

EMBRACING
the Winds of
CHANGE

2017 ANNUAL REPORT

Cover Rationale



EMBRACING THE WINDS OF CHANGE

Like every other sector, the humanitarian world has undergone various changes in the last two decades, as humanitarian actors sought to coordinate relief aid in order to optimise outcomes and maximise impact. The shift in focus, from emergency response to developmental aid in protracted crisis, calls for a 'new way of working' which requires more innovative and sustainable means of conducting humanitarian aid.

Amidst dipping funding and stretched resources in 2017, MERCY Malaysia had continued to conduct humanitarian relief in disaster and conflict affected localities such as Syria, Bangladesh, Nepal and Penang. At the same time, we continued serving communities in need such as the urban poor, refugees and displaced peoples in Malaysia, who have little access to good medical or dental services due to their social status.

Our work is made possible only with public and corporate support, whose high levels of commitment, dedication, loyalty and trust remained steadfast and unchanged.

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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)
SULTAN YANG DIPERTUAN DAN RAJA PEMERINTAH NEGERI PERAK DARUL RIDZUAN

MESSAGE FROM THE CHAIRMAN OF THE BOARD OF TRUSTEES



This is MERCY Malaysia's 18th year of operations. It has been a period that has seen the organization face many difficulties. In addressing these, some major decisions have been taken with implications for its future course. We in the Board are deeply indebted to all who have kept their faith and trust in us and have continued to support us through good and difficult times.

Despite dipping funds, budget cuts and staff turnover, our team has not let up on its concerted efforts in undertaking humanitarian and development missions in Bangladesh, Indonesia, Nepal, Sri Lanka and Malaysia. Our saddest decision of the year was having to cease operations in Afghanistan, after 14 years of providing healthcare services and running the Little Caliph pre-school at District 3 of Kandahar, with a population of 68,000 people. On behalf on the Board, I would like to thank our donors, the Afghan staff and everyone else who had a hand in this great humanitarian endeavor.

Meanwhile, our commitment to humanitarian and disaster relief work in areas such as Myanmar and Syria continues unabated. In these areas, we are serving the affected people

by building static clinics and developing a 3-year woman empowerment programme for midwife training respectively. In doing this, MERCY Malaysia has chartered a new course by adopting and adapting to the principles of the Humanitarian-Development nexus in its work thereby moving closer to achieving higher world humanitarian standards.

With continued focus on Disaster Risk Reduction efforts through our Building Resilient Communities Programme, we look forward to achieving a more holistic growth as a fully developed humanitarian organization in years to come.

On behalf of the Board of Trustees, my deep respect and gratitude goes to all MERCY Malaysia volunteers and staff for their dedication and hard work, despite trying conditions.

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

MESSAGE FROM THE PRESIDENT

Assalamualaikum warahmatullahi wabarakatuh and greetings to our MERCY Malaysia family,

In the last 18 years, MERCY Malaysia has been in the forefront of serving communities who are affected by conflicts and disasters around the world. Despite the changes in the humanitarian sector and increasing challenges in terms of funding, MERCY Malaysia has evolved accordingly to achieve sustainable means to continue with our work in Malaysia and around the world. This situation is not unique to MERCY Malaysia, as recognised by the United Nations and World Bank Group through the Humanitarian-Development-Peace Nexus (Triple Nexus) announced at the 2016 World Humanitarian Summit. With this, came the concept of a “new way of working”, which is believed will transcend the humanitarian-development divide.

MERCY Malaysia has since adopted this ‘new way of working’, streamlining our operations and tightening our field programmes befitting the triple nexus and in accordance with the Core Humanitarian Standard (CHS) established by the CHS Alliance. These steps underline our commitment and accountability to our cause, assuring both funders and beneficiaries of our needs-based approach to maximize outputs and impact.

Fundamentally, the Humanitarian-Development-Peace Nexus addresses the reality behind the changing landscape of humanitarian work, calling all actors – governments, organisations, corporates and individuals - to increase support for the augmentation of developmental processes in protracted emergencies long after they have left the media limelight. This calls for intensive joint coordination across all levels, which will improve resilience in recovery planning, and increase resilience levels of the local health system.

With Peace coming into the picture as one aspect of the Triple Nexus, it is also necessary to review all activities in fragile contexts to avoid involvement in any areas that may exacerbate conflict. Strategic engagement remains a priority in the entire spectrum of our work, as we focus on partnerships and localisation to achieve higher impact and programme efficiency for our beneficiaries.

MERCY Malaysia's strong track record in the last 18 years have placed us in the pole position for humanitarian assistance in sensitive areas such as refugee care in the country and around the world.



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Message from the President

Globally, there is a clarion call to increase Protection for refugees and displaced persons, which highlights issues such as gender-based violence during and after crisis periods. Part of our response had been to provide leadership training for refugee leaders in partnership with UNHCR in 2017. The training proved successful, as it equipped participants with the necessary knowledge, insights and mental capacity to deal with the looming problems faced by the refugees in their care.

To further this cause, we organised our inaugural 'Humanitarian Lab 1.0: Rohingyas in Malaysia' workshop in December 2017, which brought together academicians, social science researchers, governmental agencies, non-governmental organisations, corporate funders and refugee leaders on a single platform to formulate policies, plans and ideas that will advance their condition. Attended by almost 100 participants from universities, NGOs, refugee communities and corporate bodies, the Lab produced invaluable insights into the Rohingya psyche, problems and needs, which has since been compiled into a report as reference. Ultimately, MERCY Malaysia hopes to formulate developmental programmes that are cohesive, impactful and sustainable for displaced people within our country so that they regain the dignity and quality of life befitting humanitarian standards.

Earlier in September, we had been the first to arrive and provide relief aid to the 860,000 over Rohingya refugees who had fled the violence in northern Myanmar to Cox's Bazar, Bangladesh. As the number of refugees continued rising daily, we established two Primary Healthcare Clinics (PHCs), distributed food and Non-Food Items (NFIs) and started building latrines and tube wells to supply clean water at Balukali and Thangkali. These services continued well into 2018, and we foresee that it will last for years before the issue finds any resolution, if it ever does.

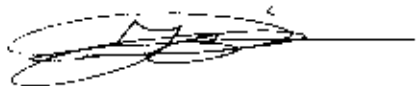
Our teams who returned from their Cox's Bazar mission relate heart-breaking tales of people living in deplorable conditions, many still traumatised by their past and facing a bleak future ahead. We have planned for a Maternal and Child Health Clinic, which will provide more specialised treatment for pregnant women and children, considering they make up 7% and 48% of the total refugee population at Cox's Bazar. Plans were also underway then to provide Mental Health and Psychosocial Support to community leaders, equipping them with the necessary Psychological First Aid (PFA) knowledge to handle someone who may be displaying signs of depression, anxiety or other psychological issues.

At the same time, our team conducted many Disaster Risk Reduction programmes in Malaysia and around the region in 2017 – at Hulu Langat and Klang in Selangor; Mentakab, Pahang; as well as Karo, North Sumatera, Indonesia and Battambang, Cambodia – for hospitals, schools and the private sector. Despite the fact that DRR programmes are

fast becoming a popular capacity building training among various government and non-governmental agencies, MERCY Malaysia's programmes stand out from the others as a result of our decade-long experience. The hands-on experience and exposure is not something money can buy, nor is it something one can learn from a workshop, textbook or internet.

In an effort to continue our work in a timely and coordinated manner, we held the soft launch of our Islamic Social Funding (ISF) initiative in June 2017 to expand our donor base to Islamic Financial and Banking Institutions. The soft launch also saw the official appointment of Datuk Dr. Mohd Daud Bakar as MERCY Malaysia's Shariah Advisor and Chairman of MERCY Malaysia's Islamic Finance Advisory Panel. Datuk Daud is the current Chairman of the Shariah Advisory Council at the Central Bank of Malaysia, the Securities Commission of Malaysia and the Shariah Supervisory Board of The International Islamic Liquidity Management Corporation. Previously the Deputy Vice-Chancellor of the International Islamic University Malaysia, Datuk Daud is also a Shariah board member of various international financial institutions in New York, Oman, Bahrain, Dubai and London. We trust that innovative investments in humanitarian action through ISF will not only lead to long-term social improvements, but also to long-term resilience and capacity-building for communities at risk.

In the year ahead, we will continue to innovate, evolve and improve, as we strive towards humanitarian excellence in the region and globally. This can only be made possible with the support, trust and dedication of our executive council members, staff, advisors, donors, volunteers and supporters. We thank everyone for bringing MERCY Malaysia thus far, and look forward to work together to bring our beloved organization to greater heights.



DATO' DR AHMAD FAIZAL MOHD PERDAUS
President

MESSAGE FROM THE EXECUTIVE DIRECTOR



With economic conditions continuing to be uncertain around the world, many charitable and Non-governmental organisations were hard-hit in 2017, including MERCY Malaysia. Drastic actions had to be taken to address dipping donations, among them the decision to move our headquarters from the heart of Kuala Lumpur to a more economical office block in the suburbs of Damansara. With the move came another major decision of closing our two warehouses in the Ampang area, and look for another closer to the new office.

The uncertainties and changes impacted the staff particularly in the second half of the year, as many contemplated whether to seek greener pastures closer to the existing area where 50% of them resided. As it turned out, many later opted to stay due to their passion for MERCY Malaysia's work, and I extend my sincere appreciation for their dedication.

Despite the challenges, we continued with our work to bring humanitarian relief and assistance to communities in need in Malaysia and around the world. Our medical team conducted a humanitarian cleft and palate surgery on 57 patients



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Message from the Executive Director



in Myanmar early in the year, mostly on children and young people who would be considered 'cursed' for life without the surgery. It was gratifying to hear their stories of how the surgery would now enable these children find a job, get married and lead a normal life. It may not be a life-saving surgery, but it is certainly life-changing.

Floods are a frequent occurrence in the Asian region, with two major flooding taking place in 2017, first in Bangladesh and later on in Penang. In both floods, MERCY Malaysia promptly responded, providing hygiene kits, drinking water, cleaning kits and medical services to affected people.

Our presence in Bangladesh for the flood response had been serendipitous, as the Rohingya exodus from Rakhine in Myanmar took place soon after. As a result, MERCY Malaysia became one of the first international NGOs to offer assistance to the hundreds of thousands of refugees, who arrived exhausted and shocked after weeks of treacherous walking across rivers and mountains to escape the violence in their homeland. Our Primary Healthcare Centres saw hundreds of patients of all ages for the next few months, as refugees continued to flood Thangkali and Balukali, the area off the district of Cox's Bazar that had been designated by the Bangladeshi government as refugee settlements.

Further up north at Nepal, we kicked off a series of capacity

building for rehabilitation physicians in December that will continue into the following year. During the first workshop held at the National Trauma Centre in Kathmandu, I was privileged to present physiotherapy equipment worth RM150,000 to the centre, which was attached to Nepal's 100-year-old Bir Hospital. The equipment will go a long way to help patients who need physiotherapy or occupational therapy following the 2015 Gorkha Earthquake. Although it had been two and a half years since the disaster, the land-locked nation is still grappling with the physical and mental trauma inflicted upon its population.

Similarly in Syria, the Internally Displaced People (IDPs) who are still residing in tents have yet to see a resolution. Apart from distributing winter goods such as firewood, jackets, dry rations and blankets, MERCY Malaysia also started a Midwifery Training programme for 50 students in Syria. Upon completion of their 3-year training, the students would be qualified to assist the IDPs during childbirth, filling a crucial gap in the healthcare system.

On home ground, MERCY Malaysia initiated an urban poor programme in October 2017 targeting two low-cost flats at Subang Bestari and Kampung Muhibbah in the Klang Valley. Under this project, our medical teams will be conducting monthly mobile clinics and psychosocial programmes to selected people who have been certified as living below the poverty line by the Welfare Department.

We have also worked on some disaster reduction trainings with the National Agency for Disaster Management (NADMA) in 2017, and potentially will be striking a strategic partnership next year with the ASEAN Coordinating Centre for Humanitarian Assistance on Disaster Management (AHA Centre) to support the AHA Centre Work Plan 2020.

All these would not have been possible without the hard work and commitment of everyone involved – staff, volunteers, partners, and most importantly our donors. Their unwavering support, especially in MERCY Malaysia's darkest hours, is commendable. On behalf of our beneficiaries, we thank you for your support and look forward to forge towards a new and brighter horizon ahead!

IR. AMRAN MAHZAN
Executive Director

The background image is a faded, grayscale photograph of a disaster-stricken area. In the foreground, a person is seen from the side, carrying a large white sack on their back. They are walking on a dirt path. In the background, there are damaged buildings, some with collapsed roofs, and other people are visible, some carrying supplies. The sky is cloudy.

VISION & MISSION STATEMENT

In 2017

The MERCY Malaysia footprint of timely, non-denominational medical relief saw us aid beneficiaries from all around the world. In 2017, we helped citizens from 10 countries, including Malaysia to build resilience from the devastations that they had endured.

We reached out to over one million beneficiaries.

We believe the **RM 15.0 million** we spent on emergency relief and humanitarian services in 2017 gave the beneficiaries hope that they are not forgotten.



VISION

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

MISSION

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

CORE VALUES

Motivation

We are highly motivated and passionate

Excellence

We do the right things in the right way;
we are accountable to beneficiaries and donors

Respect

We show trust and respect in all our interactions

Collaboration

Working with peers, partners and volunteers,
build on each other's strengths and enhance the
impact of beneficiaries

Yearn to Serve

We will go the extra mile to help those in need

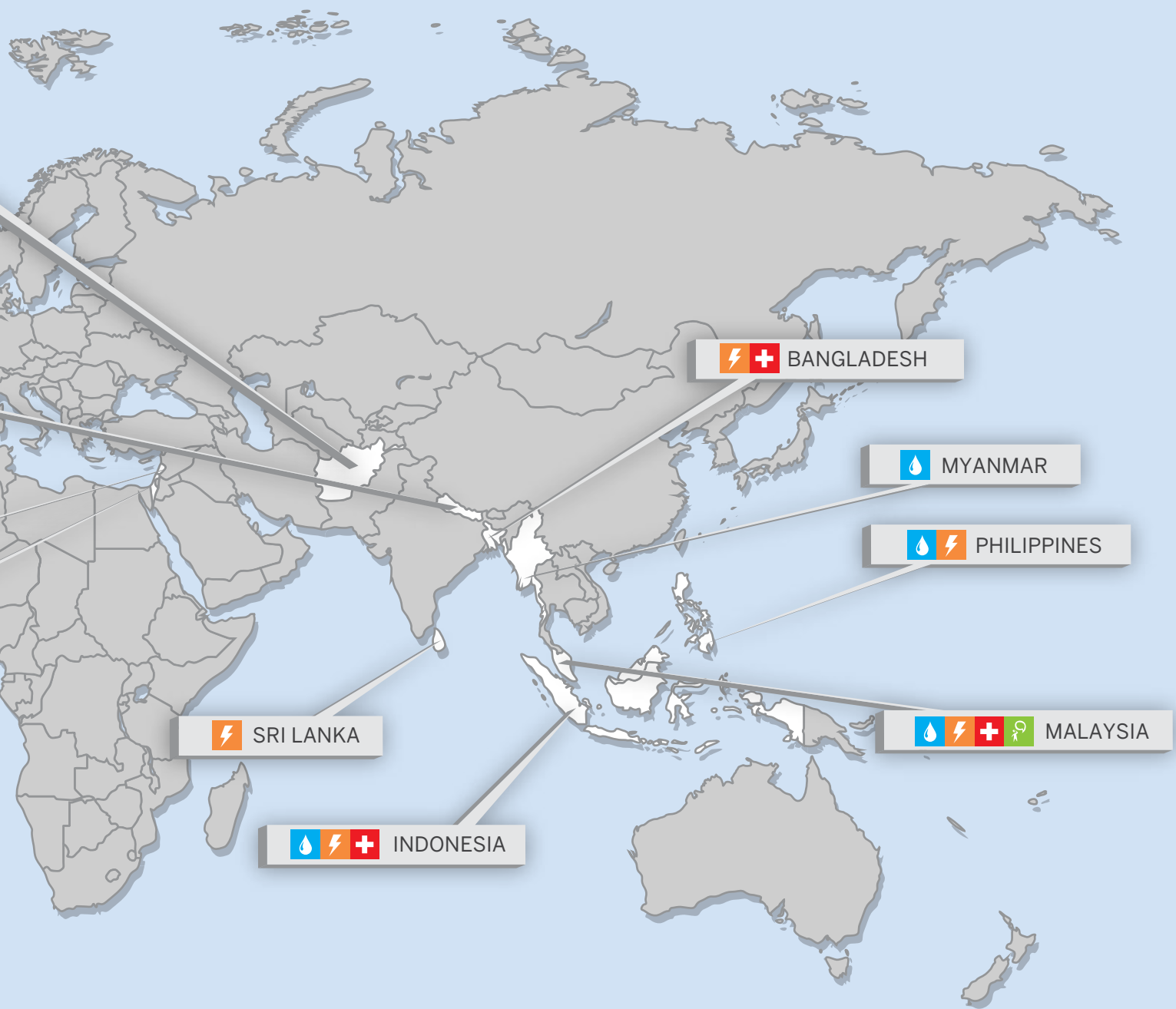


WHERE WE HAVE BEEN

Afghanistan: 2001 - 2017
 Bangladesh: 2007 - 2017
 Bosnia: 2016
 Cambodia : 2001 - 2002 / 2005 / 2008 - 2016
 Chile: 2010
 China: 2008 - 2012
 India: 2000 / 2008 - 2012
 Indonesia: 2000 / 2004 - 2017
 Iran: 2003
 Iraq: 2003
 Japan: 2011 - 2013

Jordan: 2012 - 2015
 Kosovo: 1999
 Lebanon: 2006 / 2016
 Libya: 2011
 Malaysia: 2004 - 2017
 Maldives: 2006 / 2008 - 2010
 Myanmar: 2008 / 2012 - 2017
 Nepal: 2015 - 2017
 North Korea: 2004 / 2008
 Pakistan: 2005 - 2006 / 2008 / 2012 - 2013
 Palestine: 2003 / 2008 / 2012 - 2017

Activities in 2017



Philippines: 2004 / 2006 / 2008 / 2011 - 2017
 Somalia: 2011 - 2013
 Sri Lanka: 2003 - 2004 / 2009 - 2013 / 2017
 Sierra Leone: 2015 - 2016
 Thailand: 2011 - 2012
 Tunisia: 2011
 Turkey: 1999 / 2004 - 2012
 Vietnam: 2007
 Yemen: 2008

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.

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).

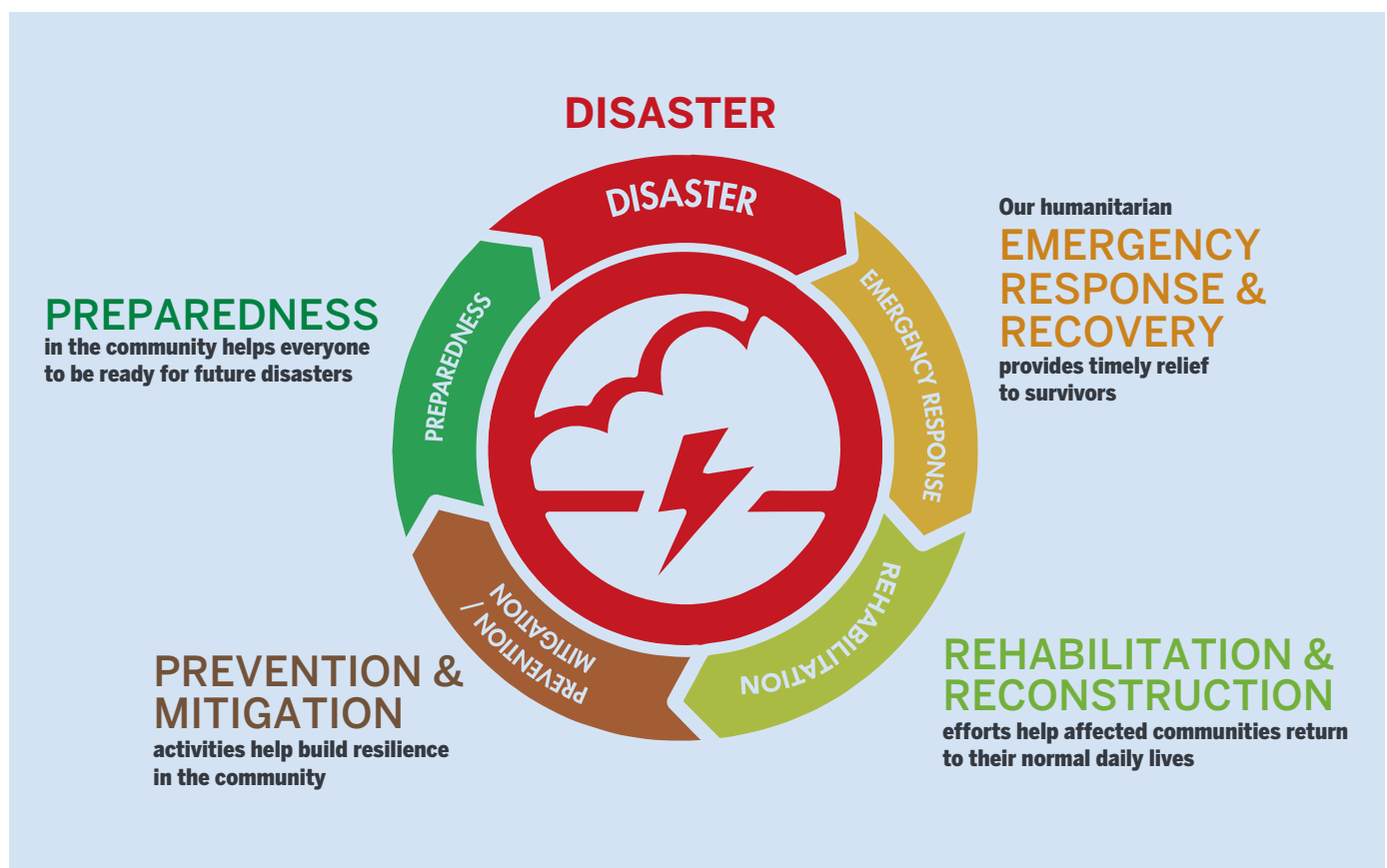
MERCY Malaysia takes a pro-active approach to natural disaster risk management. After many years of responding to the occurrence of natural disasters, we came to realise that we needed to help communities to be prepared before a natural disaster strikes. Although traditionally more attention was paid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

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.

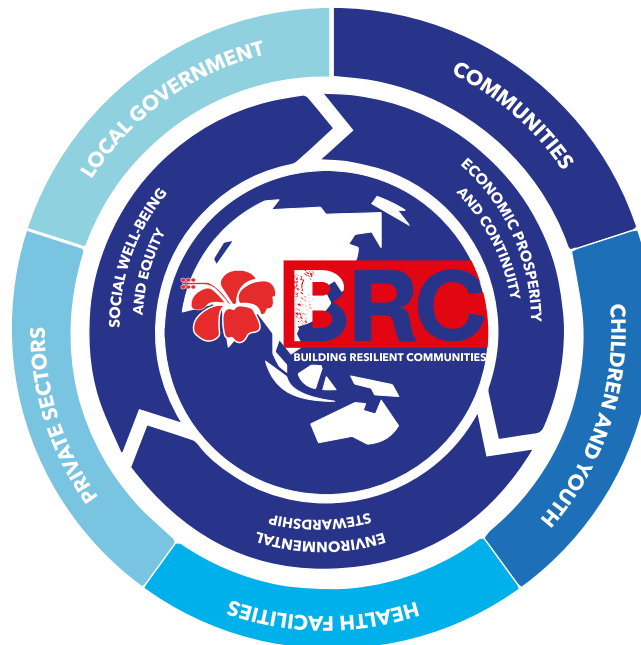
TDRM places emphasis on total stakeholder engagement and is in line with our strategic commitments. We engage all our stakeholders, especially the beneficiaries to ensure our efforts meet their needs and we adopt and disseminate local knowledge to improve community resilience.

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.

Total Disaster Risk Management (TDRM) takes a holistic approach to



BUILDING RESILIENT COMMUNITIES (BRC)



In line with the agenda on building community resilience, which include actions toward safer and resilient built environment, MERCY Malaysia adopted various global agendas such as the Sendai Framework for Disaster Risk Reduction (SFDRR 2015 - 2030), the Sustainable Development Goals (SDG 2015 - 2030), and the New Urban Agenda. These global agendas have been instrumental in the formulation of our disaster preparedness initiative, which is known as Building Resilient Communities (BRC).

BRC is an initiative that focuses on the systematic integration of the civil society, children and youth, health service providers, private sectors and local governments. Through this holistic mechanism, the target is to increase the integration of disaster risk reduction and management systems within the different groups of the local communities. It is also to improve coordination system between emergency response and preparedness between the different groups while increase their participation in designing and implementing disaster risk reduction measures using BRC programs as a point of access.

Its objective is to achieve an understanding for the mainstream humanitarian actors, specialist actors and the public in becoming a prepared, responsive and resilient through the involvement of the effectiveness of grass – roots projects and programs and at the same time, suggest policies, guidelines and training inputs for each community to secure its role building resiliency. Its pilot projects are located within the ASEAN region with the aim of providing practical examples on how investing in building resilience can help reduce the humanitarian burden as well as demonstrate how investment in local DRR capacities can reduce risk, foster resilience and promote sustainable development.

Building resilience provides a complementary approach to traditional risk management practices which have typically focused on preventing particular events occurring, or mitigating the consequences in terms of losses. Resilience adopts a different perspective that is centred on developing strategies to deal with a range of disruptive events if and when they occur. The BRC framework is a holistic approach that includes all levels of stakeholders in a community to increase capacity and capability by identifying and reducing vulnerability with the objective of building the community's resilience in social well-being and equity, environmental stewardship, and economic prosperity and continuity. Its strategic goals are:

1. The integration of disaster risk reduction into sustainable development policies and planning;
2. Development and strengthening of institutions, mechanisms and capacities to build resilience to hazards; and

3. The systematic incorporation of risk reduction approaches into the implementation of emergency preparedness, response and recovery programs.

MERCY Malaysia work together with local communities, schools, health service providers, private sectors and local government units in enhancing the collective capacity in our effort to promote the culture and practice of resiliency. Our routine training of trainers program, alongside other related trainings provide consistent capacity building inputs, not only for the organization and its programs, but also to the local communities in enhancing the state of resilience. MERCY Malaysia will continue in the advocacy of resiliency through partnerships, training workshops and developmental projects.

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 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

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



Affiliations



International
Council of
Voluntary
Agencies

**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. 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.

www.icva.ch



ALNAP
Active Learning Network for
Accountability and Performance
in Humanitarian Action

**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

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/

CORE HUMANITARIAN STANDARD

Core Humanitarian STANDARD

CORE HUMANITARIAN STANDARD

Humanitarian principles are at the core of all humanitarian work. They guide humanitarian action and their application is essential to distinguish humanitarian action from other forms of activities and action. In the CHS, the four principles are integrated into the Commitments, Quality Criteria, Key Actions and Organisational Responsibilities. International Humanitarian Law, International Human Rights Law and International Refugee Law set out fundamental legal standards relating to the protection of individuals and groups, and to the nature of the assistance which may be provided to them. The Sphere Humanitarian Charter summarises the core legal principles that have most bearing on the welfare of those affected by disaster or conflict. Those who apply the Core Humanitarian Standard recognise the primary responsibility of states and other relevant authorities to protect and assist those affected by disasters or armed conflicts within their territories. Humanitarian action should not undermine these responsibilities; indeed, whenever possible, it should complement them.

MERCY Malaysia guided with each humanitarian standard set out by the CHS Alliance as follows:



1. Communities and people affected by crisis receive assistance appropriate and relevant to their needs.
Quality Criterion:
Humanitarian response is appropriate and relevant.



2. Communities and people affected by crisis have access to the humanitarian assistance they need at the right time.
Quality Criterion:
Humanitarian response is effective and timely.



3. Communities and people affected by crisis are not negatively affected and are more prepared, resilient and less at-risk as a result of humanitarian action.
Quality Criterion:
Humanitarian response strengthens local capacities and avoids negative effects.



4. Communities and people affected by crisis know their rights and entitlements have access to information and participate in decisions that affect them.
Quality Criterion:
Humanitarian response is based on communication, participation and feedback.



5. Communities and people affected by crisis have access to safe and responsive mechanisms to handle complaints.
Quality Criterion:
Complaints are welcomed and addressed.



6. Communities and people affected by crisis receive coordinated, complementary assistance.
Quality Criterion:
Humanitarian response is coordinated and complementary.



7. Communities and people affected by crisis can expect delivery of improved assistance as organisations learn from experience and reflection.
Quality Criterion:
Humanitarian actors continuously learn and improve.



8. Communities and people affected by crisis receive the assistance they require from competent and well-managed staff and volunteers.
Quality Criterion:
Staff are supported to do their job effectively, and are treated fairly and equitably.



9. Communities and people affected by crisis can expect that the organisations assisting them are managing resources effectively, efficiently and ethically.
Quality Criterion:
Resources are managed and used responsibly for their intended purpose.

www.corehumanitarianstandard.org

MERCY MALAYSIA BOARD OF TRUSTEES



TAN SRI DATO' AJIT SINGH

Tan Sri Dato' Ajit Singh was born and educated in Malaysia. He joined the Malaysian Foreign Service in 1963.

In a career spanning just over 30 years, he served in various positions in the Ministry of Foreign Affairs and at Malaysian Missions abroad in Canberra, Addis Ababa, (Ethiopia) and New York. He was Malaysia's Ambassador in Vietnam, Austria, Brazil, (with concurrent accreditation to Bolivia, Colombia, Peru and Venezuela) and Germany.

He was elected the first Secretary-General of ASEAN, which carries the rank of a Minister and served a five-year term from 01 January 1993 to 31 December 1997.

In recognition of his services, both Laos and Vietnam awarded him their prestigious Friendship Medals in December 1997. He was also awarded the Panglima Setia Mahkota award, which carries the title of "Tan Sri" by His Majesty the King of Malaysia at 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 in helping to improve Malaysia – Indonesia relations.

After leaving the Secretariat, he joined the National Petroleum Oil Company, PETRONAS, where he served as Director, International Business Ventures from August 1997 to October 1999.

He was elected the first Secretary-General of the Boao Forum for Asia, based in Hainan, China, in February 2001. He is now the Advisor for the Malaysia India Business Council, (MIBC), a member of the Malaysia-India CEO Forum set up by the Prime Ministers of the two countries, the Advisor to the Malaysia-India Business Council, (MIBC), and Chairman of the Board of Trustees of MERCY Malaysia.

