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Contents

- **3** Foreword
- **4** Where we help
- **6** What we do
- **7** Annual Review
- **8** The year in images
- **10** In Focus: Syria crisis
- 12 In Focus: Philippines
- **14** In Focus: Germany floods
- **15** Other emergencies
- **16** Africa
- 22 Asia
- 28 Americas
- **34** Events and campaigns
- **35** Financial Report: Facts & Figures
- **36** Financial and strategic highlights
- **38** Our impact
- **40** Our staff
- **42** Our programs
- **44** Financial overview
- 46 Annual accounts as of 31 December 2013
- **49** Our donors and cooperation partners
- **50** Our structures and members

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Foreword



Dear readers, friends and supporters,

Over the past decade, 200 million people on average were affected by natural disasters every year. That's not counting the millions who have suffered as a result of armed conflicts and man-made crises all over the world. In most cases, there's nothing we can do to prevent these events from happening – whether it is an extreme weather event or a civil war. But we can, and must, do everything in our power to minimize and alleviate the suffering of so many of our brothers and sisters with whom we share this fragile planet. That is exactly what we did in 2013, and we would like to share with you the fruits of our labor with this Annual Report.

In 2013, three major crises and disasters have made clear how important it is for us at Malteser International to continue to strengthen our emergency relief capacities. We intensified our assistance to Syrian refugees in Syria, Turkey, Lebanon and Iraq, as more and more families have fled from war in search of a better life in other regions – thus putting an enormous strain on the host communities' resources and infrastructure. Typhoon Haiyan showed us that a strong cooperation between the Order of Malta's national associations and Malteser International can boost the impact of our common goal, especially when faced with immense logistical difficulties. Such cooperation was also crucial after the heavy floods in Germany last summer, when Malteser International's expertise in disaster relief was called upon to coordinate the recovery projects in the flood-affected regions.

Finally, important structural changes took place in 2013. Our new American headquarters were opened in Miami last November. Together with our regional headquarters for Europe, Africa and the Middle East in Germany and, in the future, a third unit in the Asia-Pacific region, the new structures will allow us to strengthen our networks and partnerships in our areas of operation. All of this translates to one simple goal: to better serve people in need.

As we progress into 2014, our help continues to be direly needed in many of the areas and projects listed in this report, as well as new ones. While we are proud of our accomplishments last year and feel blessed to have been able to touch so many lives – providing direct emergency relief to half a million people and reaching millions more with our health, water, livelihood and disaster preparedness programs – the overwhelming needs we see every day lead us to strive to do even more.

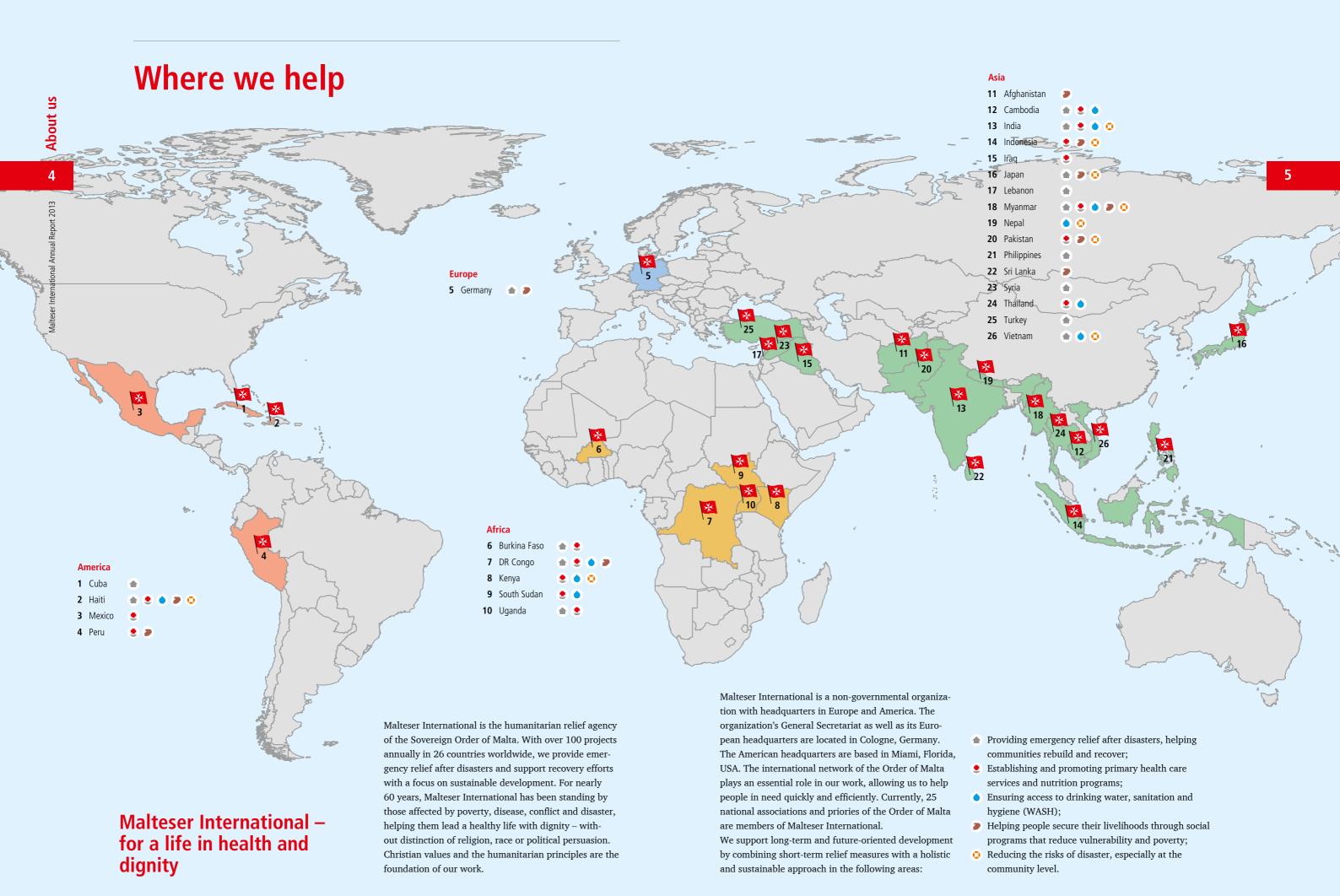
Through your continuous and generous support, we can reach more and more people with each new year, ensuring that their basic needs are met and their right to health and dignity is upheld – even in the most challenging, remote and neglected corners of the world.

Sincerely

Thierry de Beaumont-Beynac

Tede Jeanmon No

President



What we do

Five core areas, one goal: a healthy, dignified life



Relief, Reconstruction & Rehabilitation

Millions of people suffer from the consequences of natural disasters, conflicts and crises each year. 200 million people are affected on average by natural disasters every year, and millions more are caught in the midst of conflicts and wars. This results in destroyed social, financial and physical infrastructure, displacement, poverty, food insecurity and a disruption of development. We provide emergency medical aid and distribute food and other needed supplies immediately after a disaster. At the same time, we pave the way for reconstruction efforts and help restore and people's livelihoods sustainably. Our approach is focused on strengthening local capacities.



Health & Nutrition

Nearly seven million children under five die each year — that's 12 children every minute. A third of these children die from causes such as malaria, diarrhea and pneumonia — illnesses that can be prevented with access to basic health care. We work to improve health care for people in need — especially mothers and infants — and for strong, sustainable public health care systems. Since a population's health is also closely connected with its diet, we incorporate nutrition into our health programs, working to prevent and treat malnutrition and increase food security.



Water, Sanitation & Hygiene (WASH)

Between 1990 and 2012, nearly 2.3 million people gained access to clean drinking water, and two million to sanitation. Still, by the end of 2012, 748 million people worldwide were still lacking clean water – 90 percent of them living in Sub-Saharan Africa and Asia – and 2.5 bil-

lion still live without basic sanitation. 82 percent of the people without access to clean water live in rural areas. Many diseases are caused by poor hygienic conditions and scarce or polluted water. We advocate for the right of every human being to clean water and sanitation, and call on each person to apply basic hygiene principles. If this vision came true, we could save the lives of 5,000 children every day who die from the effects of poor hygiene.

Source: World Water Report of the United Nations 2012



Livelihood & Social Programs

Diseases, disasters, conflicts, climate change and economic crisis threaten the livelihoods of low-income families all over the world, making it even harder for them to make a dignified living and sustain themselves. With our social programs and income generation measures, we work together with communities to promote the integration of those who are excluded from society, reduce their vulnerability and secure their means of subsistence.



Disaster Risk Reduction (DRR)

As populations grow, global temperatures rise and environmental degradation is rampant, extreme natural events such as droughts and floods become ever more frequent, more intense, and more destructive. Before disaster strikes, people living in high-risk regions should be prepared. We help communities make emergency plans and implement protective measures to reduce the risks of disaster. As a founding member of the Disability-inclusive Disaster Risk Reduction Network, we place a special focus on people with disabilities and their active participation in disaster preparedness.



The year in images



Danh



November 2013 Typhoon Haiyan hit the Philippines: With food, hygiene and emergency kits, water containers and blankets, Malteser International helped the people on Samar, Bantayan and Bohol islands survive after they lost everything. Read more on p.12

PHOTO: FULVIO ZANETTINI/

August 2013

DR Congo/Uganda: Following violent clashes in eastern DR Congo, Malteser International provided emergency relief for families who fled to the neighboring Uganda. Read more on p. 15

PHOTO: AFRICAN VISUALS MEDIA

May 2013

United Nations Global Platform for Disaster Risk Reduction in Geneva, Switzerland: Danh, a handicapped 11-yearold, speaks about his participation in Malteser International's project to improve preparedness in his home country of

Read more on p. 34

July 2013

Two years after the great drought in Kenya: Malteser International teaches halfnomad communities to collect and safely keep rainwater to prepare for future droughts. PHOTO: AFRICAN VISUALS MEDIA

December

January February March April May June July **August** September **October November**

March 2013

2013

Two years of civil war in Syria: Relief for refugees and displaced in Turkey, Syria and Lebanon. Read more on p.10 PHOTO: KEREM YUCEL



Japanese tsunami and earthquake, the new children's home Fujinosono is inaugurated – safer and better than ever. Read more on p. 34 PHOTO: KAZUSHI ABE



1,000 people and their

Read more on p.15 PHOTO: CHICO SANCHEZ

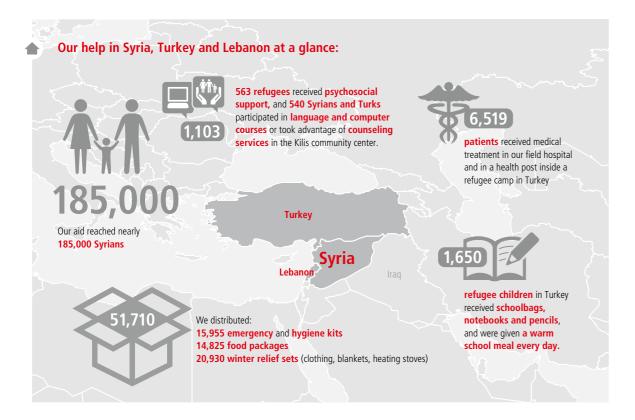
families.

December 2013

2014

Unrest in Ukraine: The Ukrainian relief corps of the Order of Malta provided people daily with 4,500 portions of soup and 3,000 liters of hot tea on Independence Square (Maidan) in Kiev.

