Wayuu, leader, change maker!

Ruth Uriana de Armas (pictured on the title page), a 21-year-old indigenous Wayuu woman, is committed to addressing critical issues affecting the world around her, eradicating stereotypes, building her self-confidence and technical skills, and creating change in her community.

Cycles of violence, unemployment, and the impacts of climate change have left young people in the northwestern Colombian province of La Guajira with few prospects for the future.

The 3-year Youth Leadership School run by Malteser International and the local organization Programa de Desarrollo y Paz del Cesar empowers indigenous and Afro-Colombian youths to transform their communities. “For me, the most important contribution of the Youth Leadership School is that it has managed to open our eyes and encourage us to broaden our horizons,” Ruth says. “The first two years were spent on theory classes and hands-on workshops on topics such as health and hygiene, culture and environmental protection, food security, arts and communication. The video transformation workshops were particularly exciting because I discovered my talent for audio-visual communication. Since then, my goal has been to create more awareness about my culture.”

Besides imparting knowledge and methods, the first two years of the leadership school focus on strengthening self-confidence and faith in one’s own abilities. In the final year, the trained “change makers” apply what they have learned, carrying out their own projects in their villages and working with members of their communities on issues that affect them deeply.

Having graduated from the leadership school, Ruth is brimming with ideas for her native village of Alewua in La Guajira and is optimistic about the future: “I have noticed great progress among the young people in Alewua,” she says. “We are now going to be looking beyond the boundaries and obstacles that were set to us. We know what we want for Alewua and we will continue to work on achieving our dreams.”
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Malteser International

Who we are
We are the international humanitarian relief agency of the Sovereign Order of Malta. For over 60 years, we have been standing by people affected by poverty, disease, conflict, and disaster – to help them lead a healthy life with dignity.

What we do
We undertake emergency relief in crisis such as natural disasters, epidemics, and armed conflicts. We support the most vulnerable people, including refugees and displaced people, to protect their health by strengthening medical structures in their service, encouraging disaster risk reduction, and ensuring access to good nutrition, safe water, sanitation, and hygiene. Our long-term transitional aid and development programs empower communities affected by crisis to boost their resilience and transform their lives for the better.

How we work
Our work is founded on Christian values and humanitarian principles. We reach out to people in need without distinction of race, religion, or political opinion.

In 2019, Malteser International worked in 32 countries, supporting over 100 development and humanitarian aid projects, reaching nearly 3 million people.
“For a life in health and dignity”
Message from the President

Dear Friends,

The global humanitarian system is saving more lives in conflicts, caring for more sick people and feeding more hungry people in more places than ever. Despite this progress, a record 167 million people needed humanitarian assistance in 2019 to survive, largely because of conflicts and extreme weather events. The system is struggling to keep pace with the growing demands of more frequent and more enduring humanitarian crises exacerbated by impacts of climate change, infectious diseases and economic shocks. As the role of humanitarian aid amidst these crises becomes ever more important, delivering that aid to people in need has become even more complicated.

Looking back on the year, we are grateful to you for what we have accomplished together. Across Syria, the Bahamas, Bangladesh, and DR Congo, among many other places, our work delivered positive, tangible and measurable impact: We provided lifesaving aid, partnered with local communities and organizations to achieve long-term solutions and used our strong global network through the Order of Malta to reach the most vulnerable wherever they were, assisting nearly 3 million individuals.

As a growing organization it is important to ensure quality in all our work, and we have progressed in several ways: We have invested in reinforcing our support functions, established better connectedness to inform organizational development and promote learning, and we have introduced new instruments that have strengthened our commitment to accountability and efficiency.

Our mission to ensure a life in health and dignity for all remains as important as ever. In the pages ahead, you will see results of some of the work we have focused on in the year 2019, including efforts to save lives by changing the nature of our emergency response, empowering local communities to take control of their futures while ensuring inclusion and leadership. All of this is challenging, life-changing work – and none of it would be possible without your generosity and commitment to us, and to the people and communities we serve. Thank you.

Sincerely,

Thierry de Beaumont-Beynac,
President of Malteser International

Thierry de Beaumont-Beynac
“My work in humanitarian aid has helped me develop a new perspective on the importance of life and my purpose as a human being.”

Betul Abras, Psychologist / Monitoring and Evaluation Officer in Turkey

PHOTO: MALTESER INTERNATIONAL
Forging lifelines in the most severe crises

The number of people globally caught up in humanitarian crises is rising every year. Climate-related shocks have become more frequent and severe, conflicts are increasingly protracted, and more countries are experiencing some form of violent conflict. Malteser International’s mission is to help people survive by providing rapid assistance during conflicts and disasters, but also to partner with local organizations, community and national bodies to change the conditions that create crises. We do this while supporting long-term solutions that help poor communities live in health and dignity.

In 2019, 167 million people – including a record 79.5 million displaced people – were dependent on humanitarian assistance. Our mission is to help people in extreme need – with a particular emphasis on those who are most vulnerable and those who receive little or no help from other sources. During the course of the year, Malteser International brought vital humanitarian relief to people affected in some of the world’s most severe crises while continuing our work in forgotten crises where suffering is immense, but largely ignored. All these crises arise from multiple causes; conflict, (forced) displacement, poverty, extreme climate, and economic collapse.

Our work remains challenged by the fragility of the contexts in which we work. Attacks on aid and healthcare workers have been pervasive in conflicts in recent years, not least in the very complex long-running war in Syria. Every four days in 2019, a healthcare facility in the country came under attack. This included multiple attacks on the Malteser International-supported Kafr Nobl Surgical Hospital and the staff of our partner organizations in the northwestern region of Idlib. Each attack brought medical services to a standstill and left thousands at risk by denying them essential lifesaving care. These attacks are evidence of a broader trend: the changing nature of conflicts and crises in today’s world. This change demands that we rethink our assistance. We understand that vulnerable people must be our primary partners as humanitarian agents for change.

Supporting refugees and displaced people
Supporting people driven from their homes by conflict or disaster has been a core component of Malteser International’s mission since our first relief operations
Malteser International: Our support before, during, and after crises

| Improve disaster preparedness | Work with and support first responders to provide emergency relief and respond to immediate needs for survival: health, food, water, sanitation, and hygiene (WASH), protection and cash | Support recovery and reconstruction |

in Vietnam in 1966, and today we are still active in some of the most challenging displacement crises. From conflict regions in Syria, South Sudan, Nigeria, and Myanmar to host countries like Bangladesh, Uganda, Lebanon, and Colombia, we work to assist displaced people by providing lifesaving healthcare, food, water, sanitation, and hygiene support.

The vast majority of refugees are hosted in developing countries. There, they often settle in poor regions where the standard of living is well below national average. As crises last longer and become recurrent, refugees find themselves in protracted displacement situations with 17 years being the average length of time spent in camps. This places huge additional strain on basic services of the host country. We therefore work to address the needs of refugees and their host communities by building self-reliance for vulnerable families and by helping displaced people find their way back to a dignified life. This is the case in Colombia, where we delivered medical services to refugees who fled from the economic crisis in Venezuela, and at the same time worked with indigenous and Afro-Colombian communities that develop strategies to improve food security and build resilience to climate change.

Building resilience and shaping transition

Devastation caused by extreme weather events has spiked sharply in recent years as climate change increases the intensity and frequency of storms, floods, and drought. These events cause growing uncertainty and
contribute to a cycle of vulnerability in many countries, undoing past development advances. While we are quick to respond after disasters and other emergencies, we aim to support vulnerable people in order to anticipate, cope with, respond to, and manage new hazards. In Myanmar, for example, a holistic approach integrating healthcare, sanitation, income generation, and disaster risk reduction reached 196,742 people in communities at risk, ensuring that they are healthier and safer to better withstand future crises.

Communities riven by violent conflict or disaster often face tremendous challenges during recovery. Iraq is an example. More than 2 million people remain internally displaced, and some 9 million remain in need of humanitarian assistance after nearly four years of war against the so-called Islamic State. This is where our years-long experience in transitional assistance comes in. By combining short-term relief measures with longer-term development and social cohesion programs, we support post-conflict societies along the path out of acute conflict and lay the ground for sustainable development and peace. At the heart of this approach is the aspiration to connect humanitarian, developmental and peacebuilding efforts in a nexus that reduces needs and vulnerability during and long after crises.

**Doing good – doing it well**

Demand for our support as a humanitarian organization is increasing, and we are compelled to become better at what we do. Given the enormous scale of global humanitarian crises and the vast need for humanitarian aid, no single organization can solve the problem. Progress requires a concerted effort of people, organizations and communities working together toward a shared goal. For Malteser International, partnerships remain crucial, and we continue to collaborate closely with civil society organizations, local government institutions, donors, and enterprises. And since contexts vary greatly from one country to another, blueprint approaches can be recipes for disaster. We cannot afford to take a “one-size-fits-all” approach. Our programs – be it an emergency response or a longer-term development intervention – are tailored to the specific needs of the contexts and locations as identified by the affected communities themselves, shaped by their ideas, and built upon their capacities and resources. To achieve this, we give space to the people we serve and listen closely to understand their needs and aspirations, after which we jointly look for inspiration on how to solve the problems on hand.

But it is not enough to do good. To ensure the quality of our work, we have a quality management system in place, based on standards like the Humanitarian Charter, the Protection Principles, and the Core Humanitarian Standard. We also constantly learn from our experiences and adjust our approaches and strategies. 2019 saw us put more intentional effort into increasing engagement with communities. For instance, we learned from our Ebola response in DR Congo that listening to and working with affected communities to find the best solutions can have long-lasting impact. If we are to enable the most vulnerable to live in health and dignity, allowing them to have control over their own recovery after crises will remain central to the way we work across all responses.

**OUR IMPACT IN SYRIA IN 2019**

<table>
<thead>
<tr>
<th>Impact</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>326,527</td>
<td>people reached with lifesaving aid, healthcare, safe water, and sanitation</td>
</tr>
<tr>
<td>11,199</td>
<td>lifesaving emergency surgeries carried out</td>
</tr>
<tr>
<td>6,250</td>
<td>safe deliveries for displaced women</td>
</tr>
</tbody>
</table>
Our humanitarian operations in 2019

In 2019, Malteser International brought vital relief to communities affected by some of the most severe humanitarian crises in the world.

