Our Mission

Medair is an impartial, independent, and neutral humanitarian organisation inspired by Christian faith to save lives and relieve human suffering in the world’s most difficult-to-reach and devastated places.

We believe that the world’s most vulnerable and difficult-to-reach people should be able to live in dignity, free from human suffering and with hope for a better life.

We believe every person is a unique individual created by God. We listen to people’s stories, spend time in their presence, and treat them with the compassion and dignity they deserve.

Medair staff and community volunteers prepare cholera prevention kits for distribution in Haruma village, Mozambique.
In 2019, Medair reached more than 3.5 million people with humanitarian assistance. We treated malnourished children, helped women give birth safely, responded to Ebola and other diseases, provided safe drinking water, built bridges, distributed cash support, and rekindled hope for crisis-affected families.

On a field visit to Bangladesh in September, I asked one of our doctors, Jasmine, why she had left her well-paying job in Dhaka to work with Rohingya refugees in Kutupalong, the world’s largest refugee camp. Her answer was the same one I’ve heard again and again: “By helping them, I get so much back,” she said. “I feel so much more fulfilled in my job with Medair.”

Our people-focused mission in 2019 was made possible thanks to an extraordinary team that included 1,700 staff, 8,500 volunteers, thousands of prayer partners, partnerships with like-minded organisations, and the unwavering support of our funding partners.

Today, we look ahead to a future full of new and uncertain challenges. Over 168 million people needed humanitarian assistance before the COVID-19 pandemic. Medair has taken strategic actions to respond to a future characterised by major crises caused by outbreaks, climate change, mass displacement, and natural disasters. We are decentralising some of our global support services and increasing the responsibility of local offices. We are investing in a culture of innovation and forging productive partnerships with universities, private sector, governments, NGOs, the UN, foundations, churches, and communities. We remain committed to providing high-quality services to people in need, attaining certification to the Core Humanitarian Standard in 2019.

Through it all, people are at the centre of our actions. Not beneficiaries, not cases, but people. People like Moira whom I met in Madagascar this year. She rejoiced as she told me she was able to get water in her village for the first time in her life, saving her hours of walking each day. Remembering Moira brings home the life-changing impact we are able to make when we work together and place our trust in God.

Blessings,

David Verboom
Medair CEO
Medair in 2019

3,508,117 people directly assisted

**HEALTH SERVICES**
- 1,524,769 consultations at Medair-supported health clinics
- 509,073 people vaccinated
- 769,637 people taught life-saving health and nutrition practices

**NUTRITION**
- 88,576 malnourished people treated

**CASH**
- 76,343 people received cash or voucher assistance

**WATER, SANITATION, & HYGIENE (WASH)**
- 492,390 people gained improved access to safe drinking water
- 358,601 people gained improved access to sanitation
- 384,465 people taught life-saving hygiene practices

**SHELTER & INFRASTRUCTURE**
- 282,274 people received shelter assistance
- 403,862 people benefited from new or rehabilitated infrastructure
- 100,055 people trained in disaster risk reduction

**PEOPLE HELPED PER COUNTRY**
- South Sudan: 719,883
- DR Congo: 1,125,284
- Somalia: 246,831
- Madagascar: 17,432
- Mozambique: 36,980
- Jordan: 77,431
- Lebanon: 381,582
- Iraq: 241,899
- Syria: 288,393
- Bangladesh: 82,677
- Afghanistan: 280,748
- Nepal: 905
- Indonesia: 8,072
13 Countries of Operation (2019)

25 Past Countries of Operation

1 Global support office in Switzerland, 123 staff (full-time equivalent)

6 Affiliate offices in Europe and North America

1,447 Nationally recruited staff

166 Internationally recruited staff

13 Countries of Operation (2019)

25 Past Countries of Operation

1 Global support office in Switzerland, 123 staff (full-time equivalent)

6 Affiliate offices in Europe and North America

1,447 Nationally recruited staff

166 Internationally recruited staff
Medair at 30

In 1988, a small group of Christian volunteers travelled to Soroti, Uganda to provide relief to displaced people who were returning to devastated communities. Within one year, Medair was officially registered as an NGO in Switzerland. Since then, we have worked in 38 countries and provided humanitarian aid to millions of the world’s most vulnerable people.

Today, global humanitarian needs are rising—climate change, pandemics, and natural disasters are making crises more severe. In response, we are adopting organisational changes to prioritise localisation, investing in innovation, and forging partnerships to amplify the impact of our humanitarian assistance.

“I am proud of Medair because they have maintained their values and mission, even though they are now four times bigger than when we left at the end of 2003. Medair is recognised and appreciated as an NGO: by private donors, institutional donors, and the authorities in the countries where they work.”

– Dr Josiane André, Medair co-founder, retired
In 2019, Medair provided aid to over 700,000 people in South Sudan. Based in Juba, Medair ran life-saving projects in Renk, Leer, and Aweil and responded to multiple emergencies throughout the country.

