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.
Nearly 8,000 people worked or volunteered with Medair in 2020. One of them is Dr Rosie Pelham. As a member of our health team in South Sudan, Dr Pelham watched as the first COVID-19 wave reached the UK, her home. Rosie told me that she felt conflicted. “The community where I was working in South Sudan had no functioning hospital and certainly no intensive care beds,” she said. “Staying was an easy decision.”

What the pandemic revealed is that there are extraordinary people who continue to help others even in times of uncertainty. Over 10,000 people and nearly 400 organisations supported and funded us, making it possible for Rosie and our teams to serve over three million vulnerable people in 13 countries. Our teams pursued innovative solutions to the year’s challenges, as the pandemic renewed our focus on decentralising operations and partnering with local organisations to deliver highly efficient, high-impact aid.

As I write this, fresh waves of coronavirus are challenging all of us in our desire to return to normal life. In addition to the pandemic, the vulnerable people we serve are facing multiple disasters.

The United Nations predicts that in 2021, the number of people requiring humanitarian assistance will increase by 40 percent. In southern Madagascar, people are living through the worst drought in 40 years. Our Global Emergency Response team has deployed to Ethiopia to aid people affected by the conflict in Tigray.

I’m always humbled to consider the many ways in which so many people become involved in our mission. As you read our Annual Report, you’ll gain a glimpse of what you made possible with your support of Medair in 2020.

With respect and gratitude,

David Verboom - Chief Executive Officer
## Impact 2020

<table>
<thead>
<tr>
<th>Service</th>
<th>People Assisted per Country</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health Care</strong></td>
<td>2,050,547 people</td>
<td>Afghanistan 100,721</td>
<td>Bangladesh 83,134</td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td>290,041 people</td>
<td>Afghanistan 100,721</td>
<td>Bangladesh 83,134</td>
</tr>
<tr>
<td><strong>Cash Assistance</strong></td>
<td>77,133 people</td>
<td>Afghanistan 100,721</td>
<td>Bangladesh 83,134</td>
</tr>
<tr>
<td><strong>COVID-19 Aid</strong></td>
<td>1,061,449 people</td>
<td>Afghanistan 100,721</td>
<td>Bangladesh 83,134</td>
</tr>
<tr>
<td><strong>Shelter and Infrastructure</strong></td>
<td>1,057,480 people</td>
<td>Afghanistan 100,721</td>
<td>Bangladesh 83,134</td>
</tr>
</tbody>
</table>

### Highlights

- **Health Care**
  - 2,050,547 people
  - 1,253,222 patient consultations at Medair-supported health clinics

- **Nutrition**
  - 290,041 people
  - 73,736 people treated for acute malnutrition

- **Water, Sanitation, and Hygiene**
  - 1,141,780 people
  - 469,767 people gained improved access to safe drinking water

- **Shelter and Infrastructure**
  - 1,057,480 people
  - 266,469 people received shelter assistance

### People Assisted per Country

- **Afghanistan** 100,721
- **Bangladesh** 83,134
- **DR Congo** 1,226,056
- **Iraq** 105,587
- **Jordan** 91,994
- **Lebanon** 456,400
- **Madagascar** 100,169
- **Somalia** 250,647
- **South Sudan** 487,856
- **Sudan** 1,410
- **Syria** 334,287
- **Yemen** 44,623

### COVID-19 Aid

- 1,061,449 people

### People directly assisted

- 3,282,884
**Operations**

1. Global Support Office in Switzerland, 102 staff
2. Shared Service Centres in Kenya and Jordan, 7 staff
5. Affiliate Offices in Europe and North America

**People**

1,396 nationally recruited staff
120 internationally recruited staff
6,408 volunteers
10,240 individual donors
395 organisational donors

484,682 people reached with global communications

**13 countries of operation (2020)**

US $90.3 million operating expenses
- 25% of field expenses by, for, or through local partners
- 92.7% of operating expenses directed to humanitarian activities
Even before the pandemic was declared, Medair’s technical advisors were preparing response strategies for the vulnerable countries where we work. All year long, we adapted our activities to respond to COVID-19 while finding ways to continue delivering life-saving humanitarian aid activities through the challenges of the pandemic.

