the remaining RM0.5 million was received from other sources mainly income earned from fixed deposits and placements. Chart 2 indicates the breakdown of donations by sectors.

There has been an increase of RM6.8 million from RM12.6 million in 2013 on the donations received for restricted funds. However there was a decrease of receipt for unrestricted funds amounted to RM3.1 million as compared to RM4.1 million in 2013. Restricted funds are donations received for a particular country or project whereby, unrestricted fund shall allow MERCY Malaysia to act fast during emergency phase of a disaster and also to support the operations costs.

Donations from each sector, in terms of the percentage of donation income is shown in *Table 1*. *Chart 2* shows the total donation income received in 2013 and 2014.

### CHARITABLE EXPENDITURE

MERCY Malaysia has spent RM12.6 million on Charitable Expenditure in 2014 and is shown in *Table 2*. By end of 2014, MERCY Malaysia has conducted more than 30 programs, projects and activities both local and overseas.

As our main focus, the medical relief and sustainable health-related development projects and programs remain a priority. This was translated to a spending of 65% of the total charitable expenditure or equivalent to RM8.2 million spent on healthcare and health related projects and programs. The illustration of the breakdown of Charitable Expenditure for year 2014 is shown in *Chart 3*.

### OPERATIONAL EXPENDITURE

MERCY Malaysia's operating expenditure has registered a slight increase from RM2.7 million in 2013 to RM3.2 million in 2014 which also includes the fund raising expenditure of 2% of the total donations received. Other main operating expenditure was contributed by the employment cost, in line with the support required to undertake the various projects, programs and activities, both local and overseas.

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 have worked with us throughout the year.



**IR. AMRAN MAHZAN, PMP**  
*Honorary Treasurer*

ABOUT US ////////////////

## FINANCIAL REVIEW

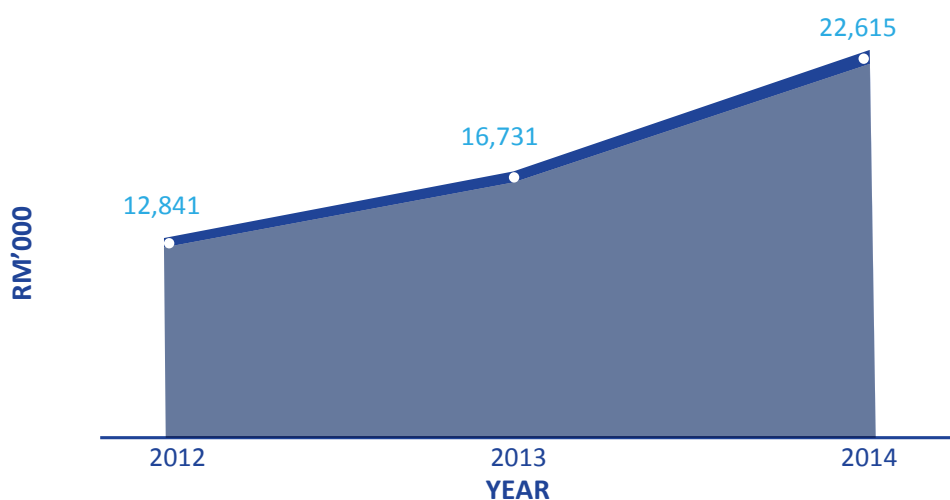
**TABLE 1 : SOURCE OF DONATIONS BY SECTOR 2014**

	2014 RM	Percentage
Private Sector	10,077,158	45%
Public	4,896,916	22%
Other NGOs	2,874,196	13%
International Organisations	550,361	2%
Malaysian Government	3,246,309	14%
Other Country Government	970,052	4%
	22,614,992	100%

**TABLE 2 : HOW WE SPENT (TOTAL CHARITABLE EXPENDITURE)**

	2014 RM	Percentage
Healthcare & Health Related	8,195,753	65%
Education	1,788,632	14%
Disaster Preparedness	1,191,453	9%
Shelter	244,327	2%
Food Relief	538,398	4%
Water, Sanitation & Hygiene (WASH)	655,825	5%
	12,614,388	100%

**Chart 1 : Total Income Received (3-Year Comparison)**



ABOUT US ////////////////

## FINANCIAL REVIEW

Chart 2 : Donation Received By Sector

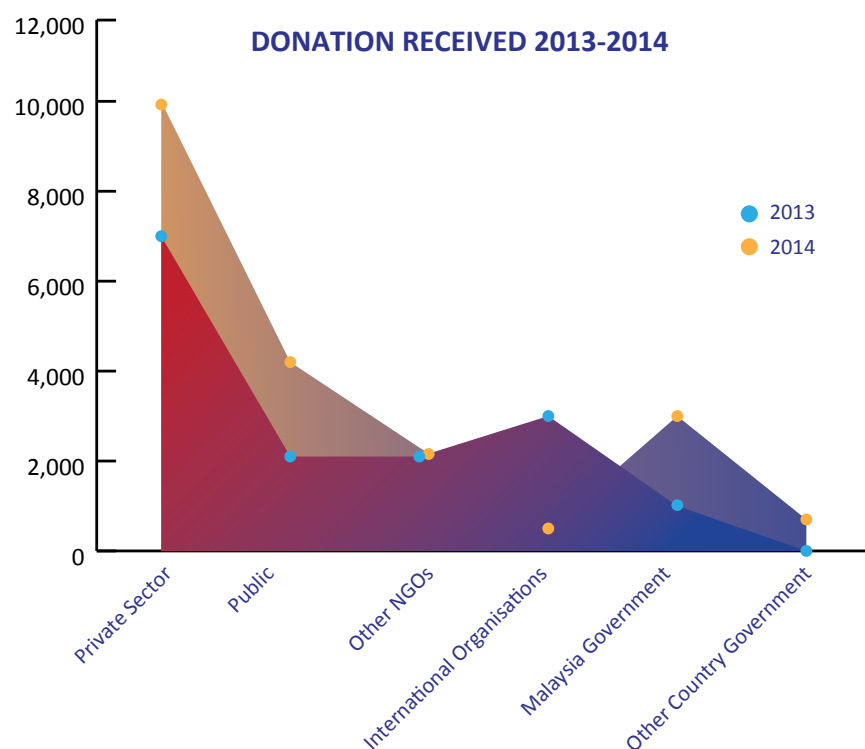
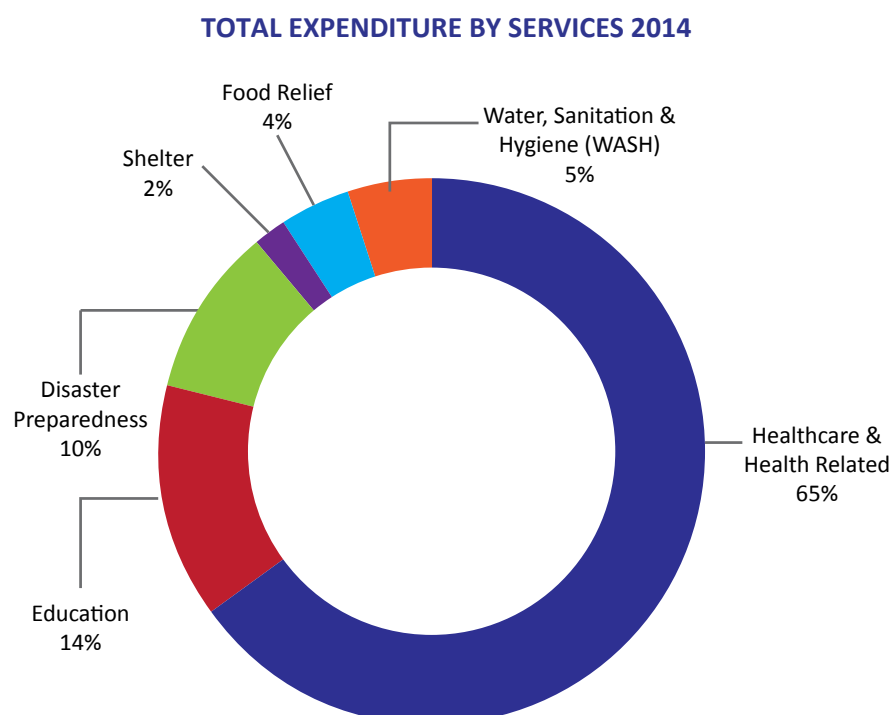


Chart 3 : Total Charitable Expenditure by Services for 2014









## Our Work **MALAYSIA**

MERCY Malaysia provided support and services to local communities through sustainable health and risk reduction projects in 2014.



## EMERGENCY RESPONSE FOR THE MALAYSIAN EAST COAST FLOODS

### Project

Emergency Flood Response

### Objectives

To provide immediate relief items and medical services to those affected by the devastating floods

### Project Partners

- Majlis Keselamatan Negara (MKN)
- Jabatan Pertahanan Awam Malaysia (JPAM)
- Ibu Pejabat Polis Kontingen (IPK)
- Jabatan Kebajikan Masyarakat
- District Health Office
- Khazanah National Berhad (KNB)
- Maybank Foundation
- Yayasan Sime Darby
- Air Asia Foundation
- Exxon Mobile
- Prudential

### Activities

- Conducted Mobile Clinics
- Distributed Hygiene Kits
- Supplied food and Non-Food Items

### Location

Kelantan, Terengganu & Perak

### Period

December 2014

### Accomplishments

- Mobile Clinic served a total of 658 patients
- 5,026 Hygiene Kits were distributed to the beneficiaries
- Delivered food parcels to 49,078 beneficiaries
- Supplied 7,000 litres of fuel for electricity in Kelantan
- 85 mattresses distributed in Perak

### Background

Peninsular Malaysia suffered from one of the worst floods in recent history during the last two weeks of 2014. A record number of 232,913 evacuees were registered in various evacuation centres across Peninsular Malaysia (as of 29 December 2014). However, the actual number of those affected is believed to be higher as numerous people were unable to reach evacuation centres and several evacuation centres were unregistered. The worst hit states were Kelantan, Pahang and Terengganu, followed by Perak and Johor.

As of 29th December 2014, Kelantan recorded 160,000 registered evacuees, followed by Pahang with 33,225, Terengganu with 31,820, Perak with 7,540 and Johor with 328 evacuees.

MERCY Malaysia responded to the flood in several areas, namely, Kelantan (Pasir Mas, Tanah Merah and Rantau Panjang) and Terengganu (Kemaman and Hulu Terengganu), as well as in Bota, Perak. The first phase of response was the deployment of needs assessment teams to Pasir Mas in Kelantan, Hulu Terengganu and Kemaman in Terengganu and Bota in Perak respectively as situations became critical. These teams, consisting of MERCY Malaysia staff, medical volunteers and logisticians, conducted rapid needs assessments of the situation to identify emergency response assistance required.

### MERCY Malaysia efforts

In response, MERCY Malaysia in coordination with several partners provided food aid, distributed hygiene kits and carried out several Primary Mobile Health Clinics simultaneously in the districts of Kelantan. Around four hundred MERCY Malaysia volunteers, partners and donors took part in the flood operations.

The mobile clinics provided immediate and primary health care for those affected. Patients were treated for a number of problems, such as wounds, illnesses and diseases. However, several severe cases were referred to the nearest hospital, such as pregnant mothers. Patients who suffer from diabetes or hypertension were provided with prescribed medications to continue their treatment. The clinics were mobile, moving from remote areas to stranded populations. The clinics were staffed with MERCY Malaysia volunteer doctors and nurses. The clinics were also stocked with a range of medications and technical equipment.



Several villages that are only accessible by 4-wheel-drive transportation network have been destroyed. Here in Kemubu, Kelantan the railway track had been badly damaged.

OUR WORK - MALAYSIA //



Health-Related Development



Crisis Response



Health - Post Emergency



Disaster Risk Reduction

## KUALA LUMPUR

**Project**

Vaccination Clinic for the Myanmar Community

**Objectives**

To provide free vaccination services for children of the Myanmar community (aged below 18) who have not received their full course of vaccinations

**Project Partner(s)**

Yayasan Nanyang Press &amp; UNHCR

**Activities**

7 stations were opened in the vaccination process as follows:

- Registration
- Triage
- Consultation
- Vaccination
- Pharmacy
- Data Collection
- Feedback collection

**Location**

HELP Learning Centre, Kepong

**Period**

January 2014 to June 2014

**Accomplishments**

We managed to run 5 vaccination sessions in 6 months:-

- 15th January 2014.
- 12th February 2014.
- 19th March 2014.
- 23rd April 2014.
- 18th June 2014.

In the 5 sessions, 120 students received a total of 338 vaccinations

On January 12th 2014, MERCY Malaysia's programme officers conducted an information session for the parents of the students on the importance of vaccination. The purpose was to ensure that the parents of the students were fully informed on our programme and that written consent was acquired.



Dr. Premala assessing and prescribing vaccines for the patient

### Background

HELP Community Learning Centre was set up in April, 2009 in Metro Prima, Kepong. It is a school for Myanmar (Burmese) refugee children. There are 120 students aged 5 to 16 in the centre. The centre is focused on helping the students further their education in order to aid them in their future endeavours. The centre also educates the students to not only sustain themselves but break the cycle of poverty and vulnerability.

### MERCY Malaysia efforts

In collaboration with Yayasan Nanyang Press and UNHCR, the target beneficiaries for this vaccination clinic are children of the Myanmar (Burmese) community (aged below 18) who have not received their full course of vaccinations.





## KUALA LUMPUR

### Project

Psychosocial First Aid & Mental Health support to MAS staff & crew

### Objectives

To provide psychological and mental health assistance to Malaysia Airlines

### Project Partner(s)

Malaysia Airlines

### Activities

- Reaching out and helping those affected by the distressing air disaster incident with humane, supportive and practical assistance
- Education sessions on signs and symptoms of stress and the effects of stress on psychological and physical wellbeing
- Relaxation techniques were also shared with participants

### Location

KLIA & Marriot Hotel

### Period

29th & 30th April 2014

### Accomplishments

50 MAS staff including pilots, management staff, MAS volunteers and cabin crew benefited from programme

### Background

Malaysia Airlines Flight 370 (MH370/MAS370) was a scheduled international passenger flight bound for Beijing, China, that disappeared on Saturday, 8th March 2014 upon departing from the Kuala Lumpur International Airport. Analysis of communications between the aircraft and Inmarsat by multiple agencies has concluded that the flight ended in the southern Indian Ocean. A multinational search effort was launched and has become the largest and most expensive in history.

### MERCY Malaysia efforts

MERCY Malaysia reached out to MAS employers who were affected, providing humane, supportive and practical help. There was a wide range of reactions and feelings from beneficiaries especially those who had worked closely with those on board. Executive Council Member, Dr Hariyati Shahrina Abdul Majid who is also an Assistant Professor at the Department of Psychology, Kuliyyah of Islamic Revealed Knowledge and Human Sciences, International Islamic University Malaysia (IIUM), led the assistance from MERCY Malaysia. We also had volunteers who aided with security at a space reserved for staff which is located at the KLIA Flight Management building.





## KUALA LUMPUR

### Project

Training of Trainers for TB Awareness Program for Myanmarase Refugees and Persons of Concern

### Objectives

To enhance the training skills of MERCY Malaysia volunteer trainers

### Project Partner(s)

- IPR
- UNHCR
- MAPTB

### Activities

Information Session on:

- What is Tuberculosis?
- Sign & Symptoms of active TB
- Diagnosis of TB
- Prevention of spread of TB
- Treatment of TB
- TB in children
- Psychosocial aspects of TB
- Reducing the stigma through awareness raising

### Location

Dewan Angkasa, IPR Jalan Pahang

### Period

August 2014

### Accomplishments

80 volunteers participated in the programme

### Background

Tuberculosis (TB) is one of the world's top health challenges with 9 million new cases and caused nearly 1.5 million deaths each year. Approximately one third of these 9 million cases of TB are not captured by the health system. Among those missed are those most vulnerable to TB: people living with HIV/AIDS, migrants, refugees and internally displaced persons, miners, ethnic minorities and indigenous populations.

### MERCY Malaysia efforts

Promoting the use of primary health care and early treatment for TB affected populations and including them in TB-controlled programmes will reduce the need for costly emergency care .



## PERAK

### Project

Outreach Clinic Program

### Objectives

- To reduce the spread of communicable diseases
- Increasing the general wellbeing of the community
- To complement current services provided by Pejabat Kesihatan Daerah Hulu Perak for the Orang Asli community

### Project Partners

Pfizer

### Activities

- Nutrition and Hygiene Talk
- Health Screening (Adult)
- Health Screening (Children)
- Head Lice Treatment
- Distribution of hygiene kits.
- Health Education – hypertension
- Talk on Dental Hygiene
- Psychosocial Activities

### Location

Kampung Sungai Tiang, Ipoh, Perak

### Period

March & August 2014

### Accomplishments

1. Bridging and reducing the gap between urban and rural community in terms of access to healthcare
2. Increased awareness on public health among the rural communities in Sungai Tiang
3. The total attendance of both missions were as follows:
  - Health Screening for Adults: 106
  - Health Screening for Children: 108
  - Head Lice Treatment: 100
  - Psychosocial Activities: 50

### Background

MERCY Malaysia and Pfizer jointly conducted an outreach programme in Kampung Sungai Tiang on the 26th to 28 March and 15th to 17th August 2014. The programme were aimed at reducing the spread of communicable diseases and increasing the general wellbeing of the community by raising the community's awareness on the importance of personal healthcare and basic hygiene practices. Pfizer's Humanitarian Grant enables MERCY Malaysia to provide basic dental treatment, health awareness and promotion to the Orang Asli community in Sungai Tiang, supporting the Government of Malaysia's efforts to uplift their standard of living. Therefore, the best way to further reduce this gap is through the implementation of outreach clinics.

### MERCY Malaysia efforts

Based on the assessment and discussion amongst team members, MERCY Malaysia believed that there was a need to combine two programmes in order to address the problems that plagued the community of Kampung Sungai Tiang. Hence, MERCY Malaysia combined the Dental Outreach Clinic with the Health Awareness Programme in Kampung Sungai Tiang.

The team of MERCY Malaysia and Pfizer volunteers conducted a dental clinic and held an oral health awareness programme with the community. The oral health awareness programme focused on encouraging the members of the community to maintain good oral hygiene practices via a demonstration on teeth brushing exercise.

Volunteers from previous visits to Kampung Sungai Tiang noticed that many of the children suffered from head lice infestation. In order to address this issue, Pfizer and MERCY Malaysia took the opportunity to conduct head lice treatment activity with the children. The team helped to wash the children's hair with "Lice Clear" (head lice medication) and provided each of them with an extra bottle of "Lice Clear" and a lice comb for them to use at home.

MERCY Malaysia and Pfizer also conducted a health screening exercise and held psychosocial sessions with the community.



Dental services by MERCY Malaysia dentists



Children undergoing de-licing treatment by the river



## SELANGOR

### Project

Vaccination Clinic for Refugee Children

### Objectives

To provide Myanmar (Burmese) under 18 in Klang Valley areas access to the following vaccinations:

- Hepatitis B (10) & Hepatitis B (20)
- Diphtheria, Pertussis & Tetanus + Polio (DPT + IPV)
- Haemophilus Influenza B (Hib)
- Measles, Mumps & Rubella (MMR)
- BCG

### Project Partner(s)

Nanyang Foundation

### Activities

Conducted 12 vaccination clinics in refugee schools located in Ampang and Selayang

### Location

Klang Valley areas

### Period

September 2014 to October 2015

### Accomplishments

- Provided the children with immunization services
- Beneficiaries will have access to healthcare
- Reduction in mortality and morbidity rates among the targeted beneficiaries

### Background

MERCY Malaysia has been working closely with UNHCR since 2007 to deliver medical assistance to Myanmar refugees living in Malaysia. This project was established in order to address the challenges they face in Malaysia, specifically in terms of healthcare access and provision.

In July 2010 to December 2011, in collaboration with UNHCR and the Czech Republic, MERCY Malaysia started a vaccination programme for Myanmar refugees living in the Ampang-Cheras and Selayang areas. Our target beneficiaries for this vaccination clinic are children of the Myanmar community (aged below 18) who have not received their full course of vaccinations.

In 2012, MERCY Malaysia remained as the only provider of free vaccination services to the Myanmar community in the Klang Valley area. UNHCR had requested for us to continue the provision of these services in refugee schools in the Klang Valley area to decrease the incidence of disease exacerbated by cramped and overpopulated urban living conditions.

### MERCY Malaysia efforts

At the vaccination clinics, the on-site teachers were recruited as translators to help with the dissemination of information and instructions to the children and parents. It is hoped that with this effort, the community will be able to gain control over the factors and decisions towards their health. Indirectly, they will be able to improve their health markers and build capacity to advocate for the betterment of their community.

Through this grant, Yayasan Nanyang Press and MERCY Malaysia was able to cover approximately 912 vaccinations to two refugee schools in the Klang Valley.

OUR WORK - MALAYSIA //



Health-Related Development



Crisis Response



Health - Post Emergency



Disaster Risk Reduction

## TERENGGANU

### Project

Flood Response

### Objectives

Assessment of flood situation & organisation of relief operations

### Activities

- Set up of a Child-Friendly-Space (CFS)
- Conducted assessments of the level of damage in the affected areas

### Location

Kuala Terengganu

### Period

21st November – 23rd December 2014

### Accomplishments

Distributed 1,000 Hygiene Kits in Hulu Terengganu

### Background

Days of torrential rain caused severe flooding in several parts of Kuala Terengganu, displacing 3,000 people from their homes into evacuation centres. The severe floods destroyed homes, infrastructure and road networks.

### MERCY Malaysia efforts

In response to the continued rainfall, MERCY Malaysia deployed a team to Kuala Terengganu to assess the flood situation and assist local authorities with relief operations.

A new addition to the assistance for children that was provided during the 'emergency response' by MERCY Malaysia was the set-up of a Child-Friendly Space (CFS) at SK Kompleks in Gong Badak, Terengganu. The objective of CFS is to provide children with a safe and fun environment where they could receive psychosocial assistance and express their creativity. Activities such as story telling were conducted with the children to assess the levels of Post Traumatic Stress Disorder (PTSD). Upon assessment, the MERCY Malaysia volunteer team then provided the children with support to work through their condition. CFS also provided a safe space for children to play and rest, away from the crowd in the evacuation centres.



The severe rains caused major flooding of roads in Gong Badak, Terengganu, leaving people stranded



Hundreds of people in Terengganu had to be evacuated by boat as their homes were flooded



MERCY Malaysia staff Syah Qurratu Aini Sahrani leads a story telling activity with children in Gong Badak, Terengganu to assess Post Traumatic Stress Syndrom (PTSD) of children



MERCY Malaysia Emergency Response team leader Azril Abdul Manaf in discussion with Deputy Minister of Home Affairs, Datuk Dr. Wan Junaidi Tuanku Jaafar on the damage caused by the floods in Terengganu





## SABAH

### Project

Salt Trail: Trek & Treat, Crocker Range National Park

### Objectives

- To provide basic medical care, dental care, eye screening and pap smear tests
- To perform medical follow-up on patients seen and treated previously
- To promote responsible eco-tourism, enjoy nature and create awareness on the importance of the environment

### Project Partner(s)

- Sabah Parks
- PACOS Trust
- UMW Holdings Berhad

### Activities

- Provided basic medical care, dental care, eye screening and pap smear tests
- Performed medical follow-up on patients seen and treated previously
- Promoted responsible eco-tourism, enjoy nature and create awareness on importance of the environment

### Location

Crocker Range National Park

### Period

22nd April – 26th April 2014

### Accomplishments

Served a total of 581 beneficiaries

### Background

MERCY Malaysia successfully completed its 10th 'Trek and Treat' Mission. The programme lasted for five days; from the 22nd to 26th April. The mission was co-organized by MERCY Malaysia with Sabah Parks and Partners of Community Organizations in Sabah (PACOS) Trust. The project was funded by UMW Holdings Berhad.