Over half the population was acutely food insecure. The highest rate of malnutrition was in Renk, where we worked in five permanent locations and at eight sites that Medair teams visited weekly, screening for malnutrition and treating people with severe and moderate acute malnutrition.

We responded to South Sudan’s complex crisis with integrated and multi-sectoral aid. In Longrukec village, for example, we provided nutrition treatment, antenatal care and postnatal follow-up, vaccinations, health and nutrition promotion, and drilled a borehole at great depth that gave families access to safe drinking water.

“We thank God because of Medair and all you have done here,” said Marco Deng, chief in Longrukec. “When we have things to discuss you always come to talk with us. Together we are doing things that we are not able to do by ourselves.”

In 2019, a deadly measles outbreak struck the country. Our emergency response team launched a massive vaccination campaign that reached over 280,000 people. We used four-wheel-drive vehicles to deliver vaccines and supplies, while hundreds of our staff walked for hours to reach isolated settlements.

“Medair’s (measles) response is the best I have seen in 20 years,” said James Ngor, South Sudan Ministry of Health. “You have gone to the very remote villages where people are always suffering.”

South Sudan
719,883 people directly assisted

“There are very good services here. I would have nowhere to take my children if this clinic was not here.”

- Baheta

<table>
<thead>
<tr>
<th>HEALTH SERVICES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>143,655</strong> patient consultations at Medair-supported clinics; <strong>2,422</strong> health care workers trained</td>
</tr>
<tr>
<td><strong>365,309</strong> people vaccinated</td>
</tr>
<tr>
<td><strong>31,855</strong> people reached with health promotion; <strong>3,018</strong> community health workers trained</td>
</tr>
<tr>
<td><strong>5,440</strong> people received mental health and/or psychosocial support</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NUTRITION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>41,942</strong> people treated for acute malnutrition; <strong>120,152</strong> screened</td>
</tr>
<tr>
<td><strong>26,328</strong> people reached with nutrition promotion</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>WATER, SANITATION, &amp; HYGIENE (WASH)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>82,717</strong> people gained improved access to safe drinking water</td>
</tr>
<tr>
<td><strong>69,107</strong> people gained improved sanitation</td>
</tr>
<tr>
<td><strong>70,869</strong> people reached with hygiene promotion</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SHELTER &amp; INFRASTRUCTURE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>54,635</strong> people received shelter assistance</td>
</tr>
<tr>
<td><strong>1,042</strong> people benefited from rehabilitation of health clinics</td>
</tr>
</tbody>
</table>
DR Congo suffers from a complex humanitarian crisis whose size and severity is vastly underreported. People are affected by multiple crises, exacerbated by a lack of transport infrastructure. Frequent displacement, catastrophic flooding, severe conflict, disease outbreaks, and poor access to health care make it difficult for people to move beyond crisis or find stability.

In 2019, Medair provided life-saving emergency health, nutrition, WASH, and shelter to over 1.1 million people. We supported over 100 health facilities in a variety of ways, including Ebola response, health care, treatment of acute malnutrition, and improving sanitation and hygiene. During a country-wide measles outbreak, we supported the vaccination of over 75,000 children for measles.

Medair was a major partner in the Ebola response, conducting work in areas where others struggled to access. Our strong acceptance in communities was the result of years of working in DR Congo. Medair has earned a reputation for acting with integrity, listening, and having a people-centered approach to humanitarian assistance.

Operating was difficult in 2019: we had significant staff turnover and at times we were unable to access vulnerable communities because of severe insecurity.

“Our work has been challenging, but at the same time, very rewarding and fulfilling” said Dr. Olivier, Medair Health Advisor.
Medair and our local partners in Somalia provided life-saving emergency health, nutrition, and WASH services to nearly 247,000 people in 2019. We focused primarily on maternal, neonatal, and child health, including training of midwives and community health workers.

In nine health facilities, Medair trained staff and supplied quality medicines. We operated mobile outreach teams for villages far from health clinics, and our network of over 1,000 local volunteers taught health and nutrition messages in hard-to-reach, vulnerable communities.

In 2019, we treated more than 14,500 malnourished people and gave them therapeutic food, while their families were supported with a special food ration. “I thank God my child is well again, and the food ration helped us a lot,” said Amina.

“I want to thank Medair, especially the nutrition staff at the health facility who supported me and saved my child’s life.”

For the first time since we fled our home, my children had three meals per day. I stopped borrowing food from neighbours which was making me ashamed to walk on the street.”

In November, more than a half million people fled severe flooding in Somalia. Medair and our partners courageously used boats, donkey carts, and trekked on foot through dangerous waters to bring emergency shelter, health, nutrition, and hygiene kits to people affected by the floods.

“I want to thank Medair, especially the nutrition staff at the health facility who supported me and saved my child’s life.”