Syria crisis: Helping to heal the wounds of war



n Syria, Dr. Ghadeer used to have her own pediatric clinic. She used to treat children mostly for common children illnesses: coughs and colds, ear infections, bellyaches. But then, the war started.

As part of a particularly cruel type of war strategy, health care facilities and medical staff became direct targets of attacks. "I left Syria April last year because I felt really unsafe," Dr. Ghadeer tells. "I was worried about my future and the future of Syria's children."

As a pediatrician, Dr. Ghadeer is responsible for children patients at the field clinic run by Malteser International in Kilis, Turkey, three kilometers from the northern Syrian border. The 30-bed mobile clinic provides medical care and psychosocial support to ill and injured refugees fleeing across the border. Dr. Ghadeer is part of a team of six doctors, 13 nurses, two pharmacists, two ambulance drivers and one midwife – all of them Syrian, so they can best attend to the needs of their fellow citizens. "The patients feel really comfortable to be treated by Syrian people like them," Dr. Ghadeer says. "This helps them overcome the cultural and emotional barriers of being a refugee in a foreign land."

In the clinic, Dr. Ghadeer helps to counter the harm that war and displacement has brought to thousands of Syrian children. She treats cases of malnutrition, anemia, vitamin deficiency, asthma, pneumonia, and infectious diseases, as well as some skin diseases – often brought about by the strenuous journey as the children flee with their families in search of safety, many times crossing deserted areas on foot, without enough food or water, without shelter.





Sometimes, Dr. Ghadeer sees firsthand what the horrors of war do to children's lives. "The most touching case was a child who lost both his legs because of an explosion in Syria," she recalls. "The child was depressed because he thought his parents did not want him as their son anymore, as his family had not come to visit him for several days. But the truth was that his relatives were not able to visit him because the Turkish–Syrian border was closed, and they were stuck in Syria."

To help refugees deal with these and other traumatic experiences, Malteser International has also trained and qualified Syrian staff in the areas of psychosocial care, conflict transformation and peace education. A team of two psychologists, a social worker and three community workers provide counseling and support for Syrians at Kilis' community center, which opened in November last year and received more than 500 guests in the first three months of operation.

Together with its partners, the International Blue Crescent and the Lebanese Association of the Order of Malta, Malteser International has been providing emergency relief in Syria, Turkey and Lebanon since July of 2012. In 2013, we distributed emergency kits, food packages, baby food and supplies, hygiene products, ovens and fuel, blankets and winter clothing to nearly 40,000 people. We also kept a school for Syrian refugee children in Turkey running by covering staff costs, supplying school materials and providing the children with a warm meal every day. And, in 2014, we have

intensified our help inside Syria with three additional mobile clinics in the north of the country. An additional mobile clinic in north Lebanon will provide primary health care for refugees living in remote areas scattered across the region.

Unfortunately, an end to the conflict is not in sight, and thousands continue to flee their homes. By September of 2013, the number of refugees reached two million; an additional 6.5 million Syrians are internally displaced. Still, Dr. Ghadeer hopes that, some day, she and the 53 other Syrians who currently work with Malteser International will be able to return and help their people to rebuild their country once more.

Children arrive at the clinic across the Turkish-Syrian border suffering from illnesses such as anemia, asthma, infections and skin lesions.



Dr. Ghadeer examines a sick Syrian child at Malteser International's field clinic in Kilis, Turkey.

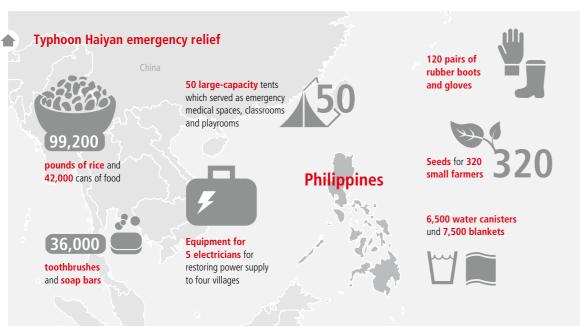
A team of six doctors, 13 nurses, two ambulance drivers and one midwife — all of them Syrian — work to provide health care to provide health care to refugees in Turkey. PHOTO: MICHAEL SWAN/ CATHOLIC REGISTER

his new schoolbag filled with pencils,

supplies

Philippines: Starting over after Typhoon Haiyan







eventeen-year-old Mayeth lives on Samar Island, the largest in the Eastern Visayas. Until last November, Mayeth was a happy teenager, without a care in the world; her family led a good life and even owned a small business. Then came the fateful morning that changed everything: on Nov. 8, Typhoon Haiyan swept through the Philippines, leaving death and destruction behind. More than 6,000 people lost their lives; four million lost their homes, and are still living in makeshift tents or temporary shelters. One million homes were destroyed, and millions lost their source of income. Mayeth is one of 14 million people whose lives were forever changed that day. "The typhoon hit our family hard," she tells.

Immediately after the disaster, Malteser International and Order of Malta Philippines sent relief packages containing food, household and hygiene articles to the disaster regions on Samar and Bantavan islands. "We were so happy about the rice and the canned foods - they lasted for several weeks," Mayeth says. "But the pots and pans, towels and blankets were also a great help." The emergency goods helped some 20,000 people survive in the weeks following Haiyan.

After the basic needs of the residents in Mayeth's village were met, it was time to help them recover their livelihoods. Most of the harvest had been destroyed by the typhoon, so Malteser International helped 320 families plant their fields anew with new farming tools and seeds. "Thanks to our new sprinkler, we don't have to carry



"We aren't just building houses; we're building communities."

Mina Carag-Harada, Hospitaller, Order of Malta Philippines

On Samar Island, life goes on: the residents received new seeds to plant their fields. With the sales from the harvest, the families can also earn a small income

heavy water buckets anymore. That way, we have more time and energy to work in the fields," Mayeth says. Some residents also received construction tools such as wheelbarrows and shovels in order to remove the debris and rubble from their villages. 2,500 children went back to school in 40 large-capacity tents, which Malteser International provided to serve as temporary classrooms. The new notebooks, backpacks and pencils allowed the children to make a fresh start in the schoolyear. "The return to our everyday routine at school also helps to take our minds away from the horrible memories of the typhoon," Mayeth says.

In four villages on Bantayan and Samar islands, where 80 to 95 percent of the homes were either heavily damaged or completely destroyed, Malteser International will help the residents rebuild 700 homes and make them resistant to future storms. Our engineers and technicians will train the homeowners and coach them through construction and repairs. Our teams will also help repair and improve the villages' water supply systems, build latrines and organize hygiene campaigns.

For the many residents on Samar who lost their means to provide for their families, Malteser International will provide support and counseling so they can build up new businesses and generate income. The projects will be based on the residents' ideas and wishes, and will be planned and brought to life by the residents themselves. "We can do many things on our own. But we can reach so much more together," Mayeth exclaims. "We will put all the help we've received to good use and carry out our projects in the best way possible. Even the smallest gestures are important. Together, all of these small things are a huge help for our village."

8 November, 2013: Typhoon Haiyan hits the Philippines' central islands with full power. 6,000 people have died, and four million lost their PHOTO: FULVIO ZANETTINI

Floods in Germany: Relief for homes and hearts

Our Help after floods: Nearly 800 Malteser volunteers and staff were deployed during the emergency relief phase. They helped during evacuation, prepared emergency shelters and cared for both victims and first responders. Germany 19,050 19,050 warm meals were distributed in Sachsen-Anhalt for five months as part of the meal service 400 people received "Soup and Soul". financial grants to help them recover from the floods



More than 2,600 people have already received help from Malteser. Still, many live with anxiety and fear: "I can't get the sound of the water out of my head," a woman tells a Malteser social worker in Deggendorf.

PHOTO: MALTESER DEUTSCHLAND

"The army and the firefighters rescued our homes, Malteser rescued our hearts"

Resident of Deggendorf and flood survivor

'm lucky to have my grandson – and Malteser," says 66-year-old Maria T., from the Bavarian village of Deggendorf. After her husband died on Christmas six years ago, she moved there to be closer to her daughter. Maria still hasn't overcome her husband's death – she suffers from panick attacks and loneliness – and her financial situation is precarious at best.

Then, in June 2013, Deggendorf experienced its worst floods in the past 500 years. "My home is so damaged that it must be demolished, and I will have to move from my rental apartment very soon," Maria tells the social worker in Malteser's mobile counseling unit.

Maria is one of 2,600 people that Malteser International has helped to recover after the floods. Volunteers trained in emergency psychological care and crisis intervention have been traveling the county with the mobile counseling station. They listen to the residents' problems, advise and help them find and get the support they need. In order to help people like Maria recover in the long term, a professional social worker has also been at the service of the community, as many continue to suffer from trauma and instability.

After the initial emergency relief, Malteser International worked with local authorities and organizations to identify projects and areas that needed help. These projects helped fill the gaps and cover damages that were not previously covered by institutional funding or private insurance. More than 2,600 people have already received help – from warm meals, washers and dryers, and help with filling out paperwork and applying for public grants to psychological support. We also supported the rehabilitation of social services and institutions such as homes for the elderly, schools and hospice care.

Malteser International has supported its sister organization, Malteser Germany, in coordinating the relief efforts. They counted on the generous support of many private donors: more than 100,000 supporters donated a total of 10.3 million euros. The activities will continue until mid-2015 and should contribute to the long-term recovery of the region. Flooded areas of the Czech Republic and Hungary should also benefit from the aid.

Other emergencies

India & Nepal: Medical aid and drinking water after devastating monsoon floods

Early monsoon rains in mid-June caused massive flooding and landslides in the northeast Indian state of Uttarakhand and western Nepal. Through its Indian partner CHAI, Malteser International provided emergency medical relief in 15 villages and provided clean drinking water to 10,000 people. In Nepal's Bardiya district, a disaster preparedness project by Malteser International before the monsoons helped protect the villages' residents and their water supply. With the installation of water pumps on elevated platforms, the water sources were protected and clean water was available during and after the floods. Village residents also used the raised platforms as evacuation areas. (Read more on pages 32-33)

Uganda: Health care for 22,000 Congolese refugees

Heavy fighting between rebels and the Congolese army led tens of thousands of Congolese to flee across the border in July. Some 70,000 people sought refuge in the refugee camp in Bundibugyo, a remote village in West Uganda, and surrounding areas. Malteser International provided health care and improved hygiene in the camp and at a nearby health care center, in addition to sending mobile medical teams to treat refugees along the border region – bringing help to a total of 22,000 refugees. The health posts were equipped with beds, mattresses, tents that served as waiting rooms, medicine fridges, vaccines, and medical equipment.





After the heavy floods in Cambodia, Malteser International gave 1,500 families access to clean water with water containers, filters and chlorine tabs

Cambodia: Flood relief with seeds, water and hygiene

Late monsoon rains led to widespread flooding in Cambodia in September. 160,000 families were affected, and the drinking water was contaminated in many villages. Malteser International distributed water containers, chlorine tablets, water filters and hygiene kits to 1,500 households in Oddar Meanchey and Siem Reap. Local teams ran awareness campaigns to help prevent diseases, distributed seeds to 1,000 small farmers, and trained the local authorities in disaster management.