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



MRS. GAIK WONG

Gaik is the founder/chairman of TCRS Restaurants Sdn Bhd which operates the chain of "The Chicken Rice Shop" ("TCRS") in Malaysia. She has more than 40 years of experience in the Food and Beverage, including franchised and chain store operations.

Prior to being a founder/chairman 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 120 restaurants in Malaysia under the 4 brands of "The Chicken Rice Shop, DubuYo, Sepiring and Pancake House". The Chicken Rice Shop is the leading halal chain of chicken rice restaurants in Malaysia and has franchised operations in Brunei and Myanmar.

Gaik Wong through the TCRS Group, currently has a team of more than 1700 employees and 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. 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.

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 Malaysia's Ministry of Foreign Affairs. He joined the Malaysian Diplomatic and Administrative Service in 1972 and served in various capacities at the Ministry of Foreign Affairs until 2009. He also served at the Malaysian Missions abroad in Moscow, The Hague, Canberra, Washington and Dhaka.

His tenure as Secretary-General saw him deeply involved in leading the Malaysian Senior Official delegation to various bilateral, regional and international Conferences as well as in successfully organising the NAM Summit, the OIC Summit in 2003 and the ASEAN Summit plus East Asia Summit and Related Summits in 2005 in Kuala Lumpur.

Tan Sri Ahmad Fuzi previously served as Director General, Institute of Diplomacy and Foreign Relations Malaysia; Deputy Secretary General 1, Ambassador-at-Large and 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 Fuzi is currently Secretary-General of the World Islamic Economic Forum Foundation (WIEF). He serves as Chairman, Seremban Engineering Berhad; Syarikat Takaful Malaysia Bhd; ConnectCounty Holdings Bhd and Apex Equity Holdings Bhd. He is also on the Board of Puncak Niaga Holdings Bhd.

Tan Sri Fuzi is currently also Chairman of Theatre Management Associates Sdn Bhd; Optima Capital Sdn Bhd; Sofgen (Malaysia) Sdn Bhd, ACE Holdings Sdn Bhd, ACE Investment Bank; IMAN Research Consulting Sdn Bhd, Ultra Deep Subsea Sdn Bhd and TAERG International Sdn Bhd.

He is also on the Board of the Management Development Institute of Singapore (MDIS) Malaysia Sdn Bhd; MDIS Unicampus Malaysia Sdn Bhd; Alstar Solutions Sdn Bhd; Lejardi Medimax Sdn Bhd and WEROS Technology Sdn Bhd.

Tan Sri Fuzi is a Distinguished Fellow, Institute of Strategic and International Studies (ISIS) and Institute of Diplomacy and Foreign Relations (IDFR); 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); Yayasan Sarana Pendidikan Malaysia (YSPM) and Institute of Advanced Islamic Studies (IAIS) and Patron, Malaysia-China Culture Association.

He is also an Advisor of Triphez Sdn Bhd; Asia Pacific Entrepreneurship Award (APEA); Malaysia-Myanmar Chamber of Commerce and High School Bukit Mertajam Alumni Malaysia.

Tan Sri Fuzi was appointed to the Board of Governors of Meritus University on 11 October 2016.

In recognition of his services 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).

MERCY MALAYSIA BOARD OF TRUSTEES



TAN SRI DATO' DZULKIFLI ABDUL RAZAK

Dzulkifli Abdul Razak (Dzul, for short) served as the 14th President of the International Association of Universities (IAU), a UNESCO-affiliated organisation based in Paris. Currently, he is the Chairperson of the Islamic Science University Malaysia (USIM). He is an Honorary Professor at the University of Nottingham; and also co-chairs the Steering Council of the Right Livelihood College Global Secretariat based in the University of Bonn, Germany. Of late he has been appointed Regional Coordinator (Asia-Pacific) for UNESCO research platform on Indigenous and Education for Sustainable Development; and serves as a Senior Advisor to the Asia-Europe Institute at the University of Malaya, and Fellow at Centre for Policy Research and International Studies at Universiti Sains 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 an Honorary Lifetime member of Asian Academy of Management.

In 2017, he received The Gilbert Meday from Universitas 21 to represent a consortium of leading research universities worldwide. He is the first Asian to receive this and the seventh globally. At the regional level, he was awarded the 2017 Asia HRD Contribution to Society Award for People Development. Nationally, he was the eleventh recipient of the Tokoh Akademik Negara (National Academic Laureate) in 2017.

He is a weekly columnist since 1995; and more recently for The Sun, an English Daily with the largest circulation in Malaysia.



TOH PUAN DATO' SERI HAJAH DR AISHAH ONG

In 2009, Toh Puan Dato' Seri Hjh. Dr. Aishah Ong joined MERCY Malaysia as one of the members of the Board of Trustees. Toh Puan Dato' Seri Hjh Dr. Aishah Ong also holds the position of Pro-Chancellor of the University of Malaya since 2003, after serving as the Chairman of University Hospital for many years.

She is Chairman of the IJN Foundation, the Welfare Subcommittee of BAKTI, and was the first Chairman of the Malaysian Health Promotion Board at the Ministry of Health from 2007 - 2012. She is a Patron and Founding Trustee of the Alzheimer's Disease Foundation of Malaysia; Chairman of Cancer Research Malaysia; Trustee of the Tun Abdul Razak Foundation, the National Council of Women's Organisations (NCWO); the Women's Aid Organisation; Media Prima Humanitarian Fund; and Dewan Filharmonik Petronas.

Currently, she is a Director on the Boards of the MPO (Malaysian Philharmonic Orchestra, Petronas) and Nestle (M) Bhd. She graduated as a Medical Doctor from the University of London in 1969. In recognition of her services to the nation she was awarded the JMN (1990), DMPN (2003), DPMS (2005), DGPN (2007) and PJN (2010). She was also awarded the 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. She received the Brand Laureate Personality Award in 2009 and Brant Laureate Hall of Fame – Life Time Achievement Brand Icon Leadership Award in 2017.

MERCY Malaysia Board of Trustees



TAN SRI JOHAN JAAFFAR

Tan Sri Johan Jaaffar has wide experience in the media world. He was a journalist and editor, an award-winning creative writer, and a well-read columnist. He started his career as a researcher and later led the magazine division of Dewan Bahasa dan Pustaka (DBP), the Language and Books Bureau, a statutory body under the Minister of Education.

He was Chief Editor of the Utusan Melayu group from 1992 to 1998. He was also Chairman of Media Prima Berhad, the largest and only integrated media company in Malaysia (serving from April 2009 to August 2015).

Johan is currently Chairman of Sanctuary Billboards Sdn Bhd, an outdoor advertising company and Chairman of Nobel International School in Kuala Lumpur. He was formerly Chairman of DBP, which is also the country's biggest publishing house.

He sat on the board of Multimedia Development Council (MDC) back in the 90s. He was a member of the Malaysian Business Council (MBC) and a committee member of Malaysia Incorporated (Malaysia Inc).

He was also a member of the National Brains Trust on National Education, set up by the National Economic Action Committee (NEAC). He was Head Jury for the Asia Pacific Film Festival in Kuala Lumpur in 2005. He was once Chairman of the Malaysian Arts Council and a member of the board of Akademi Seni Budaya dan Warisan Kebangsaan (ASWARA), Malaysia's foremost school of performing arts. He was a member of the nomination committee for the Education and Community category of the Merdeka Awards.

Johan was Chairman of the Consultation and Prevention Panel of the Malaysian Anti-Corruption Commission (MACC) until December 2015. He was also a member of the National Unity Consultative Council (NUCC). He served as a member of the political funding task force set up by the government. He is currently a member of the newly established Putrajaya Higher Education Task Force (PHETF). He is also on the board of

Perbadanan Tabung Pendidikan Tinggi Nasional (PTPTN), a corporation under the Ministry of Higher Education responsible for granting study loans to students pursuing tertiary education.

He is also Adjunct Professor at the Universiti Kebangsaan Malaysia (UKM), Universiti Pendidikan Sultan Idris (UPSI) and The LimKokWing University of Creative Technology.

He was a columnist for the *New Straits Times* from 2002 to 2015 and wrote for *Berita Harian* for seven years. Since April 2016, he writes fortnightly for *The Star*.

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 sixteen institutions, catering to more than 26,000 students.

Educated and trained in the United Kingdom in Multi-Cultural Education, Elizabeth read her Master of Philosophy (MPhil) in Education at the University of Cambridge. Her Cambridge links see her actively involved in the Oxford and 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 international engagements included speaking at the Harvard Business School, University of Cambridge, University of Oxford, the University of Edinburgh and the Malaysia-UK Diamond Jubilee Forum in commemoration of 60 years of Bilateral Relations organised by ASLI in London. She is also known as an advocate for women in leadership and serves as a mentor in the ICAEW global programme for specially chosen female corporate leaders.

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. She is also a recipient of several international and national awards which include the Visionary Women Leadership Award at the 2nd World Women Leadership Congress & Award (WWLCA) in Mumbai (2015), the Malaysia Most Impactful Leadership Contribution Award 2014 by Asia Success Inc. and the Outstanding Asian Women Community Contribution Award from Malaysia Women's Career Building Association in 2011.

Elizabeth was recently elected as a member in the Malaysian Qualifications Agency (MQA) Council effective January 2016, Chair of the MQA Investment Committee and member of the MQA Disciplinary Committee since 1 February 2016.

In April 2016, she was conferred a second honorary doctorate by Victoria University. The Doctorate of the University award is in recognition of Elizabeth's role as a distinguished educator, for her work in promoting international education and issues relating to the education of women. The award also recognises her pivotal role in fostering the partnership between Victoria University and the Sunway Education Group.

In May this year, she was nominated to be on the Trustee Committee of the Chair on Women Leadership, Universiti Kebangsaan Malaysia. In the same month, she was bestowed the award for Women Entrepreneur in Canadian Education at the Malaysia Canada Business Council (MCBC) 25th Anniversary Business Excellence Award ceremony which was held in conjunction with Canada's 150th Anniversary Celebration. In August, Elizabeth was bestowed the Malaysian Chinese Women of Excellence Award in Education by Wanita MCA in celebration of National Women's Day.

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.

She is married to Company Director Mr Cheah Ming Chiew. They have three daughters, aged between 19 years and 22 years.

MERCY MALAYSIA EXECUTIVE COUNCIL



Standing from left to right

1. Mr. Harmandar Singh Naranjan Singh
2. Dr. Mohamed Ashraff Bin Mohd Ariff
3. Hj. Norazam Ab Samah
4. Dato' Dr. Ahmad Faizal Mohd. Perdaus
5. Ar. Mohammad Ayof Bin Bajuri
6. Prof. Dr. Mohammad Iqbal Bin Omar

Exco not in picture

15. Assoc Prof. Dr. Shalimar Abdullah
16. Dr. Peter Gan Kim Soon
17. Dr. Roslan Harun
18. Assoc. Prof. Dato Dr. Hanafiah Harunarashid

Sitting from left to right

7. Mr. Razi Pahlavi
8. Ir. Mohamad Hanafi Ramli
9. Dr. Hariyati Shahrina Abdul Majid
10. Yang Mulia (YM) Datin Raja Riza Shazmin Raja Badrul Shah
11. Dr. Norzila Mohamed Zainudin
12. Dr. Nasuha Yaacob
13. Datuk Dr. Heng Aik Cheng
14. Mr. Ahmad Faezal Mohamed

MERCY MALAYSIA EXECUTIVE COUNCIL



DATO' DR. AHMAD FAIZAL MOHD. PERDAUS
President of MERCY Malaysia

Dato' Dr. Ahmad Faizal has been President of MERCY Malaysia since August 2009. MERCY Malaysia is a prominent home-grown International NGO from the Global South with health-related programs, emergency response, disaster risk reduction and WASH as well as programs for refugees being among of its main focus areas. Founded in 1999 amidst the Kosovo crisis, MERCY Malaysia has become one of the most recognizable names in the humanitarian world despite its relatively small size with its high impact programs, smart partnerships and strong advocacy for meaningful change in the sector. MERCY Malaysia is a member of many regional and international networks and is also one of the few Global South members of the Global Health Cluster (GHC).

Dato' Dr. Ahmad Faizal became the first representative from the Global South to be elected as the Chairperson of the International Council of Voluntary Agencies (ICVA), the world's largest network of humanitarian NGOs in 2015. As ICVA chair, he also sits on the IASC Principals, which is the highest direction and decision-making body in the humanitarian world where Dato' Dr. Faizal actively advocates on behalf of NGOs globally. The IASC is chaired by the Under-Secretary General (USG) for Humanitarian affairs/Emergency Relief Coordinator (ERC) of the United Nations (UN) and its membership includes the leadership of all the major UN humanitarian agencies. His term as ICVA Chair ends in 2018 after a total of nine years on ICVA's Board.

He is also the Chair of Professionals in Humanitarian Assistance and Protection (PHAP), which is the world's largest network of individual humanitarian professionals since 2016 while he also previously sat on the Boards of the Humanitarian Innovation Fund (HIF) and Advanced Training Program on Humanitarian Action (ATHA). He has also been recently appointed as a member of the Advisory Board of the Centre for Humanitarian Leadership (CHL).

He joined MERCY Malaysia as a volunteer in 2003 and prior to assuming the presidency in 2009 he had served on MERCY Malaysia's Executive Council (EXCo) since July 2003 and was elected Vice President in 2008. He was head of MERCY Malaysia's Drug Rehabilitation and Assistance Program (DRAP) in Malaysia from 2003 to 2006 and had contributed to various local missions since then. His international missions include Sri Lanka (2003), Iran (2004), Sudan (2004 & 2006), Indonesia (2005, 2006, 2009), Pakistan (2005), Myanmar (2008), Syria (2013), Philippines (2013) and Turkey for the Syria conflict (2017).

He is a Respiratory Physician by training and was an academician for about a decade and is currently in private practice. He is married with three children.



DATUK DR. HENG AIK CHENG
Vice President 1

Datuk Dr. Heng Aik Cheng is a Consultant Orthopedic Surgeon and Traumatologist at the Sabah Medical Centre. He joined MERCY Malaysia as a volunteer in 2002, 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, Philippines and Nepal. Datuk Dr Heng Aik Cheng was also appointed onto MERCY Malaysia UK's Board of Trustees in 2015.

He serves on the Board of the Asian Disaster Risk Reduction Network (ADRRN) and is the Chairman in the ASEAN Agreement on Disaster Management and Emergency (AADMER) Partnership Group (APG). He has been a member of 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. He is also the Race Director of the Borneo International Marathon. 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. He was awarded the PGDK by the Sabah State which carries the title Datuk.

MERCY Malaysia Executive Council



YM Datin Raja Riza is a lawyer by profession. She is the Managing Partner of Messrs Raja Riza & Associates, her own legal firm of 13 years based in Kuala Lumpur. Trained as a litigator, her areas of practice are in Banking & Commercial law, General Litigation as well as Syariah Advisory. She graduated with an LLB (Hons) from the University of Glamorgan Wales in 1997 and Certificate in Legal Practice (LP) from Brickfields College in 1998. She also holds a Diploma in Syariah Legal Practice (DSLPL) from the International Islamic University Malaysia.

YM Datin Raja Riza sits on the Executive Council of MERCY Malaysia and holds the position of Vice President II since the Annual General Meeting (AGM) in May 2017. She was the Honorary Secretary and legal advisor of MERCY Malaysia from 2006 to 2017. She oversees several departments in MERCY Malaysia including Quality and Accountability as well as the Communications and Fundraising Department. YM Datin Raja Riza has been deployed to missions in Malaysia and around Asia, including Yogyakarta, Nias and Aceh in Indonesia as well as in Myanmar, and the Philippines. She is an avid speaker on topics such as governance in an organisation, transparency, and accountability as well as volunteerism and women empowerment.

She played an integral role in liaising with the relevant bodies and authorities in the establishment of MERCY Malaysia UK becoming one of the Trustees of MMUK since its inception in 2014. She is also the Vice President of Kelab Wanita Ikon Malaysia (KWIM), an organisation helping to empower women in business and livelihood.

While her love for the Law has made her who she is, she believes that one must go beyond what one's training in order to reach a greater goal in life. Her calling to contribute to the humanitarian cause in MERCY Malaysia made it so.



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 the Medical Advisor for MERCY Malaysia, functions as the Team Lead for the Emergency Response Unit (ERU) and is active in the Logistics and Volunteer Management Department. Besides local missions in Sabah and Kelantan, she has been involved in international missions in Afghanistan, Cambodia, Pakistan, Indonesia, Japan, Philippines and Nepal.

Currently, she serves as specialist orthopaedic and hand surgeon in the Department of Orthopaedics at Pusat Perubatan Universiti Kebangsaan Malaysia (PPUKM). She also 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 Medicine and Surgery in 1998 from the University of Nottingham, United Kingdom.

MERCY MALAYSIA EXECUTIVE COUNCIL



AR. MOHAMMAD AYOF BIN BAJURI
Honorary Treasurer

Ar. Mohammad Ayof bin Bajuri started volunteering for MERCY Malaysia in 2003 as a technical volunteer. He has been an indispensable member of the technical team during international missions to Pakistan, Myanmar, Indonesia, Sri Lanka and the Philippines, as well as several missions within Malaysia. Ar. Mohammad Ayof participated in the designing, construction and coordination team of building new schools, houses and public utilities for people affected by natural disasters during various missions. In 2014, Ar. Mohammad Ayof was elected to the Executive Council of MERCY Malaysia.

Ar. Mohammad Ayof graduated from Universiti Teknologi Malaysia with a Bachelor of Architecture in 1994. He sits on the Board of Directors of RMA Design Team Sdn. Bhd., a registered professional with Board of Architect Malaysia (LAM) and runs an established architecture firm in Kuala Lumpur. Currently, Ar. Mohamad Ayof works as an Architect at RMA Design Team Sdn. Bhd., and is actively involved in charity works.



MR. RAZI PAHLAVI
Honorary Secretary

Razi Pahlavi is the Managing Director of Amanie Holdings Limited, a leading international Islamic finance advisory group based in Kuala Lumpur and Dubai. Razi graduated from International Islamic University Malaysia with a Master of Law (LLM) Banking Law and Bachelor Degree in Accounting. Razi has earned professional certifications with the certified Chartered Accountant of the Malaysian Institute of Accountants (MIA) and Islamic Financial Planner (IFP). A licensed New Capital Markets Services Representative with the Securities Commissions of Malaysia, Razi holds the position of Honorary Secretary in MERCY Malaysia.

MERCY Malaysia Executive Council



MR. AHMAD FAEZAL MOHAMED
Asst. Honorary Secretary

Mr. Ahmad Faezal Mohamed joined MERCY Malaysia as Deputy Executive Director in April 2012 and was promoted to Executive Director in 2013. He has been directly involved in various MERCY Malaysia's local and international missions in Syria, Lebanon Philippines and Myanmar.

He was responsible for the smooth running of MERCY Malaysia in its operations, fundraising, human capital, finance and other areas as well as strategising the organisation's direction. He also promoted the active and broad participation of volunteers in all areas of the organisation's work.

Mr. Ahmad Faezal established good working relationships and cooperation with all stakeholders in promoting the activities of the organisation and its programmes in the media.

He left MERCY Malaysia in June 2015 to join Maybank Foundation as the Head of CR and Maybank Foundation. However, he continues to provide strong support for MERCY Malaysia.

Mr. Ahmad Faezal earned a Bachelor of Economic majoring in Politics in Flinders University of South Australia. He is also a certified financial planner.



MR. HARMANDAR SINGH NARANJAN SINGH
Committee Member

Harmandar Singh, popularly known as Ham, has been in the marketing and brand communications business globally for over 30 years. He has created more than 400 commercials, and won over 100 local and international awards.

In 1980, Ham received his Higher Group Diploma in Marketing from the UK and in 2007 pursued his Master in Business Administration (MBA) with the University of East London.

He has shaped major milestones in the regional media and marketing industries as the founder and organiser of the Malaysian Media Conference, Malaysian Chief Marketing Officers Conference, APPIES Marketing Awards, and Product of the Year and is Zonal Director for the Promotion Marketing Awards of Asia (Dragons).

He is also the Publisher & Editor-In-Chief of MARKETING magazine, which has been around for more than 20 years, reaching out to 35,000 marketing communications professionals in Malaysia and across the region.

Ham served as a newspaper columnist for more than 11 years as a highly respected commentator on advertising, media and marketing under the pen-name SLEDGEHAMMER to over a million readers every Saturday for The Star.

For the last decade, he has been Malaysia's official country representative for the Cannes International Advertising Festival in France. His extensive work in advertising has also 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.

Ham was elected Committee Member of MERCY Malaysia since 2017 and constantly deploys his communications expertise and media network to help raise funds supporting humanitarian aid. He has joined media missions in Lebanon and Nepal.

As a past two-term President of the International Advertising Association (Malaysia), he teaches an exciting group of students at University Pendidikan Sultan Idris (UPSI) for their Degree in Social Communications programme, which he co-authored.

Ham wears many hats, but only one turban.

MERCY MALAYSIA EXECUTIVE COUNCIL



IR. MOHAMAD HANAFI RAMLI
Committee Member

Ir. Mohamad Hanafi Ramli obtained his B. Sc in Electrical Engineering from the University of Missouri-Columbia, USA in 1985.

He is a professional engineer registered with the Board of Engineers (BEM) and the Institution of Engineers, Malaysia. He has over 30 years' experience in planning, designing, supervising and managing of engineering works in the construction industry. Presently, he runs his M&E engineering consultancy firm involving projects in the public and private sectors. Ir. Hanafi is also a trainer and an examiner who qualifies for professional engineers with BEM.

He started his career in the government with JKR involving military installations in many parts of the country. He was involved in infrastructures and facilities for MiG-29 and F/A-18D at RMAF bases in Kuantan, Butterworth, Labuan and Gong Kedak and RMN in Pulau Layang-Layang.

He continued his service with UEM, a public listed company in 1995 engaging in constructions of the National Sports Complex, KLIA, Sheraton Imperial, Concorde Hotel and PLUS highway.

Over the years, he has been involved in health care facilities for ACC Hospital Ipoh, Hospital Cameron Highlands and Hospital Kluang under the Ministry of Health. He was involved with KLIA in runways, taxiways & apron, air side road, BHS and TTS tunnels, air field lighting, 400Hz ground power supply, upgrading for NLA A380 at Satellite Terminal and integration of existing and new air traffic control system (ATCS) for KLIA and KLIA2.

For educational institutions, his works include the Kulliyah of Science and Pharmacy at UIA Kuantan and power supply reticulations at UM, UKM, UPM and UiTM.

His volunteer work with MERCY Malaysia started in 2005 after the Indian Ocean Tsunami. He was part of the technical team for the rehabilitation and reconstruction of public amenities including schools, higher learning institutions, orphanages and health care facilities in Aceh. The technical team headed the reconstruction of Hospital Nias which has won an award in 2010 and many district clinics in Pulau Nias, Sumatera Utara.

From there, he continued serving in the reconstruction of health care and public facilities in other parts of Indonesia such as Bengkulu, Padang and Yogyakarta. He also volunteered with MERCY Malaysia for reconstruction and rehabilitation projects in Sri Lanka, Pakistan, Myanmar, Philippines and Bosnia.

On local shores, he has participated in flood relief in Pahang, Terengganu and Kelantan since 2013. Ir. Hanafi was an internal auditor prior to being elected as an Executive Council Member of MERCY Malaysia in 2017.

MERCY Malaysia Executive Council



Prof. Dr. Mohammad Iqbal bin Omar @ Ye Htut joined MERCY Malaysia in 2006 as a medical volunteer for a monthly Health Clinic providing medical care to Rohingya refugees in Klang. Since then he has volunteered for various humanitarian missions in Pakistan, Myanmar, Indonesia, Japan, Libya, Somalia, Syria, Bosnia, Nepal, Cox's Bazar (Bangladesh) and Malaysia. His professional abilities and assessment skills have contributed to the effective and timely implementation of several programmes. Prof. Dr. Iqbal has represented MERCY Malaysia at several regional and international conferences, both as participant and speaker.

Prof. Dr. Iqbal completed his MBBS in 1985, followed by 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 and later as a Registrar in various hospital and institutes. In 1994, he received his Post Graduate Diploma in Reproductive Medicine from University Putra Malaysia and in 2004 he received a Master of Medicine from Edith Cowan University, Australia, specialising in Geriatric Medicine. Currently Prof. Dr. Iqbal holds the position of Director of University Health Center, Universiti Malaysia Perlis (UniMAP).



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 Committee Members who dedicated her time and expertise to serve affected communities. She provided medical services for MERCY Malaysia and had participated in medical missions in Syria in 2013 and late 2014.

In the Ministry of Health, Dr. Norzila is the Head of Paediatric Respiratory Service. Aside from that, she is also a member of the Paediatric Respiratory Subspecialty Board and a Board Member of Lung Foundation Malaysia since 2013. She is also active as a Committee Member of Hati Nurani and was involved in the development of School in Hospital Project (Sekolah Dalam Hospital) in Malaysia.

Previously she has volunteered with Mercy Mission 15 on a mission to Azad Kashmir from the 24 December 2005 until the 6 January 2006.

MERCY MALAYSIA EXECUTIVE COUNCIL



Hj. Norazam Ab Samah, an architect by profession, is the Chairman of AZAMAS Engineering Consultant which he co-founded with his wife.

Fondly known as 'Pak Azam', he joined MERCY Malaysia as a volunteer in 2000 and was deployed to support the relief mission to Afghanistan. In 2002, he was elected as the Executive Council member of MERCY Malaysia and later served as the Vice President from 2011 to 2014.

Pak Azam is very experienced in humanitarian and relief work having volunteered for more than 18 years to Afghanistan, Iraq, Cambodia, Sri Lanka, Sudan, Iran, Indonesia, Myanmar, Pakistan, Gaza, Japan, Syria, Djibouti Somalia, Bosnia, Philippines, Nepal, North Korea, Thailand and Bangladesh as well as, local missions.

During his active period, he was appointed as the Head of Operations for MERCY Malaysia in Indonesia (Aceh-Nias, 2005-2008) in which he successfully designed and managed MERCY Malaysia country operations in Indonesia including the completion of 27 projects and constructions. One of the biggest breakthroughs during the mission was to lead the masterplan design for Nias General Hospital which was destroyed by the 2005 Nias earthquake. The masterplan attracted funders from Japan, China and Singapore, who contributed USD 15 million to complete the reconstruction of the hospital. Pak Azam is one of the founding members of 'MERCY Malaysia's Technical Team' and still served as advisor at present. The Technical Team is a pool of MERCY Malaysia volunteers with technical background in building and construction. The team has contributed in the development and implementation of almost all reconstruction projects by MERCY Malaysia over the years.

In 2014, Pak Azam was appointed as Country Director of Philippines for the Typhoon Haiyan Response and in 2015 as Middle East Europe and North Africa Director to coordinate programmes as well as stakeholder engagement with donors and funders in the region.

In 2016 he was appointed as Director of Strategic Programmes and Operations when he proposed for the restructuring of the Programme Operations Division of MERCY Malaysia. He led the development of Building Resilient Communities (BRC), an improvement to the existing Disaster Risk Reduction initiative by MERCY Malaysia contributing to the development of BRC modules and training framework which was launched during the World Humanitarian Summit 2016 in Istanbul.

Pak Azam holds a bachelor degree in Architecture from Universiti Teknologi MARA (UiTM) in 2000 and is currently pursuing a master's degree in Policy and Disaster Management at the South East Asia Disaster Prevention Research Institute, Universiti Kebangsaan Malaysia (UKM).

MERCY Malaysia Executive Council



Dr. Mohamed Ashraff bin Mohd Ariff joined MERCY Malaysia as a medical volunteer, strengthening the organisation's Orthopaedic services on several international and local missions. In 2014 during Typhoon Haiyan in the Philippines, Dr. Ashraff served as a medical volunteer in the Ormoc District Hospital, conducting emergency Orthopaedic surgeries to injured people. He has been a vital medical expert in strengthening several health projects, advocating the need to meet beneficiaries' specific needs above all else. Dr Ashraff was later appointed as MERCY Malaysia Ex-Officio member.

An Orthopaedic and Trauma surgeon subspecializing in Arthroplasty based in Universiti Kebangsaan Malaysia Medical Center (UKMMC), he graduated with a Bachelor of Medicine and Bachelor of Surgery (MB ChB) from the University of Otago, New Zealand. Upon graduation, he worked in New Zealand, gaining valuable surgical experience in different surgical disciplines. The 9 years he spent studying and working in New Zealand helped him develop a sense of awareness and awakening towards civic responsibility and social welfare, arousing his interest and decision to support humanitarian causes.

Upon returning to Malaysia, Dr Ashraff furthered his training in Orthopaedics in Hospital Kuala Lumpur (HKL) for 8 years as an orthopaedic registrar, followed by another year as an Orthopaedic post graduate trainee, first in HKL then in Hospital Universiti Kebangsaan Malaysia. He set root in Universiti Kebangsaan Malaysia, and goes by the mantra 'I feel that capitalism cannot stand alone without socialist tones'.



Dr. Hariyati Shahrina Abdul Majid, or Hari, as she is fondly known by her peers, obtained her PhD in Psychology (Health) in 2001, MSc in Applied Psychology, both from the University of Surrey in the UK (1996) and her BSc (Psychology) from the University of Wisconsin Madison in the USA (1992).

Dr. Hari is a co-founder of Naluri Life, a new health tech digital therapeutic startup, serving as a Health Psychologist, alongside the founder, Azran Osman Rani. This startup combines behavior science and psychology, data science and digital design to help users make healthy and long-lasting lifestyle changes.

Prior to Naluri, Dr. Hari served as an Assistant Professor for 20 years with International Islamic University Malaysia (IIUM), with her research focused on chronic illnesses.

A PSMB certified trainer with HR Wellness, Dr. Hari provides training services to medical and allied health professionals on topics such as therapeutic communication, motivational interviewing, stress management and self-care. She helped develop the Clinical Practice Guidelines for Management of Breast Cancer (Malaysian Ministry of Health, 2011).

She was seconded to Prince Court Medical Center (PCMC) from 2008 to 2010 to set up the Psychology Unit at the Lifestyle Modification Center (LMC), providing psychological support services for patients diagnosed with a variety of chronic medical conditions. At PCMC, she also served as a consultant for the reality show Biggest Loser Asia, Seasons 1 and 2.

Dr. Hari is currently a member of various organisations and societies, such as the American Psychological Association, the Malaysia Diabetes Educators Society, the Malaysian Hemophilia Society and MERCY Malaysia, of which she serves as an Executive Council Member, overlooking mental health and psychosocial support services and human resource.