**Bahamas**
- Hurricane Dorian response: rehabilitation of educational facilities in Marsh Harbour

**Colombia**
- Medical care, psycho-social support, and food assistance for Venezuelan refugees

**DR Congo**
- Ebola epidemic response with emergency stocks of essential medicine and personal protective equipment, treatment of suspected cases and training for healthcare workers
Syria
Emergency medical care, water and sanitation, non-food items for displaced people

Bangladesh
Healthcare, food, and psycho-social support for refugees in Cox’s Bazar

Mozambique
Cyclone Idai response: installation of water pumps and hygiene awareness to prevent the spread of water-borne diseases

South Sudan
Clean water, hygiene facilities, food, agricultural support, and cash assistance for communities affected by conflict
“The knowledge I gathered has not only helped me protect myself but also others in the community.”

Roy Villanueva, President of People with Disabilities Group in Baybay, Philippines

PHOTO: JANÁ AŠENBRNÍKOVÁ
Building resilient and inclusive communities

As one of the most vulnerable and marginalized social groups, people with disabilities suffer the most from the effects of disasters and are less likely to benefit from disaster risk reduction measures. For us, empowering marginalized groups to lead and promote equitable and universally accessible response, recovery, and rehabilitation is key to building inclusive and resilient communities.

Bullying has always been part of Roy Villanueva’s life. A polio infection when he was one year old led to partial paralysis. “I have always been picked on for my disability,” the 43-year-old from Barangay BayBay in the eastern Visayas region of the Philippines says. “But I learned to cope with the bullying. I use my humor to confront people who make fun of me or even verbally attack me.”

Leaving no one behind

Asia-Pacific is the world’s most disaster-prone region with an estimated 650 million people with disabilities. They are more likely to die in a disaster than those without disabilities. Yet, they remain largely unaccounted for in most disaster risk reduction (DRR) plans and policies.

Malteser International’s disability-inclusive, community-based DRR programs in the region put people with disabilities and other marginalized groups at the center of holistic programs that tackle the causes of vulnerability and strengthen the resilience of communities at risk.

We work to strengthen local groups of disabled people, advocate with local governments for more inclusive disaster risk management policies, promote community disaster risk awareness and preparedness and support sustainable, resilient livelihoods. This approach provides the technical and logical framework that integrates the most vulnerable members of a community and enhances their ability to cope with future disasters while making sure that relief operations and structures are fully accessible.

“When Malteser International helped establish the People with Disabilities group, I was asked to become president,” Roy says. “I initially refused, because I didn’t believe I was up to the task. Eventually, I accepted, and I don’t regret this decision. We have worked with Malteser International to register some 380 people with disabilities in Barangay BayBay alone.” The PWD-ID is the standard identification card for people with a disability (PWDs) in the Philippines. It can be used to take advantage of certain benefits, including a Value Added Tax (VAT) exemption and educational assistance.

Genuine collaboration between various stakeholders is key to ensuring that DRR strategies are both effective in reducing risks and saving lives and responsive to the needs of people with different types of disabilities. In 2013, Malteser International co-founded the disability-inclusive DRR-Network (DiDRRN), a consortium of organizations working to secure the active participation and contribution of people with disabilities in disaster risk reduction policy and practice. Enabling them and their representative groups to become active agents of change is both the starting point for realizing equal access and participation and the guarantor for lasting change. “I have attended many trainings and seminars where I learned so much,” Roy says. “The knowledge I gathered has not only helped me protect myself but also others in the community.”

“Responses become more effective when we give voice to marginalized groups that are so often left behind. But not only do we give them a voice, we also give them choices to become active stakeholders and change makers in society.”
“…the glue that binds society”

Social cohesion describes the sense of community, solidarity and togetherness in a society and is a very important driver of long-term development. Dr. Sarah Markiewicz, Malteser International’s Social Cohesion Advisor, discusses our approach to fostering peace in regions with a history of conflict or mistrust between different identity groups.

This is a relatively new field of activity for Malteser International as opposed to healthcare, why are we focusing on it now?

Sarah Markiewicz: Over the years, Malteser International has gained experience working in diverse communities and cultural contexts. We have realized that sustainable interventions must not only address the needs of a society – healthcare, infrastructure, and so on – but must also deal with issues that are essential for a fulfilling life and that contribute to improved understanding between people and societies. Social cohesion is a cross-cutting topic that can be easily combined with existing fields of activity at Malteser International. The future will see us intensify our engagement in this field.

Are there any prerequisites for the implementation of such programs?

Sarah Markiewicz: It is important to identify the factors that bring members of a society together and build upon those factors. Our approach at MI is to promote initiatives that bring people together and are based on shared values and interests. This can be done through sporting activities, art, dance, education, culinary activities, and many other things – the possibilities are endless. By participating in activities that promote shared interests, opportunities are created to get to know each other better, build trust, and resolve differences. This way people can recognize their neighbors based on their similarities rather than their differences.

What role do women play in peace-building efforts?

Sarah Markiewicz: Women are essential to peacebuilding. In northern Iraq, for example, their role as backbone of many families and their critical contribution to the local economy earns them an influential voice. Women have also been known to pass on important values to children in many communities. This puts them in a better position to engage in de-radicalization efforts and countering violent extremism, if they are adequately prepared to deal with divisive opinions.
The Islamic State's (IS) reign of terror between 2014 and 2017 will linger in the memories of many Iraqi communities for a long time to come, especially in the Nineveh Plains. The group's far-reaching violence led to more than the material damage of mosques, churches, hospitals, cultural sites, and residential areas in the region. More critically, long-standing and at times strained relations between the various ethno-religious groups were ruptured. In 2017, the government of Iraq declared victory over IS, but the country now faces the task of winning peace. Malteser International supports the people in the Nineveh Plains of northern Iraq as they heal and restore their communities, re-establish old ties, and secure the basis for peaceful coexistence.

The Ninewa Return Program

The Nineveh Plains are home to many of Iraq’s ethnic and religious communities, including Christians, Sunni and Shiite Arabs, Yazidi, Turkmen, Sunni Shabak, Shi’ite Shabak, Kakae, and Kurds. “During IS occupation, the jihadists established a ‘caliphate’ based on Sharia law and propagated a fundamentalist interpretation of Sunni Islam. Thousands of followers of other faith groups as well as many Muslims were driven out of their homes, murdered, or enslaved. The armed conflicts waged against the group led to the destruction of several villages. Since 2018, Malteser International has been providing support to returning families across the region,” says Iraqi-born Tharaa Simaan, Monitoring and Evaluation Officer for Malteser International’s Social Cohesion component of the Ninewa Return Program.

As with most Malteser International programs worldwide, our work to facilitate the return of displaced people and to support peaceful coexistence in northern Iraq benefits from the expertise of numerous national and international partners. The Ninewa Return Program combines medium and long-term efforts that help to meet the region’s recovery needs; restoring access to essential services like education; rehabilitating critical infrastructure; creating access to jobs; supporting local businesses; and fostering social cohesion.

Unity in diversity

“When people hear ‘social cohesion’, they think we are bringing different groups together to talk about religion. But we do the opposite. When people from so many cultural and religious backgrounds come together, there are obviously many ideas and thoughts that are bound to divide them. We prefer to focus on those issues that unite people,” Simaan says, explaining Malteser International’s social cohesion approach in Iraq. “The three partners we work with do not have a religious background or approach. We believe people get to know each other better when they engage in joint activities. One of our partners, the Women Rehabilitation Organization (WRO), offers numerous workshops and training courses where women from all ethnic-religious groups come together to learn new skills. Another partner, Un Ponte Per, builds and manages youth centers where young people from different backgrounds spend time together, engage in sporting activities, or make music.”

The work we do is yielding results, but we still have a long way to go, and sustainable progress requires time. “It takes patience to see progress, and we are still at the very beginning,” Simaan says. “The communities we work with were liberated from IS only two years ago. Many people are still very traumatized.” However, there are already success stories: last Christmas, Christians and Muslims came together in a village in the Tel Kaif district to light the Christmas tree. In another town, people brought colorful eggs to their Yezidi neighbors for their New Year celebration. “These different groups have lived in relative peace for centuries and they can do so again,” Tharaa Simaan says confidently.

IRAQ: NINEWA RETURN PROGRAM IN 2019

| 2,000 | homes reconstructed |
| 10  | schools rehabilitated |
| 3   | youth centers opened |
The 2016 peace agreement between the Government of Colombia and the Revolutionary Armed Forces of Colombia (FARC) promised to bring respite to many vulnerable communities in Colombia after more than 50 years of civil war, which have profoundly altered social dynamics in many parts of the country.

However, political conflict, natural disasters, and the humanitarian crisis in neighboring Venezuela threaten to undermine that promise. Nearly 1.8 million Venezuelans have arrived in the country, and many have settled in underserved rural areas like La Guajira, one of Colombia’s poorest departments. This is not only putting a strain on individual families but also on local resources. Malteser International’s comprehensive rural development strategy in the region involves efforts to strengthen the peace process by providing programs for healing, trauma relief, youth leadership, and livelihood creation.

La Guajira has had a history of chronic food insecurity and malnutrition, even before the current influx of migrants. 53 % of the department’s 1 million people live below the poverty line. Over half of its residents are indigenous peoples like the Wayuu, Wiwa, Kogui, Arhuacos, and Afro-Colombians. The department has the highest infant mortality rate in the country, and 96% of the rural population don’t have access to potable water. The region is also particularly prone to drought. With the support of various partners and community members, our initiatives address issues at three layers of the society, namely:

**Individual**: Here, we work with individuals to deal with personal trauma and develop life goals. Each project involves social workers who work on community development initiatives that build soft skills in individuals, including civic participation and conflict resolution.

**Family & friends**: This part involves strengthening mutual aid, supporting the healing process for families that were victims of forced displacement, violence, and death.

**Community**: Our work with members of various communities aims at establishing trust and dialogue among them, thus creating development prospects.

Interventions to improve food security and livelihoods can bolster the social fabric of vulnerable communities.

PHOTO: MALTESER INTERNATIONAL
Development and peace go hand in hand

“Building resilient rural livelihoods and communities is a key strategy for lifting La Guajira out of poverty and promoting peace,” says Ricardo Tapia, Program Coordinator in La Guajira. “In 2019, we provided training in agroforestry, beekeeping, traditional crocheting and seafood processing. These activities have not only increased income opportunities for over 800 families (4,500 people) but have also improved relations between them.”

To combat the effects of climate change, we worked with members of the community to establish community teams for bushfire control and environmental guardians. These teams helped spread knowledge on best practices for sustainable farming, water conservation, reforestation and prevention of forest fires. Their role in preventing and controlling forest fires, often in collaboration with other community teams, has strengthened ties within and between communities.

