



2015

ANNUAL REPORT

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Publisher: Deutsches Medikamenten-Hilfswerk action medeor e.V.
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Cover picture: © action medeor / B. Breuer





Dear friends and supporters of action medeor,

Every day, some 40,000 people are forced to flee their homes as a result of droughts, wars, terror, violence or extreme poverty. According to data gathered by the Office of the UN High Commissioner for Refugees (UNHCR), the majority of the estimated 60 million people in 2015 were either internally displaced or seeking asylum in neighboring countries. Nine out of ten refugees live in developing countries.

The refugee crisis has only just begun and will reshape the policies of the rich countries in today's globalized world. As an aid organization action medeor recognizes the urgency of improving the living conditions of people in their own countries—by establishing health services, providing medical staff, enabling access to essential medicines, and facilitating further training of qualified personnel.

action medeor has championed the cause for the people of Syria since 2012. Despite major logistical challenges, our relief shipments to this country continued to arrive safely at their destination. Simultaneously, action medeor intensified its efforts in 2015 to provide healthcare for refugees in Northern Iraq, as well as in the DR Congo, where more than 10,000 Burundians have sought asylum. Moreover, in light of the current refugee situation, action medeor has added Greece to the countries requiring medical aid.

Over and above our ongoing work among refugees, we were quick to help the victims of natural disasters. After the earthquake struck Nepal on April 25, 2015 action medeor instantly set about delivering urgently needed emergency aid. Support efforts now concentrate on rebuilding the country.

In Liberia and Sierra Leone, which are currently declared free of the Ebola virus, our attention has turned to strengthening the public health systems left paralyzed by the sheer magnitude of the outbreak. Next to our current projects, the work of action medeor will increasingly be affected by the impacts of climate change; more frequent and severe droughts in Africa and Latin America will lead to widespread food shortages, heightening the risk of a humanitarian crisis in these regions. As well as urgent emergency relief, there is a pressing need here to implement effective prevention policies and measures.

In the last year action medeor was able to improve the health situation of many people and so help to save precious lives. In many cases, these advances were more than a short-term solution, they brought lasting improvement. In view of today's global challenges, our commitment and dedication to help people in need must not wane. Standing shoulder to shoulder with you in this work is our bedrock—it inspires and motivates us in all we do.

For this we, and our partners, thank you most sincerely!


Bernd Pastors
CEO

Tönisvorst, June 2016


Christoph Bonsmann
Executive Committee Member

The global emergency dispensary in 2015



Receipt of **7,6** million euro of restricted & unrestricted monetary donations
2,7 million euro of in kind donations
2,1 million euro of third-party funding

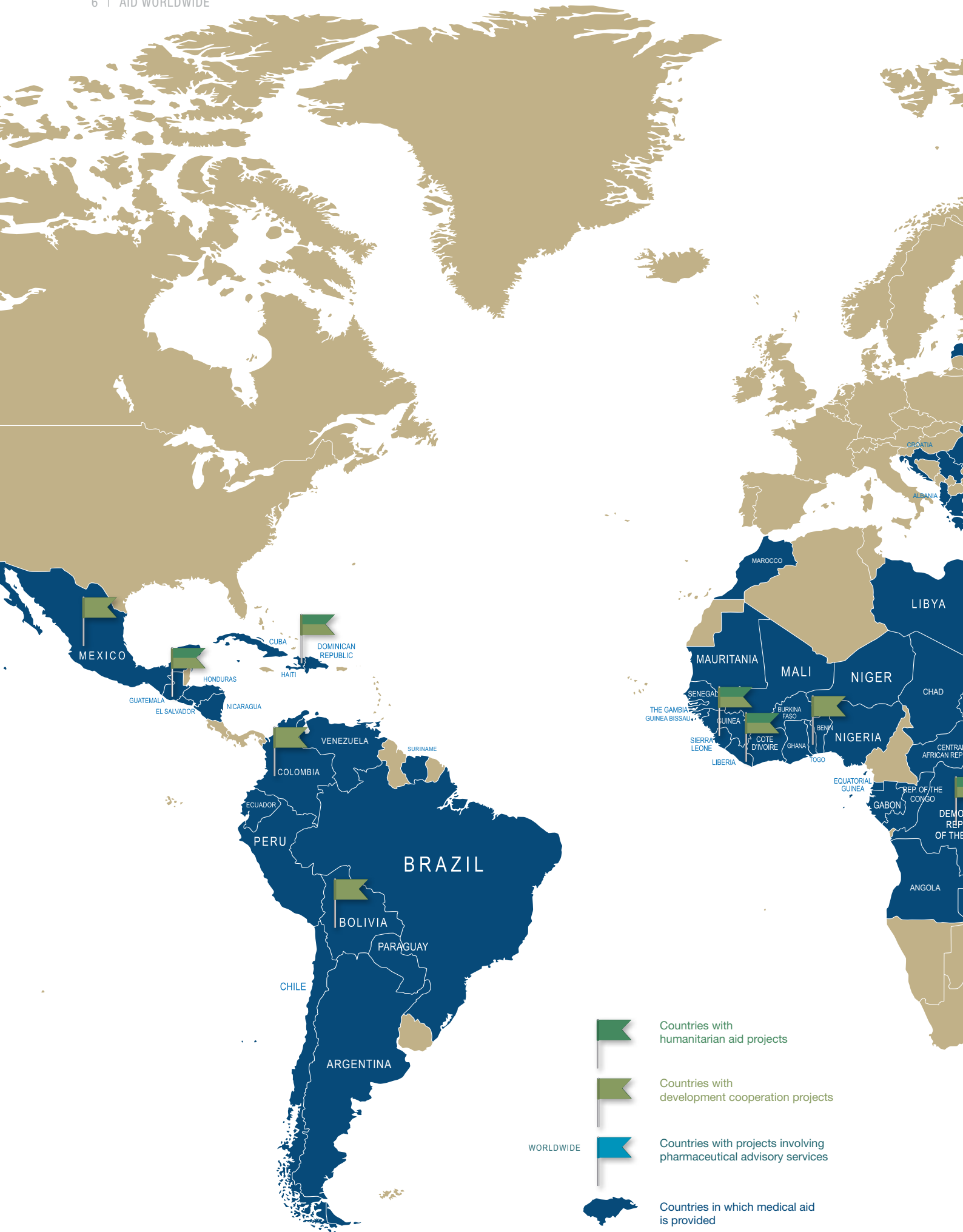
Know-how of **74** full-time employees and **28** volunteers.

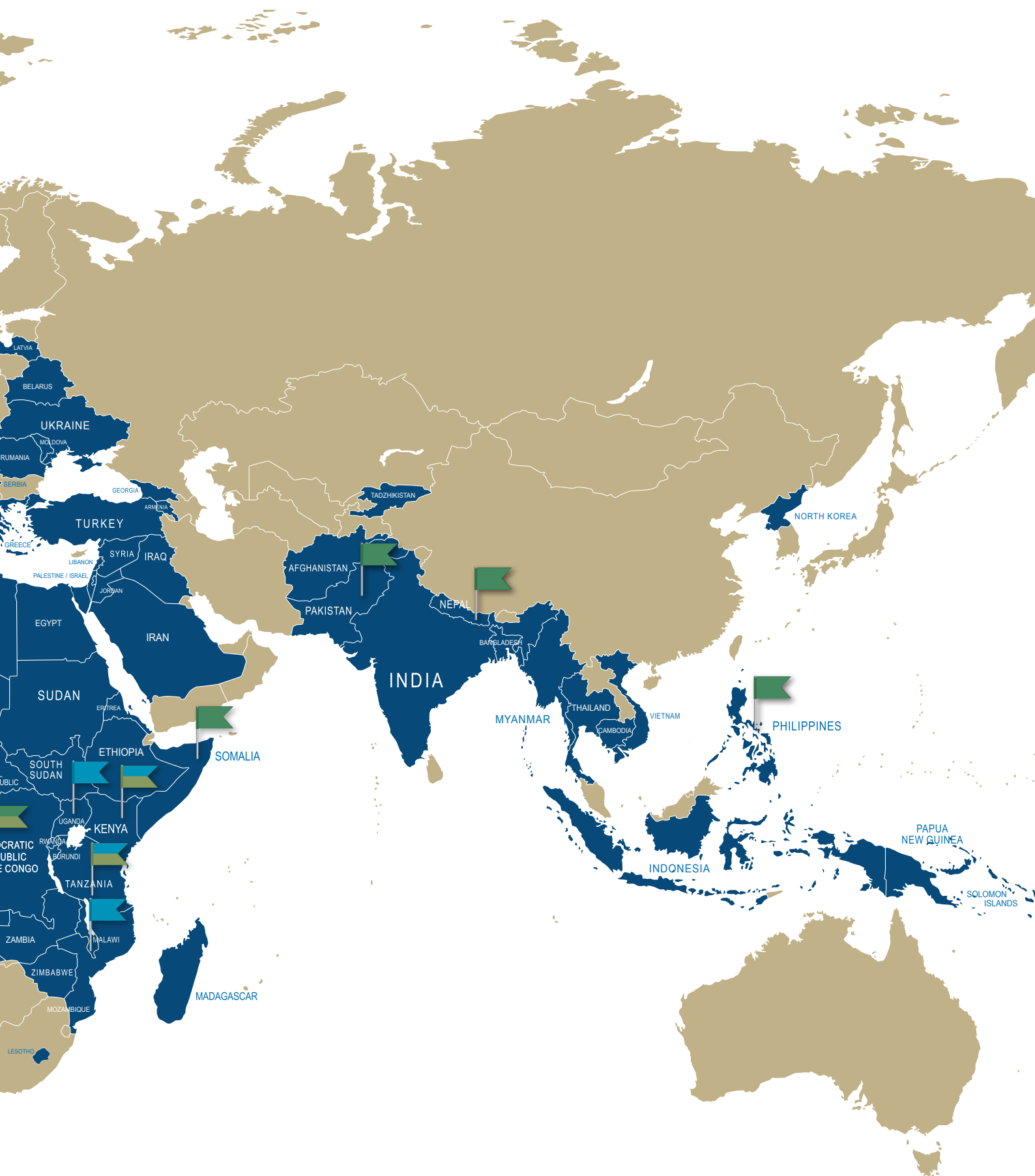
A warehouse of **4,000 m²** stores **170** different medicines
and **450** medical supply items.

More than **10,000** packages weighing **300 t** in total
were sent to **96** different countries.

More than **170,000** people benefited from emergency aid and reconstruction projects.

Around **2,000,000** people were provided with access to basic healthcare.





Aid worldwide



Further information is available at
www.medeor.de



» Ten years ago we set up the community pharmacy of our diocese in partnership with action medeor, ending the constant medicine shortage at our 16 health posts. action medeor truly is an emergency dispensary for us. «

Sr. Theopista Msemwa | Daughter of Charity of St Vincent de Paul in Mbinga, Tanzania

Medical aid

action medeor remains passionate and unyielding in the pursuit of better and sustainable healthcare for people in developing countries. In the first instance, this means providing access to adequate quantities of affordable quality medicines. With this in mind, action medeor keeps its 4,000 m² warehouse in Tönisvorst well stocked at all times with more than 170 different medicines and 450 medical supply items which the World Health Organization (WHO) considers essential for primary healthcare. Built on this, action medeor provides additional medical aid from its bases in Tanzania and Malawi.