Every aspect of delivering humanitarian aid was impacted by COVID-19. Government restrictions and border closures impeded travel for staff, global shortages delayed the delivery of essential supplies, and the cost of personal protective equipment (PPE) added millions of dollars in unexpected expenses. Reaching people in need of help became more complex than ever.

Despite all the challenges, our teams showed remarkable courage and commitment and our donors responded to this emergency like never before. Together, we provided COVID-related aid to over one million people.

1,061,449 people received COVID-related aid

- Training all Medair-supported staff and providing PPE.
- Essential hygiene supplies for most vulnerable.
- Public health messaging on social distancing, hygiene, symptoms, prevention, protection of high-risk groups.
Closing the Gap with Innovations

**Eco-Friendly Tarpaulins**
Plastic tarps are the most efficient solution for providing shelter during humanitarian crises. Switzerland’s EPFL (École Polytechnique Fédérale de Lausanne) chose Medair to collaborate on a project to convert locally sourced organic waste such as nut shells and coconut fibres into a biodegradable polyester. While still in development, these tarpaulins have the potential to revolutionise emergency shelter and provide a sustainable alternative to the millions of plastic sheets distributed each year.

**Ready2Report App**
The need to track the health of our staff during COVID-19 led to an innovation project funded by Swiss Solidarity. Working with RiskDelight, we developed a digital tool to provide a timely overview of every team member’s health status.

**The “Wooby” Baby Scale**
Medair and the Airbus Humanity Lab have delivered the first prototype of a high-precision baby scale for nutrition clinics. Currently, NGOs mostly rely on scales that aren’t accurate enough for daily adjustment of the treatment of severely malnourished babies. The “Wooby” baby scale will change all that, with groundbreaking precision of +/- 5 grams that will improve treatment options and save lives.
South Sudan experiences repeated disease outbreaks, large displacements due to conflict, and high levels of malnutrition in children. To allow rapid and agile response, we maintain a full-time Emergency Response Team in the country.

When the Pibor region reported a measles outbreak in September, it was the latest in a series of emergencies. Conflicts had forced families to flee and take refuge wherever they could, while massive flooding had turned communities into crowded and hard-to-reach islands. “The place we are living is very far from others,” said Nyandit. “There is no health facility. When a child gets sick, they just get sick. We treat them with herbs from the trees.”

Vaccinating more than 22,000 children meant travelling from village to flooded village using boats and wading through muddy water. “I am very happy for the vaccine because it can help my children,” said Nyandit. “This is protection. The suffering could have been too much if you had not done this.”

Impact Highlights
236,651 people helped by the Emergency Response Team.
45,574 people vaccinated.
“We were surprised by the rising floodwaters,” said Noro. “We didn’t even have time to pack anything. All of our belongings were destroyed.”

Madagascar is vulnerable to sudden, extreme weather events like cyclones and floods that hit communities unaware. Medair and our government and private sector partners have launched the first phase of an innovative Emergency Early Warning System. The system uses satellite imagery and a variety of different technologies to alert families like Noro’s about storms so they will have time to react. It’s a huge step forward, allowing real-time data-based decision-making that will save lives in emergencies.

In 2020, Medair’s emergency hotline received over 5,000 calls, and we held community meetings and workshops to help people mitigate the risk of damage from extreme weather events. When disasters struck, our emergency response team took immediate action to protect flooded families like Noro’s from contaminated water, giving them water treatment, buckets, and soap.

Impact Highlights

9,781 people reached with “disaster risk reduction” (DRR) activities. 28,497 people received emergency water & hygiene supplies after floods/cyclones.