– Amina
Madagascar is highly exposed to natural disasters (cyclones, floods, drought, epidemics) but the country has a low response capacity correlated with severe poverty. Two years ago, Medair established a new project in the district of Beloha, one of the most isolated and arid districts in the great south.

Our mission was to provide sustainable supplies of safe drinking water to villages that had never had it before. Finding water, however, proved to be a constant, strenuous challenge. “Sometimes we have to dig 30 metres deep to find water,” said Alfred, Medair relief worker. Sometimes we ended up with salty water or no water at all.

Yet in 2019, thanks to the team’s perseverance, we succeeded in building 13 water points that now provide safe drinking water access to over 12,800 people in 13 villages. Our team also provided widespread hygiene training to improve community health. “We now have drinking water just a few minutes from our house,” said Rosine, 63. “Thanks to Medair, we no longer have to wait for rain to fall to collect muddy water along the roads.”

Medair also launched Project 930, an innovative way to provide real-time early warnings about disasters via mobile phone. “This could make a big difference by using mobile technology to provide information on preventive measures to be taken before, during, and after a natural disaster,” said Rasolo, Medair relief worker.
On 14 March 2019, Cyclone Idai made landfall on the central coast of Mozambique causing widespread flooding and devastation. Medair sent an emergency response team to Beira City and worked with Food for the Hungry (FH) and Medical Teams International (MTI) to assess needs in hard-to-access locations like Chiboma. Some communities could only be reached by boat or by air, and two villages were 17 km on foot.

We partnered with FH to provide emergency shelter kits, essential non-food items, hygiene kits, female dignity kits, water filters, and hygiene training to 21,800 people in Sofala and Nhamatanda provinces. “What you are teaching us here today remains,” said Mama Christina during a hygiene training. “Knowledge is the only thing that remains, that can change life and broaden thought. Things like this will stay once Medair leaves.”

Less than six weeks after Idai, Cyclone Kenneth struck the northern coast of the country. Medair rapidly deployed to Pemba and provided nearly 2,900 households in Macomia Sede with emergency shelter and hygiene support. On 23 July, Medair exited Mozambique after assisting nearly 37,000 people in the two emergency responses.

“People ran out of their huts trying to escape, but the water was everywhere. I saw my people climbing trees to escape the floods, and mothers stringing mosquito nets up in the branches to hold their children and keep them safe.”

- Thomas, chief of Chiboma village

“The water washed away everything. I am shivering at night. When I opened your bag and saw the blankets, I immediately hugged my wife, saying: we can finally have a warm sleep tonight.”

- Antonio, 75

Mozambique
36,980 people directly assisted

WATER, SANITATION, & HYGIENE (WASH)

- 36,980 people gained improved access to safe drinking water and benefited from WASH kits
- 35,410 people reached with hygiene promotion
- 40 hygiene promoters trained
- 16,165 people received female dignity kits

SHELTER & INFRASTRUCTURE

- 36,980 people benefited from emergency shelter and NFI kits
Medair Jordan works in Mafraq, Zarqa, Amman, and Irbid providing health, psychosocial support, and cash programmes for Syrian refugees and vulnerable Jordanians.

In 2019, we provided people with cash for emergency surgeries and medication, and paid the childbirth delivery costs for over 4,200 women. Our teams provided practical information to help keep people and families in good health, reaching nearly 74,000 people.

“Hope, appreciation, and love are emotions that I see in the eyes of each and every person who comes to these distributions,” said Razan, Medair relief worker.

Our team grew more efficient and effective in our areas of expertise and we became more engaged in higher level humanitarian coordination. Our Cash and Case Management approach provided tailored case plans for over 300 vulnerable families. Together, we helped people solve issues related to health, education, psychosocial needs, legal documentation, and shelter.

Participants in our psychosocial support sessions developed strategies for handling stress, depression, and daily challenges. “They taught me how to be patient, and how to overcome my day-to-day life that is filled with anxiety, problems, and concerns,” said Suzan, a Syrian refugee.

“I had a three-story house, three cars, and my beloved family by my side, I couldn’t ask for more. How can I not be sad after all we have been through? How can I go on after having had so much and losing it all in a blink of an eye?”

- Fawaz, Syrian refugee

---

**HEALTH SERVICES**

<table>
<thead>
<tr>
<th>Service</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>People reached with health promotion</td>
<td>73,841</td>
</tr>
<tr>
<td>People received mental health and/or psychosocial support (MHPSS)</td>
<td>1,926</td>
</tr>
<tr>
<td>People trained in MHPSS</td>
<td>10</td>
</tr>
<tr>
<td>People received cash assistance</td>
<td>14,481</td>
</tr>
<tr>
<td>- Women for childbirth delivery costs</td>
<td>4,268</td>
</tr>
<tr>
<td>- People for emergency surgeries</td>
<td>845</td>
</tr>
<tr>
<td>- People for non-communicable-disease assistance</td>
<td>807</td>
</tr>
<tr>
<td>- People (303 households) received cash and case management</td>
<td>1,654</td>
</tr>
<tr>
<td>- People (1,439 households) received emergency cash</td>
<td>6,907</td>
</tr>
</tbody>
</table>
Lebanon hosts the largest refugee population per capita with 1 in 5 people a Syrian refugee. Medair operates primarily in the Bekaa Valley, where over 300,000 refugees live in informal tented settlements, substandard structures, or residential buildings.