MERCY MALAYSIA EXECUTIVE COUNCIL



DR. NASUHA YAACOB
Ex-Officio

Dr Nasuha Yaacob joined MERCY Malaysia as a volunteer in 2011, upon returning back to Malaysia from a Hajj medical mission. She has always been passionate with humanitarian causes and went through basic mission training in 2012. Her first deployment was to Philippines in 2013 following Haiyan Typhoon where she was actively involved in strengthening medical services at Ormoc District Hospital, particularly in obstetrics care. She returned to Ormoc in 2014 to provide much needed midwifery refresher training in emergency obstetrics care.

Back home when she was working at HKL, she regularly served alongside the Pertiwi Soup Kitchen group, providing street-style medical mobile clinic to the homeless and urban poor.

Dr Nasuha is an Obstetrician and Gynaecologist and completed her Masters in O&G in 2009. She subspecialises in Reproductive Medicine and Infertility and is currently the Head of Reproductive Services unit at Hospital Sultanah Nur Zahirah, Kuala Terengganu.

During her overseas training in Ireland in 2015, she spent her winter break in Lesvos Island with a UK-based NGO, providing medical care to Syrian refugees who were crossing to Greece to escape war. In 2016, upon returning home, she was appointed as ex-officio of MERCY Malaysia. Currently she's the Reproductive Health Lead, working on maternal and women's reproductive health programmes. Current ongoing projects are midwifery training in Idlib Syria and the Maternal Child Health Centre in Cox's Bazar, Bangladesh.



ASSOC. PROF. DATO DR. HANAFIAH HARUNARASHID
Ex-Officio

Assoc. Prof. Dr. Hanafiah Harunarashid is an internationally-renowned surgeon, especially in the field of vascular surgery and surgical training. He is an alumni of the Malay College Kuala Kangsar and received his medical education at the world famous University of St Andrews and the University of Edinburgh, Scotland. He graduated with 17 distinctions and was the first and only Malaysian to have won the prestigious Margaret-Pickerring Gold Medal award at university. He is also one of the youngest specialist surgeon in Malaysia and the only Malay surgeon serving the government hospital in Perak.

In January 2014, he was awarded Darjah Setia Negeri Sembilan by the Tuanku Chancellor which carries the title Dato.

He is currently the President of the College of Surgeons Malaysia, Director of the Advanced Surgical Skills Centre, UKM Medical Centre (UKMMC), Associate Professor/Senior Consultant Vascular and Endovascular Surgeon, Department of Surgery, UKM Medical Centre (UKMMC), Vice-President of the Vascular Society of Malaysia, Honorary Lecturer of Universiti Sains Islam Malaysia, Chief Coordinator/ advisor of Part I Masters of Surgery, member of the National Specialist Register, Editor in Chief of the Journal of Surgical Academia, examiner for the Royal Colleges of Surgeons (UK) International Fellowship Examinations, examiner for the Royal College Of Surgeons (UK) membership examinations and a visiting surgeon to the national Heart Institute (IJN).

Assoc. Prof. Dato Dr. Hanafiah was previously involved in MERCY Malaysia's Flood Relief Mission in Pahang on 2015. On September 2017, Assoc. Prof. Dr. Hanafiah Harunarashid was appointed as Ex-Officio of MERCY Malaysia.

MERCY Malaysia Executive Council



Peter Gan is public health physician who is pursuing Doctor of Public Health (DrPH) with University of Malaya. He received his medical degree from Manipal University, followed by graduate studies in Medical Ethics and Law from King's College London and Public Health from University of Malaya. He is certified in Health in Complex Humanitarian Emergencies from Emory University, USA, and International Health from University of Copenhagen, Denmark.

Trained as a physician, Peter is committed to public service by participating as a board member for the Medical Research & Ethics Committee (MREC) that protects the rights and wellbeing of research subjects, Malaysian Medico-Legal Society (MLSM) that promotes discussion between professions and Transparency International (TI) Malaysia for communication, fundraising and publication against corruption. His passion for universal healthcare is further reinforced by his regular volunteerism with soup kitchens and free clinics that provide essential care to the marginalised and disenfranchised individuals in the local community.

Peter volunteered with MERCY Malaysia prior to his medical education, assisting in mobile clinics, vaccination programmes and fundraising since 2001. As a medical practitioner, he was deployed to Pahang and Kelantan in 2014 and 2015 respectively to manage the primary health clinics in flood relief centres. In 2017, he answered the call for the flood and landslide relief in Sri Lanka by performing rapid assessment of damages, as well as providing primary healthcare to 465 affected individuals. He was appointed as an Ex-Officio member to assist in public health programmes of MERCY Malaysia. Later that year, he was also deployed to Bangladesh to respond to the humanitarian crisis that affected the Rohingya. He was also actively involved in the stakeholder engagement with IOM, UNHCR, UNFPA and WHO in the early stages of the crisis.



Dr. Roslan Harun joined MERCY Malaysia as a volunteer in 2001 and co-opted into the Ex Officio MERCY Malaysia in September 2017. He was involved in MERCY Malaysia's mission to Pakistan in 2001, Aceh in 2004, and Kashmir in 2005. Dr. Roslan Harun is also a Member of the Persatuan Kesihatan IKRAM Malaysia (IKRAM Health), Pertubuhan IKRAM Malaysia (IKRAM), Islamic Medical Association of Malaysia (IMAM), Academy of Medicine Malaysia, Royal College of Physician and Surgeon Glasgow, Malaysia Thoracic Society (MTS), and European Respiratory Society (ERS).

Dr Roslan Harun commenced his practice in KPJ Ampang Puteri in April 2015. He was formerly a Senior Consultant Respiratory Physician and Associate Professor at the UKM Medical Centre. He graduated from the Faculty of Medicine, Universiti Kebangsaan Malaysia in 1989 and obtained his specialist qualification MRCP (UK) from the Royal College of Physicians, United Kingdom in 1993. After completing his respiratory training and PhD degree from the University of Leeds (UK), he became a Clinical Specialist in Respiratory Medicine and Lecturer in Department of Medicine UKM in 1998. In 2001, he was appointed as Consultant Respiratory Physician and Associate Professor and became Senior Consultant Respiratory Physician in 2010. His clinical interests include chronic cough, asthma, COPD, lung cancer, respiratory infections (including tuberculosis) and interstitial lung disease.

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 income in 2017 by 19% or RM2.6 million compared to previous year. The total income received for 2017 was RM13.4 million compared to RM10.8 million received in 2016. Total donation received in 2017 were RM13.3 million and income received from other sources was around RM116 thousand. Table 1 indicates the breakdown of total income received and Chart 1 shows the movement from 2015-2017.

There has been a slightly increased on both restricted and unrestricted fund in 2017. 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 income is shown in Table 2 and Chart 2.

CHARITABLE EXPENDITURE

MERCY Malaysia has spent RM15 million on Charitable Expenditure in 2017 and is shown in Table 3. By end of 2017, MERCY Malaysia has conducted more than 130 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 63% of the total charitable expenditure or equivalent to RM9.4 million spent on Medical and Health Related projects and programs. The illustration of the breakdown of Charitable Expenditure for year 2017 is shown in Table 3 and Chart 3.

OPERATIONAL EXPENDITURE

MERCY Malaysia's has managed to reduce our operating cost by almost RM1 million in 2017. The total operating expenditure for 2017 amounted to RM2.1 million compared to RM3.0 million in 2016 which also includes the fund raising & communication expenditures of approximately 4% 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, secretariat, members, pool of volunteers, partners and donors who have worked with us throughout the year.



AR MOHAMAD AYOF BIN BAJURI
Honorary Treasurer

FINANCIAL REVIEW

Financial Performance

TABLE 1: DONATION AND OTHER INCOME 2017

	2015	2016	2017
Donation			
Unrestricted Fund	3,970,742	779,160	1,770,177
Restricted Fund	17,596,429	9,578,455	11,527,083
Annual Fundraising Dinner	223,804	-	-
Total Donation	21,790,975	10,357,615	13,297,259
Other Income			
Membership Fee	2,770	6,480	3,800
Other Income	579,461	453,017	113,181
Total Other Income	582,231	459,497	116,981
TOTAL DONATION AND OTHER INCOME	22,373,206	10,817,112	13,414,240

TABLE 2: SOURCES OF DONATION BY SECTOR 2017

SECTOR	2017 (RM)	Percentage	2015 (,000)	2016 (,000)	2017 (,000)
Private sector	7,817,226	59%	12,980	4,042	7,817
Public	2,523,140	19%	3,507	1,852	2,523
Other NGOs	745,694	6%	2,627	292	746
International Organisations	1,948,945	15%	2,276	3,700	1,949
Malaysia Government	262,255	2%	401	472	262
TOTAL	13,297,259	100%	21,791	10,358	13,297

Charitable Expenditure

TABLE 3: TOTAL CHARITABLE EXPENDITURE 2017 - How We Spent

Cluster/Services	Amount (RM)	Percentage
Medical & Health Related	9,397,957	63%
Water, Sanitation & Hygiene (WASH)	2,176,377	14%
Food Relief	1,130,937	7%
Shelter	95,873	1%
Disaster Preparedness	2,232,484	15%
TOTAL CHARITABLE EXPENDITURE	15,033,628	100%

FINANCIAL REVIEW

CHART 1: TOTAL INCOME RECEIVED 2017

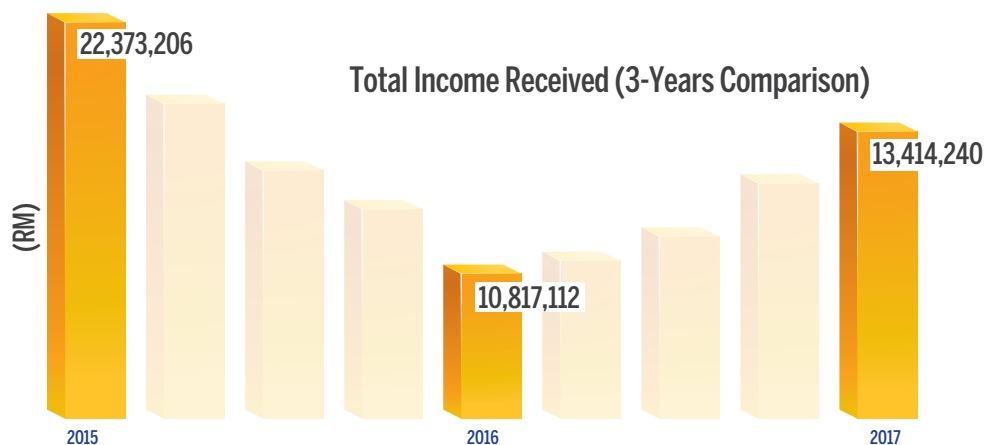


CHART 2: DONATION RECEIVED BY SECTOR 2017

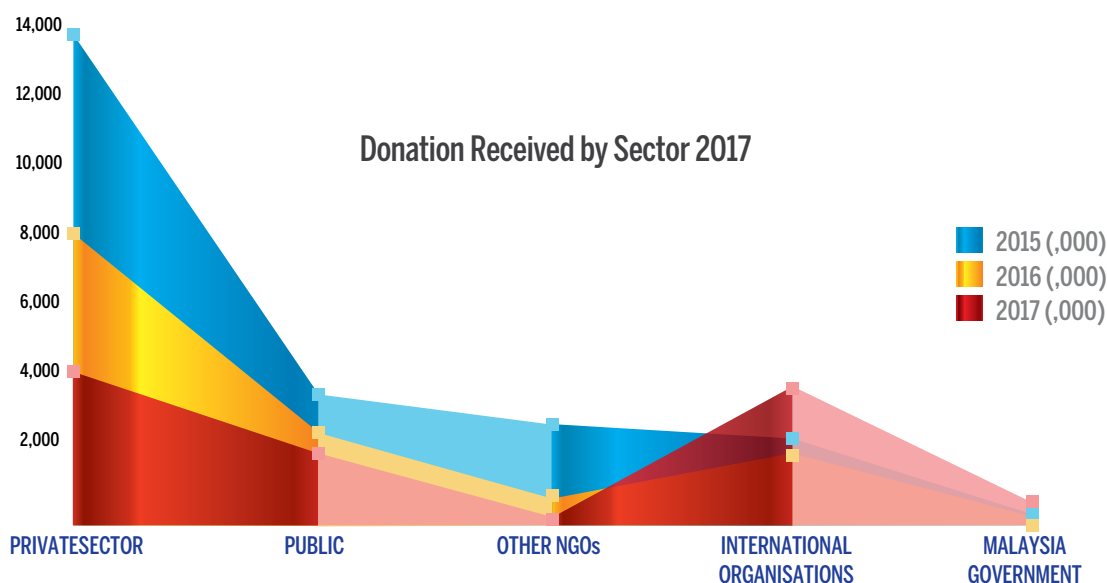
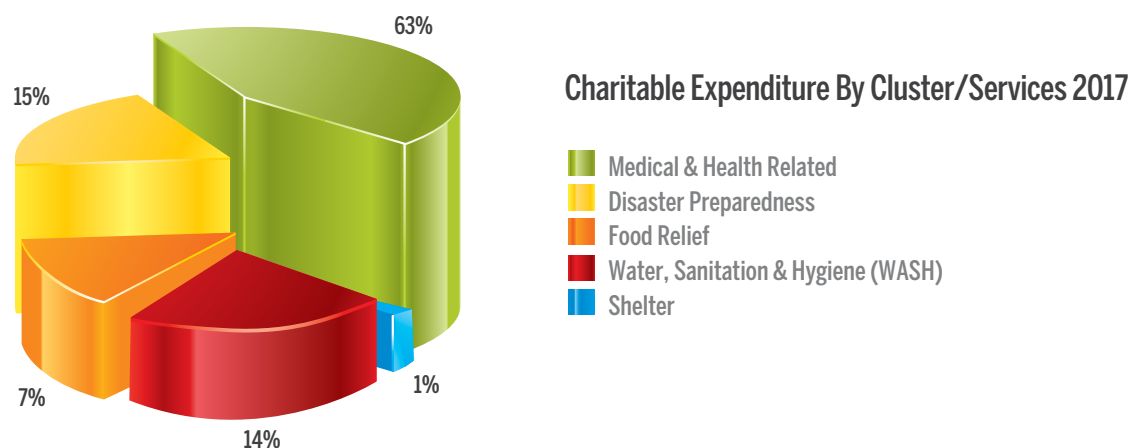


CHART 3: CHARITABLE EXPENDITURE BY CLUSTER/SERVICES 2017





OUR WORK **MALAYSIA**

MALAYSIA FLOOD RELIEF 2017

Climate change is no longer a threat but a reality today. One of the effects was the unpredictable monsoon season. Instead of happening during the months of November and December as the decades before, heavy rains came in January 2017, leading to floods in Terengganu, Kelantan, Pahang and Johor.

Having established a good working relationship with local and national government agencies over the years, MERCY Malaysia was on standby mode for the flood season when Meteorological Department warned of heavy rains and flooding. As soon as the alert was out, response teams were deployed to deliver humanitarian assistance to affected communities.

Hygiene kits and Ready-to-Eat (RTE) food parcels were distributed to over 3,000 people in evacuation centres at the affected states throughout the duration of the flooding.





Project

MALAYSIA FLOOD RELIEF 2017

OBJECTIVES

- To engage with PKOB and relevant agencies to identify needs and gaps
- To deliver humanitarian assistance to affected communities
- To monitor the flood situation on the ground

PROJECT PARTNER

Various government and non-government agencies

LOCATION

1. Pasir Mas, Kelantan
2. Kuala Lipis, Pahang
3. Segamat, Johor
4. Hulu Terengganu, Setiu and Besut, Terengganu

DURATION

22 Jan – 1 Feb 2017

ACCOMPLISHMENTS

KELANTAN

- 500 hygiene kits and 406 food parcels distributed to 8 villages.

PAHANG

- 542 hygiene kits and food parcels distributed to 8 villages.

JOHOR

- 1,204 hygiene kits and food parcels distributed to 10 evacuation centres.
- Established Child-Friendly Spaces at 3 evacuation centres.

TERENGGANU

- 800 hygiene kits and food parcels distributed to 28 villages across Hulu Terengganu, Setiu and Besut.

NO. OF BENEFICIARIES

Estimated 3,452 (Indirect beneficiary: 17,260)



KEDAH

In May 2015, an estimated 1,600 asylum seeker and migrants from Myanmar and Bangladesh were believed to have departed by sea from the Bay of Bengal. Approximately 33,600 refugees and migrants travelled through South-East Asia in mixed maritime movements. Boats trafficking individuals from Bangladesh and Myanmar arrived in Thailand, Malaysia, and Indonesia, in what was termed 'the Bay of Bengal crisis'.

Those who landed in Malaysia were held at the Belantik Immigration Detention Centre, Kedah, while awaiting UNHCR verification process. Most of the 'Boat People' were released by July 2016.

MERCY Malaysia supported the Detention Centre during the influx of 'boat people' through deployment of volunteers to provide them with necessary assistance in collaboration with the centre's staff. The team conducted cleaning activities at the male detention cells on a monthly basis for several months. Activities were also carried out for children below 15 years old to keep them occupied while UNHCR works on verifying and releasing the asylum seekers. MERCY Malaysia also provided assistance through these activities:

Basic Hygiene kits: Distributed every third week of the month for all detainees. Items included soap, shampoo, toothbrush, tooth paste, as well as t-shirts and track bottoms.

Medication: Replenishment of regular medical stocks as required by the detention centre medical bay.

Food items: Nutritional food packs like fortified biscuits were distributed upon arrival and leaving the detention centre, most of the 'boat people' arrived dehydrated and malnourished. Additional food supplies were distributed daily to the female detainees to provide additional nutritional needs.

Tube well: Construction of 1 tube well in the detention centre as additional clean water source to augment the existing main supply which sometimes are disrupted and causes water shortage for the centre.

Project



HEALTH AND WASH INITIATIVE FOR THE 'BOAT PEOPLE'

OBJECTIVES

To address the immediate needs of detainees in terms of health, hygiene and psychosocial wellbeing

PROJECT PARTNER(S)

- Immigration Department of Malaysia
- Ministry of Health Malaysia

LOCATION

Belantik Immigration Detention Centre, Sik, Kedah

DURATION

August 2016 – July 2017

ACCOMPLISHMENTS

- Distributed basic hygiene kits every 3rd week of the month.
- Conducted monthly cleaning activities at the cell block.
- Replenished medications stock for the detention centre medical bay.
- Daily distribution of nutritional food items for female detainees.
- Nutritional food packs distribution during detainees' arrival and release.
- Conducted educational activities for children below 15.
- Constructed 1 tube well at the detention centre.

NO. OF BENEFICIARIES

Estimated 1,200



KELANTAN

A water project for the Orang Asli community in Gua Musang was initially planned for three locations based on the needs of the community members. Kampung Awet, Kampung Cabang Subong and Kampung Jerek Kaling were selected after a series of geophysical surveys.

The three villages, located in remote areas in Gua Musang have 102 households, with an estimated population of 400 community members. The communities there have no access to clean water, relying only on rainwater collected in ponds that are open to contamination.

In collaboration with the BAKAS Unit of Gua Musang District Health Office (PKD Gua Musang), MERCY Malaysia successfully completed the water projects consisting of a tubewell, water tanks, pump houses and piping network at Kg. Awet and Kg. Jerek Kaling. The piping network at Kg. Cabang Subong was completed in July 2017, serving as a Hari Raya gift to the villagers.

Project



PROVISION OF CLEAN WATER FOR THE ORANG ASLI COMMUNITY AT KG. CABANG SUBONG

OBJECTIVES

Improve the quality of life through the provision of clean water for the community

PROJECT PARTNER

Pejabat Kesihatan Daerah Gua Musang

LOCATION

Kg. Cabang Subong, Gua Musang, Kelantan

DURATION

June 2016 – August 2017

ACCOMPLISHMENTS

Refurbished existing tube well and installed a water piping network in Kg. Cabang Subong to deliver clean water to each houses.

NO. OF BENEFICIARIES

148



KELANTAN

Access to safe water and sanitation is a human right and a prerequisite against hunger and poverty. Together with implementing partners and donors, MERCY Malaysia (MM) strives to fulfil this through the promotion of hygiene behavior change and sustainable water, sanitation and hygiene (WASH) services that are equitable, with long-lasting impact.

Since the 2014 Kelantan floods, MM had established an office at Kuala Krai to continue with post-disaster developmental programmes in Kelantan, notably for WASH programmes. The programmes are expected to improve the health standards and socio-economic wellbeing of the local communities by reducing the incidence of water and sanitation-related diseases and unhygienic practices.

With Maybank Islamic Berhad as programme donor, MERCY Malaysia consulted Pusat Zakat Negeri Kelantan to reach underprivileged communities whose income levels fall under the categories of fakir and miskin in Kuala Krai, Kelantan. Pejabat Kesihatan Daerah Kuala Krai was roped in to implement a clean water programme for the local community. The project consists of four components focusing on prevention and mitigation of public health risks, access to clean and safe water, as well as capacity building of targeted asnaf in the community.

The project is still underway and is expected to be completed by the end of March 2018.

Project

WATER, SANITATION AND HYGIENE (WASH) PROGRAMME FOR KUALA KRAI COMMUNITY

OBJECTIVES

- Community empowerment
- Provision of sustainable clean drinking water
- Improve health and hygiene through health education

PROJECT PARTNER

Local Partners:

1. Pejabat Kesihatan Daerah Kuala Krai (PKD Kuala Krai)

LOCATION

Daerah Kuala Krai, Kelantan

- Kampung Sungai Kamal
- Kampung Sungai Tias
- Kampung Bukit Pagar

DURATION

September 2017 – March 2018

ACCOMPLISHMENTS

1. 3 tube well, storage tanks and piping networks under construction at each village
2. Constructed 7 latrines

Pending activities:

1. Capacity Building – Training on Community based Resilience Development Initiative (CBRDI) training for 38 families
2. Distribution of food supplies to poor families/ Asnaf
3. Rainwater harvesting system for schools

NO. OF BENEFICIARIES

400



KELANTAN

When a hospital fails, affected communities are left without even basic emergency care. Keeping a hospital safe from natural or manmade threats goes beyond protection of its physical structure. It requires preservation of its infrastructure as well as a health workforce trained to keep the facilities operational in the event of a disaster.

A Resilient Hospital is one that remains accessible and can function at maximum capacity in a disaster, providing its services to the community when they are most needed. In 2017, MERCY Malaysia conducted resilient hospital workshops in 5 hospitals in Kelantan.

During the severe Kelantan floods in 2014, the 90-bedded Hospital Gua Musang was isolated and access was cut off due to high water levels. Recognising the need, MERCY Malaysia conducted a Resilient Hospital workshop for the management and staff member at the Hospital from 16 until 17 August 2017; the participants learnt to identify possible vulnerabilities that can disrupt hospital operations during disasters.

An action plan was developed following the workshop, in which the hospital staff has indicated that clean water is usually an issue during any emergency situation especially flood. Therefore, MERCY Malaysia proposed an installation of tube well for the Hemodialysis Unit to ensure it remain operational in a crisis situation. The tube well was successfully installed with the sponsorship of RM 60,000 from Yayasan Sime Darby.

Project



PROVISION OF ADDITIONAL WATER SOURCE: RESILIENT HOSPITAL ACTION PLAN

OBJECTIVES

To ensure sustainability of hospital services through the provision of critical infrastructure i.e. Tube well for additional water source

PROJECT PARTNER

Hospital Gua Musang, Kelantan

LOCATION

Hospital Gua Musang, Kelantan

DURATION

May 2017 – November 2017

ACCOMPLISHMENTS

Access to clean water for patients and hospital staff of Hospital Gua Musang's Haemodialysis Unit and the Gua Musang community

NO. OF BENEFICIARIES

Estimated 9,000



KLANG VALLEY

In recent years, MERCY Malaysia has conducted mobile clinics and vaccination camps for Rohingya communities in Malaysia, Myanmar and Bangladesh. Generally, there is a significant lack of health knowledge within the community, which affects health and hygiene conditions.

This project aims to incorporate health education into the curriculum at Rohingya learning centers and increase the overall wellbeing, level of knowledge and practice on hygiene, tuberculosis, and nutrition among refugee children. The training also aims to enhance refugee children's quality of education, positively impact childhood survival, and decrease morbidity from preventable diseases.

The 4-day training was conducted over four Saturdays in October 2017 at the UNHCR headquarters. Three topics (Tuberculosis, Hygiene and Healthy eating) were selected based on earlier discussions with UNHCR and the Rohingya community.

Upon completion of training, the CHWs had to deliver the knowledge gained at selected refugee schools around Klang Valley over 8 weeks (30 October-22 December 2017). MM's medical team continued to monitor them during the training. Each CHW was awarded a certificate upon completion of the outreach programme.

Project



COMMUNITY HEALTH EDUCATION PROGRAMME FOR ROHINGYA COMMUNITY HEALTH WORKERS (CHW)

OBJECTIVES

- To provide health education training for CHWs
- Empower CHWs to serve their community better

LOCATION

UNHCR Malaysia, Kuala Lumpur

DURATION

August – December 2017

ACCOMPLISHMENTS

- 19 trained Rohingya CHWs on health awareness
- 2765 Rohingya children received health education, oral hygiene kits and healthy plate models

NO. OF BENEFICIARIES

2,784 Rohingya Communities



KLANG VALLEY

A 2014 survey by the Department of Statistics Malaysia (DOSM) showed that only 1% of Malaysians are living below poverty levels. However, the data does not provide an accurate portrayal of the real situation of Malaysians as a whole, especially among urbanites who struggle with high standards of living and compromised living conditions.

To address this oft-overlooked issue, MERCY Malaysia initiated a preliminary assessment on urban poverty supported by PRUBSN. It was found that the urban poor face problems such as a lack of access to healthcare especially for acute and chronic diseases, food availability, and social problems such as theft and substance abuse.

Due to poor living conditions, they are at increased risk of respiratory infections, HIV/AIDS, intestinal infection, skin diseases, tuberculosis, dengue and poor nutrition. Many are unaware of their health conditions, or do not seek medical advice for chronic conditions out of poverty.

The programme, which aims to improve access to healthcare and increase awareness among the urban poor, is a twelve (12) months programme which will end on Sept 2018. 1,000 patients who were certified by the Welfare Department to be living below the poverty line were identified for the programme in two low-cost flats at Subang and Bukit Jalil.

Throughout the programme, MM provided mobile clinics and hygiene awareness/education sessions for the selected participants, while psychosocial programmes were conducted for children. Personal and household hygiene items were also distributed during the programme, which was conducted on weekends.

Project



MOBILE CLINICS AND HYGIENE AWARENESS PROGRAMME FOR THE URBAN POOR

OBJECTIVES

- To improve access to healthcare.
- Increase awareness on personal hygiene practices and healthy lifestyle.
- To promote good physical and psychological health among youths.

PROJECT PARTNER

PruBSN

LOCATION

1. Projek Perumahan Rakyat Barakah Pangsapuri Seri Purnama, Subang Bestari.
2. Projek Perumahan Rakyat Muhibbah, Bukit Jalil.

DURATION

October 2017 – September 2018

ACCOMPLISHMENTS

- Mobile clinic serving 366 patients
- Health education to 206 beneficiaries
- Hygiene kit distribution to 206 families
- Psychosocial support to 172 beneficiaries

NO. OF BENEFICIARIES

360 (as of December 2017)



PULAU PINANG

On 5 November 2017, an overnight storm lasting 18 hours happened at the northern region of Peninsular Malaysia. Classified as tropical depression (internationally designated Invest 95W) that was indirectly related to Typhoon Damrey 2017 (28W), it brought extraordinary rainfall that caused flooding in 4 states (Kedah, Pulau Pinang, Perak and Selangor). On 7 November 2017, Pulau Pinang was the most severely affected, with 41 evacuation centres activated and 6483 affected people evacuated (1297 families).

MERCY Malaysia immediately deployed the Penang Chapter representative to connect with the District Officers and assess the immediate needs of flood victims. Following this assessment, distribution of 1,000 Hygiene Kits, 500 Cleaning Kits and 600 Non Food Items (NFI) (100 Sleeping Mats, 500 Blankets) and the deployment of 3 Mobile Medical Teams and 2 Post-Flood Cleaning Teams were arranged to assist those affected over 10 days.

Project

PULAU PINANG FLOOD RESPONSE

OBJECTIVES

- To provide basic healthcare services for affected communities.
- To assist the recovery of flood-affected communities with cleaning materials and activities.
- To provide essential items for affected communities to return to normal life.

LOCATION

Pulau Pinang

DURATION

6 - 15 November 2017

ACCOMPLISHMENTS

- Relief aid extended to 11 evacuation centres
- Distribution of 1,000 Hygiene Kits, 500 Cleaning Kits, 5800 dry rations and 900 Non-Food Items (NFI) (400 Sleeping Mats, 800 Blankets).
- Deployment of 3 Mobile Medical Teams that served 378 patients.
- Deployment of 2 Post-Flood Cleaning Teams.

NO. OF BENEFICIARIES

Estimated 13,000 flood evacuees



SABAH

SK Lapasan is a primary school situated in Telipot, 40km from Kota Kinabalu. The teachers had observed that many students have poor dietary practices, as vegetable and fruits in the food pack provided by the canteen are usually not eaten. Students who brought food from home would bring processed foods such as sausage, nuggets etc. This has a long-term impact upon the students' physical growth and learning abilities.

Together with Shangri-La's Rasa Ria Resort & Spa, MERCY Malaysia held a half-day programme at the school to address the nutrition problem. The students were measured for weight and height and provided basic health screening, where 12.1% students were found to be underweight and 3.4% students were severely underweight. Parents were also invited for the nutritional talk to raise awareness of good dietary options at home.

Project



HEALTH SCREENING & NUTRITIONAL TALK

OBJECTIVES

- Provide health screening and identify malnourished students.
- Increase awareness on nutrition to students, teachers and parents.

PROJECT PARTNER

Shangri-La's Rasa Ria Resort & Spa

LOCATION

SK Lapasan, Telipok

DURATION

13 May 2017

ACCOMPLISHMENTS

- 114 children received free health and nutrition screening and consultation.
- 60 parents received nutritional knowledge.

NO. OF BENEFICIARIES

174



SABAH

MERCY Malaysia Sabah Chapter established the Intervention Group for Alcohol Misuse (IGAM) in 2009 as a support group for people and families with alcohol-related problems. IGAM serves to conduct research and raise awareness on alcohol-related issues in Sabah, at the same time conduct early intervention programmes to prevent damage due to alcohol abuse, such as the social and emotional development of children.

To raise awareness, a full-day workshop catering to adults and teenagers was conducted for participants from 10 villagers. The response was excellent, with participants actively contributing in the group discussions on ways to reduce alcohol harm in their own communities. Among the favourite activities was the short drama competition, where teenagers performed short skits to relay messages of alcohol abuse and its consequences to adults.