Another aspect of Malteser International’s efforts is to provide comprehensive healthcare services that include support for better mental and community health. Over 15,000 people have been reached with physical and mental healthcare services. “Development and peace go hand in hand, so strengthening all aspects of community development, be it rural development, health, or psycho-social activities, are an important basis for fostering social cohesion,” Tapia says.

Focus on youths and women

We believe that excluding youths and women from peace-building efforts will marginalize and silence their voices. On average, the young people in the region have more years of education than the adults, and the gap is even more favorable for them in terms of access to new communication technologies, information, and knowledge.

Malteser International is developing the leadership potential of marginalized young people from the department, empowering them both to engage in decision-making and as pro-active change makers in the society. In 2019, 50 young men and women graduated from a 3-year Youth Leadership School run by Malteser International and the local organization Programa de Desarrollo y Paz del Cesar. “They have gained skills in environmental protection and hygiene that will be important for their communities,” Tapia says. “They represent a new generation of effective peace advocates in this region.”

Given the importance assigned to gender equality as a critical indicator of social cohesion, insights into the lived experiences of women in the region must be gained if they are to play a role in promoting a peaceful and cohesive society. “The violence of the past has had a huge impact on many women in the region. Addressing the impact of trauma is therefore an important building block for social cohesion, especially in a community affected by conflict and displacement.”

Malteser International works with community therapists to help women who have experienced gender-based violence heal, regain a sense of self and a positive identity, and lay the foundations for building supportive social networks across both refugee and host communities. Participants have acknowledged positive effects, including reduced isolation, expanded social support networks, and a generally improved well-being as well as a stronger self-confidence.

“It is usually a difficult and painful process for many women, but the result is mostly personal and community healing,” Tapia says. “Ultimately, our work not only provides the support that vulnerable communities in Colombia need. Our vision for a life in health and dignity means that we must also work to promote social cohesion if we are to help usher in a new era of peace in Colombia.”
“Our water points are kept running by continuous maintenance and cooperation with the community. Quality cannot be achieved without accountability.”

Alfred Chandonga, Project Coordinator in Uganda

PHOTO: MALAIKA MEDIA
Accountability from the ground up!

As the recipient of public funds and the trust of thousands of generous individuals, Malteser International has an obligation to be transparent and accountable to our donors, partners, and the communities we work with. It is not enough that our support is well-intentioned. This conviction fuels our drive to find more effective and efficient ways of working.

How we provide assistance often tells people in need more about our values and principles than the assistance provided. Therefore, accountability is a double endeavor for us: improving the quality and effectiveness of our work, and doing so in a manner that upholds the core values we espouse – humanity, impartiality, and respect for human dignity.

People-centered support
Accountability towards people affected by crises sits at the heart of everything we do, and it is reflected in our people-centered approach to providing support. This means that we put relevant mechanisms in place to ensure that communities are meaningfully and continuously involved in decisions that directly affect them. Thus, we not only demonstrate a responsible use of power but also recognize the inherent dignities and capacities of people in crises as well as their ability to be independent.

To ensure that communities define their own needs and take ownership of the assistance they receive, our approach encompasses four actions towards them:
1. Ensuring active participation and inclusion
2. Transparent communication during assessments and project implementation
3. Allowing and listening to feedback
4. Learning from feedback gathered and adapting programs

Ensuring quality
To ensure the quality of our work, we have a quality management system in place, based on quality standards like the Core Humanitarian Standard on Quality and Accountability (CHS), an internationally recognized set of principles describing the essential elements of accountable and high-quality humanitarian aid. Malteser International is also a member of the CHS Alliance.

Our activities – including our work with other partner organizations – integrate support for safe and accessible complaint mechanisms, quality, inclusive and accessible assistance as well as timely and credible investigations.

Following an internal self-assessment on our performance against the Core Humanitarian Standard (CHS), Malteser International received a certificate from the CHS Alliance.
To achieve these, Malteser International developed its internal Quality and Accountability Guidance, introducing a new central framework that informs about our work and establishes the operational standards we need to adhere to in every phase of our project cycle – from the initial concept to project closure. 2019 also saw the introduction of other guidelines, for example on Cash and Voucher Assistance, Environment and Climate Change, and Gender, Age, and Disability Inclusion.

Malteser International redoubled its efforts to protect vulnerable groups from abuse and exploitation by introducing guidelines for the Protection from Sexual Exploitation, Abuse, and Harassment (PSEAH).

Continuous learning
Malteser International’s commitment to improving its aid is reflected in our investments in innovation and learning. Lessons learnt from evaluating our work as well as feedback from the communities we serve are used to strengthen our programs. These findings also help us adapt our activities, allowing us to take responsibility for our actions and increasing our accountability to the people we support and the donors who support us.

In 2019, Malteser International conducted an external and independent evaluation of the People First Impact Method (P-FIM), analyzing three case studies from DR Congo, Uganda, and Myanmar. The evaluation showed that P-FIM offers viable solutions and real alternatives for common ways of thinking and working within the humanitarian sector and in our organization.

To support knowledge exchange and learning, we have communities of experts focusing on knowledge development and sharing of good practices. Every year, we bring our teams from different regions together in so-called Regional Learning Fora to present and discuss new developments from our core sectors and the humanitarian community. The most important aspect, however, is to create a space where our staff and partner organizations can meet in person, exchange ideas, and learn from each other. In 2019, we held two Regional Learning Fora with our Africa and Asia program staff in Kenya and Thailand respectively.

Coordinated efforts
While we believe that partnerships with local organizations are the most effective way to achieve inclusive and participatory development, our membership in various global networks helps us leverage on the knowledge, skills, reach, and expertise that network partners offer.

In Germany, the location of our secretariat, we are represented in VENRO, the umbrella organization of development and humanitarian aid non-governmental organizations (NGOs) in Germany. As part of Germany’s Relief Coalition (Aktion Deutschland Hilft), we work alongside 22 other German relief organizations to provide rapid and coordinated emergency relief in severe disasters and emergency situations worldwide. Malteser International is also an active member of VOICE (Voluntary Organizations in Cooperation in Emergencies), a European network of humanitarian NGOs acting as an interlocutor with the European Union on emergency aid and disaster risk reduction.
In November, Malteser International and Kulika Uganda hosted an Innovation Forum on locally-led responses to crises and displacement on behalf of ReFlACTION. The event held at the Makerere University in Kampala brought more than 100 humanitarian frontline workers together as they shared knowledge about how affected demographic groups can drive their own crisis response.

Participants started by highlighting approaches that focus on the demands and responsibilities of people affected by crises and displacement. By recognizing the potential of these methods, communities can leverage on resources available to them in their response to crises and identify gaps that can be filled with external support. This allows for international organizations like Malteser International to play a complementary role by providing access to technology, innovation tools, and specific knowledge.

The strategy promotes healthy ecosystems in which a range of local and international stakeholders recognize and complement one another’s strengths. However, complementarity is not the only aim. The mindset underlying the approaches presented in the forum is one that – in line with the Principle of Humanity and Subsidiarity – acknowledges a person’s dignity and agency in their own crisis response.

“Anything without us is not for us”

Communities thrive best when they are given the opportunity to voice their preferences and actively work towards desired outcomes in crisis response programs.

While mounting rapid responses to sudden-onset emergencies remains important to save lives, international humanitarian organizations must increase their engagement with the communities they work with. Rapid interventions not only risk overwhelming local capacities but may also lead to wrong assumptions and expectations on both sides. Consequently, methods like the People First Impact Method (P-FIM) emphasize the value of engaging with communities through goal-free communication that enables members of the communities to discuss issues most important to them without predefined questions from external organizations.

“This is where trust comes in. To understand people’s concerns, fears, and motivation as well as their coping strategies, we must trust each other. A relationship of trust gives us the opportunity to provide adequate relief services if needed.”

Find more: 📧Malteser International’s P-FIM and 📧ReFlACTION
# Program Overview 2019: Asia

Total expenditure in euros: 8,656,029 | previous year: 15,146,870
(including other funds from contracts already booked in the previous year)

<table>
<thead>
<tr>
<th>Country/project expenses in euros</th>
<th>No of projects</th>
<th>Project location and short description</th>
<th>Donors</th>
<th>Partners</th>
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<td>Afghanistan 3</td>
<td>2</td>
<td>Kabul Province: Basic medical care for host communities, internally displaced people (IDPs), and returning Afghan refugees</td>
<td>AA, ADH</td>
<td>Union Aid</td>
</tr>
<tr>
<td>Bangladesh 778,154</td>
<td>3</td>
<td>Cox’s Bazar: Primary healthcare, food security, and psycho-social support for refugees and host communities, Resilience strengthening of host communities through economic and political participation to cope with the impacts of the refugee influx Kurigram and Gaibandha: Cash distribution for flood relief in the regions of Kurigram and Gaibandha</td>
<td>AA, ADH, BMZ</td>
<td>GK, Coast Trust</td>
</tr>
<tr>
<td>Cambodia 22,254</td>
<td>2</td>
<td>Samrong: Improving the health situation by strengthening self-help initiatives in the areas of water, sanitation, and hygiene; Siem Reap: Improving food and livelihood security for women and children</td>
<td>ADH, BMZ</td>
<td>CHHRA, FLD</td>
</tr>
<tr>
<td>India 3</td>
<td>4</td>
<td>Tamil Nadu: Improving the health and education situation of vulnerable youths; Rajasthan: Ensuring food security and strengthening resilience against droughts among marginalized Dalit and indigenous communities in the Thar Desert; Bihar: Enhancing the resilience of flood-affected communities along the Koshi River through water, sanitation, and hygiene measures as well as disaster preparedness; Kerala: Emergency relief and recovery for flood-affected families through construction of houses and distribution of household items</td>
<td>ADH, BMZ, foundation grants</td>
<td>Pro-Vision, UNNATI – Organisation for Development Education, SSK, Catholic Diocese of Muvattupuzha</td>
</tr>
<tr>
<td>Indonesia 3</td>
<td>1</td>
<td>Central Sulawesi and Sunda Strait: Emergency relief and reconstruction for communities affected by tsunami and earthquake</td>
<td>ADH, State Chancellery of North Rhine-Westphalia, Germany</td>
<td>YEU</td>
</tr>
<tr>
<td>Myanmar 3</td>
<td>16</td>
<td>Northern central Rakhine State: Emergency relief supplies of household goods, Primary healthcare with a focus on maternal and infant health, prevention and treatment of malaria and tuberculosis, emergency referrals; Strengthening resilience through health and hygiene measures, water and sanitation, disaster risk management, and capacity development of local partners; Disaster preparedness in communities and schools, climate change adaptation, mangrove plantations and community empowerment; Rehabilitation of health centers, construction of schools, latrines, evacuation routes Kayin State: Improved access to primary healthcare services focusing on maternal and infant health, water, sanitation, and hygiene; Active inclusion of people with disabilities in disaster preparedness processes at local, regional, and national levels; Improving access to health and sanitation facilities and promoting an inclusive peace process; Organizational development support for national partners Shan State and Wa Self-Administered Division: Prevention and treatment of malaria, HIV/AIDS and tuberculosis in cooperation with local health authorities; Improving maternal and infant health through better nutrition; Promoting sustainable fish farming; Support for children in the first 1,000 days of their lives to reduce malnourishment</td>
<td>AA, ADH, BMZ, GF, GIZ, WFP, WorldFish</td>
<td>Back Pack Health Worker Team – BPHWT, CERA, KDN, KDHW, MILI</td>
</tr>
</tbody>
</table>