Mexico: Emergency relief after double storms

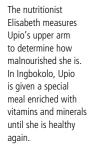
In mid-September, Mexico was hit by two hurricanes in one week: first, Hurricane Ingrid made landfall on the Gulf Coast Sept. 12, followed by the even more destructive Hurricane Manuel, which struck the Pacific Coast one day later. Malteser International supported the Mexican Association of the Order of Malta in Guerrero state. Teams distributed food, medicine, clothing, water and hygiene items. A mobile medical team treated the sick and injured in the disaster zone. Around 1,000 people and their families benefited from the help.

In Bundibugyo, a remote Ugandan district, Malteser International provided basic health care for 22,000 Congolese refugees. PHOTO: AFRICAN VISUALS

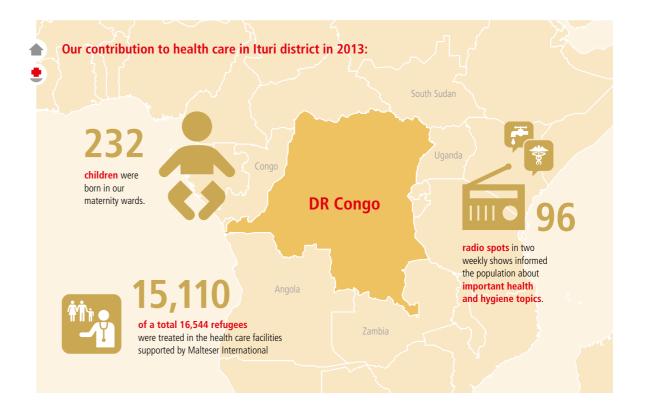
DR Congo: Escaping violence, finding health

"Despite many setbacks, we were already able to accomplish a lot to improve their health. Four years ago, only 1 in 5 women came to the health centers to deliver their babies; today, 4 out of 5 do. They now know the importance of preand post-natal care. Women, men and children who are victims of sexual violence can also receive medical and psychological treatment, anonymously and free of charge. Before 2009, there was no such option here. This progress is the reason I wake up and go to work every morning."

Dr. Joseph Kasanda, medical coordinator in Ariwara







his region is not safe," says Dr. Joseph
Kasanda, Malteser International's medical
coordinator in Ituri district, in the northeast of
the country. In November of 2013, countless
houses in nearby villages were burned to the ground,
and many women raped. Because of the regular clashes
between rebel groups and the army close to DR Congo's
borders with South Sudan and Uganda, thousands of
families fled to the villages of Adi and Ingbokolo.

There, Dr. Joseph and his team work in the local hospital and health center to provide health care for the displaced. "They live here in very poor conditions. Most have no income and can't afford health care," Dr. Joseph tells. Because the roads are too dangerous, trade and farming have come to a halt. For the same reason, many of the displaced would rather not risk the trip to the nearest health post.

The family of two-year-old Upio was one of those who fled to Ingbokolo. Like many other children there, Upio suffers from malnutrition. Elisabeth, a nutritionist at the health center supported by Malteser International has been taking care of her. Every day, she gives Upio a special paste, enriched with vitamins and minerals. At the center, she is measured and weighed regularly. Upio will stay with her father in the nutrition unit for three weeks, until she's healthy again.

"In the following months, community health volunteers will visit her every week to make sure that she's eating properly at home and won't get sick again," Dr. Joseph explains. Malteser International trains these volunteer workers to recognize the early signs of malnutrition and common diseases, such as tuberculosis, leprosy or guinea worm disease. They also inform the population – especially pregnant women, seniors or victims of sexual violence – about treatment options in the health centers.

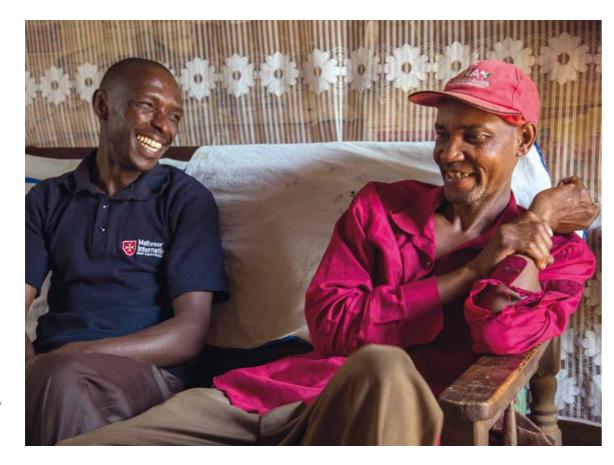
Malteser International covers the costs of health care for thousands of patients in the region, not only for regular treatment but also special needs such as baby delivery and surgeries, as well as medicine. In addition to providing medical expertise, the program also rebuilds or renovates dilapidated health care centers, equipping them with maternity wards, labs and latrines. This translates to better health care for both the displaced and the local population.

Dr. Joseph and his team also offer regular trainings to the local health personnel. "They take what they learn to the 24 health care facilities throughout the region," he says. "That way, we know that they will carry on with the work in the future and continue improving health care in the region."

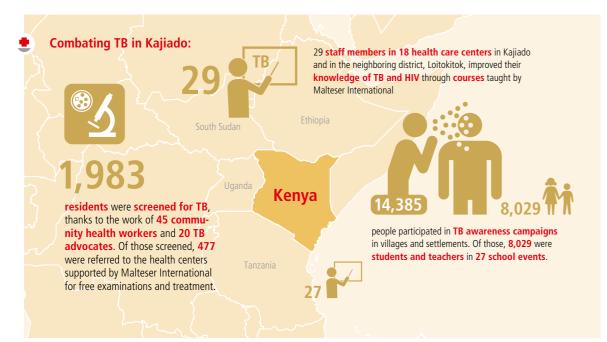


Malteser International covers not only the costs of regular medical treatment, but also special needs such as childbirth, surgery, and medication.

Kenya: Fighting tuberculosis with the Maasai, from home to home



Community health worker Kimani visits TB patients regularly at home. PHOTO: AFRICAN VISUALS





Health education starts at a young age: the mobile teams teach the children about the importance of clean water and hygiene for their health.

PHOTO: AFRICAN VISUALS MEDIA

he silhouette of Mount Kilimanjaro, Africa's highest mountain, towers over Kajiado, a district in southern Kenya close to the Tanzanian border inhabited by the Maasai, a semi-nomadic pastoralist tribe. Despite their privileged view of one of Africa's most popular tourist destinations, the Maasai lead a very simple lifestyle. But their idyllic way of life is threatened by a deadly disease: Tuberculosis (TB).

TB is widespread in Kenya: the country is ranked as the 13th with the highest incidence of the disease by the World Health Organization. Caused by a bacterial infection, TB has many risk factors: the presence of HIV/AIDS, which weakens the immune system; malnutrition as a result of poverty; and lack of knowledge to prevent infections. Aggravating the Maasai's situation is the fact that their home region has been neglected by the national government for years and has very limited access to health care.

Kimani, who works as community health worker for Malteser International, does not let himself be discouraged by these challenges. Every month, he visits families in Kajiado's villages with a mobile medical team. "We examine and treat them in their homes," Kimani tells. "We also tell them how they can protect themselves and their families from TB, to stop the infection from spreading in the villages."

Kimani is the link between the Maasai communities and the health posts with which Malteser International cooperates. "I make sure the patients are taking their medicines regularly and practicing good hygiene in their daily lives." In a region where folklore and superstition are rooted deeply into people's minds, Kimani needs a lot of patience to explain to the villagers that diseases such as TB and HIV/AIDS are neither punishment nor disgrace and cannot be treated with traditional medicine.

Luckily, he can count on people like Peter. Early in 2013, Peter was diagnosed with a TB infection. After

Malteser International referred him to a health care center, Peter received treatment for six months free of charge. He returned to his village, healthy again, and decided he wanted to do something good for his community – so Malteser International trained him to become a TB advocate. He learned to detect the early symptoms of the disease. Because of his history, Peter became a role model; he encourages those showing signs of TB to get tested.

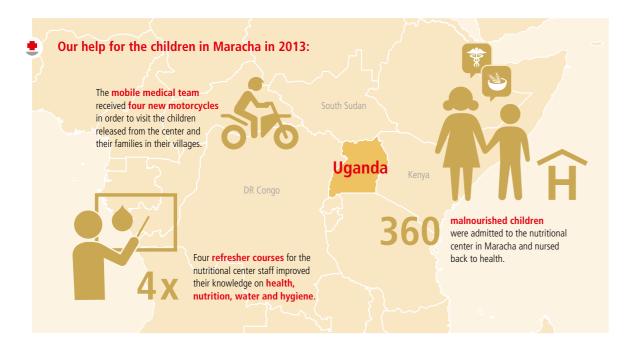
In this region, a sick person often has to walk up to 50 miles to reach the nearest health care center. So Kimani and his mobile team visit the villages and collect blood samples, which they take back to the lab for analysis. He sends the results to Peter on his cell phone. If any of the tests is positive, the team picks up the patient and brings them to the clinic for the free treatment. "I already detected nine new TB cases," Peter tells proudly. "All of them followed my advice and went to get treatment."

In order to reach even the most remote villages, Malteser International also produces short radio spots which are broadcast in the Maasai language and inform the population about TB and HIV prevention and detection.



A few months ago, Peter himself was suffering from tuberculosis. After he was cured, he decided to become a TB advocate in his village, helping prevent the spread of the disease. PHOTO: AFRICAN VISUALS MEDIA

Uganda: A place of hope for children



"Hope's relatives had thought of abandoning the child, as they had no means to care for her. Were it not for the nutrition unit at the hospital, she may not have survived. Now she's a happy, healthy child"

nurse at Maracha nutrition unit

Nurses from the Maracha nutrition unit show villagers how to properly wash their hands in order to prevent diseases PHOTO: AFRICAN VISUALS ope is a cheerful little girl, always with a smile on her face. Whoever sees this normal, healthy six-month-old today would likely never guess the struggle she went through in her first weeks of life. Hope's mother became so ill during the pregnancy that Hope was born three months premature. Her mother died shortly after giving birth. A woman from her village brought Hope to the hospital in Maracha, where she stayed for three weeks. During that time, her grandmother arrived to take care of her, and the hospital taught her how to properly care for her frail granddaughter.

Hope's story is one of many that could be told by the nurses in the nutritional center of Maracha Hospital. 360 malnourished children were brought to the center





in 2013 and nursed back to health. Nearly 95 percent of them were able to return to their homes after a few weeks of intensive care. Malteser International has supported the center since 1996, covering the costs of training and salaries of the medical staff, medicines, housing for the children, and sending mobile medical teams to the nearby villages.

During their stay at the nutritional center, the children receive therapeutic formula and "Plumpy Nut", a peanut paste enriched with minerals and vitamins. Because many



of the mothers have no income and can barely afford food, they are afraid to bring their children to the nutrition center, fearing high costs. Thanks to Malteser International's support, the hospital is able to offer all mothers and caretakers basic food, firewood and a place to cook while the children are being treated – all free of charge. This encourages them to stay at the center with their children through the entire treatment, which lasts up to three weeks.