### MERCY Malaysia efforts

The objectives of the mission were to provide health screening for women as well as basic medical and dental care to villages along the trail, provide medical follow up to previous treatment, promote responsible eco-tourism by giving the opportunity for volunteers to enjoy Mother Nature and create awareness on the importance of the environment among the public.

The mission involved 48 volunteers including 20 from MERCY Malaysia and 28 from Sabah Parks. The team trekked through primary jungle and across no less than eight rivers, with the highest point of the route standing at 1,320 metres and the lowest point measuring 220 metres above sea level. A total of 581 beneficiaries from villages along the route benefitted from the mission.



The team successfully completed the Salt Trail 'Trek & Treat' Mission, Crocker Range.



## SABAH

### Project

Health Programme in the Communities of Kg Sonsogon Magandai, Kota Marudu

### Objectives

- To provide basic medical screening
- To provide dental treatment
- To perform pap smear tests
- To provide eye screening for reading glasses
- To give hygiene talk
- To distribute hygiene kits

### Project Partner(s)

UMW Malaysia

### Activities

- Provided basic medical screening
- Dental treatment and performed pap smear tests
- Provided eye screening for reading glasses
- Hygiene kits were distributed
- Hygiene talks were given to the villagers

### Location

Kg Sonsogon Magandai, Kg Sonsogon Paliu, Kg Sonsogon Monggis

### Period

4th July – 6th July 2014

### Accomplishments

Served a total of 216 beneficiaries

### Background

Kota Marudu is a town and district located in the Kudat Division in the state of Sabah, Malaysia. The district covers approximately 1,917 square kilometres. It is located in the north of Sabah and is bordered by the districts of Kudat, Kota Belud, Pitas, and Beluran. It is located 130km north of the state capital, Kota Kinabalu, along the federal highway linking Kota Kinabalu with the town of Kudat, near the northern tip of Borneo.

### MERCY Malaysia efforts

#### Mission No. 5

On the 4th of July 2014, MERCY Malaysia conducted a community health project in Kg. Sonsogon Magandai in collaboration with UMW. 27 volunteers were involved in this project, including 2 volunteers from UMW Malaysia, carrying out various health programs namely dental treatments, medical and eye screenings at the village. 2 volunteers from MERCY Malaysia Sabah Chapter, Mr Hew and Dr Collin discussed a whole range of health issues with the children, including the importance of staying in school while also providing small child-friendly space to keep the children entertained.

216 villagers registered for treatment during this project, with 35 boys and 39 girls, below the age of 13 and 60 men and 82 women at the age of 13 years and above. Besides medical and dental treatments, 7 women at the village underwent Pap smear test while the distribution of medication for deworming purposes was carried out to most of the children there. Distribution of Hygiene Kits and the delivery of Hygiene talks were also conducted by our team to the beneficiaries in Kg. Sonsogon Magandai to further educate the villagers on the importance of proper hygiene care.

OUR WORK - MALAYSIA //



Health-Related Development



Crisis Response



Health - Post Emergency



Disaster Risk Reduction

## SABAH

**Project**

Intervention Group for Alcohol Misuse (IGAM)

**Objectives**

To develop grass root leaders who have the capacity to organise community based alcohol intervention program in their respective locality

**Project Partner(s)**

Sabah Health Department

**Activities**

- Workshop on substance abuse
- A forum which focused on alcohol intervention needs and issues at the grass root level

**Location**

Sabah

**Period**

May 2014

**Accomplishments**

60 participants attended the event



Motivational Interview by Dr Sivakumar, a consultant psychiatrist



IGAM Committee and participants of IGAM workshop

### Background

Alcohol misuse in Sabah continues to be an alarming problem in the category of substance abuse as it is easily available and culturally acceptable. Thus, the Intervention Group for Alcohol Misuse (IGAM) under MERCY Malaysia Sabah Chapter together with Sabah Health Department conducted a workshop on the 10th May 2014 as an initiative to cater to this problem.

### MERCY Malaysia efforts

The objective of the workshop was to develop grass root leaders who would have the capacity to organise community based alcohol intervention program in their respective locality. These potential leaders were provided with published resources materials and financial aid to conduct alcohol intervention programmes in their respective villages.

Participants who attended the workshop acknowledged the programme as helpful and provided a meaningful experience in combating alcohol misuse. They have also suggested to organize more training to induce capacity development for alcohol intervention in other places in Sabah.

OUR WORK - MALAYSIA //



Health-Related Development



Crisis Response



Health - Post Emergency



Disaster Risk Reduction

## SABAH

### Project

Medical & Nature expedition

### Objectives

To provide essential medical and hygienic treatment and kits to the villagers

### Project Partner(s)

Sabah Parks and PACOS Trust Organisation

### Activities

The team provided free:

- Medical & dental screening
- Treatment
- Health education
- Distribution of reading glasses and hygiene kit

### Location

- Kg. Longkogungan
- Kg. Kalangaan
- Kg. Pongobonon

### Period

19th till 22nd February 2014

### Accomplishments

The four-day and three-night expedition had benefited 300 villagers along the trail.



Flag-off by Dr Helen B Lasimbang of MERCY Malaysia, Dr Jamil Nais of Sabah Parks and Anne Lasimbang of PACOS Trust, at the start of the expedition



Participants of the medical and nature expedition

## Background

The medical and nature expedition to three villages; Kg. Longkogungan, Kg. Kelangaan and Kg. Pongobonon, located at the Crocker Range along the Salt Trail brought much needed medical services delivery to the villagers. The Salt Trail is a route traditionally followed by the villagers and remains as the only access route to the remote villagers in the Park.

## MERCY Malaysia efforts

There were 13 volunteers from MERCY Malaysia, comprising of medical professionals and also 18 participants from Sabah Parks and 3 participants from PACOS Trust who took part in this expedition. 300 villagers benefited from the expedition, which brought much required medical services.





## SABAH

### Project

Outreach Clinic Program – 5 villages

### Objectives

- To provide basic medical screening
- To provide dental treatment
- To perform pap smear test
- To conduct eye screening for adults
- To provide health education

### Project Partner(s)

Hospital Sultan Haji Ahmad Shah (HOSHAS) Temerloh, Pahang

### Activities

- Conducted basic medical screening
- Provided dental treatment
- Pap smear test
- Eye screening for adults
- Health education

### Location

Kinabatang district:

- Kg. Inarad
- Kg. Langga
- Kg. Likowon
- Kg. Tudungin
- Kg. Bandari

### Period

23rd to 25th May 2014

### Accomplishments

The medical team treated a total of 357 beneficiaries from five villages

### Background

Since 2003, MERCY Malaysia operated mobile clinics in the remote areas of Sabah with limited access to healthcare services. MERCY Malaysia worked with Hospital Sultan Haji Ahmad Shah (HOSHAS) Termeloh, Pahang to conduct a mobile clinic for the villagers. This was the 5th Outreach clinic mission in Sabah.

### MERCY Malaysia efforts

MERCY Malaysia deployed a medical team to the Kinabatangan district for an eight-day mission in May 2014. A talk was given to the villagers to raise the awareness on the importance of hygiene. Hygiene kits were distributed by the volunteers to the beneficiaries. A total number of 357 beneficiaries were treated by the medical team during the programme. This was the first time that the HOSHAS team partnered with MERCY Malaysia for a medical mission in the remote village. They hope to engage in similar activities and programmes initiated by MERCY Malaysia in the future.



Student receiving vaccination shots



The triage counter where each patient's temperature and weight was taken before each patient moved on to the consultation table



## SARAWAK

### Project

Distribution of Hygiene Kits

### Objectives

To provide necessary hygiene items to those affected by the longhouse fire

### Project Partner(s)

Brands Outlet Boulevard, MAA (Shomos) & Limetree Hotel Kuching

### Activities

Distributed hygiene kits and other in-kind items received from kind donors

### Location

Ng Sumpa Longhouse, Sarawak

### Period

May 2014

### Accomplishments

Distributed:

- 36 hygiene kits
- 8 bags of used clothes
- New kitchen utensils
- 11 boxes of new shirts



Ng Sumpa Batang Ai's condition after fire incursion



Ng Sumpa Batang Ai's condition after fire incursion

## Background

The 36-door longhouse at Ng Sumpa caught fire on 13th May 2014, leaving 120 beneficiaries homeless. MERCY Malaysia Sarawak Chapter responded to the ill-fated event by distributing hygiene kits. The hygiene kits distributed contained bath soap, cleaning detergent, shampoo, toothbrush, toothpaste, towel, sarong, pails, water scoop and clothes brush. Other items distributed to the affected families included 8 bags of used clothes, new plates, bowls, cups, mugs, spoon and forks donated in-kind by donors.

## MERCY Malaysia efforts

MERCY Malaysia received heart-warming in-kind donations from Brands Outlets Boulevard Branch, MAA (Shomos) and Limetree Hotel Kuching that were distributed to those affected by the fire. The affected families were accommodated in a temporary stay while some lived with their relatives nearby. The aftermath of the catastrophic event destroyed their belongings as well as their harvest for the year.

OUR WORK - MALAYSIA //



Health-Related Development



Crisis Response



Health - Post Emergency



Disaster Risk Reduction

## SARAWAK

**Project**

Hygiene Kit Distribution

**Objectives**

To provide essential personal hygiene items to families affected by the floods

**Project Partner(s)**

CIMB Foundation

**Activities**

Distribution of hygiene kits

**Location**

Sarawak

- Long Atip
- Long Wat
- Long Bemang
- Long Buang in Ulu Baram
- Long Panai, Marudi

**Period**

January and February 2014

**Accomplishments**

Distribution of 681 hygiene kits

**Background**

An overnight downpour caused flash floods in major towns and cities in the state of Sarawak in late December, 2013. According to The Star online, the rainfall that evening exceeded the 181 mm amount that Kuching received in the whole month of July that year.

**MERCY Malaysia efforts**

In Ulu Baram, Sarawak from 8th till 11th January 2014, a group of volunteers from MERCY Malaysia's Sarawak chapter successfully responded to the floods with the distribution of 481 hygiene kits sponsored by CIMB Foundation to the affected communities of Kayan and Penan in the villages of Long Atip, Long Wat, Long Bemang and Long Buang in Ulu Baram, Sarawak.

On the 8th to 11th February 2014, the Sarawak Chapter mission delivered the second batch of humanitarian aid to 200 hygiene kits to those affected by the floods in Long Panai, Long Pahlo and Long Ukok in Marudi.



Beneficiaries queuing up to collect their hygiene kits.



Items included in the hygiene kit.



## SARAWAK

### Project

Outreach Clinic

### Objectives

- To increase public health awareness among rural communities and Orang Asli.
- To increase awareness on reproductive health
- To promote the importance of maintaining good personal hygiene
- To introduce oral health treatments to the rural communities

### Project Partner(s)

UMW Corporation Sdn Bhd

### Activities

- Basic medical screening
- Dental treatment
- Pap smear test and breast examination
- Eye screening for adults
- Conducted health & hygiene education sessions
- Distributed hygiene kits
- Provided BMI-BP-Cholesterol-Blood Glucose Test
- Conducted talks and demonstration on First Aid Kit
- Counselling sessions

### Location

- Kg Mongkos
- Long Bemang, Ulu Baram
- Sungai Asap, Balaga
- Kg Buduk Nur, Ba'kalalan

### Period

- 15th February 2014
- 2nd to 5th May 2014
- 13th to 16th September 2014
- 4th to 6th December 2014

### Accomplishments

For all four missions, the total number of beneficiaries that received aid as well as the number of patients served at each category were as follows:

- Medical: 1,207 patients
- Dental: 372 patients
- Pap Smear: 199 women
- Hygiene Kits: 1,350 families
- Reading Glasses: 443 persons
- School Kit: 300 students

### Background

This partnership with UMW through the UMW Humanitarian Grant enabled MERCY Malaysia to provide vital health services which included primary health care services and health screening.

MERCY Malaysia provided the above services to remote communities and 'Orang Asli' in Sarawak, complementing the Government of Malaysia's efforts to uplift their health and living standards. Therefore, the best way to further reduce this gap is through the implementation of outreach clinics. Outreach clinics are an integral part of the health care safety-net for vulnerable populations in remote areas. The definition for 'outreach clinic' varies from one project to another project; however, under the Humanitarian grant, the outreach clinic provides health services to rural population groups. Eligible outreach clinics are required to provide medical care, reproductive health, dental care, eye care, health talk, hygiene promotion and fire risks reduction programmes.

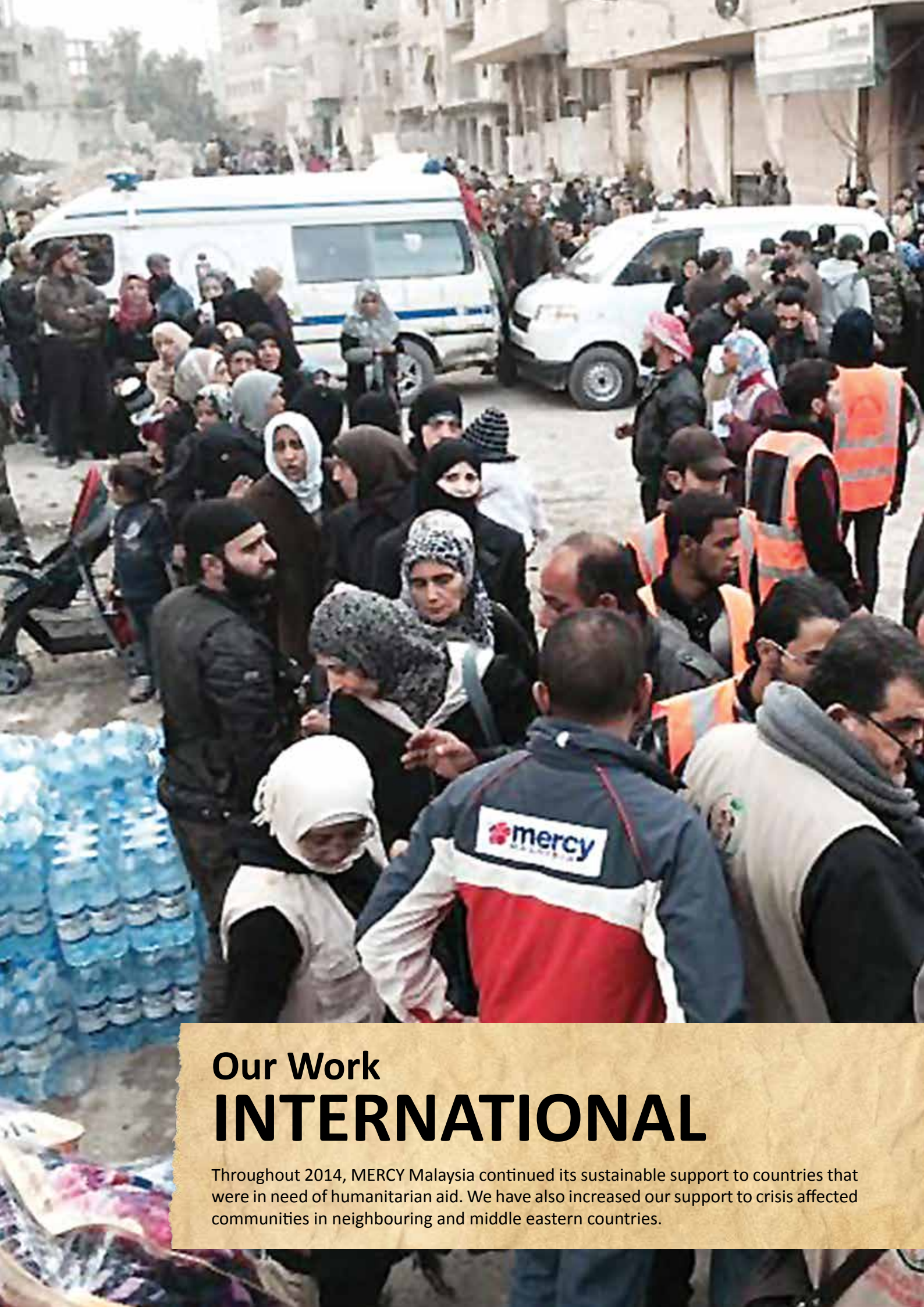
### MERCY Malaysia efforts

MERCY Malaysia aimed to increase public health awareness among rural communities and Orang Asli. Through continuous outreach clinics and health education sessions, the community has managed to maintain and improve their health conditions. Rural communities now realised that they could seek medical treatment when they fall ill. Most importantly, through the referral system, the communities understand that chronic diseases could be controlled or cured if they follow the advice provided by their healthcare professionals and take their medications diligently. On reproductive health, more female beneficiaries became conscious on having regular breast screening and Pap smear test. They are now aware of the risks of breast cancer and cervical cancer. Many of the rural communities have no access to oral health services. MERCY Malaysia, through the generous support from the UMW Humanitarian Grant has successfully introduced oral health treatments to rural communities.



Health screening during a medical and dental treatment programme in Ba'kalalan, Sarawak





## Our Work **INTERNATIONAL**

Throughout 2014, MERCY Malaysia continued its sustainable support to countries that were in need of humanitarian aid. We have also increased our support to crisis affected communities in neighbouring and middle eastern countries.



## AFGHANISTAN

### Project

Comprehensive Health Centre (CHC)

### Objectives

- Enable access to maternal health services.
- Increase availability and accessibility to complete health care services.
- Enable access to lab services for effective detection of communicable diseases
- Provide access to child and maternal immunization
- Increase awareness of health and family planning
- Provide health care services in disaster situations
- Reduce child mortality and morbidity rates by 19% in catchment area
- Provide a standardized basic package health services (BPHS)

### Activities

- Reproductive health (Mother and Child Health)
- Child health and immunization
- Mental health
- Primary Health Care

### Location

District #3, Kandahar, Afghanistan

### Period

1 year (11th year of operation)

### Accomplishments

- 23,499 patients receive care in MERCY Malaysia's CHC
- 2100 mothers receive antenatal care
- 17,772 children and women received immunization shots

### Background

MERCY Malaysia has been working in Afghanistan since 2001 providing medical relief and health programmes. MERCY Malaysia has established the Comprehensive Health Centre (CHC) in District 3, Kandahar in 2003 and has ever since continued its operation there. District 3 has a population size of 45,549. There are also informal settlements near the CHC whose settlers benefit from the CHC services.

### MERCY Malaysia efforts

In 2014, 23,499 benefitted from MERCY Malaysia's health services. MERCY Malaysia, through the CHC, has been providing services such as primary health care, maternal child health, expanded program on immunization, nutrition as well as laboratory services. Throughout MERCY Malaysia's operation, there has been improvement in overall understanding and acceptance to health services. MERCY Malaysia has seen an increase from 5% to 11% delivery in health facility from 2013 to 2014. The vaccine coverage has also increased from 30% to 70%.

MERCY Malaysia focused on the nutrition status of children that visits the CHC to ensure improvement in overall well being. All children under 5 that visited the CHC went through a nutritional screening and those with severe malnutrition were given ready to use food (RTUF) to improve their nutritional status.





## AFGHANISTAN

**Project**

MERCY Little Caliph (MLC)

**Objectives**

- To provide children aged between 5 and 10 with preschool education
- To ensure all children enrolled received immunization

**Activities**

- Classes for Pashtu, English, Dari, Mathematics, and Islamic studies for 6 days a week
- Vaccination programme

**Location**

District #3, Kandahar, Afghanistan

**Period**

1 year (since 2005)

**Accomplishments**

39 students graduated from the MERCY Little Caliph

### Background

MERCY Little Caliph provides pre-school education for those aged children between 5 and 10, to both girls and boys to provide them with pre-school education and to prepare them for school. Located in the MERCY Malaysia's Comprehensive Health Clinic building, the school caters to 30 to 60 children annually, providing them with basic language, mathematic skills and also Islamic studies. The syllabus has been approved by the Department of Education. The programme also provides these children with vaccination and daily meal supplements. The programme has been ongoing since October 2004.

### MERCY Malaysia efforts

In total, 281 children have graduated from MERCY Little Caliph since 2005. In 2014, there were 39 students that have graduated from MERCY Little Caliph. 34 students is currently studying in the centre.

OUR WORK - INTERNATIONAL //



Health-Related Development



Crisis Response



Health - Post Emergency



Disaster Risk Reduction

## BOSNIA

### Project

Flood Disaster Appeal & Assessment

### Objectives

To monitor and revitalise medical services for communities affected by the flood

### Project Partner(s)

the Sun Daily and Berjaya Group

### Activities

- Conduct needs assessment
- Identifying the affected areas that requires recovery and reconstruction
- Providing supplies and manpower to local hospitals and health centres in order to increase their capacity

### Location

Bosnia-Herzegovina

### Period

May 2014 – June 2015

### Accomplishments

Delivered medical equipment to Polyclinic Doboj and Maglaj

rehabilitate and re-equip two Bosnian hospitals in the town of Doboj and Maglaj, which were badly damaged by the floodwaters.



Ng handing over the mock cheque to Dato' Dr Ahmad Faizal along with the Sun Media Corporation financial controller, Ricky Ng and our Executive Director, Ahmad Faezal Mohamed.



The MERCY Malaysia team and hospital's staff unloading the items donated by MERCY Malaysia

## Background

Heavy rainfall in mid-May 2014 resulted in extensive flooding in Serbia, Bosnia-Herzegovina and Croatia. According to the International Federation of Red Cross and Red Crescent Societies' report, Bosnia-Herzegovina had more than 3,000 landslides that were triggered by the widespread and relentless rains. Over a million people were affected by the floods that resulted in 30 recorded casualties. 90,000 people were displaced by the tragedy and 75,000 houses were hit, of which 25,000 were severely damaged or destroyed.

## MERCY Malaysia efforts

The flooding and landslides caused extensive damage to livelihoods, health and water sanitation facilities. MERCY Malaysia's team comprised of a medical doctor, a quantity surveyor and volunteers were deployed to Bosnia on 1st June 2014. The team performed a needs assessment and provided assistance to the affected communities by increasing the capacity of health facilities through the replenishment of medical supplies and equipment.

The Sun Daily and MERCY Malaysia collaborated to raise funds to provide humanitarian aid to those affected by the floods. The Sun launched the Bosnia Flood Disaster Relief Fund and successfully raised a total of RM 1,128,911, which was then handed over to MERCY Malaysia. The funds was used to



Debris from aftermath of the flood





## CAMBODIA

### Project

Increase capacity and Oral Rehabilitation Therapy corner at Angkor Hospital for Children

### Objectives

To increase the capacity of Angkor Hospital for Children in providing medical care to the children of Angkor

### Project Partner(s)

Angkor Hospital for Children (AHC)

### Activities

- Donated medical equipment such as ventilators, incubators and refrigerated centrifuge
- Employed a local nurse and two trained OPD family service assistants. Their employment is to ensure that there was enough support to complete the Oral Rehydration Therapy (ORT) work.

### Location

Siem Reap, Cambodia

### Period

April 2014

### Accomplishments

Served a total of:

- 166,781 OPD patients
- 583 Neonate patients
- 1,057 ICU patients

### Background

MERCY Malaysia deployed mission members to AHC to provide medical assistance since 2004. In 2005, MERCY Malaysia funded an Oral Rehydration Therapy (ORT) corner at the outpatient department in Angkor Hospital for Children and continues to support the project until today. ORT corner is a project established to treat mild dehydration or diarrhoea. Angkor Hospital for Children invited MERCY Malaysia to the opening of its outpatient services department on 28th April 2014.