In 2019, Medair supported six social development centres in collaboration with the Lebanese Ministry of Social Affairs. We provided free medicine and vaccinations, and we subsidised patient fees for all primary health services.

Medair community volunteers taught people about reproductive health, newborn/child health, mental health, and gender norms. Our psychosocial team helped groups of women to cope with the challenges of life as a refugee.

Medair improved shelter conditions for over 130,000 people in 2019. We provided people with shelter materials or cash for supplies to keep their tents warm, dry, and safe. We improved settlement sites, creating storm drains and trenches, fencing off dangerous areas, and levelling and gravelling sites.

As the lead partner for the Inter-Agency Mapping Platform, Medair GIS-mapped and provided an address for over 327,000 refugees. We shared our data with other agencies, helping to keep the most vulnerable people from slipping through the cracks. This innovative project drew international media interest in 2019, with features in Wired and Forbes magazines.

“‘I know hundreds of families who are apart because of the crisis in Syria. That is why I always talk, to let go. And I always listen, too. Sometimes this is what most of us need, someone to talk to—a good listener.’

- Om Saead, group participant"
Throughout 2019, Medair met over 240,000 people during moments of need, providing them with water and sanitation, health consultations, shelter repairs, psychosocial support, and cash assistance.

We continued strengthening the health care system by training medical providers and promoting health and hygiene.

“The people in the community have been talking about how Medair cares for all of us and we are satisfied with the quality of their care,” said Sabah, at a Medair clinic in Mosul district. “People take better care of themselves since Medair began providing services.”

We provided water and sanitation services to over 52,000 people, particularly latrines and hygiene kits. "Water, sanitation, and hygiene services prevent disease and enable dignity," said Amalan, Medair relief worker. "Hygiene kits contain simple items, but they can make a big difference."

In October, over 17,000 people from northeast Syria fled across the border into Iraq. Medair deployed a mobile medical team to serve vulnerable refugees who had walked long distances to find safety. Our presence helped them to know that even in the midst of adversity, people cared enough to show up, listen to them, and help respond to their needs.

“Everyday I feed my children with the yoghurt and milk. When I received the cash, I was able to provide for them.”

— Matra received cash assistance to purchase a cow, home repair supplies, and clothes for her four children (including her son, shown here).
In 2019, Medair provided aid in Rural Damascus, Homs, Aleppo, Dar’a, Deir-ez-Zor, and Idleb governorates. We prioritised newly accessible or hard-to-reach communities and households which were underserved, vulnerable, and where access had been granted.

Medair provided over 150,000 people in need with access to quality primary health care. We also rehabilitated urban water systems and installed water storage solutions, providing safe water to over 110,000 people.

We were able to gain access to parts of Idleb with the support of SARC (Syrian Arab Red Crescent) and other national stakeholders. We completed a critical winterisation response, assisting nearly 2,000 people across seven communities in Abul Thohur with blankets, mattresses, stoves, and female hygiene products.

Medair also worked in Dar’a (South Syria), where ongoing security incidents continued to impact the ability of actors to address the high level of needs. We provided assistive devices to people living with mobility impairments.

Mariam, 56, had been unable to move since being hit by explosive fragments three years ago. Our team provided her with a wheelchair and toilet seat. “Now I can go out again without the demand of someone to carry me out,” said Mariam. “I no longer feel that I am confined to my mattress anymore.”

Medair also provided over 150,000 people in need with access to quality primary health care. We also rehabilitated urban water systems and installed water storage solutions, providing safe water to over 110,000 people.

We were able to gain access to parts of Idleb with the support of SARC (Syrian Arab Red Crescent) and other national stakeholders. We completed a critical winterisation response, assisting nearly 2,000 people across seven communities in Abul Thohur with blankets, mattresses, stoves, and female hygiene products.
In 2019, Medair continued partnering with World Concern to provide humanitarian aid in Kutupalong, the world’s largest refugee camp. Our team provided nutrition in three clinics, delivered health services at the Medair Health Post, and gave shelter support to Rohingya families.

Medair’s work in Bangladesh would not be possible without our Rohingya volunteers, who develop strong relationships and build trust with communities. They get to know every family, provide training on health, nutrition, and hygiene, and learn about individual needs.