Project



INTERVENTION GROUP FOR ALCOHOL MISUSE (IGAM) WORKSHOP

OBJECTIVES

- 1) Encourage open discussions and increase awareness on alcohol harm.
- 2) Conduct early intervention programmes for children affected by alcohol abuse.

PROJECT PARTNER

Universiti Malaysia Sabah (UMS)

LOCATION

Kg Nambayan, Tambunan

DURATION

11 February 2017

ACCOMPLISHMENTS

- Introduced an Alcohol Toolkit
- Conducted a workshop attended by representatives from 10 villages
- Established a support group for alcohol-related problems.

NO. OF BENEFICIARIES

57 people



SABAH

Continuous rains in the west coast of Sabah since 11 December caused increased water levels at some districts. At 8:30pm, it was reported that 3 rivers in Kota Belud has exceeded danger levels. The armed forces deployed a rescue team to monitor flood-prone areas, while 5 evacuation centres were opened to accommodate affected communities.

MERCY Malaysia deployed an assessment team to Kota Belud immediately to see if aid is required at evacuation centres and affected villages. Following assessment, meetings, interviews and surveys of flooded sites, cleaning kits and drinking water were provided to affected villagers. The effort was done in coordination with the local authorities and communities throughout the response period.



Project



KOTA BELUD FLOOD RELIEF

OBJECTIVES

To identify the immediate needs of the community affected by the disaster and provide urgent assistance as required

LOCATION

- 1) Kg Tawadakan, Kota Belud
- 2) Kg Jawi-Jawi, Kota Belud
- 3) Kg Marabau, Kota Belud
- 4) Kg Kotabungan, Kota Belud

DURATION

16 - 17 December 2017

ACCOMPLISHMENTS

Provision of cleaning kits and drinking water for 4 flood-affected villages

NO. OF BENEFICIARIES

425 families



SABAH

Many villages in Sabah are inhabited by indigenous people who lag behind in the country's socio-economic development in terms of health facilities, infrastructure and education. The communities live in areas that are deep within forested areas, making access challenging with high transportation costs. As a result, many indigenous people do not have good health and dental services, often going to the hospitals only when their condition is critical.

Recognizing that 'prevention is cure' and that early detection reduces suffering and treatment costs, MERCY Malaysia identified two villages located 20-50 km away from the nearest hospital for outreach clinics in May and October 2017.

The 3-day Medical Outreach programmes were conducted at the villages to improve the health coverage of the communities. 25 medical and non-medical volunteers and donors were deployed for the programme, which provided free medical screening and treatment, dental screening and treatment, and pap smear tests. Patients diagnosed with myopia were provided reading glasses, and hygiene kits were distributed to participants who attended the health talks.

Project



OUTREACH CLINICS TO PROVIDE ESSENTIAL HEALTH CARE FOR SABAH RURAL COMMUNITIES

OBJECTIVES

- Increase access to health and oral care among rural communities
- Increase awareness on reproductive health
- Instill good hygiene practices

LOCATION

1. Kg Inarad, Kinabatangan
2. Kg Lirung, Pensiangan

DURATION

1. 5-7 May 2017 (Kinabatangan)
2. 13-15 October 2017 (Pensiangan)

ACCOMPLISHMENTS

Communities from 2 villages received free medical screening, dental services, pap smear test, reading glasses and hygiene kits

NO. OF BENEFICIARIES

454 people



SABAH

Heavy rainfall in early January 2017 caused major flooding in several places in Sabah. Pitas were badly affected when its two rivers - Sungai Kebatasan and Sungai Bengkoka - overflowed. Three evacuation centres were opened at SK Rukom, SK Pekan Pitas II and Dewan Serbaguna Kg Biliangau. According to villagers, the flood was the worse in the last three years.

An assessment team was deployed to identify any emergency and critical needs. Following coordination meetings with local authorities and discussions with the village head, assistance was provided in the form of food and non-food items such as hygiene kits to affected villagers.

Project



PITAS FLOOD RELIEF 1

OBJECTIVES

To provide emergency flood assistance to affected families in Pitas

LOCATION

1. Kg Rukom Ulu, Pitas
2. Kg Longgom, Pitas
3. Kg Layang, Pitas

DURATION

8 January 2017

ACCOMPLISHMENTS

Provision of food and Non-Food items to flood-affected villagers.

NO. OF BENEFICIARIES

72 families



SABAH

January 2017 was a wet month for Northern Sabah, with a third wave of floods hitting Pitas following five days of continuous rain. With water levels at Sungai Bengkoka and Sungai Kebatasan reaching danger levels, the local authorities alerted affected villagers to evacuate. While some families managed to move to evacuation centres, many were stranded as the flooded roads were impassable. Several villagers could not be evacuated, as the fast-moving river rapids were dangerous to small boats.

With the assistance of the armed forces (Angkatan Tentera Malaysia), local authorities and villagers, MERCY Malaysia managed to provide food supplies to stranded villages via helicopter. Some aid parcels and non-food items were successfully delivered via four-wheel trucks and boats to the nearest river for collection by the villagers.

Project



PITAS FLOOD RELIEF 2

OBJECTIVES

To provide emergency flood assistance to affected families in Pitas

LOCATION

1. Kg Nibang, Pitas
2. Kg Solimpodon Darat, Pitas
3. Kg Pandan Mandamai, Pitas
4. Kg Kobon, Pitas
5. Kg Perupok, Pitas

DURATION

26 January 2017

ACCOMPLISHMENTS

Provision of food and Non-Food items to flood-affected villagers.

NO. OF BENEFICIARIES

234 families



SABAH

Kg. Hidayat at Tawau, Sabah, is a refugee settlement established in 1975 under UNHCR. A bad fire broke out on 1 July 2017, destroying 250 houses and leaving all 261 families (1,960 villagers) homeless. Affected villagers, comprising Malaysian and non-Malaysian residents, escaped only with the shirts on their backs, and had to stay in tents or relative's homes.

As a humanitarian response, MERCY Malaysia distributed hygiene kits to the 261 families and baby clothing to those with small children. Representatives from Majlis Keselamatan Negara and RELA assisted in the packing of the items and crowd control during the distribution process.

Project



TAWAU FIRE RELIEF

OBJECTIVES

Provide emergency assistance at Kg. Hidayat after fire destroyed 250 houses.

PROJECT PARTNER

PACOS Trust

LOCATION

Kg Hidayat, Tawau

DURATION

3 - 11 July 2017

ACCOMPLISHMENTS

- Provision of family hygiene kits to affected communities.
- Distributed 57 sets of baby clothing.

NO. OF BENEFICIARIES

261 families



SABAH

In 2016, MERCY Malaysia received an appeal for water piping assistance from the villagers of Kg Melangkap Tomis, Kota Belud, who faced water scarcity problems due to the long drought. The villagers had found a new water source, but could not afford the high cost of purchasing the piping, water tanks and other materials as they were from the low-income bracket.

Following an assessment, MERCY Malaysia sought clearance from the District Office before kicking off the implementation of the project. Through an intensive gotong-royong initiative over three months with the villagers, the team successfully installed a 8km water piping system with 2 water tanks. A gravity dam with filtration system was constructed as a water storage point.

Project



WATER PROJECT IN KG MELANGKAP TOMIS, KOTA BELUD

OBJECTIVES

Improve access to clean water supply

PROJECT PARTNER

Maybank Heart

LOCATION

Kg Melangkap Tomis, Kota Belud

DURATION

February – August 2017

ACCOMPLISHMENTS

A full water system comprising 8km water piping systems, 2 water tanks and 1 gravity dam with filtration system to 134 families and households.

NO. OF BENEFICIARIES

550



SARAWAK

Long Lobang, inhabited by the Penan tribe, is a village located deep in the interiors of Sarawak with a population of 120 people (23 families). There are four other villages nearby - Long Pala, Long Selapun, Long Bukan and Long Puah – with an estimated population of 104 families. Access to Long Lobang is very limited, either 5.5 hours from Miri town through logging roads using 4WD trucks, or via the river on boats.

Their economic activities are farming and fishing. There are no basic amenities such as electricity, water piping systems and health clinics. The nearest school is at Long Aton, an hour away by boat. The villagers use generator sets for power supply. As there is no piping system in the village, the Penans used to depend on the river for water supply, until logging activities contaminated the water. As such, they now use rainwater for bathing and other washing activities. Every home in the village has a 400/600 gallon tank for harvesting rainwater.

Health care services are available at the Long Loyang Health Clinic, which is 3 hours away by boat. Occasionally they will get medical services through the flying doctor, who lands at Long Bukan village, an hour away by boat. The limited access to health services has a significant impact on the quality of life of villagers, increasing the risk of morbidity, chronic illness and economic depression.

To address the gap, the MERCY Malaysia Sarawak Chapter deployed a team of staff and volunteers alongside partners for a 3-day mission to provide free health screening and primary care treatment, dental screening and tooth extraction, and dispense reading glasses. Hygiene kits were also distributed to households to promote good hygiene practices.

Project



OUTREACH CLINIC TO PROVIDE ESSENTIAL HEALTHCARE FOR SARAWAK RURAL COMMUNITIES

OBJECTIVES

- Increase access to health and dental services among rural communities
- Increase awareness of reproductive health
- Instill the importance of good hygiene practices

PROJECT PARTNER

UMW Holdings Berhad

LOCATION

Long Lobang, Baram, Miri

DURATION

1 – 3 September 2017

ACCOMPLISHMENTS

Free medical screening, dental services, pap smear test, reading glasses and hygiene kits

NO. OF BENEFICIARIES

97 families



SARAWAK

Long Palai, located in the Ulu Baram region at Marudi, Sarawak, is a settlement approximately 526.3 kilometers east-north-east of the state capital of Kuching. The journey to Kampung Long Palai, inhabited by the Kenyah tribe, takes 6 to 7 hours by road.

On 5 November 2017, a fire struck one block of longhouse with 11 pintu (homes) at Kampung Long Palai, rendering 134 people homeless. Affected families, most of whom were farmers, were forced to stay at the homes of relatives until their homes were rebuilt.

To alleviate the suffering of affected families, MERCY Malaysia Sarawak Chapter deployed a team to distribute food packs and hygiene kits immediately after the flood, so that they could spare their money for other necessities that perished in the fire.

Project



POST-FIRE INTERVENTION

OBJECTIVES

To provide basic necessities and emotional support to those who have lost their homes in the fire.

LOCATION

Long Palai, Baram, Miri, Sarawak

DURATION

27 -28 November 2017

ACCOMPLISHMENTS

Distributed food packs and hygiene kits to affected families

NO. OF BENEFICIARIES

11 families



SARAWAK

Bayong, located in Sarikei, Sarawak, is approximately 342.9km from Kuching and houses a predominantly Iban population. Meanwhile, Ulu Baram, a district in Miri, Sarawak, is 1,500 km from Kuching with a predominantly Kenyah/Kayan population.

Heavy rains on 28 February 2017 caused bad flooding in Sarawak, affecting hundreds of people. At Bayong, 9 longhouses were flooded up to 0.9 – 1.8 meter. A total of 226 families were affected. The communities affected were caught unprepared, because their village had not experienced floods for many years.

Long Bemang and Long Wat were both flooded for over a week, with floodwaters as high as 5 feet in the former, and 4 feet at the latter. The affected communities suffered significant losses during the floods. To ease their suffering, MERCY Malaysia Sarawak Chapter deployed a team for flood response and post-flood recovery to three villages, with hygiene kits and food packs distributed to 226 beneficiaries in Bayong, Sarikei; 255 in Long Bemang, Baram; and 85 in Long Wat, Baram.

Project



POST-FLOOD INTERVENTION

OBJECTIVES

- Provide hygiene and personal care products
- Supply basic food items

LOCATION

1. Long Bemang & Long Wat, Baram, Miri
2. Bayong, Sarikei

DURATION

1. 18 – 19 March 2017
2. 8 – 9 April 2017

ACCOMPLISHMENTS

Distribution of food packs and hygiene kits

NO. OF BENEFICIARIES

566 families





OUR WORK INTERNATIONAL



AFGHANISTAN

Afghanistan has one of the poorest healthcare systems in the world. Continuous violence has ravaged the country since the 1970s, with the situation still dire with endemic diseases such as Polio and TB.

MERCY Malaysia's Afghanistan operations began in 2001, where MERCY Malaysia (MM) provided emergency health services during the war. A Comprehensive Health Centre (CHC) was established in 2003 in Kandahar, where it has operated ever since, serving an estimated population of 68,000 people.

In 2017, MM collaborated with the District Health Office to start a CHC in Kandahar, providing critical services for tuberculosis, antenatal and post-natal services, outpatient and mobile clinic services, as well as vaccination. The CHC began 24-hour services as required by the government, and facilitated 467 births in the year.

MM also ran a pre-school called Mercy's Little Caliphs (MLC) since 2005 at the premises of the current CHC. Little Caliphs provided free pre-school education for the local children (both boys and girls) until their entry into local government schools. MLC conducted 13 classes (376 students) over the years, with the final 30 students graduating in October 2017.

December 2017 marked a sad end to MM's operations in Afghanistan after 14 years of service (and 912,743 beneficiaries) due to the lack of funding. With a heavy but proud heart, we thanked our Afghan staff for the excellent service rendered over the years, and wished them the best in their future endeavours.

Project



COMPREHENSIVE HEALTH CENTRE (CHC)

OBJECTIVES

To provide free primary health care at Kandahar and surrounding areas

PROJECT PARTNER(S)

- Afghanistan Ministry of Public Health
- World Health Organisation

LOCATION

District 3, Kandahar City

DURATION

January – November 2017

ACCOMPLISHMENTS

- CHC managed to provide medical services such as tuberculosis treatment, antenatal and postnatal services, outpatient and mobile clinics, vaccination activities, and facilitated 467 births.
- 30 students successfully graduated from MERCY's Little Caliph (MLC) class.

NO. OF BENEFICIARIES

64,380



BANGLADESH

With 700 rivers flowing through the country, Bangladesh is turned into islands during the monsoon season when floodwaters engulf the land. In 2017 alone, Bangladesh was flooded four times over a span of six months. An estimated 55,383 houses were reportedly damaged and 640,786 destroyed by the floods, with deaths reported at 140 people. On 27 August 2017, the Ministry of Disaster Management and Relief (MoDMR) announced that 335 centres in flooded areas were sheltering more than 106,000 affected people.

According to the Directorate General of Health Services (DGHS), 13,035 cases of water-borne diseases such as Acute Watery Diarrhoea, Skin Diseases, Acute Respiratory Infection and Eye Infection were linked to the flooding. Over 2,000 national and International Medical Teams were deployed to address these emerging communicable diseases.

An assessment with our local partner Dhaka Community Hospital Trust (DCH Trust) found that the post-flood health situations and number of cases of waterborne diseases exceeded that of government sources. The rapid spread of diarrheal and infectious diseases (skin infections, eye infections, typhoid, jaundice etc.) also overwhelmed existing health facilities, resulting in many patients not getting proper management and treatment.

MERCY Malaysia immediately mobilised five mobile clinics, and distributed water purification sachets/tablets at Sirajganj, Pabna, Sunamganj and Dhaka that were affected by floods and river erosion. As these areas were remote villages accessed only by boats, they did not receive any aid since the flood began. MM conducted its flood response for two months, benefitting over 8,300 affected populations.

Project



BANGLADESH FLOOD EMERGENCY RESPONSE

OBJECTIVES

Improve the health status, water and sanitation of people affected by the floods

PROJECT PARTNER

Dhaka Community Hospital (DCH)

LOCATION

Sylhet, Rajshahi and Dhaka

DURATION

August - September 2017

ACCOMPLISHMENTS

- Conducted 5 mobile clinics.
- Distributed water purification sachets/tablets to affected communities in 4 districts.

NO. OF BENEFICIARIES

Over 8,300



BANGLADESH

Violence broke out in the Northern State of Rakhine in August 2017, sparking a humanitarian crisis when over 500,000 people crossed over to Cox's Bazar, Bangladesh, over several weeks. The huge influx of people overwhelmed existing refugee camps, causing the new arrivals to have little or severely limited access to shelter, food, clean water and latrines.

As of December 2017, over 688,000 refugees, mostly Rohingyas, have arrived. Although the coordination of aid had improved since the crisis first broke, there were still immense humanitarian needs that remained unfulfilled.

As MERCY Malaysia (MM) was already in Bangladesh for an earlier flood response, the team travelled to Cox's Bazar and begun providing emergency assistance from September 2017.

Assisted by volunteers and our local partner COAST Trust, MM initiated medical services with the establishment of two static clinics on 1 October at Kutupalong and Balukhali. Within three months, 21 medical teams had been deployed, providing medical treatment and psychosocial support to 19,407 patients.

Besides medical relief, 500 sets of non-food items were distributed, consisting of household essentials such as a pail, bathing soap, laundry powder, shampoo, blankets, a nail clipper and a tub of petroleum jelly.

Another partnership was secured with the DCH Trust to run one static and two mobile clinics, as well as distribute 3,000 food supplement packets to malnourished young children. Almost 50% of the refugee population consisted of children under 17, some of whom had become the head of households after losing both parents. The response in Cox's Bazar is expected to continue well into 2018, with no resolution on repatriation despite high-level talks.

Project



ROHINGYA REFUGEES CRISIS RESPONSE

OBJECTIVES

- To provide the basic necessities of clean water and toilets
- To provide medical and psychosocial support
- Provide nutrition and Non-food items

PROJECT PARTNER(S)

1. COAST Trust
2. Dhaka Community Hospital (DCH)

LOCATION

Cox's Bazaar, Bangladesh

DURATION

September – December 2017

ACCOMPLISHMENTS

- Established 2 static clinics in Kutupalong and Balukhali, which treated 19,407 patients (as of December 2017).
- Distributed 500 sets of non-food items.
- Distributed 3,000 food supplement packets to young children suffering from malnutrition

NO. OF BENEFICIARIES

24,907



INDONESIA

Rumah Sakit Umum Daerah (RSU) Kabanjahe is located within 24km from the foothill of Mount Sinabung. Every time Mount Sinabung erupts, the hospital is at risk of a sudden influx of patients. A disaster preparedness workshop for RSU Kabanjahe conducted earlier by MERCY Malaysia showed that the hospital had low resilience scores as it is located in the red zone.

Efforts were made to identify potential reconstruction and rehabilitation work that can reduce their vulnerabilities and enhance their capacity to accommodate any major influx of patients. This will increase RSU Kabanjahe's resilience in terms of physical infrastructure and operational capacity towards natural and man-made disasters.

The project successfully constructed a covered carpark, rehabilitated the hospital entrance to improve access, reconstructed the hospital drainage systems, constructed access slabs connecting the two building blocks, replaced rainwater down pipes (RWDP), installed ward curtains to improve privacy, repaired the hospital's floor tiles, provided rubbish bins and installed lighting system in the hospital compound.

Project



REHABILITATION OF RUMAH SAKIT UMUM (RSU) KABANJAHE

OBJECTIVES

Increase RSU Kabanjahe's resiliency in terms of physical infrastructure and operational capacity during disasters

LOCATION

Kabanjahe, Kabupaten Karo, Indonesia

DURATION

February – April 2017

ACCOMPLISHMENTS

RSU Kabanjahe's rehabilitation work included:

- A covered carpark
- Concrete slabs to facilitate mobility between hospital buildings
- Patient curtains in wards
- Ceramic floor tile repairs
- Additional fire extinguishers
- Replacement of mercury lamps
- Repaired sound systems

NO. OF BENEFICIARIES

30 hospital staffs, 240 patient beds (indirect beneficiaries: 72,000)



INDONESIA

In 2010 and 2014, volcanic eruptions of Mount Sinabung, Kabupaten Karo, caused massive displacements to the local communities, forcing them to leave their homes and stay at seven Internally Displaced Person (IDP) camps across Karo. In 2016, MERCY Malaysia (MM) deployed a Rapid Assessment Team (RAT) to identify gaps and humanitarian needs in these IDP camps. One of the camps that particularly needed help was Jambur Tongkoh in the Dolat Rakyat sub-district of Karo Regency.

In the last 2 years, over 2,176 IDPs had swamped Jambur Tongkoh camp, living in over-crowded and unhygienic conditions. The ill-managed facilities were in poor conditions, exposing residents to risks of vector-borne and infectious diseases.

MM reorganised and cleaned up the kitchen for food preparation and sleeping quarters, making Jambur Tongkoh a more comfortable for residents. The objective was to increase the IDPs wellbeing in the camp, as it was uncertain when they could return home.

Upon the completion of upgrading works, the facilities were handed over to the Jambur Tongkoh management committee. Although the IDPs later received the safety clearance from their local authorities to return home, Jambur Tongkoh continued to serve as a comfortable IDP camp should there be another major eruption at Mt. Sinabung.

Project



RENOVATION AND REHABILITATION OF JAMBUR TONGKOH

OBJECTIVES

- Improve community sanitation facilities for Internally Displaced Persons (IDPs) at Jambur Tongkoh
- Improve community shelter conditions

LOCATION

Kabupaten Karo, Indonesia

DURATION

September – December 2016

ACCOMPLISHMENTS

- Rehabilitated communal kitchen area and restructured the washing area.
- Replaced the roof and repaired entrance area.
- Rehabilitated the flooring.

NO. OF BENEFICIARIES

2,176 IDP/Communities in Jambur Tongkoh



INDONESIA

In times of emergency, it is critical for certain infrastructures such as healthcare centres to continue functioning to serve injured people. On 7 December 2016 at 6.03 am, a small town, Reuleuet, Aceh was hit by a 6.5 magnitude earthquake with a depth of 10km.

MERCY Malaysia's emergency assessment showed that the districts of Ulee Glee and Leung Putu were found to have suffered significant damages to their critical infrastructure and systems which impedes community access to primary healthcare services.

The rehabilitation project helped rehabilitate two health infrastructures (Ulee Glee Community Clinic and Leung Putu District Hospital) to ensure communities in Pidie Jaya have continued access to basic healthcare services.

Project



RETROFITTING OF DAMAGED LOCAL CLINICS AND HOSPITALS

OBJECTIVES

To provide communities in Pidie Jaya with continued access to basic healthcare services

LOCATION

Pidie Jaya, Aceh

DURATION

March 2017 – June 2017

ACCOMPLISHMENTS

Repaired and rehabilitated healthcare facilities damaged by the Aceh earthquake to ensure their continuous functioning

NO. OF BENEFICIARIES

1,000



MYANMAR

Rakhine state, especially its Northern part, has been plagued by outbreaks of violence in the past decade. In the last two years two bouts of violence stand out, both of which caused many to flee into neighbouring Bangladesh (October 2016 and August 2017). Both incidents were triggered by attacks from the self-termed Arakan Rohingya Salvation Army, ARSA (formerly known as Harakah al-Yaqin), which caused swift and devastating response from the Myanmar Security forces (also known as the Tatmadaw).

Human rights advocates around the world alleged that the Tatmadaw were raping women, and burning villages, among other crimes against humanity. Both incidents met with global outcry, with the UN and the US both terming the actions as genocide and ethnic cleansing. Consequently, over 500,000 Northern Rakhine residents fled to Cox's Bazar, Bangladesh, mostly the Rohingyas.

The unrest forced international organisations in Myanmar to halt operations temporarily, with humanitarian access closed off at Northern Rakhine. Local Rakhine people organised protests against humanitarian agencies, whom they accused of supporting Rohingya militants. This was exacerbated when energy bars from WFP were discovered at some ARSA training camps at Mayu Mountain, causing further distrust.

MERCY Malaysia's Sittwe Primary Healthcare operations were briefly affected when the Government ordered all operations to be halted 'for security reasons'. However, services were quickly resumed after negotiations with the Government and State Health Department.

MERCY Malaysia (MM) also increased its humanitarian assistance by distributing 1,200 sets of hygiene kits and tarpaulins to the 4 most affected villages of Buthidaung, Rathedaung and Maungdaw in February and August 2017. Upon receiving a request from the Maungdaw General Hospital to help provide transportation for healthcare professionals to reach patients in the interiors, MM provided vehicles for two months.

MM also donated medications and 1400 kilos of dry rations (onions, potatoes, dried chillies, dried fish) to 967 households across 6 Muslim villages in Buthidaung and Maungdaw.

Project



NORTHERN RAKHINE STATE CRISIS RESPONSE

OBJECTIVES

To provide basic necessities to affected communities

PROJECT PARTNER

Malteser International (Feb & March 2017)

LOCATION

Buthidaung, Rathedaung and Maungdaw in Northern Rakhine, Myanmar

DURATION

Feb – March 2017 ; Sep – Oct 2017

ACCOMPLISHMENTS

- Distributed 2,400 hygiene kits and tarpaulins in February and August.
- Donated medical supplies, a car and generator to Maungdaw General Hospital.
- Distributed dry rations to 967 households.

NO. OF BENEFICIARIES

16,835 beneficiaries



MYANMAR

MERCY Malaysia's Myanmar operations in Sittwe began in 2012 after communal violence broke out between the local Rakhine and Rohingya communities. 5 years down the road, an estimated 121,000 people from both communities were still displaced and require medical assistance, especially the Rohingya community who had restricted movement. As they lived in IDP camps, they have limited access to facilities and opportunities, and are forced to depend heavily on aid for food, education, healthcare and other basic necessities.

MERCY Malaysia (MM) has been providing primary healthcare services to these vulnerable populations via mobile and static clinics since 2013. In 2017, MM Myanmar's medical teams ran health services in 10 locations (3 static and 7 mobile) within Sittwe, serving 62,636 patients in vulnerable communities from January – December 2017.

Project



PRIMARY HEALTHCARE IN SITTWE CAMPS

OBJECTIVES

To increase accessibility to Primary Healthcare Services for vulnerable populations in Sittwe

LOCATION

Sittwe, Rakhine state, Myanmar

DURATION

January – December 2017

ACCOMPLISHMENTS

Established 3 static clinics and 7 mobile clinics

NO. OF BENEFICIARIES

62,636 patients



MYANMAR

The Kyauk Tan Rural Health Centre began operations in 1986 as a Station Hospital, with only 1 doctor and 1 midwife offering outpatient services. Inpatient healthcare services began in 1988, with increased staffing of one medical doctor, one trained nurse, one compounder and one midwife. However in 2013, the Station Hospital was moved to War Bo village, which caused Kyauk Tan Station Hospital to be turned into a Rural Health Center (RHC).

With poor maintenance, the building became more dilapidated over time, until it could no longer be used in 2015. Basic health services were conducted in the home of a nearby resident, until the Rakhine State Government requested for MERCY Malaysia (MM) to repair the building for use again. The nearest health facilities are Sittwe General Hospital (30 mins away by car) or the health facility in War Bo village across the river.

MM's assessment team who first visited in February 2017 found an abandoned and totally dilapidated building. As the wooden pillars were totally termite-infested, the building had to be knocked down and rebuilt to ensure structural stability.

A building design was submitted in March 2017, and work on the building began in August after obtaining the relevant approvals from the state and health departments. The new Rural Health Centre is expected to be fully completed by March/April 2018.

Project



RECONSTRUCTION OF KYAUK TAN SUB-RURAL HEALTH CENTRE

OBJECTIVES

To improve access to health services in Kyauk Tan

LOCATION

Kyauk Tan, Rakhine State, Myanmar

DURATION

March 2017 – March/April 2018

ACCOMPLISHMENTS

As of December 2017, reconstruction of the Health Centre was at 95% completion

NO. OF BENEFICIARIES

Estimated 12,000



MYANMAR

The TKP SRHC was first constructed by MERCY Malaysia (MM) in 2013 as one of the health facilities within the Sittwe Internally Displaced Persons (IDP) Camp. By 2016, it became the sole referral centre for camp communities to receive tertiary care at Sittwe General Hospital.

However, earthquakes and cyclones caused wear and tear to TKP SRHC over time. The roof was damaged and started leaking at several spots. The damp ceilings resulted in mould which is a health hazard. With high numbers of patients using the facility daily, TKP SRHC needed repairs and upgrades in facilities and equipment.

Capacity building for TKP SRHC staff (rotated between the State Health Department, International Rescue Committee and MERCY Malaysia) and increased service hours were also necessary to ensure the community had continuous access to health services, especially during emergencies.

Supported by the Myanmar Humanitarian Fund, MM undertook renovation and upgrading works in October 2016, repairing the facility, purchasing additional equipment, providing training for staff, adding more shift hours and providing referral transport services (within the camp to TKP SRHC).

Various challenges occurred during the implementation of the project, such as the violence that flared in Northern Rakhine in October 2016 and August 2017. Despite the challenges, the project was successfully completed in November 2017.

Project



THET KEL PYIN SUB RURAL HEALTH CENTRE (TKP SRHC)

OBJECTIVES

Increase accessibility to healthcare services for IDP community in Sittwe, Rakhine.

LOCATION

Sittwe, Rakhine State, Myanmar

DURATION

November 2016 – November 2017

ACCOMPLISHMENTS

Renovated and upgraded Thet Kel Pyin SRHC

NO. OF BENEFICIARIES

Estimated 97,484



MYANMAR

WHO SEARO data, as reported by the Department of Health Planning and Department of Health, MoH Myanmar, 2008, showed that congenital malformations contribute to 3% of neonatal mortality and 0.6% of morbidity in patients admitted to hospital (6325 admissions in 846 public hospitals). According to the registry of Central Women Hospital of Yangon, the prevalence of cleft defects is 1:800-1000 viable birth, which is higher than in Caucasian people.

MERCY Malaysia (MM) started its first CLIPP Myanmar mission in 2013 to surgically correct patients with cleft lip and palate deformities for 50 patients. The last 4 missions have cumulatively benefited 271 patients.

Supported by Maybank HEART, MM's project continued its fifth mission to perform corrective surgeries for people born with cleft lip and palate deformities but has limited access to treatment and options.

Collaborating partner Maternal & Child Care Organization, a local NGO, assisted in patient identification and the first round of general CLIPP surgical investigations and transportation. Magway Regional Hospital helped provide the operation room and post-operative care for patients who had been successfully operated on.

Project



CLEFT LIP & PALATE (CLIPP) MYANMAR

OBJECTIVES

Provide cleft lip/ palate surgeries to change lives

PROJECT PARTNER(S)

- Magway Regional Hospital
- Ministry of Health & Sports, Myanmar

LOCATION

Magway Regional Hospital, Magway

DURATION

18 – 26 February 2017

ACCOMPLISHMENTS

- 57 cleft lip and/or palate surgeries performed on 31 boys, 21 girls and 5 adults with severe facial deformities.
- All patients and caregivers received post-operative health education on infection control and care.