### MERCY Malaysia efforts

Over the years in support of the hospital, MERCY Malaysia had donated medical equipments such as ventilator, incubator and refrigerated centrifuge to Angkor Hospital for Children. Apart from medical equipment donations, MERCY Malaysia also employed local people; a nurse and two trained OPD family service assistants. Their employment was to ensure that they had enough support to complete the ORT work.



Medical equipment donated by MERCY Malaysia at the AHC



Inauguration of the Outpatient Department at Angkor Hospital for Children attended by H.E. Mam Buheng, Minister of Health



## INDONESIA

### Project

MERCY Malaysia 10th Year Commemorative of the Indian Ocean Tsunami

### Objectives

- To train volunteers to conduct hazard mapping exercise (through School Watching) and awareness raising activities in schools
- To train volunteers as trainers to other teachers and students in school
- To understand the level of resilience of the beneficiaries in Aceh at the current of time after the disaster which will be determined through Disaster Risk Reduction activities to the selected beneficiaries
- To increase the awareness of disaster risk reduction among community

### Activities

- School Preparedness Training of Trainers (SPToT)
- Disaster Education at Akademi Perawat
- School Preparedness Programme at SMU Lhoknga
- Disaster Education at UNSYIAH Kuala

### Location

Aceh, Indonesia

### Period

December 2014

### Accomplishments

- Awareness gained as per above activities
- Almost 96% of students were satisfied with these trainings as they have new knowledge about disaster preparedness especially on hazard mapping in the school area, grab bag, climate change and also awareness campaign.

### Background

Indonesia, located in the “ring of fire” world geography, has the largest number of active volcanoes in the world. The Ring of Fire geography area is the result of the movement and interaction of the earth’s plates. It is the home of one of the most active volcanoes on Earth, with most of them located on the rings’ eastern edge. On the 26th December 2014, an undersea earthquake with a magnitude of 9 on the Richter scale occurred near the northern Indonesian island of Sumatra. It was the strongest earthquake in the world since the last 40 years. The epicentre of the earthquake was located about 250 km south-southwest of the Indonesian city of Banda Aceh. The undersea earthquake that triggered the tsunami as reported by the media resulted in at least 155,000 fatalities, 500,000 injuries and damages that exceeded \$10 billion in cost. It was estimated that more than 5 million people had lost their homes and had limited access to food and clean water during the disaster. The Indian Ocean Tsunami travelled as far as 3,000 miles, affecting several countries including Malaysia, Sri Lanka, Maldives, India as well as parts of the African continent.

### MERCY Malaysia efforts

The year 2014 marked the 10th year commemoration of the Indian Ocean Tsunami that had claimed thousands of lives. As a remembrance of the tragedy, MERCY Malaysia organized activities to understand the level of resilience of the beneficiaries in Aceh 10 years post the tsunami disaster.

MERCY Malaysia conducted a Disaster Risk Reduction training to provide an opportunity for school students to identify the risks and capacities at their school areas. This was a very good simulation exercise in the form of a field activity that prepared them for future disasters.



## IRAQ

### Project

Winter kit distribution

### Objectives

To provide appropriate winter clothing for the Internally Displaced People (IDPs) of the Kurdish Region

### Project Partner(s)

Help The Needy

### Activities

- Conducted needs assessments
- Identified the urgent needs for winter kits, hygiene kits and water tanks

### Location

- Sulaymaniah City
- Dokan
- Rabarin
- Arbat

### Period

November 2014

### Accomplishments

- Distributed winter kits to 400 registered families (1,742 people)
- Distributed 180 hygiene kits
- Purchased a 5,000 litre water tank and two ready-made toilets for IDPs living in host communities

kits, hygiene kits, water tanks and proper toilets as hundreds of IDPs were living in makeshift host communities, using wood to keep warm and boil water – which was in scarce supply. In Sulaymaniyah, Arbat and Dokan, 400 registered families (1,742 people) were given winter kits consisting of four blankets and one gas heater in each kit. In Arbat and Dokan, MERCY Malaysia distributed 180 hygiene kits, each kit covering a family of four people. In Arbat only, MERCY Malaysia purchased a 5,000 litre water tank and two ready-made toilets for IDPs living in host communities.

The needs assessment highlighted the serious situation many IDPs were living in and the great need for humanitarian assistance. Iraq remains as a high security country, however in partnership with local actors such as Help The Needy, MERCY Malaysia was able to gain access to a large percentage of the affected community. It is MERCY Malaysia's goal to continue assisting Iraqi IDPs as much as possible.



MERCY Malaysia's regional director Tuan Hj. Norazam Ab Samah and Head of VMD Shah Fiesal Hussain distributing blankets as part of winterisation kits to Iraqi IDP beneficiaries in Sulaymaniyah City

## Background

MERCY Malaysia's Regional Director Tuan Hj. Norazam Ab Samah and Head of Volunteer Management Department, Shah Fiesal Hussain travelled to the Kurdish Region in Iraq to conduct a needs assessment of the Iraqi Internally Displaced People (IDPs). Violent conflict since June 2014 between armed opposition groups (including the Islamic State of Iraq and Levant (ISIL)) and government forces have displaced over 1.8 million people.

In the Kurdish region alone, there are 480,000 IDPs who were in desperate need of winter kits, hygiene supplies, medical relief and shelter. Winter season temperatures in the Kurdish region can range from 5°C to as low as -16°C in mountainous areas.

## MERCY Malaysia efforts

The MERCY Malaysia team together with local partners, Help The Needy (a United Kingdom registered charity) travelled to Sulamanyiah City, Dokan, Rabarin and Arbat to conduct need assessments. The team identified an urgent need for winter



Head of VMD Shah Fiesal Hussain with Iraqi IDP children who have been staying in schools in Arbat



## MYANMAR

### Project

Cleft Lip and Palate Project (CLIPP)

### Objectives

To improve the appearance and function of palate patients with or without facial formalities

### Project Partner(s)

Sitagu Ayudana Hospital, Sagaing, Mandalay

### Activities

- Educating parents/caregivers on the management of children/patients post surgery
- Monitoring patients post surgery to inhibit or reduce incidences of post-anaesthesia complications
- Educating families on the symptoms of cleft lip and palate heredity connection

### Location

Sitagu Ayudana Hospital, Sagaing, Mandalay

### Period

21st to 29th June 2014

### Accomplishments

The oral maxilla-facial team operated on 50 cleft lip and palate patients within 8 days, and without any post-operative complications

perform a spinal block on a patient as a Continuing Medical Education (CME) programme for the local anaesthetists. The session presented as a good opportunity for the MERCY Malaysia team to build trust and rapport not only with the hospital staff but also with the local population. All surgeries went well with no post-operative complications.



## Background

The main objective of this mission is to provide free reconstructive cleft lip and palate to underprivileged children with cleft lip and deformities in Mandalay, Myanmar. This mission also focused on health education with regards to nutrition intake, oral hygiene, post-operative education, and speech functions for caregivers.

## MERCY Malaysia efforts

MERCY Malaysia team has successfully conducted a second mission of Cleft Lip and Palate (CLIPP) surgery project to underprivileged children with cleft lip and/or palate deformities in Mandalay, Myanmar from 21 – 29 June 2014. During the 8-day mission in Sitagu Ayudana Hospital, Myanmar, the oral maxilla-facial team operated on 50 cleft lip and palate patients (with or without facial deformities) to improve appearance and function.

The team was well accepted by the local community as one of the team members is a native to Myanmar. At the conclusion on the mission day, the local hospital medical superintendent requested for MERCY Malaysia volunteer anaesthetist to





## MYANMAR

### Project

Mobile Clinics in Sittwe Rakhine

### Objectives

To increase access towards medical services for Internally Displaced Persons in Rakhine State

### Project Partner(s)

Myanmar Health Assistant Association

### Activities

- Primary health care services in rural health centres in the camps
- Construction of Rural Health Centre
- Renovation of camp clinic
- Donation of medicine to the State Health Department
- 2013 March polio catch up campaign/Extended Program for Immunization services

### Location

Sittwe, Rakhine, Myanmar

### Period

January 2014 to December 2014

### Accomplishments

- All mobile clinics and static clinics served an average of 4,968 patients a month
- A total of 59,626 patients were treated in the year 2014

malaise, vomiting, sneezing and cough. An acute viral infection is characterized by a rapid onset of disease, often causing little or no clinical symptoms and typically observed with pathogens such as influenza virus and rhinovirus.

- 9% of patients experienced acute respiratory tract infection.
- Patients that required further attention were sent to Da Paing Emergency Hospital, Thet Kel Pyin RHC Centre, and Sittwe General Hospital.



At Ohn Taw Gyi Camp Clinic



Baw Dhu Pha Camp Clinic



At Set Yone Sue Camp.  
Our medical team wearing MOH vest for security measures

## Background

Since 2012 MERCY Malaysia teams have served the affected and displaced communities of the inter-communal riots. The expulsion of the INGOs, UN agencies and foreign aid workers in Sittwe on April 2014 has caused shortages in health services in terms of manpower, medical supply as well as transportation.

## MERCY Malaysia efforts

Despite the tensions, MERCY Malaysia teams from Rakhine continued their healthcare services to the IDP camps in partnership with the Myanmar Health Assistant Association. Due to the gap in the delivery of healthcare services to the local communities, the operation was conducted in a rotation basis in order to serve all camps. Mobile clinic services was scheduled on dates that was determined by the State Health Department which was held once every a week.

### Findings

- 11% of patients complained about general weakness of tiredness, insomnia, loss of appetite or muscle cramps.
- 10% suffered from viral infections that caused fever,



## MYANMAR

### Project

Construction of Thet Kel Pyin Rural Health Centre

### Objectives

- To provide primary health care services to the affected population.
- To reduce health morbidity and mortality of the affected community.
- To strengthen the health surveillance system.
- To provide healthcare referrals of seriously ill patients.

### Activities

- Negotiation with health authorities to obtain a site for the construction of the health centre
- Development of design and approval of the health centre
- Engaging with contractors
- Progress monitoring and reporting
- Completion and final inspection

### Location

Thet Kel Pyin Village, Sittwe Rakhine, Myanmar

### Period

August 2013 to March 2014

### Accomplishments

The following facilities were built:

- Emergency room
- Delivery room
- Out Patient Department
- Referral to Sittwe General Hospital
- Two units of staff quarters
- Water tank with ground water supply

### Background

Rakhine State is one of the least developed parts of Myanmar and is characterized by high population density, malnutrition, poverty and natural hazards. The conflict in Rakhine State which started in early June 2012 and again in October 2012 that was followed by a series of protests and riots have caused displacement of the affected population, loss of lives and livelihoods. By August 2013, it was estimated that more than 176,000 people are in need of assistance and out of 140,000 IDPs only 79,000 had been relocated. There are about 95,372 IDPs in Sittwe, an increase of 35% from last year. Although new resettlement villages had been built, there is still a lack of health facility in both health infrastructure and medical professionals.

Thet Kel Pyin is a town that is not directly affected by the conflict and provided easy access to surrounding areas where the number of displaced persons (IDPs) is ever increasing.

Additionally, villagers staying around the area due to prolonged segregation were displaced due to economic reasons.

### MERCY Malaysia efforts

In October 2012, MERCY Malaysia sent an assessment team to visit Sittwe together with Dr. Than Tun Aung, the State Health Director of Rakhine State Health Department. The outcome of this partnership and assessment has enabled MERCY Malaysia to build a rural health centre in Thet Kel Pyin village. The majority Muslim community was not affected during the conflict. There were private taxis and rickshaws providing public transportation for easy access to surrounding villages and IDP camps. There is a school in operation, unlike other villages, where schools remain closed as teachers were unwilling to enter the villages for security reasons.

The local Health Authority identified the village for the development of a rural health centre and offered MERCY Malaysia with the opportunity of taking on the construction of the project – enabling participation of the villagers who had provided a piece of land at the edge of the town close to IDP camps. It is an ideal location for a well-planned rural health centre. MERCY Malaysia has constructed 13 health facilities including the Sub-rural Health Centre, Rural Health Centre, Station Hospital and Township Hospital in the Cyclone Nargis-affected areas. MERCY Malaysia's design of the Sub-rural Health Centre has been included in the national guideline of reconstruction of health centres.



OUR WORK - INTERNATIONAL //



Health-Related Development



Crisis Response



Health - Post Emergency



Disaster Risk Reduction

## PALESTINE

**Project**

Clean Water Project

**Objectives**

To supply clean drinking water

**Project Partner(s)**

Palestinian Orphanage Organisation

**Activities**

- Installation of water barrels
- Transport of water from central supply to the orphanage
- Use of water tank trucks to fill barrels

**Location**

Al Salah Orphanage, Gaza

**Period**

October 2014

**Accomplishments**

Installed a one month supply of clean drinking water to the children in the Al Salah Orphanage

### Background

MERCY Malaysia collaborated with the Palestinian Orphanage Organisation in Gaza to supply one month of clean drinking water. The infrastructure in Gaza had been badly damaged over the years due to violent hostilities with Israel. The orphanage did not have permanent water source. It is crucial however to provide the children with safe drinking water to ensure the sustainability of their education and maintenance of good health.

### MERCY Malaysia efforts

Thanks to the kind donations of the people of Malaysia, MERCY Malaysia was able to financially support the orphanage for one month. MERCY Malaysia financed the installation of water barrels at the school in a previous project. MERCY Malaysia was able to finance the transportation of water from the central supply to the orphanage for one month during the early recovery phase while the original water source was being fixed.



Water barrels provided by MERCY Malaysia



MERCY Malaysia's Regional Director, Tuan Hj. Norazam Ab Samah filling up the water barrels.



Water tank trucks providing water to fill the barrels





## PALESTINE

### Project

Emergency Response for the affected population in the Gaza Strip

### Objectives

To address the immediate needs of the conflict-affected population in the recent crisis

### Project Partner(s)

- United Nations Relief and Works Agency (UNRWA)
- Ministry of Health, Gaza
- Emaar Society

### Activities

1. Procurement of Emergency Medical Supplies
  - A total of USD \$300,000 worth of emergency needs procured in Gaza.
2. Emergency Food Parcel
  - 445 food parcels of water and essential food items such as dates, bread and flour were distributed by Emaar Society
3. Emergency Psychosocial Intervention
  - Visits to children, orphans and widows were conducted in hospitals in Gaza to provide them with emergency psychosocial intervention by Emaar Society

### Location

Gaza Strip, Palestine

### Period

July 2014

### Accomplishments

- Through our field office in Gaza, MERCY Malaysia was able to identify the immediate needs of the people and offered support to the conflict-affected population.
- The intervention occurred in a timely manner; exactly in its needed and required time, as people were really in need for food aid, medical supplies and psychosocial intervention.
- Emaar succeeded in reaching the target group (poor families, most of them live in the border areas, and affected by the war) and handed them food aid to relieve their suffering

been confirmed by reports from the United Nations as well as the mass media. A 72-hour ceasefire was observed from 5th August to 8th August 2014. No agreement was reached for a further extension or a more permanent arrangement and the attacks resumed shortly after the expiration of the ceasefire.

As of 8:00 AM local Gaza time on August 8th, 2014, there were a total of 1,992 Palestinian casualties reported. 73% of which were civilians of whom 31% were children and 17% were women. 9,806 Palestinians, including 2,979 children and 1,903 women had been injured. It was estimated that at least 65,000 people had their homes destroyed. The Gaza Power Plant was hit by an Israeli airstrike on 29th July 2014 that devastated water and sanitation facilities throughout Gaza and caused limited access to water to the majority of the population.

### MERCY Malaysia efforts

In response to "Operation Protective Edge" in 2014, MERCY Malaysia responded immediately. MERCY Malaysia mobilized its response team to the Gaza Strip to coordinate its relief efforts and assess the needs on the ground.

On 19th July 2014, a 2-person team procured, packed and delivered 4,000 emergency food parcels to Gaza residents. Each emergency food parcel contained a variety of ready to eat items and other dried goods that were essential for the beneficiaries' daily nutritional sustenance. They were distributed to the most vulnerable communities through a partnership with the United Nations Relief and Works Agency (UNRWA), Tkiet Um Ali and Emaar Society.

On 25th July 2014, supplies were obtained from a medical supplier in Cairo and loaded onto trucks which travelled with a convoy (16 trucks) of other various relief aid organisations. The suppliers reached the Rafah border and managed to be transferred over to the Gaza side after a few hours of negotiation with the authorities. Additional supplies worth of USD 90,000 were procured by the Ministry of Health, Gaza through MERCY Malaysia.

### Background

On 7th July 2014, the Israel army launched "Operation Protective Edge" which was a large military operation in the Gaza Strip. The objective of the operation was to target and destroy the military infrastructure of armed groups in the Gaza Strip. However, MERCY Malaysia's representative in the Gaza Strip, Dr Khamis Ellessi, reported that private and public structures such as civilian homes, schools and shops were targeted throughout the operation. This information has also



OUR WORK - INTERNATIONAL /////



Health-Related Development



Crisis Response



Health - Post Emergency



Disaster Risk Reduction

## PALESTINE



Food distribution programme implemented by Emaar Society for MERCY Malaysia



Emaar team conducted a house to house visit. The psychosocial program focused on helping the beneficiaries cope with the conflict whilst increasing their resilience.



Emaar member conversing with one of the patients





## PALESTINE

### Project

Psychological Support Program – 6th Year

### Objectives

- Working on improving the psychosocial wellbeing of children.
- Raising families' awareness on dealing with their children's psychosocial wellbeing.
- Enhancing the psychological and counseling support for the community.
- Increasing interaction and community participation in supporting the wellbeing of children.
- Follow up on children requiring advanced treatments.

### Project Partner(s)

Emaar Association for Development & Rehabilitation (Emaar Association).

### Activities

- Your Confident Counselor Program
- Family Support Program
- Comprehensive Psychological Services Program
- Audiology & Speech Therapy Unit

### Location

Khanyounis, Gaza , Palestine

### Period

1st July 2014 to 30th June 2015

### Accomplishments

Total number of PSP beneficiaries for the year 2014 exceeded 5,323

### Background

For the 6th year running, the psychological support program had addressed the need of the communities in the southern governorates by adopting a community response approach. This program not only met the need of the community with psychological issues, but also helped build the capacities of school counsellors in alleviating the suffering of Palestinian families and children.

### MERCY Malaysia efforts

The Psychological Support Program (PSP) has proved to be a successful and affective approach in addressing the psychological needs of the people in the southern governorates, especially school and kindergarten children. In addition, trainings were conducted to build the capacity of school counselors and teachers in solving students psychological problems.

There were four main activities implemented in the PSP, namely;

#### • Your Confident Counselor Program

This programme targeted 2,969 schoolchildren in 8 governmental schools in Khanyounis Governorates. Activities were conducted by the school teachers/ counsellors trained by Emaar.

#### • Family Support Program

1,231 individuals from marginalized areas in the southern governorates benefited from this programme through a focus group discussion.

#### • Comprehensive Psychological Services Program

The Comprehensive Psychological Services Programme had more than 534 beneficiaries. This programme served the beneficiaries in 4 sub- activities: Counselling sessions, Follow up sessions, and Intelligence tests.

#### • Audiology & Speech Therapy Unit

This program consists of 8 different sub-activities and the total number of beneficiaries of Audiology and Speech Therapy Unit during the 2nd quarter of the 6th year was 589.



Your Confident Counsellor Program



Comprehensive Psychological Services Program



## PALESTINE

**Project**

El Wafa Outreach Medical Rehabilitation Project

**Objectives**

Improving the quality of life and promoting the re-integration of physically disabled community in the southern province of the Gaza Strip (Rafah)

**Project Partner(s)**

El Wafa Medical Rehabilitation Hospital

**Activities**

Providing professional specialized medical rehabilitation services to clients with sustained injuries or physical disabilities

**Location**

Rafah City, South of Gaza Strip, Palestine

**Period**

15th May 2014 to 14th May 2015

**Accomplishments**

Conducted 10,946 therapeutic sessions of 620 cases with injuries or physical disabilities

**Background**

The total number of physically disabled people in Gaza strip is nearly 20,000 while in Rafah governorate alone, there was 2,500 disabled people. Rafah is bordered by the Israeli-Egyptian borderline, whereby it was exposed to a systematic Israeli military campaign and assaults where many houses and trees were destroyed and left many Palestinians homeless and jobless. There was a critical need for medical rehabilitation.

**MERCY Malaysia efforts**

The El Wafa outreach project aimed to improve the quality of life and promote the re-integration of physically disabled community in the southern province of the Gaza Strip (Rafah) by providing them with professional specialized medical rehabilitation services. In order to achieve this goal, El-Wafa outreach rehabilitation staff in Rafah City continued identification, assessment, treatment and follow up of the affected community based on individualized care plans.

Our rehabilitation staff managed to deliver physiotherapy, occupational therapy and nursing care (10,946 therapeutic sessions) for 620 cases with injuries or physical disabilities. 154 out of 620 cases showed progress and were re-integrated into the community. In order to support the outreach medical rehabilitation project's efficacy and effectiveness, 31 assistive devices were provided to our patients. Our rehabilitation staff utilized caregiver education strategy to 1,089 individuals who received training about patient care and post discharge follow-ups in the community. MERCY Malaysia managed to hold two recreational days full of activities in which eighty individuals attended. The overall number of beneficiaries reached totalled 4,484 individuals.





## PHILIPPINES

### Project

Mother & Child Healthcare

Water, Sanitation & Hygiene (WASH) Program

### Objectives

- To upgrade the water system in Libungan Toreta
- Improve the efficiency of the system and replace worn out parts
- Improving the health and lives of Internally Displaced People (IDP)
- Provide Maternal Child Health in Cotabato Sanitarium

### Project Partner(s)

Bangsamoro Development Agency

### Activities

- Conducted needs assessment for water systems
- A training session on maternal health for midwives and nurses was conducted at the Cotabato Sanitarium.

### Location

Cotabato, Mindanao

### Period

November & December 2014

### Accomplishments

Established projects

- WASH programs in Libungan Toreta  
Upgrade system, knowledge transfer, hygiene education
- Maternal Child Health in Cotabato Sanitarium

on the Bangsamoro was signed between MILF and GPH. The agreement would pave the way for the creation of the new Muslim autonomous entity called Bangsamoro under a law to be approved by the Philippine Congress. Access to the island provinces however remains restricted for international aid workers due to major security concerns.

### MERCY Malaysia efforts

MERCY Malaysia have assessed the situation in Cotabato in 2013 and decided to focus in health, Water, Sanitation And Hygiene (WASH) and psychosocial programme. To date, MERCY Malaysia has carried out mobile clinics, maternal health training and assessed the needs on water supplies. MERCY Malaysia implemented its projects through its partner, Bangsamoro Development Agency. The objective of the mission was to kick start the implementation of maternal health programme and WASH programme in Cotabato Sanitarium and Libungan Toreta respectively.



Nur Hayati inspecting one of the taps IDPs obtain their water supply

### Background

Mindanao has been plagued by conflict between separatist groups and the government (GPH) since 1972 that has claimed more than 120,000 lives and displaced millions. The main separatist groups are the Moro Islamic Liberation Front (MILF), and Abu Sayyaf and the New People's Army (NPA). The NPA is active in the east of Mindanao and some parts of rural Luzon and Visayas while the rest are present in the regions that we will be working in. The most recent major conflict was in 2008 in which 450,000 people were displaced by renewed fighting caused by the collapse of a peace agreement.