**List of abbreviations**

**Donors:**
- AA: German Foreign Office (Auswärtiges Amt)
- ADH: Germany’s Relief Coalition (Aktion Deutschland Hilft)
- AMREF: Amref Health Africa
- BMZ: German Federal Ministry for Economic Cooperation and Development (Bundesministerium für Wirtschaftliche Zusammenarbeit und Entwicklung)
- GF: The Global Fund
- GIZ: Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH
- UN OCHA: United Nations Office for the Coordination of Humanitarian Affairs
- WCFF: World Child Future Foundation
- WFP: World Food Programme
<table>
<thead>
<tr>
<th>Country/project expenses in euros</th>
<th>No of projects</th>
<th>Project location and short description</th>
<th>Donors</th>
<th>Partners</th>
</tr>
</thead>
</table>
| **Nepal ¹**                      | 283,670       | **Sindhupalchowk, Kavrepalanchowk and Nuwakot:**  
- Supporting the rehabilitation of earthquake-affected communities and strengthening their resilience to future disasters through the restoration of water, sanitation, and hygiene facilities, hygiene promotion campaigns, reconstruction of houses and health centers, disaster preparedness and psycho-social support in health centers, schools, and communities  
**Sunsari District:**  
- Assistance for communities affected by flooding along the Koshi River in the areas of water, sanitation, and hygiene | ADH, BMZ | RSDC, CDECF, Koshish, ICSC |
| **Pakistan ¹**                   | 925,694       | **Khyber Pakhtunkhwa Province (KP), Swat:**  
- Improving living conditions in rural communities  
**Sindh Province, Sangha District:**  
- Strengthening resilience through disaster preparedness, water, sanitation, hygiene, and food security | AA, ADH, BMZ | HUJRA |
| **Philippines ¹, ²**             | 648,871       | **Northern Samar/ Visayas Province:**  
- Improving accessibility to water, sanitation, and hygiene facilities in schools and evacuation centers  
- Strengthening communities to improve the water, sanitation, and hygiene situation with a special focus on waste management, increasing the participation of people with disabilities in the communities  
- Shelter assistance to households affected by Typhoon Tisoy  
- Assessment and concept note development for a solid waste management project  
**Benguet Province/Luzon:**  
- Improving access to clean drinking water and sanitation, hygiene awareness activities, and disaster preparedness  
**Manila/Luzon:**  
- Organizational strengthening of the Order of Malta Philippines | ADH, private donors | Order of Malta Philippines |
| **Thailand ¹**                   | 1,935,632     | **Mae Hong Son province:**  
- Curative and preventive healthcare and capacity building for refugees from Myanmar and host communities on the Thai-Myanmar border  
- Healthcare services, water, sanitation, and hygiene measures, preparing refugees for return through capacity development and training  
- Providing dental healthcare services and pediatric care | ADH, Dr. Ulrich Reiter, Else Kröner-Fresenius-Stiftung, Europe-Aid, Thai.Ger, WCFF | HI |

**List of abbreviations**

**Partners:**  
CDECF: Community Development and Environment Conservation Forum  
CERA: Community Empowerment and Resilience Association  
CHHRA: Cambodian Health and Human Rights Alliance  
DMC: National Disaster Management Committee  
DHSUSA: Department of Labour, Health and Social Affairs  
DPO: Disabled People Organization  
FIL: Farmer Livelihood Development  
GK: Greenfaustus Kendra  
HI: Humanity and Inclusion  
HUJRA: Holistic Understanding for Justified Research and Action  
ICSC: Indrawatee Community Service Centre  
KDHW: Karen Department of Health and Welfare  
KDN: Karen Development Network  
MILI: Myanmar Independent Living Initiative  
PFF: Pakistan Fisherfolk Forum  
RSDC: Rural Self-reliance Development Centre  
SKK: Sabahghi Shikshan Kendra  
YAKKUM: Yayasan Kristen untuk Kesehatan Umum

¹ Projects implemented by Malteser International and partner organizations  
² Projects implemented by national associations and aid services of the Sovereign Order of Malta with support from Malteser International  
³ Projects implemented by local partner organizations with support from Malteser International

**Cross-project expenses (including logistics, quality assurance etc.): € 241,363**
## Program Overview 2019: Middle East

Total expenditure in euros: 40,977,824 | previous year: 17,951,788  
(including other funds from contracts already booked in the previous year)

<table>
<thead>
<tr>
<th>Country/ project expenses in euros</th>
<th>No of projects</th>
<th>Project location and short description</th>
<th>Donors</th>
<th>Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Iraq</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21,691,507</td>
<td>5</td>
<td>Dohuk:</td>
<td>AA, ADH, BMZ, SEZ, Stiftung Seliger Gerhard</td>
<td>DAMA, Doh Dohuk, Mercy Hands for Humanitarian Aid, Local Reconstruction Committees of the Syrian Catholic Church, Syrian Orthodox Church and the Chaldean Catholic Church, CAPNI, CNSF, UPP, SP, PIN</td>
</tr>
</tbody>
</table>
|                                   |                | – Primary healthcare services for internally displaced people and host communities affected by conflict through health centers inside camps and mobile clinics  
|                                   |                | – Supply of medicines and medical equipment for healthcare facilities  
|                                   |                | – Providing psycho-social and employment support for women dealing with war trauma and members of communities affected by conflict  
|                                   |                | – Livelihood activities (distribution of livestock)  
|                                   |                | **Nineveh:**                           |        |         |
|                                   |                | – Medical aid for internally displaced people, returnees, and host communities affected by conflict through mobile medical teams and primary healthcare in refugee camps  
|                                   |                | – Reconstruction of a primary healthcare unit and training of medical personnel  
|                                   |                | – Legal counselling and awareness sessions for GBV and other protection topics  
|                                   |                | – Assisted return of displaced people to their homelands: repair and reconstruction of destroyed homes for returnees  
|                                   |                | – Rehabilitation and reconstruction of kindergartens and community spaces  
|                                   |                | – Rehabilitation of schools and training for teachers  
|                                   |                | – Livelihood activities (business grants, rehabilitation in agriculture, training programs)  
|                                   |                | – Social cohesion program with various activities  
|                                   |                | **North Lebanon, Bekaa Valley, South Lebanon:** |        |         |
| 3,335,811                         | 3              | Dohuk:                                 | AA, BMZ, Stiftung Seliger Gerhard | Lebanese Association of the Order of Malta |
|                                   |                | – Providing primary healthcare services for Syrian refugees and vulnerable Lebanese communities through mobile medical units  
|                                   |                | – Rehabilitation of a basic healthcare center with attached medical laboratory  
|                                   |                | **Bekaa Valley:**                      |        |         |
|                                   |                | – Improving access to primary and secondary healthcare services for residents and refugees in Deir-El-Ahmar  
|                                   |                | **Syria**                              |        |         |
| 14,248,462                        | 3              | Dohuk:                                 | AA, ADH, BMZ, SEZ, Stiftung Seliger Gerhard | IDA, MFRD, HIHFAD |
|                                   |                | – Providing primary and secondary healthcare services in three hospitals, eleven basic health centers, two blood banks, and two clinics for children with thalassemia  
|                                   |                | – Construction of a medical oxygen production facility  
|                                   |                | – Reconstruction of four basic health centers  
|                                   |                | – Provision of clean drinking water and distribution of hygiene supplies as well as organizing effective waste disposal and septic tank clean-up in two camps for displaced people  
|                                   |                | – Winterization project with distribution of mattresses and blankets to IDPs  
|                                   |                | **Northwest Syria:**                   |        |         |
|                                   |                | – Strengthening resilience of Syrian refugees through outpatient rehabilitation measures and psycho-social support for people with physical challenges or disabilities from war injuries and their families as well as working to strengthen Syrian civil society in Turkey  
|                                   |                | – Developing the capacities of Syrian partner organizations, integrating qualified Syrian personnel into the Turkish labor market  
|                                   |                | **Reyhani:**                           |        |         |
|                                   |                | – Daycare center for Syrian refugee children, including comprehensive care services, both in health and education, supply of clothing and school materials, organization of leisure activities and provision of psycho-social care  
|                                   |                | **Istanbul (Köşkçekemece and Fatih):** |        |         |
|                                   |                | – Operation of two informal training centers for Syrian refugees in the districts of Köşkçekemece and Fatih: vocational and general training courses, psycho-social support for course participants and career guidance counselling for job-seeking Syrians in Turkey  
|                                   |                | **Kıııs:**                             |        |         |
|                                   |                | – Operation of a community center with a special focus on women, offering job qualification training for Syrians, including language courses and career counselling services as well as further education to help them integrate into the Turkish labor market, psycho-social support services, recreational activities for women of the local host community and Syrian immigrants to foster social cohesion  

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Cross-project expenses (including logistics, quality assurance etc.): € 1,122,878
### Program Overview 2019: Americas

**Total expenditure in euros: 3,644,226 | previous year: 4,114,084**

(including other funds from contracts already booked in the previous year)