“I have volunteered for a year now, so I know a lot of people,” said Nurul. “When I was sick, I received treatment at Medair’s Health Post, so I know first-hand that the services are good and I can tell people that.”

We offered health-related training to volunteers to help provide them with new skills that will outlast our presence on the ground. “I like to receive trainings and I want to keep learning about health,” said Nurul. “My dream is to go back to school and get a certificate—I really hope that can happen!”

In July, heavy and sustained rains led to multiple landslides and flooding in the camp, damaging hundreds of shelters. Medair led an emergency shelter response, distributing emergency kits to families and helping repair the homes of the most vulnerable people.

“I miss my home. I was born there. At the moment, we cannot go back to Myanmar. If we receive an official identity, if my national ID card has Rohingya written on it, I’ll go back. My entire family will go back.”

- Sarah, 60

---

**Health Services**

- 47,300 patient consultations at Medair-supported clinics
- 1,807 children vaccinated
- 102 people received mental health and/or psychosocial support (MHPSS)
- 17,256 people reached with health promotion; 91 community health workers trained

**Nutrition**

- 4,175 people treated for acute malnutrition; 41,393 people screened
- 24,465 people received monthly food supplements
- 44,238 people reached with nutrition promotion

**Shelter & Infrastructure**

- 10,262 people received shelter assistance
- 6 health and nutrition clinics rehabilitated, benefiting 65,319 people
- 2,363 people received training to make their shelters more disaster-resilient
As many as 6.3 million Afghans required humanitarian and protection assistance in 2019—almost double the number from 2018. People are facing multiple crises at once, including severe drought, displacement, and insecurity.

In 2019, Medair provided integrated life-saving humanitarian assistance to over 280,000 people in underserved areas of southern Afghanistan and the Central Highlands.

Our nutrition teams travelled to isolated villages to screen and treat children and mothers for acute malnutrition. We trained volunteers to promote health and nutrition in their communities. “Before, no one knew about malnutrition,” said Farim, a nutrition volunteer in the Central Highlands. “Now, I can tell them. I can help. We don’t want to see any more children malnourished.”

Families affected by drought received cash support, supplies for agriculture and kitchen gardening, and/or fodder for livestock. Our teams constructed safe water points and latrines, and we distributed cash assistance for heating or winter necessities. Communities were trained in methods of reducing impacts of flooding, and people received cash support while building catch dams to prevent future floods.

“We are seeing progress in our children’s health. This makes me happy. I hope you will keep coming here,” said Ahmad, community leader in the Central Highlands.

“If the nutrition team had not come to my village, we would have had to walk three hours to reach the nearest clinic.”

- Amina (not shown)
In 2015, two major earthquakes devastated Nepal, destroying thousands of homes. Medair responded within 48 hours, and over the next four years, we worked alongside communities, government, and NGO partners to help families recover from the disaster.

Medair partnered with CDS, an established local NGO, and together we helped families in remote Ramechhap district to construct 1,300 new, earthquake-resilient homes. We also trained over 600 local masons in earthquake-resilient building techniques, knowledge that will benefit the community for years to come. “We think of Medair as a real partner who works hand-in-hand with us, which has resulted in clearly visible progress in our areas,” said Milan Kumar Ghising, Executive Director, CDS.

Assisting people in countries that have been affected by natural disasters is not only a matter of helping people to get back on their feet. We need to help people to “build back better.” In Nepal, this meant building safer and healthier houses, while also training people on disaster risk reduction and earthquake safety.

In 2019, Medair successfully completed construction on our final 125 homes with latrines, and we exited the country in April. “Before, I had a small house, with a small shop,” said Kumari. “They were both severely damaged by the earthquake. Medair and CDS helped me to demolish my old house and reconstruct a new, earthquake-resilient one. Life is much better now: my new shop is bigger and my monthly income has increased.”

“After the earthquake, the whole country was mourning. But, if you listen to people now, they all agree on one thing: life is better now than before the earthquake.”

– Kripa, Medair engineer (not shown)
In September 2018, the region of Central Sulawesi was hit by three simultaneous natural disasters. A 7.4-magnitude earthquake triggered a devastating tsunami with waves up to six metres in height and soil “liquefaction” that engulfed and buried whole communities underground.

By the time the water receded and the dust settled, over 4,300 people had died, and over 200,000 people needed humanitarian assistance. Medair was one of the first international NGOs to reach the affected area. We partnered with World Renew and local NGOs to initiate a rapid emergency response for the final three months of 2018.

At the start of 2019, we moved to early recovery and provided cash assistance to the most vulnerable families in six villages in Sigi district, based on the level of shelter damage they had suffered. Before departing the country, a post-distribution monitoring survey found that the cash response was successful in addressing the needs of the disaster-affected population. Families had used the cash to make their own decisions on what they most needed to help their recovery, such as shelter, food, education, or clothing.