Mindanao itself is rich in resources but half of the local population remains poor due to the constant state of uncertainty caused by the conflict. Since the signing of the historic peace agreement between the MILF (the largest separatist group) and the GPH on the 15th of October 2012, the situation in some parts of Mindanao (specifically Cotabato) has relatively stabilized, although security is still a major concern. On March 27, 2014, the Comprehensive Agreement



Central water tank which needs to be upgraded





## PHILIPPINES

**Project**

Reconstruction of Balion Elementary School in Ormoc

**Objectives**

To provide a new main building for Balion Elementary School

**Project Partner(s)**

Asian Disaster Reduction and Response Network (ADRRN)

**Activities**

- Damage assessment
- Development & design with approvals from relevant authorities
- Completion and final report
- Signing and agreement with the Department of Education
- Construction work commencement
- Monitoring & reporting
- Completion & final reporting
- Handover/ physical handover

**Location**

Ormoc, Philippines

**Period**

January 2014 to April 2014

**Accomplishments**

Reconstruction of the main building which involved designs that incorporated anti-typhoon elements to the building structure

was successfully completed at the end of April 2014 with a new building structure that provides a safe learning environment and one that is protected against earthquakes and typhoons. The building is to be used as an evacuation centre for future disasters.



The destruction of the school caused by the Typhoon Haiyan



The reconstruction progress of Balion Elementary School

### Background

Typhoon Haiyan that hit Philippines in December 2013 caused serious physical and economical damage to the country. With the assistance of MERCY Malaysia since 13 November 2013, key places have been reconstructed. Among the beneficiaries of MERCY Malaysia is Balion Elementary School. The school has been opened since 1971 with 203 students registered, ranging from kindergarten to grade 6. After the Typhoon there were only 198 students with 7 instructors on duty. The school partially reopened a week after the disaster with the help of local communities and with a contribution of PHP 30,000 of funds received from the government to build a temporary learning centre.

### MERCY Malaysia efforts

Typhoon Haiyan caused significant damage to Balion Elementary School, with almost 80% of the roof blown away during the typhoon. MERCY Malaysia deployed a technical team on January 24th, 2014 to address the damage and reconstruct the main building and its facilities such as the water systems and electrical wiring. The reconstruction work



The new look of Balion Elementary School



## PHILIPPINES

### Project

Enhancement of Current Medical Services at Ormoc District Hospital

### Objectives

- Enhanced hospital's capability and efficiency in providing nursing care for patients
- Increased capacity in the delivery of orthopaedic related treatment in Ormoc District Hospital
- Improved health services from the obstetrics and gynaecology department in Ormoc District Hospital

### Project Partner(s)

Ormoc District Hospital

### Activities

- Hire nurses for ODH
- Hire nurses for ODH wound care
- Basic Life Support Training for the MM nurses
- Orthopedics specialist surgical deployment
- Obstetrics Skills Enhancement training
- Supplementation of obstetrics and gynaecology equipment

### Location

Ormoc City, Leyte, Philippines

### Period

10th January 2014 – 30th June 2014

### Accomplishments

12 nurses employed for 6 months in Ormoc District Hospital

were suspended. It was a major disruption to the health system in Western Leyte as this hospital caters to patients in seven municipalities around Ormoc City namely Palompon, Isabel, Tabango, San Isidro, Calubian, Leyte and Camotes Island. The hospital also experienced a lack of manpower in addition to the building's physical damages as its personnel were also affected by the typhoon.

### MERCY Malaysia efforts

MERCY Malaysia was one of the first agencies to arrive at the Ormoc District Hospital. MERCY Malaysia arrived a week after the typhoon and worked very closely with the hospital authorities since arrival. MERCY Malaysia assisted the hospital by augmenting the services of its health personnel and other resources required, other than the rehabilitation of the hospital building. MERCY Malaysia deployed its Emergency Response Unit consisting of tents, equipment and medical supplies to run a temporary Outpatient Department that operated for two months at the hospital. At the same time, MERCY Malaysia initiated the rehabilitation work which covered 80% of the damaged area. The rehabilitation work was completed in phases, with the commencement of its health services resuming as early as three weeks after the onslaught of Typhoon Haiyan. All the patients were able to move back into the hospital by Christmas time. MERCY Malaysia continued to work together with Ormoc District Hospital by employing twelve nurses to augment their nursing services in January. Surgical teams comprising of orthopaedics specialists, anesthesiologists and nurses were also deployed throughout December 2013 and January 2014 to support its orthopaedic cases.

MERCY Malaysia continued with its intervention in Ormoc District Hospital through the recovery phase by supplementing Ormoc District Hospital with nurses to assist the hospital. Twelve nurses were hired with two of the nurses designated for wound care. The wound care services team saw a large reduction in secondary contamination of wounds as a result of this support.

### Background

Ormoc City lies directly in the pathway of the typhoon that hit Philippines on November 8, 2013. The city is on the western coast of Leyte and therefore was not affected by the storm surge. Although there was no casualties reported in Ormoc City, the city has experienced a huge loss in terms of properties. Most buildings lose their roofing and public amenities which was damaged by the typhoon.

Ormoc District Hospital is a Level 1 referral hospital situated in Ormoc City and was badly affected by the typhoon. The hospital, operated by the Provincial Government of Leyte, sustained 80% damage on its roofing structure. There was only one block that was operational out of the three blocks of the hospital. All wards, operating complex and the delivery rooms were damaged and non functional. The 100-bed hospital was not able to accommodate admissions properly and inpatients were placed in the main lobby and alleys of the only block that sustained minor damage during the typhoon. Majority of its health services such as General Medicine, Paediatrics, Obstetrics & Gynaecology, General Surgery and Orthopedics



## PHILIPPINES

### Project

Encouraging Resilience in Children Workshop

### Objectives

To train teachers and community leaders on how to run Child Friendly Spaces within their communities.

### Project Partner(s)

Valencia, Nasunogan, & Balion (Labrador) Districts

### Activities

Activities are geared towards equipping the participants on how to set up and run a Child Friendly Spaces to cater to potentially troubled children as a result of any trauma.

The activities are:

- Setting up a group depending on the age of the children
- How to set up ground rules
- Basic Counselling skills
- Coping with loss
- Dealing with various troubled behavior
- Sleep hygiene
- Supporting parents
- Rebuilding self-esteem and self-efficacy

### Location

Don Felipe Hotel, Ormoc City, Leyte Island, Philippines

### Period

May 5-7th, 2014

### Accomplishments

- 27 teachers from Valencia secondary school, Balion Primary School, and Nasunogan Primary School completed training
- 6 leaders from CFSI (Community and Family Services International) completed training

### Background

The training is a continuation of Child Friendly Spaces set up post disaster, targeting teachers and house leaders to be able to work with potentially affected children. The training included a lot of practical skills building with practice and role plays. The training was designed to be very hands on and effective.

### MERCY Malaysia efforts

Based on the feedback by the participants, the training was well received and deemed to be very practical and helpful. They reported that they benefitted a lot from the programme and wished to continue furthering their skills set. Some participants indicated a need for training on how to address really young children from the ages of 3-6.



## PHILIPPINES

### Project

Mobile medical clinics, needs assessment & distribution of dignity kits

### Objectives

Identify the needs of the affected communities in Borongan Barangay and other affected areas near Ormoc at Leyte Island

### Project Partner(s)

Eastern Samar Provincial Health Office

### Activities

- Procured and distributed “dignity kits” to pregnant and lactating mothers
- Set up mobile medical clinics throughout Eastern Samar
- Conducted needs assessments

### Location

Ormoc, Leyte, Philippines

### Period

December 2014

### Accomplishments

- Provided medical care to those affected by the disaster
- Identified the most critical needs
- Treated 568 pregnant women and lactating mothers
- Distributed 1,000 dignity kits
- Provided a primary health care mobile clinic
- Served a total of 2,369 patients in December 2014

### Background

On the 6th of December 2014, Typhoon Hagupit (known locally as Typhoon Ruby) made landfall over Dolores, in Eastern Samar Philippines. MERCY Malaysia has been closely following the progression of Typhoon Hagupit as it was graded a Super Typhoon on the 4th of December. Although it was no longer at Super Typhoon strength when it made landfall, maximum sustained winds of 175km/h and gusts of wind up to 210km/h upon landfall caused serious destruction and damage in Eastern Samar. Typhoon Hagupit moved very slowly for five days in a West Northwest direction, causing flash floods, landslides, power outages and interruptions in telecommunications.

The impact of Typhoon Hagupit was not as severe as Typhoon Haiyan. The communities and government were better prepared based from their experiences from Typhoon Haiyan. Nevertheless, a total of 532,887 families (2,392,593 people) were affected. The Philippines government conducted the largest evacuation in preparation for landfall, mobilizing the various communities to public buildings. Evacuation centres

included schools such as Balion Elementary School and Nasunogan Elementary School, which had been rehabilitated by MERCY Malaysia post-Typhoon Haiyan.

### MERCY Malaysia efforts

MERCY Malaysia's team based in Ormoc city were quickly deployed to the affected areas, conducting rapid assessments to establish the emergency needs of those afflicted by the disaster. Most critical of needs that were identified were the lack of food supplies, emergency shelter, health care and emergency livelihood support.

MERCY Malaysia deployed several teams to Eastern Samar to procure and distribute “dignity kits” to pregnant and lactating mothers. These distributions coincided with mobile medical clinics that was set up throughout Eastern Samar, providing medical care to those affected by the floods. MERCY Malaysia has also been replenishing medicine supplies of local health institutions. We continue in providing medical assistance to barangays (villages) for those who were affected by Typhoon Hagupit as long as there is a need.



Lactating mothers who were affected by Typhoon Hagupit in San Jose, Eastern Samar receiving a 'dignity kit' from MERCY Malaysia.



Mothers affected by Typhoon Hagupit attending a Reproductive Health Education session conducted by MERCY Malaysia volunteer in San Jose, Eastern Samar.





## PHILIPPINES

**Project**

Reconstruction of Nasunogan Elementary School

**Objectives**

- To build an earthquake and typhoon resilient school
- To provide a building that functions as an evacuation centre during natural disasters

**Project Partner(s)**

Nasunogan Elementary School, Department of Education

**Activities**

Reconstruction of main building which involved:

- Designs that incorporates anti-seismic and anti-typhoon elements to the building structure
- Planning
- Work implementation
- Monitoring & Supervising

**Location**

Barangay Nasunogan, Ormoc, Leyte, Philippines

**Period**

April – November 2014

**Accomplishments**

Three-block typhoon and earthquake resistant school building.

### Background

The Nasunogan Elementary School was severely damaged by Typhoon Haiyan which damaged all four blocks of the school. Two out of four of main buildings lost their roofs while the other two blocks sustained damages in the roof structure that included frames and beams due to the typhoon. With the assistance of barangay workers, MERCY Malaysia rehabilitated the damaged building which helped the school to be operational by the third week of December. The rehabilitation work that was done by MERCY Malaysia was purely structural and was organized quickly in order to assist the school conduct classes as soon as as it could.

There were 93 out of 97 schools in Ormoc that were damaged by Typhoon Haiyan. Nasunogan Elementary School was one of the schools that was severely damaged. All four blocks consisting of 7 classrooms were badly damaged. Five classrooms sustained total damage with the other two only experiencing partial damage. MERCY Malaysia rehabilitated the school as a part of its emergency response and to protect the school from to future disasters.

Nasunogan Elementary School was initially built with wooden structures and was not typhoon resilient. It became the only public structure other than barangay hall that was used as an evacuation center in the barangay.

MERCY Malaysia subscribes to the “Building Back Better” concept and believed that the school should be reconstructed to be able to sustain natural disasters such as typhoons which were a common phenomenon in Philippines.

### MERCY Malaysia efforts

MERCY Malaysia reconstructed a total of three new building blocks. There are a total of 4 classrooms, 1 teacher’s room, 1 laboratory, 1 library and 7 toilets in the three blocks. Each block is connected by a covered walkway. MERCY Malaysia also upgraded one current block of the school building which consists of three classrooms. The canteen of the school was also renovated in order to accommodate more students. All of the rooms were fitted with lightings. The building was able to be utilized by the beneficiaries immediately after the completion of the construction phase.

246 students and 8 teachers in Nasunogan Elementary School now has a safer and a more comfortable learning and teaching environment. The community of Barangay Nasunogan now also has access to a strong and durable evacuation centre built for future disasters.



## PHILIPPINES

### Project

Basic Obstetrics Skills Training

### Objectives

To enhance maternal health services by nurses and midwives of Valencia Health District

### Project Partner(s)

Ormoc District Hospital & Valencia Health District

### Activities

- Delivery of the training content through lectures, role plays, human model, and hands-on training (for suturing), delivery of retained placenta, breech delivery, etc)
- Knowledge gap assessment- pre & post tests
- Question & Answer session with the participants

### Location

Ormoc District Hospital, Ormoc City, Leyte Island, Philippines

### Period

June 2-5th, 2015

### Accomplishments

21 nurses and doctors were trained in basic obstetrics skills

### Background

During the emergency relief efforts in Ormoc post Typhoon Haiyan in December 2013, MERCY Malaysia saw an opportunity to increase the skills set and knowledge of midwives and medical personnel at the Ormoc District Hospital and Valencia Health District. Increasing their competency will improve the medical services provided to high risk pregnant mothers. It is important that in high risk cases the medical staff is well trained and competent, mitigating fatal consequences. Hence, the Basic Obstetrics Skills Training was planned to minimize, if not close, the gap between staff competency and high risk pregnant mothers.

### MERCY Malaysia efforts

Two sessions of Basic Obstetrics skills training were conducted, each session had 10-12 participants. They comprised of nursing staff from Valencia Health District and Ormoc District Hospital nursing staff. All the participants showed interest in expanding their knowledge and skills. A series of lectures on the management of antenatal care, intrapartum, postnatal and newborn resuscitations were delivered. MERCY Malaysia provided practical work stations to practice after each lecture sessions, demonstrated clinical procedures and other activities in which participants took part. Participants were also taught suturing techniques and skills.

Assessments were conducted in the form of pre- and post-test MCQs to gauge their baseline knowledge and reflection.



Dr. Nishamini demonstrates to the participants how to do a simple suture for episiotomy



## PHILIPPINES

### Project

Rehabilitation of Leyte Provincial Hospital

### Objectives

- To repair/replace the roofing, ceiling and walls (where needed) of the damaged health facility
- To ensure that the hospital will return to full functionality within 3 months
- To enable the hospital to meet the rising needs of the affected communities by enhancing its infrastructural capacity
- To supplement the inpatient services to ensure that space and resources are utilized efficiently

### Project Partner(s)

Leyte Provincial Hospital, Philippines

### Activities

- Repairing/rehabilitation of the damaged health facility
- Engaging with local contractors
- Progress monitoring & reporting
- Completion, final inspection & handover

### Location

Palo, Leyte

### Period

3rd January 2014 – 28th February 2015

### Accomplishments

Completed the rehabilitation work of Leyte Provincial Hospital on February 28, 2014.

the typhoon. Six out of seven blocks of the hospital sustained damages in the roof structures, ceilings, walls and floor. The hospital had to suspend its services which previously included General Surgery, Obstetrics and Gynaecology, Paediatrics, Orthopaedics and General Medicine.

### MERCY Malaysia efforts

MERCY Malaysia visited Leyte Provincial Hospital in late December 2013 and decided to assist the hospital in its rehabilitation work. MERCY Malaysia started the rehabilitation work on January 3, 2014 which included repair works of the roof structure and building structure of all the damaged blocks. The painting of the three blocks of the hospital was organized by MERCY Malaysia. The rehabilitation work lasted for two months and it was completed on February 28th, 2014.



MERCY Malaysia was represented by Dato' Dr. Ahmad Faizal Mohd. Perdaus in handing over an ambulance to Leyte Provincial Hospital which was represented by Mr Dominico L. Petilla, the Governor of Leyte Province during Handover Ceremony of Leyte Provincial Hospital.

### Background

Typhoon Haiyan, a category 5 super typhoon, hit Philippines on November 8, 2013 and brought great destruction especially to the islands of Leyte, Samar and Cebu. The typhoon affected the lives of 2 million individuals. 5,260 people lost their lives while million others loss their properties and had their source of income interrupted. The east coast of Leyte Island is one of the hardest hit areas from the effect of the wind and storm surge that was formed due to the typhoon. Tacloban, the biggest city on Leyte Island and also other municipalities and towns along the coast such as Palo were paralyzed.

Leyte Provincial Hospital, a Level 1 referral hospital under the responsibility of the Provincial Government of Leyte, is situated in Palo, Leyte which is about 10 minutes from Tacloban. The hospital lies about 1 kilometre from the coast and was hit by the storm surge. The storm surge brought about water and debris up to 4 feet into the hospital. The 150-bed hospital had to stop its operation for a few days after the typhoon and was only able to provide outpatient services up to two months after



MERCY Malaysia replacing the roof structure of Leyte Provincial Hospital. The roof including its structure was damaged due to the strong winds of Super Typhoon Haiyan.



## PHILIPPINES

**Project**

Shelter Repair Kit

**Objectives**

Distribution of shelter repair kit in Barangay Nasunogan

**Activities**

Procurement of shelter repair kit mater

**Location**

Barangay Nasunogan, Ormoc, Leyte

**Period**

February 2014

**Accomplishments**

Distributed more than 320 Shelter Repair Kits in Barangay Nasunogan

MERCY Malaysia distributed more than 320 Shelter Repair Kits in Barangay Nasunogan to families whose houses were either totally damaged or suffered severe damages. The barangay consists of 7 smaller units called Puroks. The distribution was carried out in stages and took 2 weeks to complete.

Each Shelter Repair Kit consists of the following:

No.	Item	Quantity
1	10 feet Zinc Sheet	10 pieces
2	2" x 4" x 12' Timber	12 pieces
3	2" x 4" x 6' Timber	12 pieces
4	4" x 4" x 10' Timber	6 units
5	Hammer	1 unit
6	Hand Saw	1 unit
7	4" Timber Nails	2 kg
8	Umbrella Nails	1 kg

### Background

Nasunogan is a barangay in Valencia District with 520 households. There are 7 purok in Barangay Nasunogan. The majority of the population are farmers. Almost all of the crops (coconut, sugar cane) were destroyed during the typhoon. Based on the damage assessment of 3 of the purok, the assessment team summarized the following:

Items	Total	Medium	Minor
Roof	95%	5%	0%
Wall	71%	17%	12%
Floor	71%	12%	17%

There was no evacuation center in the barangay. The affected population shared houses with their relatives in the area since their houses were totally damaged. They also lived in makeshift shacks that were made out of existing materials from their damaged house. There were only about 30% of the population that had the means to repair their houses.

### MERCY Malaysia efforts

MERCY Malaysia embarked on a shelter rehabilitation initiative to meet the needs of the affected communities. The Shelter Repair Kit contained essential materials and tools that can be used in the construction of a basic house structure or as a supplementary kit to enhance a damaged structure. The kit was designed to be versatile enough to serve the needs of families whose houses have either been partially or totally damaged.





## PHILIPPINES

### Project

Supplementary Feeding Program

### Objectives

- To improve the nutritional status of the children enrolled in the programme
- Contribute to reduction of under the age of 5 child mortality, which is in-line with Millennium Development Goal (MDG) 4

### Project Partner(s)

Valencia Health District

### Activities

- Wet feeding at 2 days a week
- Dry ration at 5 days a week
- Food & nutrition quizzes, games, etc. conducted at each feeding to make the session more enjoyable to everyone involved.
- Initial weight will be taken during the feeding launch day.
- Subsequent weight will be taken at every 4th week following the feeding schedule.
- Final weight will be taken at the end of 12th week of the feeding program.
- Dry ration at home for feeding.

### Location

Ormoc District Hospital, Ormoc City, Leyte Island, Philippines

### Period

June 3rd-August 27th, 2015

### Accomplishments

- 100% of participating children have at least 15% weight gain at the end of 12-week program
- 30% of children will move to one improved category (e.g. from Severely Underweight to Underweight)

## Background

One of the areas that MERCY Malaysia worked in was the Valencia Health District which covers 17 barangays. Within the Valencia Health District jurisdiction, there are 5 rural health centers located in the interior barangays. These rural health centres provide maternal health services, especially antenatal and postnatal care. The main rural health clinic is situated in Barangay Valencia which is located right by the highway. This clinic is accessible by tricycle, multicar, and other means of transportation. There is 1 medical doctor, 7 midwives and 2 nurses working in the Valencia Rural Health Centre.

Barangay Cagbuhangin has one of the highest numbers of undernourished and severely undernourished children in Valencia Health District. According to recent statistics

(2013) obtained by the City Health Office, the prevalence of undernourished and severely undernourished children in Barangay Cagbuhangin is at 30%.

## MERCY Malaysia efforts

According to 2013 Operation Timbang data, in Ormoc City there were 2,640 under 5 children who were underweight and 540 who were severely underweight. In Sitio Laray alone, there are a total of 43 children in total that is either underweight or severely undernourished. The total numbers of underweight patients were 28 and 15 severely underweight

MERCY Malaysia implemented a supplemental feeding program for a period of 3 months. This program was specifically catered for children between the ages of 6 to 59 months old. The programme included both wet feeding and dry feeding which meant that children were given cooked food and rations to supplement their daily food intake. In this particular programme, the participants received wet feeding twice a week and dry rations five days a week for the duration of 12 weeks.

The supplemental feeding program was implemented in partnership with Ormoc City Nutrition Health Office based on the module by Department of Health.



Sir Gimboh conducting nutrition education to mothers & caregivers during one of the wet feeding sessions.



Nutrition feeding assistant, Carmina, enjoying interaction with young participants.



## SOMALIA

### Project

Emergency Provision of Essential Health Services to the host community and IDPs in the Banadir region.

### Objectives

To reduce and prevent avoidable health mortality and morbidity amongst the vulnerable population through the provision of essential health services by providing consultation and adequate medical treatment.

### Project Partner(s)

Aden Abdulle Foundation (AAF)

### Activities

- Establish, support and scale up Yaqshid operations through the provision of free consultations and treatment to our catchment areas, specifically : OPD services, health education, management of common illnesses
- Provision of basic antenatal and post-natal services and consultations for pregnant and lactating women
- Procurement of additional medical supplies

### Location

Towfiq, Yaqshid, Banadir – Mogadishu - Somalia

### Period

1st January - 31st March 2014

### Accomplishments

Total number of beneficiaries at Yaqshid District Static Clinic :

- Men: 15,000
- Women: 35,000
- Children: 50,000

### Background

The continuing and recently escalating conflict in Mogadishu was raising concerns in the wider humanitarian community. Resulting risks for the health of the conflict-affected and displaced population in and around Mogadishu, particularly with the recent new influx IDPs, has caused problems of accessing health service.

Already difficult and serious problems affecting the population had been aggravated by the on-going conflicts, drought and harsh restriction imposed by Al-Shabab. According to UNHCR both target Districts have more than 35,000 IDPs that arrived since March 2011.

FSNAU 2011 analysis has revealed a critical situation in Mogadishu IDPs, indicating a global acute malnutrition ranging in between 39.4% and severe acute malnutrition 15.3% in addition to outbreaks of communicable diseases.

### MERCY Malaysia efforts

Together with Aden Abdulle Foundation, MERCY Malaysia provided consultations, treatment and laboratory investigations to residents of Towfiq village in Yaqshid district in Towfiq OPD Clinic. The OPD operated five days a week with an average of 50 to 55 patients, mostly women and children.

The clinic service is free and consists of 1 doctor , 2 nurses, 1 laboratory technician, 1 pharmacist, and a team of staff managing operations. The nurses examined daily vital signs of patients, organized the collation of patients' clinical histories and provided advice to the patients on the administration of medicines. Additionally, the nurses also prepared guidelines for the doctors and provided support in the day care department, especially in the area of provision of care in the treatment of patients.