The medicines we supply are produced by pharmaceutical manufacturers in Europe and Asia in accordance with recognized international standards. All potential manufacturers undergo a pre-qualification process before they are considered as a supplier for action medeor. Quality assurance documentation, such as manufacturer's license or external audit reports, are reviewed by action medeor pharmacists. More so, action medeor conducts its own audits at all contract manufacturers, with assistance and advice from international pharmaceutical experts.

The recipients of our need-based aid supplies are local partners that work closely with action medeor – these are smaller and larger health facilities, church and secular institutions, hospitals, as well as national and international aid organizations. All medicines and medical supplies are provided at cost or are financed, fully or in part, through donations. In emergencies such as natural disasters, our primary concern is to react promptly

– professional logistics and collaboration with locals in long-term partnerships ensure that our medical aid arrives where it is needed within a narrow time frame. If necessary, within 24 hours.

Medicines and consumables are procured at international level by issuing calls for bid based on the strict guidelines of the Humanitarian Aid & Civil Protection department of the European Commission (ECHO).



Setup of a temporary medicine distribution point in Nepal

On April 25, 2015 Nepal was rocked by a massive earthquake. More than 8,500 people were killed. Almost three million lost their homes and over 1,000 health facilities were destroyed.

That same day, action medeor responded by getting together the first emergency health kits, which were supplied to various partner organizations. Each kit contains dressings and suture material, surgical instruments, pain medication, antibiotics and injections.

The primary challenge facing rescue organizations on the ground was to access people living in the remote mountain villages. With the country's health system ill-equipped to handle the surge in demand for medicines, action medeor joined with Don Bosco Mondo and our Nepali partner, the Don Bosco Society, to set up a temporary medicines distribution point in Kathmandu. A priority concern was delivering primary healthcare to the rural population. Difficult access, confounded by the start of the rainy season and stretched public systems required a quick response.

Ten tons of medicines were flown to Nepal, where they were stockpiled under the supervision of action medeor pharmacist Sushan Tedla and assembled as required for the local

health posts. Beside antibiotics, pain medication, vitamins, infusions and ointments, the most urgent need was for band-aids and medical equipment such as clinical thermometers, injections and gloves. Working closely with local partners, these supplies could be dispensed to more than 90 villages providing medical care for at least three months. In addition to this, the donated medicines enabled 40 teams of doctors to run medical camps.

The medicines were taken to the various districts by truck, but on many occasions the last meters had to be navigated on foot, as the roads had become impassable. Thanks to the tremendous help received from the locals, all shipments made it to their destinations.

Key project data:

Project region:	Kathmandu, Nepal
Project period:	May 2015 – June 2015
Total funding:	310,000 euro



Working with local helpers, action medeor's Sushan Tedla and Katharina Wilkin set up the distribution point.

© action medeor



Help for victims of terror and violence

For several years, the Middle East has been embroiled in a crisis that still has no end in sight. In 2012 action medeor started sending relief supplies to hospitals in Syria, a country increasingly ravaged by civil war.

Syria's towns and cities lie in ruins; buildings are reduced to piles of rubble burying the streets around them under endless debris. The scale of devastation is staggering, flattening hospitals and health centers indiscriminately alongside apartment blocks, and crippling the Syrian health system. Many of the country's health professionals as well as nursing staff, pharmacists and laboratory technicians have already fled Syria.

In the majority of cases, the few doctors that remain in the country can do very little to ease the plight owing to the lack of essential medicines and consumables. This leaves the injured untreated, people with chronic diseases suffer unnecessarily and many children die from illnesses that can easily be treated.

In view of this dire scenario action medeor decided to defy the considerable risk and send regular shipments of the most urgent relief supplies to Syrian hospitals. Thanks to strong local partners and strict secrecy of the transportation routes, the shipments reached the hospitals, where they are used to aid those in need.

Medical aid in the last year also prioritized refugees that have fled war and terror to now living in a state of limbo in Northern Iraq, Turkish refugee camps and on the Eastern Aegean Islands of Greece. Up until March 2016 action medeor, in cooperation with its local partner organizations, had sent aid weighing a total of 255 tons to these regions.

Relief supplies reach their destination often under the most difficult conditions.



Syria

Need-based in kind donations for “extra” relief

The relief which action medeor provides through medicines and medical supplies sent to health posts across the world is largely financed through donations. But money alone can only go so far; in kind donations from pharmaceutical companies allows to offer aid on an even bigger scale.

In emergencies and disasters, a medical aid organization has a particularly acute need for large quantities of essential medicines, medical equipment and supplies. This need can often be met only through donations in kind. Over and above the relief they provide in urgent cases they let us take a long-term view of our mission, allowing us to build up and maintain stocks of medicines and medical supplies so that the recipients are not faced with otherwise often limited resources and can equip understocked clinics or finance medical staff.

Many pharmaceutical companies are among those that desire to play their part and therefore provide products as in kind donations to help people in need, whether as a result of an emergency or for lack of primary healthcare. Strict yet necessary selection criteria are in place to enable immediate use of all in kind donations. action medeor works with

a global network of reliable partners made up of large hospitals, small health posts and other aid organizations working on the frontlines. Close dialog between the recipients, action medeor and the donor companies promotes a transparent and responsible use of all in kind donations.

In 2014 action medeor founded the European Medicine Donations (EURMED) initiative in collaboration with Banco Farmaceutico (Italy) and International Health Partners (UK) with the shared objective of ensuring efficient and effective use of donated medicines and medical supplies during disaster response. EURMED serves the European healthcare industry by matching product donations to the needs of vulnerable and underserved communities around the world. Through the network action medeor last year received donations of pain medication, antibiotics, ointments, bandages and other supplies worth more than 830,000 euro.



A big thank you to all companies supporting our cause with need-based in kind donations.

action medeor adds Malawi to Tanzania base

In 2004 action medeor set up a local medicines and supplies distribution center in Dar es Salaam. Modeled on our Tanzanian subsidiary, this center is now joined by a further base in Malawi, set up with the same aim in mind – making quality medicines available to the region while promoting an independent supply of medicines.

Malawi did not previously have a charitable drug supply organization. Looking at the country's healthcare system it is clear why this was important. Access to public health services is modest at best, and nowhere so important than in rural areas. Malawi is a land of extreme poverty, with an inadequate health infrastructure and a shortage of qualified health workers. Making matters worse is the fact that there is no reliable supply system for medicines and medical equipment. Neither public nor private wholesalers match their supplies to the needs of local health facilities or their patients.

With this in mind, health centers in the country will now be supplied from our new action medeor warehouse in Lilongwe. The facility offers 500 m² of space, enough to stock a wide variety of 150 different medicines and medical products. Day-to-day operations are coordinated by a warehouse management system. Similar to Tanzania, the medi-

cines are subject to stringent quality controls. The staff is given continuous training based on their job requirements. The five-strong team in Malawi started their work at the end of 2015.

action medeor International Healthcare gGmbH – 2015

Locations in Tanzania: Dar es Salaam and Masasi

Value of supplied medicines: 2,037,654.50 euro

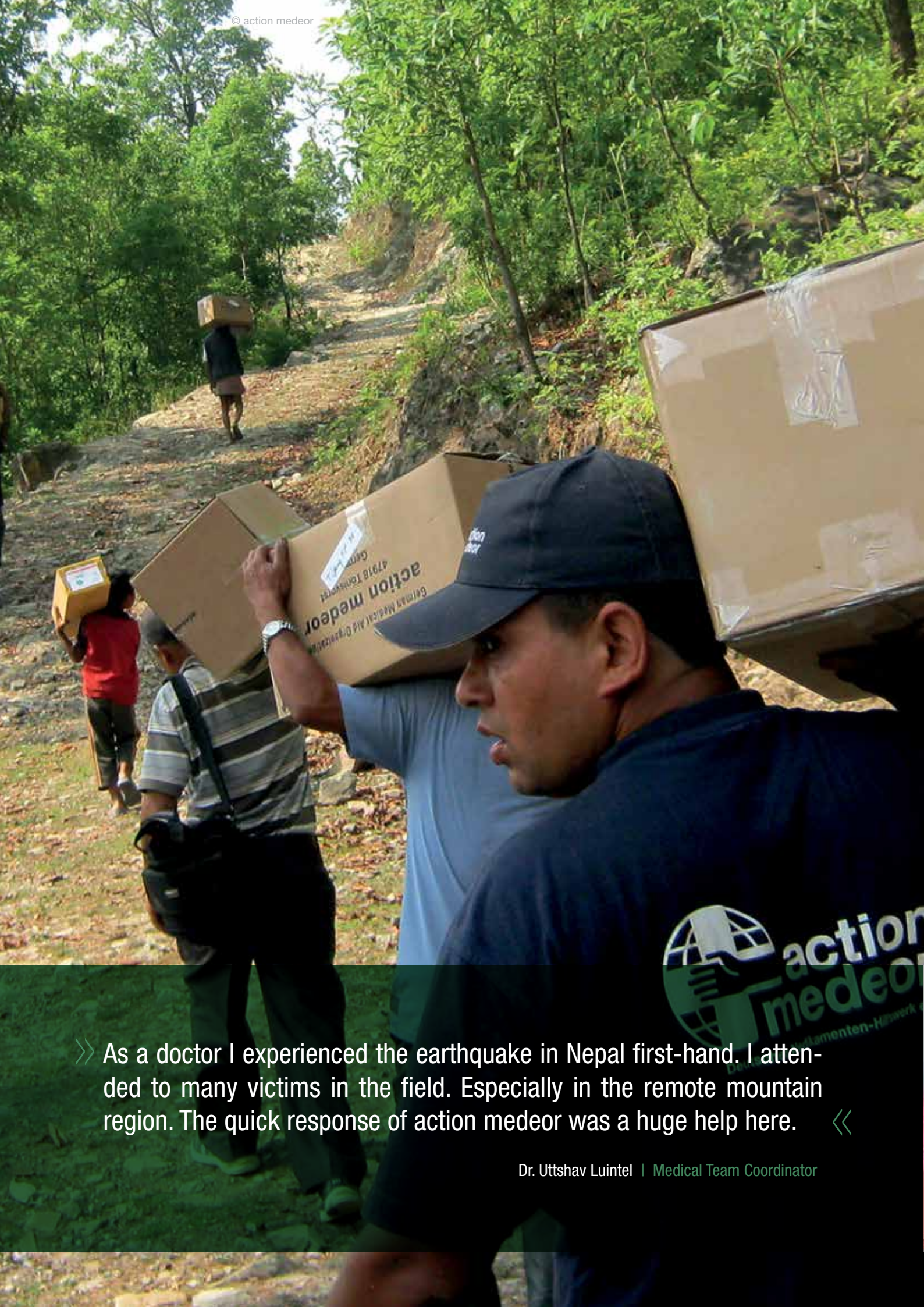
– of which donation-funded: 127,788.87 euro

Number of health posts supplied: 364

Number of staff: 16

Jungheinrich AG supported the setup of the Malawi distribution center by providing a pallet racking system and a high rack stacker forklift truck.





» As a doctor I experienced the earthquake in Nepal first-hand. I attended to many victims in the field. Especially in the remote mountain region. The quick response of action medeor was a huge help here. «

Dr. Uttshav Luintel | Medical Team Coordinator

Humanitarian aid projects

According to UN figures, more than 125 million people worldwide were in need of immediate humanitarian assistance in the last year. Some 60 million were and are fleeing. 37 countries are directly affected by conflicts, crises and/or natural disasters.