NO. OF BENEFICIARIES

57 patients



NEPAL

In the devastating 2015 Nepal earthquake resulting in a large number of patients with spinal injury, MERCY Malaysia (MM) had deployed 4 teams over a span of 6 months to support and assist the overwhelming patient count at Spinal Injury Rehabilitation Centre (SIRC) in Kathmandu, Nepal.

As part of a long-term programme, MM arranged for an observational elective attachment in the Rehabilitation Departments of 3 different hospitals in Malaysia to enhance the skill sets of Nepal's medical staff.

1 Occupational Therapist (OT) and 1 nurse were selected for the attachment at the Hospital Rehab Cheras, UMMC and UKM Medical Centre. They learnt good day-to-day nursing activities such as work division, doctor rounds, documentation, good management of bowel bladder, pressure sores and skin care. They also attended weekly MDT meetings and learnt about wheelchair transfer, goal setting, home visits and good documentation.

Project



CAPACITY BUILDING – NEPAL TO MALAYSIA ATTACHMENT

OBJECTIVES

To enhance skills in rehabilitation services

PROJECT PARTNER

Nepal Academy of Medical Sciences

LOCATION

1. Cheras Rehab Hospital
2. University Malaya Medical Centre
3. UKM Medical Centre

DURATION

- 13 – 24 March 2017: Hospital Rehab Cheras
- 27 – 30 March 2017: Universiti Malaya Medical Centre
- 31 March 2017: UKM Medical Centre

ACCOMPLISHMENTS

Trained an Occupational therapist and Nurse on Rehab Medicine during attachment at 3 different hospitals in Malaysia.

NO. OF BENEFICIARIES

2 hospital rehab staff



NEPAL

On 25 April 2015, a 7.8 magnitude earthquake struck Nepal. The loss of life and destruction were immediate and widespread. This was further exacerbated by a series of aftershocks and, in the subsequent months, monsoon rains and landslides. More than 8,700 people lost their lives and 17,000 sustained injuries. Post-earthquake, an estimated 35% of survivors required long-term care for their injuries. Of these, approximately one in three (or around 4,700) required follow-up rehabilitation treatment, specifically the 12% with spinal cord injuries.

Having identified Spinal Cord Injury (SCI) care as a critical gap, MERCY Malaysia's rehabilitation sub-cluster flagged funding with WHO and MoHP. Meanwhile, the Nepali government has established step-down rehabilitation services at the National Trauma Center offering nursing and rehabilitation for over 700 patients, while ensuring 100 free step-down beds in various facilities.

Following a series of site visits, interviews and discussions, MM identified the National Trauma Center as a local implementation partner. In December 2017, MM donated rehabilitation equipment that will bolster the hospital's capacity in helping affected SCI patients resume daily activities. At the same time, MM conducted the first of its series of rehabilitation training, which was attended by 19 rehabilitation personnel including Medical Officers, Physical Therapists, and Nurses. The remaining modules of Pediatrics Rehabilitation, Musculoskeletal Rehabilitation, and Acute (Traumatic) Brain Injury Rehabilitation will be conducted in 2018.

Project



REHABILITATION CAPACITY BUILDING PROGRAMME NEPAL

OBJECTIVES

To increase rehabilitation services in Nepal

PROJECT PARTNER

National Academy of Medical Sciences

LOCATION

Bir Hospital/National Trauma Center, Kathmandu

DURATION

November 2016 – April 2017

ACCOMPLISHMENTS

- Donated essential rehabilitation equipment
- Completed one of four rehabilitation trainings
- 19 rehabilitation workers were trained in Spinal Cord Injury

NO. OF BENEFICIARIES

19 hospital rehab staff



PALESTINE

Basma Special School was first established in 2015, funded by MERCY Malaysia's Gaza Relief Fund. Starting with 50 students, the school's intake increased to 120 in 2016, with continued support from generous MERCY Malaysia donors. Supporting the school is important in caring for special children, who are often neglected in protracted crisis.

The school, considered the first of its kind in the Gaza Strip, provides education for special children with various disabilities, such as hearing problems, autism, developmental delay and learning difficulties. The curriculum follows the traditional education system, but with additional extracurricular activities such as Smart Science, Science Lab and Play Therapy.

There are also isolated rooms for audiology and speech assessments, as well as rehabilitation rooms for audiology and speech problems. The key feature of the Basma School is the play spaces, consisting of a well-equipped playground and a spacious yard for outdoor activities.

Project



DEVELOPMENT OF BASMA SCHOOL

OBJECTIVES

To aid socialization of children with disabilities (hearing problems, autism, developmental delay) into the community.

PROJECT PARTNER

Emaar Association for Development and Rehabilitation

LOCATION

Khan Younis, Gaza - Palestine

DURATION

March – November 2017

ACCOMPLISHMENTS

The school continues to receive increasing students, with many on the waiting list for enrolment in the coming semester.

NO. OF BENEFICIARIES

120 students



PALESTINE

The Palestinians have endured oppressions, poverty, hunger, land possession and displacement for decades. The numbers of Internally Displaced persons (IDPs) are still increasing, as residents from areas prone to military shelling moved to camps and borders that are thought to be safer.

MERCY Malaysia has been providing assistance in the Gaza Strip since 2009 in multiple sectors, with particular focus on medical rehabilitation and psychosocial services. In 2017, MERCY Malaysia continued its humanitarian assistance in Gaza Strip, focusing on psychosocial health through Child Friendly Spaces (CFS), counselling and Reproductive Health. The programme serves to ensure vulnerable Palestinians in the Gaza Strip have access to essential health services.

For this programme, MERCY Malaysia equipped Al-Tawba Health Centre with medical equipment that will improve women and children health services in the marginalised areas of Khan Younis, Abasan Al Kabira and other south-east regions. Access to reproductive health services for women is enhanced through the availability of antenatal and postnatal care, including awareness on Safe Motherhood to pregnant mothers.

Project



INCREASING THE CAPACITY OF AL TAWBA GYNECOLOGY & OBSTETRICS CLINIC

OBJECTIVES

To improve reproductive health services in marginalised areas

PROJECT PARTNER

Al Tawba Charity Society

LOCATION

Abasa Al Kabeeraa, Gaza, Palestine

DURATION

March – August 2017

ACCOMPLISHMENTS

- Delivered Ultrasound Machine and devices to Al Tawba Clinic.
- Provided equipment training for 10 clinic staff.
- Conducted awareness talk on 'Safe Motherhood' for 90 pregnant mothers

NO. OF BENEFICIARIES

100 clinical staff and pregnant mothers



PALESTINE

The Dar Al Arqam schools have over 3,400 students, one third of whom were orphans. All students at Dar Al-Arqam Schools receive free education.

A large numbers of orphans suffer psychological problems and disorders when they lose their families in their early childhood and struggle with difficult living conditions. The problem is compounded by the large number of single-parent families, where parents do not spend enough time with their children as they need to make a living every day.

This project is an extension of the previous year, where MERCY Malaysia continues to provide psychosocial support through debriefing and follow up for about 800 students in need. Part of the project includes psychosocial support, activities and intervention all year round.

Project



PSYCHOLOGICAL REHABILITATION AND TREATMENT PROJECT

OBJECTIVES

- To alleviate the psychological problems of orphans using play therapy.
- To assist families resolve parenting problems.

PROJECT PARTNER

Al Darul Arqam School

LOCATION

Gaza City, Gaza - Palestine

DURATION

March 2017 – March 2018

ACCOMPLISHMENTS

- Psychological and social rehabilitation conducted on 500 students from the orphanage.
- Surviving family members were provided with skills on interaction and problem-solving in managing youths.

NO. OF BENEFICIARIES

800 students



PALESTINE

The continued siege in Palestine has disrupted social norms, leading to the emergence of many social and psychological problems. Although every segment of society are affected, the worst hit are the children and youths in school-going years. The destruction of universities and colleges delayed the graduation of college students, and many feared for their lives sitting for their final exams immediately after the war.

With restrictions on the import of building materials, many areas have yet to begin rebuilding efforts. Many families are still living in shelters and makeshift houses, and the socio-political situation – war, siege, unemployment, poverty and destruction of infrastructure – continues to haunt the general population.

Clinicians and researchers have seen an increase in the rate and severity of psychosocial and mental health problems among individuals and families in Gaza. Marital conflict is on the rise, as with separations and divorce, especially among newly married couples. According to case records, the stress and conflict contribute to the inability to maintain good marital and sexual relations.

For the second year running, MERCY Malaysia continues to provide psychosocial support to school children and universities to enhance their mental resilience. Additional focus is made to reach women with special needs, as well as marital and sexual counselling for couples.

To ensure the sustainability of the programme, MERCY Malaysia collaborated with partner IUG to equip the Counselling Centre with more scientific and effective equipment. At the same time capacity-building workshops were conducted to equip Counsellors with more effective identification and psychosocial intervention for individuals, families, couples and children.

Project



PSYCHOSOCIAL SUPPORT PROGRAM- YEAR 2

OBJECTIVES

Enhance the wellbeing and psychosocial resilience of the Palestinian population in Gaza.

PROJECT PARTNER

Center of Psychological Counseling, Islamic University of Gaza (IUG)

LOCATION

Gaza City, Gaza, Palestine

DURATION

March 2017– February 2018

ACCOMPLISHMENTS

- Psychosocial care for women and children
- Psychological reinforcement for University and school students through lectures, motivational meetings and therapy sessions).
- Counseling sessions for families and couples.
- Biofeedback unit
- Capacity building for Primary Care workers (GPs, nurses, social workers) in dealing with marital and family conflicts.

NO. OF BENEFICIARIES

4,430 including clinical staff, social workers and local communities.



PALESTINE

Continuous aggressions caused indescribable suffering to the civilian communities in the Israel-occupied Gaza Strip. The destruction also affected charitable associations, medical and media facilities, mosques, banks, civil defense and schools. The most affected are the children, especially those who have lost their families or loved ones. The trauma affected their psychosocial well-being, resulting in behavioural problems and deteriorating academic achievements.

This programme, a continuation from the previous year, covers important life skills training such as planning and time management, behaviour management and society inclusion. One of the main components of psychosocial support is through active engagement with participating students, who are mostly orphans.

Project



IMPROVE PSYCHOSOCIAL CONDITIONS OF GAZA CHILDREN 2

OBJECTIVES

To improve psychosocial wellbeing of children in the Gaza Strip

PROJECT PARTNER

Palestinian Orphan's Home Association (POHA)

LOCATION

Deir Balah, Gaza - Palestine

DURATION

March-December 2017

ACCOMPLISHMENTS

- Conducted holistic psychosocial programmes for 885 students.
- Training conducted for 150 caregivers

NO. OF BENEFICIARIES

1,035



PHILIPPINES

To meet the immediate needs, MERCY Malaysia distributed 500 Hygiene Kits and 500 Non-Food Items comprising hygiene essentials such as soap, toothbrushes and toothpaste, and vital items such as mosquito nets, blankets and jerry cans.



Project



LEYTE EARTHQUAKE EMERGENCY RESPONSE

OBJECTIVES

To provide emergency relief to disaster-affected populations in Leyte, Philippines

LOCATION

LOCATION
Leyte, Philippines

DURATION

DURATION
16 - 23 July 2017

ACCOMPLISHMENTS

Distributed 500 Hygiene Kits and 500 Non-Food Items such as jerry cans, mosquito nets and blankets to 12 evacuation centres around Leyte.

NO. OF BENEFICIARIES

NO. OF BENEFICIARIES:
Estimated 500 families



PHILIPPINES

On 8 November 2013, Typhoon Haiyan, recorded as the strongest typhoon in the world, swept through central Philippines, displacing 4.1 million individuals, of which 1.7 million were children. Several regions were directly hit, and the Philippines government requested international support to coordinate and implement emergency response in the wake of the devastation.

MERCY Malaysia responded immediately to the needs at affected regions and has been involved in post-disaster recovery and rehabilitation work there ever since. One of the continuous efforts was providing maternal and child nutrition through the supplementary feeding programme in collaboration with the local health authority of Ormoc City Health Office, which started in 2015.

Participants were selected through Operation Timbang, which identified malnourished under-5 children who were in need of nutritional support to improve healthy growth. To date, the programme has been implemented in six locations on Leyte Island. This programme, which ran for 10 months, was reported by the Barangay Nutrition Scholars to have positively impacted the community by increasing the weight of malnourished children to normal levels.

Project

SUPPLEMENTARY FEEDING PROGRAMME

OBJECTIVES

To improve quality nutritional intake among children below-5 at two districts.

PROJECT PARTNER

City Health Office, Ormoc City

LOCATION

Mas-In and Cabintan

DURATION

March 2017 – January 2018

ACCOMPLISHMENTS

- 99 below-5 children and 4 pregnant mothers received supplementary feeding.
- 48 education sessions conducted.
- 87 mothers/ caregivers attended an educational workshop.

NO. OF BENEFICIARIES

Estimated 190 including children and mothers



PHILIPPINES

Acute watery diarrhoea, one of the main causes of deaths for children under-5, is a severe problem in localities that lack clean water, such as Pinacbadao in Samar province, Philippines. When an outbreak of Acute Watery Diarrheal occurred in June 2016, the MERCY Malaysia Philippines field office conducted an assessment. They discovered that poor hygiene and sanitation practices were prevalent in Pinacbadao due to long-standing water supply problems. Water-related diseases were common, including diarrheal diseases.

It was decided that a WASH project would greatly benefit Pinacbadao residents. The project involved developing water sources from the barangays of Lale and Dolore, and repairing damaged pipes that will carry clean drinking water to community members. Thanks to careful planning and cost control, the team was able to repair the pipes in barangay San Isidro, making it possible to benefit a 10th barangay from the initially planned nine.

At the same time, hygiene promotion activities were conducted to address improper hygiene practices in the community, while educational materials for hygiene promotion were distributed at the barangays through the community and elementary schools.

Project



WATER, SANITATION & HYGIENE (WASH) SAMAR

OBJECTIVES

- To provide clean drinking water to nine barangays
- Increase good hygiene practices among community members
- To reduce incidences of water-borne diseases

LOCATION

Samar, Philippines

DURATION

March - September 2017

ACCOMPLISHMENTS

- Repaired damaged pipes at Pinacbadao province
- Promoted good hygiene practices in schools and community areas

NO. OF BENEFICIARIES

9,719 community members in the targeted province



SRI LANKA

On 25 and 26 May 2017, incessant heavy rainfall brought by the southwest monsoon triggered flooding and landslides in 15 of the 25 districts in Sri Lanka. As of 31 May, about 630,000 people, out of which 150,000 were women and girls of reproductive age, and 189,000 children were affected by the disaster. National authorities confirmed 203 deaths and 96 people missing. The floods and landslides destroyed or damaged more than 9,000 houses and temporarily displaced 73,560 people to 354 locations. Aerial surveys and satellite images confirmed that Galle, Kallutara, Matara, and Rathnapura were the worst-hit districts.

MERCY Malaysia's emergency response team was deployed to Matara & Kalutara districts, Sri Lanka from June 2 to 9 June 2017 to support local response and provide healthcare to affected population. 50 hygiene/cleaning kits were distributed, while 464 patients were treated at three mobile clinics.

Project

SRI LANKA FLOOD AND LANDSLIDE EMERGENCY RESPONSE

OBJECTIVES

- Support post-flood emergency response
- Increase access to health services via mobile clinics to the affected population

PROJECT PARTNER

Sri Lanka Scouts Association

LOCATION

Matara & Kallutara Districts

DURATION

2 – 9 June 2017

ACCOMPLISHMENTS

- Distributed hygiene kits and cleaning kits to school children/households.
- Conduct 3 Primary Health Care mobile clinics.

NO. OF BENEFICIARIES

514 beneficiaries



SYRIA

The conflict in Syria led to approximately 300,000 deaths and over 1 million injured. The originally beautiful country is now separated into areas dominated by the government, military separatists, and other splinter groups. Eighty percent of Syrians now live in poverty, with over 9 million battling food insecurity. Muscle wasting is above 7% and stunting is at 23%.

Access to healthcare is severely restricted, hampered by security factors. Maternal and child health services are disrupted, resulting in home births due to the lack of available resources (human resources, birthing centers). With deliveries being conducted by inexperienced persons, maternal mortality rate in Syria was reported to have increased drastically. Records for 2014 -2015 showed that around 3400 newborns died for different reasons, many due to complications at birth which untrained healthcare providers could not manage.

Recognising the need for a long-term solution to this urgent gap in reproductive health, MERCY Malaysia (MM) worked with its implementing partner to conduct a 3-year Midwifery programme to increase the number of qualified midwives and create opportunities for Syrians to improve their quality of life. MM rehabilitated and furnished a pro-bono building that was provided for the programme, and started the programme on October 2017.

The selected 45 young ladies, who will graduate as trained midwives in 2020, are also provided safe living quarters, daily meals, and daily transport to the training centre. Upon graduation, they will be attached to medical centers and will be able to conduct safe deliveries.

Project



MIDWIFERY TRAINING PROGRAMME

OBJECTIVES

- To improve access to reproductive health services by increasing the number of qualified personal midwives.
- To decrease mortality and morbidity rate among pregnant mothers during delivery
- To boost women empowerment by providing capacity-building to selected students.

PROJECT PARTNER(S)

1. IHH-Humanitarian Relief Foundation
2. MEC (Medical Education Council)

LOCATION

Idleb, Syria

DURATION

3 years , beginning September 2017

ACCOMPLISHMENTS

- Rehabilitated and equipped Training Center building for the programme
- Launched first year of the programme, with graduation in 2020

NO. OF BENEFICIARIES

45 students



SYRIA

As the Syria crisis enters its sixth year, civilians continue to bear the brunt of a conflict marked by suffering and destruction. 13.5 million people require humanitarian assistance, including 4.9 million marginalised people trapped in besieged and hard-to-reach areas. Since the crisis began in 2011, Syria has witnessed significant challenges in the humanitarian and security situation across the country, with increased targeting of civilian infrastructure, and significant rises in internal displacement. Human rights violations and widespread insecurity are rampant, with blatant disregard for international law and International Humanitarian Law (IHL).

MERCY Malaysia's assessment team arrived at Aleppo, Syria, in December 2017, and visited several Non-Governmental Organization (NGO), International NGO (INGO)s and facilities operating in the border of Turkey and inside Syria. They observed that there are many health facilities, orphanages, schools, rehabilitation houses and other facilities at the border built by the Syrians for refugees. These facilities are mostly self-funded and sometimes received donation and assistance by individuals or organisations. However, they are poorly regulated, resulting in health-related issues among children in the schools.

With the assistance of partner IHH, MERCY Malaysia conducted Hygiene Education training for the School Management Committees (SMCs), including teachers, in the targeted schools. The training focused on hygiene behaviour and the importance of good hygiene habits to avoid diseases, especially infectious disease. The lessons were later conveyed by the teachers to their students. 2000 sets of Hygiene Kits were also distributed to emphasise the prevention of communicable diseases.

Project



HYGIENE AWARENESS AND HYGIENE KIT DISTRIBUTION TO SYRIAN REFUGEE STUDENTS IN TURKEY

OBJECTIVES

To improve hygiene levels among Syrian refugee students in Turkey

PROJECT PARTNER

IHH – İNSANI YARDIM VAKFI

LOCATION

Reyhanli, Hatay-Turkey

DURATION

January - May 2017

ACCOMPLISHMENTS

Distributed Hygiene Kits and provided hygiene awareness at 8 Syrian refugee schools

NO. OF BENEFICIARIES

2,000 students



SYRIA

For any child forced to flee their home, winter is a particularly challenging time. Without the comfort of warmth, children become ill quickly and drop out of school. With little or no shelter, clothing or heating, those who survive the harsh cold lose their lives in winter to snowstorms, flooding and bone-chilling winds.

In the 7th winter that Syria faced since its civil unrest, temperatures dropped to below zero levels, bringing wintry chills and freezing rain that swept across the region. Coupled with oppression, poverty and hunger, many Syrians live on the brink of danger and death, especially families with young children.

Since 2015, MERCY Malaysia has been providing winter relief assistance to Syrian refugees every year. With local partners, MERCY Malaysia provides assistance to Syrian families who struggle to buy even the most basic goods, including clothes, scarves, gloves and shoes to keep their children warm. This winter, MERCY Malaysia identified 90 Syrian refugees' families in a small border town between Turkey and Syria, providing them basic winter relief items to withstand the harsh winter. Apart from winter clothing and sleepware, 22.5 tonnes of charcoal and 22.5 tonnes of firewood were provided to keep them warm as the cold winds blew outside.

Project

SYRIA WINTER RELIEF 2017

OBJECTIVES

To provide winter items to relieve suffering of Syrian refugees in Turkey

PROJECT PARTNER

iHH – Humanitarian Relief Foundation

LOCATION

Reyhanli-Turkey

DURATION

December 2017

ACCOMPLISHMENTS

Distributed winter items consisting of blankets, mattresses, carpets, charcoal and firewood.

NO. OF BENEFICIARIES

90 families





BUILDING RESILIENT COMMUNITIES (BRC)

BUILDING RESILIENT COMMUNITIES (BRC): COMMUNITY-BASED DISASTER RISK MANAGEMENT (CBDRM)

The programme helps to sensitise stakeholders on Community-Based Disaster Risk Management (CBDRM) concepts and strengthen their knowledge and skills on disaster preparedness. It aims to increase the communities' capacity and resilience, thus reducing their vulnerability to natural hazards.

The CBDRM is a collaborative effort which engages different groups within a community, including the governmental agencies and private sectors. Throughout the programme, stakeholders are required to identify, analyze, address, monitor, and evaluate the potential risks within their environment, thus instilling a sense of ownership and empowering them to implement the solutions that they developed together as a unit.

Participants' understanding on DRR was rated before and after to assess the effectiveness of the programme. Facilitators also observed the awareness levels and attitude of participants during the activities. Key accomplishments of the programme are:

- Increased knowledge of DRR concepts, preparedness measures and community-based approaches
- Improved motivation and confidence in managing disaster risks from the grassroots level
- Development of disaster preparedness at the community and personal level

A summary of the CBDRM activities in 2017 are as follows:

NO	LOCATION	NO OF PARTICIPANTS	DATE
1.	Dewan Serbaguna Kg Gong Halt, Kuala Krau Pahang	41 adults 15 children	19-20 May 2017
2.	Dewan Serbaguna Kampung Dato Sharif Ahmad, Kuala Krau, Mukim Jenderak Pahang	36 adults 16 children	28-29 July 2017
3.	Balai Raya Kampung Sementeh	32 adults 15 children	25-26 August 2017

Project

COMMUNITY-BASED DISASTER RISK MANAGEMENT (CBDRM)

OBJECTIVES

- To provide a platform for communities to actively participate in disaster risk reduction activities, gain knowledge, skills and competencies in DRR and indigenous early warning systems are enhanced and used.
- Bringing together local communities and other relevant stakeholders to expand its resource base and focusing on enhancing local capacities and resources of the most vulnerable groups within a community while reducing their vulnerability.
- To form a local disaster management committee in charge of the community disaster action plan.

LOCATION(S)

Kampung Gong Halt, Kuala Krau, Pahang
Kampung Tekal, Kuala Krau, Pahang
Kampung Sementeh, Lanchang, Pahang

PARTNER

Local communities

FUNDER

Yayasan Sime Darby

NO. OF BENEFICIARIES

155 (109 adults, 46 children)



BUILDING RESILIENT COMMUNITIES (BRC): SCHOOL PREPAREDNESS PROGRAM (SPP)

School Prepared Program (SPP) is one of the crucial programs under BRC's overarching framework. This programme, conducted since 2007, is a collaboration between MERCY Malaysia and the Ministry of Education, and is aligned with the ASEAN Safe Schools Initiative.

SPP is a two-phase programme designed to develop the culture of disaster preparedness, as well as strengthening capacity of schools and communities to respond to natural disaster. Students are taught simple, interactive and hands-on activities to increase understanding on disaster preparedness and instill a sense of responsibility for their own safety during an emergency.

SPP modules include 'School Watching Workshop', 'Nature Elements and Disasters', 'Grab Bag', 'Health and Hygiene', 'Early Warning and Quick Steps taken during Disaster', 'Haze Song', and 'Climate Change and Us'. Participants were rated on their understanding of the SPP concept before and after the programme to know the impact of the activities. Key accomplishments of the programme include:

- Increased preparedness for disaster
- Improved understanding on the importance and usage of a grab bag
- Increased awareness on the need for family preparedness
- Increased preparedness to face disaster in schools

A summary of SPP activities in 2017 are as follows:

NO	STATE	NO. OF SCHOOLS	NO OF PARTICIPANTS (PHASE 1)	NO OF PARTICIPANTS (PHASE 1)
1.	Klang, Selangor	9	348	36
2.	Johor Bahru, Johor	5	205	128
3.	Segamat, Johor	5	204	205
4.	Pedawan, Sarawak	5	221	200
5.	Bau, Sarawak	5	196	183

Project

SCHOOL PREPAREDNESS PROGRAM (SPP)

OBJECTIVES

- To generate a culture of disaster awareness and response amongst school children, teachers and staffs.
- Strengthening the capacity of schools and school communities to respond to natural disaster
- Increased the knowledge and understanding in the importance of disaster preparedness
- Introducing the Grab Bag concept as preparedness measures

LOCATION

29 schools in Selangor, Johor, Sarawak

DURATION

12 months (Jan-Dec 2017)

PARTNER(S)

Ministry of Education
Participating schools

FUNDER

MERCY Humanitarian Fund

NO. OF BENEFICIARIES

1,926 (1,720 students and 206 teachers)



BUILDING RESILIENT COMMUNITIES (BRC): SCHOOL PREPAREDNESS PROGRAM TRAINING OF TRAINERS

SPPToT is a part of School Preparedness Programme (SPP) capacity building. SPP is a two-phase Disaster Risk Reduction (DRR) programme in collaboration with the Ministry of Education (MOE) and the State Department of Education's Office (SDEO). The ToT, attended by 46 participants, provided training and certification for facilitators to conduct SPP training during MERCY Malaysia's SPP.

Project

SCHOOL PREPAREDNESS PROGRAM TRAINING OF TRAINERS (SPPToT)

OBJECTIVES

SPPToT is done to ensure facilitators are fully equipped to;

- Carrying out 1 or 2 of the modules activities assigned by team leader.
- Actively participate with the participants in creating awareness on disaster preparedness.
- Introducing concept and principles of Core Humanitarian Standards (CHS).
- Help participants understand the concept of disaster preparedness.
- Be a positive example through appropriate attire and behavior.

LOCATION

MERCY Malaysia Headquarters, Kuala Lumpur

DURATION

14 January 2017 and 21 January 2017

NO. OF BENEFICIARIES

46



BUILDING RESILIENT COMMUNITIES (BRC): RESILIENT HEALTH INFRASTRUCTURE (RHI)

Resilient Health Infrastructure (RHI) is one of MERCY Malaysia's Building Resilient Communities (BRC) initiatives. It is a programme to advocate a planned preparation for hospitals and health infrastructures to respond effectively during disasters, and recover fast from the impact of extreme events. As health infrastructures are complex and sophisticated organisations, they are required to operate in a predictable manner during and after a hazard and/or disaster.

Most hospitals in Malaysia were planned, designed and built without taking into account the probability of disaster. The failure of hospitals to absorb and accommodate pressures during disasters will negatively affect medical care and delivery. This had led the World Health Organization (WHO) and the United Nations Office for Disaster Risk Reduction (UNISDR) to launch the 'Hospital Safe from Disaster Campaign' in 2008/2009, which aims to make hospitals more resilient and prepared during disasters.

A summary of the RHI activities implemented in 2017 are as follows;

NO	ACTIVITY	DATE	LOCATION	NO OF PARTICIPANTS
1.	Resilient Health Infrastructure: My Hospital is Getting Ready!	3 - 4 October 2017	Hospital Permai, Johor Bahru	40
2.	Resilient Health Infrastructure: My Hospital is Getting Ready!	22 - 23 August 2017	Hospital Sultanah Aminah, Johor Bahru	50
3.	Resilient Health Infrastructure: My Hospital is Getting Ready!	26 - 27 September 2017	Hospital Sultan Ismail, Johor Bahru	40
4.	Resilient Health Infrastructure; • PKD Kuala Krai • Hospital Kuala Krai • Klinik Kesihatan Bandar • Klinik Kesihatan Dabong • Klinik Kesihatan Laloh • Klinik Kesihatan Manek Urai • Klinik Kesihatan Pahi • Klinik Kesihatan Mangkebang • Klinik 1 Malaysia • Klinik Kesihatan Biak • Angkatan Pertahanan Awam Malaysia (APM)	19 - 20 November 2017	Manik Urai, Kuala Krai, Kelantan	28

Project

RESILIENT HEALTH INFRASTRUCTURE (RHI)

OBJECTIVES

- Strengthen the health infrastructure's capacity to respond effectively to disasters
- Improve health infrastructure's disaster preparedness and early warning systems through the implementation of action plan
- Strengthen health infrastructure's staff's knowledge of DRR concepts and skills on disaster preparedness
- Increase volunteer competency in the humanitarian context through knowledge enhancement

LOCATION

Johor Bahru and Kelantan

FUNDER

Malaysian Flood Fund, Yayasan Sultan Iskandar Johor

NO. OF BENEFICIARIES

158

BUILDING RESILIENT COMMUNITIES (BRC): RESILIENT HEALTH INFRASTRUCTURE - TRAINING OF TRAINERS (RHIToT) - MALAYSIA AND MYANMAR

Resilient Health Infrastructure (RHI) is part of MERCY Malaysia's Building Resilient Communities (BRC) initiative that advocates for preparations in strengthening hospitals' and health infrastructure to respond effectively during disasters and recover faster from the impact of extreme events.

The training prepares trainers to facilitate the RHI workshop, which involves a number of activities including capacity development of the hospital and technical staff through lectures and the 'hospital watching' activity. Participants were also shown how to conduct data collection and systematic analysis on hospitals' vulnerability and capacities.

Technical details concerning the planning, design and operation of health facilities such as hospitals and clinics were shared and explained in order for participants to understand how their work environment and surroundings can be improved towards achieving resiliency. The session also focuses on training participants so that they can further advocate, share and perhaps train fellow health practitioners on the concept and practice of BRC and Resilient Health Infrastructure.

Examples and case studies were shared in order to let participants relate their daily activities as health practitioners and how can they contribute in creating awareness and practicing DRR and DRM.