The clinic referred severe cases to the surrounding hospitals including SOS hospital, Banadir Hospital, Zam Zam Egyptian hospital and Aden Abdulle Hospital. The clinic provided transportation (van) that is used for emergency cases to send patients to referral hospitals.



OUR WORK - INTERNATIONAL //



Health-Related Development



Crisis Response



Health - Post Emergency



Disaster Risk Reduction

## SRI LANKA

### Project

Psychosocial Program

### Objectives

To cater to mental health needs of affected population in post conflict and disaster situations.

### Project Partner(s)

Consortium Humanitarian Agencies (CHA)

### Activities

- Talks by Dr Hariyati on topics such as Psychological First Aid and role-plays
- Training on Intervention skills and techniques when working with adolescence

### Location

Jaffna, Sri Lanka

### Period

18th till 20th February 2014

### Accomplishments

Trained government officials on intervention skills and techniques for mental health and psychosocial support service

### Background

Following the conflict and tsunami afflicted Jaffna District, MERCY Malaysia identified a need for psychosocial interventions in villages where primary medical support was provided. Records showed many patients with psychosomatic complaints sought psychosocial interventions.

### MERCY Malaysia efforts

Psychosocial interventions is one of MERCY Malaysia's developmental programmes that is conducted with the provisions of various trainings and workshops. In collaboration with the Consortium Humanitarian Agencies (CHA), the training conducted was in the area of "Intervention skills and techniques when working with adolescence" in a school setting for school counsellors.



Government officials of Jaffna, Sri Lanka in psychosocial intervention programme



Government Officials of Jaffna, Sri Lanka attend programme lecture



## SYRIA

### Project

Mobile Clinic - Provision of Primary Health Care (PHC) services to Internally Displaced Persons (IDPs) in Syria

### Objectives

To reduce mortality and morbidity rate among the IDPs in Syria.

#### Specific Objectives:

- Provide medical services to the beneficiaries in the camps and urban community areas.
- Decrease death threats of patients with critical conditions.
- Prevent diseases from spreading within crowded camps and communities.

### Activities

- Visited the camps and communities at the northern and eastern areas of Aleppo.
- Procured supplies needed by the beneficiaries.
- Arranged medical visits to the camps as needed to conduct PHC services.
- Arranged different types of specialist doctors to visit along with the existing medical team.
- Collected data and census on the type of diseases and demographic for analysis.
- Prepared operational and financial report on the project to be submitted to stakeholders on a weekly basis.

### Location

- Eastern area: Dyr Hafer, Albab, Jarablus, Manbej, and the small villages in between.
- Northern area: Alraee, Akhtareen, Arshaf, Dabek, Ehtemlat, Soran, Azaz, Mareh, Telrifat and other small villages among them.

### Period

January to April 2014

### Accomplishments

- An average of 100 patients received medical consultations and treatment on a daily basis for primary health care.
- Reduced mortality rate to below 5 for the beneficiaries treated at RWB health clinic.
- Provision of free medicine/ treatment to 70% of the patients consulted at the clinic.

### Background

The conflict in Syria which started as a revolution in 2011 has escalated into a civil unrest and had since, protracted until present time. More than 6 million people have been affected by the conflict in Syria and more than 1.5 million Syrians fled the country to find asylum. This has resulted in further complexity in host countries, including Lebanon, Jordan, Turkey, Egypt, Iraq, and other neighbouring countries which experienced constraints in terms of overstretched resources, funding, coordination challenges, local national policies and other limitations.

The gravity of the crisis exacerbated the refugees condition across all host communities. Aid providers have highlighted the increasing incidence of severe poverty, with savings and families' assets exhausted. All assessments covering the topic highlighted an increase in the numbers of refugees in debt. Opportunities to find income have dwindled as the refugee population swells amidst regional economic instability.

### MERCY Malaysia efforts

Based on MERCY Malaysia's initial assessment and meetings with local humanitarian agencies, the team recommended that aid from MERCY Malaysia should be provided.

To address the basic health needs of the Syrian community affected by the conflict, MERCY Malaysia provided the local health sector with medical supplies, equipment and other necessities to ensure urgent health services were available to those in need.

Health monitoring activities were implemented to initiate support services that allowed the current health providers to manage their services effectively. This includes providing mobile clinics, a blood bank and post-surgery care for the victims of the conflict. These activities helped to relieve the work of the medical personnel there as they were fatigued after being constantly in service since the crisis began.

MERCY Malaysia also provided specialist medical support to existing health providers to supplement their services in treating patients with chronic illnesses since the initial treatment were suspended for this category of patients to focus on providing healthcare to those with life threatening injuries and diseases.



OUR WORK - INTERNATIONAL /////



Health-Related Development



Crisis Response



Health - Post Emergency



Disaster Risk Reduction

## SYRIA





## SYRIA

### Project

Drug replenishment and Distribution of Winter Kits in Jordan

### Objectives

To provide appropriate winter clothing for the refugees of Syria

### Project Partner(s)

Sheikh Thani Bin Abdullah Foundation for Humanitarian Services (RAF)

### Activities

Distribution of the Children's Winter Kits

### Location

Al Za'atari Camp and Jarash, Jordan

### Period

November 2014

### Accomplishments

- Provided basic winter kits to 50 families, consisting of blankets, mattresses and carpets
- Donated medical supplies

## Background

The conflict in Syria, which started as a revolution in 2011 escalated into a civil war that lasts to this day. An estimated 9 million Syrian have fled their homes since the outbreak, 3 million of which have fled to Syria's neighbouring countries; Turkey, Lebanon, Jordan, Egypt and Iraq according to the United Nations High Commissioner for Refugees (UNHCR). Additionally, hundreds of thousands of Syrian refugees were suffering from temperature drop that was as low as minus six degrees Celcius.

Al-Za'atari camp lies 12km from the Syrian border and 60km from Amman. The camp which is administered by the Jordanian Government and UNHCR houses over 115,000 registered Syrian refugees in small caravans and tents. Several international organisations and non-governmental organisations provide social services such as clinics and schools.

Jarash is located 8 km away from the border crossing of Da'raa in Syria, making Jarash a popular spot for Syrian refugees to live with their hosted communities as compared to living in the refugee camps that limit their ability to earn a living and have better lives. Unfortunately hosts and refugees alike are struggling to find adequate food, clothing, shelter, education for their children as compared to the facilities provided in the refugee camps that were supported by the government and humanitarian agencies.

## MERCY Malaysia efforts

MERCY Malaysia identified 50 Syrian families with an immediate need of basic winter kits. The families identified were those who have lost the head of the family or were new arrivals to Jarash, possessing very little or nothing. These families live in small concrete apartments without insulation, carpets or central heating, exposing them to the brunt of the cold winter. MERCY Malaysia provided basic winter kits to 50 families, consisting of gas heaters, blankets, mattresses and carpets. RAF in collaboration with Saudi Arabia NGO partners provided the same winter kit to the remaining 450 families.

Additionally, MERCY Malaysia donated medical supplies under the drug replenishment programme to two clinics in Al-Za'atari Camp and Al Zarqa.



Drug replenishment in Al-Zarqa



Distribution of winter kits in Jarash





Institute of Diplomacy and Foreign Relations (IDFR)



HRH Sultan  
Nazrin Shah  
LECTURE SERIES 2014

*From Baghdad to Bangui, from Moscow to Kuala Lumpur:  
Is there still a role for humanitarian actors?*

Institute of Diplomacy and Foreign Relations (IDFR) Auditorium  
27 November 2014



Institute of Diplomacy and Foreign Relations (IDFR)

# EVENTS & TRAINING

"We can all make a difference in the lives of others in need, because it is the most simple of gestures that make the most significant of differences."

— Miya Yamanouchi

OUR WORK - EVENTS ///////////////

## MERCY MALAYSIA RENEWS MEMORANDUM OF UNDERSTANDING WITH UNIVERSITY KEBANGSAAN MALAYSIA

MERCY Malaysia and Universiti Kebangsaan Malaysia (UKM) continues to foster its relationship with a signing ceremony on its Memorandum of Understanding (MoU) between UKM's Vice-Chancellor Profesor Dato' Dr. Noor Azlan Ghazali, and MERCY Malaysia's President Dato' Dr. Ahmad Faizal on April 26, 2014 held at the Chancellery Building in UKM Bangi. UKM and MERCY Malaysia launched its UKM-Mercy Malaysia Youth for Humanity programme that will involve 80 to 100 UKM undergraduates for the first programme under the new MoU. This programme aims to inculcate the volunteering spirit

of students in the humanitarian relief sector. This initiative was jointly developed to celebrate the continuance of the UKM-MERCY Malaysia partnership. This would promote and strengthen mutually beneficial collaborations for the delivery of medical and humanitarian aid to vulnerable communities. MERCY Malaysia was also invited to attend a community forum entitled 'Exploring Synergy and Driving Collaboration', held after the MoU signing ceremony.



From left: MERCY Malaysia's Executive Committee Member Prof. Dr. Shalimar Abdullah, MERCY Malaysia's President Dato' Dr. Ahmad Faizal Perdaus, UKM's Vice-Chancellor Profesor Dato' Dr. Noor Azlan Ghazali and UKM'S Deputy Vice- Chancellor (Industry and Community Partnerships) Prof. Dato' Saran Kaur after the Memorandum of Understanding (MoU) signing ceremony.



## OUR WORK - EVENTS //////////////

## MERCY MALAYSIA RENEWS MEMORANDUM OF UNDERSTANDING WITH UMW HOLDING BERHAD

UMW Holdings Berhad and MERCY Malaysia has had long history of working together. When MERCY Malaysia was still developing, UMW was one of the first corporate bodies to offer financial and logistical support to us.

This noble relationship between both parties continue to foster with a signing ceremony on Memorandum of Understanding (MoU) between UMW President & Group CEO, YBhg Datuk Syed Hisham Syed Wazir and MERCY Malaysia President, YBhg Dato' Dr. Ahmad Faizal Perdaus on 17th June 2014. The ceremony was held at UMW Holdings Berhad office at Shah



Handshake between YBhg Datuk Syed Hisham bin Syed Wasir and YBhg Dato' Dr. Faizal Mohd Perdaus.

Projects conducted with UMW Holdings Berhad:

Country	Project	Location	Service Provided
Sabah	Outreach Programme at 7 villages	<ul style="list-style-type: none"> <li>• Salt Trail: Trek and Treat, Crocker Range</li> <li>• Kg Inrad Kinabatangan</li> <li>• Kg Inakaak, Persiangan</li> <li>• Kg Alutok, Tenom</li> <li>• Kg Imusan, Tongod</li> <li>• Kg Lumou, Telupid</li> <li>• Kg Abingkoi, Tenom</li> </ul>	<ul style="list-style-type: none"> <li>• Provided basic medical screening and treatment</li> <li>• Provided dental treatment</li> <li>• Perform pap smear</li> <li>• Dispense reading glass</li> <li>• Dispense hygiene kit</li> <li>• Disseminate health education</li> </ul>
Sarawak	Outreach Clinic at 3 villages	<ul style="list-style-type: none"> <li>• Kg Kambung, Padawan</li> <li>• Ng Sungai, RH. Anthony Bau Julau</li> <li>• Ng Sumpa, Batang Ai</li> </ul>	<ul style="list-style-type: none"> <li>• Provided basic medical screening</li> <li>• Perform pap smear</li> <li>• Provided primary health services</li> <li>• Provide dental services</li> <li>• Eyesight test and provision of prescription glasses</li> <li>• Distribute hygiene kits</li> <li>• Health and hygiene education sessions</li> </ul>



From left: UMW's Executive Director of Group Management and Services Dr. Wafi Nazrin bin Abdul Hamid, UMW's President and Group CEO YBhg Datuk Syed Hisham bin Syed Wazir, MERCY Malaysia's President YBhg Dato' Dr. Faizal Mohd Perdaus and MERCY Malaysia's Executive Director Mr. Ahmad Faezal Mohamed during the signing ceremony.

## OUR WORK - EVENTS //////////////

# MERCY MALAYSIA SPREADS ITS WINGS TO THE UK

MERCY Malaysia United Kingdom (MMUK) has finally received its registration in the early of 2014 and gained its legal status as a charity entity after four years of hard work and continuous effort.

MERCY Malaysia (HQ) in its strategy to further establish itself on an international level has expanded its wings to the United Kingdom. It is without a doubt that MMUK anticipates many challenges in the years ahead, not least being amongst the many established charity peers, nonetheless the expected benefits are tremendous and multiple, not just to the organization but also to beneficiaries whom it serves globally. MERCY Malaysia United Kingdom (MMUK)'s full registration in the UK is also significant as it becomes one of very few charities with origins in the Global South to attain full legal charity status in the UK in recent years.

MERCY Malaysia President, Dato' Dr. Ahmad Faizal Mohd. Perdaus said " The existence of MERCY Malaysia in the United Kingdom will be a good platform in building a strong brand identity which strengthens relationships with various stakeholders : donors, partner organisations, government officials, university students and other potential circles be it Malaysians or British in the United Kingdom ".

He added, "It is these stakeholders who will help us widen and strengthen our capacity and humanitarian aid to others, as well as to assist us to fundraise for the benefits of our beneficiaries. MERCY Malaysia is ready to continue its upward journey towards becoming a truly world class international humanitarian organization and bring forth a more meaningful impact to our work to the world at large. MMUK hopes that it may share the essence of what the charity does and the values it represents with all stakeholders and the people of the UK".



HRH Sultan Nazrin Muizzuddin Shah officiating the launch of MERCY Malaysia United Kingdom (MMUK) at the Malaysian High Commission in London.



OUR WORK - EVENTS //////////////

## HRH SULTAN DR NAZRIN SHAH LECTURE SERIES 2014

On November 26th, 2014 MERCY Malaysia hosted the HRH Sultan Dr Nazrin Shah Lecture Series 2014 together with the Institute of Diplomacy and Foreign Relations (IDFR) in the IDFR auditorium.

Graced by the presence of HRH Sultan Dr Nazrin Shah Muizzuddin Shah, the Director General of the International Committee of the Red Cross (ICRC), Mr. Yves Daccord delivered an invigorating lecture on the role of humanitarian actors within contemporary conflicts and disasters titled *"From Baghdad to Bangui, from Moscow to Kuala Lumpur: is there still a role for humanitarian actors?"* Mr. Daccord first outlined five major drivers that have made the work of humanitarian actors challenging and strenuous. He then offered up several possible solutions, ranging from closer interaction with beneficiaries to being more humble and stubborn.

After a short reception where HRH Sultan Dr Nazrin Shah discussed the lecture with other honourable guests before departing, the event continued with a lively panel discussion. The Regional Director of the UN Office Coordination of Humanitarian Affairs, Mr. Oliver Lacey- Hall and Director of Asia Pacific International Federation of Red Cross and Red Crescent Societies, Mr. Jagan Chapagain both gave their insight into the topic before answering questions from the crowd.

After the panel discussion, participants enjoyed a splendid lunch where discussions continued further. It was the objective of MERCY Malaysia to provide a platform for discussion, encourage exchange of ideas and highlight the importance of continued humanitarian assistance.



Mr. Yves Daccord delivering his lecture.



MERCY Malaysia's Dato Dr. Ahmad Faizal Mohd Perdaus delivering his opening speech.



The audience enjoying the Lecture Series .



OUR WORK - EVENTS //////////////

## KAYUHAN KEMANUSIAAN GAZA 2014

On 25th October 2014, 559 cyclists mounted their bikes and participated in the MERCY Malaysia Kayuhan Kemanusiaan Gaza fundraising event. MERCY Malaysia President, Dato' Dr. Ahmad Faizal Mohd Perdaus and President of the Malaysian National Cycling Federation, Datuk Haji Abu Samah Bin Haji Abd. Wahab flagged off the cyclists for the 28km course. Cyclists braved early morning showers to help raise funds for MERCY Malaysia's Palestine Relief Fund and shared MERCY Malaysia's plans on the provision of humanitarian assistance in the critical situation in Gaza. The situation in Gaza turned severe in July 2014 with Israel bombardments and hostilities which has displaced hundreds of Palestinians, destroying homes and livelihoods. MERCY Malaysia would like to express their deep appreciation to the sponsors; Jiwa Basikal, Cyfora Worx, 100 Plus and Seiko in joining us in this cycling event. Special thanks to the Malaysian Red Crescent for providing an ambulance to help those cyclists in need and Sasha Saidin for being an enthusiastic emcee. MERCY Malaysia would also like to express its appreciation to all those involved in the planning, preparation and assistance on the day of the event.



Our Emcee, Shasha Saidin flagging off the cycling event.



The start of the Humanitarian Cycling Event for Gaza with our passionate cyclists



Press conference with our Regional Director, Tuan Haji Norazam bin Shah and MERCY Malaysia's President, Dato' Dr. Ahmad Faizal Mohd Perdaus



OUR WORK - EVENTS //////////////

## 15<sup>TH</sup> ANNIVERSARY ANNUAL FUNDRAISING DINNER 2014

MERCY Malaysia celebrated its 15th anniversary on October 31st 2014 in the Mutiara Ballroom at the Royale Chulan Damansara. The event was graced by the presence of HRH Sultan Dr Nazrin Muizzuddin Shah and HRH Tuanku Zara Salim, together with supporters and donors. HRH Sultan of Perak first toured through a photo gallery of domestic and 119 international MERCY Malaysia missions. The photo exhibit displayed the committed humanitarian work MERCY Malaysia executed over the past 15 years, since its inception in 1999. Since then, MERCY Malaysia has conducted missions in 29 countries around the world, reaching over 1 million beneficiaries. Over the years MERCY Malaysia's humanitarian work has grown exponentially, thanks to the generous donations from the Malaysian people and devoted support from its staff and volunteers. During his welcoming remarks, Dato' Dr. Ahmad Faizal Mohd Perdaus enlightened the audience with a speech that focused on the theme of the night's dinner, "In Aid of Countries in Crisis." This year has proven to be the most turmoil, hostile and conflict ridden years in recent history. The growing global security environment has proved to be challenging for MERCY Malaysia, who remain committed in the provision of medical relief, emergency response, Disaster Risk Reduction (DRR), psychosocial services, water sanitation and hygiene (WASH), and health care for affected communities globally. We would like to record our gratitude to HRH Sultan Dr Nazrin Muizzuddin Shah and HRH Tuanku Zara Salim for honouring us with their presence. We would also like to express our deepest appreciation to all MERCY Malaysia Executive Committee members, staff, volunteers and supporters.



Arrival of our Patron, HRH Sultan Dr Nazrin Muizzuddin Shah, the Sultan of Perak escorted by MERCY Malaysia's President, Dato' Dr. Ahmad Faizal Perdaus.



MERCY Malaysia's Exco Members and President together with our Patron HRH Sultan Dr Nazrin Muizzuddin Shah, HRH Tuanku Zara Salim during the annual dinner.

OUR WORK - EVENTS //////////////

## MY MERCY RUN 2014

MERCY Malaysia organised its first ever International Humanitarian Run called “My Mercy Run 2014” to raise funds, create awareness on our humanitarian efforts and encouraging the spirit of volunteerism and disaster-preparedness among Malaysians. The event was held on March 2nd 2014, at Padang Merbok, kicking off at 7am. The 7 km run successfully registered close to 2,000 participants with proceeds being channelled to the organisation’s general fund.

The run managed to bring the Malaysian public together, giving them an opportunity to be a part of our humanitarian aid projects while running for a cause, healthy living among Malaysians. We were also honoured to be graced by the presence of Her Royal Highness Tuanku Zara Salim, Raja Permaisuri of Perak Darul Ridzuan who also joined us as the royal guest of honour to flag off the run and present award to the winners of My MERCY Run 2015.

*“My MERCY Run 2014 was definitely an incredible success and it gave us such joy to see how the run has encouraged the public in adapting a healthy lifestyle both mentally and physically. It was also heart-warming to see how so many good-hearted Malaysian out there wanting to help MERCY Malaysia in its efforts to aid those in need. I think it’s safe to say that we have achieved our primary goals of My MERCY Run 2014”* said Yang Mulia (YM) Puan Raja Riza Shazmin Raja Badrul Shah, MERCY Malaysia’s honorary secretary.

Event Programme:

- Race pack collection at MERCY Malaysia’s Secretariat
- DJ Hannah begins hype
- Warm-up exercise by FIT Malaysia
- Performance - Akademi Fantasia 13 Singers
- Performance by GBOB Champion - The Nose
- Race end - Selfie Contest Prize Giving
- Performance by Jazz Artiste - Ady Suwardy



The run honourably graced and flagged off by HRH Tuanku Zara.



Medals of MyMERCY Run 2014.



The kick-off of MERCY Malaysia’s International Humanitarian Run 2014

OUR WORK - TRAINING //////////////

## VILLAGE WATCHING

**Date : 3rd – 4th July 2014****Venue : Purok 7, Barangay Nasunogan, Philippines**

A two day village watching workshop was conducted with representatives from Barangay Health Worker, Purok Officers, Senior Citizens, Youth Sectors, Farmer's Group, Women's Group, and community members. A total number of 28 participants had participated in the participatory risk assessment and had created an action plan for their vulnerabilities and capacities to disasters. Throughout the workshop, several tools were used to assist them to produce an action plan.

On the first day, the first tool that was utilized was the Hazards Assessment Matrix. Additionally, they had completed the seasonal calendar with participants listed out, plotted all events such as season, health, livelihood, economy and major activities in the calendar based on years and month. The activities were followed by Village Watching. Participants were divided into two groups and were assigned by the facilitator to participate in two different areas in the purok. Following that, based on the outcome, they continued by mapping the positive and negatives features based from their observation and then presented the output.

On the second day, the workshop continued with the Element-at-Risk tools, whereby participants identified the group or families with vulnerabilities and capacities. With all the information that they had compiled from the first day, the two groups were asked to propose each team's action plan and present them. Towards the completion of the workshop, participants were asked to prioritize projects that they had wished to implement. The results were:

1. Early Warning System
2. Safe evacuation centers
3. Livelihood (Hog Raising Project)



Hazards and Resources Mapping activity.



DRR Programme Coordinator and Community Organizer processing the outputs of the participants

## OUR WORK - TRAINING //////////////

## SCHOOL PREPAREDNESS PROGRAMME

School Preparedness Programme (SPP) is one of the core programme of MERCY Malaysia's Disaster Risk Reduction (DRR) projects. This programme has been conducted across Malaysia since April 2014. It is designed to raise awareness amongst students on the potential and recognition of hazards they face and to help schools to minimise the risks posed by natural disasters, such as the seasonal floods in many parts of Malaysia. School children are taught simple, hands-on activities to prepare them to take responsibility for their own safety in the event of an emergency.

Among the states that have been visited by MERCY Malaysia were Pahang, Melaka and Kedah, Sabah, Pahang, Kelantan, Terengganu and Labuan. The following table outlines the schools and support where the programmes have been conducted.

On 20th June 2014, MERCY Malaysia kick started its second phase of School Preparedness Programme (SPP).

Phase 1 is known as School Preparedness Workshop (SPW). It is a one-day workshop with school children focusing on DRR and climate change adaptation activities based on the SPP workshop module. Then, Phase 2 is the Follow-up School Preparedness Workshop. It is a half-day workshop with school children to measure the effectiveness of the SPW activities conducted as well as provide a time for school children and teachers to share their experiences, understanding and benefits gained through the SPP.