The scale of these refugee movements poses a formidable challenge not only to European countries, but also stretches national capacities especially in the conflict regions themselves to the breaking point. Of chief concern to action medeor generally are states with a weak or fragile structure and insufficient coverage of primary care services. In these countries, natural events and political conflicts tend to have a particularly catastrophic effect on the people.

action medeor responds primary to acute emergencies by sending relief shipments to local partner organizations that distribute the supplies and provide primary medical care. In the medium term our partners are given full support in rebuilding medical structures. Early involvement of the target groups is of the essence here, as is the provision of need-based care regardless of gender, age, religion or ethnic origin. In addition to this, we increasingly implement disaster prevention and food security projects with partners and communities to help build people's capacity to take action.

In 2015 action medeor supported 42 humanitarian aid projects worth 2.3 million euro. Natural events, such as the earthquake in Nepal and the drought impact of El Niño, along with improving the health systems of Ebola-hit countries were prioritized. The projects are financed through donations, endowments, and the Ministry of Foreign Affairs. As a member of Aktion Deutschland Hilft (ADH), an alliance of 13 renowned German aid organizations, action medeor also collaborates

with other organizations involved in major international disasters to provide effective relief quickly and reliably. In 2015, action medeor was allotted 707,892.05 euro by the alliance.

action medeor is committed to complying with recognized international standards, including the Code of Conduct for international emergency aid organizations and the Sphere Project (Humanitarian Charter and Minimum Standards in Disaster Response).



Defeating Ebola – strengthening health structures

The fight against Ebola began for action medeor when the Gerlib Clinic in Monrovia sent an appeal for help in July 2014. action medeor responded by sending urgently needed protective equipment and medicines, while working to set up a temporary isolation ward. Now that the epidemic is declared over, our support focuses on strengthening the health systems in Liberia and Sierra Leone.

Liberia was first declared free of Ebola virus transmission on May 9, 2015. By that point, the treatment ward run by the Gerlib Clinic and the ELWA Hospital had admitted as many as 378 people for examination. 177 of them tested positive for Ebola and were immediately isolated for treatment. The isolation ward played a vital part in helping to curb a further spread of the virus and so save more lives.

To date, more than 20,000 people in Liberia and Sierra Leone have been reached through projects organized by action medeor with advice on Ebola transmission and prevention, taking either a personal approach by visiting people at home or through messages over the radio. Over 4,000 households received vital supplies to help improve their hygiene situation.

The focus of action medeor projects has now shifted to re-opening and strengthening health facilities after the Ebola crisis. In Liberia, for example, a remote public health center

Key project data:

Project region:	Monrovia and Sasstown in Liberia and Bo in Sierra Leone
Project period:	September 2015 – August 2017
Total funding:	2,105,220 euro

was given a complete overhaul, adding a modern maternity unit as well as operating theaters. The Ebola virus resurfaced once more before Sierra Leone was eventually declared free of Ebola on November 7, 2015; Liberia was given its second all-clear on January 14, 2016. The call for heightened vigilance remains, however, until conclusive studies provide an indication of how long the virus remains in the body and can be transmitted.



Emergency relief for Burundian refugees in the DR Congo

In April 2015, civil unrest and violence erupted in Burundi when acting President Nkurunziza announced his candidacy for a third term. According to an UN report, this has led to an outflow of around 240,000 refugees to neighboring DR Congo, Tanzania, Rwanda and Uganda.

An estimated 25,000 Burundians have now taken refuge in camps located in the eastern Democratic Republic of Congo. Those not presently taken in by host families are housed in temporary shelters. The hygiene conditions here are deplorable, access to safe drinking water, sanitary facilities and food is inadequate at best. The resulting outbreaks of communicable diseases such as malaria, diarrhea or respiratory tract infections have serious consequences, particularly for pregnant women, small children and the elderly.

In collaboration with our local project partner AFPDE (Association des Femmes pour la Promotion et le Développement Endogène) action medeor launched an emergency assistance program for Burundian refugees to ensure their survival. A mobile clinic, opened as recently as in June 2015, is now a factor in improving the general health of refugees. A second mobile clinic has been on the ground at an official refugee camp overseen by the refugee relief agency UN-HCR since January 2016.

Key project data:

Project region:	Luvungi & Bwegera (Ruzizi Plain), Lusenda, South-Kivu/DR Kongo
Project period:	June 2015 – June 2016
Total funding:	335,000 euro

Two teams of 10 medical and mental health professionals in all have worked relentlessly since June 2015 to provide primary medical care and attend to more than 60 births to date. In addition to this, health centers are supplied with medicines for free treatment of refugees, while 40 tons of food and 4,500 mosquito nets have been distributed among the refugees. In an effort to stem the spread of HIV/Aids, social workers are specially trained in HIV/Aids and hygiene education, with access to voluntary counseling and testing available to refugees. There is deep concern that the human rights situation in Burundi will continue to deteriorate.

© action medeor

Primitive straw huts serve as accommodation. Working for action medeor, Project Consultant Emmanuel Limi personally checks the situation on the ground.

DR Kongo



Rebuilding schools in Nepal

In April 2015 the lives of 5.6 million people in Nepal were shaken to the core by an earthquake that also destroyed numerous schools. action medeor helps to rebuild ten of these schools in support of the Nepalese on the rocky road back to a new normality after their traumatic experience.

The schools that action medeor helps to repair in cooperation with our Nepalese partner ECCA are all in the Kavre district. Our aim here is to rebuild the sanitary facilities, supply water filter systems and provide an understanding of their importance and use. In addition to this, action medeor donates school supplies and organizes regular social activities to enable the children through fun and games to come to terms with the trauma of the recent earthquake. Along with this, the project teaches them how best to protect their environment from future landslides and give first aid in an emergency.

The work is challenging not least because of the harsh Nepalese winter. Many of the children are exposed to bitter weather conditions with little or no protection. Living in temporary shelters and without warm clothing, they are at particular risk of illness and disease. Many of the grade schoolers sit on cold stone floors in class. action medeor and ECCA provided these children with warm clothes, blankets, and mats to sit on. The classrooms were fitted with insulating mats, carpets and seat cushions.

Key project data:

Project region:	Kavre and Dolakha, Nepal
Project period:	August 2015 – February 2017
Total funding:	173,000 euro

In the second project phase, which will run on until early 2017, our efforts will center on schools in the Dolakha district. Jhule Village Development Committee will work with the school officials to set up a plan for sustainable improvement of the hygiene and sanitary situation. The plan will then be implemented within a year, with support from all stakeholders. Again, social activities will be offered at these schools, giving children the opportunity to learn hygiene practices and take responsibility for their environment. Special focus will also be given to the teaching staff that equally have to deal with the trauma suffered.

The children are happy –
they can now go back to school



Food and primary care for indigenous families

In 2014 and 2015 Guatemala grappled with severe recurring droughts that were exacerbated by factors such as the El Niño phenomenon. The effects have reached unprecedented peaks for some 10 percent of the population, hitting small subsistence farmers and day laborers, mostly from marginalized indigenous communities, particularly hard.

With poverty, malnutrition and infectious disease already at high levels, the widespread crop failures in recent years left many struggling to survive. Having depleted all their supplies, families were often forced to sell their productive assets for food. To make matters worse, government spending cuts deprived these rural communities of access to public health services.

action medeor joined with the German children's relief organization Kindermissionswerk and our Guatemalan partner organization UCIS to support families in the Huehuetenango Department located in southwest Guatemala. In all 65 families received basic supplies such as corn, beans, flour and sugar to provide enough food for roughly a month. Despite their dire situation, these families showed great solidarity by deciding to share some of their provisions with refugee families.

A community kitchen built in the context of the project now enables locals to make bread for their own needs and to

Key project data:

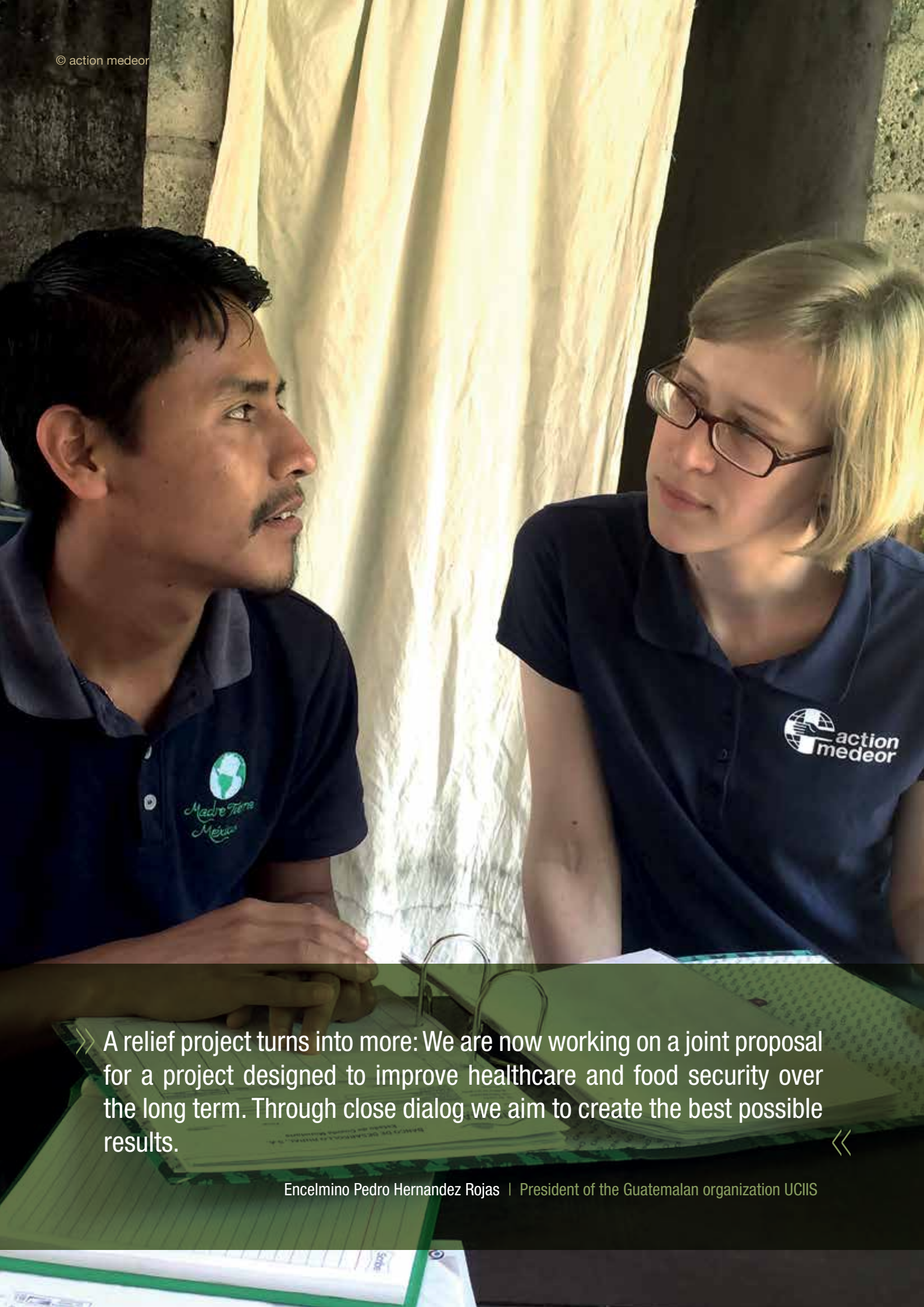
Project region:	Chej'bal, Huehuetenango, Guatemala
Project period:	September 2015 – March 2016
Total funding:	18,000 euro

sell, helping to address the pressing concern of food insecurity for these families, while generating a small income. A fish farm was opened on the same principle. To meet urgent healthcare needs, a doctor was hired for four months to treat the people in this and neighboring communities. In 2015, action medeor supported two other aid projects in Guatemala, one with the same partner, and another with its partner Menachor in the Chiquimula Department.