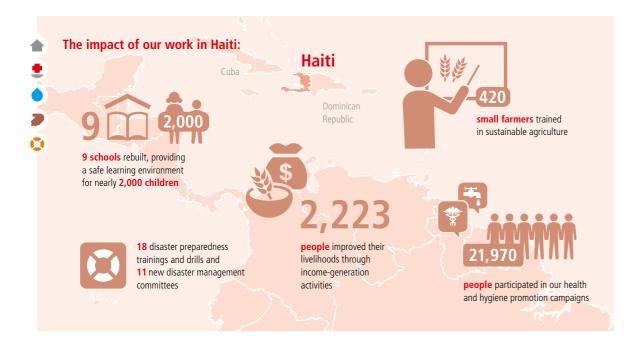
When the children and the families return to their homes, Malteser International's work is far from over. To ensure the children will continue to grow up healthy and develop, the nutritional center sends a mobile medical team to the villages for regular weigh-ins and check-ups. The whole village benefits from the visits: the teams use the opportunity to measure and weigh all of the other children as well, and send those who are undernourished directly to the center in Maracha. A few days prior to the visit, the village's nutrition counselor announces the arrival of the team and invites the residents to participate in an educational session. Each time the team returns, they teach the residents about a new topic. In the session about diarrhea, for instance, they learn how to avoid infection: by washing hands, fruits and vegetables before eating, drinking clean water, and cleaning their latrines. Malteser International also trains the nutrition counselors to advise the villagers in basic health and nutrition questions.

6-month-old Baby Hope can smile again: after her treatment in the nutrition unit, she is healthy once more. PHOTO: AFRICAN VISUALS MEDIA

The midwives from the mobile medical team control the weight and the health status of the children.

PHOTO: AFRICAN VISUALS MEDIA

Haiti: Growing nutritious food, sustainably



elle Anse is one of Haiti's poorest regions, located in the south-eastern part of the country

an area of very difficult access. The region
is constantly affected by natural disasters: the
2012 storms Isaac and Sandy devastated houses, fields
and infrastructure and threatened the population with
cholera epidemics. In addition, the devastation of the
region's natural resources have made it more vulnerable to the effects of climate change. To strengthen the
population against future disasters, Malteser International and its local partner, COTEDO, are showing Belle
Anse residents how to use their resources sustainably.

Two community gardens were started as model gardens for small farmers in Bel Air and Caduc, together with the local agricultural co-ops. Philippe Berriere, a member of the local farmers' co-op, is one of those working in the model community garden. "We decided to plant this garden because, until now, we had been lacking the tools we need to start plant nurseries to grow our own seeds. Thanks to the cooperation with COTEDO and Malteser International, we now have cabbage, red peppers and onions – we just couldn't grow those vegetables here before."

Through their work on the model gardens and trainings, more than 100 farmers have learned about sustainable agriculture and soil conservation and started

employing these techniques in their own fields. In Cadud, for instance, a group of women pulled their resources together and now focus on growing eggplants. This excellent source of fiber, copper, potassium and manganese, as well as vitamins C, K, B1 and B6, is already enriching the families' daily nutrition. Some of the participating farmers were chosen to share what they learned with other farmers in the region. Another 600 small farmers have already signed up for the trainings in 2014.

"Sharing the knowledge of sustainable agriculture is essential for the success of the project, so that more and more farmers use these techniques in their gardens" says





"We want to expand our gardens and grow even more types of vegetables, so our meals have more calories and vitamins. If we can give our children carrots and okra from our own gardens, we can prevent malnutrition."

Philippe Berriere, member of the Belle Anse farmers' co-op

The model community gardens in Belle Anse allow local farmers to learn sustainable farming techniques which they can employ in their own fields.

Jelena Kaifenheim, Haiti program manager. But, in Belle Anse, it is very difficult to obtain a variety of seeds. For this reason, Malteser International is helping the local farmers' co-op to maintain a base stock of seeds which are available to all co-op members. In exchange for the seeds, farmers commit to employing sustainable farming techniques and to return a part of the seeds to the co-op after the harvest. "That way, we can ensure that seeds will always be available, and change farming practices in the long run," Kaifenheim says.

Philippe and the other residents decided themselves how to care for the garden and what kinds of vegetables they wanted to grow. With the proper tools and training, they took up responsibility for the work. "We need a bigger variety of food in our region," Philippe says. "We want to expand our gardens and grow even more types of vegetables, so our meals have more calories and vitamins. If we can give our children carrots and okra from our own gardens, we can prevent malnutrition."

The families are also learning to make and use energy-efficient stoves that don't pollute as much as an open wood- and coal-burning stove and that use less than a quarter of fuel – helping to reduce deforestation in the region. Beyond agriculture, the project also covers the areas of water, sanitation and hygiene, as these have a direct influence on the population's health status. An aqueduct provides clean water, and 100 families have new latrines in their homes. The local water committees, trained by Malteser International, take care of the maintenance of the new infrastructure.

Vegetables such as okra and eggplant, which were not available in the region before, now enrich the residents' diets and prevent malnutrition.

Mexico: A new beginning for HIV-positive mothers and children



Edith and her son are both healthy, thanks to the project "Save a child from AIDS" in Mexico City. PHOTO: CHICO SANCHEZ

While mothers par-

group and learn to

cope with HIV, the

children have time

to learn and play.

PHOTO: CHICO SANCHEZ

ticipate in the support

osa Maria, 29, sits together with a group of women in Mexico City, while her three children, ages 3, 4 and 6, play games, draw and paint with the other children. Rosa Maria is HIV positive, as all the other mothers in the group. In July of 2010, she was looking for a way to meet other HIV-positive mothers, and for emotional and economic support. That's how she came to find the support group at Order of Malta Mexico. "When I found out in 2009 that I was HIV positive, for me it was like death. My child went into a coma and all I wanted to do was die," Rosa says. "But, in time, I noticed how the mothers in the group work together. It was like a family."

Rosa Maria participates in the project "Save a Child from AIDS", a three-year program that helps the mothers to protect their babies from pregnancy until the age of two, so they are not infected with the HIV virus. "Although HIV-infected mothers and pregnant women receive the antiretroviral drugs for free from the Mexican government, there is a lack of education and follow-up during the treatment," says María del Carmen Reynoso, who coordinates the project for Order of Malta Mexico. "Many mothers only see the negative side effects and

don't understand the importance of the treatment, so they often drop out or only go irregularly – increasing the chances that their children will be infected by the HIV virus".

Malteser International and Order of Malta Mexico support the mothers in three ways: First, they receive medical counseling, regular check-ups and follow-ups, ensuring the mothers continue the antiretroviral treatment. Educa-





tional sessions and trainings ensure the women have the information they need to prevent infection.

Second, the women receive nutritional support, as many live in poverty or lack access to nutrition information. They receive milk both for the babies and their siblings. "Ensuring the babies' healthy nutrition is crucial, because only then they can build up their immunity and protect themselves against the virus," Reynoso says. To keep their defense system working well, normal infections such as the flu need to be prevented or treated immediately, so the project provides them with free medication.

Third, the projects also provide psychosocial support and counseling to the mothers, helping them deal with discrimination from their families and society. They receive psychological support in form of group therapies and individual talks. "To me, it's like my home," Rosa says. "I feel like I have someone to talk to. With my own family, it's not the same. There's a lot of rejection." Because they are marginalized, many of the women have also lost their jobs and have no income. To get back on their feet again, the women learn how to make soap and other cleaning products, which they can produce themselves and sell for extra income.

Rosa Maria is one example of the success of this approach. Her first two children, born before she joined the group, are HIV positive; thanks to the antiretroviral treatment and the support of Malteser International and the Mexican association, her third child is healthy.

Sandra, a 27-year-old mother of two who has been involved with the project for the last seven years, is another success story. When she got pregnant with her first child, Jesus, volunteers from the organization brought her in. Jesus is now seven years old and her daughter Panama is five. Sandra says she graduated from school, overcame her diagnostic and feels like a realized person. "I'd tell a person who is HIV positive that they're not alone," she says. "First, there's God. Also, with the support of organizations like the Order of Malta, we can move forward.

Here, we learn how to accept ourselves and others like part of the family."

"Being diagnosed as HIV positive can make you feel like the world is coming to an end," Sandra says. But it's not like that. We have so many things before us and we can move on."

"Being diagnosed as HIV positive can make you feel like the world is coming to an end, but it's not like that. I'd tell those who are HIV positive that they're not alone. First, there's God. Also, with the support of organizations like the Order of Malta, we can move forward."

Sandra, 27, HIV-positive, mother of two



Both mothers and children receive nutritional support and medical counseling, so they can build up their immunity and protect themselves against the HI virus.

70-year-old Rosa

Candida (left) has

visited the senior

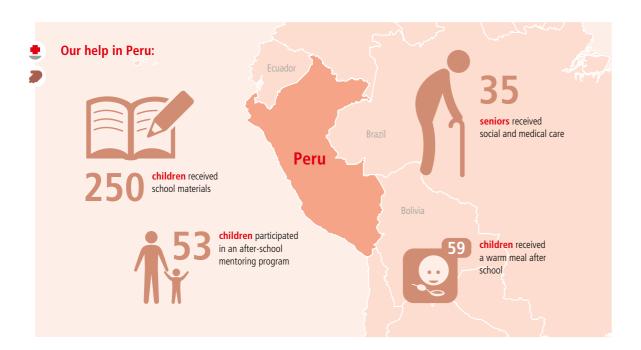
citizen center for two

years. "It changed

my life", she says.

PHOTO: ALDO AROZENA

Peru: Volunteer work benefits young and old



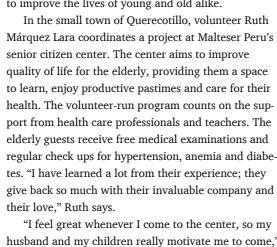
hristian Chira Juarez became a volunteer with Malteser Peru in 2008, ever since the organization started providing social services in the town of Piura, in northern Peru. Christian himself came from a poor family, but wanted to give back to his community. "My family was very needy when I was a child. I was never able to have any toys, so when I turned 16, I decided to start a youth group in my neighborhood in order to help children and

the elderly in need," he tells. "I didn't want them to go through what I went through."

Christian volunteers twice a week at the "Ludoteca", an after-school mentoring program for underprivileged children where they learn by playing. He is one of Malteser Peru's nearly 200 dedicated volunteers, working to improve the lives of young and old alike.

"I feel great whenever I come to the center, so my new friends."





husband and my children really motivate me to come," tells the 70-year-old Rosa Cándida Cruz de Gutiérrez, who has been coming to the center for over two years. "Here at the center, I encountered some of my friends from grade school after so many years, and I also made



In order to stimulate regular exercise, the center offers Tai Chi and gymnastics and dance classes, while painting and arts classes help keep the brain sharp and their hands busy. "We get together and do our crafts and manual labor, which helps us with our mental health and help us improve our attention and memory," Rosa says. "It is as if I had gone back to school and could relive my childhood - as if life had given me the opportunity to once again learn something new. It changed my life." Now, Rosa would like to take singing lessons so she can start a senior citizen choir.

In order to motivate the next generation of volunteers to develop their social skills and participate in the development of their communities, Malteser Peru also runs the project "Malteser Kids" on the outskirts of Lima. There, children and youth from 10 to 15 years of age learn from mentors about volunteer activities such as visiting the sick and working at soup kitchens. If they choose to do so, they can graduate from the program at age 16 by becoming a Malteser Peru volunteer. "The program teaches children to discover their values and ideals, and motivates them to commit to these ideals to improve the lives of their communities," explains college student Saul Cuaresma Ríos, a mentor at Malteser Kids. "Having the opportunity to be a role model for these children is very rewarding."

"It is as if I had gone back to school and could relive my childhood – as if life had given me the opportunity to once again learn something new."