“Every dollar invested in risk reduction and prevention can save up to $15 in post-disaster recovery.” – UN Office for Disaster Risk Reduction
Infectious diseases are a major concern in DR Congo, with recurring outbreaks of measles, cholera, malaria, Ebola, and now COVID-19. In May, our team learned of a cholera outbreak in a remote community. “We couldn’t afford to wait, knowing that people were dying with no medicines available,” said Moise, Medair relief worker. “For two days, we weathered bumpy drives and risky boat rides, but the trip didn’t end there. We walked through a wild forest for two more days, with over 70 fellow Congolese volunteering to join us in carrying 2,000 kg of essential medicine and supplies. “The people welcomed us with great joy, but there was no time to rest. Ten people had already died. We went straight to the health facility to give the medicine, relieved that cholera patients would soon recover.”

In 2020, Medair provided a versatile range of emergency health services in isolated communities in Nord Kivu and Ituri provinces. We supported around 100 health clinics with medicine, training, supplies, and water and sanitation facilities.

Impact Highlights

492,799 patient consultations at Medair-supported health clinics.

23,000 people reached with cholera outbreak response.

“The needs in Congo are mainly in primary health care. Lives are in danger because of a lack of access to antibiotics or problems related to malnutrition.” - Rebecca Langer, Deputy Medical Advisor
How do you make a lasting impact in a country like Somalia? One of the best ways to bring about change is to arm people with knowledge.

In 2020, Amaal watched in agony as her two-year-old grew thinner and more ill each day. “I did not know what to do because we live far away from a town.”

In 2020, community health volunteers referred thousands of people like Amaal to our health and nutrition clinics. Most of the volunteers are mothers themselves, teaching other mothers how to keep their families safe. It’s a remarkably high-impact, cost-effective way to save lives, sustain health, and strengthen families in vulnerable countries.

Medair has trained a network of over 1,300 volunteers who share health, nutrition, and hygiene knowledge with their neighbours. When one visited Amaal, she told her about a clinic that provides free treatment for malnutrition including special high-calorie food.

“It was a miracle!” says Amaal. “My child started gaining weight and becoming healthy.”

Impact Highlights

1,307 community health volunteers.

250,647 people received health care.
A new day has dawned in Sudan.

For many years, Medair provided emergency support for vulnerable communities in Sudan, but we left the country reluctantly in 2012 when access and security deteriorated. At the time we left, we were the longest serving international NGO in West Darfur.

Within a month of returning in early 2020, the COVID-19 emergency began. We shifted our plans and supported a health clinic with handwashing stations and personal protective equipment. We provided people with hygiene items and shared public health information about the virus.

“People are coming to find us wherever we are sharing messages,” said Nasraldeen, community health promoter. “They are eager to learn about it, how to prevent it and keep their families safe.”

Multiple crises struck in 2020 including devastating floods, economic turmoil, and an influx of over 52,000 refugees from the Tigray region of Ethiopia. As we moved into 2021, we deployed a team to camps receiving people fleeing conflict in Ethiopia.

Impact Highlights

- 776 people received COVID-19 public health messaging in Sudan.
- 987,706 people received COVID-19 public health messaging worldwide.

In 2020, Medair reopened a country programme in Sudan, but we soon faced two unforeseen emergencies in COVID-19 and the Tigray refugee crisis.

- Food insecurity
- Climate disasters
- Disease outbreaks
- Limited essential services
- Over 1 million refugees
Global Emergency Response Team

In November, two massive category-4 hurricanes struck and devastated Honduras over the space of just two weeks. Medair’s Global Emergency Response Team (G-ERT) deployed to remote Gracias a Dios to assess the damage and begin an emergency response to help isolated families recover from the disaster.

It’s no secret: Emergencies are on the rise all around the world. One in 33 people globally needs humanitarian aid, more than ever before.

Being emergency-ready is a proven way to increase the speed of a response, reduce costs, and ultimately save more lives. This means having enough funds on hand for deployment and start-up, pre-purchasing and pre-positioning emergency supplies in strategic locations, and investing in a specialised team that monitors global crises in real-time and can deploy rapidly to emergencies.