Thanks to the support received, none of the valuable seeds needed to be used up for food.

Guatemala



» A relief project turns into more: We are now working on a joint proposal for a project designed to improve healthcare and food security over the long term. Through close dialog we aim to create the best possible results.



Encelmino Pedro Hernandez Rojas | President of the Guatemalan organization UCIIS

Development cooperation

Development cooperation for action medeor means the opportunity to share in efforts ensuring that education and a comprehensive health service, including prevention, primary care, medical treatment and medicines, are available and accessible to every man, woman and child. Particular focus is given to people affected by poverty, from an ethnic minority, and/or living in remote regions or conflict zones. Our work rests on the pillars of partnership and cooperation with local charitable organizations. They are the voice of the community, know its needs and its social, political and legal framework better than anyone, and enjoy the respect of the locals. Key aspects of every project are primary medical care, education on issues involving malaria, HIV/Aids or sexual and reproductive health and rights, as well as improving the medical infrastructure.

Each project begins with a conceptual model that defines the objectives and outcomes of the joint initiative and sets up an action plan with cost estimate, all of which are agreed between action medeor and its partners. The project is then implemented on the ground, with action medeor remaining available to its partners with help and advice. Continuous monitoring and appropriate adjustment strategies are critical components of the project, as is a review by an evaluator. Two interim evaluations and five final external evaluations conducted in 2015 enabled the project stakeholders to check outcome and effects against planned objectives, accounting for any causes and factors that led to a variance. At the same time, the review provides valuable input and guidance for future

projects, making it a vital tool for institutional learning and advancement at action medeor and its project partners, and meaningful in enhancing transparency and accountability over the use of funds.

In 2015 action medeor supported 29 healthcare projects in Asia, Africa and Latin America worth 1.6 million euro. Next to donations and endowments, the project costs were funded by the German Federal Ministry for Economic Cooperation and Development (BMZ).



Healthcare for vulnerable girls and young women

Many developing countries spend not nearly enough on public healthcare. Those worst affected by the lack of medical services are disadvantaged girls and illegal sex workers. Thanks to the support of charitable organizations, they now have access to professional advice, treatment and care.

Working closely with our local partner organization “Association Petite Soeur à Soeur (PSAS)”, action medeor advocates for improving the health, psychosocial and financial situation of young sex workers and vulnerable girls in Togo. Next to a wide spectrum of consulting services and medical care, these girls and young women are educated comprehensively about sexually transmitted diseases such as HIV/Aids, basic prevention measures as well as family planning and legal issues. Moreover, PSAS offers them a better future with alternative sources of income through training as a hairdresser or dressmaker.

At the end of the initiative, the project was evaluated by a team of external consultants in terms of the extent to which it achieved its goals and objectives. Not only is this a valuable tool for internal control purposes, the evaluation also helps to summarize the lessons learnt and draw out critical information for similar projects in the future. Comparing before-and-after conditions enables us to identify desired as well as unintended outcomes of project measures and to adjust project activities where necessary. A key finding of this evaluation was confirmation that the various PSAS

Key project data:

Project region:	Lomé, Kpalimé, Anié, Tsevié in Togo
Project period:	November 2012 – November 2015
Total funding:	354,719 euro

offers are very well received and used by the target group. This tells us that our chosen concept works and has helped to build mutual trust among the participants. At the same time, the evaluation highlights that further efforts must be made to ensure sustainability of the work in all respects. These findings now form the basis of a follow-up project formulated with our local partner.

Alongside support, education and medical care of the target group, the next project phase will therefore give focus to generating additional income for our partners, through measures such as widening the cooperation to include other organizations and state institutions, so as to ensure greater independence in the long run.



The project targets some 3,600 young sex workers along with 5,400 trainee hairdressers and dressmakers.



Promoting mother and child health in Somalia

The majority of Somalis has no access to primary healthcare. Many regions are without specialist expertise and referral services for complex cases, aggravated by a dearth of qualified health workers.

Somalia has one of the highest mother and child mortality rates in the world, with 10% of children dying before age five. Not only that, female genital mutilation is a widespread and deeply entrenched social convention, while many women also suffer physical and psychological abuse. In an effort to improve access to health services, principally for women and children below the age of five, action medeor started a health project in the Banadir region in August 2014.

The three-year project is implemented in partnership with the local organization Wardi Relief and Development Initiatives (WARDI) and centers on the setup of four health facilities in Hamar Jab Jab, Leego, Wale Weyn and Wadag. The project further involves the training of staff in prenatal care, obstetrics, family planning and gender-based violence. As the largest health center, Hamar Jab Jab will be upgraded to a referral hospital for obstetrics, with the addition of a new children's ward and a stabilization center for malnourished children.

Key project data:

Project region: Bandir region and Hamar Jab Jab, Wabari, Hamar Weyne and Bondhere Districts in Somalia

Project period: August 2014 – July 2017

Total funding: 816,215 euro

The project involves the training of 40 community health workers whose responsibility will be to visit and educate women at home and refer complex cases to the hospital. This is underpinned by public education events and rounded out by staff training at the Somali Ministry of Health and other public authorities in health management, planning and control.

Hamar Jab Jab is the primary medical center for child healthcare in the region



Somalia

Improvement of primary healthcare in Mexico

Primary health services in rural areas of Mexico's southernmost region, Chiapas, are precarious in many respects. Health facilities are often too far or poorly equipped. Those most at risk are mothers and children.

Recognizing their vulnerability, action medeor launched a project (completed in October 2015) in cooperation with its long-standing partner, Madre Tierra Mexico, to help alleviate this problem. A health center was set up with our local partner that can attend to as many as 250 patients a month. The center is operated by medical staff that work with trained health promoters who enjoy the trust of the community. Periodic health campaigns run by the latter in their community address issues such as hygiene and nutrition, prevention of disease, and mother/child health. The health center and health promoters pay special attention to pregnant women in remote areas that have little chance of receiving the care they need in case of a high-risk pregnancy. Next to these primary health services, concerted efforts are made to target young people with sex education awareness campaigns so as to combat the high rates of teenage pregnancies and sexually transmitted diseases prevalent in the region.

In the last year the decision was made to extend the project with a view to promoting the social and economic sustainability of the health center. Additional accommodation now offers permanent staff a quiet place to rest during their

Key project data:

Project region:	Union Jamaica, Chiapas, Mexico
Project period:	October 2011 – August 2015
Total funding:	636,096 euro

24-hour shifts and is used by external, often international, medical experts that visit the center and the community to offer dental, gynecological and pediatric services. An ambulance, meanwhile, takes pregnant women with high-risk births quickly and safely to a larger hospital. action medeor will continue to follow with keen interest the development of the health center remaining in close contact with Madre Tierra Mexico, and wishes its project partner many more fruitful years of service with even more recovered patients.

The health center is widely appreciated in the community. A mobile health service takes medical care to remote areas.



Sex and rights education empowers youth in the Philippines

The number of new HIV infections among youths and adolescents is escalating. Many of these young people lost family when Typhoon Haiyan struck in 2013. Some families still live in temporary accommodation, with next to no prospect of work.

Young people at a reproductive age previously had little or no access to educational resources on sexual and reproductive health and rights (SRHR), including issues such as contraception, teenage pregnancies, sexually transmitted diseases and sexual violence. The project launched by action medeor in cooperation with our partner organization Positive Philippine Action Foundation Inc. (PAFPI) provides youths with education and content-specific training, dealing with aspects such as how to use a condom, the mechanisms of HIV transmission and protection from sexual violence.

As peer educators, they are then encouraged to become active members of their community, by educating their peers, organizing information days and running regular awareness promotion events in their villages. Parallel to these educational events, PAFPI is working with representatives of the

Key project data:

Project region:	Tacloban, Leyte, Visayas, Philippines
Project period:	March 2015 – December 2016
Total funding:	140,000 euro

community and regional health authorities and key figures in the local health sector to come up with a long-term strategy and organizational structure on SRHR.

Some initial success has already been achieved. While in 2015 the campaign reached young people from 20 urban districts, the local government signed off on an order to create an HIV/Aids Council responsible for dealing with HIV prevention issues and eliminating prejudices in the community.

The young folks are thrilled to receive a positive response from their peers.



Philippines



» The support from action medeor marks a watershed for us and has opened doors to new research projects. In 2015 we set up the Regional Center of Regulatory Excellence (RCORE). «

Prof. Dr. Eliangiringa Kaale | Muhimbili University of Health and Allied Sciences

Pharmaceutical advisory services

The right to health for all can only be achieved when medicines are available that are of good quality and affordable. This applies as much to primary medical care as it does to emergency and disaster situations.

In our campaign to improve primary care, our work builds on two pillars—the shipment of medicines and medical supplies from our warehouses in Tönisvorst, Tanzania and Malawi to health posts all across the world. And secondly, sharing pharmaceutical expertise with a view to strengthening local health systems for the future.

In recent years, pharmaceutical aspects have been an issue also in emergency and disaster situations. This reflected in the work of action medeor in 2015. One strand of the work of our pharmacists related to the major Ebola epidemic in West Africa. The selection of supplies for health posts in Liberia required pharmaceutical expertise to make the right medicines, consumables, protective gear, laboratory material and equipment available.

As soon as news of the earthquake in Nepal broke, action medeor pharmacists set about assembling items that were needed at our temporary medicines distribution post in Kathmandu and made sure that all necessary documentation and procedures were in place for immediate operation of a local medicines warehouse. Consideration was given to every single aspect ensuring that the action medeor team sent to Nepal could begin at once to stock the shelves with

the medicines and supplies sent from Tönisvorst and deliver them to local health posts. Our relief work in Nepal continues, with efforts now focused on helping to improve the pharmaceutical testing laboratory in the country. Additionally, there are plans to provide further training for staff at pharmaceutical manufacturers and the regulatory authority.

In 2015 action medeor ran nine pharmaceutical projects worth almost 370,000 euro.



Better training for pharmaceutical staff

The critical shortage of pharmaceutical staff hits rural areas particularly hard, with inadequate access to essential medicines. This can change by training more and better qualified personnel.

Typically there is only one pharmacist and one pharmaceutical assistant or pharmaceutical technician for every 50,000 Tanzanians. This leaves large parts of the population, especially in rural areas, deprived of access to medicines and adequate pharmaceutical services. To make matters worse pharmaceutical training in many cases is hindered by factors such as the lack of teaching staff and laboratories. As a result qualified staff are often ill prepared to respond appropriately to the challenges presented by the national health system.

A study conducted to gauge the current situation formed the basis of a project that was implemented in 2014 with the aim to support schools in training more pharmaceutical staff and provide higher quality teaching. Funded in the context of a public private partnership (PPP) between the three pharmaceutical companies Bayer, Boehringer and Merck

and the German Society for International Cooperation (GIZ), the project is coordinated by action medeor. Church and state training facilities involved in the project in Tanzania include the Kilimanjaro School of Pharmacy in Moshi.

The project aims to provide a new laboratory and library that will significantly improve the learning experience of the students. In a further step focus will be given to aligning the curricula, basing them on the current requirements of the health system, with consistent key elements. A panel of experts convened to this end was assigned the task to draft a new, modular curriculum with assistance from relevant figures in the health sector. This was submitted to the National Council for Technical Education (NACTE) in 2015 and will come into full force at all eight pharmaceutical teaching facilities from the start of the 2016/17 academic year.