Project

RESILIENT HEALTH INFRASTRUCTURE - TRAINING OF TRAINERS (RHIToT)

OBJECTIVES

To prepare technical experts from related fields such as architecture, engineering, medical planners, construction experts, doctors and nurses as well as hospital support staff to be able to support MERCY Malaysia's RHI workshops

LOCATION & DURATION

1. Sri Iskandar, Perak - 11 February 2017: 40 participants
2. Sittwe, Myanmar - 2 May 2017: 35 participants

NO. OF BENEFICIARIES

75



BUILDING RESILIENT COMMUNITIES (BRC): PRIVATE SECTOR (PS)

Private Sector (PS) training is one of MERCY Malaysia's Building Resilient Communities (BRC) training that provides comprehensive DRR and DRM education for companies or organisations to reduce risks and increase resilience during a potential disaster, making them able to function and bounce back quickly post-disaster.

The training module utilises the company's existing networks and platforms in disaster risk reduction, emergency preparedness, response and recovery. The module includes important post-disaster components such as planning for business continuity, contingency, risk assessment, needs analysis and field coordination.

The PS training activities implemented in 2017 are as follows;

NO	ACTIVITY	DATE	LOCATION	NO OF PARTICIPANTS
1	YSD Disaster Risk Management Training	5 – 7 May 2017	Lembah Pangsun, Hulu Langat	30
2.	Malaysia Airport Holding Berhad BRC Training	19 October 2017	MAHB Training Centre, KLIA	40
3.	Axiata Group BRC Training 2017	19 May	Hilton, Kuala Lumpur	20

Project

RESILIENT PRIVATE SECTOR (PS)

OBJECTIVES

- Increase knowledge of DRR and DRM among private sector and civil societies.
- Establish potential partnerships in relief measures, resilient infrastructure and community development support.
- Improve private sectors' resiliency towards disaster and conflict situations, and making them more risk-sensitive.

LOCATION(S)

- Lembah Pangsun Hulu Langat
- MAHB Training Centre
- Hilton Kuala Lumpur

FUNDER

- Yayasan Sime Darby
- Malaysia Airport Holdings Berhad
- Axiata Group

NO. OF BENEFICIARIES

90



BUILDING RESILIENT COMMUNITIES (BRC): TRAINING OF TRAINERS

Building Resilient Community- Training of Trainers is a three-day practical training programme that trains local leaders to implement the School Preparedness Program (SPP) and CBDRM (Community Based Disaster Risk Management) programme effectively. The training also helps increase the community's preparedness in the event of a disaster. Upon completion of the training, participants are equipped with the skills to conduct and facilitate MERCY Malaysia's SPP and CBDRM. Participants of this ToT comprised 12 teachers, 3 community leader, and 5 community representatives. Trained individuals will participate as facilitators and trainers for MERCY Malaysia's BRC programs in Battambang. Full BRC programs implementation for Battambang will be in 2018.

Project

BUILDING RESILIENT COMMUNITIES – TRAINING OF TRAINERS (TOT)

OBJECTIVES

- To train locals to implement SPP and CBDRM program
- Increase preparedness of implementing team and their community

LOCATION

Battambang, Cambodia

DURATION

22 – 25 May 2017

FUNDER

Maybank Foundation

NO. OF BENEFICIARIES

20

BUILDING RESILIENT COMMUNITIES (BRC): LATIH AMAL EX-TSUNAMI LABUAN

Latih Amal Ex-Tsunami is a simulation exercise between communities, private sectors and NGOs on how they should react during disaster. Attended by 247 participants from 6 villagers, the Latih Amal Ex-Tsunami included activities such as the standard operating procedure during the event of tsunami, roles and tasks of each agencies and staffs, evacuation, relief efforts, communication channels, and more.

Participants were given simulation exercises on inter-agency cluster meetings, coordination for evacuation and relief efforts, management of affected people, crowd control, management of dead bodies, media handling, and evacuation of injured patients. The programme was intense yet interesting, providing participants with basic knowledge on disaster management. Participants include governmental agencies, NGOs, ministries and universities.

Project

LATIH AMAL EX-TSUNAMI LABUAN

OBJECTIVES

Increase awareness on disaster management and response.

LOCATION(S)

Labuan, Sabah

DURATION

11 – 13 May 2017

PARTNER

Local communities

1. Polis Diraja Malaysia
2. MERCY Malaysia
3. Angkatan Tentera (Kementerian Pertahanan)
4. Jabatan Ketua Menteri
5. Jabatan Bomba dan Penyelamat Malaysia
6. Angkatan Pertahanan Awam Malaysia
7. Agensi Penguatkuasaan Maritim Malaysia
8. Jabatan Meteorologi Malaysia
9. Jabatan Pengairan dan Saliran Malaysia
10. Jabatan Kerja Raya
11. Jabatan Kebajikan Masyarakat
12. Kementerian Kesihatan Malaysia
13. Jabatan Penerangan Malaysia
14. Jabatan Sukarelawan Malaysia
15. Bulan Sabit Merah Malaysia
16. Universiti Malaysia Sabah
17. Kementerian Pendidikan

NO. OF BENEFICIARIES

247

BUILDING RESILIENT COMMUNITIES (BRC): MEMBINA ACEH BERDAYA TAHAN

The district of Pidie Jaya, Aceh, was hit by a devastating earthquake on 7 December 2016, causing many system disruptions and loss of lives. MERCY Malaysia provided emergency relief and also helped in rebuilding two health facilities in the district to ensure the clinics can continue to serve the local communities.

Indonesia's biggest vulnerability is in its town planning, where buildings and infrastructures are densely packed and located close to each other. Accordingly, this could compound the effects of any given disaster. Hence, a BRC workshop, conducted in partnership with the Alumni of Civil Engineers in Aceh (IKATSI, Ikatan Keluarga Alumni Teknik Sipil) offers critical knowledge that acts as mitigation measures to pre-existing vulnerabilities. The workshop also emphasized on the principles and tools in reducing disaster risk by building back better and safer.

The workshop was attended by 100 participants from the public and private sectors, academia, construction practitioners and university students.

Project

WORKSHOP MEMBINA ACEH BERDAYA TAHAN

OBJECTIVES

- To identify hazards and risks prior to the onset of disasters through mapping principles and procedures.
- To share practical tools and methods in building disaster resilience infrastructure for the community by adhering to the principles of building back better and safer.

LOCATION

Syiah Kuala University, Banda Aceh, Aceh, Indonesia

PROJECT PARTNER

Syiah Kuala University, Banda Aceh

DURATION

25 May 2017

NO. OF BENEFICIARIES

100



BUILDING RESILIENT COMMUNITIES (BRC): PUSAT KECEMERLANGAN KEJURUTERAAN DAN TEKNOLOGI (CRE@TE) JKR

Architects, engineers and building construction experts play important roles in disaster mitigation and recovery after a disaster, as architectural and engineering design may bear structural consequences. As part of the DRM and DRR team, these specialists must be fully aware of their responsibilities, with well-defined and proper organisation.

Post-disaster reconstruction involves more than the rebuilding of damaged and destroyed structures and towns. It is also an opportunity to create better and safer designs, using improved construction techniques and materials to build stronger and more sustainable structures.

MERCY Malaysia shared their experience in the reconstruction and rebuilding of disaster areas, where architects, engineers and building construction experts played a role to rebuild the lives of beneficiaries. The one-day seminar was attended by nearly 200 JKR staffs nationwide.

Project

PUSAT KECEMERLANGAN KEJURUTERAAN DAN TEKNOLOGI (CRE@TE) JKR

OBJECTIVES

To strengthen technical expertise on DRM and DRR, and how building and construction specialists can play bigger roles in disaster risk mitigation and reduction.

LOCATION

Pusat Kecemerlangan Kejuruteraan dan Teknologi (CRE@TE) JKR, Melaka


DURATION

17 May 2017

NO. OF BENEFICIARIES

200





TRAINING

BASIC LIFE SUPPORT TRAINING

Knowledge of CPR and First Aid are essential skills for everyone, more so during missions when the medical volunteers are short-handed. The Basic Life Support Training provides a one-day practical training on basic life support to equip participants with the knowledge and exposure of First Aid and CPR so that they can assist medical volunteers during missions. The training also aims to ensure that volunteers are qualified and competent before being assigned to a relief operation or medical programme.

Project

BASIC LIFE SUPPORT TRAINING

OBJECTIVES

- Provide basic knowledge of Cardiopulmonary Resuscitation (CPR) and First Aid to non-medical Volunteers.
- To strengthen non-medical volunteers to support medical volunteers during missions when necessary.

LOCATION

MERCY Malaysia HQ, Kuala Lumpur

DURATION

30 May 2017

NO. OF BENEFICIARIES

30 (28 volunteers and 2 staff)



VOLUNTEER INDUCTION PROGRAMME (VIP)

The Volunteer Induction Programme (VIP) is a training programme designed for newly registered volunteers to provide them with comprehensive knowledge of MERCY Malaysia and how it operates. It is compulsory for all new volunteers before being deployed for missions or programmes.

The VIP also introduces volunteers to international humanitarian practices such as the Code of Conduct and Core Humanitarian Standards (CHS) outlined in the Sphere Handbook that guides MERCY Malaysia in providing humanitarian assistance. Upon completion of the VIP, volunteers will have a better understanding of MERCY Malaysia's principles and ethos, which will serve them well when representing the organisation on the field.



Project

VOLUNTEER INDUCTION PROGRAMME (VIP)

OBJECTIVES

- Share MERCY Malaysia's background, mission, vision and core values.
- Inculcate the true spirit of volunteerism and professionalism among participants.
- Obtain feedback from volunteers about their expectations and concerns.
- Develop a compassionate and professional team of volunteers.

LOCATION & DURATION

1. Pusat Perubatan UKM, Cheras
 - 18 March, 13 May, 23 September, 4 November 2017
2. Wisma Standard Chartered, Bukit Jalil
 - 9 April 2017
3. Pusat Aktiviti Pelajar USIM
 - 21 May 2017
4. Sabah Chapter Office
 - 4 November 2017
5. Kolej Kemahiran Tinggi MARA, Pasir Mas
 - 11 November 2017
6. Menara Prudential, Jalan Sultan Ismail
 - 16 November 2017
7. Sarawak Chapter Office
 - 23 November
8. UiTM Kampus Alor Gajah, Melaka
 - 2 December 2017

NO. OF BENEFICIARIES

891 volunteers



EMERGENCY MEDICAL TEAM TRAINING PROGRAMME (LECTURES)

Medical practitioners usually function well in the hospital setting, but may not be able to perform their duties well on the field without technological support and a multi-disciplinary team. As such, training is required to equip them with the right skills and mindsets to perform well in humanitarian response.

The EMT Lecture is a 2-day tailored volunteerism and humanitarian development training programme on Emergency Response during disasters or non-disaster periods. This training was organised twice a year to ensure MERCY Malaysia has a pool of trained medical volunteers who are ready for immediate deployment in response to an emergency.

Project

EMERGENCY MEDICAL TEAM TRAINING LECTURES (EMT LECTURES)

OBJECTIVES

- Identify volunteer roles in responding to emergency situations
- Form an Emergency Medical Team of volunteers
- Equip volunteers with the skills and knowledge of emergency response in crisis and non-crisis situations

LOCATION

Pusat Perubatan Universiti Kebangsaan Malaysia (PPUKM), Cheras, Kuala Lumpur

DURATION

- 4 – 5 March 2017
- 15 – 16 July 2017

NO. OF BENEFICIARIES

60 volunteers

EMERGENCY MEDICAL TEAM TRAINING EXERCISE (FTX) PROGRAMME

The Emergency Medical Team Field Training Exercise (EMT-FTX) is a follow-up/practical training from the Emergency Medical Team Training (Lectures) conducted earlier in the year. Organised once a year, the training programme aims to deliver the right knowledge, skills and practices of field hospital operations during disaster and non-disaster situations. The EMT-FTX, which helps enhance the volunteers' performance in humanitarian work, was attended by 60 medical and non-medical volunteers who had attended the Lecture earlier. Volunteers who had completed this training were expected to be ready for deployment in local and international missions.

Project

EMERGENCY MEDICAL TEAM TRAINING EXERCISE (FIELD TRAINING EXERCISE)

OBJECTIVES

Establish a working committee of Emergency Medical Team (EMT) to plan and implement a full EMT set-up

LOCATION

Kolej Kediaman Dato' Onn, UKM, Bangi

DURATION

27 – 29 July 2017

NO. OF BENEFICIARIES

60 (50 volunteers and 10 staff)

HUMANITARIAN LAB 1.0

The Humanitarian Lab is an initiative to incubate, create and accelerate innovative ideas to address humanitarian and development needs of displaced communities. Lab 1.0 focused on Rohingya refugees in Malaysia, an issue that begs urgent attention but often kept under wraps.

The Lab served as an open platform for experts, researchers and advocates to research and develop strategies that would potentially facilitate the protection and integration of refugees in Malaysia. These include strategic frameworks, data collection and basic principles that will aid in policy-making, and improved coordination of humanitarian aid to these marginalized communities.

The Humanitarian Lab, attended by 100 participants from various of Organisations and Institutions, also served as a long-term, value-added flagship programme under MERCY Malaysia's Humanitarian Development Centre. Participations included Rohingya Organisation Leaders, International Organisation of Migration (IOM), UNHCR representatives, Governmental Agencies, Universities, and media.

Project

HUMANITARIAN LAB 1.0: ROHINGYA REFUGEES IN MALAYSIA

OBJECTIVES

To initiate, incubate, and accelerate innovative ideas to address humanitarian and development needs of the Rohingya refugees in Malaysia

PROJECT PARTNER

ASEAN Rohingya Centre (ARC)

LOCATION

Swiss Garden Hotel, Kuala Lumpur

DURATION

12 December 2017

NO. OF BENEFICIARIES

100 participants



MALAYSIAN TECHNICAL COOPERATION PROGRAMME (MTCP)

Established in 1980, the Malaysian Technical Cooperation Programme (MTCP) was aimed at providing technical assistance to participating countries. The programme consolidates various forms of technical cooperation in areas where Malaysia has the experience and expertise. There are over 80 MTCP training institutions which are centers of excellence for training that offers programmes. Since its inception, MTCP has registered over 32,000 participants from 143 developing countries.

The 1-week programme brought together over 40 participants from various backgrounds such as government agencies, non-governmental organisations and civil societies, focusing on the following aspects of disaster risk management:

1. Principles of disaster risk reduction and response
2. Coordination in disaster response and humanitarian actions
3. Capacity and efficiency enhancement of humanitarian and relief workers
4. Holistic concept in disaster management through Total Disaster Risk Management (TDRM)
5. Community based approaches in disaster management
6. Climate change adaptation (CCA) and sustainable development
7. City and community resilience
8. Tools and cross cutting issues in disaster response and disaster risk reduction

Project

Malaysian Technical Cooperation Programme (MTCP)

OBJECTIVES

- To share development experience with other countries
- To strengthen bilateral relations between Malaysia and developing countries
- To promote South-South Cooperation (SSC)
- To promote technical cooperation among developing countries (TCDC)

PROJECT DONOR

Malaysian Ministry of Foreign Affairs (MOFA)

PROJECT PARTNER

Malaysian Ministry of Foreign Affairs (MOFA)

LOCATION

Kuala Lumpur and Melaka

DURATION

23 June – 31 July 2017

NO. OF BENEFICIARIES

40



T20 TENTS SIMULATION EXERCISE FOR UNIMAP YOUNG MERCY PROGRAMME

The UniMAP Young MERCY Program is co-curricular programme in Universiti Malaysia Perlis initiated by MERCY Malaysia to provide early exposure to volunteerism. The UniMAP Young MERCY programme provides basic knowledge of humanitarian relief with practical exercise. Participating students attended a few lectures and simulation exercises before undertaking in the planning and implementation of humanitarian projects. The training was attended by 203 students who registered for UZW 114 courses under UniMAP's Co-Curricular Centre.

Project

T20 TENTS SIMULATION EXERCISE FOR UNIMAP YOUNG MERCY PROGRAMME

OBJECTIVES

- To train volunteer students on the setting-up of the T20 tent for humanitarian aid.
- To plan the Field Hospital layout.

PROJECT DONOR

General Fund (VEP North)

PROJECT PARTNER

Universiti Malaysia Perlis (UniMAP)

LOCATION

Universiti Malaysia Perlis, Arau Perlis

DURATION

11 - 12 November 2017

NO. OF BENEFICIARIES

203 UniMAP Students



HUMANITARIAN LOGISTICS MANAGEMENT TRAINING

Conducted for the second year in collaboration with HELP Logistics, the Humanitarian Logistics Management (HLM) training was conducted to promote knowledge transfer and capacity building in humanitarian logistics. HELP Logistics, a subsidiary of the Kuehne Foundation, provides training on Logistics and Supply Chain Management by providing a detailed picture of the humanitarian system in emergency and development relief. Participants were introduced to different types of disasters, disaster life cycle, involved actors and types of responses.

Project

HUMANITARIAN LOGISTICS MANAGEMENT TRAINING

OBJECTIVES

- To train an Emergency Response Team that functions as an extended arm to the logistics team in disaster response.
- To equip new and existing volunteers with practical knowledge of logistics management in the humanitarian sector.

PROJECT PARTNER

HELP Logistics, Kuehne Foundation

LOCATION

Qliq Hotel, Empire Damansara

DURATION

17 – 19 May 2017

NO. OF BENEFICIARIES

23 (6 MERCY staff and 17 volunteers)



ADRRN INNOVATION WORKSHOP

The ADRRN Innovation Workshop is to improve the innovation capacity of MERCY Malaysia and identify unsolved issues by taking a different approach and perspective. The 2-day workshop involved 20 staff members from medium to upper management, who were then divided into four groups to discuss and brainstorm innovation plans in humanitarian work. MERCY Malaysia came up with five main innovations in planning, administration, volunteer management, logistic and project monitoring.



Project

ASIAN DISASTER REDUCTION AND RESPONSE NETWORK (ADRRN) INNOVATION WORKSHOP

OBJECTIVES

- To develop new ideas using the Humanitarian Innovation Fund (HIF) model of innovation.
- To strengthen participants' ability to apply for humanitarian and development funding.
- To develop understanding of partnerships and innovation at the local level in the Asia-Pacific region.

PROJECT DONOR

ADRRN and Humanitarian Innovation Fund (HIF)

PROJECT PARTNER

ADRRN Innovation Hub

LOCATION

MERCY Malaysia Headquarters, Kuala Lumpur

DURATION

4 – 5 October 2017

NO. OF BENEFICIARIES

20



The background is a blurred photograph of an outdoor event. A large crowd of people is visible in the mid-ground, and a banner with the word "POWER" is partially visible in the background. The overall tone is light blue and grey.

EVENTS & EXHIBITIONS



INTERNATIONAL
HUMANITARIAN

3/7/15 KM
RUN

#myMERCY run



AN EVENING OF HOPE FASHION GALA

In partnership with MERCY Malaysia, KL Alta Moda held the KL Alta Moda Royal Charity Gala x MERCY Malaysia on 2 December 2017 at the Royale Chulan Hotel, Kuala Lumpur.

Themed 'Heritage, High Fashion and Humanitarian Aid', the dinner was graced by Her Majesty Tuanku Zara Salim of Perak, Prince Norodom Narindrapong of Cambodia, and celebrity shoe maker Prof Datuk Jimmy Choo.

About 200 guests were entertained with performances by United Kingdom-based Malaysian soprano Khairunnisa Diyana. The dinner featured a grand fashion show by various brands, including Vivien Westwood, Martin Maison, Margiela, Just Cavalli and Dsquared. Two up-and-coming Italian labels Bad Spirit and PG Enjoy also took to the runway. Professional emcee Juita Jalil provided pro bono emceeing service for MERCY Malaysia in a personal show of support.

Project

AN EVENING OF HOPE FASHION GALA

VENUE

Royale Chulan Hotel, Kuala Lumpur

DATE

2 December 2017

PROJECT PARTNER

KL Alta Moda



'BREAKING DOWN GLOBAL FRAMEWORKS IN BUILDING RESILIENT COMMUNITIES IN CITIES' – THINK CITY TALK

In the past decade, disasters have disrupted the well-being and safety of individuals, communities and cities. The establishment of global developmental frameworks, such as the Sendai Framework for Disaster Risk Reduction 2015-2030, the Sustainable Development Goals, and the New Urban Agenda, aim to reduce disaster risk, improve development pathways and reduce the impact of natural hazards.

These frameworks focus on holistic, synergistic solutions that integrate economic, social and environmental outcomes. However, the ambitious agreed goals that will transform communities and cities at the local level require national policies to ensure effective impact.

The talk focused on how MERCY Malaysia's Building Resilient Communities (BRC) programmes can help improve city resilience, while aligning both humanitarian and developmental efforts for communities and cities at risk. The programme was supported by Think City, a wholly-owned subsidiary of Khazanah Nasional Berhad.

Project

BREAKING DOWN GLOBAL FRAMEWORKS IN BUILDING RESILIENT COMMUNITIES IN CITIES – THINK CITY TALK

VENUE

Bangsar, Kuala Lumpur

DATE

29 July 2017



thinkCITY
TALKS

FREE
ADMISSION
Walk-in

POVERTY AND LIVEABLE CITIES



Jeffrey Phang
Friends of
Kota Damansara

Jeffrey Phang is the Director of Community Development in the NGO Friends of Kota Damansara (FoKD), the chairman of MyPJ and on the Advisory Board of SUARAM. Apart from his prolific work in NGO organizations, Jeffrey's key areas of research in UTAR focuses on Sustainable Development, Poverty, Community and Leadership. Jeffrey will be discussing the solutions and challenges of Poverty and a Liveable City, focusing on the success of community-led housing improvements.

BUILDING RESILIENT COMMUNITIES IN CITIES

Urban designer, architect and head of Building Resilient Communities at MERCY Malaysia, Hafiz Amirrol will be sharing the ways humanitarian and developmental efforts can be aligned to create stronger, more resilient cities. He will be looking at ways the Sendai Framework for Disaster Risk Reduction 2015-2030, the Sustainable Development Goals and the New Urban Agenda can be translated into action at the local level.



Hafiz Amirrol
MERCY Malaysia

29TH JULY 2017 | 10AM - 12PM | BOOKMARK, APW

29, Jalan Riong, Bangsar, Kuala Lumpur

Block the date and see you there!

Think City Talks is a series of free public lectures that highlights ways to create more liveable and sustainable cities. Organised by Think City, a community-focused urban regeneration organisation.

Think City is a wholly-owned subsidiary of Khazanah Nasional Berhad (incorporated in Malaysia)



thinkcitytalks



thinkcitytalks



thinkcitytalks

CHARITY CONCERT #MUZIK4HUMANITY

It was a beautiful night of song and dance when DNeX hosted the #MUZIK4HUMANITY concert on 17 & 18 March 2017 at the Panggung Sari Istana Budaya, Kuala Lumpur, in aid of MERCY Malaysia.

The concert was meant to raise funds for children affected by conflict. Proceeds were used to provide nutritional food and basic education to the large communities of displaced children in regions of conflict, specifically MERCY Malaysia's Little Caliph programme in Kandahar, Afghanistan.

The two-night concert, which raised RM500,000 from caring corporations, organisations and individuals, was attended by over 1,000 guests including the Second Finance Minister, Datuk Seri Johari Abdul Ghani. The star-studded night featured veteran entertainers such as Dato' Khatijah Ibrahim, Datuk Ramli Sarip, Dato Hattan, Jaclyn Victor and composer Rudi Muhammad.

In conjunction with the concert, DNeX also conducted its 'Secangkir Susu Halib' project through its eMarketplace Global Halal Exchange. For each ticket sold, DNeX provided one pack of Susu Halib – nutrient-packed powdered full cream milk for growing children aged above 12 months– for one child under the Little Caliph programme.

Project

#MUZIK4HUMANITY

VENUE

Panggung Sari Istana Budaya, Kuala Lumpur

DATE

17 – 18 March 2017

PROJECT PARTNER

Dagang NeXchange Berhad (DNeX)



DUBAI INTERNATIONAL HUMANITARIAN AID & DEVELOPMENT CONFERENCE & EXHIBITION (DIHAD 2017)

Dubai International Humanitarian Aid & Development Conference & Exhibition (DIHAD) is an annual event held under the patronage of H.H. Sheikh Mohammed Bin Rashid Al Maktoum, Vice President and Prime Minister of the United Arab Emirates, and Ruler of the Emirate of Dubai.

Established in 2004 as the Middle East's humanitarian aid and development event, DIHAD enjoys strong support from partners such as the Mohammed Bin Rashid Al Maktoum Humanitarian and Charity Establishment, the United Nations, the UAE Red Crescent Authority, International Humanitarian City, Dubai Cares and the Organisation of Islamic Cooperation (OIC).

As a regional platform for the exchange of humanitarian ideas, values and practices, DIHAD brings together humanitarian actors and key decision makers from leading international organisations, NGOs, Governmental emergency management bodies, foundations, charities, academia, the private sector and others. DIHAD 2017's conference programme reviewed critical issues related to children and conflict as well as the consequences, trauma and lasting scars from living in and fleeing from war zones.

MERCY Malaysia's team, led by Vice President II, YM Datin Raja Riza Shazmin Raja Badrul Shah, was invited to set-up an exhibition booth showcasing the organisations' activities, which attracted over 3,000 visitors including the Malaysian Consulate General, Vice Consulate General and delegates from different countries.

Project

DUBAI INTERNATIONAL HUMANITARIAN AID & DEVELOPMENT (DIHAD 2017)

LOCATION

Dubai, United Arab Emirates (UAE)

DURATION

21 – 23 March 2017



FROST THE TRAIL x MYMERCYRUN 2017

To promote a healthy lifestyle among Malaysians, MERCY Malaysia joined hands with Frost & Sullivan for the inaugural 'Frost the Trail myMERCYrun 2017' (#fttmmr2017) on the 22 July 2017. Held at the Forest Reserve Institute Malaysia (FRIM), the run was themed 'Warm the Hearts', as inspired by both organisations' common goal of serving humanity.

The 'Frost the Trail myMERCYrun Challenge 2017' saw a participation of 400 runners, which raised RM75, 500 in aid of MERCY Malaysia's humanitarian work. #fttmmr2017 offered trails of 2.5 kms, 5 kms and 8 kms to cater to runners of varying fitness levels.

The run was flagged off at 7 am by Her Royal Highness Raja Permaisuri Perak Darul Ridzuan, Tuanku Zara Salim. Throughout the event, the crowd was entertained by energetic performances by emcee Terrence Dass, Noh Salleh and Izmarezam (Abg Tam).

Project

FROST THE TRAIL x MYMERCYRUN 2017

VENUE

Forest Reserve Institute Malaysia (FRIM)

DATE

22 July 2017

PROJECT PARTNER

Frost & Sullivan



INTERNATIONAL CITIES AND CIVIL SOCIETY ORGANIZATIONS SUMMIT

MERCY Malaysia was invited by the Municipality of Esenler in Istanbul to share some of its experience in advocating community and city resilience in the context of disaster and crisis. The summit brought together experts from 60 countries in various fields working on urban and social development in local, national and international projects. The objective of the summit was to foster partnerships between national and international civil society organisations, NGOs, government agencies, private sectors and academia in the realm of urban development studies, humanitarian actions and sustainable development.

MERCY Malaysia presented its Building Resilient Communities as a holistic disaster risk reduction approach to reduce Asian's humanitarian burden, providing practical examples on how investing in building resilience can reduce humanitarian burden, lower disaster risk, build resilience and promote sustainable development. The presentation outlined important measures and approaches, including:

1. The integration of disaster risk reduction into sustainable development policies and planning;
2. Development and strengthening of institutions, mechanisms and capacities to build resilience towards hazards;
3. The systematic incorporation of risk reduction approaches into the implementation of emergency preparedness, response and recovery programmes.

Project

INTERNATIONAL CITIES AND CIVIL SOCIETY ORGANIZATIONS SUMMIT

VENUE

Istanbul, Turkey

DATE

20 – 22 October 2017



THE SALT TRAIL CHALLENGE

The Salt Trail in Sabah's Crocker Range Mountains got its name from villagers in the remote areas, who trekked for days to reach the tamu or markets to trade their jungle ware for daily goods, most importantly salt. Although some of the trails are accessible by road today, in some areas, the Salt Trails continue to be the only access route to the outside world, making them literally the Trail of Hope for the villagers.

The Salt Trail Challenge, an annual fundraising event organised by MERCY Malaysia Sabah Chapter since 2014, drew 70 participants in the 2017 Challenge held from 12 - 13 August at the Crocker Range Park.

Organised in partnership with Sabah Parks, Sabah Amateur Radio Society (SARS) and PACOS Trust, the Challenge was divided into 2 categories – the 25.5km and 12km trails. Both were flagged off at the Inobong substation, with the former ending at Kg Terian while the latter continued for the next 13.5 kms to Kg Buayan before doubling back to Kg Terian.

The Salt Trail Challenge offered extreme sports enthusiasts the opportunity to connect with Mother Nature by spending one night in Kg Terian and engaging with the orang asli community.

Project

THE SALT TRAIL CHALLENGE

LOCATION

Crocker Range National Park, Sabah

DURATION

12 – 13 August 2017



VOLUNTEERS APPRECIATION DINNER 2017

In recognition of our volunteers' dedication, hard work and commitment to MERCY Malaysia programmes in Sabah throughout 2017, MERCY Malaysia Sabah Chapter organised the annual "Volunteers Appreciation Day" on 2 December 2017 at Langkah Syabas Resort, Kinarut, Sabah. The event was attended by over 50 new and seasoned volunteers, who took the opportunity to network and build lasting bonds over a shared passion of service for humanity.

Project

VOLUNTEER APPRECIATION DINNER 2017

VENUE

Langkah Syabas Resort, Kinarut, Sabah

DATE

2 December 2017



EXHIBITIONS



13 – 17 November 2017
#MaybankHeart @ Dataran Maybank



6 – 10 November 2017
#MaybankHeart @ Menara Maybank



29 October 2017
#MaybankHeart @ The Curve



25 – 26 November 2017
1Malaysia Negaraku Caring Bridge



9 September 2017
BASF Petronas Chemical Green the Coastline & Free Market



23 October 2017
BRC @ The International City and Civil Society Organization Summit, Istanbul



15 July 2017
BTS For Charity



8 March 2017
CIMB International Woman Day



30 March 2017
Hari Terbuka Kementerian Kewangan 2017



30 April 2017
Intervention Group for Alcohol Misuse (IGAM) Exhibition



6 August 2017
Launching of the Cares Card – Touch n Go Care for Humanity



25 February 2017
Majlis Sambutan Ulangtahun Ke-40 Masjid Tun Abdul Aziz



25 – 26 November 2017
Syariah Investing Fair



10 – 13 August 2017
The Refugee Fest 2017 @ Publika



20 – 21 November 2017
World Conference on Islamic Thought & Civilization (WCIT) 2017



24 – 25 November 2017
The Uncommon Good - NPO Forum and Fair



16 November 2017
World Toilet Day

A black and white photograph of a group of approximately ten people, including men and women of various ages, posing for a group photo. They are arranged in two rows, with some standing in the back and others kneeling or sitting in the front. Behind them is a large white banner that features the 'mercy' logo (a stylized flower) and the word 'mercy' in a bold, lowercase font. Below 'mercy', the words 'HOSPITAL' and 'HOSPITAL' are partially visible. The entire image is overlaid with a semi-transparent blue filter. The title 'ACKNOWLEDGEMENTS' is centered over the image in a large, bold, white sans-serif font, enclosed within a white rectangular frame with slightly irregular edges.