Our Global Emergency Response Team (G-ERT) is a dedicated unit within Medair, based in Switzerland and remotely, and can travel anywhere in the world within 24-48 hours of a new emergency. Since 2010, the G-ERT has deployed over 21 times into new emergencies and launched many of Medair’s current country programmes.

2020 Highlights
• COVID-19 initial global training and response planning.
• Programme start-up in Sudan.
• Support of the Ebola response in DR Congo.
• Support for the Beirut explosion response in Lebanon.
• Hurricane response in Honduras.
• Filling critical gaps in senior positions.
850,000+
people assisted (2014-2020)

105,587
people assisted (2020)

**Iraq: Emergency to Recovery**

**In 2014, families who fled armed groups in Sinjar left everything behind.** Our first emergency response was to bring them shelter and essential household supplies like mattresses, blankets, cooking sets, and solar lanterns.

We operated health clinics and brought mobile services to areas where facilities had been damaged or medicines and staff were not available.

“Our medicines had been tossed outside and many things had been stolen,” said **Dr Abdullah (pictured right)**. “Medair brought us supplies we desperately needed like lab equipment, fuel for the ambulance, and kerosene for the generator. I am very proud of what we have achieved together.”

When people were able to return home and rebuild their communities, we restored water systems that had been damaged during fighting.
Over six years, our health programmes evolved as the crisis changed. Wherever we worked, we trained local volunteers and health professionals.

“I have learned so much here at Medair,” said Dr Ali. “My medical skills have improved because of all the training.”

Families received cash assistance to help them recover from the crisis.

“I bought an entrance for the door for my house, clothes for my children, and a cow,” said Matra (pictured left). “The cow provides milk and yoghurt for my children.”

To assist with the psychological impact of years of conflict, we developed psychosocial support programmes.

“This is so good for us to get together and talk about what is in our hearts,” said Raqqan. “We talk about our losses and share our feelings together. It helps us come together as a community.”

In 2020 we handed over our activities to government ministries and local partners who continue with reconstruction and development work. We served alongside hundreds of local staff who had themselves been affected by the crisis, and who remain members of the Medair family.
Syria continues to rebuild from its major crisis that displaced millions, devastated infrastructure, and left people without essential services like water or health care. The impact has been even greater for people living with physical disabilities.

In Syria, we rehabilitate damaged health clinics, and where possible we provide facilities for the provision of physiotherapy services. We train physiotherapy specialists, working with them to ensure they understand the holistic needs of each patient instead of focusing only on the physical disability. We also support those who care for people living with mobility impairments, showing them some ways to help their loved ones stay strong and ensure they have an active lifestyle and social life.

Our support for people living with limited mobility is all about ensuring that people have the dignity and the respect they deserve. Distributions of mobility devices such as walkers or wheelchairs ensure that people can move more easily outside of the house, and that they feel safe and dignified doing so.

**Impact Highlights**

144,976 consultations at 16 Medair-supported clinics.

482 people with mobility impairment received assistive devices.

27% of the Syrian population aged 12 and over are living with a physical disability.

- UN Humanitarian Needs Assessment Programme
Strict COVID lockdown restrictions took a severe toll on refugees in Jordan. Thousands lost access to support networks and essential services. “Things changed drastically,” said Tala, Medair Health Officer. “I could no longer see those people we serve face to face, but they still urgently needed our assistance.”

For refugees already coping with high anxiety and hopelessness, the isolation intensified their crisis. Before the lockdown, Medair provided mental health and psychosocial support, along with cash assistance to help families cover their essential needs.

To ensure people still received support, our mental health programming shifted to phone-based or online services. Emergency cash distributions were facilitated using cash transfer companies rather than banks, and COVID-19 awareness and prevention messaging was communicated via texts and phone calls.

“I spoke with an elderly lady who was so happy to hear from us that she started crying,” said Tala. “For me it was a simple phone call, but for her it really made a difference.”