Rosa Cándida Cruz de Gutiérrez, 70, Querecotillo senior center member

Christian Chira Juarez volunteers at Malteser Peru's after-school mentoring program for underprivileged PHOTO: ALDO AROZENA



Malteser Peru's senior citizen center in Querecotillo works to improve quality of life for the elderly, offering activities ranging from free medical checkups to Tai Chi and crafts classes. PHOTO: ALDO AROZENA

three women and two girls.

PHOTO: AFA TV

Afghanistan: AFA TV — More than just television

amuzishi, Farhangi, Almi – or AFA, in short – means "Education, Culture, Knowledge."

The name of the nonprofit television channel based in Mazar-e-Sharif says it all. With its programs for all age groups, religions and social backgrounds, AFA TV is bringing education to the homes of some 750,000 Afghanis.

34-year-old Robaba I. works in postproduction. She has been a part of the project since its early stages. "My children told me about this new TV channel that offered educational programming," she says. She started in



March of 2011. "They trained me to become an editor. We have additional courses several times a year. By now, I'm even training new colleagues myself." Over the past three years, AFA trained a total of 43 Afghanis – including nine women.

"Sometimes, it is difficult to find women whose families allow them to work here together with men," Robaba tells. "Society expects us to fulfill our duties at home. But many women have to provide for their families themselves." This is the case for Robaba, whose husband passed away a few years before she joined AFA. As a widow with three children, she relies on her income at the channel. "AFA has a great reputation and respects our traditions," she says. "We are a purely educational channel and inform the population about topics such as health care, coping with trauma, literacy, vocational training, and religion. People trust us because we are not political."

Television has long been a part of daily life in Afghanistan. In a country with the highest illiteracy rate in the world, where access to schools for girls is still very limited, and where educational opportunities for adults are few and far between, television has gained an entirely new meaning with AFA.

2001 – 2013:12 years of sustainable relief for 500,000 people in Afghanistan

From 2001 until 2013, Malteser International's emergency relief and recovery projects in Afghanistan employed at times up to 20 international and more than 200 national staff, investing a total of 15.6 million euros in the areas of health, education, infrastructure and livelihood. In areas with high ethnic conflict potential, Malteser International supported projects that brought different population groups together, in addition to providing emergency relief for the destitute returning population. From 2002 to 2005, the teams on the ground provided health care services for UN staff and supported the setup of the Afghani police. In 2007, because of the deteriorating security and after the death of three local employees, Malteser International closed its offices in the country, but continued the work through local partners, supporting the treatment of patients suffering from leishmaniasis and epilepsy in a Kabul clinic from 2008 to 2009. The TV project in Mazar-e-Sharif, which started in 2010, was successfully concluded in 2013. Malteser International will continue to follow the developments in the country and, if the security situation allows, look for other ways to help in the future.





"When I walk into a store or a restaurant, I often see our shows are on.

The most popular are our children's programs, our nature and technology documentaries, and our shows on religious topics. Many of the commercial channels are now copying our educational topics and the format of our shows. This shows how highly we value education in our society. AFA TV satisfies a basic human need here."

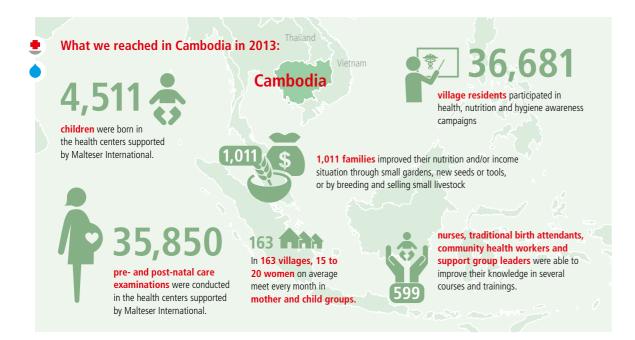
Robaba I., editor at AFA TV

Robaba's son also completed his training at AFA TV. He now works at a different channel. "Our trainees receive good job offers elsewhere, because our courses are really good. I was also offered a job at a different channel, but I would rather work for AFA. My work here allows me to do something important for my country," she tells. "My greatest wish is that we finally have peace and reconciliation. Maybe someday, we will even have tourists coming here. Mazar-e-Sharif is a very beautiful city."

Malteser International started AFA TV together with the Afghani organization SCEO. The program is based on the development needs in the region and focuses especially on health topics. Today, thanks to the training of qualified local staff, the channel is able to continue operating independently. Since 2006, SCEO has operated a similar channel in Herat, in western Afghanistan. The Afghani government awarded the organization its "Bright Talents Award" for their work.

With its shows for all ages, religions and social groups, AFA TV brings educational programming to the homes of 750,000 Afghanis in the Mazar-e-Sharif region.

Cambodia: Food security for mothers and children



round 40 women have gathered at the square in Prasat Phnom Dey, a village in northwestern Cambodia's Oddar Meanchey province.

Among them are Ran Phat and her daughter Somaly, who had her first birthday last December. "If Malteser International hadn't invited me to a meeting of the Mother and Child Group, I don't know whether Somaly would still be alive today," Ran Phat tells. As Somaly was born, she weighed 3.2 kilograms and was a healthy baby. But, at six months old, she still weighed only six kilograms. "She was extremely thin, her hair had a reddish tone and her skin was wrinkled like an old lady's," she recalls. "Besides, she was always sick,

had fever, diarrhea, and was too weak to cry."

Ran Phat and her husband have to struggle for survival every day. They grow rice on a small field; Ran Phat tries to earn a little extra money with temporary jobs. "Since I had to take care of both of my sons in addition to work, I did not have much time left to care for Somaly. I fed her rice twice a day."

In the Mother and Child Group, Ran Phat learned how important nutrients and vitamins are for the healthy development of her children. She learned to wash her hands each time before feeding Somaly, since children her age are more succeptible to infections. "We also had cooking lessons. We prepared a porridge

"Actually, all moms should participate in a support group where they can learn how important nutrition and hygiene are for the development of their children."

Ran Phat, Somaly's mother





made of rice and leafy greens for the children," she says. At first, Somaly didn't like the new food, but Ran Phat patiently insisted, talking and smiling at her daughter until she took a liking to the new taste and emptied the whole bowl. "I was so happy to see her eating so much. From then on, I started making this porridge for her almost every day – with eggs, vegetables, pumpkin or liver." With dark hair and smooth skin, Somaly not only looks healthier now, but has developed into a lively little girl.

Together with its local partner Agricam, Malteser International has been working in 175 villages in the region for better nutrition of infants, mothers and pregnant women. They fight both the causes and the consequences of malnutrition, ensuring that healthy nutritious food is abundant, available, and is used well in the villages. The work is complemented by activities in the water sector, as clean water, good sanitation and hygiene are also crucial to prevent malnutrition.

Malteser International sets up health committees and mother and child groups in the villages and talk to the women at the monthly meetings about health, nutrition and hygiene topics. Once a month, state-employed nurses come to control the weight gain and growth of all children under two. Since the project started in August of 2012, the village residents started more than 300 small gardens, where they plant vegetables for their own consumption and can sell the surplus at the local market. The local teams assist more than 800 families in the region with their gardens. They set up small rainwater ponds which can be used to water the garden and as fish ponds. And 120 families received chickens, which not only deliver an important source of protein, but have become an important source of additional income.

In 175 villages, Malteser International works for food security for infants, mothers and pregnant women. Here, a cooking demonstration at a Mother and Child Group.

Malnutrition in Cambodia

Cambodia has the 36th highest rate of malnourished children worldwide. The many families living from small-scale agriculture in the northeast of the country are often threatened by hunger and crop failures. As they lack irrigation systems, the knowledge of alternative agricultural methods and how to market their products, their yields are often too low. Malnutrition slows down development on children under five, especially if the mother did not eat a balanced diet during the pregnancy or in her lactating years. This can lead to permanent physical or mental impairments. Malnourished women are seldom able to work and suffer disproportionately from infections and risky pregnancies.

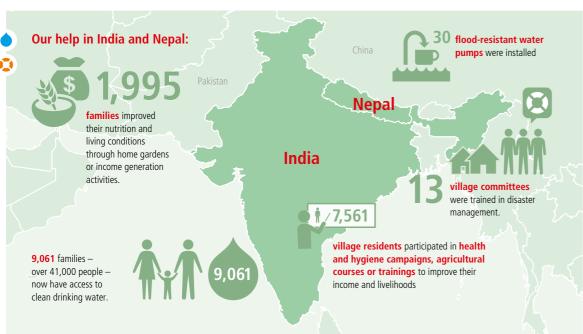
In the Mother-child group, Ran Phat learned how to provide her daughter Somaly with a healthy diet.

living conditions.

PHOTO: CARMEN WOLI

India and Nepal: "Elevated for life" Life by the river, safe from floods





very year, when the snowmelt from the Himalayas meets the monsoon rains, the villages on the river beds of western Nepal and north India are threatened by devastating floods. For the villagers, the river is both lifegiving and deadly: in the rainy season, they must live with the fear of losing their fertile land, their homes or even their lives with the rising waters.

"Last year, our home was completely destroyed by a flash flood," says 32-year-old Ajitha from the Nepalese village of Tighra. "In a matter of minutes, everything we owned was swept away. Even our rice harvest - our supply for the whole year - was gone."

Ajitha has lived her whole life by the Karnali River. "When I was child, the Karnali was like a good friend. Now, I'm afraid of its brutal force. Over the last decade, the floods have only grown worse." She currently lives with her and her husband's family - 13 people in total in a small, unprotected hut. "We built this hut as a temporary shelter for the dry season. Now, we're starting to build our house a bit further away from the river," she tells. They have nowhere else to go, as the family does not own land and depends on water from the river for irrigation as well as drinking, cooking and washing.

Malteser International has worked in Nepal since 2012 and in India's Uttar Pradesh since 2008 to improve the lives of the riverbed residents. The challenges faced by the villagers who live by the Karnali River - which turns into the Ghanghra River after entering India's territory – are the same on both sides of the border. The goal is to prepare them for the annual floods - which have become stronger over the years due to climate change and the melting of the Himalayan glaciers - so they can better protect themselves, their families and their livelihoods.





To tackle these challenges, Malteser International helped the residents build elevated water pumps to protect their drinking water, installed early warning systems, and offered trainings for farmers and craftsmen so they could secure their livelihoods.

"During the floods, we used to only have dirty river water to drink, and there were no toilets," Ajitha tells. "But now, we always have clean water to drink, thanks to the elevated water pumps." Ajitha also participated in a workshop and started growing vegetables in her small home garden. "I learned a lot, and I now can provide for my own family and even sell what's left on the market."

In addition to protecting their water sources and their sustenance, it is important for the residents to know in advance when the river will flood. Malteser International has worked with local partners on the Indian and Nepalese sides to set up an early warning system. The appointed village representatives receive an alert on their phones, which they then pass on to the other residents through a siren or megaphone. With the regular reporting of water levels from Nepal, the lead time between the warning and the floods has been greatly increased.

"Through Malteser International, I was trained to become a mobile phone technician and also received the tools I needed to work in the field," tells Asum, a 25-year-old from the Indian village of Ahata. "Mobile phones have become an indispensable means of communication for us, because it allows us to receive alerts in time to bring ourselves and our families to safety before the floods. All of the villagers now come to me in order to have their phones repaired." Asum is not only an important link in the early warning chain; his earnings as a technician also allowed him to fulfill his dream of owning his own electronics workshop.