States	Schools	No.of Participants	No. of Volunteer
Kelantan	• SMK Rantau Panjang	42	5
	• SMK Gual Perioik	40	5
	• SK Sri Rantau Panjang	40	4
Terengganu	• SK Kampung Besut	40	4
	• SK Tengku Ampuan Intan	40	5
	• SK Kampung Nangka	39	4
Labuan	• SK Patau-Patau	21	4
	• SK Bebuloh	40	4
	• SM Sains Labuan	41	4
Melaka	• SMK Canossan Convent	40	15
	• SMK Malim	38	
	• SMK Sg. Udang	38	
Kedah	• SMK Alor Janggus	40	11
	• SMK Megat Dewa	37	
	• SMK Tunku Indera Putera	40	
Sabah	• SK Bawang, Tuaran	43	4
	• SK Pangli, Tenom	38	5
	• SK Gadong, Beaufort	41	6
Pahang	• SMK Muadzam Jaya, Rompin	40	4
	• SMK Selancar, Rompin	39	5
	• SMK Tanjong Gemok, Rompin	38	5



OUR WORK - TRAINING //////////////

## SCHOOL PREPAREDNESS PROGRAMME



Students of SK Kampung Nangka play-acting duck, cover and hold technique.



School children discussing the right card to choose during 'Grab Bag Activity'.



MERCY Malaysia's volunteer helping school children in one of the activities during SPP.



Students trying to solve cross words puzzle.

OUR WORK - TRAINING //

## TRAINING OF TRAINERS FOR SCHOOL PREPAREDNESS PROGRAMME

A total of 30 volunteers, including MERCY Malaysia staff attended the Training of Trainers' (ToT) Programme at MERCY Malaysia Headquarters, in Kuala Lumpur.

The ToT programme aims to teach a group of trainers to lead MERCY Malaysia School Preparedness Programme which is designed to educate, promote and advocate the school community on the importance of disaster risk reduction through informal education.



MERCY Malaysia Programme Assistants, Rabiatul Adawiya and Syakirah Nik Yahya demonstrating the 'nature power OSOM' module to the group of trainers (volunteers).



A group of volunteers discussing on the winning strategy as part of the programme module.

OUR WORK - TRAINING //

## COMMUNITY-BASED DISASTER RISK REDUCTION MANAGEMENT TRAINING OF TRAINERS

**Date : 8th – 11th May 2014****Venue : MERCY Malaysia Philippine Office, Barangay Bantigue**

ORMOC CITY, LEYTE – A four-day Community-Based Disaster Risk Reduction and Management (CBDRRM) Training of Trainers was conducted by MERCY Malaysia last 8-11 May 2014 at the MERCY House, Barangay Bantigue, Ormoc City. There were sixteen participants representing the Office of Civil Defense Region VIII, Ormoc City Disaster Risk Reduction and Management Council (CDRRMC), barangay officials, local civil society organizations (AGYLA, ECLIPSE, Hayag Family Development Center, Pagtinabangay Foundation and Rural Development Institute), and MERCY Malaysia local staff.

The event was facilitated by Ms. Mayfourth Luneta and Ms. Kat Mamparair from the Center for Disaster Preparedness (CDP), an NGO from Manila focusing on disaster risk reduction, and by Ms. Anisha Rachel Mathan and Ms. Syakirah Nik Yahya from MERCY Malaysia's Disaster Risk Reduction Department in Kuala Lumpur, Malaysia. During the four days, the participants were introduced on the key concepts of disaster, risks, hazards, vulnerabilities and capacities. There was a highly interactive discussion amongst government participants on Republic Act 10121, the law that guides all DRR activities in the country. The participants were also guided on how to conduct a CBDRRM Program at the community level, specifically participatory community risk assessments.

One of the highlights of the training was the Village Watching Activity done on the third day. The participants together with the MERCY Malaysia facilitators, walked through Barangay Bantigue to identify factors within the barangay that were positive (such as barangay facilities, presence of transportation, etc) and negative (houses made of light materials, living within the No Build Zone, garbage, etc). They were accompanied by Mr. Dionesio Dalumpines, the Punong Barangay of Barangay Bantigue, and one of his committee members. Based on the identified positive and negative factors, the participants created an action plan on the threats/hazards of the community.

The event ended with everyone committing to implement what they have learnt to the communities in which they work in.





## OUR WORK - TRAINING //////////////

# MERCY MALAYSIA AND THE MALAYSIAN TECHNICAL COOPERATION PROGRAMME (MTCP)

The Malaysian Technical Cooperation Programme (MTCP) for 2014 entitled Emergency Disaster Response and Recovery is well-timed as the need to be effective during the onset of disasters is fundamental now. The programme was launched by Ms. Nur Azlin Abdul Karim, Assistant Director of The Malaysian Technical Cooperation Programme (MTCP) and closed by YBhg. Dato' Dr. Ahmad Faizal Mohd Perdaus, President of MERCY Malaysia.

## Participants

This annual training is organized by MERCY Malaysia and supported by the Malaysian Ministry of Foreign Affairs. There were 30 participants from Bangladesh, India, Nepal, Gambia, Timor Leste, Indonesia, Philippines, Myanmar, Taiwan, Laos, Thailand, Cambodia and Vietnam. Additionally, there were also 5 local participants representing the Ministry of Health, the National Security Council and local Non-Government agencies.

The training course was from June 16 until 20 June 2014.

## Main objectives :

1. To understand the principles and issues in international disaster response.
2. To enhance participants' ability to respond to disasters in effectiveness, appropriate and useful manner and to provide accountability assistance based on proper assessments.
3. To develop the participants' knowledge of recovery practices following an emergency, integrating the holistic concepts of Total Disaster Risk Management (TDRM)

## Speakers

Speakers were from MERCY Malaysia, United Nation's Office for the Coordination of Humanitarian Affairs (OCHA), International Committee of The Red Cross (ICRC), World Food Programme (WFP), Japan International Cooperation Agency (JICA) - Japan, Disaster Relief Team (JDR) and RedR India.

## Topics

Topics such as Disaster Response Preparedness & Coordination Mechanism, Civil Military Coordination, Sphere Standards, Psychosocial intervention in emergency, International Humanitarian Law, Humanitarian Logistics site visit, Corporate, Government & NGO collaboration, Needs assessment and much more had been presented. With these key topics and discussions, knowledge and management acquired for emergency response is elevated. Since its commencement, more than 20,000 participants from 140 countries have benefitted from the various programmes offered under MTCP.

MTCP shares its development experiences and expertise with other developing countries and formulates the programmes based on the belief that the development of a

country depends on the quality of its human resources. The programme forms part of the commitment of the Malaysian Government towards the promotion of technical cooperation among developing countries, strengthening of regional and sub-regional cooperation, as well as nurturing collective self-reliance among developing countries.



Group discussion session during Civil Military Coordination class.



Participants presenting their group discussion on disaster response management.



Participants also had the opportunity to visit the WFP's warehouse in UNHRD, Subang.



OUR WORK - TRAINING //////////////

## VOLUNTEER INDUCTION PROGRAMME (VIP)

### VENUE

Hospital Universiti Kebangsaan Malaysia (HUKM) Cheras and MERCY Malaysia HQ

### DATE

15th March 2014 ( HUKM, Cheras) , 17th May 2014 (MERCY Malaysia's Headquarters) and 13th September 2014 (HUKM Cheras)

### PARTICIPANTS

177 (80 Medical 97 Non-Medical)

### OBJECTIVES

To share Mercy Malaysia's mission, vision and core values

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

### CONTENT OF TRAINING

Volunteering

- Volunteers' responsibilities and commitment
- Training and deployment opportunities
- Rules and principles to abide
- The Code of Conduct



Encik Shah Fiesal Hussain, our Head of Volunteer Management Department briefing the participants.

OUR WORK - TRAINING //////////////

## BASIC MISSION TRAINING FOR 2014

### VENUE

Pusat Latihan Pasukan Gerakan Am (PLGPA), Ulu Kinta, Perak

### DATE

13th-15th June 2014 and 7th-9th November 2014

### PARTICIPANTS

30 Medical and 28 Non-Medical

### OBJECTIVES

To share Mercy Malaysia's mission, vision and core values

- To inculcate the true spirit of volunteerism and professionalism among participants
- To prepare volunteers for overseas mission
- To obtain feedback from volunteers about their expectations and concerns
- To enhance volunteers on basic mission technical skills and basic survival skills
- To enhance and promote teambuilding and leadership/fellowship skills during mission deployment

### CONTENT OF TRAINING

- Security Checkpoint
- Set up a camp site
- Radio communication
- Evacuation procedure
- Medivac practice
- UN Safety and security protocol/procedures
- Sphere Standards
- Basic First Aid
- Navigation Skills
- Vehicle inspection



Head of Dept. VMD, Shah Fiesal Hussain gives participants a short briefing before entering the camp site.



Certificates handover to the trainer of Pusat Latihan Pasukan Gerakan Am (PLGPA) by En Ahmad Faezal Mohamed, Executive Director of MERCY Malaysia.



OUR WORK - TRAINING //////////////

## EMERGENCY RESPONSE UNIT TRAINING PROGRAMME (LECTURE)

### VENUE

Dewan Kuliah 1, Hospital Universiti Kebangsaan Malaysia (HUKM), Cheras and Dewan Serbaguna Tingkat 9, Hospital Universiti Kebangsaan Malaysia (HUKM), Cheras

### DATE

26th and 27th April 2014 and 22nd – 28th September 2014

### PARTICIPANTS

44 Medical and 21 Non-Medical

### OBJECTIVES

To provide the participants with competencies skills for an Emergency Response Unit (ERU) mission and volunteers to acquire the right competencies in preparing and setting up ERU related requirement during mission deployment.

### CONTENT OF TRAINING

- Emergency Response Unit (ERU) introduction
- Accountability and Volunteerism
- International Humanitarian Law
- Code of Conduct
- Stress Awareness
- Security and Communication
- SPHERE standards and Field Hospital. Logistic consideration
- Emergency procedures and Patterns of Injury in the Field
- Field Hospital procedures and processes





OUR WORK - TRAINING //////////////

## EMERGENCY RESPONSE UNIT FIELD TRAINING EXERCISE (FTX) PROGRAMME

### VENUE

TNB Integrated Learning Solution-ILSAS, Bangi

### DATE

17th – 19th October 2014

### PARTICIPANTS

18 Medical and 6 Non-Medical

### OBJECTIVES

- To provide the opportunity for different working groups of the Emergency Response Units (ERU) to work together, plan and implement a full ERU set-up
- To strengthen the team spirit and work ethics amongst participants of the ERU



OUR WORK - TRAINING //////////////

## BASIC LIFE SUPPORT

Basic Life Support programme is an effort by MERCY Malaysia to provide the lifesaving skills to the public as well as to the staff of MERCY Malaysia. This programme is organized annually by MERCY Malaysia to educate participants with basic Cardiopulmonary Resuscitation (CPR) techniques and practical training. There was a total of 12 participants in the half-day programme, which included 4 staff from MERCY Malaysia as well as 8 volunteers. The session was conducted by Dr. Muhammad Hakim Nordin from My heart Sdn. Bhd. Among the activities conducted by Dr. Muhammad Hakim Nordin are Cardiopulmonary Resuscitation (CPR) and techniques in responding to choking in adults, children and infants. All participants were given several minutes to practice CPR before they are required to take the CPR practical test for the certification. The programme concluded with an exchange of tokens of appreciation from MERCY Malaysia to Dr. Hakim and team.



Dr Hakim sensing the pulse of one of the participants.



One of MY Heart Sdn. Bhd. staff demonstrating how to perform compressions to the affected baby.



One of My Heart Sdn. Bhd. staff presenting a head tilt and chin lift method.









# ACKNOWLEDGEMENTS

"Helping others is the oxygen of paradise."  
— J.F. Anstead



ACKNOWLEDGEMENTS //

## SECRETARIAT AS OF MAY 2015



Faezal



Megawati



Zu Mian



Nani



Mariam



Katrien



Rossimah



Yesotha



Qurratu



Shereen



Zaheera



Jillian



Herman



Azizah



Lili



Yunn Yunn



Shah Fiesal



Azril



Ain



Idah



Wiya



Syakirah



Shahril



Said



Norazam



Yati



Nusrat



Rachel



Ezza



Masniza



Zaleha



Lohes



Azura



Hanafiah



Jeffry



Rizal



Zila



Syafa



Zuri



Hamizah



Alia



Badlizan



Shamala



Siti



Rijal



Shafiqqa



Temenggong



Edna



Hisyam



Hasnizan



Sayidah

## ACKNOWLEDGEMENTS //

## SECRETARIAT AS OF MAY 2015

**Ahmad Faezal Mohamed**  
*Executive Director*

**Nur Aini Ahmad**  
*Personal Assistant*

**Zuraidah Mian**  
*Director Strategic Planning ,  
Organizational Development and  
Stakeholder Engagement*

**Megawati Md Rashidi**  
*General Manager, Communications &  
Fundraising*

**Mariam Jemila Zahari**  
*ADRRN Programme Officer*

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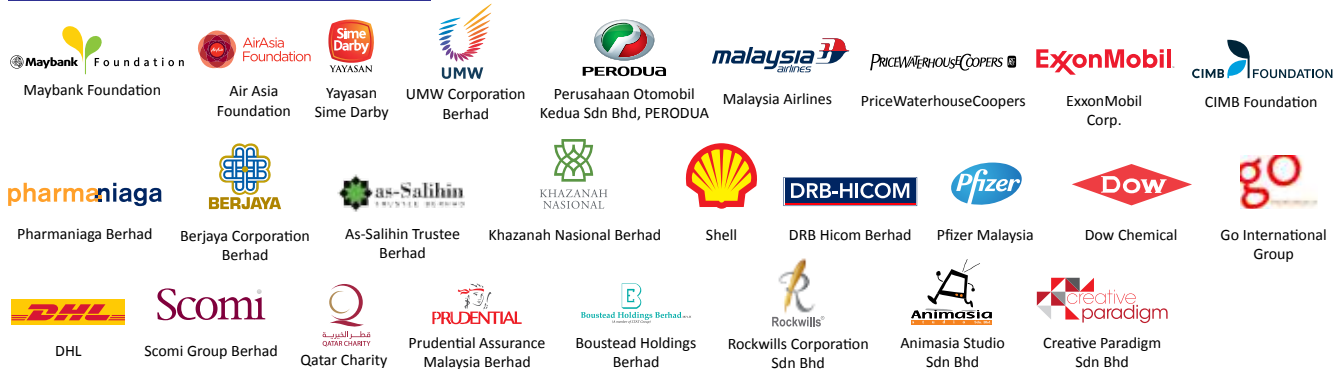
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Mohd Said • Ahmad Zahiri Zakaria • Ahmad Zaki, Nurizzati Izyan • Aida Baharuddin • Aida Md Yusof • Aida Remy Mohd Aliff • Aidi Larry • Aina Nur Azmi • Aiza Amierah Abdull Ropha • Alawiyah Syed Hussien • Alfred Peter • Aliaa Junid • Alifah Ahmad • Alizah Abdul Malek • Alwani Mohd Zuhudi • Amalia Mahamud • Amilia Sharna Arshad • Amirah Mohd Fauzi • Amirul Rahimi Shamsudin • Amisam Hamzah • Anbarasu A/L Ramalingam, Dr. • Andi • Ang Wen Fang • Anie Angela Anap • Anita @Ani Abdul Malek • Annie a/p Kolandaisamy • Ashraf Saharudin • Asmidar Azmin • Asni Misri • Assilah Fatin Mohd Ghous • Ayu Akida Abd Rashid, Dr. • Aza Izati Mokhtar • Azaizirawati Ahmad • Azhana Othman • Azhar Abdul Aziz • Azlia Zainal Anuar • Azlin Alwi • Azlina Hani Zulkefli • Azlina Roszy Mohamad Ghaffar • Azlina Wati Nikmat, Dr. • Azmin Ramlie • Aznan Shaari • Azry Shamsury • Azzry Mohamad, Dr. • Azzura Nordin • Baba Md. 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Joseph (Dr) • Cornelia Dausi • Danny Toh Seng Khoon • Darlina Hani Fadil Azim • Darwis Anak No'el • Datu Mohd Amyril Abduludun, Dr. • Daud Md Dawi • Debbie Annabell Peter Bernard • Deepa Kesavan • Dius Jais • Dzulkarnaen Ismail • Eddy Robert • Edna Stephanos • Edris Eden • Ee Chai Seah (Alice) • Ehfa Bujang Sawawi, Dr. • Elsie Liaw Sze Ying • Emy Shahida Zulkifli • Eng Sue Ee, Dr. • Enroe Raindy Sipail • Erwin Khoo Jiayuan, Dr. • Esa Hosen • Eunice Lim Lee Sha, Dr. • Evelyn Marie Steven, Dr. • Faezah Zulkifli • Fahmi Hassan • Fahmi Pramaditto Azmi • Faizol Mukhrij Mohd Mokhtar • Faradila Abd Malek • Fatihatul Zuriati Makmon • Fatimah Zahrah Mohd Badry • Fatin Aqilah Hasnan • Fatin Nadia Zahari • Fatin Najihah Ahmad Jefiruddin • Fauzi Tajul Arifin • Fauziah Leiman • Flora Fedilis • Flora Joseph • Fong Hui Chyi, Dr. • Foo Je Sie, Dr. • Foo Sze Yuen, Dr. • Frances Lim Chin Pei • Francis Aniu • Ganapati a/l Subramaniam, Dr. • Geogina Akiah • Gerald Daniel Blondel • Grace Elaine Sabinus • Gunasegaran Doraisamy • Hafizi Shukri • Hafizuddin Halim • Haimey • Halimatus Saadiah Mat Saad • Hallida Ramli • Hamdan Daud • Hamdan Mohamad • Hameedur Rehman • Hamim Farhan Shamardi • Hamimah Ibrahim, Dr. • Hanafiah Harunarashid, Dr. • Hani Yasmin Yahaya • Harith Abdul Malek, Dr. • Harith Fakhrudin Abdul Malek • Hariyati Shahrina Abdul Majid, Dr. • Harizah Hatim, Dr. • Haslezah Saelih • Haslinda Khalid • Hasliza Ibrahim • Hasliza Talib • Hasnydzam Hassan • Hazalina Sarkawi • Hazidah Abd Aziz • Haziqah Mohd Hanapiah • Hazrool Rizal Abdul Rahim • Helen Lasimbang, Dr. • Helmy Hazmi, Dr. • Helvia Jaimol • Hemavilashini a/l Aremugam • Herman Joseph • Hidayatul Mardhiah Ahmad Rozi • Ho Loon Shin • Ian Hanafiah Mohidin • Ida Azriena Azis • Idzani Fiqri • Idani Fiqri Azemi • Ilham Ameera Ismail • Irene Teng Lai Yen • Irma Suryani Mohd Yusoff • Iznyy Ismail • Izuan Shukri Mohamed Arif • Izzat Zaid • Jahirah Jalal Abidin • Jamaah Mohd • Jamilah Hasbullah • Jane Sandra Mahin • Jasni Ramlee Jusof • Jeffry Salleh • Jerry Ong Cheong Beng • Jeyanthi Vengadasalam, Dr. • Jeyasilan a/l Karpudewan • Joe Fhang • Joel Low Jia Liang • John Linus • Johnny Lajunip • Johnny Uvang Ajeng • Jolumin Sipail • Joseph Gombis • Joseph Tau Katip • Juhari Jamaludin • Justina Eddy • Juwariah Ariffin • Juwarina Abd Manap • Kalbana a/p Supuramaniam • Kalsum Ramlah • Kamarul Hashimy Hussein, Dr. • Kanit Tha Deang, Dr. • Karshini A/P Jeya Pirathaba, Dr. • Kartinaigus Asril • Kasuma Jamaluddin • Kee Ee-Kim, Dr. • Keith Tye Sue Kiat • Khairul Azmi Abd. Rashid • Khairul Azlin Tajudin • Khairul Fahmee Mat Khairi • Khairul Helmy Mohamad • Khalilah Ibrahim • Khamsiah Mohamed Ali • Kinilius Sadampal • Krishnaveni A/P Paramanathan • Kristy Ling Ching Tze • Ku Wai Lum • Kuanmih Kimjuan • Kunal Doshi, Dr. • Kung Siew Hwei • Kursiah Mohd Razali, Dr. • Laura Justine • Lee Chen Ying • Lee Jia Shuen, Dr. • Lee Kok Han (Raymond) • Lee Kuok Tiung, Dr. • Lee Meng Yit (Leni), Dr. • Lee Voon Yee • Lee, Keng Mun • Leland Shane Chong Wei Ken • Lewis J Moore • Liaw Yun Haw, Dr. • Lili Shuhaina Abdul Rahman • Lim Jyh Hann (Trevor), Dr. • Lim Maureen • Lim Poh Ling, Dr. • Lim Si Huan • Lina Simanjug • Lindy Bak Li Mei • Ling Fei Wen • Lionel Eric A/L Benjiman • Liu Moy Yub • Lizan Nazardin • Loh Sit Fong • Lok Shui Fen @Adrian • Lok Loshini A/P Sockanathan • Low Tze Ken • Lynn Ko Wei Linn, Dr. • Lynne Yong Ee Lin • Lyselle Lip Cheak Tan • Mahbub Hasan, Dr. • Maisarah Mohammad • Mak See Man • Mardiana Mohamad • Maria Zalina Abdul Rahim • Martin Jandom • Martini Michael • Mary Abas • Mary Angela Sipapun • Masdianie Mansi • Mashitah Ishak • Masniza Mustaffa • Mastura Md Rodzi • Matilda Xavier • Maziah Marzuki • Melia Wong Yui Suen • Merikan Aren • Michelle Cheong • Mimi Iznita Mohamed Iqbal • Miraen Kiandee • Mohamad Yusri Yusoff • Mohamad Ayof Bajuri, Ar. • Mohamad Faez Mohd Noor • Mohamad Fakri Che Ghani • Mohamad Faris Rosnani • Mohamad Firdaus Abdul Rashid • Mohamad Hasri Majdi • Mohamad Ismudi Abdul Hamid • Mohamad Khirul Anuwar Ahamad • Mohamad Nuruddin Aziz • Mohamad Syah Al Hafees Mohammad • Mohamad Yazid Mohd Sabri, Dr. • Mohamed Asri Anverdeen • Mohamed Hanafi Ramli, Ir. • Mohamed Noor Suleiman • Mohammad Fadzli Saari • Mohammad Hazizi Padzil • Mohammad Iqbal Omar, Dr. • Mohd Dasuki Hamidi Bin Mohd Zaini • Mohd Ferdaus Isa, Dr. • Mohd Firdaus Idris • Mohd Hairul Md Lazim, Dr. • Mohd Haizal Mohd Nor, Dr. • Mohd Hasrul Hafis Radali @ Dali • Mohd Iskandar Andrew Abdullah • Mohd Ismail Hashim • Mohd Khairuladzuhan Abd Khalip • Mohd Khasyfil Aziz Abd Khalit • Mohd Radzi Jamaluddin • Mohd Shabri Seman • Mohd Shahrizam Kamal • Mohd Shuhairi Mat Yasin • Mohd Zulkifli Mohd Zain • Mohd. Noor Amin Mohamad Norman • Mohd. Iskandar Andrew • Mona Ahmad • Monesh Pillai, Dr. • Muhaimin Muhamad Ruan • Muhamad Amir Shazli Magli • Muhamad Arsad Saini • Muhamad Hilmi Ibrahim • Muhamad Nadzren Mohd Nasir • Muhamad Noorhisyam Salleh, Dr. • Muhamad Nurzed Zaqquan • Muhamad Safwan • Muhamad Afiq Mohd Hamsam • Muhamad Amal Syakir Abd Samad • Muhamad Arif Abd Rashid @ Abd Aziz • Muhamad Faris Syahmi Hasbullah • Muhamad Hapis Jamil • Muhamad Hazeq Abd Majid • Muhamad Khairul Naim Roslan • Muhamad Naufal Mohd Salleh • Muhamad Safwan Norizan • Muhamad Syafiq Ismail • Muhamad Syahrir Anuar • Muhamad Zaid Sahak • Muhamad Zamir Amran • Munira Hamdan • Munirah Ab Wahab • Nadiah Lotfy, Dr. • Nafisah Mohd Arabee • Najiha Jalil • Najwa Suhaili Md Zin • Nariman Singmae, Dr. • Nasaruddin Naquiddin • Nasrinah Jabirin • Natasha Razali, Dr. • Naz Adliana Qistina Adnan • Nelson Dino • Nereus Musu • Ng Eng Huei • Ng Khai Keam, Dr. • Ng Kok Wei, Dr. • Nicholas Anak Asu • Nicole Chen Lee Ping • Nik Shahirah Nik Hisham • Nithiaraj Ramanathan • Noor Aina Ismail • Noor Azhani Zakaria • Noor Eliya Kamaruzaman