© GPHF

Training in identifying counterfeit pharmaceuticals is provided by GPHF Project Manager Dr. Richard Jähne



To increase the number of qualified staff with at least basic pharmaceutical knowledge, the new curriculum enables trainees to qualify as “dispensers” after just one year. The curriculum is based on a modular structure to ensure that training can be continued at any time in order to advance to “Pharmaceutical Assistant” after two years or “Pharmaceutical Technician” after three years.

Each of the four schools participating in the project will also be set up with a ‘minilab’. Using comparatively simple analytical methods, these labs are designed to help identify counterfeit medicines that are prevalent in large parts of Africa. Headed by the German Pharma Health Fund (GPHF)/Merck, tutors of all eight schools in Tanzania were given instruction on the use of these minilabs. The focus was on anti-infectives, which include medicines treating bacterial infections, malaria and HIV/Aids, in light of the fact that

counterfeit medicines with the wrong amount of, or no, active ingredient can seriously harm the patient’s health. The successful trainees can now pass their new found knowledge on to colleagues and students and so help to improve drug safety in the market.

Key project data:

Project region:	Tanzania
Project period:	April 2014 – December 2016
Total funding:	418,500 euro



These participants have successfully completed the drug safety training

Tanzania

Selection of projects in 2015

	Continent	Country	Project focus
Humanitarian Aid	America	Haiti	Healthcare and nutritional therapy for children and their families affected by the 2010 earthquake
		Haiti	Health improvement for children through access to medical care, food security and sanitary facilities
		Haiti	Healthcare and nutritional therapy
		Guatemala	Emergency food security project
		Guatemala	Basic emergency healthcare and food security project
		Philippines	Inclusive disaster prevention at elementary schools in Metro Manila
	Asia	Pakistan	Restoration and promotion of resilient livelihoods through community-based disaster reduction
		Philippines	Reconstruction and community-based disaster reduction
		Philippines	Reconstruction of health facilities
		Philippines	Improvement of self-help capabilities through training of lifeguards, swimming instructors and community health
		Philippines	Improvement of sexual and reproductive rights of young people in the post-typhoon region of Leyte
		Nepal	Setup and operation of a temporary medical supplies distribution point in Kathmandu
		Nepal	Reconstruction of health facilities after the earthquake
		Nepal	Setup of WASH facilities and hygiene education in schools
		Nepal	Medical clinic, counselling, training of marginalized women in Kathmandu
		Somalia	Reconstruction of health infrastructure and improvement of healthcare in the Banadir region
	Africa	Liberia	Setup and operation of an Ebola isolation ward in Monrovia
		Liberia	Ebola prevention and education in Paynesville
		Liberia	Setup of a maternity ward in Sasstown
		DR Congo	Medical emergency relief for Burundian refugees in the DR Congo
		Sierra Leone	Construction of a triage at the Gila's hospital in Bo
		Sierra Leone	Ebola prevention and support for households under quarantine in Bo and 15 communities
Development Cooperation	Africa	Liberia	Educational program and support of the Gerlib Clinic in Paynesville
		Sierra Leone	Support of Gila's hospital in Bo
		DR Congo	Medical and psychosocial care for HIV patients
		DR Congo	Malaria and HIV/AIDS awareness and distribution of mosquito nets
		DR Congo	Malaria and HIV/AIDS awareness and distribution of mosquito nets
		Tanzania	Medical equipment for a maternity unit at the St Elisabeth hospital
		Tanzania	Setup of a pediatric ward at the St Elisabeth hospital
		Tanzania	Hygiene education for women and girls in Northern Tanzania
		Togo	Improvement of the sexual and reproductive health and rights of young trainees and sex workers
		Togo	Fighting malaria and HIV/AIDS
		Kenya	Improvement of access to sexual and reproductive health and rights
	America	Haiti	Sustainable basic healthcare
		Bolivia	Improvement of the sexual and reproductive health and rights of young people
		Guatemala	Improvement of the sexual and reproductive health and rights of indigenous communities
		Guatemala	Improvement of the health of mothers and newborn babies: Awareness and further training for midwives
		Guatemala	Improvement of basic healthcare
		Colombia	Reduction of vulnerability of women to health problems in the context of armed conflict
		Mexico	Construction of a health center with maternity unit, training of promoters and midwives
	worldwide		Cooperation of pharmaceutical networks
	Africa	Tanzania	Support of pharmaceutical development laboratory
		Tanzania	Pharmaceutical training support at four schools
		Tanzania	Product development of HIV/AIDS medicines
		Uganda	Support of local pharmaceutical production
		Malawi	Setup of action medeor Malawi, local drug and medical supplies distribution base
		Tanzania	Training of pharmaceutical personnel
Pharmaceutical Advisory Services		Kenya	Scratch-off labels as protection against counterfeit medicines

	Period	Project partners	Co-funding/funding providers	Total funding* 2015 (EUR)
	February 2012 – March 2015	FEJ	Stiftung RTL	18,799
	February 2013 – February 2015	OSAP0	Stiftung RTL, ADH	23,687
	October 2013 – March 2015	FEJ	Rhein-Zeitung/HELFT UNS LEBEN	13,304
	March – May 2015	Menachor		8,066
	March 2015 – January 2016	UCIIS	Kindermissionswerk	11,299
	November 2014 – October 2015	ASB, CDRC, CREST	ADH, Deutsche Telekom	35,065
	September 2013 – August 2016	PVDP	BMZ/ESÜH	248,391
	March 2014 – August 2015	CDRC, PCDR, CPRS, STPRC	ADH	163,230
	December 2013 – May 2016	KAKAK	ADH	13,101
workers	January 2015 – December 2016	PLS	ADH	44,992
	March 2015 – December 2016	PAFPI	ADH	64,709
	May – December 2015	Don Bosco Mondo	ADH, AA	161,636
	July 2016 – March 2016	SWAN, AoG	ADH	37,859
	July 2015 – January 2017	ECCA	ADH	63,485
	September 2015 – September 2016	Partnership Nepal	ADH	50,054
	August 2014 – October 2016	WARDI	BMZ/ ESÜH	363,922
	August 2014 – July 2015	GerLib/MoHSW	EKFS, GIZ	379,759
	December 2014 – July 2015	GerLib Clinic	RTL, Quandt-Spende	22,037
	June 2015 – December 2015	GerLib Clinic	EKFS, Quandt-Spende	89,940
	June 2015 – June 2016	AFPDE	Sternsinger, ADH, Fürsorge- & Bildungsstiftung	76,175
	August 2015 – December 2015	Hilfe Direkt Sierra Leone	Quandt-Spende	17,082
	December 2014 – June 2015	Hilfe Direkt Sierra Leone	Stiftung RTL, Stiftung Stern e.V.	16,023
	October 2015 – August 2017	GerLib Clinic	GIZ	65,189
	November 2015 – August 2017	Hilfe Direkt Sierra-Leone	GIZ	61,097
	January 2010 – December 2015	Pharmakina		28,811
	November 2012 – October 2015	AFPDE	BMZ	74,402
	November 2013 – October 2016	APED	BMZ	197,888
	July 2014 – April 2015	Catholic Archdioceses of Arusha	FedEx Europe/United Way Worldwide	54,260
	June 2015 – March 2016	Catholic Archdioceses of Arusha	FedEx Europe/United Way Worldwide, Ecovis-Stiftung	52,604
	June 2015 – March 2016	Catholic Archdiocese of Arusha	BMZ/Ecovis-Stiftung	28,238
	November 2012 – November 2015	PSAS	BMZ	137,487
	January 2013 – December 2015	2 AD	Stiftung RTL, Lappe-Stiftung	41,345
	April 2015 – March 2018	AICHM	BMZ	197,632
	December 2015 – November 2018	FEJ	BMZ	19,999
	August 2013 – May 2016	CSRA	BMZ	113,185
	January 2014 – April 2017	PIES de Occidente	BMZ, Lappe-Stiftung	134,686
	October 2013 – March 2016	Ak'tenamit	BMZ	45,606
	January 2014 – January 2016	ASECSA		25,584
	April 2014 – December 2018	Taller Abierto	BMZ, Pedro Claver Stiftung	56,294
	October 2011 – October 2015	Madre Tierra Mexico	BMZ, Lappe-Stiftung	144,435
	January 2015 – December 2015	EPN/FIP		2,505
	January 2015 – December 2015	MUHAS		12,151
	April 2014 – December 2016	KSP	GIZ, Bayer, Boehringer, Merck	227,418
	April 2011 – April 2015	MUHAS		1,326
	February 2014 – June 2015	KPI	KPI	1,549
	January 2015 – December 2015	AMM	AGEH	61,785
	September 2015 – December 2017	KSP, RUHI, PC	ALRA	54,923
	November 2015 – May 2016	EPN	GIZ	7,257

* includes own resources



» Our students know how hard action medeor works for refugees around the world. Of course they wanted to campaign for their health and run their best race. «

Annette Stephan | Deputy Head of Tönisvorst Secondary School

Donations are a vote of confidence

Donors seek accountability and responsible use of their donations. Quality standards that verify efficient and considered use of donations are paramount at action medeor. This is why action medeor is a member of the German Donations Council (Deutscher Spendenrat), the Transparent Civil Society Initiative, and VENRO, the umbrella organization of development and humanitarian aid non-governmental organizations (NGOs) in Germany. It commits action medeor to strict compliance with the Code of Conduct on Transparency, Organizational Governance and Supervision.

Public relations, advertising and fundraising are essential if we want to build the loyalty of our existing sponsors and expand our base by attracting new donors. This said, spending in these areas must be sensible and reasonable, using inexpensive or cost-free options, where available. Key communication channels for action medeor in 2015 were periodic letters to our donors and our newsletter, the action medeor magazine, our website, as well as the social media facebook and twitter. Regional advertising posters were used to draw attention to our “global emergency dispensary”. As in the previous year we worked with the dedicated team of the talk2move agency to attract potential donors in downtown areas.

Media work is a further central tool that we use to report comprehensively about the work of our aid organization and includes the regional and national press, as well as radio, TV and online media.

Our primary focus in 2015 was on two major projects – emergency relief efforts after the serious earthquake in Nepal as well as humanitarian aid for the people affected by terror and war in Syria, Northern Iraq and in the refugee camps in Turkey and Greece. Next to these catastrophic incidents, however, we also made sure to address specific issues in 2015 that received little, if any, attention in the media, such as the fate of refugees from Burundi or the difficult situation of the people of the Nuba Mountains in Sudan.



Donations take many forms

The work of action medeor is supported by one-off donations or regular sponsors. Regular donations facilitate our work in that they enable us to plan projects with a long-term view. An increasing number of our supporters now organize their own fundraising events. These are very practical ways to help the people in need and to draw attention to our work at action medeor.

Opportunities abound for people keen to take action. Birthdays, weddings or anniversaries, for instance, are wonderful occasions to ask for donations in lieu of gifts or flowers. Donors will be able to receive a tax receipt for their donation. action medeor can also provide interested parties with a neatly designed fundraising pack.

Many small amounts, collected at cake sales or charity runs, quickly add up to provide effective relief. The sponsored run at the Tönisvorst Secondary School, for instance, has been a regular event right from the start. Ahead of the run, the pupils ask sponsors such as their parents, grandparents, neighbors and friends for a donation per kilometer run. Half of their “reward”, in other words, 400 euro, was presented to action medeor. Christmas can be another occasion to raise money. Philipp, Vincent and Fréderik were particularly concerned at this time of the year to remember children that are

less well off. Teaming up, they decided to raise funds for action medeor by treating shoppers in a pedestrian zone in St. Tönis to a ‘Christmas concert’. Their dedication was rewarded with donations of 69,15 euro. These are only some examples of the many initiatives that were organized in the last year.

action medeor is happy to provide information material and collection tins for private fundraisers and help in planning these events.