Thanks to the elevated hand pumps, Ajitha (left) and her friends always have access to clean water, even during the floods. PHOTO: CARMEN WOLF

The 25-year-old Asum from the Indian village of Ahata received training to repair mobile phones from Malteser International Mobile phones are indispensable in the village because they alert the residents to future floods. PHOTO: CARMEN WOLF

disabilities in disaster

preparedness.

Events and campaigns



United Nations Global Platform for disaster risk reduction

One of the participants of the conference, which took place in Geneva last May, was the 11-year-old Danh from Vietnam. As a child with disability living in a flood-prone village, Danh volunteered to help develop emergency plans for his community, so that his family and others would not be left behind. Malteser International helps his and 46 other villages in the region to be better prepared for disasters. As a panel speaker in the event "The resilient future we want: Children and Disaster Risk Reduction," Danh called on the state representatives and organizations at the conference to consider the special needs of people like him, who are not able to escape quickly because of a disability.

Grand opening of the children's home in Ichinoseki, Japan

The children of the Fujinosono children's home were all smiles on 29 June. Each released an air balloon into the sky, as the home director, Sister Caelina, cut the red tape, officially inaugurating the newly rebuilt home. Michael Khoo, Malteser International's representative for the Asia/Pacific region, praised the joint effort that made the model home a reality in a little over two years after the 2011 earthquake. The bright and cozy home offers 45 underprivileged children and youth a safe shelter and can be used as an evacuation center by the city of Ichinoseki. Its modern, child-friendly living spaces count on an innovative energy system based on solar panels and biomass heating.

World Water Week 2013: Building partnerships

"How can relief organizations help link community and government to make the delivery of water services more efficient?" That is the question a delegation from Malteser International asked the participants of the World Water Week, held annually in Stockholm in the first week of September. To exemplify the collaboration in between NGOs and local government, Malteser International brought a special guest to the event: U Myo Thein, assistant chief engineer for water supply and sanitation at the Yangon City Development Committee. Thein works together with Malteser International in an urban water project in Dawbon, a slum in the outskirts of Yangon City. He explained that the state counts on such partnerships to reach the neediest communities.



New American headquarters opened in Miami

On Nov. 8, Malteser International opened its new regional headquarters in the United States. The office is now responsible for coordinating its emergency relief and rehabilitation programs in the American continent. "The number of projects in countries such as Mexico, Haiti and Peru has increased in recent years. The U.S. office is closer to the areas where we work and can manage our resources in the region more quickly and efficiently," says Secretary General Ingo Radtke. The new unit should also improve cooperation with other humanitarian actors and networks in the region.



Financial and strategic highlights



he "Facts & Figures" section of the Annual
Report provides a detailed overview of our
programs and funding. The annual financial statement for the fiscal year ending in
December 2013 consolidates the accounts of Malteser
International's General Secretariat as well as the two
regional headquarters, Malteser International Europe
and Malteser International Americas.

As the Syrian crisis, the floods in Germany and Typhoon Haiyan on the Philippines have made clear, it is crucial for Malteser International to expand its emergency relief capacities in order to help even more quickly and efficiently. Just as important are the relief activities for long-term recovery and development. The following is an overview of the structural and financial changes that took place in 2013 and how they fit with the organizational strategy.

Structural development

The year 2013 was an important one for the work of our new regional structures. In the fall of 2013, after long and careful planning and a comprehensive strategic process, Malteser International was able to put in place the structural changes which were necessary to bring the organization up to standard, and is now in a position to respond to the current and most demanding challenges of our times. With the new American headquarters in Miami, the regional headquarters for Europe, Africa and the Middle East in Cologne, and the future Asia/Pacific unit, Malteser International can improve the effectiveness and efficiency of its work, especially in case of disaster, and make even better use of the international network of the Order of Malta and its valuable resources. The strategic leadership of these regional units is carried out by the General Secretariat in Cologne.

Vision 2020

Parallel to these structural changes, a comprehensive strategic process was completed in 2013 in order to confirm Malteser International's mission and profile as a relief organization. The results of this process were compiled in the "Vision 2020" document, which serves as the basis for the strategic priorities as well as concrete goals for the year 2014. These priorities include the continued expansion of emergency relief capacities and the cooperation with international Order of Malta structures and partners.

As the number of crises and disasters continue to rise and its causes became increasingly complex, humanitarian aid in the 21st century must respond to these global challenges. With its comprehensive, sustainable, needs-oriented and participative approach encompassing multiple sectors, Malteser International has developed appropriate solutions for current needs. Yet, as the world's environment, politics and economics continue to rapidly change, new and innovative approaches are needed every year. For this reason, it is important not only to increase the organization's own capacities, but to multiply its impact by working with local partners, strengthening networks and alliances, ensuring continuity between emergency relief, recovery and long-term development, and passing on knowledge to the populations we serve, giving them resources to better protect themselves. This vision will continue to guide Malteser International's programs, its structural and strategic development in the years to come.





Malteser International will continue to expand its relief activities for Syrian refugees and displaced in Syria, Lebanon and Turkey.

Financial development

In 2013, Malteser International's work received financial support from many public and institutional donors as well as supporting partners – once more the primary source of all funding for Malteser International – as well as numerous private donors, companies, foundations, church organizations, and the international Order of Malta network.

The total program volume increased from €30.8 million in 2012 to €44.2 million in 2013 – due primarily to the relief activities for Syrian refugees and flood relief in Germany. Out of the total income, €19 million (2012: €20.3 million) stem from public or institutional grants, while €15.3 million (2012: €6.4 million) stem from private donors. Most donations received as part of Germany's Relief Coalition (€9.3 million) benefited the relief activities after the floods in Germany and Typhoon Haiyan in the Philippines, and continue to flow into recovery projects in 2014.

Over the past five years, Malteser International has doubled both its total income (2009: €21.2 million, 2013: €44.2 million) as well as total spending (2009: €22.6 million, 2013: €44.2 million) – thus also doubling its program volume.

Malteser International uses all of its funds in an economically sound, goal-oriented manner, and only to the extent needed to fulfill the tasks at hand. Administration costs are kept to a minimum; in 2013, they corresponded to less than 10 percent of total expenses.

Regional focus areas

Most of Malteser International's programs continue to be implemented in 15 countries in the *Asian* continent (including the Middle East), with a total volume of €18.9 million (2012: €13.9 million). From those, €5.5

million alone went to the emergency relief projects for some 185,000 Syrian refugees and displaced in Syria, Turkey and Lebanon. Other key countries in the areas of health care, water and disaster preparedness are Myanmar (\mathfrak{C} 5.6 million), Pakistan (\mathfrak{C} 2.5 million) and Thailand (\mathfrak{C} 1.7 million).

With nearly €12 million, the program volume in five countries in *Africa* was only slightly higher in 2013 (2012: €11.2 million). Nevertheless, Malteser International's largest program continued to be that of the Democratic Republic of the Congo, with a volume of over €8 million.

In 2013, Haiti continued to be the largest program in the *Americas*, with €1.9 million out of the region's €2.3 million total budget invested in the country (2012: €2 million). In countries such as Mexico, Cuba and Peru, Malteser International continued to support the national associations of the Order of Malta. Since November 2013, all of Malteser International's projects in the Americas have been managed by the new regional office in Miami, Florida, whose goal is to expand the organization's activities in Latin America and the Caribbean, in close cooperation with the regional Order of Malta structures.

In Europe, with a total budget of &11 million, the largest share of the expenses went to flood relief in Germany (&7.1 million). For the first time in the consolidated annual accounts, the activities to support independent Malteser partner organizations in Central and Eastern Europe are listed separately with a budget of &1 million. The administrative costs listed under Europe amounting to &2.9 million correspond to Malteser International's General Secretariat and its European regional headquarters.

food, drinking water, winter relief, emergency shelters,

and more).

175,573 8

58 health care facilities were built or restored, ensuring better access to medical services. 173,573 pre- and post-natal care examinations for pregnant women were conducted in health clinics we support, ensuring a safe pregnancy and delivery for mothers and a healthy start for babies.

39

Over the past decade, 200 million people on average

294

We built 120 emergency shelters, 294 new homes and one children's home, helping families start over after a disaster.

6,498

million children under five years of age die from diseases, malnutrition or lack of hygiene.

Every year, nearly seven

We protected 6,498 newborn babies and infants from malnutrition and undernourishment with therapeutic foods enriched with impor-

tant vitamins and minerals.

Our impact, thanks to your support:



were affected by natural

disasters every year.

323

323 disaster preparedness trainings showed children, teenagers and adults how to behave before, during and after a disaster in order to protect themselves and help others. 140 villages and communities now have disaster management plans, so the population knows exactly how to react during an emergency.



7,867

7,867 people participated in professional trainings and educational sessions, using this new knowledge to improve their income or to further their careers.

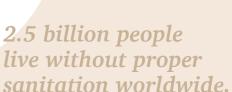
More than 700 million people lack access to clean drinking water.

*

358,301 people now have a daily source of clean drinking water.



4,646



4,646 new latrines provide basic sanitation for about 95,000 people in households, schools and health centers.

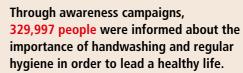
11,765



11,765 families improved their living conditions, their nutrition and/or their income by farming, growing fruits and vegetables, raising livestock, or through cash-for-work programs.



329,997



358,301



Our staff

973 staff members in our project countries and 51 in our headquarters, from 34 different countries, work to carry out Malteser International's mission: to ensure that people in need have a chance to live a healthy life with dignity.





















2013 2013 Region/Country **Africa** 222 201 36 (25) DR Congo 14 (11) 25 7 (3) South Sudan 99 85 14 (10) 1 (1)

Local staff1

Expatriate staff²

2012

28 (23)

11 (9)

13 (10)

7 (6)

7 (6)

88 (69)

12 (9)

83 (67)

Staff abroad

Asia	616	478	45 (38)	43 (35)
Cambodia	46	43	4 (4)	6 (4)
Indonesia	5	5	0	0
Japan	0	0	1 (1)	1 (1)
Myanmar	306	231	22 (17)	15 (12)
Nepal	0	0	1 (1)	1 (1)
Pakistan	190	100	10 (8)	11 (9)
Sri Lanka	0	27	0	3 (3)
Thailand	48	54	3 (3)	5 (4)
Turkey	0	0	4(4)	0
Vietnam	21	18	0	1 (1)

In all of our project countries which are not listed, programs are implemented by the national associations and relief corps of the Sovereign Order of Malta (e.g. Burkina Faso, Chile, Philippines, Lebanon) or by local partner organizations (e.g. Afghanistan, Iraq, Syria).

























than once during the year.

Total

Americas

¹ Numbers correspond to staff positions in each country.