“People are thinking about how to move on with their lives, how not to be so dependent on external aid,” said Frilly, 21, Medair translator. “I think it is important to make the survivors feel that they are part of the recovery and reconstruction process, to make them feel that there is hope for their lives to get back to normal.”
Financial Review

PROGRAMME INCOME AND EXPENSE 2019 (USD)

<table>
<thead>
<tr>
<th>Country</th>
<th>Income</th>
<th>Expense</th>
</tr>
</thead>
<tbody>
<tr>
<td>Afghanistan</td>
<td>6,780,575</td>
<td>6,529,849</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>2,956,759</td>
<td>2,993,111</td>
</tr>
<tr>
<td>DR Congo</td>
<td>20,444,099</td>
<td>20,201,263</td>
</tr>
<tr>
<td>Madagascar</td>
<td>1,761,245</td>
<td>1,738,792</td>
</tr>
<tr>
<td>Middle East</td>
<td>33,496,877</td>
<td>32,228,804</td>
</tr>
<tr>
<td>Somalia</td>
<td>6,540,205</td>
<td>6,609,503</td>
</tr>
<tr>
<td>South Sudan</td>
<td>17,390,833</td>
<td>17,327,290</td>
</tr>
<tr>
<td>Closed country programmes*</td>
<td>812,847</td>
<td>1,714,028</td>
</tr>
</tbody>
</table>

*Indonesia, Mozambique, Myanmar, Nepal, and Philippines
Medair prepares to distribute transitional shelter kits, in anticipation of the monsoon season in Kutupalong Refugee Camp, Bangladesh.
CONSOLIDATED STATEMENT OF FINANCIAL POSITION  
AS AT 31 DECEMBER 2019 (ALL FIGURES SHOWN ARE IN USD)

<table>
<thead>
<tr>
<th>Assets</th>
<th>31-12-2019</th>
<th>31-12-2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and bank accounts</td>
<td>9,924,914</td>
<td>13,829,813</td>
</tr>
<tr>
<td>Donor receivables</td>
<td>13,359,226</td>
<td>10,350,344</td>
</tr>
<tr>
<td>Other receivables</td>
<td>672,114</td>
<td>514,364</td>
</tr>
<tr>
<td>Inventory</td>
<td>64,158</td>
<td>66,814</td>
</tr>
<tr>
<td>Prepayments</td>
<td>1,091,830</td>
<td>1,061,711</td>
</tr>
<tr>
<td><strong>Total Current Assets</strong></td>
<td>25,112,242</td>
<td>25,823,046</td>
</tr>
<tr>
<td><strong>Long-term Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Financial assets</td>
<td>191,323</td>
<td>170,595</td>
</tr>
<tr>
<td>Capital assets</td>
<td>797,209</td>
<td>908,813</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td><strong>26,100,774</strong></td>
<td><strong>26,902,454</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Liabilities, Funds, and Capital</th>
<th>31-12-2019</th>
<th>31-12-2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current Liabilities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts payable</td>
<td>2,310,907</td>
<td>1,396,245</td>
</tr>
<tr>
<td>Donor payables</td>
<td>262,919</td>
<td>116,776</td>
</tr>
<tr>
<td>Short-term debt</td>
<td>-</td>
<td>1,994,695</td>
</tr>
<tr>
<td>Accrued liabilities</td>
<td>2,810,651</td>
<td>2,044,793</td>
</tr>
<tr>
<td>Deferred revenue</td>
<td>6,151,182</td>
<td>10,074,256</td>
</tr>
<tr>
<td>Provisions</td>
<td>1,008,890</td>
<td>931,000</td>
</tr>
<tr>
<td>End-of-contract benefits</td>
<td>216,685</td>
<td>188,090</td>
</tr>
<tr>
<td><strong>Total Current Liabilities</strong></td>
<td><strong>12,761,234</strong></td>
<td><strong>16,745,855</strong></td>
</tr>
<tr>
<td><strong>Long-term Liabilities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Long-term debt</td>
<td>3,052,921</td>
<td>-</td>
</tr>
<tr>
<td>End-of-contract benefits</td>
<td>505,599</td>
<td>438,877</td>
</tr>
<tr>
<td><strong>Total Long-term Liabilities</strong></td>
<td><strong>3,558,520</strong></td>
<td><strong>438,877</strong></td>
</tr>
<tr>
<td><strong>Total Liabilities</strong></td>
<td><strong>16,319,754</strong></td>
<td><strong>17,184,732</strong></td>
</tr>
<tr>
<td><strong>Restricted Funds</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Restricted income funds</td>
<td>737,620</td>
<td>662,183</td>
</tr>
<tr>
<td>Restricted programme funds</td>
<td>1,216,418</td>
<td>384,927</td>
</tr>
<tr>
<td><strong>Total Restricted Funds</strong></td>
<td><strong>1,954,038</strong></td>
<td><strong>1,047,110</strong></td>
</tr>
<tr>
<td><strong>Capital/Unrestricted Funds</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unrestricted capital</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Allocated capital</td>
<td>7,826,982</td>
<td>8,670,612</td>
</tr>
<tr>
<td><strong>Total Capital/Unrestricted Funds</strong></td>
<td><strong>7,826,982</strong></td>
<td><strong>8,670,612</strong></td>
</tr>
<tr>
<td><strong>Total Funds and Capital</strong></td>
<td><strong>9,781,020</strong></td>
<td><strong>9,717,722</strong></td>
</tr>
</tbody>
</table>