ACKNOWLEDGEMENTS

SECRETARIAT AS OF DECEMBER 2017



Ir Amran



Ain



Aini



Aishah



Aizat



Nusrat



Suhana



Azarul



Azizah



Badlizan



Chan Li Jin



Fazrin



Hafiz



Hamizah



Hasnizan



Hazimi



Herman



Hisyam



Jefry



Masniza



Nada



Normaliza



Qurratu



Rachel



Radzi



Rijal



Rizal



Rossimah



Said



Saufi



Sayidah



Shafiqah



Shahril



Shahira



Siti



Soad



Syed Reza



Visan



Yesotha



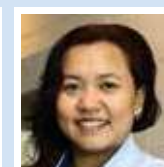
Zila



Zubaidah



Zuri



Zuridah

Secretariat as of December 2017

DATO' DR AHMAD FAIZAL MOHD PERDAUS
President

IR AMRAN BIN MAHZAN
Executive Director

NUR AINI BINTI AHMAD
Personal Assistant

YESOTHA A/P BALAKRISHNAN
Compliance Officer

QUALITY & ACCOUNTABILITY DEPARTMENT

ROSSIMAH BINTI MOHAMED
Head

SYAH QURRATU'AINI BINTI SAHRANI @
SHAHRAN
M&E Officer

FINANCE

MOHAMMAD RIZAL BIN OTHMAN
Head

NOORAZILA BINTI AHMAD
Senior Finance Officer

NOR ZURI AZIELA BINTI JAMALUDDIN
Finance Assistant

HAMIZAH BITNI MD. RITHZA
Finance Assistant

MUHAMAD SAUFI BIN MUHAMAD SANI
Finance Officer

HUMAN RESOURCE & ADMINISTRATION SERVICES DEPARTMENT

SYED REZA HELMY AL ATTAS
Head

FAZRIN SUZAIN BIN SUPIAN
Senior Procurement Officer

AZARULNIZAM BIN MOHD ZAIN
Senior IT Officer

SITI ZALEHA BINTI ABDULLAH
Senior Admin & Training Officer

MOHD SO'AD BIN ABDUL SHUKOR
IT Officer

NUR BADLIZAN ZAHIRA BINTI JUHARI
HR Officer

SH. SHAFIQA BINTI SYED TOKO
KHAIRUDDIN
Admin Assistant

HASNIZAN BIN HASHIM
Dispatch Cum Office Support

SAYIDAH BINTI KAMIL
Office Assistant

COMMUNICATIONS & FUNDRAISING DEPARTMENT

CHAN LI JIN
Head

AZIZAH BINTI MOHD NASIR
Deputy Head, Fundraising & Event

MOHAMAD HERMAN BIN ABDULLAH
Web Master & Social Media Officer

NUR SHAHIRA BINTI MOHD NASIR
Communications & Fundraising Assistant

HUMANITARIAN DEVELOPMENT CENTRE

SHAH FIESAL BIN HUSSAIN
Head

MOHD HAZIMI BIN CHE ABDUL RANI
HDC Officer

VOLUNTEER MANAGEMENT DEPARTMENT

NUR HISYAM BIN AZIZ
STATE CHAPTER LIAISON OFFICER

NOOR AIN ZAIRA BINTI HASNAN
VOLUNTEER MANAGEMENT OFFICER

STATE CHAPTER

EDNA BINTI SALUMBI
Programme Officer (Sabah Chapter)

IVY LINUS GIBUN
Programme Assistant (Sabah Chapter)

ROSITA ANAK PETER
Programme Officer (Sarawak Chapter)

PROGRAMME DEVELOPMENT & OPERATION

MOHAMMAD SAID ALHUDZARI BIN IBRAHIM
Head

NADA ABDULWASEA MOQBEL AL AGHBARI
Senior Programme Admin Service Officer

MUHAMMAD ABDULLAH BIN ABD WAHAB ISHARI
Senior Programme Officer Meena

YAO RACHEL
Programme Officer

NORMALIZA BINTI MOHD NASIR
Programme Officer

NUSRAT BINTI HASSAN
Programme Officer

KHAIRUR RIJAL BIN JAMALUDDIN
Programme Admin Service Assistant

BUILDING RESILIENT COMMUNITIES (BRC)

MOHD HAFIZ BIN MOHD AMIRROL
Head Of Project – Building Resilient Communities (BRC)

SITI ZURIDAH BINTI MOHD RAIS
Senior Programme Officer

WAN ANIS AFEEQA BINTI WAN MOHAMAD AZHAR
Programme Officer DRR

MUHAMMAD AIZAT BIN MOHAMMAD NAZLI
Programme Officer DRR

SHAHIRIL BIN IDRIS
Programme Assistant

SECRETARIAT AS OF DECEMBER 2017

HEALTH UNIT

MASNIZA BINTI MUSTAFFA
Health Coordinator

SUHANA BINTI SHAHRUM
Health Program Officer

ZUBAIDAH BINTI BUJANG
Health Program Officer

LOGISTICS, SAFETY & SECURITY DEPARTMENT

CHAN VISAN
Deputy Head

MOHD RADZI BIN MOHD REDZUAN
Senior Logistics Officer

MOHD JEFREY BIN ABDUL RAHMAN
Logistics Officer

THE ASIAN DISASTER REDUCTION AND RESPONSE NETWORK (ADRRN)

AISHAH SABRINA ABDUL JALAL
Administrator Adrrn Secretariat

FIELD OFFICE

Philippines

ARACELI VIQUIERA
Country Manager

ERMELIO T. PALAJOREN
Driver Cum Office Assistant

MA. FELQUITA A. TAGALOG
Programme Officer

Myanmar

MS. YADANA MAY HTAY MYINT
HR and Admin Officer

MS. ZIN KAY KHAING AUNG
Finance Officer (Yangon Office)

MR. MIN MIN HTET
Driver Cum Office Assistant

MS. SANDAR YE TUN
Cleaner (Yangon Office)

DR. SAI HEIN AUNG
Medical Coordinator

MR. SHALOM
*Program Operation and Community
Engagement Officer*

MS. THIDAR WIN
Finance officer (Sittwe Office)

DR. RE' LIN HTUN
Medical Officer

DR. PYAE PHYU WAI
Medical Officer

DR. NI NI HNIN
Medical Officer

DR. TIN MYO AUNG
Medical Officer

DR. AUNG HLAING WIN
Medical Officer

DR. WIN SOE
Medical Officer

DR. WIN MIN SOE
Medical Officer

MS. PYAE PHYU MAY
Nurse

MS. NAW SU MYAT NAING
Nurse

MS. THEINGI MAW
Nurse

MS. BABY SOE
Health Assistant

MS. WAR WAR MOE
Health Assistant

MR. KO KO PAING
Health Assistant

MR. PHYU NAUNG OO
Health Assistant

MS. MYO MYO KYI
Nurse

MS. HLA SAW KHINE
Health Promoter

MR. AUNG AUNG
Program Assistant

MR. MIN MIN TUN
Logistic Assistant

MS. PHYU PHYU THWE
Finance Assistant

MS. THAN HTAY
Admin/HR Assistant

MS. YEE YEE THAN
Cleaner (Sittwe Office)

Kelantan

MAZNAH BINTI MOHD ADENAN
Program Support And Finance Administrator

COLLABORATIONS

In our experience, no contribution is too small and no measure of kindness is insignificant. MERCY Malaysia recognizes the value of working with partners. As an international non-profit organization, we rely solely on funding and donations from organizations and generous individuals to continue our services to provide humanitarian assistance to our beneficiaries. We would like to thank our supporters for their tireless contributions and collaborations in our humanitarian work.

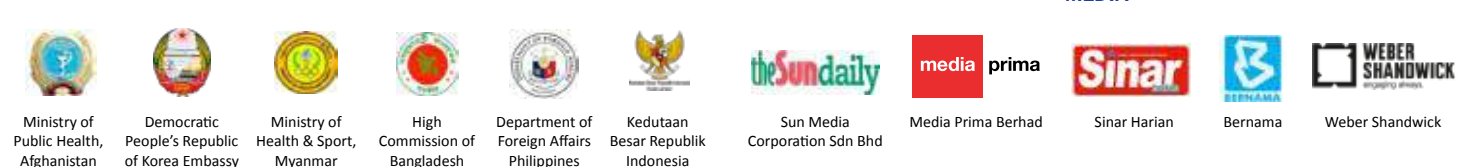
CORPORATE



GOVERNMENT AGENCIES, ACADEMIC & NETWORKING INSTITUTIONS



EMBASSIES/COUNTRIES



MEDIA

ORGANISATIONS



SOCIETY MEMBERS

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

In compliance with the Societies Act, we are required to prepare financial statements to be made public and tabled at our Annual General Meeting (AGM). All members are invited and attend to examine the financial statement, vote on matters arising and to vote for or, stand as a candidate for the Executive Council.

We are grateful for your membership and participation in our governance ensures continued transparency and accountability in our humanitarian work. Thank you.

LIFE MEMBERS

Abd Aziz, Dr.
 Abd Rani Osman, Dr. Hj.
 Abdul Ghani Mohamed Rais, Dato'
 Abdul Latiff Mohamed, Dr.
 Abdul Malik Bin Abdul Gaffor, Dr.
 Abdul Muin Ishak, Dr.
 Abdul Rahim Abdul Majid
 Abdul Rashid Mahmud, Major R
 Abdul Razak K.V. Koya Kutty, Dr.
 Abdul Wahab Bin Tan Sri Khalid Osman, Dr.
 Abu Aswad Alhaji Joned
 Afidalina Tumian
 Ahmad Faezal Mohamed
 Ahmad Faizal Mohd Perdaus, Dato' Dr.
 Ahmad Ismail
 Ahmad Zaidi Ahmad Samsudin
 Aishah Ali, Prof Madya Dr Datin
 Aishah Binti N. Abu Bakar
 Aiza Aryati Kasim
 Al-Amin Mohamad Daud, Dr.
 Alex Lai
 Aminudin Rahman Mohd. Mydin, Dr.
 Amir Adham Bin Ahmad, Dr.
 Amran Mahzan, Ir
 Anas Hafiz Mustaffa
 Anbarasu Ramalingam, Dr.
 Anita @Ani Binti Abdul Malek
 Anuar Abdul Hamid, Major (R) Hj.
 Ashar Abdullah, Dato' Dr.
 Ayu Akida Binti Abdul Rashid
 Azah Harun
 Azizah Arshad, Dr.
 Azlin Hashima Mt. Husin
 Azman B. Zainonabidin
 Azmil Hj. Mohd. Daud, Hj.
 Azry Mohd Ali
 Azura Bt Ibrahim
 Badorul Hisham Bin Abu Bakar
 Balakrishnan A/L Amathelingam
 Balvinder Kaur Kler
 Basmullah Yusof, Dr.
 Benjamin Chai Phin Ngit

Bilkis Abd Aziz, Dr.
 Bybiana Anak Michael
 Carol Lim Kar Koong, Dr
 Chai Chin Pee
 Che Tah Hanafi
 Cheong Yee Tsing, Dr.
 Damina Khaira
 Dilshaad Ali Hj. Abas Ali, Dr.
 Dr. Soh Yih Harn
 Dzulkarnaen Bin Ismail, PhD
 Edward Hew Cheong Yew
 Ehfa Bujang Safawi, Dr.
 Fairrul B Kadir, Dr
 Fairuz Ashikin
 Fairuz Ashikin Dr.
 Fara Suzeera Abdul Rashid
 Farah Abdullah @ Farah Hamzah
 Faridah Abu Bakar, Dr.
 Faridah Akmar Ibrahim
 Faridah Osman
 Fatimah Mahmood
 Fauziah Hj. Mohd. Hassan, Dr
 Fauziah Md Desa
 Fawzia Hanoum Ariff
 Fuziah Md Zain
 Ghazali Abdul Wahab, Dr.
 Gunalan A/L Palari @Arumugam, Dr
 Gunasegaran Doraisamy
 Habibah @ Norehan Haron
 Hamizah Ismail, Dr.
 Hanita Ramuy
 Hariyati Shahrina Bt Abdul Majid, Dr.
 Harlina Mohamed Lani
 Harmandar Singh
 Hasman Ibrahim ,Ir
 Hasnah Hanapi @ Hanafi, Datin
 Hasri Samion, Dr.
 Helen Benedict Lasimbang, Assoc. Prof. Dr.
 Heng Aik Cheng, Datuk, Dr.
 Ho Tze Hock
 Humairah Samad Cheung, Prof. Dr.
 Ibrahim Umbichi Moideen
 Inderjeet Kaur, Rani
 Jamilah Shaikh Mohd Jain

Jemilah Mahmood, Tan Sri Dr.
 Jitendra Kumar A/L S.N Tejani, Dr
 Justina Eddy
 K. Sockalingam
 Kamariah Mohamad Kontol
 Kamarul Azahar Mohd Razali
 Kamaruzaman Abdullah
 Kamat Norit
 Khairul Anuar Jaafar
 Khairul Azman Md Khalid, Dr.
 Krishna Kumaran A/L A. Ramasamy, Dr.
 Kursiah M. Razali
 Lai Fui Boon
 Lau Seth Kiong
 Liaw Yun Haw, Dr.
 Liew Kiew Lian
 Lili Suriani Hj Mi'an
 Lily Kartina Karim
 Lim Eng Pitt
 Loh Sit Fong
 Lok Shui Fen @ Adrian Lok
 Mafeitzeral Mamat, Dr.
 Mahani Idris Daim, Ybhg Toh Puan
 Mahdzir Md. Isa
 Margaret Chin Pau Jin
 Mariah Zainatul Maknun A. Zahidin
 Martin Anak Jandom
 Megawati Bt. Md Rashidi
 Mimi Iznita Mohamed Iqbal
 Mohamed Ashraff B. Mohd Ariff, Dr
 Mohammad Ayof Bin Bajuri
 Mohamed Ismail Ali, Dr.
 Mohamed Hanafi Ramli
 Mohamed Hatta Shaharom, Prof. Dr.
 Mohamed Hawari Hashim
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 Mohamed Noor Suleiman
 Mohd Hamzah Kamarulzaman, Dato Dr.
 Mohd Khalit Bin Othman
 Mohd Nazrine Arias
 Mohd Rafee Md. Aris
 Mohd Rohisham Zainal, Dr.
 Mohd Shah Awaluddin
 Mohd Shaharuddin Asmani

Society Members

Mohd. Ali Md.
 Mohd. Azman Sulaiman
 Mohd. Nazli Mohd Zahid @ Kamarul Zaman, Dr.
 Mohd. Suhaimi @ Sam Sulong, Major
 Mohtar Ibrahim, Dr.
 Moira Akmar Kamat
 Muhammad Azrin B Mohd Asihin
 Muhammad Hapis Bin Jamil
 Muhammed Faisal Abdul Wahab
 Musa Bin Mohd Noor
 Musa Mohd. Nordin
 Namof Jamelah Mohd Ibrahim
 Nasaruddin Abdul Aziz, Dr.
 Nasuha Yaacob, Dr
 Noor Filzah Bt. Zubir
 Noor Hayatti Ismail
 Noor Janah Abdullah
 Noor Siah Idris, Dr.
 Nooraini Mohamed Ismail, Dr.
 Nor Halimahtun Hassan Maasom
 Nor Hazla Mohamed Hafiah, Dr.
 Nor Idawaty Ibrahim, Dr.
 Nor Khairiah Md. Kenali, Dr.
 Nora Azizi Uzir
 Noraini Md. Desa
 Norazam Ab Samah, Hj
 Norfaiezah Arshad
 Norhairani Abdul Wahab
 Norherah Syed Omar, Datin Dr.
 Norizan Rajak
 Norli Binti Othman
 Norly Ismail, Dr.
 Norzila Mohamed Zainudin, Dr
 Nur Farinda Ibrahim
 Nurahan Maning, Dr.
 Ong Cheong Beng
 P. Shanmuhasuntharam, Assoc. Prof. Dr.
 Peter Gan Kim Soon, Dr
 Prof. Dr. Muhammad Tauffik
 Prof. Madya Datuk Dr. Haruna Rashid
 Puteri Rohayu Megat M Yusof
 Puziah Md. Zain
 Raja Abdul Aziz Raja Musa
 Raja Riza Shazmin Raja Badrul Shah, Datin, Y.M.
 Rakiah Ahmad
 Rasheedah Abu Bakar
 Razali Bin Kamisan
 Razali Idris, Ir.
 Razi Pahlavi Abdul Aziz
 Risnawati Yassin
 Roslan Harun
 Rosleena Anin Rozalee @Zahari, Dr.
 Rosnah Abdul Aziz
 Rowani Mohd Rawi, Dr.
 Rugayah Mohamed, Prof. Dr.
 Safarina Joblee, Dr

Saiah Abdullah, Dr.
 Saifuzzaman Yusoff
 Salina Umar
 Sarah Haniza Abdul Ghani, Dr.
 Sarudin Bin Rohseli
 Segaran, Dr.
 Sejahtatul Dursina @ Chomel Mohamad
 Shaharudin Saamin, Dr. Phd.
 Shahrudin Mohd Fathil, Dr
 Shahrir Hashim
 Shaik Taufik Shaik Yusoff
 Shalimar Abdullah, Prof, Dr
 Shareen Shariza Dato Abdul Ghani
 Sharida Suhaila Abdul Shukor
 Sharifah Norashikin Binti Syed Ahmad Kamal
 Sharifah Sakinah Syed Hassan
 Sharima Ruwaida Abbas
 Sharizad Hj. Shamsuddin
 Sharlina Bt. Adnan
 Siti Noraishah Sheikh Salim
 Siti Sarah Md. Zhahir
 Siti Zainab Ibrahim
 Sri Kumar, Datuk Dr.
 Suhaireen Suhaiza Abdul Ghani
 Susan Binti Abdullah @ Susan Shamin, Datin
 Suzain Datuk Hj. Suhaimi, Dr. Hjh.
 Syed Abdul Haris B. Syed Mustapa
 Syed Hashim Tuan Long
 Syed Mohd. Adeeb Syed Jalil Jalaludin
 Tajul Edrus Nordin
 Tan Choi Wah
 Tan Hooi Chien, Dr.
 Tan Sim Hwee
 Tee Kam Bee
 Tunku Azela Tunku Aziz
 Tunku Sara Tunku Ahmad Yahaya
 Usmirah Ahmad
 Wan Adleen Shahril Wan Hanafi
 Wan Badrul Shah Wan Husain
 Wan Fadhilah Wan Ismail, Dr.
 Wan Hazmy Che Hon
 Wan Mohd Hafidz B Wan Hisham, Dr
 Wan Nik Wan Ismail, Dato'
 Wan Nurdiana Zaireen Wan Zainal Abidin
 Wan Raimah Wan Abdul Kadir
 Yang Wai Wai
 Yazid Bin Zahid
 Ye Htut @ Mohammad Iqbal Omar, Dr.
 Yusof Hassim
 Zabidi Azhar Mohd Hussin, Prof
 Zainab Kassim
 Zainal Mohamed
 Zakinah Zainuddin
 Zaleha Abdullah Mahdy, Prof. Dr.
 Zamaliah Md Juah
 Zamzam Zainuddin

Zariah Mohd Zain, Dr.
 Zubidhah Bt. Ab. Hamid
 Zullaili Zainal Abidin (Pak Jol)
 Zuraidah Mian
 Zurina Ismail

ORDINARY MEMBERS

Baba Md. Deni, Datuk, Dr.
 Mohd Nazlee Bin Sabran, Dr
 Mohamad Don Cheang
 Muhammad Taufik, Prof. Dr.
 Rosdi Mohammad
 Shanti A/P Palanisamy
 Timothy Cheng Tsin Jien, Dr
 Viveganathan Rajangam
 Wan Muliyadi Bin Wan Sulaiman
 Wan Nurdyana Wan Mahyuddin
 Zainudin Hj. Ahmad

VOLUNTEERS

DOMESTIC

Abdul Mohsin Aminuddin
 Aaron Solibun
 Adam Omer Musa Yousif
 Addi Mokhtar, Dr.
 Adila Nalisa Mohd Roslan
 Agnes Khaw Swee Sim
 Ahmad Fikril Khairi
 Ahmad Nadzrin Azli
 Ahmad Tarmizi Dollah Ahmed
 Ahmad Zahiri Zakaria
 Aida Nabila Abdul Rahman
 Aina Amalia Jamilel Nasir, Dr.
 Ainaa Maya Munira Ismail
 Aini Ayu Suriyadi, Dr.
 Aini Fahriza Ibrahim, Dr.
 Ainun Rainin
 Alexander ak Abas
 Alif Abdul Latif, Dr.
 Alina Kemat @ Rahman
 Amalia Mahamud
 Anatasia Masri
 Anatasia Masri
 Anbarasu Ramalingam, Dr.
 Ang Lay Wen
 Anna Rohlianty Gesoun, Dr.
 Anna Salwa Binti Puat Nelson, Dr.
 Arief Fikry Hassan Ashari
 Ashraf Saharudin
 Asma Usa'diyah Abu Bakar Sayuti
 Athira Mazli
 Athirah Syafawati
 Ayu Akida Abd Rashid, Dr.
 Aziliana Ying @ Kaying
 Azira 'Ain Ahmad Zahudi
 Azizan Sharif, Dr.
 Azmin Ramlie
 Aznam Abdullah
 Azwady Mustapha
 Badrul Hisham Hussein
 Berjamin Carlos Chai
 Bilkis Abd Aziz, Dr.
 Bybiana Michael
 Catherine Kinyang
 Chai Yaw Hong
 Cheong Ri Ying
 Chew Jia Xin
 Chin Chee Wei, Dr.
 Danny Peron
 Darrel Wan Dahim
 Daud Ishak
 Dewi Kencana Putri Md Noor
 Diana Mahbob
 Divaghar A/L Voothayakumar
 Edna Stephanos

Elaine Choong Kar Man
 Emy Shahida Zulkifli
 Erinie Ayim
 Fahmi Hassan
 Faizal Ezham Mohammad
 Fanny Jun
 Fara Dianti Ruslan
 Farah Jainal Arifin
 Farah Syamila Mohamad Nor
 Farhana Nor Azmi
 Fatheen Nadia Yusoff Shah
 Fatimah Zahrah Fakhrul Razi, Dr.
 Fatimah Zahrah Mohd Badry
 Fatin Fariha Wan Ahmad Nasir, Dr.
 Fatin Mahmood
 Fatin Najihah Ahmad Jefiruddin, Dr.
 Fatin Nur Syifaa Radzuan
 Fatin Salina Zainal Abidin
 Filzah Izzyani Azmi
 Fion Liew Suet Li
 Flora Fedilis
 Foo Wei Li, Dr.
 Frances Fam Cheau Shin
 Francis Aniu
 Ganesah Rao A/L G.D.P Nages Wara Rao
 Georgina Akiah
 Goh Qun Yuan, Dr.
 Gunasegaran Doraisamy
 Hafiz Ali Abdul Manap
 Hailin@Helen Juakim
 Hanim Hafizzah Ahmad
 Henrizal Rabai
 Hidayah Ibrahim
 Hidayati Mohd Salleh
 Hilmi Abdullah
 Huzaimatus Saadiah Zulkefli
 Ikmal Azizi Zulkefli
 Intan Sabrina Mohamad
 Isabel Fong Lim
 Iswati Mohd Yaakob
 Ivy Michael, Dr.
 Izuan Shukri Mohamed Arif
 Izzat Zaid
 Jarau Braim
 Jasni Ramlee Jusof
 Jefery Drus
 Jerol Asmat
 Jidah Padang
 Johan Iskandar Mohd Nasir
 Johnny Uvang Ajeng
 Juan Basil Ahmad, Dr.
 Juneasmadi Mohd Ali Osman
 Kang Ying Ying
 Kavitha Sathasivan
 Khadijah Ahmad Sabri
 Khairin May Catherine

Khairul Faizal
 Khairul Helmy Mohamad
 Khairunnisa Khairiah Hairudin
 Khairunnisadzirah Shan
 Koh Ee Yin, Dr.
 Koh Kang Swee
 Koh Wei Lun
 Kumeraintharen Murugiah
 Lah Lihan
 Lee Chun Haw
 Lee Hong Nien, Dr.
 Lee Meng Yit, Dr.
 Lee-Sing (Kenny) Ong
 Ler Xin Yi
 Liaw Siew Ching, Dr.
 Lim Jia Jia
 Liyana Roslan
 Lok Shui Fen @ Adrian
 Low Tze Ken
 Lynette Mary Macdonald
 Lynn Ko Wei Linn, Dr.
 Lynne Yong Ee Lin
 Mak Hou
 Malek Fuad Hj Mohd Amin
 Margaret Young Siew Ching
 Marliana Muhaideen
 Martin Jandom
 Mary Abas
 Mashitah Ishak
 Maziah Aziz
 Md. Juhairi Jab
 Merikan Aren
 Mohamad Faez Mohd Noor
 Mohamad Faizal Roslee, Dr.
 Mohamad Fitri Jalil
 Mohamad Hanafi Ramli, Ir.
 Mohamed Noor Suleiman
 Mohammad Esa Hossen
 Mohammed Abdulkaliq Al-Mahfadi
 Mohd Affiq Mohd Othman
 Mohd Aszahari Hassim
 Mohd Faiq Abdul Fattah
 Mohd Ferdaus Isa, Dr.
 Mohd Hasrul Hafis Radali @ Dali
 Mohd Khairuladzuan Abd Khalip
 Mohd Mokrish Md Ajat
 Mohd Radzi Jamaludin
 Mohd Rosli Mohd Ariffin
 Mohd Syukri Hashim, Dr.
 Mohd Zhafran Zainol, Dr.
 Monica Bungan
 Muhaini Rafi'i
 Muhamad Luqman Mohd Nazir
 Muhammad Azra Azmy
 Muhammad Azrin Mohd Asihin, Dr.
 Muhammad Hapis Jamil

Volunteers

Muhammad Hj Zainal Abidin
 Muhammad Khairul Anuar Ismail
 Muhammad Lutfi Abdul Rashid, Dr.
 Muhammad Suhaimi Che Ab Malik
 Muhammad Syafiq Dzuraheen
 Muhammad Syahmi Khairuzzaman
 Muhammad Syahrir Anuar
 Muhammad Zaquan Roszalli
 Muhammad Zikri Abd Zaki
 Nabilah Zaid
 Nadiyah Ibrahim
 Nadiyah Mohd Lotfy, Dr.
 Nafisah Idris, Dr.
 Najma Abdi Abdulahi
 Nandini A/P Ramasenderan, Dr.
 Nawan Deng
 Nazia Afroz Mirza Arshad
 Nazirah Nor Azlan
 Nereus Musu
 Ngiam Ai Leng Alicia
 Nik Tik Hajar Aisyah Ismail Murtadza, Dr.
 Noor Hafzalinda Hamzah
 Noor Hazwani Abd Wahab, Dr.
 Noor Khairun Nisa Noor Harun
 Noor Shuhada Yusoff
 Noor Zatul'iffah Ibrahim
 Nor Aishah Hairul Anuar
 Nor Asiah Hashim, Dr.
 Nor Azimah Bahaudeen
 Nor Azlina Masri
 Nor Azman Haini
 Nor Hazwani Zenol Ariffin, Dr.
 Nor Khalilah Hassan
 Noraini Arshad
 Norashikin Mohamed Noor
 Norazie Sakimin @ Sunizah
 Norazman Haini
 Norhayati Paraman
 Norhidayah Nadila Maulad Daud
 Norsiaty Habuan Hanifah
 Norsolehah Saibine
 Nur Afiqah Hairul Anwar
 Nur Aini Sharkhan
 Nur Amaliya Ahmad Sayuthi
 Nur Amirah Afiqah Azizah
 Nur Amirah Awis
 Nur Balqis Noramlan
 Nur Farhana Bt Abdul Hadi, Dr.
 Nur Fashshalna Abdul Rahman
 Nur Hafizah Mansor, Dr.
 Nur Karimatul Husna Dirwana
 Nur Liyana Hasni
 Nur Suhainim Ramli
 Nur Syafinaz Adenan
 Nur Syazana Aisyah Azlan
 Nur Zatul'isma Zainal

Nurazirah Safarina Karim
 Nurfataniah Adlan
 Nurhazirah Mohd Aslam
 Nurisyryn Ismaili
 Nurizani Aziz
 Nurul Ain Haris
 Nurul Asyiqin Aziz, Dr.
 Nurul Atikah Azmi
 Nurul Atiqah Zamri
 Nurul Balqis Mohamad Adib
 Nurul Hidayah Mohd Azmi
 Nurul Hidayah Wahab
 Nurul Liana Roslan, Dr.
 Nurul Nuzura Fasihah
 Nurulain Sulaiman
 Nuvair Mikhail Iman Novandri
 Ong Cheong Beng (Jerry)
 Parasul Basang
 Patinin @ Sadtin Gamil
 Patt Pei Yee
 Paul Cliff Simon Divis
 Peter Gan Kim Soon, Dr.
 Raid Azrul Roslan
 Raihana Ramle
 Ramli Hashim
 Ranulph Harold
 Razali Idris, Ir.
 Razali Kamisan, Ir.
 Rekaya Vincent Balang
 Richard Clement Makulim
 Rosalia Michael
 Rosalind Jotin, Dr.
 Rosita Peter
 Ruhil Athirah Alias
 Saidatul Huda Hamzah
 Saloma Pawi
 Sarina Hashim
 Saripah Sekina
 Shahrizal Mohd Isa
 Shalimar Abdullah, Prof. Dr.
 Shanthi A/P Palanisamy
 Sharifah Muznah Syed Abdul Rahman
 Sharima Ruwaida Abbas
 Siti Aishah Abdullah, Dr.
 Siti Aisyah Mohamad Ghazalan
 Siti Faradila Hashim
 Siti Khadijah Yusof Azuddin, Dr.
 Siti Najiha Md Asari, Dr.
 Siti Nurain Ibrahim
 Siti Nurfaizah Rusman
 Siti Nurulain Mohd Rum, Dr.
 Siti Royany Ariff
 Sockalingam S/O Thanimalay
 Sofiah Amirah Mohamad Azlan
 Soh Xiao Thong (Sandra)
 Soh Yih Harng, Dr.