Impact Highlights
9,335 people received cash assistance.
1,214 people received mental health/psychosocial support.
In August, a massive explosion ripped through the heart of Beirut, causing catastrophic damage. Sheltering the 300,000 people displaced by the blast became an urgent priority.

Safe shelter protects people from harsh weather, disease outbreaks, and the threat of assault. Before the dust had settled, our Lebanon team was on the ground, speaking to families whose homes had been damaged and carrying out emergency assessments.

Because of our work with Syrian refugees in Lebanon, Medair is one of the lead organisations in shelter-related interventions. Following the explosion, we rapidly scaled up our response, repairing damaged homes and connecting people affected by the blast with mental health services to cope with the trauma.

“I am forever grateful for the help you are providing me,” said Saad, as we repaired his home and installed new steps and handrails for his safety. “For the first time I feel like my voice has been heard. Your presence here has given me hope.”

Impact Highlights
164,972 people received shelter assistance.
19,464 people assisted in the Beirut explosion emergency response.
Yemen

44,623 people assisted

“While the only way to end the crisis in Yemen is ultimately through lasting and inclusive peace, there is still an opportunity to make a difference right now.”  – 2021 UN-OCHA HRP

World’s worst humanitarian crisis

Escalating conflict

Collapse of essential services

Near-famine conditions

Flooding and locusts

**Only half of the health clinics in Yemen are operational.** Restoring services involves providing exam-room and diagnostic equipment, improving accessibility for people with disabilities, training Yemeni health staff, and providing safe drinking water, handwashing, and sanitation facilities.

To support high levels of severe and complicated malnutrition, we established a referral system so children could receive the specialist care they needed to survive. Our community health volunteers spread the word about COVID-19 prevention along with nutrition, health, and hygiene messages.

Adding an ambulance service made a life-saving difference in one remote region. When a young woman with serious childbirth complications was rushed to hospital in our ambulance, she gave birth en route safely with the help of two medical assistants. “I don’t care if someone calls me in the middle of the night, if we can arrange the transport and a patient reaches the hospital on time, we can all help in saving a life,” said Abdul, Medair Health and Nutrition Manager.

**Impact Highlights**

41,167 people treated at Medair-supported health clinics.

67 health care workers trained.
During long and harsh winters in the remote Central Highlands, families cannot grow any food and are forced to use up all their food stocks.

The snow was only just melting in early 2020 when COVID-19 restrictions led to food shortages and rising prices, meaning people needed urgent help.

Cash assistance enabled families to purchase food and bridge the gap until their next harvest. In some communities, Cash for Work projects involved the building of trenches and check dams to protect from floods caused by melting snow.

Nearly 3,000 women learned to grow kitchen gardens which improve dietary diversity and food security.

“We had no knowledge of vegetable growing except onions,” said Siamoy. “I learned to cultivate all the seeds and now I have a good kitchen garden beside my house. Now I am helping the neighbours and giving them fresh vegetables.”

Impact Highlights

53,796 people benefited from cash assistance.
2,935 women received training and support in growing vegetable gardens, benefiting 23,480 people.
Sayed is a volunteer in Kutupalong Refugee Camp where Medair and World Concern operate four nutrition clinics. She lives in the camp, where overcrowding puts people at high risk from COVID-19.

In March, when a nationwide lockdown restricted Medair’s access to children being treated for malnutrition, Sayed and other Rohingya volunteers led the way in ensuring services continued. While observing COVID-19 protocols, Rohingya staff and volunteers taught mothers how to use a measuring tape and monitor nutritional progress at home.

Malnutrition robs children of their health and strength, impairs brain development, and steals away potential. Yet children can make a full recovery with proper treatment. Even when food is scarce, malnutrition can be greatly reduced by teaching families how to prevent it.

“I’ve learned so many things about hygiene, the importance of breastfeeding, how babies shouldn’t eat solid food before six months,” said Sayed. “All of this, I can use to teach and help my family and community.”

Impact Highlights

22,301 people reached with nutrition messages.