**Total Liabilities, Funds, and Capital**

<table>
<thead>
<tr>
<th></th>
<th>31-12-2019</th>
<th>31-12-2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Liabilities, Funds, and Capital</strong></td>
<td><strong>26,100,774</strong></td>
<td><strong>26,902,454</strong></td>
</tr>
</tbody>
</table>
## CONSOLIDATED INCOME STATEMENT AS AT 31 DECEMBER 2019

(ALL FIGURES SHOWN ARE IN USD)

<table>
<thead>
<tr>
<th></th>
<th>31-12-2019</th>
<th>31-12-2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>OPERATING INCOME</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants (Restricted)</td>
<td>75,141,964</td>
<td>66,650,558</td>
</tr>
<tr>
<td>Institutional Grants</td>
<td>66,222,469</td>
<td>54,288,577</td>
</tr>
<tr>
<td>Other Grants</td>
<td>8,919,495</td>
<td>12,362,981</td>
</tr>
<tr>
<td>Private Donations</td>
<td>9,497,226</td>
<td>9,378,829</td>
</tr>
<tr>
<td>Unrestricted</td>
<td>4,875,850</td>
<td>4,720,359</td>
</tr>
<tr>
<td>Restricted</td>
<td>4,621,376</td>
<td>4,658,436</td>
</tr>
<tr>
<td>Gifts-in-kind</td>
<td>5,519,896</td>
<td>4,352,205</td>
</tr>
<tr>
<td>Other income</td>
<td>432,240</td>
<td>281,713</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>90,591,326</td>
<td>80,663,305</td>
</tr>
<tr>
<td><strong>OPERATING EXPENSES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Humanitarian expense</td>
<td>-82,799,974</td>
<td>-73,914,162</td>
</tr>
<tr>
<td>Administrative expense</td>
<td>-6,855,710</td>
<td>-6,899,339</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>-89,655,684</td>
<td>-80,813,501</td>
</tr>
<tr>
<td><strong>OPERATING RESULTS</strong></td>
<td>935,642</td>
<td>-150,196</td>
</tr>
<tr>
<td><strong>FINANCIAL RESULT</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Financial income</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>Financial expense</td>
<td>-79,661</td>
<td>-46,687</td>
</tr>
<tr>
<td>Realised gain/(loss) on exchange</td>
<td>-758,868</td>
<td>-65,738</td>
</tr>
<tr>
<td>Unrealised gain/(loss) on exchange</td>
<td>-33,824</td>
<td>678,971</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>-872,344</td>
<td>566,554</td>
</tr>
<tr>
<td><strong>RESULT BEFORE EXTRAORDINARY INCOME</strong></td>
<td>63,298</td>
<td>416,358</td>
</tr>
<tr>
<td>Extraordinary income</td>
<td>-</td>
<td>-2,298,083</td>
</tr>
<tr>
<td><strong>RESULT BEFORE CHANGE IN FUNDS</strong></td>
<td>63,298</td>
<td>2,714,441</td>
</tr>
<tr>
<td><strong>FUND ALLOCTIONS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Withdrawal from/(allocated to) restricted funds</td>
<td>-906,928</td>
<td>89,399</td>
</tr>
<tr>
<td><strong>ANNUAL RESULT BEFORE ALLOCATION TO CAPITAL</strong></td>
<td>-843,630</td>
<td>2,803,840</td>
</tr>
<tr>
<td>Allocated to/(withdrawal from) unrestricted funds</td>
<td>843,630</td>
<td>-2,803,840</td>
</tr>
<tr>
<td><strong>RESULT AFTER ALLOCATION</strong></td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>


In Iraq, Medair assisted Syrian families who fled across the border in October 2019.
Funding Partners
Organisational partners listed alphabetically & USD 20,000

United Nations, Intergovernmental, and Governmental Partners
- Afghanistan Humanitarian Fund
- Australian Department of Foreign Affairs and Trade
- Dutch Ministry of Foreign Affairs
- EU Civil Protection and Humanitarian Aid
- EU Regional Trust Fund in Response to the Syrian Crisis
- Food and Agriculture Organization
- German Federal Foreign Office (AA)
- Global Affairs Canada
- International Organization for Migration
- Jordan Humanitarian Fund
- Lebanon Humanitarian Fund
- New Zealand Ministry of Foreign Affairs and Trade
- Principality of Liechtenstein
- South Sudan Humanitarian Fund
- Swiss Agency for Development and Cooperation
- Syria Humanitarian Fund
- UK Government
- UN Children’s Fund
- UN Development Programme
- UN High Commissioner for Refugees
- UN Office for the Coordination of Humanitarian Affairs
- US Agency for International Development