The website of action medeor also gives the option of setting up online fundraising campaigns.



As a representative example of all fundraising activities in 2015, action medeor would like to say a big thank you to Philipp, Vincent and Fréderik.

Partners and supporters in the business environment

Companies of various different sectors and sizes today are keen to play their part in helping to improve medical care for people worldwide. Their efforts on behalf of action medeor deliver concrete help. Its impact on the people is obvious, improving the living conditions of those in need.

Long-term partnerships of action medeor are based on a strong bond of solidarity, such as our collaboration with Jungheinrich AG. Employees of the intralogistics specialist are committed to donating the cent amounts of their monthly salaries to our cause, while the company itself and its founding family support us with monetary and in kind donations that go toward funding many of our key projects. FedEx Express Europe and United Way Worldwide were also once again valued supporters in the last year, helping this time to set up a children's ward at a hospital in Tanzania.

At Christmas, a number of companies, including Sartorius and APCOA Parking, decided instead of gifts to their customers that they would donate money for a good cause. Zentiva launched its first newsletter initiative in support of action medeor and now funds a project in Haiti.

The Lower Rhine Business Owners Initiative for action medeor has continued to grow. The alliance supports action medeor with individual efforts based on the company's field of business. At events, a dynamic network likes to engage in lively conversations in a relaxed setting.

A further fundraising campaign under the banner of "Joining with customers in raising funds" saw collection boxes set up in business premises such as the 130 participating pharmacies of the North Rhine Chamber of Pharmacists or at the 320 local retailers that the NRW Krefeld-Kempen-Viersen trade association has managed to recruit since May 2013. The cooperation with the NRW trade association will now be extended.

In an exclusive culture and sport partnership, the Düsseldorf Philharmonic Orchestra and Fortuna Düsseldorf took action medeor through the year with a variety of creative one-off initiatives.



The 2015 Christmas Gala was sponsored by car dealer Hülsemann, Sparkasse Krefeld and, for the first time, the Alexianer Krefeld.

Education inspires empathy and solidarity

action medeor was established for the purpose of promoting a wider understanding among nations. This mandate is fulfilled by our educational work. In exhibitions and talks and through information booths action medeor addresses issues in their global context. This includes a critical look at our own actions along with the question to what extent they affect global inequality and injustice.

“Every drop counts!” was an exhibition designed to raise awareness of water scarcity. How heavy is a full bucket of water that a woman in Tanzania carries home every day from the water hole? How much water is actually needed for a cup of coffee? What is a “water footprint”? Health projects organized by action medeor integrate water, sanitation and hygiene activities. As primary prevention measures they are an intrinsic part of the healthcare provided. Other elementary components to promote health focus on the construction of toilets and hand pumps for washing, but also on educating locals in household and personal hygiene.

Art and culture in Tanzania was the theme of another exhibition staged last year. Marking the 10th anniversary of our action medeor subsidiary in Tanzania, the exhibition

showed ornate Makonde carvings made from ebony alongside paintings based on the model of Edward Saidi Tingatinga, and the country’s traditional kanga fabric. Visitors at the exhibition learned that the early kanga worn by the women had a pattern of white spots on a dark background, explaining the alleged joke by the men in the community that they looked like kangas, the word for guinea fowl in the African language, Kiswahili.

The chief end of all educational work of action medeor is the capacity for perspective-taking and empathy, the ability to deal with complex inconsistency, but also the willingness to assume responsibility and take action. In 2015 action medeor was able to reach more than 2,500 people just through groups of visitors.



Children learn how to use a tippytap to wash their hands.

Leaving a footprint – legacies and endowments

Increasingly, donors choose to leave a legacy to action medeor or to support the action medeor Foundation. Both cases fill us with deep gratitude, as they demonstrate great trust in our current and future work.

The Foundation has provided action medeor e.V. with solid backing for the past 15 years. Whether it be donations or separate endowment funds, the result endures across generations.

Once again, Foundation assets in the last year continued to rise, up from 1 million euro to now around 1.7 million euro. For the first time, the Foundation also chaired a separate foundation whose proceeds are channeled with the other funds into action medeor projects. Along with this, a further endowment fund was set up – these can be created at any time in one's own name with funds earmarked for a specific purpose. The interest generated from the new endowment fund will be used in future to improve healthcare in Malawi. The Felix Wiemens Memorial Award went for a second time to three pharmaceutical students at the university of Dar es

Salaam in Tanzania. Additional benefactor loans raised in 2015 brings the current total up by 147,000 euro to 375,000 euro. The individual loans themselves remain intact and are repaid in full at the end of the loan period.

In 2015, action medeor e.V. received 260,337.84 euro (2014: 83,506 euro) from several legacies. As charitable organizations are exempt from legacy tax, each legacy is used in full to support the work of action medeor.



For any queries on the Foundation or legacies, please contact:

Linda Drasba or Katharina Oelschläger

Telephone: 02156 / 9788-173

Email: linda.drasba@medeor.de



“My legacy does good. The apple tree principle” is an initiative to promote greater awareness of leaving a legacy for a good cause:

www.medeor.de/apfelbaum.

2015: Snapshots of the year



In March Heinz Gommans (left) was awarded the [Order of Merit of the Federal Republic of Germany \(Bundesverdienstkreuz\)](#) by former Mayor of Krefeld, Gregor Kathstede, in honor of his outstanding work over many years fostering an understanding among nations. Previously the CEO of Volksbank Krefeld, he was expressly recognized for his dedicated services as Treasurer and Chairman of the Executive Board of action medeor.

In April the 'Apple Blossom Run' in Tönisvorst broke all records when 740 runners lined up at the start. This is not counting the 250 or so participants deciding to walk the stretch. Total donations raised for action medeor came to 4,515.65 euro. To be continued! Shown left here, action medeor President Siegfried Thomaßen.



In May the [Lower Rhine Business Owners Initiative](#) celebrated its first birthday. It aims to model joint social responsibility, translated into useful action. action medeor CEO Bernd Pastors thanked its initiators Christian Hülsemann (l) and Carlo Schacht (2nd fr. l).

Joining with their customers, a large number of retailers and service providers supported the ["Emergency Kits for People" fundraiser](#) initiated by the NRW Krefeld-Kempen-Viersen trade association. Volunteers (l) of action medeor set up more than 300 donation boxes – as here at the bicycle shop run by Mr. Claassen (r) and the stationery shop of Mr. Beckers. Cooperating with the NRW trade association the campaign will now be widened in scope.





© RTL/Stefan Gregorowius

In June Anke Engelke took the questions chair at Günther Jauch's 'Who wants to be a millionaire' winning half a million euro in a VIP special. The prize money was donated to action medeor to help fund global projects. And so the string of success of action medeor's ambassador continues with a fifth win. action medeor says 'Thank you!'

Thanks to the support of Hanni von Kameke (Jungheinrich AG) the new facilities of the St. Elisabeth Hospital in Arusha (Tanzania) could be dedicated in September 2015. Patients will now be able to recover from major surgery in six new rooms with en-suite bathroom facilities, while receiving comprehensive medical care.



© action medeor



© action medeor

On the Friendship Trip in September donors were able to enjoy the fascination of Tanzania with action medeor worker Linda Drasba (2nd from right). Visits to partners of action medeor offered a very real and tangible first-hand experience of the local projects.

The 17th Christmas Gala brought classical music of the finest. The proceeds totaling 43,000 euro went toward emergency and disaster relief operations run by action medeor. A big thank you also to car dealer Hülsemann, Sparkasse Krefeld, Volksbank Krefeld and Alexianer Krefeld as sponsors of the event, and to WDR2 presenter Steffi Neu.



© action medeor/G. Dreißig

Overview of relief provided, donations and third-party funding

Expenditures for medicines

100% / Total:

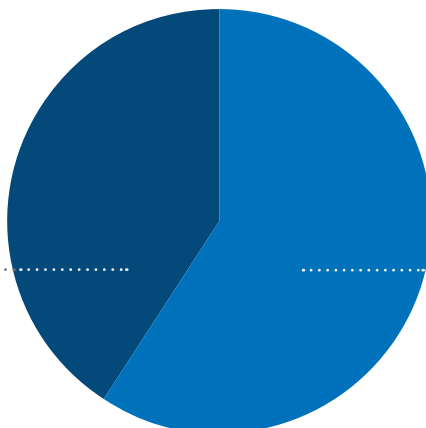
8,622,118.68 euro

40.60% Supply at cost price

3,500,611.66 euro

59.40% Donation-funded supply

5,121,507.02 euro



Expenditures for aid projects by department

100% / Total:

4,246,303.87 euro

53.80% Humanitarian aid projects

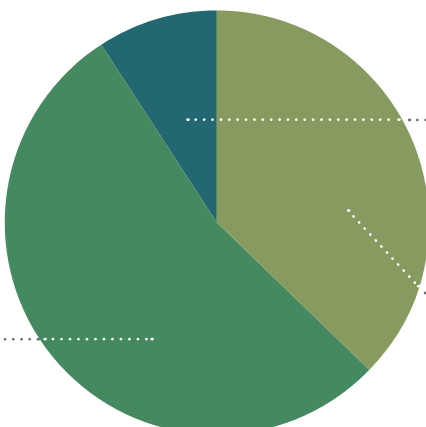
2,284,649.11 euro

8.96% Pharmaceutical advisory services

380,327.91 euro

37.24% Development cooperation projects

1,581,326.85 euro



Total expenditures*

100% / Total:

16,198,278.21 euro

13.03% Expenditures for communications, fundraising and education

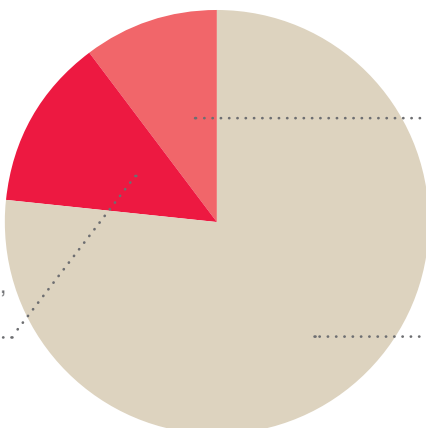
2,111,309.82 euro

10.04% Administrative costs

1,625,626.98 euro

76.93% Project expenditures*

12,461,341.41 euro



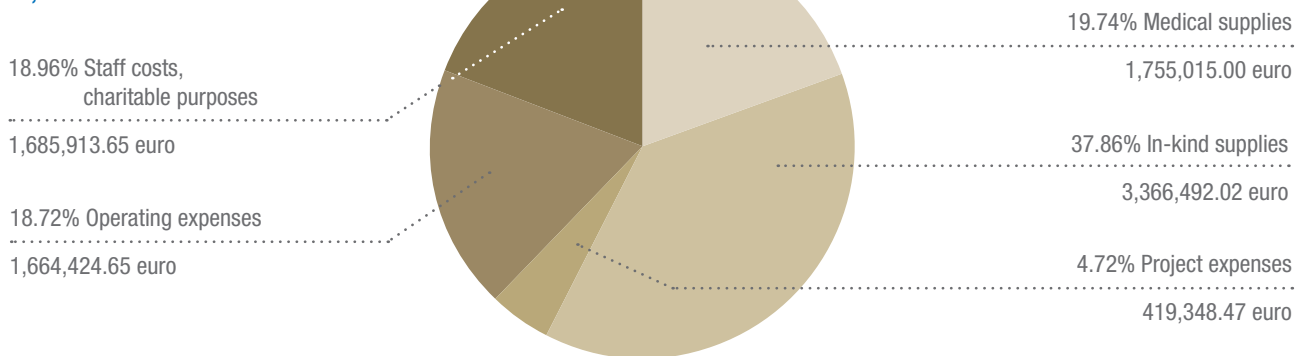
All expenditures include staff costs

* includes project funding (12,330,572.85 euro) and project oversight (130,768.56 euro)