6,100 people treated for acute malnutrition in Bangladesh.
## Our Key Financial Indicators

**Programme Income and Expense 2020 (USD)**

<table>
<thead>
<tr>
<th>Country</th>
<th>Income</th>
<th>Expense</th>
</tr>
</thead>
<tbody>
<tr>
<td>Afghanistan</td>
<td>6,610,225</td>
<td>6,610,225</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>5,342,037</td>
<td>5,342,037</td>
</tr>
<tr>
<td>DR Congo</td>
<td>18,712,579</td>
<td>18,712,579</td>
</tr>
<tr>
<td>Honduras1</td>
<td>180,317</td>
<td>180,317</td>
</tr>
<tr>
<td>Madagascar</td>
<td>1,358,865</td>
<td>1,358,865</td>
</tr>
<tr>
<td>Middle East</td>
<td>32,234,121</td>
<td>32,255,317</td>
</tr>
<tr>
<td>Somalia</td>
<td>5,705,800</td>
<td>6,073,276</td>
</tr>
<tr>
<td>South Sudan</td>
<td>19,016,711</td>
<td>19,016,711</td>
</tr>
<tr>
<td>Sudan 2</td>
<td>336,253</td>
<td>312,929</td>
</tr>
<tr>
<td>Closed country programmes 3</td>
<td>7,621</td>
<td>11,471</td>
</tr>
</tbody>
</table>

1. Emergency response
2. New programme started in 2020
3. Mozambique and Philippines
Operating Expense 2020
- 88.6%
  - Humanitarian Expense (Direct)
  - Humanitarian Expense (Indirect)
  - General Management
  - Fundraising

Operating Income 2020
- 73.1%
  - 13.0%
  - 6.9%
  - 6.8%
  - 0.3%

Beneficiary Expense by Sector 2020
- 41.1%
  - 15.8%
  - 15.7%
  - 10.1%
  - 1.1%
  - 0.4%

- Health
- Nutrition
- Shelter and Infrastructure
- Water, Sanitation, and Hygiene
- Cash Assistance
- Food and Livelihoods
- Other

Governments, EU, UN
Corporate, Foundation, and Other Private Donations
Other Institutions and NGOs
Gifts-in-Kind
Other Income
Consolidated Statement of Financial Position as at 31 December 2020
(All figures shown are in USD)