<table>
<thead>
<tr>
<th>Country/ project expenses in euros</th>
<th>No of projects</th>
<th>Project location and short description</th>
<th>Donors</th>
<th>Partners</th>
</tr>
</thead>
</table>
| Bahamas | 1 | 83,962 | Marsh Harbour, Abaco Island, Bahamas:  
- Supporting the rehabilitation of education facilities in Marsh Harbour, Abaco Island – Bahamas | Private donations, ADH | AHA, ECC |
| Haiti | 4 | 1,072,900 | Cité Soleil and Tabarre:  
- Strengthening the resilience of urban communities:  
  - Food security measures, improved access to water supply, sanitation, and hygiene,  
  - Training and education campaigns as well as disaster preparedness through support for civil society and volunteer committees  
  - Conserving natural resources and ensuring environmental protection through reforestation of mangroves  
  - Building and strengthening capacities in emergency relief and disaster preparedness  
  - Improving access to clean drinking and non-potable water, capacity building in the areas of environmental protection, water supply, sanitation, hygiene, and nutrition, including distribution of seeds, training, and education  
  - Supporting the social programs run by Malteser Peru, including a soup kitchen for children at school and services for the elderly  
  - Improving prevention of communicable infectious diseases  
  - Strengthening disaster preparedness capacities in schools and communities affected by the 2017 earthquake in Mexico City  
  - Improving prevention of communicable infectious diseases  
  - Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
  - Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
  - Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
  - Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
  - Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  |

| Colombia | 5 | 1,918,568 | La Guajira:  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  |

| Mexico | 2 | 68,484 | Mexico City:  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  |

| Peru | 1 | 7,048 | Lima and Querécotoillo:  
- Supporting the programs run by Malteser Peru, including a soup kitchen for children at school and services for the elderly  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  |

| USA | 1 | 234,930 |  
- Supporting the programs run by Malteser Peru, including a soup kitchen for children at school and services for the elderly  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  
- Providing primary healthcare in permanent and mobile clinics, psycho-social care, pre- and post-natal care for pregnant women and covering basic needs for vulnerable refugees, migrants and returnees from Venezuela, including distribution of food and material goods in informal settlements and in UNHCR reception centers  |

Cross-project expenses (including logistics, quality assurance etc.): € 258,335
## Program Overview 2019: Africa

**Total expenditure in euros: 19,243,739 | previous year: 21,059,362**

(including other funds from contracts already booked in the previous year)

<table>
<thead>
<tr>
<th>Country/ project expenses in euros</th>
<th>No of projects</th>
<th>Project location and short description</th>
<th>Donors</th>
<th>Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burundi 3  128,434</td>
<td>1</td>
<td>Muyinga Province and Bujumbura: – improving food and nutrition security</td>
<td>ADH</td>
<td>Fondation Stamm</td>
</tr>
<tr>
<td>DR Congo 1,3  8,681,135</td>
<td>8</td>
<td>Ituri and Haut-Uélé Provinces: – improving access and quality of healthcare for the population through strengthening the national health system in seven health zones (including seven general referral hospitals and about 140 health centers); improving service delivery through trainings of health workforce, construction/rehabilitation of adequate infrastructure, provision of medical equipment, improving the use of health information tools, subsidization of essential medicines, financial support of health authorities, hospitals and health centers and improving leadership/governance of these institutions – Preparing the health system for epidemic outbreaks such as Ebola; epidemic response plans, emergency stocks of essential medicine and personal protective equipment, training of health authorities and healthcare staff in infection prevention and control (IPC) and case management – Response to the Ebola outbreak in Ituri: community awareness (P-FIM, radio, etc.), treatment of suspected cases in transit centers and mobile isolation units, infection prevention and control (IPC) training and case management at health facilities, support for screening points Health zones of Adi (Ituri) and Aba (Haut Uélé) bordering South Sudan: – Free healthcare services, treatment of acute malnutrition, and provision of water for refugees from South Sudan and host communities – Improving the water, sanitation, and hygiene conditions of the population and in schools with a special focus on preventing epidemics and a rapid response to outbreaks – Menstrual hygiene management in the Meri refugee camp (education, distribution of menstrual hygiene material for girls and women) – Improving food and nutrition security of vulnerable groups (incl. refugees from South Sudan) through provision of seeds and trainings on improved agricultural techniques Mahagi Territory: – Free healthcare services for internally displaced people from Djugu territory – Improving infection prevention and control (IPC) and water, sanitation, and hygiene (WASH) in health centers caring for displaced people Kasai Central Province: – Improving access and quality of healthcare for the population through strengthened national health system in five health zones (including five general referral hospitals and about 100 health centers); training of healthcare workers to improve service delivery, construction/rehabilitation of adequate infrastructure, provision of medical equipment, improving the use of health information tools, financial support of health authorities and strengthening leadership/governance of these institutions – Preparing the health system for epidemic outbreaks such as Ebola; epidemic response plans, emergency stocks of essential medicine and personal protective equipment, training of health authorities and healthcare staff in infection prevention and control (IPC) and case management Bas-Uélé Province, Bondo Territory: – Improving access and quality of health services for the population through health system strengthening in two health zones in Northern Bondo Territory (two general referral hospitals, about 25 health centers) – Preparing healthcare providers for possible epidemic outbreaks and ensuring greater responsiveness in the event of an outbreak – Free healthcare services and treatment of acute malnutrition for refugees from the Central African Republic – Preparing the health system for epidemic outbreaks such as Ebola; epidemic response plans, emergency stocks of essential medicine and personal protective equipment, training of health authorities and healthcare staff in infection prevention and control (IPC) and case management Guinea 4  56,332</td>
<td>1</td>
<td>Muyinga Province and Bujumbura: – improving food and nutrition security</td>
</tr>
</tbody>
</table>

**List of abbreviations**

**Donors:**
- **AA:** German Federal Foreign Office (Auswärtiges Amt)
- **ADH:** German’s Relief Coalition (Aktions Deutschland)
- **AMREF:** Afrique Médicale et Reliefs d’Afrique
- **BMZ:** German Federal Ministry for Economic Cooperation and Development (Bundesministerium für Wirtschaftliche Zusammenarbeit und Entwicklung)
- **ECHO:** European Civil Protection and Humanitarian Aid Operations
- **FAO:** Food and Agriculture Organization of the United Nations
- **FASS:** Global Fund for Forgotten People
- **GIZ:** Deutsche Gesellschaft für Internationale Zusammenarbeit GmbH
- **BMZ:** German Federal Ministry for Economic Cooperation and Development
- **CAAMENIHU, EUP:** University of Antwerp

**Partners:**
- **ADH, BMZ, AA, AMALTE Guinée:** FASS, local health authorities, state health centers and hospitals
### Project Location and Short Description

<table>
<thead>
<tr>
<th>Country/Region</th>
<th>No of Projects</th>
<th>Project Description</th>
<th>Donors</th>
<th>Partners</th>
</tr>
</thead>
</table>
| Marsabit County: | 7 | - Climate change adaptation and resource conservation for semi-nomadic pastoralists in particularly dry areas  
- Drought relief for semi-nomadic pastoralists in particularly dry areas | AA, ADH, AMREF, BMZ, NIN | AHD, ECC, SDCO, health authorities, KHF, AMREF, EMU, PACIDA, public and private health facilities |
| Marsabit County (Kenya) and cross border with Omorate (Ethiopia): | 1 | - Improving food security and resilience of vulnerable semi-nomadic communities in drought areas in northern Kenya and southern Ethiopia | | |
| Nairobi: | 1 | - Combating tuberculosis  
- Improving management of non-communicable diseases in informal settlements | | |
| Kakuma, Turkana: | 2 | - Construction of a maternity ward | | |
| Nationwide: | 2 | - German-Kenyan multi-stakeholder partnership to promote less-favored healthcare sectors  
- Improving emergency medical services | | |
| Mozambique | 2 | Nhangua: response in the aftermath of Cyclone Idai | NIN, OMF, European Investment Bank, private donations | THW |
| - Reducing vulnerability of the population of Nhangua through reconstructing community infrastructure after Cyclone Idai, including roofing of a health center and a school complex and providing equipment and furniture | | |
| - Reducing public health risks after Cyclone Idai through clean-up activities by equipped cleaning committee, public and household-level awareness sessions, including key messages such as prevention of water-borne diseases through handwashing and hygiene | | |
| Maiduguri and surrounding areas: | 2 | - Improving water, sanitation and hygiene conditions for internally displaced people, and host communities in Maiduguri, Jere, Konduga, and Mafa | AA, GIZ, Stiftung Seliger Gerhard | |
| - Improving water, sanitation, and hygiene conditions for internally displaced people, including long term camp residents and new arrivals | | |
| - Hygiene promotion sessions with trained volunteers | | |
| Southern Borno State: | 2 | - Construction of water points in host communities and villages in Biu | | |
| Nigerian Communities | 2 | - Improving water, sanitation and hygiene conditions for internally displaced people, and host communities in Maiduguri, Jere, Konduga, and Mafa | | |
| - Combating tuberculosis  
- Improving management of non-communicable diseases in informal settlements | | |
| Nationwide: | 2 | - German-Kenyan multi-stakeholder partnership to promote less-favored healthcare sectors  
- Improving emergency medical services | | |
| South Sudan | 12 | Deim Zubeir: | AA, ADH, BMZ, FAO, Stiftung Seliger Gerhard, UNICEF | Department of Public Utilities, Agok Leprosy Training Center, schools in Wau, Maridi, and Juba, local authorities, Ministry of Health, New Sudan Women Federation, RAAH, German Toilet Organisation, Don Bosco Vocational Training Center, Catholic University of South Sudan, Ministry of Education, Yi Lo Civil Society, Catholic Bishop’s Secretariat |
| - Emergency relief in the areas of water, sanitation, and hygiene | | |
| - Emergency assistance for displaced people and those most in need through the distribution of farming tools, seeds, and the provision of training in modern agricultural techniques and fishing | | |
| Maridi area: | 1 | - Sustainable improvement of the quality of agricultural production to improve livelihoods for vulnerable population groups | | |
| Juba area: | 1 | - Improving food security and nutrition through agricultural trainings, distribution of inputs, and home gardening in poorly resourced urban communities in Juba and peri-urban surrounding areas | | |
| - Improving the nutrition and hygiene situation in schools through school gardens and nutrition awareness as well as hygiene promotion | | |
| - Improving access to clean water, sanitation, and hygiene for low-income communities, at schools, public places, and healthcare centers in Juba and the surrounding area through the construction of latrines, rehabilitation of boreholes, and hygiene promotion using the Community Led Total Sanitation (CLTS) approach | | |
| Rumbek: | 1 | - Improving living conditions for people living with leprosy through agricultural support measures | | |
| Wau area: | 1 | - Cash assistance for particularly vulnerable groups and school meals at three primary schools in and outside camps for displaced people | | |
| - Distribution of farming tools and seeds to people most in need, and provision of training in modern agricultural techniques and fishing | | |
| - Sustainable improvement of food and nutrition security and water supply for vulnerable demographic groups in underserved communities and six schools in the peri-urban areas of Wau through agricultural trainings, demonstration fields, distribution of inputs, and the establishment of home and school gardens | | |
| - Vocational training and income-earning opportunities for demographic groups affected by the conflicts in Wau and the Bahr el Ghazal region | | |
| Yei area: | 1 | - Renovation of a hospital ward serving tuberculosis patients and provision of medicines and medical supplies to support hospital | | |