Income from donations for

100% / Total:

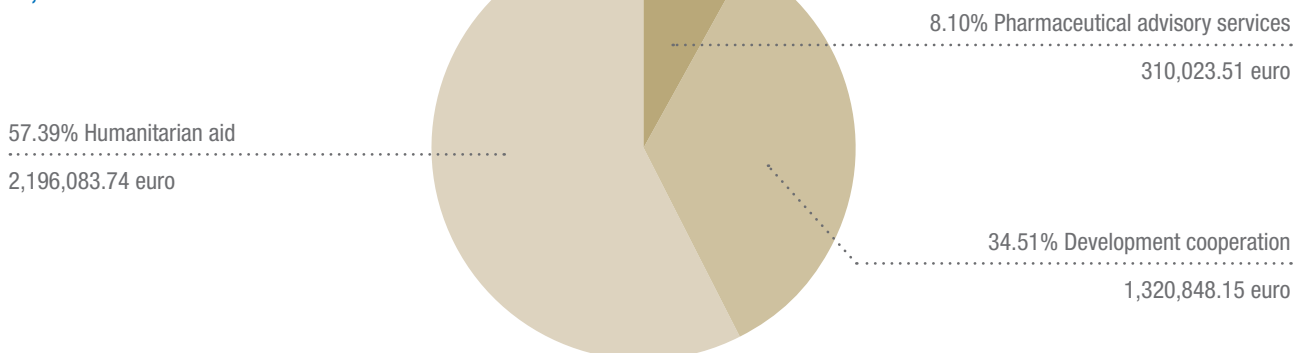
8,891,193.79 euro



Income from third-party** funding* for projects for

100% / Total:

3,826,955.40 euro



* Donations and third-party funding

** Funding provides: BMZ, GIZ, AA, Bayer AG, Boehringer Ingelheim, Merck KGaA, AHW Austria

action medeor places great emphasis on the transparent and responsible utilization of donations. Every year, action medeor undergoes an audit conducted by external auditors, publishing the financial statements of the organization, the Foundation and the subsidiary on its website at www.medeor.de. action medeor is a member of the German Donations Council (Deutscher Spendenrat) and the Transparent Civil Society Initiative, as well as of VENRO, the umbrella organization of development and humanitarian aid non-governmental organizations (NGOs) in Germany. Investments in public relations, advertising and fundraising are essential to raise the profile of action medeor, report about its projects and attract new donors. Funds are used wisely and responsibly. Relative to the total budget, expenditures for communications, fundraising and educational activities made up a share of 13.03 percent. The share of spending on administration came to 10.04 percent.



**Deutscher
Spendenrat e.V.**



**Initiative
Transparente
Zivilgesellschaft**

Balance sheet as of December 31, 2015

Deutsches Medikamenten-Hilfswerk action medeor e.V.

ASSETS (in euro)	2015	2015	2014
A Fixed assets			
I. Intangible assets	67,836.16		73,168.58
II. Tangible assets	2,872,312.56		3,003,405.69
III. Financial assets	168,672.31	3,108,821.03	118,444.01
B Current assets			
I. Stocks			
1. Raw materials and supplies	3,411,148.18		3,651,444.01
2. Advance payments		3,411,148.18	75,560.19
II. Accounts receivable and other assets			
1. Accounts receivable	233,645.21		636,549.67
2. Due from affiliated companies	885,327.00		286,552.79
3. Other assets	359,789.62	1,478,761.83	184,116.01
III. Receivables from large projects		0.00	526,998.00
IV. Cash in hand and at bank			
1. Cash in hand	2,641.33		5,358.33
2. Cash at bank	4,690,381.60	4,693,022.93	4,640,758.64
C Prepayments and accrued income		9,234.59	8,048.20
		12,700,988.56	13,210,404.12
LIABILITIES (in euro)	2015	2015	2014
A Net assets as of 1/1/2015	9,560,990.89		9,877,761.48
Change in reserves:			
Legacy funds	0.00		-224,998.00
Reversal of reserves for charitable purposes	-200,000.00		-200,000.00
Profit from objective-related operations	109,472.43		95,282.78
Profit from asset management	8,292.52		12,944.63
as of 12/31/2014		9,478,755.84	9,560,990.89
B Special item—Donations for fixed assets		35,239.00	16,083.00
C Accrued liabilities			
Other provisions		150,946.28	103,910.71
D Unused donations / project funds		2,422,142.29	2,885,893.68
E Liabilities			
1. Accounts payable	85,972.89		176,358.52
2. Due to affiliated companies	0.00		187.99
3. Other liabilities	525,599.26	611,572.15	464,646.33
F Deferred income		2,333.00	2,333.00
		12,700,988.56	13,210,404.12

Accounting and valuation methods

The annual financial statements comprising the balance sheet and the profit and loss statement of our registered organization were drawn up in compliance with the generally accepted accounting principles with due regard to the legal provisions applicable to all commercial traders as laid down in Sections 242 ff and Sections 264 ff of the German Commercial Code (HGB).

The balance sheet is presented in account form and structured as prescribed in Section 266 HGB. It takes account of the particularities of the organization as a charitable donation entity in accordance with Section 265 HGB. The profit and loss statement is structured using the total cost method under Section 275 (1) HGB.

The annual financial statements have been audited by an independent auditor in accordance with the requirements of Sections 316 ff HGB. The audit was conducted as a voluntary audit under Section 12 (3)a of the action medeor Articles of Association applying the accounting standards for the "Audit of Societies" (IDW PS 750) and the IDW accounting practice statements for societies (IDW RS HFA 14) and for charitable donation organizations (IDW RS HFA 21).

Intangible assets are capitalized at acquisition cost and amortized on a straight-line basis over their expected useful life, typically three years, in accordance with Section 253 (3) HGB and Section 7 (1) sentence 1 of the German Income Tax Act (EStG).

Based on Section 255 (1) HGB, tangible assets are stated at acquisition cost less planned depreciation on a straight-line basis in consideration of their average expected useful life. The depreciation rate for the building is 2 percent and 4 percent, respectively, and for the paved courtyard and grounds, between 5.26 percent and 10 percent per year. Low-value assets worth more than 150.00 euro but less than 1,000.00 euro were combined in a collective item in the reporting year in line with Section 6 (2)a EStG and depreciated at an annual rate of 20 percent.

Financial assets of the organization primarily include a 100 percent share in the non-profit action medeor International Healthcare GmbH at 150,000.00 euro and shares in the Ökumenische Entwicklungsgenossenschaft e.V. to the amount of 11,755.31 euro. Stocks of current assets are all stated at acquisition cost applying the lower of cost or market principle under Section 253 (3) HGB and divide into medicines, equipment, packaging material and handcraft.

Accounts receivable and other assets are reported at their nominal value and itemized.

Investments held as fixed assets and current assets are carried at acquisition cost applying the lower of cost or market principle under Section 253 (3) HGB. Cash in hand and at banks is stated at its nominal value. In accordance with Section 250 (1) HGB, prepayments and accrued income include amounts paid before the balance sheet date to cover costs that will be charged against income after the balance sheet date.

Under Section 253 (1) sentence 1 HGB, accrued liabilities are stated at their expected settlement amount based on the principles of sound business judgment and take account of all recognizable risks and contingent liabilities.

Unused donations/project funds concern liabilities arising from unrestricted monetary or in kind donations not yet disbursed. In accordance with Section 253 (1) sentence 2 HGB, the monetary liabilities (unrestricted and restricted donations) are carried as liabilities at their repayment amounts at the balance sheet date. In kind donations not yet disbursed are stated at their fair value. Unrestricted monetary and in kind donations are donations not restricted to a specified purpose. Unrestricted donations include donations from greeting cards to the amount of 12,076.20 euro and incoming resources from legacies. Restricted donations are gifts for a specified purpose and contributions arising from "sponsorship campaigns".

In bookkeeping terms, restricted donations are treated as used once the amounts are credited to the relevant receivables account of the recipient. These are shown at the balance sheet date as customer credit balance under other liabilities where not yet used in full for medicines and equipment supplies as of December 31, 2015.

Based on Section 250 (2) HGB, deferred income includes payments received for work performed only after the balance sheet date.

Payment of staff is based on the pay scale for the civil service sector (TVöD) and for wholesale and foreign trade. Pharmacists are paid in line with the pay scale for pharmaceutical employees. Wages and salaries include the salaries of the governing bodies (two Executive Committee members and three department heads) to the amount of 471,594.67 euro.

Profit and loss statement

for the year ended December 31, 2015

Deutsches Medikamenten-Hilfswerk action medeor e.V.

(in euro)	2015	2015	2014
1. Sales revenues	3,500,611.66		4,508,318.36
2. Income from the use of donations	8,891,193.79		8,521,489.35
3. Income from third-party grants for projects	3,826,955.40		3,664,914.00
4. Other income	104,813.11	16,323,573.96	115,950.63
5. Cost of raw materials and supplies		-6,449,422.69	-7,606,512.17
6. Gross profit/loss		9,874,151.27	9,204,160.17
7. Staff costs			
a. Wages and salaries	-2,295,671.95		-1,977,531.41
b. Social security and other pension costs	-455,319.71		-399,314.45
c. Voluntary social security costs	-38,136.76	-2,789,128.42	-37,450.98
8. Depreciation of intangible assets and tangible assets		-306,208.25	-295,786.50
9. Other operating expenses		-6,624,938.41	-6,410,750.34
10. Operating income		153,876.19	83,326.49
11. Other interest and similar income		8,986.44	63,068.94
12. Interest and similar expenses		-45,097.68	-38,168.02
13. Net income		117,764.95	108,227.41
14. Transfer from reserves		200,000.00	200,000.00
15. Profit from objective-related operations		109,472.43	95,282.78
16. Profit from asset management		8,292.52	12,944.63

Explanatory notes to the profit and loss statement

The profit and loss statement was prepared with due regard to the legal provisions applicable to all commercial traders as laid down in Sections 238 ff and Sections 264 ff of the German Commercial Code (HGB).

It is structured using the total cost method under Section 275 (1) HGB.

Sales revenues comprise the supply of medicines and equipment and the provision of pharmaceutical advisory services at cost price.

Income from the use of donations is generated when costs financed by donations are treated as a reduction of "unused donations". These costs include the dispensing of medicines and equipment, the cost of public relations, project execution, pharmaceutical advisory services, and the management of donations.

Other operating expenses include administrative costs and expenses related to the execution of development cooperation and humanitarian aid projects, pharmaceutical advisory services, and educational and public relations activities. The costs for the transportation of medicines and equipment to the destination countries amounted to 737,706.60 euro. The expenses for supplements and information material for fundraising campaigns totalled 641,193.82 euro. Based on preliminary calculations for the 2015 calendar year, the share of expenditures for administration and marketing will range at 23.07 percent (2014: 20.36 percent).

Interest and similar income primarily result from asset management operations.