	•				
*** Australia	1	Indonesia	5	South Sudan	100
Austria	2	Italy	3	Spain	2
Belgium	1	Japan	1	🔚 Sri Lanka	2
Bosnia	1	 Kenya	26	Sweden	1
Brazil	1	Madagasc	ar 3	+ Switzerland	2
Cambodia	46	Myanmar	308	Thailand	49
Croatia	1	Nepal Nepal	1	Uganda	11
DR Congo	89	Netherland	ds 4	Uruguay	1
France	6	C Pakistan	190	USA	į
Germany	86	Peru	1	★ Vietnam	2
Great Britain	1	Philippines	5 7		
Haiti	46	Poland	2		

² Some of the staff members were working cross-nationally. The total figure refers to the total number of contracts signed in the year 2013. The numbers in parentheses correspond to the staff positions in each country, some of which were filled more

Our programs in 2013

Africa

Country	Sectors	No. of projects	Short description	Program volume (in euros)*	Donors/Cooperation partners**
Burkina Faso ²	• •	1	Health transport and first aid for Malian refugees and local populations	3,206	ADH
DR Congo ¹		11	Support of the state health care system, rehabilitation of health care facilities and transport infrastructure, care for victims of sexual violence, income-generating measures, distribution of seeds, food and nutrition security	8,042,419	AA, BMZ, ECHO, EuropeAid, FAO, MMB Foundation, SDC, WFP
Kenya ¹	• • •	5	TB and HIV/AIDS prevention with focus on maternal and child health, WASH to strengthen drought resilience, pre- and post-election violence preparedness	1,258,190	AA, ADH, Benedict East Africa Fund, CRS, Embassy of the Order of Malta, Malteser Austria, Sternstunden e.V.
South Sudan ¹	• •	7	Provision of primary health care, TB and HIV/AIDS prevention, reconstruction of health care facilities incl. WASH facilities, support for a laboratory cum nursing school and a leprosy settlement	1,629,441	BMZ, EuropeAid, GFFP, Malteser Ger- many, USAID
Uganda¹	• •	3	Treatment of malnourished children, rehabilitation of a hospital laboratory, emergency medical support to Congolese refugees	355,112	AA, Benedict East Africa Fund, PMK

Americas

Country	Sectors	No. of projects	Short description	Program volume (in euros)*	Donors/Cooperation partners**
Cuba²	•	1	Rehabilitation of houses, SPHERE trainings	205,995	Own funds/donations
Haiti ¹	* • • * •	7	Cholera prevention, DRR trainings and hygiene promotion at schools, reconstruction of schools/ vocational training centers, strengthening of civil society through WASH and DRR, reforestation & climate change adaptation	1,895,151	AA, ADH, BMZ, EuropeAid
Mexico ²	•	2	HIV prevention for newborns, distribution of medicines and food after hurricane and floods	15,161	Own funds/donations
Peru ²	• >	1	Soup kitchen for children, support for elderly people and children	5,000	Own funds/donations

- Relief, Reconstruction & Rehabilitation . Health & Nutrition
- Water, Sanitation &
- Hygiene (WASH) Livelihood & Social
- Disaster Risk Reduction (DRR)

Europe

Country	Sectors	No. of projects	Short description	Program volume (in euros)*	Donors/Cooperation partners**
Germany ²	• •	31	Emergency relief and rehabilitation after the floods in 2013; (psycho)social care projects	7,071,389	ADH

Asia

Country	Sectors	No. of projects	Short description	Program volume (in euros)*	Donors/Cooperation partners**
Afghanistan ³	•	1	Set up of an educational television channel	26,679	BMZ
Cambodia ¹	• • •	7	Emergency relief, maternal and child health, food and nutrition security, WASH, community-based health insurance	892,186	AA, BMZ, CDF/AusAid, EuropeAid, GIZ
India ³	• • •	4	Flood relief, WASH and DRR for flood-prone villages, HIV/AIDS prevention, set-up of a health insurance sys- tem, strengthening the resilience of Dalits and tribes, Climate Change Adaptation study in Tamil Nadu	272,275 (including Nepal program volume)	ADH, BMZ
Indonesia ¹		2	Maternal and child health, health and WASH, community-based DRR	285,720	BMZ
Iraq³	•	1	Support of a health care facility for displaced	10,020	Own funds/donations
Japan ¹	• • •	2	Reconstruction of a earthquake-resistant and energy efficient children's home (which can used as evacuation center) and a playground	103,733	ADH, Bild hilft, Caritas, Deutsche Bank Stiftung, Malteser Austria
Myanmar ¹	★ ● ◆Ø ○	20	Emergency relief, reconstruction of social infra- structure, primary health care, maternal and child health, TB, HIV/AIDS and malaria prevention, WASH, income-generating measures, DRR and climate change adaption	5,591,990	AA, ADB, BMZ, ECHO, EuropeAid, GF, GIZ, UNHCR, UNICEF, UNOPS, WFP
Nepal ³	• •	1	DRR and WASH for flood-prone villages	please see India	BMZ
Pakistan ¹	• • •	11	Primary Health Care, Mother and Child Health, inclusive Community Based DRR, reconstruction of social infrastructure, food security	2,469,099	AA, BMZ, Caritas, ECHO, Islamic Relief, SDC, WFP, WHO
Philippines ²	•	2	Distribution of food, hygiene kits, tents, tarpaulins and non-food items, water treatment units	569,795	AA, ADH, Caritas, Malteser Austria, NiN, Regine Sixt children's aid Foundation
Sri Lanka¹	•	1	Rehabilitation of social infrastructure	56,770	Own funds/donations
Thailand ¹	• •	3	Health care and WASH for refugees	1,684,966	ECHO, EU, GF, WCFF
Vietnam ¹	• • •	3	Promotion of preservation and sustainable use of forests; inclusive Community Based Disaster Risk Reduction (CBDRM) and integration of inclusion into the national CBDRM program; Emergency relief	924,180	AA, ADH, BMZ, ECHO, WCFF

WFP: World Food Programme WHO: World Health Organization

Syria crisis: Emergency relief in Syria and neighboring countries

Lebanon ²	•	3	Health care in health centers, distribution of drugs, food, baby, non-food items and hygiene kits for Syrian refugees	128,829	AA, ADH, NiN
Syria ³	•	2	Health services through distribution of drugs; food, non-food items, stoves, fuel, winter clothes, baby and hygiene kits for Syrian refugees.	3,839,335	AA, ADH
Turkey³	•	4	Health services through field hospital and health center; psycho-social support, capacity building and school support for Syrian refugees	1,578,986	AA, BMZ

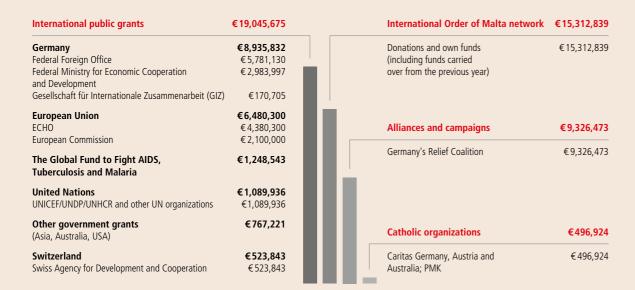
43

Program implementation through Malteser International and partner organizations
 Program implementation through national associations and relief services of the Sovereign Order
 of Malta supported by Malteser International
 Program implementation through local partner organizations supported by Malteser International

The above-mentioned program volumes only include the expenditures booked during the financial year 2013.
 Many of our projects are multi-year projects with a higher total budget.
 ** Unless otherwise specified, all our projects include own funding and financial support from the international network of the Order of Malta.

Financial overview 2013

Revenue sources*

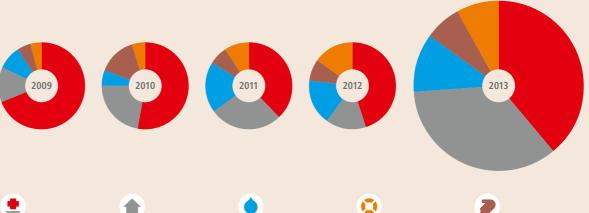


Program expenses by region and country*

Africa		Americas		Asia		Europe	
€ 11,976,510 Previous year €11,205,154		€2,314,019 Previous year €2,041,714		€ 18,900,474 Previous year €13,948,106		€ 11,000 Previous year €74	-
 Regional project costs DR Congo South Sudan Kenya Uganda Burkina Faso	€688,142 €8,042,419 €1,629,441 €1,258,190 €355,112 €3,206	Administrative costs Capacity Building in Latin America Haiti Cuba Mexico Peru	€162,668 €30,044 €1,895,151 €205,995 €15,161 €5,000	Regional project costs Myanmar Syria¹ Pakistan Thailand Turkey¹ Vietnam Cambodia Philippines Indonesia India/Nepal Lebanon¹ Japan Sri Lanka Afghanistan Iraq	€465,911 €5,591,990 €3,839,335 €2,469,099 €1,684,966 €1,578,986 €924,180 €892,186 €569,795 €285,720 €272,275 €128,829 €103,733 €56,770 €26,679 €10,020	Support of Order partner organizat in Central and Eastern Europe Administrative costs Germany	

* Rounded numbers. The listed program volumes correspond to the amounts booked in the 2013 annual accounts and thus do not reflect the actual outflow of funds for multi-annual projects. ¹ Emergency relief for Syrian refugees and displaced

Program expenses by sector



Health & Nutrition

39%

2012: 45 % 2011: 38 % 2010: 53 % 2009: 69 %

35%

Rehabilitation

Relief, Reconstruction &

2012: 15 % 2011: 27 % 2010: 22 % 2019: 13 %

Water, Sanitation &

Hygiene (WASH)

2012: 17 % 2011: 19 % 2010: 6 % 2019: 9 %

Disaster Risk Reduction (DRR)

2012: 15 % 2011: 9 % 2010: 5 % 2019: 4 %

Livelihood & Social Programs 45

2012: 8 % 2011: 7 % 2010: 14 % 2019: 5 %

Revenue development*



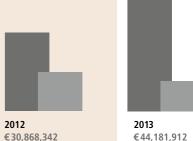
€21,190,231 €5.273.696



€28,351,570 €14.411.795



€34,499,556 €10.422.372



€44,181,912 €11.894.706

Expense development*



€22,624,759 €18,867,569

2010 €26,765,962 €23,199,724

€34,570,762 €31,133,573 €3,437,189

€30,825,384 €27,194,973 €3,630,411

€15.312.839



€41,134,971 €3,056,160

Deficits are covered by reserves and funds from previous years. Surpluses are transferred to the reserves.