Suhaina Yaakub
 Sulaeman Tawe
 Sum Xuan Ye
 Suraiya Ibrahim
 Suzalinna Sulaiman, Dr.
 Syadzaratunnur Abd Aziz
 Syafira Ahmad Saufi
 Syaheema Hamidon
 Syahrul Zamri Sarkawi
 Syarifah Nur Hanisah Tuan Simbak
 Syazwani Isa
 Syed Saifudin Syed Hamdan
 Syed Syafiq Said Ismail
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 Tan Jenn Yi, Dr.
 Tan Siao Han
 Tengku Putri Zaharah Tengku Bahanuddin, Dr.
 Theresa Chan Siew Yoong
 Thum Chern Choong, Dr.
 Timothy Cheng Tsin Jien, Dr.
 Toh Pooi Yarn
 Umi Afifah Mohd Hashim
 Ummil Mahanum Aminudin
 Venessa Venda Viales
 Vivegananthan S/O Rajangam
 Wan Ahmad Fadhli Wan Mohamad
 Wan Mohd Hafidz Wan Hisham, Dr.
 Wan Nada Marhamah Wan Razak
 Wasinin Duari
 Wong Lee Kiong (David)
 Wong Yen Jun
 Yusof Hassim, Sr.
 Zackry Zulkarnain Zahedi
 Zafirah Hani Mohamad
 Zaleha Ahmad
 Zeno Michael
 Zia-U-Bahkt Sultan Shah, Dr.
 Zullaili Zainal Abidin
 Zuriani Basri

VOLUNTEERS

INTERNATIONAL

Abdul Hafiz Mohamad Gani, Dr.
 Addi Mokhtar, Dr.
 Ahmad Faizal Mohd Perdaus, Dato' Dr.
 Ahmad Sheehan Shuib, Dr.
 Aini Fahriza Ibrahim, Dr.
 Ana Vetriana Abd Wahab, Dr.
 Anita Abdul Malek
 Asliza Ayub, Dr.
 Aung Lwin Oo, Dr.
 Bilkis Banu Shri Abd Aziz, Dr.
 Brijindra Singh Sham Singh
 Che Mahmud Mohd Nordin
 Chen Tai Ho, Dr.
 Doris Ng Sin Wen, Dr.
 Emy Shahida Zulkifli
 Erni Zurina Romli, Dr.
 Hariyati Shahrina Abdul Majid, Dr.
 Hazfadzila Mohd Unit, Dr.
 Heng Siang Ting, Dr.
 Ho Loon Shin, Dr.
 Hoe Ai Sim, Dr.
 Iza Emilia Ibrahim, Dr.
 Jameyah Sheriff
 Jasmine Avalani Chandrakant, Dr.
 Jefri Irwan Harris Gunawan, Dr.
 Juan Basil Ahmad, Dr.
 K A Jahabar Sadiq K A Abdul Kader
 Khairunnajwa Khairuddin, Dr.
 Lai Hou Yee, Dr.
 Lalitha Malar A/P Maniam, Dr.
 Lee Pei Chuen, Dr.
 Lew Chee Kong, Dr.
 Lim Jean-Li, Dr.
 Look Mei Ling, Dr.
 Lucy Chan, Prof.
 Margaret Leow Poh Gaik, Dr.
 Mohamed Ashraff Mohd Ariff, Dr.
 Mohammad Iqbal Omar, Dr.
 Mohd Mokrish Md Ajat
 Muhaireen Arshad, Dr.
 Muhammad Amin A Razak
 Muhammad Azrin Mohd Asihin, Dr.
 Muhammad Firdaus Bin Abu Bakar
 Muhammad Hapis Jamil
 Munirah Omar, Dr.
 Myelone Tharmaseelan, Dr.
 Nabilah Che Arbaei, Dr.
 Nadirah Babji, Dr.
 Nasuha Yaacob, Dr.
 Natasha Razali, Dr.
 Ng Kwee Peng, Dr.
 Ni Ni Win, Dr.
 Nik Zuraida Nik Mustafa
 Noor Shuhada Yusoff

Noor Syafiq Aizat Ishak, Dr.
 Norazura Abdul Latif
 Norherah Syed Omar, Dr.
 Norherah Syed Omar, Dr.
 Norzila Mohamed Zainudin, Dr.
 Nur Liyana Johar, Dr.
 Nurul Aini Ishak
 Peter Gan Kim Soon, Dr.
 Peter Gan Kim Soon, Dr.
 Sara Azreen Azizul Rahman, Dr.
 Sharima Ruwaida Abbas
 Siti Aishah Tajudin, Dr.
 Siti Asiah Ahmad Sabri, Dr.
 Siti Maisarah Ahmad, Dr.
 Siti Mazlipah Ismail, Dr.
 Siti Nordiana Ayub, Dr.
 Siti Suhaida Binti Sudin, Dr.
 Sockalingam S/O Thanimalay
 Soh Yih Harng, Dr.
 Syed Azwan Syed Ali
 Syed Jefrizal Syed Jamal, Dr.
 Tan Su Chen
 Tengku Putri Zaharah Tengku Bahanuddin, Dr.
 Timothy Shaman Achariam
 Tye Sue Kiat
 Vilasani Subramaniam, Dr.
 Vivegananthan S/O Rajangam
 Wan Ahmad Fadhli Muhammad Syauqi
 Yeoh Chen Wye, Dr.
 Zackry Zulkarnain Zahedi
 Zakia Mat Ripen, Dr.
 Zan Azlee Zainal Abidin
 Zullaili Zainal Abidin

FINANCIAL STATEMENTS

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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	Datuk Dr. Heng Aik Cheng
VICE PRESIDENT II	YM Raja Riza Shazmin Raja Badrul Shah
VICE PRESIDENT III	Prof. Madya Dr. Shalimar binti Abdullah
HONORARY SECRETARY	Razi Pahlavi bin Abdul Aziz
ASSISTANT HONORARY SECRETARY	Ahmad Faezal bin Mohamed
HONORARY TREASURER	Ar. Mohamad Ayof bin Bajuri
COMMITTEE MEMBERS	Prof. Harmandar Singh A/L Naranjan Singh Prof. Madya Dr. Ye Htut @ Mohammad Iqbal Omar Dr. Norzila Mohamed Zainuddin Ir. Mohamad Hanafi bin Ramli
CO-OPTED MEMBERS	Prof. Madya Datuk Dr. Hanafiah Haruna Rashid Dr. Hariyati Shahrina Abdul Majid Dr. Nasuha Yaacob Dr. Roslan Harun Dr. Peter Gan Kim Soon Hj. Norazam Ab Samah
AUDITORS	Azuddin & Co. (AF 1452) Chartered Accountants
PRINCIPAL PLACE OF OPERATION	Unit 19-8, 19th Floor Menara Oval Damansara No. 685, Jalan Damansara 60000 Damansara, 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

Opinion

We have audited the financial statements of MERCY Malaysia ("the Society"), which comprise the statement of financial position as at 31 December 2017, and the statement of profit or loss and other comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, as set out on the following pages.

In our opinion, the accompanying financial statements give a true and fair view of the financial position of the Society as at 31 December 2017, and of its financial performance and its cash flows for the year then ended in accordance with Malaysian Financial Reporting Standards, International Financial Reporting Standards and the requirements of the Societies Act, 1966 in Malaysia.

Basis for opinion

We conducted our audit in accordance with approved standards on auditing in Malaysia and International Standards on Auditing. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Independence and Other Ethical Responsibilities

We are independent of the Society in accordance with the By-Laws (on Professional Ethics, Conduct and Practice) of the Malaysian Institute of Accountants ("By-Laws") and the International Ethics Standards Board for Accountants' Code of Ethics for Professional Accountants ("IESBA Code"), and we have fulfilled our other ethical responsibilities in accordance with the By-Laws and the IESBA Code.

Information Other than the Financial Statements and Auditors' Report Thereon

The Executive Committee of the Society are responsible for the other information. The other information comprises the information included in the annual report but does not include the financial statements of the Society and our auditors' report thereon.

Our opinion on the financial statements of the Society does not cover the other information and we do not express any form of assurance conclusion thereon.

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 (continued)

Information Other than the Financial Statements and Auditors' Report Thereon (continued)

In connection with our audit of the financial statements of the Society, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements of the Society or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibilities of the Executive Council for the Financial Statements

The Executive Committee of the Society are responsible for the preparation of financial statements of the Society that give a true and fair view in accordance with Malaysian Financial Reporting Standards, International Financial Reporting Standards and the requirements of the Societies Act, 1966 in Malaysia. The executive committee are also responsible for such internal control as the executive committee determine is necessary to enable the preparation of financial statements of the Society that are free from material misstatement, whether due to fraud or

In preparing the financial statements of the Society, the Executive Committee are responsible for assessing the Society's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the executive committee either intend to liquidate the Society or to cease operations, or have no realistic alternative but to do so.

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements of the Society as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with approved standards on auditing in Malaysia and International Standards on Auditing will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these 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)

Report on the Financial Statements (continued)

Auditors' Responsibilities for the Audit of the Financial Statements (continued)

As part of an audit in accordance with approved standards on auditing in Malaysia and International Standards on Auditing, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements of the Society, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit 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's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Executive Committee.
- Conclude on the appropriateness of the Executive Committee use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Society's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditors' report to the related disclosures in the financial statements of the Society or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditors' report. However, future events or conditions may cause the Society to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements of the Society, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the Executive Committee regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

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 (continued)

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.

AZUDDIN & CO.
AF 1452
Chartered Accountants

Date: 08 Jun 2018



AZUDDIN BIN DAUD
Partner
2290/07/18/(J)

EXECUTIVE COUNCIL REPORT

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

Executive Councils' report for the year ended 31 December 2017

The Executive Council have pleasure in submitting their report and the audited financial statements of the Society for the financial year ended 31 December 2017.

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	Datuk Dr. Heng Aik Cheng
Vice President II	YM Raja Riza Shazmin Raja Badrul Shah
Vice President III	Prof. Madya Dr. Shalimar binti Abdullah
Honorary Secretary	Razi Pahlavi bin Abdul Aziz
Assistant Honorary Secretary	Ahmad Faezal bin Mohamed
Honorary Treasurer	Ar. Mohamad Ayof bin Bajuri
Committee Members	Prof. Harmandar Singh A/L Naranjan Singh Prof. Madya Dr. Ye Htut @ Mohammad Iqbal Omar Dr. Norzila Mohamed Zainuddin Ir. Mohamad Hanafi bin Ramli
Co-Opted Members	Prof. Madya Datuk Dr. Hanafiah Haruna Rashid Dr. Hariyati Shahrima Abdul Majid Dr. Nasuha Yaacob Dr. Roslan Harun Dr. Peter Gan Kim Soon Hj. Norazam Ab Samah

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 in the financial statements 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 2017 have not been substantially affected by any item, transaction or event of a material and unusual nature nor has any such item, transaction or event occurred in the interval between the end of that financial year and the date of this report.


STATEMENT BY EXECUTIVE COUNCIL

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

Statement by Executive Council

We, The Vice President II 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 2017 and of its financial performance and cash flows of the Society for the year ended on that date.

On behalf of the Executive Council:



YM RAJA RIZA SHAZMIN RAJA BADRUL SHAH
Vice President II



RAZI PAHLAVI BIN ABDUL AZIZ
Honorary Secretary

Kuala Lumpur,

Date: 08 Jun 2018

Statutory declaration by Treasurer

I, AR. MOHAMAD AYOF BIN BAJURI, 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)
AR. MOHAMAD AYOF BIN BAJURI at Kuala Lumpur)
in the Federal Territory on 8 Jun 2018)



AR. MOHAMAD AYOF BIN BAJURI

BEFORE ME:



FINANCIAL STATEMENTS

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

Statement of profit or loss and other comprehensive income for the financial year ended 31 December 2017

	Note	2017 RM	2016 RM
INCOME			
Donations	4	13,297,259	10,357,615
Membership fee	5	3,800	6,480
Other income	6	113,181	453,017
		<u>13,414,240</u>	<u>10,817,112</u>
Less : EXPENSES			
Charitable expenditure	7	(15,033,628)	(17,009,965)
Operating expenses	8	<u>(2,163,404)</u>	<u>(3,052,896)</u>
		<u>(17,197,032)</u>	<u>(20,062,861)</u>
DEFICIT FOR THE FINANCIAL YEAR		<u><u>(3,782,792)</u></u>	<u><u>(9,245,749)</u></u>

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

Financial Statements

Statement of financial position as at 31 December 2017

	Note	2017 RM	2016 RM
ASSETS			
Non-current assets			
Property, plant and equipment	9	528,867	615,054
Current assets			
Inventories	10	161,308	182,540
Other receivables	11	1,063,360	1,115,271
Cash and cash equivalents		7,339,441	10,812,953
		<u>8,564,109</u>	<u>12,110,764</u>
Current liability			
Other payables and accruals		515,791	365,841
		<u>515,791</u>	<u>365,841</u>
Net current assets		<u>8,048,318</u>	<u>11,744,923</u>
NET ASSETS		<u>8,577,185</u>	<u>12,359,977</u>
Financed by:			
Charitable funds		8,577,185	12,359,977
MEMBERS FUND		<u>8,577,185</u>	<u>12,359,977</u>

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

FINANCIAL STATEMENTS

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

Statement of changes in charitable fund for the financial year ended 31 December 2017

	2017	2016
	RM	RM
Balance as at 1 January	12,359,977	21,605,726
Deficit for the year	(3,782,792)	(9,245,749)
Balance as at 31 December	8,577,185	12,359,977
Charitable funds are consist are :-		
Unrestricted fund	-	988,857
Restricted funds :-		
Bangladesh	2,710,688	7,816
Cambodia	75,629	179,916
India	-	12,758
Indonesia	-	155,534
Iraq	-	27,589
Japan	-	21,742
Malaysia	727,641	2,988,082
MMUK	-	22,133
Nepal	252,097	1,821,926
Palestine	4,139,097	5,044,940
Sierra Leone	-	16,953
Sudan	-	10,097
Special Project - ADDRN	-	54,268
Sri Lanka	-	19,461
Syria	672,033	987,905
	8,577,185	11,371,120
	8,577,185	12,359,977

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

Financial Statements

Cash flow statement for the financial year ended 31 December 2017

	Note	2017 RM	2016 RM
Cash flows from operating activities			
Deficit for the year		(3,782,792)	(9,245,749)
Adjustments for:			
Depreciation		153,453	215,587
Gain on disposal of property, plant and equipment		(412)	(1,019)
Loss on disposal of property, plant and equipment		55	37,974
Property, plant and equipment written off		-	537,959
Interest income		(51,488)	(279,250)
Deficit before working capital changes		(3,681,184)	(8,734,498)
Changes in working capital:			
Decrease / (increase) in inventories		21,232	(414,724)
Decrease in other receivables		51,911	230,877
Increase in other payables		149,950	159,946
Cash used in operating activities		(3,458,091)	(8,758,399)
Interest received		51,488	279,250
Net cash used in operating activities		(3,406,603)	(8,479,149)
Cash flow from investing activities			
Purchase of property, plant and equipment	12	(67,647)	(145,719)
Proceed from disposal of property, plant and equipment		738	15,623
Net cash used in investing activities		(66,909)	(130,096)
Net decrease in cash and cash equivalents		(3,473,512)	(8,609,245)
Cash and cash equivalents at beginning of the year		10,812,953	19,422,198
Cash and cash equivalents at end of the year	13	7,339,441	10,812,953

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

NOTES TO THE FINANCIAL STATEMENTS

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

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

Notes to the Financial Statements

Notes to the financial statements

1. Summary of significant accounting policies (continued)

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.

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%
Equipment	10%
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.

NOTES TO THE FINANCIAL STATEMENTS

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

Notes to the financial statements

1. Summary of significant accounting policies (continued)

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.

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.

Notes to the Financial Statements

1. Summary of significant accounting policies (continued)**1.5 Financial assets****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.

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1. Summary of significant accounting policies (continued)

1.6 Impairment of financial assets (continued)

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

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.

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.

Notes to the Financial Statements

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

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.

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1. Summary of significant accounting policies (continued)

1.10 Income recognition

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 31.12.2017	RM 31.12.2016
1 US Dollar	4.0465	4.4860
1 Brunei Dollar	4.8552	3.0996
1 Pakistan Rupee	5.4640	0.0430
1 Sri Lanka Rupee	0.0634	0.0302
1 Australian Dollar	3.1620	3.2304
1 Euro	3.0258	4.7204
1 Japanese Yen	4.1514	0.0384
1,000 Indonesian Rupiah	0.0359	0.3323
100 Philippine Peso	0.1239	0.0904
1 Singapore Dollar	0.0809	3.0996
1 Swiss Franc	0.0003	4.4006
1 Pound Sterling	0.0366	5.5322
100 Thai Bhat	0.1362	0.1253
1 Taiwan New Dollar	0.0264	0.1383
100 India Rupee	0.0489	0.0660
1 Bangladesh Taka	3.0258	0.0568

1.14 Employee Benefits**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.

NOTES TO THE FINANCIAL STATEMENTS

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1. Summary of significant accounting policies (continued)

1.14 Employee Benefits (continued)

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.

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.

Notes to the Financial Statements

2. Financial instrument (continued)**2.1 Financial risk management policies (continued)****2.1.2 Credit risk (continued)**

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:-

- 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.

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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.

Notes to the Financial Statements

4. Donations

	2017 RM	2016 RM
Unrestricted funds		
ADRRN	-	125,980
General donation	1,513,515	1,626,568
MY Mercy run	82,426	80,435
Yasmin Ahmad fund	24,235	30,037
	<u>1,620,176</u>	<u>1,863,020</u>
Restricted funds:-		
Afghanistan	247,113	28,744
Bosnia	110,000	-
Bangladesh	4,072,657	-
Cambodia	-	310,000
Philippines	151,285	253,076
Indonesia	3,721	1,048,687
Korea	250,000	100,000
Palestine	295,669	358,938
Malaysia relief fund	2,716,945	2,307,533
Myanmar	2,364,262	2,437,197
Nepal	7,906	112,673
Sudan	410	3,677
Somalia	14,632	3,020
Syria	1,264,086	1,531,050
Sri Lanka	77,397	-
Thailand	100,000	-
Yemen	1,000	-
	<u>11,677,083</u>	<u>8,494,595</u>
Total donation	<u>13,297,259</u>	<u>10,357,615</u>

5. Membership fee

	2017 RM	2016 RM
Entrance fee	500	300
Life membership	3,000	6,000
Ordinary membership	300	180
	<u>3,800</u>	<u>6,480</u>

NOTES TO THE FINANCIAL STATEMENTS

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6. Other income

	2017 RM	2016 RM
Interest received	51,488	279,250
Sale of merchandise	(873)	409
Others	62,566	173,358
	<u>113,181</u>	<u>453,017</u>

7. Charitable expenditure

	2017 RM	2016 RM
Afghanistan	721,084	680,075
Bangladesh	962,519	-
Bosnia	126,849	1,079,515
Cambodia	104,286	99,084
Indonesia	396,422	788,285
Korea	-	73,046
Malaysia	4,734,587	6,049,315
Myanmar	3,907,871	2,495,773
Nepal	289,630	115,630
North Korea	311,071	-
Palestine	1,171,945	2,270,741
Philippines	477,827	275,432
Sierra Leone	-	1,491,223
Somalia	-	35,957
Special project - ADRRN	298,009	349,131
Sri Lanka	47,553	6,479
Syria	1,464,015	1,058,370
Thailand	19,960	-
Yemen	-	141,909
Total charitable expenditure	<u>15,033,628</u>	<u>17,009,965</u>

Notes to the Financial Statements

8. Operating expenses

	2017 RM	2016 RM
Loss / (Gain) on foreign exchange	85,215	(268,480)
Accommodation	30,755	166,325
Advertisement and promotion	2,603	2,314
Air fare	83,846	360,129
Audit fee	16,000	16,000
Allowance	43,983	
Bad debts	42,686	
Bank charges	18,462	14,554
Depreciation	57,568	78,589
Entertainment	948	-
EPF (Note 15)	100,054	72,792
Food and beverages	39,536	39,217
Gain on disposal of property, plant and equipment	(412)	(1,019)
Gift and souvenir	6,072	9,649
Goods and service tax	11,694	18,540
Grant for MMUK	113,192	157,651
Hotel ballroom/Venue expense	12,344	67,475
Insurances	123,988	149,425
License of commercial rental		-
(Gain) / Loss on disposal of property, plant and equipment	-	24,087
Medical (Note 15)	11,518	18,763
Membership fee	16,858	15,981
Mission volunteer pack	11,915	20,398
Office rental	147,409	188,481
Other expenses administration	8,672	2,150
Photocopy machine rental	3,762	3,189
Postage and courier	1,578	7,661
Printing and stationeries	45,158	68,768
Professional fee	107,146	406,221
Publication expenses	9,997	13,178
Repair and maintenance - it equipment	48,111	68,169
Repair and maintenance - motor vehicle	680	13,562
Repair and maintenance - office	65,167	177,483
Repair and maintenance - office equipment	884	10,480
Roadtax and insurances		3,434
Salaries, allowances and wages (Note 15)	788,268	948,844
Small equipment	2,137	5,306
SOCSSO (Note 15)	9,384	6,939
Balance carried forward	2,067,178	2,886,255

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8. Operating expenses (continued)

	2017 RM	2016 RM
Balance brought forward	2,067,178	2,886,255
Staff uniform	1,785	1,024
Staff welfare	129	1,612
Telephone, fax and internet	51,548	70,043
Training	2,919	26,587
Travelling and transportation	15,155	33,691
Utilities	23,887	30,644
Visa	793	2,649
Work permit	10	391
	<u>2,163,404</u>	<u>3,052,896</u>

9. Property, plant and equipment

Cost	Balance at 1.1.2017 RM	Additions RM	Disposal RM	Written off/ transfer RM	Balance at 31.12.2017 RM
Air conditioner	11,725	-	-	(2,430)	9,295
Computer and EDP	987,076	4,302	-	(41,089)	950,289
ERU - Asset equipment	350,725	-	-	-	350,725
Equipment	8,000	-	-	-	8,000
Furniture and fittings	58,358	-	-	(21,062)	37,296
Medical equipment	72,853	-	-	-	72,853
Motor vehicle	639,710	56,944	-	(142,472)	554,182
Office equipment	113,204	6,401	(402)	(22,685)	96,518
Renovation	279,211	-	-	-	279,211
Security equipment	9,000	-	-	-	9,000
	<u>2,529,862</u>	<u>67,647</u>	<u>(402)</u>	<u>(229,738)</u>	<u>2,367,369</u>

Notes to the Financial Statements

9. Property, plant and equipment (continued)

	Balance at 1.1.2017	Depreciation charge	Disposal	Written off/ transfer	Balance at 31.12.2017
	RM	RM	RM	RM	RM
Accumulated depreciation					
Air conditioner	11,179	216	-	(2,429)	8,966
Computer and EDP	875,171	36,956	-	(41,073)	871,054
ERU - Asset equipment	38,879	41,182	-	-	80,061
Equipment	3,182	-	-	-	3,182
Furniture and fittings	58,301	-	-	(21,051)	37,250
Medical equipment	72,851	-	-	-	72,851
Motor vehicle	628,974	11,280	-	(142,468)	497,786
Office equipment	53,122	10,156	(77)	(22,661)	40,540
Renovation	164,151	53,663	-	-	217,814
Security equipment	8,998	-	-	-	8,998
	<u>1,914,808</u>	<u>153,453</u>	<u>(77)</u>	<u>(229,682)</u>	<u>1,838,502</u>

	2017 RM	2016 RM	Depreciation charge 2016 RM
Net book value			
Air conditioner	329	546	713
Computer and EDP	79,235	111,905	45,324
ERU - Asset equipment	270,664	311,846	44,014
Equipment	4,818	4,818	1,600
Furniture and fittings	46	57	750
Medical equipment	2	2	-
Motor vehicle	56,396	10,736	43,504
Office equipment	55,978	60,082	25,610
Renovation	61,397	115,060	54,072
Security equipment	2	2	-
	<u>528,867</u>	<u>615,054</u>	<u>215,587</u>

10. Inventories

	2017 RM	2016 RM
<u>At cost:</u>		
Dental clinic	66,147	82,148
Flood preparedness	2,435	2,435
Merchandise	27,108	31,264
Mobile clinic	65,618	66,693
	<u>161,308</u>	<u>182,540</u>

NOTES TO THE FINANCIAL STATEMENTS

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11. Other receivables

	2017 RM	2016 RM
Other debtors, deposits and prepayment	576,685	515,984
Advance to mission members and basecamp	486,675	599,287
	<u>1,063,360</u>	<u>1,115,271</u>

12. Purchase of property, plant and equipment

During the financial year, the Society acquired property, plant and equipment with an aggregate cost of RM 67,647 (2016:RM 545,049) of which RM NIL (2016:RM 399,332) was being reclassified from charitable expenditure project. Cash payment of RM 67,647 (2016:RM 145,717) were made to purchase property, plant and equipment.

13. Cash and cash equivalents

	2017 RM	2016 RM
Cash in hand	34,275	26,244
Cash at bank	5,683,226	5,149,170
Deposits with licensed banks	1,621,940	5,637,539
	<u>7,339,441</u>	<u>10,812,953</u>

14. 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.

Notes to the Financial Statements

15. Staff costs (Note 8)

	2017 RM	2016 RM
EPF and SOCSO	109,438	79,731
Medical	11,518	18,763
Salaries and allowances	788,268	948,844
	<u>909,224</u>	<u>1,047,338</u>
Number of employees (excluding Executive Council) at the end of financial year	<u>49</u>	<u>46</u>

16 Financial Instruments

16.1 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.

16.2 Net gains and losses arising from financial instrument

	2017 RM	2016 RM
Deposits placed in a licensed bank	51,488	279,250
Cash and cash equivalent	1,084	1,738
	<u>52,572</u>	<u>280,988</u>

16.3 Categories and fair values of financial instruments

The categories and fair values of financial assets and liabilities are as follows:

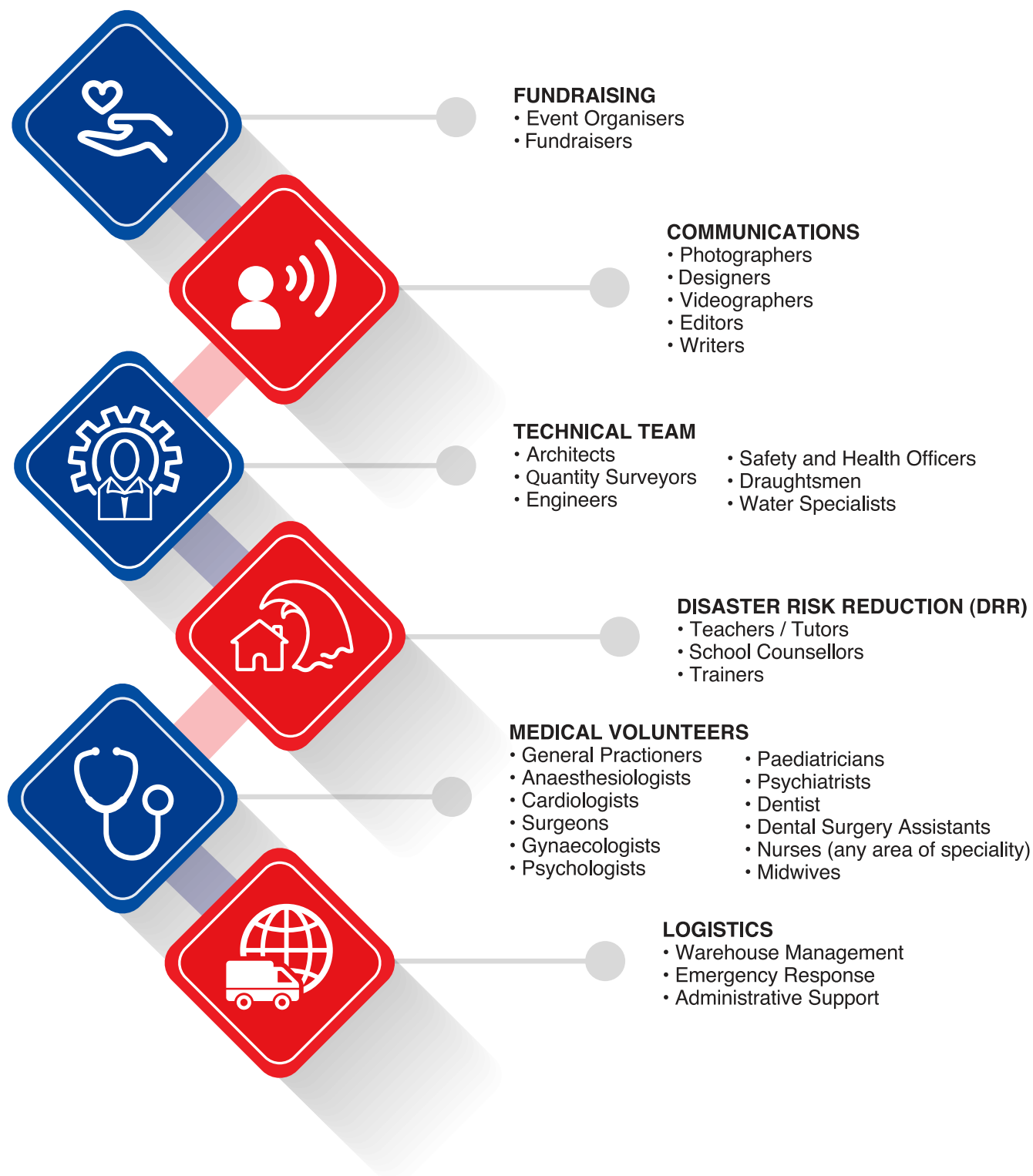
	Carrying amount 2017 RM	Fair value 2017 RM	Carrying amount 2016 RM	Fair value 2016 RM
Financial assets categorised as loans and receivables:				
Other receivables	1,063,360	1,063,360	598,433	598,433
Deposits placed in a licensed bank	1,621,940	1,621,940	5,637,539	5,637,539
Cash and cash equivalent	5,717,501	5,717,501	5,175,414	5,175,414
	<u>8,402,801</u>	<u>8,402,801</u>	<u>11,411,386</u>	<u>11,411,386</u>
Financial liabilities measured at amortised cost:				
Other payables	515,791	515,791	365,841	365,841



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To a hungry man, it could provide a **nourishing meal**.

To a child or senior citizen living in a remote village, it could bring much-needed **dental screening and treatment**.

To a displaced person or refugee, it would mean **medical care** and medications that he cannot afford.

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