### List of Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>AAPU</td>
<td>Association of Ambulance Professionals Uganda</td>
</tr>
<tr>
<td>ADP</td>
<td>Association pour le Développement et la Paix</td>
</tr>
<tr>
<td>AHD</td>
<td>African Institute for Health and Development</td>
</tr>
<tr>
<td>AMREF</td>
<td>Amref Health Africa</td>
</tr>
<tr>
<td>CAAMENHRI</td>
<td>Centres d’Achat et d’Approvisionnement en Médicaments Essentiels des hôpitaux de Mission de l’Ordre de Malte en République Démocratique du Congo</td>
</tr>
<tr>
<td>CADIMEK</td>
<td>Centres d’Approvisionnement et de Distribution de Médicaments Essentiels de Kinshasa</td>
</tr>
<tr>
<td>CAFOM</td>
<td>Caritas Aktionen für Migranten</td>
</tr>
<tr>
<td>DBVTC</td>
<td>Don Bosco Vocational Training Center</td>
</tr>
<tr>
<td>ECC</td>
<td>The Ethiopian Catholic Church Social and Development Commission</td>
</tr>
<tr>
<td>ECO</td>
<td>Ecological Christian Organization Uganda</td>
</tr>
<tr>
<td>EUP PASS</td>
<td>Etablissement d’Utilité Publique – Fonds d’Achat de Services de Santé</td>
</tr>
<tr>
<td>GOU</td>
<td>Government of Uganda</td>
</tr>
<tr>
<td>IBSI</td>
<td>Impact Building Solutions Foundation</td>
</tr>
<tr>
<td>KHF</td>
<td>Kenya Healthcare Federation</td>
</tr>
<tr>
<td>MATT</td>
<td>Ministry of Health</td>
</tr>
<tr>
<td>OPM</td>
<td>Office of the Prime Minister</td>
</tr>
<tr>
<td>PACIDA</td>
<td>Pastoralist Community Initiative Development and Assistance</td>
</tr>
<tr>
<td>RAHA</td>
<td>Rural Action Against Hunger</td>
</tr>
<tr>
<td>THW</td>
<td>Technisches Hilfswerk</td>
</tr>
<tr>
<td>TVRA</td>
<td>The Victim Relief Alliance</td>
</tr>
<tr>
<td>UAP</td>
<td>Ugandan Association of Physiotherapy</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
</tr>
<tr>
<td>CADIMEK</td>
<td>Centres d’Approvisionnement et de Distribution de Médicaments Essentiels de Kinshasa</td>
</tr>
</tbody>
</table>

1 Projects implemented by Malteser International and partner organizations  
2 Projects implemented by national associations and aid services of the Sovereign Order of Malta with support from Malteser International  
3 Projects implemented by local partner organizations with support from Malteser International
<table>
<thead>
<tr>
<th>Country/project expenses in euros</th>
<th>No of projects</th>
<th>Project location and short description</th>
<th>Donors</th>
<th>Partners</th>
</tr>
</thead>
</table>
| Tanzania ³                         | 1              | Kakonko District (Mtendeli & Nduta refugee camps):  
– Surgery and maternity care for refugees in the Nduta and Mtendeli refugee camps as well as for the host community in the Kakonko district, Kigoma region. | AA     | Tanzanian Red Cross Society, The Kolping Society of Tanzania |
| Uganda ¹,²                         | 5              | Arua, Yumbe and Gulu Districts:  
– Improving health and living conditions for South Sudanese and Congolese refugees in various refugee settlements in northern Uganda by providing access to clean drinking water, setting up vegetable gardens, planting trees, establishing water committees, constructing communal latrines, and distributing hygiene articles and water canisters  
– Improving epidemic preparedness in health centers in view of the Ebola epidemic in neighboring DR Congo  
– Supporting sustainable maintenance of the water infrastructure in Rhino Camp, Arua District, northern Uganda  
Kampala:  
– Supporting self-help group for mothers of children with disabilities  
– Reducing maternal and infant mortality and morbidity from sickle-cell disease and improving the method of diagnosis for newborns  
Nationwide:  
– Improving emergency medical service through training of specialists and establishing coordination mechanisms and association structures for a nationally operational ambulance service in Uganda  
– Improving social infrastructure, creating employment, and taking climate action through a partnership with a social enterprise to promote zero-carbon construction | AA, ADH, BMZ, Stiftungen, Stiftung Seliger Gerhard | GoU, IBSF, Lubaga Hospital, MoH, Suubi Lyaffé, UNHCR, AAPU, CAFOMI, Caritas Nebbi, ECO Uganda, Kulkka Uganda, TVRA, UAP |
| Albania ²                         | 1              | Durres, Thumane, Lezha, and surrounding regions:  
– Multi-sectoral emergency relief after the November 2019 earthquake, including camp coordination, set-up of a first-aid tent, deployment of medical units, distribution of food and hygiene items, set-up of four after school programs, earthquake preparedness sessions in schools, and preparedness workshops with municipalities | ADH Malteser Albania |
| Germany ²07,056                  | 2              | Bavaria and Thuringia:  
– Reconstruction of two schools and financial support for individuals, psycho-social support  
Saxony and Saxony-Anhalt:  
– Financial support for private individuals, psycho-social support | AA, ADH, Stiftung RTL – Wir helfen Kindern | Malteser Hilfsdienst e.V. Germany |
| Ukraine ²,³                       | 1              | Donetsk, Lugansk, Kiev and surrounding regions:  
– Individual and group psycho-social care for people suffering trauma resulting from the conflict in Ukraine  
– Enhancing local capacities to deal with mental health consequences of the conflict through training and mentoring for psycho-social care specialists, including relevant authorities as well as training for mobile medical teams to provide therapeutic support | AA/ADH | Malteser Ukraine, Mental Health Service, Worte Helfen (affiliated with the National University Kiev-Mohyla Academy) |

Cross-project expenses (including logistics, quality assurance etc.): € 527,319

Program Overview 2019: Europe

Total expenditure in euros: 1,050,469 | previous year: 1,347,594
(including other funds from contracts already booked in the previous year)
Financial Report 2019
Financial development and annual accounts, partners, and structures at a glance

Total expenditure (in euros)

- Project funding includes a sum of € 2.7 million resulting from adjustments to donor contracts

*Project funding includes a sum of € 2.7 million resulting from adjustments to donor contracts*
Secretary General’s Report: structural development and strategic direction

Even though aid projects receive more money than they did in the past, the amount available to support each individual has decreased. This is due to the enormous surge in the number of people in need of help as well as the increasingly long-term nature of the crises that place them in need. Despite what we were up against in 2019, we and our partners and supporters rose to the task of providing comprehensive help to millions of people in need while maintaining the highest quality standards and developing innovative ways to work more effectively.

Strengthening emergency relief and international networks

Responding to emergencies demands significant operational engagement, readily available staff and resources as well as an effective, coordinated humanitarian response. We continue to work on strengthening our emergency relief team in terms of personnel, equipment, and training to ensure that they are prepared to meet even the most serious of challenges. In 2019, Malteser International’s Emergency Medical Team (EMT) held its first major simulation exercise in cooperation with Malteser Hospitaldienst Austria, following its classification by the WHO in 2018.

Our international networks and partnerships remain key to how we work. In 2019, we continued to expand and strengthen our work with partners and deepen our cooperation with the national organizations of the Order of Malta. Together with the affected people themselves, our local partners are usually amongst the first to respond when disaster strikes. We seek to develop these partnerships in the long term through ongoing cooperation with our partners and by working to increase their skills and capacity. By joining forces with multi-lateral institutions, local agents, and other organizations, we create and scale positive impact. A significant development in this regard was the Innovation Forum co-organized by Malteser International in Uganda where crisis response knowledge and experiences were shared by the affected population (see p. 21).

Organizational development

Malteser International remains committed to working in a way that allows people affected by disasters to help themselves first, filling gaps only as needed. In the spirit of fostering the development of national and regional humanitarian structures, we are gradually moving away from the fragmentary, project-based support of local civil society organizations towards favoring regional programs that empower local agents to shape their own response. Following a self-assessment against the Core Humanitarian Standard (CHS), we ran a global process to strengthen the consistent application of quality standards in our work worldwide.
Being able to create and collaborate seamlessly makes any organization more effective. In 2019, we developed our IT infrastructure to include cloud-based productivity tools that support internal communication, teamwork, learning, and knowledge management. These tools are now facilitating collaboration with our headquarters and across program locations.

Financial developments
2019 was Malteser International’s busiest year. We were able to provide €76 million worth of life-saving support for people in need. We are proud of our financial efficiency and accountability as we work to maximize the value of every cent we receive. Over the past five years, we have been able to maintain standards ensuring that more than 90% of funds are used for programs on the ground. During the last four years, our total program volume has more than doubled (see financial development on p. 33), indicating the trust that donors and stakeholders place in us as well as the growing need for our work.

Personnel development
None of our current efforts and future aspirations would be possible without the commitment, skill and resilience of Malteser International’s staff around the world. These colleagues – particularly in our field offices – face enormous obstacles, including challenges to their own safety and to their personal and family lives. They deserve not only gratitude for a job well done, but also strong support to help them through any hardships they may face.

In 2019, Malteser International employed 897 staff members from over 40 different countries of origin. Our project locations employed 747 local (permanently resident), and 69 international (expatriate) members of staff. We take care to employ staff members who are highly qualified in their area of expertise and who also have the ability to work in disaster situations, as well as to provide regular training to ensure they remain up to speed.

At the end of 2019, Sid Johann Peruvemba left his position as Vice Secretary General and Program Director after a long and distinguished career at Malteser International. His service has not only left our organization stronger but also fit for the future. I want to thank Mr. Peruvemba for his exemplary leadership through a period of tremendous growth and change. I wish him all the best as he takes on the role of CEO at one of our closest partner organizations.

Looking ahead
We live in times of great change, and our organization will not stand still. As humanitarian needs grow worldwide, we will continue to work on ensuring that Malteser International’s structure remains efficient and secure in the future.

In the coming years, Malteser International will strive to work more and more effectively with partners while strengthening our efforts in the areas of peace building and sustainable development in the spirit of the 2030 agenda.
Financial overview 2019

Revenue sources (Consolidated financial statements for 2019)

The total revenue includes a sum of € 29.9 million allotted to projects in the previous fiscal year. These funds are restricted to multi-year projects with expenses spread over the planned project duration.