Organisational partners listed alphabetically ≥ USD 20,000

Corporate, Foundation, and Private Organisational Partners
- Aligro (CH)
- Dr. Heinz-Horst Deichmann Stiftung (DE)
- Evangelische Landeskirche in Württemberg (DE)
- Fagus lucida Stiftung (CH)
- Fondation de bienfaisance du groupe Pictet (CH)
- Fondation Demaurex Frères (CH)
- Fondation du Protestantisme (FR)
- Fondation Ernest Mathey (CH)

Non-Governmental and Network Partners
- All We Can (UK)
- CORE Group (US)
- Dorcas Aid International (NL)
- EO Metteerdaal (NL)
- Fonds Igno2Help d’Interaction (CH)
- Food for the Hungry (US)
- Lakarmissionen (SE)
- Mennonite Central Committee (CA)
- Mercy Corps (US)
- Mission Aviation Fellowship (SE)
- Red een Kind (NL)
- TEAR Australia
- Tearfund Canada
- Tearfund Deutschland
- Tearfund NZ
- Tearfund (UK)
- Transform Aid (AU)
- Woord en Daad (NL)
- ZOA (NL)

Other Institutional and Public Partners
- Agence de l’eau Rhône Méditerranée Corse (FR)
- Canton of Aargau (CH)
- Canton of Basel-Stadt (CH)
- Canton of Zürich (CH)
- City of Dübendorf (CH)
- Conseil Régional Auvergne-Rhône-Alpes (FR)
- Elrha’s Research for Health in Humanitarian Crisis Programme (UK)
- Johns Hopkins University (US)
- Republic and State of Geneva (CH)
- Swiss Solidarity
- Syndicat des Eaux du Sud Valantinois (FR)
- Ville de Carouge (CH)
- Ville de Genève (CH)
- Ville de Meyrin (CH)

Fondation Fédération protestante de France
Fondation Gertrude Hirzel (CH)
Fondation Philanthropique Famille Sandoz (CH)
Fondation Pierre Demaurex (CH)
Fondation SUEZ (FR)
Fresh Leaf Charitable Foundation (UK)
Gebauer Foundation (CH)
Genossenschaft HILFE (CH)
KUMA Solution GmbH (CH)
Lancaster Foundation (UK)
Medair Invest in Aid Foundation (CH)
Medicor Foundation (LI)
Migros (CH)
MPM Charitable Trust (UK)
Souter Charitable Trust (UK)
Stanley Thomas Johnson Foundation (CH)
Trade Aid UK

Gift-in-Kind Partners
- Atlas Logistique / HI (FR)
- Autodesk Foundation (US)
- Bain and Company (CH)
- Food and Agriculture Organization
- International Organization for Migration
- Joint Aid Management (ZA)
- MANA Nutrition (US)
- Mercy Corps (US)
- Microsoft Tech for Social Impact (US)
- Population Services International (US)
- Qlik
- Somalia WASH Cluster
- South Sudan WASH Cluster
- UN Children’s Fund
- UN High Commissioner for Refugees
- UN Population Fund
- World Food Programme
- World Health Organization
“I want to give a special encouragement to Medair. One could say that you wear two hats, because firstly you are always ready to conduct rapid responses in very remote places where others do not want to go. And secondly, when you start these responses, you stay on the ground to see complete your activities, [the impact of which] is very visible on the ground. You accept great risks [in order to do this].”

– Dr. Akilimali Bamwisho Descartes, Commissioner-General for Humanitarian Affairs, Nord Kivu, DR Congo

Medair’s International Leadership
(as of 31 December 2019)

International Board of Trustees
Klaas Van Mill, Chair
Fraser Bell, Vice-Chair
Arno Urmker, Secretary
Jacques-Antoine Demaurex, Treasurer
Patrick Berenger
Anne Headon
Samson Kambarami
Benoit Mandosse
Henk-Jan Muusse
Peter Wilson

Executive Leadership Team
David Verhoorn, CEO
William Anderson, Quality & Innovation Director
Heidi Cockram, IT Director
Bing Mei Hao, Finance Director
James Jackson, Engagement Director
Cynthia Labi, HR Director
Anne Reitsema, International Programme Director

This document was produced with resources gathered by Medair field and global support office staff. Names of people and places were sometimes changed when deemed necessary to protect the identity of beneficiaries or staff. The views expressed herein are those solely of Medair and should not be taken in any way to reflect the official opinion of any other organisation.