Annual accounts as of 31 December 2013

Balance Sheet as of 31 December 2013

A. Fixed assets I. Property, plant and equipment	EUR	kEUR
I. Property, plant and equipment		
1. Other equipment, operating and office equipment	316,041.64	334
2. Prepayments	29,179.14	0
	345,220.78	334
B. Current assets		
I. Receivables and other assets		
1. Trade receivables	69,233.28	12
2. Receivables from other long-term investees and investors	2,299.81	4
3. Receivables from related corporate entities	3,774,715.85	843
4. Receivables from Malteser Hilfsdienst e.V. – internal –	13,411,491.19	10,027
5. Other assets	13,386,182.35	21,123
	30,643,922.48	32,009
II. Cash-in-hand, bank balances and checks	9,159,117.37	6,540
	39,803,039.85	38,549
C. Repaid expenses	183,254.25	91
	40,331,514.88	38,974
Equity and Liabilities	31 Dec 2013	31 Dec 2012
	EUR	keur
A. Equity		
I. Assets of the association	3,357,678.07	3,315
II. Loss (prior year: profit for the year)	9,218.76	43
	3,348,459.31	3,358
B. Provisions – Other provisions	729,011.60	757
C. Liabilities		
1. Trade payables	168,725.32	329
	9,948.38	0
Liabilities to other long-term investees and investors	1,839.07	1
2. Liabilities to other long-term investees and investors	3,723,771.95	70
Liabilities to other long-term investees and investors Liabilities to related corporations		70 31,846
Liabilities to other long-term investees and investors Liabilities to related corporations Liabilities to Malteser Hilfsdienst e.V. – internal –	3,723,771.95	
2. Liabilities to other long-term investees and investors 3. Liabilities to related corporations 4. Liabilities to Malteser Hilfsdienst e.V. – internal – 5. Liabilities arising from grants awarded for a particular purpose	3,723,771.95 28,737,601.95	31,846

Income statement from January 1 to December 31, 2013

	2013 EUR	2012 keur
1. Revenue	13,188.12	41
2. Other operating income	41,316,567.91	30,692
3. Cost of materials		
a) Costs of raw materials, consumables and supplies and of purchased merchandise	5,640,542.70	4,746
b) Cost of purchased services	4,432,879.81	4,622
4. Employee benefit expense		
a) Wages and salaries	8,408,465.52	8,269
b) Social security, post-employment and other employee benefit costs Of which post-employment costs: EUR 254,951,82 (prior year: kEUR 231)	875,537.89	847
5. Income from release of liabilities related to earmarked allocations	31,512,373.57	31,705
6. Expenses due to addition to liabilities related to earmarked allocations	28,737,601.95	31,846
7. Amortisation and write-downs of intangible assets and depreciation and write downs of property, plant and equipment	251,044.92	218
8. Other operating expenses	24,528,539.06	11,881
9. Other interest and similar income Of which from Malteser Hilfsdienst e.V. – internal – EUR 63,887,20 (prior year: kEUR 116)	77,384.13	136
10. Interest and similar expenses	6,281.82	3
11. Result from ordinary activities	38,620.06	142
12. Other taxes	47,838.82	99
13. Loss (prior year: profit) for the year	- 9,218.76	43

Notes on the income statement

An explanation of Malteser International's consolidated profit and loss statement

The **revenue** category contains all revenue from supplies and services. **Public grants** include project financing from the German Federal Foreign Office (AA) and the Federal Ministry for Economic Cooperation and Development (BMZ) in the amount of €8,765,127 (of which €5,781,130 AA funding) and from the European Union in the amount of €6,480,300. The project funding from UN organizations amounting to €1,089,936 are included in contributions by third parties, as well as funding from Caritas Germany (€340,000), SDC (€523,843), Nachbar in Not (€120,000) and other donors (€2,223,394) as well as donations received via Germany's Relief Coalition (ADH) amounting to €9,326,473. Revenue from donations and Order of Malta internal contributions in the amount of €12,501,812 are listed under other operating income.

Contributions from donors for multi-annual projects, as well as donations which could not be fully used in the previous fiscal year (as many donations come in at the end of the year) are carried over into the following fiscal year and then used. These funds from the previous year in the amount of €31,512,374 are listed under income from release of liabilities related to earmarked allocations. The transfer of these funds to the following year can be found under the category **expenses due to addition** to liabilities related to earmarked allocations (€28,737,601). Contributions which do not require conditional payback are listed in the annual balance, which will be used to fund projects in the following year.

The categories cost of materials and employee benefit expenses, with a total sum of €19,357,426 include in large part direct project costs (for instance, costs for medicine and relief goods; payment to construction companies in reconstruction projects; costs for international and local project staff), but also include parts of the indirect project costs and administration costs (non-project-related personnel costs).

Under the category other operating expenses are both direct project costs (such as the financial support of local partner organizations as well as the flood relief in Germany in the amount of €10,315,282 as well as indirect project costs (costs for public relations and communications and human resources), as well as administrative costs (rent, IT). In 2013, administrative costs represented less than 10% of total expenses.

Independent auditors' report

Deloitte.

To Malteser International e.V., Cologne/Germany

We have audited the appended combined set of annual financial statements of Malteser International, comprising the balance sheet as well as the income statement, for the financial year from 1 January to 31 December 2013. This combined set of annual financial statements is derived from the combination of the respective balance sheets and income statements of the sets of annual financial statements prepared in accordance with German commercial law by Malteser International e.V. of the Maltese International Europe Division of Malteser Hilfsdienst e.V. and of the Order of Malta Worldwide Relief Malteser International Americas Inc. (hereafter referred to in the aggregate as "Malteser International"). As part of this combination, mutual receivables and liabilities as well as the income and expenses which arose between the legal entities are eliminated. The purpose of combining the balance sheets and income statements is to give a true and fair view of the actual circumstances of the international activities of Malteser.

Responsibility of the legal representatives

The legal representatives of Malteser International e.V., Cologne/Germany, are responsible for the preparation of the combined set of financial statements by largely analogous application of the accounting regulations under German commercial law. The legal representatives are also responsible for the internal controls they deem to be necessary for the preparation of financial statements which are free from material - intended or unintended - misstatements to be enabled.

Responsibility of the auditors of the financial statements

Our responsibility is to express an opinion on this set of financial statements based on our audit. We conducted our audit of the financial statements in accordance with German generally accepted standards for the audit of financial statements promulgated by the Institute of Public Auditors in Germany (IDW). Those standards require that we comply with the professional duties and plan and perform the audit of the financial statements such that misstatements materially affecting the financial statements are detected with reasonable assurance.

The audit of financial statements includes conducting audit procedures in order to obtain audit evidence for the values recognized in the financial statements and the related disclosures. The selection of the audit procedures is at the due discretion of the auditors. This includes assessing the risks of material - intended or unintended - misstatements in the financial statements. In assessing these risks, the auditors take into account internal control systems which is relevant to the preparation of the financial statements. The related goal is to plan and perform audit procedures which, under the given circumstances, are appropriate, rather than to issue an audit opinion on the effectiveness of the internal control systems of the entity. The audit of financial statements also includes assessing the accounting methods applied, the reasonability of the estimated values in the books and records determined by the legal representatives as well as evaluating the overall presentation of the financial statements.

We believe that our audit evidence obtained provides a sufficient and reasonable basis for our audit opinion.

Audit opinion

In our opinion, based on the findings of our audit, the combined set of annual financial statements of Malteser International, for the financial year from 1 January to 31 December 2013 have, in all respects, been prepared in accordance with the relevant accounting regulations described in the disclosures regarding the financial statements.

Düsseldorf/Germany, 17 March 2014 Deloitte & Touche GmbH Wirtschaftsprüfungsgesellschaft

Höll

(German Public Auditor)

Richter (German Public Auditor)

Rich

Our donors and cooperation partners

Private and public donors, companies, schools, parishes, local, national and international partners and institutions, and the international Order of Malta network have helped us provide fast, efficient and sustainable relief around the world. In the name of the countless

people who benefitted from our help: thank you for your support!

The following overview gives an insight on the variety of public donors and cooperation partners who supported our work in 2013.





















































51

Our structures

25 national Associations and Priories of the Order of Malta are currently members of Malteser International and actively support the organization in their areas of responsibility. Currently, both regional branches in Europe and the Americas 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, 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 fouryear term, consists of the President, the Vice-President, the Treasurer, and up to two additional elected members, as well as the representatives from the regional branches Europe and Americas and from the Asian/ 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. He is responsible for the operational management activities in line with the financial plan and the annual budget. The Secretary General and the Vice-Secretary General are appointed by the Board of Directors at the President's suggestion. He prepares the meetings of the Board of Directors and participates in them in an advisory capacity.

Sovereign Order of Malta Grand Hospitaller

Malteser International General Secretariat

President **Board of Directors** Secretary General

Malteser International Americas President Board of Directors

Executive Director

Malteser International Europe/Africa

President Board of Directors **Executive Director**

Malteser International Asia/Pacific

President Board of Directors **Executive Director**

Board of Directors



President Thierry de Beaumont-Beynac (France)



Richard von Steeb (Austria)



Treasure Charles-Louis de Laguiche (Switzerland)



Charles de Rohan (Great Britain)



Burke Bowe (USA)



President, Malteser International Europe Karl zu Löwenstein



President, Maltesei **International Americas** James F. O'Connor



Delegate, Asia/Pacific region Michael Khoo Ah Lip (Singapore)



Chaplain Bishop Marc Stenger (France)

Management



Secretary General Ingo Radtke (Germany)



Vice-Secretary General Sid Johann Peruvemba (Germany)

Malteser International a work of the Sovereign Order of Malta

900 years of service to the sick and the poor

In February 2013, more than 5,000 members, staff and volunteers of the Sovereign Order of Malta from around the world came together in Rome for a week of festivities. They celebrated the 900th jubilee of the signing of the Papal Bull "Piae postulation voluntatis" by Pope Paschal II, which placed the Order under the protection of the Holy See and officially recognized its spiritual and institutional identity.

The birth of the Order dates back even further. Between 1048 and 1071, merchants from Amalfi built a hospital dedicated to St. John the Baptist in Jerusalem, to care for pilgrims of any religious faith or race. The Order of St. John of Jerusalem - the monastic community which ran the hospital - became independent under the guidance of its founder, Blessed Gérard.

"The mission is always the same: to continue our fight against poverty, sickness and suffering on every continent. It is a mission as necessary today as it was nine hundred years ago – to alleviate physical and spiritual pain, to promote peace and justice and to help those in great need."

Fra' Matthew Festing, 79th Grand Master of the Sovereign Order of Malta, on the occasion of the 900-year jubilee in Rome



The Order of St John of Jerusalem is one of the oldest institutions of Western and Christian civilization. The lay Catholic Order has 13,500 members who have committed to the exercise of Christian virtue and charity. The Order of Malta remains

true to its inspiring principles, summarized in the motto "Tuitio Fidei et Obsequium Pauperum", nurturing, witnessing and protecting the faith and serving the poor and the sick. The Dames and Knights bring these principles to life by engaging in voluntary work, humanitarian assistance and medical and social activities. Today, the Order carries out these activities in over 120 countries.

The Order is based in Rome and has diplomatic relations with 104 countries and missions to major European countries, as well as to European and international organizations. Thanks to this diplomatic network, the Order can react quickly to crises and disasters and speed up its relief efforts. Its embassies also have the mission to support the international medical and humanitarian activities of the national associations and Malteser International. As a neutral and non-political party, the Order is able to act as mediator in civil and armed conflicts and to intervene as a protective force.

At the head of the Order is the 79th Grand Master Fra' Matthew Festing, who was elected for life and started serving in March of 2008.

Malteser International's member associations (as of July 2014)

www.orderofmalta.org.au

www.malteserorden.at

www.malteser.at

Belgium

www.ordredemaltebelgique.org Canada

www.orderofmaltacanada.org

Colombia

www.orderofmaltacolombia.org

www.ordendemaltacuba.com

France

www.ordredemaltefrance.org

Germany www.malteser.de

Great Britain

www.orderofmalta.org.uk

Hungary

www.mmlsz.hu ww.maltai.hu

Ireland

www.orderofmaltaireland.org

www.ordinedimaltaitalia.org

www.orderofmalta-malta.org

Mexico

www.ordendemalta.mx

Netherlands www.ordevanmalta.nl

Philippines

www.orderofmalta.int

Poland www.zakonmaltanski.pl

Portugal

www.ordemdemalta.pt

Scandinavia www malteserorden se

Singapore

www.orderofmalta.org.sg

Spain www.ordendemalta.es

Switzerland

www.malteserorden.ch

United States of America

www.orderofmaltaamerican.org www.orderofmalta-federal.org www.orderofmaltausawestern.org

www.orderofmalta.int www.malteser-international.org



Malteser International is a member of the following networks and campaigns:











Donate Now

We thank all of our donors, supporters and partners who helped us provide health and dignity to people in need all over the world in 2013.