Total revenue (in millions of euros) 80.3

Earmarked funds from previous years 29.9

National and international public grants

33.9

Donations & International Order of Malta network

12.5

Coalitions 3.7

Foundations and other NGOs 0.3

Revenues from public-sector grants amounted to € 33.9 million (€ 71.1 million in 2018) of the total income of around € 50.4 million (€ 94.5 million in 2018).

Funds received in 2019 50,445,213

32,154,939 Germany

32,154,939

Federal Foreign Office (AA) 17,407,930

Federal Ministry for Economic Cooperation and Development (BMZ) 14,251,899

Gesellschaft für Internationale Zusammenarbeit (GIZ) 495,110

European Union 860,000

ECHO (Directorate-General for European Civil Protection and Humanitarian Aid Operations) 850,000

EuropeAid 10,000

United Nations 929,286

United Nations High Commissioner for Refugees (UNHCR) 65,662

World Food Program (WFP) 8,007

WorldFish 52,468

United Nations Food and Agricultural Organization (FAO) 57,739

United Nations International Children’s Emergency Fund UNICEF 745,411

Total 33,944,225

Other revenue includes adjustments of partner contracts, sales revenues, exchange gains, income from the release of provisions.

Donations & International Order of Malta network

Donations 6,772,462

Other revenue* 5,694,202

Malteser Hospitaldienst Austria 30,000

Global Fund for Forgotten People, Order of Malta 26,798

Total 12,523,462

Our coalitions helped us raise € 3.7 million (€ 2.8 million in 2018).

Coalitions

Aktion Deutschland Hilft 3,480,913

Nachbar in Not 176,591

Total 3,657,504

We received € 320,000 (€ 5.8 million in 2018) through grants from foundations and other non-governmental organizations.

Foundations and other NGOs

Arbeiter-Samariter-Bund (ASB) 17,000

German Toilet Organization (GTO) 137,308

International Organization for Migration (IOM) 45,714

Alfred Neven DuMont Stiftung 70,000

Total 320,022
These are the consolidated financial accounts of Malteser International and the regional entities – Malteser International Europe and Malteser International Americas, as of December 31, 2019. Malteser International’s 2019 revenue of €80.3 million represents a 15% decrease on the previous year. The total revenue includes unspent restricted funds of €29.9 million from the previous year and €50.4 million derived from government and multilateral institutions, Malteser International affiliates, fundraising coalitions, foundations, and other organizations.

Malteser International uses all entrusted funds economically, efficiently and in a goal-oriented manner to fulfill its tasks while working to ensure that administration and management costs remain proportional to the project expenses. In 2019, we spent a total of €80.3 million on our program activities, 27% more than the year before and the highest amount ever recorded. Management and administrative costs rose slightly to €4 million (€3.5 million in 2018), reflecting the increase in operational activities.
## Consolidated Balance Sheet as of December 31, 2019

### Assets (in euros)

<table>
<thead>
<tr>
<th></th>
<th>MI Europe Cologne €</th>
<th>MI Americas New York €</th>
<th>MI e.V. Cologne €</th>
<th>Elimination of internal transactions €</th>
<th>MI total 31/12/2019 €</th>
<th>MI total previous year €</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A. Fixed assets</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Tangible assets</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operating and business equipment</td>
<td>238,492.30</td>
<td>18,199.08</td>
<td>0.00</td>
<td>0.00</td>
<td>256,691.38</td>
<td>203,179.52</td>
</tr>
</tbody>
</table>

| **B. Current assets** |                      |                        |                  |                                       |                       |                          |
| **I. Receivables and other assets** |                      |                        |                  |                                       |                       |                          |
| 1. Trade receivables |                      |                        | 2.09             | 0.00                                  | 2.09                  | 19,387.97                |
| 2. Receivables from related corporate entities | 895,702.63          | 166,324.64             | 0.00             | -196,324.64                           | 869,702.63            | 44,326.61               |
| 3. Receivables from Malteser Hilfsdienst e.V. — internal — | 4,526,141.04        | 0.00                   | 0.00             | 0.00                                  | 4,526,141.04          | 1,465,104.91            |
| 4. Other assets     | 49,982,294.10        | 9,175.49               | 11,694.22        | 0.00                                  | 50,003,163.81         | 73,234,476.33           |
| **II. Cash in hand, bank balances, and checks** | 55,404,137.77       | 175,502.22             | 11,694.22        | -196,324.64                           | 55,395,009.57         | 74,763,295.82           |
| **III. Accruals and deferred income** | 149,047.95          | 5,628.09               | 4,166.67         | 0.00                                  | 158,842.71            | 155,310.63               |

| **Equity and liabilities** |                      |                        |                  |                                       |                       |                          |
| **A. Equity** |                      |                        |                  |                                       |                       |                          |
| I. Assets of the association | 5,592,278.58         | 251,777.97             | 87,742.80        | 0.00                                  | 5,931,799.35          | 5,320,103.69            |
| II. Equity difference resulting from currency conversion | 0.00                 | -491.55                | 0.00             | -375,131.66                           | -375,623.21           | 3,677.96                |
| III. Annual surplus | -131,013.67          | 141,590.53             | 5,379.22         | 0.00                                  | 15,956.08             | 601,517.44              |
| **B. Accrued liabilities** |                      |                        |                  |                                       |                       |                          |
| – other accrued liabilities | 1,164,037.13         | 0.00                   | 7,500.00         | 0.00                                  | 1,171,537.13          | 1,215,012.84            |

| **C. Liabilities** |                      |                        |                  |                                       |                       |                          |
| 1. Liabilities from goods and services | 2,208,275.57         | 54,662.17               | 0.00             | 0.00                                  | 2,262,939.74          | 803,359.49              |
| 2. Liabilities towards corporate bodies with which there is a participatory interest | 9,309.85             | 0.00                   | 0.00             | 0.00                                  | 9,309.85              |                      |
| 3. Liabilities to related parties | 198,878.42           | 0.00                   | 30,000.00        | 178,807.02                           | 407,685.44            | 4,614.70               |
| 4. Liabilities to Malteser Hilfsdienst e.V. — internal — | 649,232.04           | 0.00                   | 0.00             | 0.00                                  | 649,232.04            | 508,500.05              |
| 5. Liabilities on assigned revenue | 44,157,005.42        | 419,675.24             | 0.00             | 0.00                                  | 44,576,680.66         | 74,406,886.01           |
| 6. Other liabilities | 21,438,227.11        | 730.82                 | 4,000.00         | 0.00                                  | 21,442,957.93         | 15,910,210.39           |
| **D. Accrued and deferred items** |                      |                        |                  |                                       |                       |                          |
|                      | 0.00                 | 0.00                   | 0.00             | 0.00                                  | 0.00                  | 4,000.00                |

| **Consolidated Balance Sheet** | 75,286,232.45 | 867,945.19 | 134,622.02 | -196,324.64 | 76,092,475.02 | 98,777,882.57 |
# Income statement for January 1 through December 31, 2019 (in euros)

The consolidated balance sheet of Malteser International comprises the accounts of the three entities: Malteser International e.V. with headquarters in Cologne, Germany, Malteser International Americas Inc.* with headquarters in New York, and Malteser International Europe. Malteser International Europe is a legally dependent division of Malteser Hilfsdienst e.V. with its own financial statement. The internal transactions of the three entities are eliminated in the consolidated balance sheet. For the sake of transparency, we prepared the financial statement to reflect the individual balance sheet of the three entities as well as an overall view of Malteser International’s accounts.

*Order of Malta Worldwide Relief Malteser International Americas Inc.

<table>
<thead>
<tr>
<th></th>
<th>MI Europe Cologne €</th>
<th>MI Americas New York €</th>
<th>MI e.V. Cologne €</th>
<th>Consolidation €</th>
<th>MI total 31.12.2019 €</th>
<th>MI total previous year €</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Revenue</td>
<td>157,353.75</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>157,353.75</td>
<td>156,581.64</td>
</tr>
<tr>
<td>2. Other operating income</td>
<td>49,327,716.54</td>
<td>1,593,951.04</td>
<td>54,000.00</td>
<td>-692,084.61</td>
<td>50,283,582.97</td>
<td>94,324,274.44</td>
</tr>
<tr>
<td></td>
<td>49,485,070.29</td>
<td>1,593,951.04</td>
<td>54,000.00</td>
<td>-692,084.61</td>
<td>50,440,936.72</td>
<td>94,480,856.08</td>
</tr>
<tr>
<td>3. Material costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a) Costs for raw materials, consumables, and supplies of purchased merchandise</td>
<td>5,056,874.80</td>
<td>9,546.31</td>
<td>0.00</td>
<td>0.00</td>
<td>5,066,421.11</td>
<td>7,351,961.46</td>
</tr>
<tr>
<td>b) Cost of purchased services</td>
<td>6,542,250.42</td>
<td>68,963.96</td>
<td>0.00</td>
<td>0.00</td>
<td>6,611,214.38</td>
<td>4,503,046.42</td>
</tr>
<tr>
<td>4. Personnel costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a) Wages and salaries</td>
<td>12,923,167.89</td>
<td>653,610.76</td>
<td>0.00</td>
<td>0.00</td>
<td>13,576,778.65</td>
<td>11,654,007.83</td>
</tr>
<tr>
<td>b) Social contributions and expenditures for pensions and other employee benefits</td>
<td>1,239,374.31</td>
<td>18,481.01</td>
<td>0.00</td>
<td>0.00</td>
<td>1,257,855.32</td>
<td>1,030,531.25</td>
</tr>
<tr>
<td></td>
<td>25,761,667.42</td>
<td>750,602.04</td>
<td>0.00</td>
<td>0.00</td>
<td>26,512,269.46</td>
<td>24,539,546.96</td>
</tr>
<tr>
<td>5. Income from the reversal of liabilities from earmarked funds</td>
<td>70,272,253.46</td>
<td>218,175.03</td>
<td>0.00</td>
<td>0.00</td>
<td>70,490,428.49</td>
<td>58,693,875.88</td>
</tr>
<tr>
<td>6. Expenses due to addition to liabilities related to earmarked allocations</td>
<td>40,234,509.94</td>
<td>421,137.27</td>
<td>0.00</td>
<td>0.00</td>
<td>40,655,647.21</td>
<td>89,499,439.44</td>
</tr>
<tr>
<td>7. Amortization of intangible fixed assets, property, plant, and equipment</td>
<td>142,520.12</td>
<td>2,412.01</td>
<td>0.00</td>
<td>0.00</td>
<td>144,932.13</td>
<td>117,658.80</td>
</tr>
<tr>
<td>8. Other operating expenses</td>
<td>53,629,246.46</td>
<td>495,260.19</td>
<td>48,620.78</td>
<td>692,084.61</td>
<td>53,481,042.82</td>
<td>38,299,504.32</td>
</tr>
<tr>
<td></td>
<td>-10,620.19</td>
<td>142,714.56</td>
<td>5,379.22</td>
<td>0.00</td>
<td>137,473.59</td>
<td>718,582.44</td>
</tr>
<tr>
<td>9. Other interest and similar income</td>
<td>4,064.36</td>
<td>212.18</td>
<td>0.00</td>
<td>0.00</td>
<td>4,276.54</td>
<td>5,802.22</td>
</tr>
<tr>
<td>10. Interest and other expenses</td>
<td>12,905.43</td>
<td>1.11</td>
<td>0.00</td>
<td>0.00</td>
<td>12,906.54</td>
<td>9,300.49</td>
</tr>
<tr>
<td>11. Pre-tax earnings</td>
<td>-19,461.26</td>
<td>142,925.63</td>
<td>5,379.22</td>
<td>0.00</td>
<td>128,843.59</td>
<td>715,084.17</td>
</tr>
<tr>
<td>12. Other taxes</td>
<td>111,552.41</td>
<td>1,335.10</td>
<td>0.00</td>
<td>0.00</td>
<td>112,887.51</td>
<td>113,566.73</td>
</tr>
<tr>
<td><strong>Annual surplus/loss</strong></td>
<td><strong>-131,013.67</strong></td>
<td><strong>141,590.53</strong></td>
<td><strong>5,379.22</strong></td>
<td><strong>0.00</strong></td>
<td><strong>15,956.08</strong></td>
<td><strong>601,517.44</strong></td>
</tr>
</tbody>
</table>
Notes on the income statement for the fiscal year 2019