<table>
<thead>
<tr>
<th>Assets</th>
<th>31-12-2020</th>
<th>31-12-2019</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CURRENT ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and bank accounts</td>
<td>13,432,422</td>
<td>9,924,914</td>
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<tr>
<td>Donor receivables</td>
<td>11,684,762</td>
<td>13,359,226</td>
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<tr>
<td>Other receivables</td>
<td>209,999</td>
<td>672,114</td>
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<tr>
<td>Inventory</td>
<td>48,181</td>
<td>64,158</td>
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<tr>
<td>Prepayments</td>
<td>1,253,361</td>
<td>1,091,830</td>
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<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td>26,628,725</td>
<td>25,112,242</td>
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<tr>
<td><strong>LONG-TERM ASSETS</strong></td>
<td></td>
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<tr>
<td>Financial assets</td>
<td>1,196,394</td>
<td>191,323</td>
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<tr>
<td>Capital assets</td>
<td>640,744</td>
<td>797,209</td>
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<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td>1,837,138</td>
<td>988,532</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Liabilities, Funds, and Capital</th>
<th>31-12-2020</th>
<th>31-12-2019</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CURRENT LIABILITIES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts payable</td>
<td>1,689,964</td>
<td>2,310,907</td>
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<td>Donor payables</td>
<td>287,472</td>
<td>262,919</td>
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<tr>
<td>Short-term debt</td>
<td>-</td>
<td>-</td>
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<tr>
<td>Accrued liabilities</td>
<td>3,670,088</td>
<td>2,810,651</td>
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<tr>
<td>Deferred revenue</td>
<td>6,115,981</td>
<td>6,151,882</td>
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<tr>
<td>Provisions</td>
<td>3,099,709</td>
<td>1,008,890</td>
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<tr>
<td>End-of-contract benefits</td>
<td>35,346</td>
<td>216,685</td>
</tr>
<tr>
<td><strong>TOTAL CURRENT LIABILITIES</strong></td>
<td>14,898,560</td>
<td>12,761,234</td>
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<tr>
<td><strong>LONG-TERM LIABILITIES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Long-term debt</td>
<td>2,229,204</td>
<td>3,052,921</td>
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<tr>
<td>End-of-contract benefits</td>
<td>566,515</td>
<td>505,599</td>
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<tr>
<td><strong>TOTAL LONG-TERM LIABILITIES</strong></td>
<td>2,795,719</td>
<td>3,558,520</td>
</tr>
<tr>
<td><strong>TOTAL LIABILITIES</strong></td>
<td>17,694,279</td>
<td>16,319,754</td>
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<tr>
<td><strong>RESTRICTED FUNDS</strong></td>
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<td></td>
</tr>
<tr>
<td>Restricted income funds</td>
<td>507,981</td>
<td>737,620</td>
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<tr>
<td>Restricted programme funds</td>
<td>1,265,576</td>
<td>1,216,418</td>
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<tr>
<td><strong>TOTAL RESTRICTED FUNDS</strong></td>
<td>1,773,557</td>
<td>1,954,038</td>
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<tr>
<td><strong>CAPITAL/UNRESTRICTED FUNDS</strong></td>
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<tr>
<td>Unrestricted capital</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Allocated capital</td>
<td>8,998,027</td>
<td>7,826,982</td>
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<tr>
<td><strong>TOTAL FUNDS AND CAPITAL</strong></td>
<td>10,771,584</td>
<td>9,781,020</td>
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<tr>
<td><strong>TOTAL LIABILITIES, FUNDS, AND CAPITAL</strong></td>
<td>28,465,863</td>
<td>26,100,774</td>
</tr>
</tbody>
</table>
Consolidated Income Statement as at 31 December 2020

(All figures shown are in USD)

### Operating Income

<table>
<thead>
<tr>
<th></th>
<th>31-12-2020</th>
<th>31-12-2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants (Restricted)</td>
<td>72,646,683</td>
<td>75,141,964</td>
</tr>
<tr>
<td>Institutional Grants</td>
<td>67,006,991</td>
<td>66,222,469</td>
</tr>
<tr>
<td>Other Grants</td>
<td>5,639,692</td>
<td>8,999,495</td>
</tr>
<tr>
<td>Private donations</td>
<td>11,614,736</td>
<td>9,497,226</td>
</tr>
<tr>
<td>Unrestricted</td>
<td>5,201,134</td>
<td>4,875,850</td>
</tr>
<tr>
<td>Restricted</td>
<td>6,413,602</td>
<td>4,621,376</td>
</tr>
<tr>
<td>Gifts-in-Kind</td>
<td>6,121,960</td>
<td>5,519,896</td>
</tr>
<tr>
<td>Other income</td>
<td>265,371</td>
<td>432,240</td>
</tr>
<tr>
<td>Unrestricted</td>
<td>192,127</td>
<td>389,243</td>
</tr>
<tr>
<td>Restricted</td>
<td>73,244</td>
<td>42,997</td>
</tr>
<tr>
<td></td>
<td>90,648,750</td>
<td>90,591,326</td>
</tr>
</tbody>
</table>

### Financial Result

<table>
<thead>
<tr>
<th></th>
<th>31-12-2020</th>
<th>31-12-2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial income</td>
<td>422,890</td>
<td>9</td>
</tr>
<tr>
<td>Financial expense</td>
<td>-111,652</td>
<td>-79,661</td>
</tr>
<tr>
<td>Realised gain/(loss)on exchange</td>
<td>381,299</td>
<td>-758,868</td>
</tr>
<tr>
<td>Unrealised gain/(loss)on exchange</td>
<td>-56,888</td>
<td>-33,824</td>
</tr>
<tr>
<td></td>
<td>635,649</td>
<td>-872,344</td>
</tr>
</tbody>
</table>