## ACKNOWLEDGEMENTS //

## VOLUNTEERS

## Domestic Mission (cont.)

• Noor Hafizah Mohammad Salleh • Noor Hidayah Abdul Halim Chua • Noor Hidayu Mohd Ali • Noor Ibrahim Mohamed Sakian • Noor Khairun Nisa Noor Harun • Noor Liyana Binti Zahari • Noor Saadiah Zainal • Noor Suhadah Hamzah • Noor Syaeera Nasir • Noor Zubaidah • Noor Zubaidah Shahimi • Noorhayati, Kamisan • Nor Amirah Afiah Yazid • Nor Ashikin, Ali • Nor Azlin, Mohamed Nor • Nor Dayana Mohd Ali • Nor Hasimah Abu Hassan • Nor Hazla Mohamed Hafiah, Dr. • Nor Huda Zainudin • Nor Sakinah Jalil • Nor Suhaiza Md Khalid • Nor Zetty Hazra Abd Rahim • Noraini Arshad • Noraniza Abdul Rahman • Norashikin Kader Mohd, Dr. • Noratikah Kamarudin • Norfa Fatimah Mohd Fauzi • Norhabibah Masli • Norhaslinda Rizwan Saneer • Norhayati Arif • Norhayati Paraman • Norherah Syed Omar, Dr. • Norjamaiah • Norjamaiah Abd Sane • Norliza Suut • Norma Musa • Normah Atan • Norsuhana Mohd Noor • Norzumaayati Goloi • Nur Alia Mod Zaky, Dr. • Nur Amelia Salim • Nur Amirah Hassan • Nur Aqilah Abdul Razib • Nur Arfah Zaini • Nur Arina Nafisah Mohd Aznan • Nur Ashikin Zainul Abidin • Nur Atiqah Mohamed Nasir • Nur Baiti Halim • Nur Balqis Noramlan • Nur Faraheen Abd Aziz • Nur Farhani • Nur Hafizah Amom • Nur Haidzat Abd. Wahid • Nur Hanis Mahad • Nur Hilda Ramli • Nur Hilda Zamri • Nur Hillia Ramli • Nur MaizatulAkmaliza Muzaiyin • Nur Mohd Ikhrum Amar Nazair • Nur Nabilah Mohd Nasir • Nur Nazurah Mohd Nasir • Nur Syazwani Omar • Nur Zaharah Abdul Rahim • Nuraihan Hashim • Nuramirah Abdul Razak • Nurfadhilah Bahari • Nurhidayah Ab. Rahim • Nurjannah Salleh • Nurl Izzaty • Nursyafinna Saiful Bahri • Nurul Afiah Sahat • Nurul Aiman Ramli • Nurul Fathia Mohamad Noor • Nurul Hanani Hanapi • Nurul Hanim, Dr. • Nurul Hidayah Othman • Nurul Huda • Nurul Izzati Abdul Latif • Nurul Izzati Shaharuddin • Nurulezzah Abdul Manan • Nurulhuda Mhd Non • Nurny Zhafrayna Mohd Fahros • Ong Cheong Beng (Jerry) • Ong Hui Thing • Ong Siow Ying • Ozrinalifah Omar, Dr. • Padma Devi Narayanan • Pakhrul Akmar Mohamed • Pang Jo Ann, Dr. • Parasul Basang • Pelidah Panus Taie • Peter Gan Kim Soon, Dr. • Pheh Kai Shuen • Premala A/p Muthukumarasamy, Dr. • Prisaana Ramakrishnan, Dr. • Putera Amirul Amiruddin • Putri Azureen Megat Jamal Al Arif • Putri Intan Dianah • Raffiza Rusdy • Rafidah Mashudi • Rahmawati Hasbi • Raja Nor Azwina Raja Jaafar • Ramasamy Naidu, Pallie Naidu • Raymond Leow Foo • Razali Idris, Ir. • Razali Kamisan • Raziman Mohd Rashid • Razitasham Safii, Dr. • Reena Rao • Ridzwan Yunin • Rinane Mohd Saleh • Riza Azra Abu Bakar • Rohaidah Che Daud • Rose Sengka • Rosfarahani Aida Zainal Abidin • Royston Matthew Deng • Rozainiee Abdullah • Rubiatul Adibah Zulkifli • Ruwaida Isa, Dr. • Sabariah Sani • Sabeda Diris Siagian • Saffa Atifah Mohd Sidik • Saiful Anuar Othman • Saifuzzaman Othman • Saila Mohd Saleh • Sakinah Idris • Salfarinah Kahar • Saliza Samiran • Sallehan Ismail • Salmah • Salwa Kassim • Sam Anak Jamey • Sam Jeng Mun • Samsinah Othman • Sanford Chin • Sarjit Ramday • Sathiyasuriya a/p Aremugam • Seng Yew Wei (Jason) • Shaffingi, Shafazliana • Shahrizal Mohd Isa • Shahrul Nizam Othman • Shalimar Abdullah, Dr. • Shamsul Kamar • Shashi Indran Naidu, Dr. • Shazana Roslan • Sherman Ramday • Shze Been Tham • Silawati Hashim • Sim Wen Sann, Dr. • Sindhu Nair • Siong Choi Wan • Siti Aishah Hanin Ramli • Siti Aishah Tajudin, Dr. • Siti Aminah Jamaluddin, Dr. • Siti Asiah Adnan • Siti Asmahanum Ab Manan • Siti Hawa Saad • Siti Khomariah Zainol • Siti Mashkura Abdul Rahim • Siti Nadhirah Sulaiman • Siti Nadiyah Basri • Siti Najwa Che Hasim • Siti Natasha Abd Rahman • Siti Nor Rahimi Abd Razak • Siti Norhayati Loman • Siti Normah Ramli • Siti Nur Aisyah Pakhrul Akmar • Siti Nur Amalina Kamaruddin • Siti Nur Azura • Siti Nuraini • Siti Rahayu Che Husin • Siti Rosnani Hashim • Siti Zuraidah Mohammad • Sn Doris Dadius • • Sobrina Mohd Khazin, Dr. • Sofia Syahiera Badrol Hisham • Soh Xiao Thong (Sandra) • Sri Theysaini D/O Nahasaram • Suhaina Yaakub • Suzyana Abdullah, Dr. • Syadzaratunnuur Abd Aziz • Syarifah Azizah Wan Ahmadul Badwi • Syarifah Hanieah Syed Idrus • Syaza Khairunnisa Zainol • Syaza Raehah Mohamad Haris • Syed Abdul Haris Syed Mustaffa • Syed Mohd Rizuan Syed Mohammad • Syed Zahid Syed Mohammad • Sylvia Lim Sze Wei, Dr. • Tajul Edrus Nordin • Tan Chia Pei (Janice), Dr. • Tan Huang Chew (Adam) • Tan Seok Hong, Dr. • Tan Siao Han (Elise) • Tan Sook Hui • Tan Sue Chen • Tengku Muhammad Ridzauddin Tengku Abdul Halim, Dr. • Tengku Muhd Ashraf Tengku Nasruddin • Tengku Putri Zaharah Tengku Bahanuddin, Dr. • Tharmarajah A/L Nagalingam • Thashwini Rajandran • Then Jun Xiang, Dr. • Theodora Hemalata, Dr. • Tika Dalimunthe • Ting Mei Chan (Amanda) • Toby Paul Frederick • Toh Chin Ping • Tonny Moniring • Tony Liew Ye Onn • Toong Moey Wong • Tsen Sui Fah (Michael) • Umi Izzatti Saedon • Ummi Thuraiya Ahmad Zaki • Uyo Jau • Vanessa See, Chiao Hui • Vannessa Jacquelynne Benedict • Veena Pillai, Dr. • Venessa Venda Vitales • Victoria O'Callaghan • Vigneswaran A/L Kunasakaran • Vivegan A/L Doraisamy, Dr. • Wan Amanina Najiha Zainal • Wan Azamima Wan Abd Rahman • Wan Husni Zaim Wan Muhamad • Wan Mohamad, Wan Nur Azreen • Wan Nur Syafiq • Wan Nur'Aina Wan Ahmad Bukhari • Wan Ramlah Wan Mohd Tahir • Wan Siti Norzuraihan Wan Mahmood, Dr. • Wan Yusoff Wan Yuslimudin • Widyadashini a/p Kashinathan • Wilander Law Cheng Guan, Dr. • Wong Lee Kiong (David) • Wong Ling Vuan, Dr. • Yang Su Lan • Yanti Yasim • Yarina Yunan • Yeoh Shin@Yew Shin • Yii Siew Hie, Dr. • Yogeswary A/P Thiagarajan • Yong Siew Yen • Yunice Ong Ee Lan • Yuslana Fadil • Yusof Hassim, Sr. • Yusry Abu Hassan • Zabidi Yusof • Zackry Zulkarnain Zahedi • Zakaria • Zariikh Hafizah Saqina Zuberi • Zatil Ezzi Zulkifli • Zhang Yujia • Zia-U-Bahkt Sultan Shah • Zubaidah Jamil Osman • Zulaikha Awang • Zulhaqeemi Ahmad • Zulhazme Zaidi • Zulkarimah Zainudin, Dr. • Zunaidah Ab Hassan • Zuriani Basri • Zyneelia Husain, Dr.

## International Mission

Ahmad Sazili Hj Mohamed • Ahmad Suhaimi Abdul Majid, Sr. • Aida Jaafar, Dr. • Ariffin Abdul Manaf • Aung Lwin Oo, Dr. • Azrim Mirza • Chng lay ling, Dr. • Dzulkarnaen Ismail • Farizal Fadzil, Dr. • Lai Hou Yee, Dr. • Lew Chee Kong, Dr. • Lucy Chan, Dr. • Mohamad Ayof Bajuri, Ar. • Mohamad Hanafi Ramli, Ir. • Mohamad Ikram Mohammed Saleh, Prof. Dr. • Mohamad Iqbal Omar @ Ye Htut, Dr. • Mohd Fairus Salehen • Muhammad Hapis Jamil • Nasuha Yaacob, Dr. • Nawaz Hussain Mohamed Amir, Dr. • Nishamini Subramaniam, Dr. • Nurul Azwa Mohamad Noor, Dr. • Rosliza Parumo, Dr. • Rostam Ramli • Sherrie Chong Mei Yee, Dr. • Silviana Bonadei • Siti Mazlipah Ismail, Dr. • Syed Azwan Syed Ali • Syed Jefrizal Syed Jamal, Dr. • Tajul Edrus Nordin • Yusof Hassim, Sr. • Zolkepli Hj Yahaya, Dr. • Zullaili Zainal Abidin





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MERCY  
MALAYSIA Healing Across Borders

Apo-Ranitidine  
Hydrochloride 150mg

Beclate 50  
Beclomethasone Dipropionate 50mcg

Melicron

FINANCIAL STATEMENTS //////////////

## SOCIETY INFORMATION

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

(Registered under the Societies Act, 1966)

(Society No: 1155)

#### **PRESIDENT**

Dato' Dr. Ahmad Faizal Mohd Perdaus

#### **VICE PRESIDENT I**

Dr. Heng Aik Cheng

#### **VICE PRESIDENT II**

Haji Norazam Ab Samah  
(21st June 2014 - 30th September 2014)

#### **HONORARY SECRETARY**

YM Raja Riza Shazmin Raja Badrul Shah

#### **ASSISTANT HONORARY SECRETARY**

Dr. Hariyati Shahrina Abdul Majid

#### **HONORARY TREASURER**

Ir. Amran Mahzan

#### **COMMITTEE MEMBERS**

Mr. Tee Kam Bee  
Ar. Mohamad Ayof bin Bajuri  
Assoc. Prof. Dr. Shalimar Abdullah

#### **CO-OPTED MEMBERS**

Dr. Jitendra Kumar Shantilal N. Tejani  
Dr. Mohammad Iqbal Omar  
Dr. Mohamed Ashraff Mohd Ariff  
Dr. Norzila Mohamed Zainuddin  
Mr. Harmandar Singh A/L Naranjan Singh

#### **AUDITORS**

Azuddin & Co. (AF 1452)  
Chartered Accountants

#### **PRINCIPAL PLACE OF OPERATION**

No. 4, Jalan Lenggak Golf,  
Off Jalan Tun Razak,  
55000 Kuala Lumpur.

#### **BANKERS**

Bank Islam Malaysia Berhad  
CIMB Bank Berhad  
Malayan Banking Berhad  
RHB Bank Berhad



## REPORT OF THE AUDITORS

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

(Registered under the Societies Act, 1966)

(Society No: 1155)

#### **Report on the Financial Statements**

We have audited the financial statements of MERCY Malaysia ("the Society"), which comprise the statement of financial position as at 31 December 2014 of the Society, and statement of profit or loss and other comprehensive income, statement of changes in charitable funds and statement of cash flows of the Society for the year then ended, and a summary of significant accounting policies and other explanatory notes as set out on the following pages.

#### *Executive Council members' Responsibility for the Financial Statements*

The Executive Committee of the Society are responsible for the preparation and fair presentation of these financial statements in accordance with Malaysian Financial Reporting Standards, International Financial Reporting Standards 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 Society 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 Society 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 our audit opinion.

FINANCIAL STATEMENTS //////////////

## REPORT OF THE AUDITORS

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

(Registered under the Societies Act, 1966)

(Society No: 1155)

#### *Opinion*

In our opinion, the financial statements have been properly drawn up in accordance with Malaysian Financial Reporting Standards, International Reporting Standards and the Societies Act, 1966 in Malaysia so as to give a true and fair view of the financial position of the Society as of 31 December 2014 and of its financial performance and cash flows for the year then ended.

#### **Report on Other Legal and Regulatory Requirements**

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

#### **Other Matters**

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



**AZUDDIN & CO.**

AF 1452

Chartered Accountants

Kuala Lumpur,

Date: 27 May 2015



**AZUDDIN BIN DAUD**

Partner

2290/07/016/(J)

FINANCIAL STATEMENTS //

## EXECUTIVE COUNCIL REPORT

**PERSATUAN BANTUAN PERUBATAN MALAYSIA**  
**(MALAYSIAN MEDICAL RELIEF SOCIETY) (MERCY MALAYSIA)**  
(Registered under the Societies Act, 1966)  
(Society No: 1155)

### Executive Councils' report for the year ended 31 December 2014

The Executive Council have pleasure in submitting their report and the audited financial statements of the Society for the financial year ended 31 December 2014.

### Executive Council of the Society

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

#### PRESIDENT

Dato' Dr. Ahmad Faizal Mohd Perdaus

#### VICE PRESIDENT I

Dr. Heng Aik Cheng

#### VICE PRESIDENT II

Haji Norazam Ab Samah  
(21st June 2014 - 30th September 2014)

#### HONORARY SECRETARY

YM Raja Riza Shazmin Raja Badrul Shah

#### ASSISTANT HONORARY SECRETARY

Dr. Hariyati Shahrina Abdul Majid

#### HONORARY TREASURER

Ir. Amran Mahzan

#### COMMITTEE MEMBERS

Mr. Tee Kam Bee  
Ar. Mohamad Ayof bin Bajuri  
Assoc. Prof. Dr. Shalimar Abdullah

#### CO-OPTED MEMBERS

Dr. Jitendra Kumar Shantilal N. Tejani  
Dr. Mohammad Iqbal Omar  
Dr. Mohamed Ashraff Mohd Ariff  
Dr. Norzila Mohamed Zainuddin  
Mr. Harmandar Singh A/L Naranjan Singh



## STATUTORY INFORMATION

### **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:-

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

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

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

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

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

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

In the opinion of the Executive Council, the results of the operations of the Society for the financial year ended 31 December 2014 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.

FINANCIAL STATEMENTS //

## STATEMENT BY EXECUTIVE COUNCIL

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

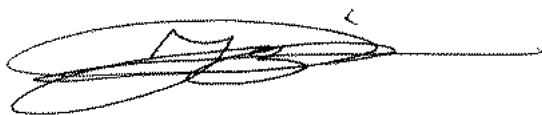
(Registered under the Societies Act, 1966)

(Society No: 1155)

#### Statement by Executive Council

We, The President and Honorary Secretary of PERSATUAN BANTUAN PERUBATAN MALAYSIA (MALAYSIAN MEDICAL RELIEF SOCIETY) (MERCY Malaysia) state that, in our opinion, the financial statements set out on following pages, are drawn up in accordance with Malaysia Financial Reporting Standards, International Financial Reporting Standards and the Societies Act 1966 in Malaysia so as to give a true and fair view of the state of affairs of the Society at 31 December 2014 and of its financial performance and cash flows of the Society for the year ended on that date.

On behalf of the Executive Council:



DATO' DR. AHMAD FAIZAL MOHD PERDAUS  
President



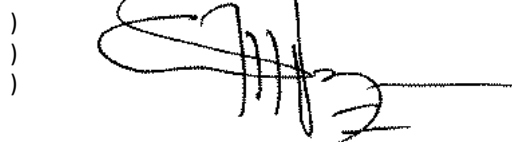
YM RAJA RIZA SHAZMIN RAJA BADRUL SHAH  
Honorary Secretary

Kuala Lumpur,  
Date: 27 May 2015

#### Statutory declaration by Treasurer

I, IR. AMRAN BIN MAHZAN, being the Honorary Treasurer primarily responsible for 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 the 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 Federal Territory on 27 May 2015



IR. AMRAN BIN MAHZAN

BEFORE ME :



SAMSIAH BINTI ALI (No. W 589)  
PESURUHJAYA SAMPAH  
NO. 142B, TKT BAWAH,  
ECN UMNO SELANGOR  
JALAN IPOH, 51100  
KUALA LUMPUR W.P.

FINANCIAL STATEMENTS //

## FINANCIAL STATEMENTS

### Statement Of Profit Or Loss And Other Comprehensive Income For The Financial Year Ended 31 December 2014

	Note	2014 RM	2013 RM
<b>INCOME</b>			
Donations	4	22,614,992	16,730,874
Annual fund raising dinner	5	8,133	98,163
Membership fee	6	2,060	1,800
Other income	7	473,102	1,168,385
		<u>23,098,287</u>	<u>17,999,222</u>
<b>Less : EXPENSES</b>			
Charitable expenditure	8	(12,614,388)	(11,832,689)
Operating expenses	9	(3,226,909)	(2,740,426)
		<u>(15,841,297)</u>	<u>(14,573,115)</u>
<b>SURPLUS FOR THE FINANCIAL YEAR</b>		<u>7,256,990</u>	<u>3,426,107</u>

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



FINANCIAL STATEMENTS //

## FINANCIAL STATEMENTS

### Statement Of Financial Position As At 31 December 2014

	Note	2014 RM	2013 RM
<b>ASSETS</b>			
<b>Non-current assets</b>			
Property, plant and equipment	10	811,466	324,621
<b>Current assets</b>			
Inventories	11	226,666	517,985
Other receivables	12	1,189,545	1,148,938
Cash and cash equivalent		20,087,696	13,217,014
		<u>21,503,907</u>	<u>14,883,937</u>
<b>Current liabilities</b>			
Other payables and accruals		<u>421,622</u>	<u>571,797</u>
		<u>421,622</u>	<u>571,797</u>
<b>Net current assets</b>		<u>21,082,285</u>	<u>14,312,140</u>
<b>NET ASSETS</b>		<u>21,893,751</u>	<u>14,636,761</u>
<b>Financed by:</b>			
Charitable funds		21,893,751	14,636,761
<b>MEMBERS FUND</b>		<u>21,893,751</u>	<u>14,636,761</u>

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

## FINANCIAL STATEMENTS //

## FINANCIAL STATEMENTS

Statement Of Changes In Charitable Fund  
For The Financial Year Ended 31 December 2014

	2014 RM	2013 RM
Balance as at 1 January	14,636,761	11,210,654
Surplus for the year	7,256,990	3,426,107
<b>Balance as at 31 December</b>	<b>21,893,751</b>	<b>14,636,761</b>

Charitable funds are consists are:

Unrestricted fund	2,912,476	4,625,144
Restricted funds :-		
Afghanistan	219,937	99,657
Bangladesh	91,438	101,930
Bosnia	782,011	-
Combodia	-	159,536
India	12,758	17,198
Iraq	27,589	-
Indonesia	-	95,649
Japan	21,742	21,742
Malaysia	7,260,219	1,836,092
MMUK	275,000	-
Myanmar	-	730,525
Palestine	8,870,741	3,074,586
Philippines	496,787	2,270,180
Sudan	2,698	-
Somalia	29,302	53,337
Special Project-ADDRN	292,768	1,307,664
Sri Lanka	25,940	42,567
Syria	572,345	200,954
	18,981,275	10,011,617
	<b>21,893,751</b>	<b>14,636,761</b>

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

FINANCIAL STATEMENTS //

## FINANCIAL STATEMENTS

### Cash Flow Statement For The Financial Year Ended 31 December 2014

	Note	2014 RM	2013 RM
<b>Cash flows from operating activities</b>			
Surplus for the year		7,256,990	3,426,107
Adjustments for:			
Depreciation		181,261	316,878
Interest income		(246,902)	(254,049)
Surplus before working capital changes		7,191,349	3,488,936
Changes in working capital:			
Decrease in inventories		291,319	140,768
Increase in other receivables		(40,607)	(531,969)
(Decrease)/Increase in other payables		(150,175)	127,485
Cash generated from/(used in) operating activities		7,291,886	3,225,220
Interest received		246,902	254,049
<b>Net generated from/(cash used) in operating activities</b>		<b>7,538,788</b>	<b>3,479,269</b>
<b>Cash flow from investing activities</b>			
Purchase of property, plant and equipment	13	(668,106)	(4,840)
<b>Net cash used in investing activities</b>		<b>(668,106)</b>	<b>(4,840)</b>
<b>Net increase/(decrease) in cash and cash equivalents</b>		<b>6,870,682</b>	<b>3,474,429</b>
<b>Cash and cash equivalents at beginning of the year</b>		<b>13,217,014</b>	<b>9,742,585</b>
<b>Cash and cash equivalents at end of the year</b>	14	<b>20,087,696</b>	<b>13,217,014</b>

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



## NOTES TO THE FINANCIAL STATEMENTS

### 1. Summary of significant accounting policies

#### 1.1 Principal activities

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

- 1.1.1 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;
- 1.1.2 to promote the spirit of goodwill, volunteerism, and humanitarianism among members and volunteers of the Society;
- 1.1.3 to educate the public on aspects of humanitarian assistance, disaster management and risk reduction; and
- 1.1.4 to liaise with various local and international relief organisations, agencies, host governments and or other interested societies to assist in achieving these objectives.

#### 1.2 Basis of preparation of financial statement

##### 1.2.1 Statements of compliance

The financial statements of the Company have been prepared in accordance with Malaysian Financial Reporting Standards ("MFRS"), International Financial Reporting Standards and the Companies Act, 1965 in Malaysia.