The following statements explain the figures presented in the consolidated profit and loss statement of Malteser International

1. The activities of Malteser International are generally financed by donations or public grants. The sales revenue referred to here as Revenue are of negligible volume.

2. Donations and grants are subsumed into the figure for Other operating income. For the most part, this refers to earmarked donations and grants which must be used for designated projects. These funds come from public donors in Germany, the EU, and other countries as well as from private donors (see also the diagram Revenue Sources on p. 32). They are supplemented by unrestricted donations, which can be used freely without reference to a particular designation.

3. Donations are expended in the course of our work on Material costs such as medical and aid supplies, or payment of building contractors in rehabilitation and reconstruction projects.

4. Furthermore, we require local and international staff to carry out and coordinate our aid projects. These costs can be seen under the item Personnel costs. This includes a proportion of costs for personnel administration.

5. Our aid projects often have a duration of more than one year. Earmarked donations that cannot be completely used during the course of the relevant fiscal year are included as liabilities related to earmarked allocations. When the project is continued in the following year, this liability is resolved. This leads to the Income from the reversal of liabilities from earmarked funds seen in the statement.

6. In the relevant fiscal year, the liability for these unused donations leads to the Expenses due to addition to liabilities related to earmarked allocations.

7. Planned and regular amortization of intangible assets as well as write-downs of property, plant, and equipment are shown here.

8. A number of items are included under Other operating expenses. Among these are, for example, direct project costs, such as support of project partners, vehicle expenses, costs of premises, costs of maintenance and repair; indirect project costs such as communications and coordination as well as IT infrastructure and finance management. In 2019, the share of administrative expenses was less than 10% of total expenditure.

9. Funds that are not needed for aid activities in the short term are deposited for investment. The resulting interest income and yields on securities are recognized as Other interest and similar income.

10. As a rule, interest and similar expenses are the result of project funds not being disbursed in a timely fashion.

11. The result from ordinary activities are the Post-tax earnings.

12. Other taxes are most often due to tax legislation in project countries.
Audit Opinion

To Malteser International e.V., Cologne/Germany

We have audited the appended combined financial statements of Malteser International, comprising the combined balance sheet and the combined statement of profit and loss including related explanatory notes, for the financial year from 1 January to 31 December 2019.

Responsibility of the Executive Directors

The executive directors of Malteser International e.V., Cologne/Germany, are responsible for the preparation of the combined financial statements that comply with the accounting principles included in the explanatory notes to the financial statements. In addition, the executive directors are responsible for the selection and reasonableness of the accounting principles presented in the notes to the combined financial statements and for such internal control as they have determined necessary to enable the preparation of combined financial statements that are free from material misstatement, whether due to fraud or error.

Auditor’s responsibilities

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit of the combined financial statements in compliance with German Generally Accepted Standards for the Issuance of Long-form Audit Reports for the Audits of Financial Statements promulgated by the Institut der Wirtschaftsprüfer (IDW). Those standards require that we fulfil the German professional responsibilities and plan and perform the audit of the financial statements such that reasonable assurance is obtained about whether the financial statements are free from material misstatement.

The audit of financial statements includes conducting audit procedures in order to obtain audit evidence for the values recognised in the financial statements and the related explanatory notes. The selection of the audit procedures is at the due discretion of the auditor. This includes assessing the risks of material – intended or unintended – misstatements in the financial statements. In assessing these risks, the auditor takes into account the internal control system which is relevant to the preparation of the financial statements. The related goal is to plan and perform audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an audit opinion on the effectiveness of the internal control system of the Association. The audit of financial statements also includes assessing the accounting methods applied, the reasonableness of the estimated values in the financial accounting records determined by the executive directors as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Audit Opinion

In our opinion, on the basis of the knowledge obtained in the audit, the combined financial statements for the financial year from 1 January to 31 December 2019 of Malteser International have, in all material respects, been prepared in accordance with the accounting principles described in the explanatory notes to the financial statements.

Accounting principles as well as restriction of disclosure and disclaimer

Without qualifying our audit opinion, we draw attention to the explanatory notes to the financial statements which describe the relevant accounting principles. The financial statements were prepared in order to present the international activities of Malteser as a whole, eliminating internal Malteser transactions. Consequently, the financial statements may be inappropriate for a purpose other than the purpose referred to above.

Our auditor’s report has solely been prepared for Malteser International e.V. and must not, without our consent, be disclosed to, or be used by, third parties.

Note to limitation of liability

The scope of the engagement and our responsibilities thereunder, towards both MI and third parties, are governed by the agreements dated 26 November 2019/31 January 2020 and complementarily by the enclosed »General Engagement Terms for Wirtschaftsprüfer and Wirtschaftsprüfungsgesellschaften (German Public Auditors and German Public Audit Firms)« as of 1 January 2017.

Düsseldorf/Germany, 20 May 2020
Deloitte GmbH Wirtschaftsprüfungsgesellschaft

Höll
Wirtschaftsprüfer
[German Public Auditor]

Wiethoelter
Wirtschaftsprüfer
[German Public Auditor]
Our organizational structure

The membership of Malteser International currently consists of 27 national associations and priories of the Order of Malta that actively support the organization within their jurisdictions. Regional branches in both Europe and the Americas also serve as associate members.

Their representatives, together with the Board of Directors, the Grand Hospitaller of the Order of Malta, the Chaplain, the Secretary General, and the Vice Secretary General form the General Assembly: the organization’s highest decision-making body. The General Assembly is responsible for electing and discharging the Board of Directors, accepting the annual accounts and ordering financial audits as well as passing amendments to the by-laws. The President convokes the General Assembly once a year.

The Board of Directors, which is elected for a four-year term, consists of the President, the Vice President, the Treasurer, and up to two additional elected members as well as representatives from the regional branches in Europe, the Americas, and the Asia-Pacific region. The Board of Directors works on a purely voluntary basis and is responsible for approving the financial plans and the annual budget as well as commissioning the financial auditing of the annual accounts. The Board of Directors bears the overall responsibility for the organization’s operative tasks.

The salaried Secretary General manages the organization’s General Secretariat and is responsible for the operational management activities in line with the financial plan and the annual budget.

Malteser International – a work of the Sovereign Order of Malta

More than nine centuries of service to the poor and the sick

The Order of Malta is one of the oldest institutions of the Western world. The lay religious order has 13,500 members all over the globe, bound to the service of Christian charity. Their motto is “Tuitio Fidei et Obsequium Pauperum” – serve the poor, guard and witness the faith. They are engaged in a vast number of medical, social, and charitable activities in more than 120 countries, including the Order’s own aid organizations.

The Order – whose seat is in Rome – has diplomatic relations with 108 states as well as observer status at the United Nations and representing missions at a range of European and international organizations. This network allows the Order and its agencies to rapidly provide aid during crises and disasters around the world. The embassies of the Order also support the activities of the Order’s national associations and of Malteser International. The Order is neutral, impartial, and apolitical.
None of the achievements set out in this report would have been possible without our supporters. We would like to give our most sincere thanks to all the institutional and private donors, schools, local and international partners as well as to the associations and organizations of the Order of Malta that made a valuable contribution to providing fast, effective, and sustainable relief for people in need by supporting Malteser International in 2019!

**Our donors:**
- Aktion Deutschland Hilft
- Alfred Neven DuMont Stiftung
- AMREF Health Africa
- BILD hilft e.V. «Ein Herz für Kinder»
- Deutsche Bank Stiftung
- Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ)
- Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO)
- Else Kröner-Fresenius-Stiftung
- European Investment Bank (EIB)
- EuropeAid
- Food and Agriculture Organization of the United Nations (FAO)
- Federal Ministry for Economic Cooperation and Development (BMZ)
- Gerda Henkel Stiftung
- German Federal Foreign Office (AA)
- German Toilet Organization (GTO)
- Global Fund for Forgotten People
- International Organization for Migration (IOM)
- Malteser Stiftung Seliger Gerhard
- Nachbar in Not
- Save the Children
- State Chancellery of North Rhine-Westphalia
- Stiftung RTL – Wir helfen Kindern
- Thai.Ger
- The Global Fund to Fight AIDS, Tuberculosis and Malaria
- University of Antwerp
- UNICEF
- United Nations Office for the Coordination of Humanitarian Affairs (OCHA)
- US Department of State
- World Food Programme (WFP)
- World Child Future Foundation
- WorldFish

**Our members:**
- Malteser International Member Associations and Priories
- Australia
- Austria
- Belgium
- Czech Republic (Grand Priory of Bohemia)
- Canada
- Colombia
- Cuba
- France
- Germany
- Hungary
- Ireland
- Italy
- Lebanon
- Malta
- Mexico
- Netherlands
- Philippines
- Poland
- Portugal
- Scandinavia
- Singapore
- Spain
- Switzerland
- United Kingdom
- USA: American Association, Federal Association, Western Association
Our work is not done yet!

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