RESULT BEFORE EXTRAORDINARY INCOME 990,564 63,298

RESULT BEFORE CHANGE IN FUNDS 990,564 63,298

### Fund Allocations

<table>
<thead>
<tr>
<th></th>
<th>31-12-2020</th>
<th>31-12-2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Withdrawal from/(allocated to) restricted funds</td>
<td>180,481</td>
<td>-906,928</td>
</tr>
</tbody>
</table>

ANNUAL RESULT BEFORE ALLOCATION TO CAPITAL 1,171,045 -843,630

Allocated to/(withdrawal from) unrestricted funds -171,045 843,630

RESULT AFTER ALLOCATION - -

Funding Partners
Organisational partners listed alphabetically and whose contribution to Medair was greater than USD 10,000 in 2020.

United Nations, Intergovernmental, and Governmental Partners
• Australian Department of Foreign Affairs and Trade
• Bureau of Humanitarian Assistance (US)
• Dutch Ministry of Foreign Affairs
• EU Civil Protection and Humanitarian Aid
• EU Regional Trust Fund in Response to the Syrian Crisis
• Fürstentum Liechtenstein (LI)
• German Federal Foreign Office
• Global Affairs Canada
• International Organization for Migration
• Ministère de l’Europe et des Affaires Etrangères - Centre de Crise et de Soutien (FR)
• Polish Center for International Aid
• Slovak Aid
• Swiss Agency for Development and Cooperation
• UK Government
• UN High Commissioner for Refugees
• UN Office for the Coordination of Humanitarian Affairs
• US Agency for International Development
• World Food Programme

Other Institutional and Public Partners
• Agence de l’eau Rhône Méditerranée Corse (FR)
• Canton of Aargau (CH)
• Canton of Basel-Stadt (CH)
• Canton of Luzern (CH)
• Canton of Zurich (CH)
• Région Auvergne-Rhône-Alpes (FR)
• Stadt Bülach (CH)
• Stadt Zürich (CH)
• Swiss Solidarity
• Ville de Carouge (CH)
• Ville de Meyrin (CH)

Non-Governmental and Network Partners
• Center for Disaster Philanthropy (US)
• EO Metterdaad (NL)
• Interaction (CH)
• International Rescue Committee
• Red een Kind (NL)
• Tearfund Australia
• Tearfund New Zealand
• Transform Aid International (AU)
• ZOA (NL)

Corporate, Foundations, and Private Organisational Partners
• All We Can (UK)
• Aligro (CH)
• Aquila Family Charitable Trust (UK)
• Beatrice Laing Trust (UK)
• Cartier Philanthropy (CH)
• design comma communications GmbH (CH)
• Diaconaat CGK (NL)
• Domenica Pfenninger-Stiftung (CH)
• Dr. Heinz-Horst Deichmann Stiftung (DE)
• Ernst Göhner Stiftung (CH)
• Fagus lucida Stiftung (CH)
• Fondation Alfred et Eugénie Baur (CH)
• Fondation Demaurex Frères (CH)
• Fondation du Protestantisme
• Fondation Ernest Matthey (CH)
• Fondation Joy (CH)
• Fondation Philanthropique Famille Sandoz (CH)
• Fondation Pierre Demaurex (CH)
• Fondation Sesam (CH)
• Fondation SUEZ (FR)
Certified to the Core Humanitarian Standard

During 2020, Medair passed a maintenance audit in accordance with the Core Humanitarian Standard (CHS). The CHS is the gold standard for humanitarian NGOs to ensure accountability to the communities where they respond, the delivery of high-quality aid, and putting people first in an emergency response.

To download the 2020 Annual Report visit: medair.org/Annual-Report-2020

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 staff or people served. 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.
At the start of COVID-19 in Madagascar our Emergency Response Team worked with health clinics to train staff about preventing the spread of coronavirus. As well as working in communities to deliver messages, we focused on helping health professionals understand how to protect themselves.