The financial statements of the Company have been prepared in accordance with Malaysian Financial Reporting Standards ("MFRS"), International Financial Reporting Standards and the Companies Act, 1965 in Malaysia.

The financial statements are presented in Ringgit Malaysia ("RM"), which is the functional currency of the Society.

#### 1.3 Standards issued but not yet effective

As at date of authorisation of these financial statements, the following MFRSs, amendments to MFRSs and IC interpretations have been issued by Malaysian Accounting Standards Board but are not yet effective and have not been adopted by the Society.

Effective for financial periods beginning on or after 1 January 2015

- MFRS 9 Financial Instruments (IFRS 9 issued by IASB in Nov 2009)
- MFRS 9 Financial Instruments (IFRS 9 issued by IASB in Oct 2010)
- Amendments to MFRS 7, Financial Instruments: Disclosures - Mandatory Date of MFRS 9 and Transaction Disclosures

The Society plan to adopt the above pronouncements when they become effective in the respective financial periods. These pronouncements are expected to have no significant impact to the financial statements of the Society upon their initial application.

#### 1.4 Property, plant and equipment

All items of plant and equipment are initially recorded at cost. Subsequent costs are included in the asset's carrying amount or recognised as a separate asset, as appropriate, only when it is probable that future economic benefits associated with the item will flow to the Society and the cost of the item can be measured reliably. The carrying amount of the replaced part is derecognised. All other repairs and maintenance are charged to the income statement during the financial period in which they are incurred.

Subsequent to recognition, plant and equipment are stated at cost less accumulated depreciation and any accumulated impairment losses.

## NOTES TO THE FINANCIAL STATEMENTS

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

#### 1.4 Property, plant and equipment

Depreciation of plant and equipment is provided for on straight line basis to write off the cost of each asset to its residual value over the estimated useful life.

The principle 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%

The residual values, useful life and depreciation method are reviewed at each financial period end to ensure that the amount, method and period of depreciation are consistent with previous estimates and the expected pattern of consumption of the future economic benefits embodied in the items of plant and equipment.

An item of plant and equipment is derecognised upon disposal or when no future economic benefits are expected from its use or disposal. The difference between the net disposal proceeds, if any and the net carrying amount is recognised in profit or loss.

#### 1.5 Financial assets

Financial assets are recognised in the statements of financial position when, and only when, the Society become a parties to the contractual provisions of the financial instrument.

When financial assets are recognised initially, they are measured at fair value, plus, in the case of financial assets not at fair value through profit or loss, directly attributable transaction costs.

The Society determines the classification of their financial assets at initial recognition, and the categories include financial assets at fair value through profit or loss, loans and receivables and held-to-maturity investments.

##### 1.5.1 Financial assets at fair value through profit or loss

Financial assets are classified as financial assets at fair value through profit or loss if they are held for trading or are designated as such upon initial recognition. Financial assets held for trading are derivatives (including separated embedded derivatives) or financial assets acquired principally for the purpose of selling in the near term.

Subsequent to initial recognition, financial assets at fair value through profit or loss are measured at fair value. Any gains or losses arising from changes in fair value are recognised in profit or loss. Net gains or net losses on financial assets at fair value through profit or loss do not include exchange differences, interest and dividend income. Exchange differences, interest and dividend income on financial assets at fair value through profit or loss are recognised separately in profit or loss as part of other deficits or other income.

## NOTES TO THE FINANCIAL STATEMENTS

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

#### 1.5 Financial assets

##### 1.5.1 Financial assets at fair value through profit or loss (continued)

Financial assets at fair value through profit or loss could be presented as current or non-current. Financial assets that are held primarily for trading purposes are presented as current whereas financial assets that are not held primarily for trading purposes are presented as current or non-current based on the settlement date.

##### 1.5.2 Loans and receivables

Financial assets with fixed or determinable payments that are not quoted in an active market are classified as loans and receivables.

Subsequent to initial recognition, loans and receivables are measured at amortised cost using the effective interest method. Gains or losses are recognised in profit or loss when the loans and receivables are derecognised or impaired, and through the amortisation process. Loans and receivables are classified as current assets, except for those having maturity dates later than 12 months after the reporting date which are classified as non-current.

##### 1.5.3 Held-to-maturity investments

Financial assets with fixed or determinable payments and fixed maturity are classified as held-to-maturity when the Society has the positive intention and ability to hold the investment to maturity.

Subsequent to initial recognition, held-to-maturity investments are measured at amortised cost using the effective interest method. Gains or losses are recognised in profit or loss when the held-to-maturity investments are derecognised or impaired, and through the amortisation process.

Held-to-maturity investments are classified as non-current assets, except for those having maturity within 12 months after the reporting date which are classified as current.

#### 1.6 Impairment of financial assets

The Society assess at each reporting date whether there is any objective evidence that a financial asset is impaired.

##### 1.6.1 Trade receivable, other receivables and other financial assets carried at amortised cost

To determine whether there is objective evidence that an impairment loss on financial assets has been incurred, the Society consider factors such as the probability of insolvency or significant financial difficulties of the debtor and default or significant delay in payments. For certain categories of financial assets, such as trade receivables, assets that are assessed not to be impaired individually are subsequently assessed for impairment on a collective basis based on similar risk characteristics. Objective evidence of impairment for a portfolio of receivables could include the Society's past experience of collecting payments, an increase in the number of delayed payments in the portfolio past the average credit period and observable changes in national or local economic conditions that correlate with default on receivables.

If any such evidence exists, the amount of impairment loss is measured as the difference between the asset's carrying amount and the present value of estimated future cash flows discounted at the financial asset's original effective interest rate. The impairment loss is recognised in profit or losses.

The carrying amount of the financial asset is reduced by the impairment loss directly for all financial assets with the exception of trade receivables, where the carrying amount is reduced through the use of an allowance account. When a trade receivable becomes uncollectible, it is written off against the allowance account.



## NOTES TO THE FINANCIAL STATEMENTS

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

#### 1.6 Impairment of financial assets

##### 1.6.1 Trade receivable, other receivables and other financial assets carried at amortised cost (continued)

If in a subsequent period, the amount of the impairment loss decreases and the decrease can be related objectively to an event occurring after the impairment was recognised, the previously recognised impairment loss is reversed to the extent that the carrying amount of the asset does not exceed its amortised cost at the reversal date. The amount of reversal is recognised in profit or losses.

#### 1.7 Inventories

Inventories are measured at the lower of cost and net realisable value. The cost of inventories is based on the weighted average cost and includes expenditure incurred in acquiring the inventories and bringing them to their existing location and condition. In the case of work-in-progress, cost includes an appropriate share of production overheads based on normal operating capacity. Net realisable value is the estimated selling price in the ordinary course of business, less the estimated costs of completion and the estimated costs necessary to make the sale.

#### 1.8 Cash and cash equivalents

Cash and cash equivalents consist of cash in hand, balances and deposits with banks that are readily convertible to known amount of cash and which are subject to an insignificant risk of changes in value.

#### 1.9 Financial liabilities

Financial liabilities are classified according to the substance of the contractual arrangements entered into and the definitions of a financial liability.

Financial liabilities, within the scope of FRS 139, are recognised in the statement of financial position when, and only when, the Society become a party to the contractual provisions of the financial instrument. Financial liabilities are classified as either financial liabilities at fair value through profit or loss or other financial liabilities.

##### 1.9.1 Financial liabilities at fair value through profit or loss

Financial liabilities at fair value through profit or loss include financial liabilities held for trading and financial liabilities designated upon initial recognition as at fair value through profit or loss.

Financial liabilities held for trading include derivatives entered into by the Society that do not meet the hedge accounting criteria. Derivative liabilities are initially measured at fair value and subsequently stated at fair value, with any resultant gain or losses recognised in profit or loss. Net gains or losses on derivatives include exchange differences.

The Society has not designated any financial liabilities as at fair value through profit or loss.

##### 1.9.2 Other financial liabilities

The Society other financial liabilities include trade payables and other payables.

Trade and other payables are recognised initially at fair value plus directly attributable transaction costs and subsequently measured at amortised cost using the effective interest method.

For other financial liabilities, gains or losses are recognised in profit or loss when the liabilities are derecognised, and through the amortisation process.

## NOTES TO THE FINANCIAL STATEMENTS

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

#### 1.9 Financial liabilities

##### 1.9.2 Other financial liabilities (continued)

A financial liability is derecognised when the obligation under the liability is extinguished. When an existing financial liability is replaced by another from the same lender on substantially different terms, or the terms of an existing liability are substantially modified, such an exchange or modification is treated as a derecognition of the original liability and the recognition of a new liability, and the difference in the respective carrying amounts is recognised in profit or loss.

#### 1.10 Financial liabilities

Revenue is recognised when it is probable that the economic benefits associates with the transaction will flow to the society and the amount of the revenue can be measured reliably.

##### 1.10.1 Donation

Donation is recognised in profit or loss on the date when the Society's right to received payment is established.

##### 1.10.2 Interest income

Interest is recognised on a time proportion basis that reflects the effective yield on the asset.

#### 1.11 Membership subscription and admission fee

Ordinary membership subscription is payable annually before the accounting financial year. Only that subscription which is attributable to the current financial year is recognised as income. Subscription relating to periods beyond the current financial year is taken up in the statement of financial position 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.

#### 1.12 Charitable funds

Charitable funds consist of Unrestricted Fund and Restricted Funds.

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

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

#### 1.13 Foreign exchange

Transactions in foreign currency during the period are converted into Ringgit Malaysia at rates of exchange approximating those prevailing at the transaction dates.

Monetary assets and liabilities in foreign currency at statement of financial position date are translated into Ringgit Malaysia at rates of exchange approximating those ruling on that date.

Exchange gains and losses are charged to the statement of profit and loss and comprehensive income.

## NOTES TO THE FINANCIAL STATEMENTS

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

#### 1.13 Foreign exchange (continued)

The principal closing rate used (expressed on the basis of one unit of foreign currency to RM equivalents) for the translation of foreign currency balances at the statement of financial position date are as follows:

Foreign currency:-	RM 31.12.2014	RM 31.12.2013
1 US Dollar	3.46800	3.26500
1 Brunei Dollar	2.66180	2.60400
1 Pakistan Rupee	0.03570	0.03170
1 Sri Lanka Rupee	0.02660	0.02590
1 Australian Dollar	2.95200	3.05000
1 Euro	4.32480	4.43800
1 Japanese Yen	0.02890	0.03220
1,000 Indonesian Rupiah	0.30000	0.31900
1 Philippine Peso	0.08260	0.07970
1 Singapore Dollar	2.66180	2.60400
1 Swiss Franc	3.60420	3.63000
1 Pound Sterling	5.45170	5.42000
1 Thai Bhat	0.11380	0.10940
1 Taiwan New Dollar	0.11880	0.11720
1 India Rupee	0.55200	0.05420
1 Bangladesh Taka	0.05000	0.04710

#### 1.14 Employee Benefits

The principal closing rate used (expressed on the basis of one unit of foreign currency to RM equivalents) for the translation of foreign currency balances at the statement of financial position date are as follows:

##### 1.14.1 Short term benefits

Short term employee benefit obligations in respect of salaries, annual bonuses, paid annual leave and sick leave are measured on an undiscounted basis and are expensed as the related service is provided.

A provision is recognised for amount expected to be paid under short-term cash bonus or profit-sharing plans if the Society has a legal or constructive obligation to pay this amount as a result of past service provided by the employee and the obligation can be estimated reliably.

##### 1.14.2 Defined contribution plans

The Society's contribution to the Employee's Provident Fund is charged to statement of comprehensive income in the year to which they relate. Once the contributions have been paid, the Society has no further payment obligations.

## NOTES TO THE FINANCIAL STATEMENTS

### 2. Financial instrument

The Society activities are exposed to a variety of market risk (including interest rate risk), credit risk and liquidity risk.

#### 2.1 Financial risk management policies

The Society's activities expose it to a variety of financial risks, in which will be handled on case to case basis by the Executive Council Members as and when issues arise. The main areas of the financial risk faced by the Society and the policy in respect of the major areas of treasury activities are set out as follows :

##### 2.1.1 Market risk

###### a) Interest rate risk

Interest rate risk is the risk that the fair value or the future cash flows of a financial instrument will fluctuate because of changes in market interest rates.

The Society policy is to obtain the most favourable interest rates available. Any surplus funds of the Society will be placed with licensed financial institutions to generate interest income.

##### 2.1.2 Credit risk

Credit risk is the risk that one party to the financial will fail to discharge an obligation and cause the other party to incur a financial loss.

Credit risk arises when derivative instruments are used or sales made on deferred credit terms. The Society seeks to invest cash assets safely and profitably. It also seeks to control credit risk by setting counterparty limits and ensuring that sales of products and services are made to customers with an appropriate credit history.

Action is enforced for debt collection. Furthermore, sales to customer are suspended when earlier amounts are overdue by the credit term. The Society considers the risk of material loss in the event of non- performance by a financial counterparty to be unlikely.

##### 2.1.3 Liquidity and cash flow risk

Liquidity risk is the risk that an enterprise will encounter difficulty in raising funds to meet commitments associated with financial instruments.

Cash flow risk is the risk that future cash flows associated with a financial instrument will fluctuate. In the case of a floating rate debt instrument, such fluctuations result in a change in the effective interest rate of the financial instrument, usually without a corresponding change in its fair value.

In the short term, the Society focuses on liquidity, gearing of financial position, funds resources for plant upgrading and expansion of existing activities. Prudent liquidity risk management implies maintaining sufficient cash flow and the availability of funding through an adequate amount of committed credit facilities and the ability to close out market positions. Due to the dynamic nature of the underlying business, the Society aims at maintaining flexibility in funding by keeping credit lines.

#### 2.2 Fair value information

The carrying amount of the financial assets and financial liabilities reported in the financial statements approximated their fair value.

The following summarises the method used to determine the fair values of the financial instruments:-



## NOTES TO THE FINANCIAL STATEMENTS

### 2. Financial instrument (continued)

#### 2.2 Fair value information (continued)

- 2.2.1 The financial assets and financial liabilities maturing within the next 12 months approximated their fair values due to relatively short-term maturing of the financial instruments.
- 2.2.2 The fair values of hire purchase payables and term loans are determined by discounting the relevant cash flows using current interest rates for similar instruments as at the end of reporting period.

### 3. Significant accounting judgements and estimates

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the reported amounts of revenues, expenses, assets and liabilities, and the disclosure of contingent liabilities at the reporting date. However, uncertainty about these assumptions and estimates could result in outcomes that could require a material adjustment to the carrying amount of the asset or liability affected in the future.

#### 3.1 Key sources of estimation uncertainty

The key assumptions concerning the future and other key sources of estimation uncertainty at the reporting date that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are discussed below.

##### 3.1.1 Impairment of loans and receivables

The Society assesses at each reporting date whether there is any objective evidence that a financial asset is impaired. To determine whether there is objective evidence of impairment, the Society considers factors such as the probability of insolvency or significant financial difficulties of the receivables and default or significant delay in payment.

## FINANCIAL STATEMENTS //

# NOTES TO THE FINANCIAL STATEMENTS

## 4. Donations

	2014 RM	2013 RM
Unrestricted funds		
General donation	2,390,846	3,807,874
MTCP training	200,000	250,000
Yasmin Ahmad fund	36,766	4,936
Norman Musa fund	1,080	9,694
School safety programme	52,144	-
Mobile clinic	84,817	-
MAS change for charity collection	25,028	-
Chapter fund	195,186	5,500
ADRRN	142,708	-
	<b>3,128,575</b>	<b>4,078,004</b>
Restricted income:		
Afghanistan	221,851	605,210
Philippines	1,021,989	3,648,593
Bangladesh	-	103,000
Bosnia	1,151,251	-
Palestine	9,636,335	2,527,348
Syria	576,589	486,514
Myanmar	32,363	1,009,160
Sudan	3,174	54,515
Somalia	5,754	14,933
Special project fund	-	2,305,944
Ebola	3,000,000	-
Malaysia Flood	3,837,111	1,897,653
	<b>19,486,417</b>	<b>12,652,870</b>
Total donation	<b>22,614,992</b>	<b>16,730,874</b>

## 5. Annual fund raising dinner

	2014 RM	2013 RM
Income received	183,800	251,200
Less: Fundraising costs	(175,667)	(153,037)
	<b>8,133</b>	<b>98,163</b>

## FINANCIAL STATEMENTS //

## NOTES TO THE FINANCIAL STATEMENTS

## 6. Membership fee

	2014 RM	2013 RM
Entrance fee	400	-
Life membership	1,000	1,500
Ordinary membership	660	300
	2,060	1,800

## 7. Other income

	2014 RM	2013 RM
Interest received	246,902	254,049
Sale of merchandise	6,503	71,888
Others	219,697	842,448
	473,102	1,168,385

## 8. Charitable expenditure

	2014 RM	2013 RM
Afghanistan	695,826	769,930
Assessment	7,002	20,963
Bangladesh	7,931	104,957
Bosnia	196,552	-
Cambodia	171,698	45,817
Community social service	17,302	-
DRR	206,992	-
Ebola	18,170	-
Earthquake Indonesia	617	-
ERU - Emergency respond unit	51,229	-
Flood preparedness	2,039	-
Indonesia	37,227	-
Iraq	122,411	-
India	-	9,695
Japan	-	744
Malaysia	1,288,931	2,216,286
Balance carried forward	2,823,927	3,168,392

## FINANCIAL STATEMENTS //

## NOTES TO THE FINANCIAL STATEMENTS

## 8. Charitable expenditure (continued)

	2014 RM	2013 RM
Balance brought forward	2,823,927	3,168,392
Malaysia psychosocial	47,962	-
Medan and Aceh (Indonesia)	-	130,594
Mobile clinic	595,972	-
Myanmar	1,646,758	1,188,137
Pakistan	-	1,079,780
Palestine	2,570,979	1,857,959
Philippines	63,226	1,458,535
Somalia	226,926	725,938
School safety program - MM	262,209	-
Special project - ADRRN	1,157,604	1,021,408
Sri Lanka	16,627	116,679
Sudan	-	681,487
Syria	318,709	298,951
SPP-UMW	37,402	-
Training	273,512	-
Typhoon Haiyan	2,253,724	-
Typhoon Hagupit	246,748	-
Tsunami (Nias)	46,357	6,282
Yogyakarta	-	98,547
Volunteer appreciation day	25,746	-
<b>Total charitable expenditure</b>	<b>12,614,388</b>	<b>11,832,689</b>

## 9. Operating expenses

Included in operating expenses are:

	2014 RM	2013 RM
Audit fee	13,000	13,000
Depreciation	164,323	272,667
Gain on foreign exchange	(30,675)	(633)
Office rental	168,117	112,498
Staff costs (Note 16)	1,727,040	1,180,509
Warehouse rental	75,588	75,588



## FINANCIAL STATEMENTS //

## NOTES TO THE FINANCIAL STATEMENTS

## 10. Property, plant and equipment

Cost	Balance at 1.1.2014 RM	Additions RM	Disposal RM	Balance at 31.12.2014 RM
Air conditioner	14,515	1,080	-	15,595
Computer and EDP	936,731	18,480	-	955,211
ERU - Asset equipment	-	336,199	-	336,199
Furniture and fittings	249,724	340	-	250,064
Medical equipment	72,853	-	-	72,853
Motor vehicle	898,138	16,999	-	915,137
Office equipment	255,897	26,681	-	282,578
Renovation	323,851	268,327	-	592,178
Security equipment	9,000	-	-	9,000
	2,760,709	668,106	-	3,428,815

Accumulated depreciation	Balance at 1.1.2014 RM	Depreciation charge RM	Disposal RM	Balance at 31.12.2014 RM
Air conditioner	10,687	1,801	-	12,488
Computer and EDP	820,684	51,556	-	872,240
ERU - Asset equipment	-	84	-	84
Furniture and fittings	242,692	3,295	-	245,987
Medical equipment	72,851	-	-	72,851
Motor vehicle	757,559	59,831	-	817,390
Office equipment	201,088	17,798	-	218,886
Renovation	321,529	46,896	-	368,425
Security equipment	8,998	-	-	8,998
	2,436,088	181,261	-	2,617,349

Net book value	2014 RM	2013 RM	Depreciation charge 2013 RM
Air conditioner	3,107	3,828	1,779
Computer and EDP	82,971	116,047	145,369
ERU - Asset equipment	336,115	-	-
Furniture and fittings	4,077	7,032	19,460
Medical equipment	2	2	-
Motor vehicle	97,747	140,579	96,047
Office equipment	63,692	54,809	21,162
Renovation	223,753	2,322	33,061
Security equipment	2	2	-
	811,466	324,621	316,878

## FINANCIAL STATEMENTS //

## NOTES TO THE FINANCIAL STATEMENTS

## 11. Inventories

	2014 RM	2013 RM
<u>At cost:</u>		
Dental clinic	53,552	-
Emergency response unit (ERU)	-	442,022
Merchandise	92,763	68,375
Mobile clinic	80,351	-
Outreach Clinics	-	7,588
	226,666	517,985

## 12. Other receivables

	2014 RM	2013 RM
Other debtors, deposits and prepayment	547,819	575,919
Advance to mission members and basecamp	641,726	573,019
	1,189,545	1,148,938

## 13. Purchase of property, plant and equipment

During the financial year, the Society acquired property, plant and equipment with an aggregate cost of RM668,106 (2013:RM4,840) of which RM336,109 (2013: NIL) was being reclassified from inventory. Cash payment of RM331,907 (2013:RM4,840) were made to purchase property, plant and equipment.

## 14. Cash and cash equivalents

	2014 RM	2013 RM
Cash in hand	33,175	231,983
Cash at bank	8,658,755	1,487,265
Deposits with licensed banks	11,395,766	11,497,766
	20,087,696	13,217,014

## NOTES TO THE FINANCIAL STATEMENTS

### 15. Income tax expense

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

### 16. Staff costs (Note 9)

	2014 RM	2013 RM
EPF and SOCSO	249,497	122,704
Medical	26,051	28,099
Salaries and allowances	1,451,492	1,029,706
	<u>1,727,040</u>	<u>1,180,509</u>
Number of employees (excluding Executive Council) at the end of financial year	<u>50</u>	<u>43</u>

### 17. Financial Instruments

#### 17.1 Financial risks management objectives and policies

The Company has exposure to financial risks as the following:

- (a) credit risks arising from its other receivables and bank balance;
- (b) interest rate risks from deposits with licensed bank.

#### 17.2 Net gains and losses arising from financial instrument

	2014 RM	2013 RM
Deposits placed in a licensed bank	246,255	252,852
Cash and cash equivalent	647	1,197
	<u>246,902</u>	<u>254,049</u>

## NOTES TO THE FINANCIAL STATEMENTS

### 17. Financial Instruments (continued)

#### 17.3 Categories and fair values of financial instruments

The categories and fair values of financial assets and liabilities are as follows:

	Carrying amount 2014 RM	Fair value 2014 RM	Carrying amount 2013 RM	Fair value 2013 RM
<b>Financial assets categorised as loans and receivables:</b>				
Other receivables	1,189,545	1,189,545	1,148,938	1,148,938
Deposits placed in a licensed bank	11,395,766	11,395,766	11,497,766	11,497,766
Cash and cash equivalent	8,691,930	8,691,930	1,719,248	1,719,248
	<b>21,277,241</b>	<b>21,277,241</b>	<b>14,365,952</b>	<b>14,365,952</b>
<b>Financial liabilities measured at amortised cost:</b>				
Other payables	421,622	421,622	571,797	571,797





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## NOTES





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