Further information on our financial reporting:
www.medeor.de/Service/Jahresberichte

Audit certificate

Our audit has not led to any objections.

In our opinion, based on the findings of our audit, the financial accounting complies with the legal requirements and the supplementary provisions of the Statute and gives a true and fair view of the net assets, financial position and results of operations of the association in accordance with German principles of proper accounting. The management report is consistent with the financial statements and as a whole provides a suitable view of the position of the Verein Deutsches Medikamenten-Hilfswerk "action medeor" e.V. and suitably presents the opportunities and risks of future development.

Krefeld, May 2, 2016



RSM Verhülsdonk GmbH

Wirtschaftsprüfungsgesellschaft · Steuerberatungsgesellschaft

Manfred Steinborn
Manfred Steinborn
Wirtschaftsprüfer

Annette Dieckmann
Annette Dieckmann
Wirtschaftsprüfer

Balance sheet as of December 31, 2015

action medeor Foundation

ASSETS (in euro)	2015	2015	2014
A Long-term restricted assets			
1. Financial assets		800.00	800.00
2. Securities		1,709,637.93	958,143.12
B Short-term restricted assets			
1. Cash at banks	616,445.70		536,678.95
2. Other receivables	20,287.12	636,732.82	14,887.58
		2,347,170.75	552,366.53
LIABILITIES (in euro)	2015	2015	2014
A Net assets			
1. Endowment			
Basic assets	457,583.16		457,583.16
Endowment contributions	1,376,574.82	1,834,157.98	700,894.74
2. Funds carried forward			
from basic assets	88,462.14		83,555.97
from endowment contributions	40,903.69	129,365.83	30,112.18
B Accrued liabilities		2,499.00	2,499.00
C Other liabilities		381,147.94	235,864.60
		2,347,170.75	1,510,509.65

Explanatory notes

In the 2015 fiscal year, the action medeor Foundation received further funds of 665,680.08 euro from two endowment contributors as well as new endowment contributions worth 10,000 euro, bringing the total to 1,376,574.82 euro.

In 2015 two lenders loaned a further 147,000 euro to the Foundation, so that total loans now stand at 375,000 euro. The annual result for fiscal 2015 amounted to 15,697.68 euro and was posted to the relevant endowment contribution funds carried forward.

Profit and loss statement

for the year ended December 31, 2015

action medeor Foundation

(in euro)	2015	2015	2014
1. Donations	0.00		25.00
2. Interest and similar income	53,823.73		32,942.56
3. Income from write-ups	0.00		5,900.77
4. Capital gains	17,507.13	71,330.86	17,827.26
5. Writedown of securities	-25,000.00		0.00
6. Bank charges	-175.44		-5,893.72
7. Losses from disposals	-6,712.79		-5,652.92
8. Audit costs	-2,499.00		-2,499.00
9. Other expenses	-455.00		-315.84
10. Statutory expenditures	-20,132.87		-22,983.01
11. Other taxes	-658.08	-55,633.18	-248.86
12. Profit / loss for the year		15,697.68	19,102.24
13. Transfer to revenue reserves		-15,697.68	-19,102.24
		0.00	0.00

Explanatory notes

The annual result of the action medeor Foundation for fiscal 2015 decreased by 3,404.60 euro on 2014. New investment strategies and renegotiations ensured a permanent reduction of bank charges by more than 5,000 euro.

Statutory expenditures, i.e. aid provided from the income of the Foundation, reduced by 2,850.10 euro on the previous year. The President of the Foundation, Bernd Pastors, performs his duties on a voluntary basis, as do the other members of the board.



Further information on our financial reporting:
www.medeor.de/Service/Jahresberichte

Balance sheet as of December 31, 2015

action medeor International Healthcare gGmbH

ASSETS (in euro)	2015	2015	2014
A Fixed assets			
I. Intangible assets	4,690.06		4,301.04
II. Tangible assets	168,672.16	173,362.22	40,356.41
B Current assets			
I. Stocks		514,363.96	297,736.20
II. Accounts receivable and other assets			
1. Accounts receivable	652,977.46		210,040.34
2. Due from shareholders	0.00		187.99
3. Other assets	24,084.02	677,061.48	28,736.21
III. Cash in hand and at banks		53,529.87	203,552.28
C Prepayments and accrued income		18,398.91	17,747.27
		1,436,716.44	802,657.74
LIABILITIES (in euro)	2015	2015	2014
A Capital stock			
I. Subscribed capital	100,000.00		100,000.00
II. Capital reserve	50,000.00		0.00
III. Profit / loss carried forward	6,400.58		37,036.01
VI. Net income for the year	17,871.00	174,271.58	-30,635.43
B Special item – Donations for fixed assets		8,287.74	9,604.87
C Accrued liabilities			
I. Provisions for taxation	1,242.60		2,938.42
II. Other provisions	21,367.35	22,609.95	18,385.52
D Unused donations / project funds		153,605.32	88,718.22
E Liabilities			
I. Accounts payable	688,415.20		383,017.61
II. Due to shareholders	379,792.94		150,479.13
III. Other liabilities	9,733.71	1,077,941.85	43,113.39
		1,436,716.44	802,657.74

Explanatory notes

action medeor International Healthcare gGmbH employed eleven staff in Dar es Salaam and a further four staff in Masasi (South Tanzania). In addition, action medeor International Healthcare gGmbH is supported locally by an AGEH development worker from the Association for Development Cooperation.

At the start of the fiscal year, Healthcare bought a piece of land on the outskirts of Dar es Salaam for further strategic focus of action medeor on medical aid. Winning the tender meant a sharp rise in both accounts receivable and payable.

Profit and loss statement

for the year ended December 31, 2015

action medeor international Healthcare gGmbH

(in euro)	2015	2015	2014
1. Sales revenues	1,980,907.70		1,151,046.11
2. Income from the use of donations	51,088.12		136,006.66
3. Increase / decrease in stocks	216,627.76		-62,103.27
4. Other operating income	96,804.40	2,345,427.98	5,391.97
5. Cost of materials			
a. Cost of purchased materials	-1,645,865.33		-807,723.99
b. Cost of purchased services	-14,876.46	-1,660,741.79	-6,758.51
6. Staff costs			
a. Wages and salaries	-168,081.49		-134,313.00
b. Social security and other pension costs	-88,481.28	-256,562.77	-76,330.71
7. Depreciation		-15,238.48	-15,441.07
8. Other operating expenses		-370,457.27	-188,813.66
9. Other interest and similar income		1,669.64	1,289.58
10. Interest and similar expenses		-5,190.35	-6,548.28
11. Result from ordinary activities		38,906.96	-4,298.17
12. Taxes on income		-21,035.96	-26,337.26
13. Net income for the year		17,871.00	-30,635.43

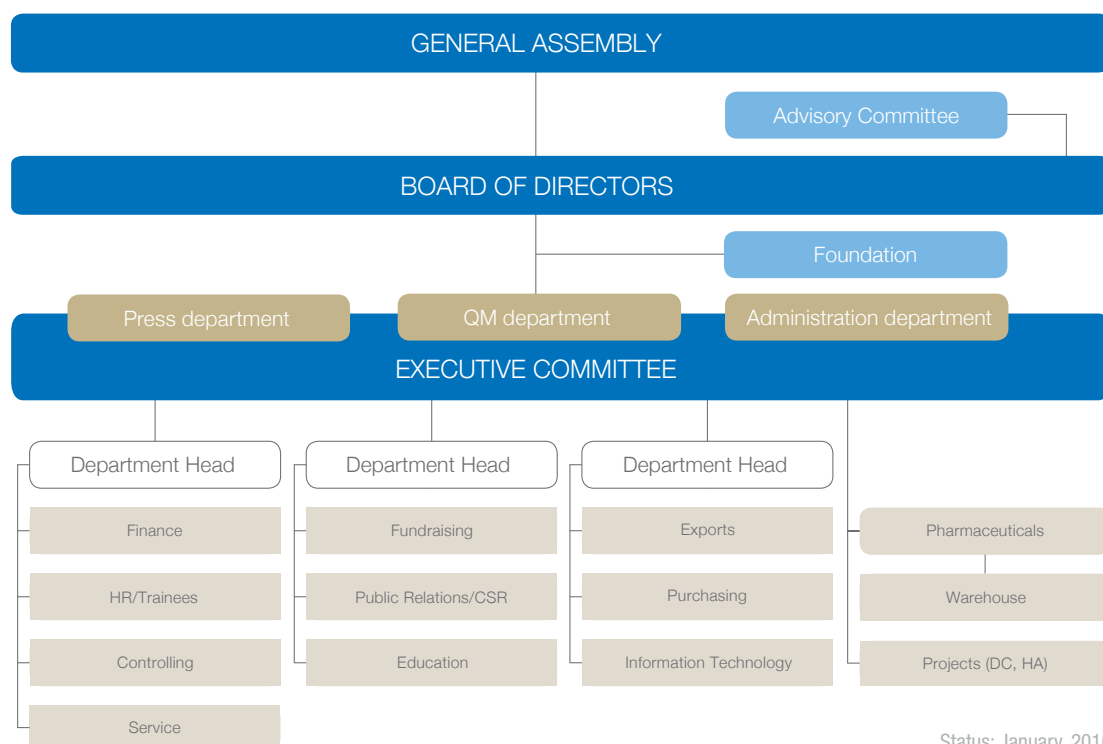
Explanatory notes

At the start of the fiscal year, action medeor International Healthcare gGmbH participated in, and won, a bid with an annual volume of almost 1,000,000 euro. Healthcare revenues as a result rose by 65.93 percent to just under 2,000,000 euro on the previous year. In the 2015 fiscal year, action medeor International Healthcare gGmbH therefore reported pre-tax profit of 38,906.96 euro.



Further information on our financial reporting:
www.medeor.de/Service/Jahresberichte

Organization and personnel



Status: January, 2016

The General Assembly

The General Assembly is the supreme organ of the organization and is responsible for aspects such as adoption of the annual accounts, discharge of the Board of Directors, the Advisory Committee and the Executive Committee, and election of the Board of Directors and the Advisory Committee. As of December 31, 2015, the General Assembly comprised 94 persons.

The Board of Directors

Duties of the voluntary Board of Directors include approval of the budget and the annual accounts. The Board of Directors meets every two months. There are three committees appointed by the Board of Directors, focused on human resources, finance and controlling, and medicines and pharmaceuticals. These committees act in an advisory capacity to the Board of Directors.

The Advisory Committee

The Advisory Committee is elected by the Board of Directors. It is made up of at least five and at most twelve members. Members are elected for a period of three years and appoint the chairman/woman from among their number.

The Advisory Committee advises the Board of Directors in the execution of its duties and responsibilities.

The Executive Committee

Acting in a full-time capacity, the Executive Committee manages the organization on its own authority. It is appointed and dismissed by the Board of Directors and reports to the Board of Directors on all important matters. The CEO of the Executive Committee is Bernd Pastors (Human Resources, Finance, Controlling, Marketing and Communications, Purchasing and Export), who is joined on the board by Christoph Bonsmann (Pharmaceuticals, Development Cooperation, Humanitarian Aid and Warehouse).

The staff

In 2015, action medeor employed 74 full-time staff, with 28 volunteers supporting the work of the aid organization in speaking engagements and as pharmaceutical experts.



Further information is available at:
www.medeor.de/en

Report of the Board of Directors

The role of the Board of Directors, next to oversight, is the development and supervision of long-term strategies for the aid organization, in close dialog with the Executive Committee. In this, our focus remains the same—improving access to essential medicines and primary healthcare for all. Given that a third of the world's population is without access to adequate care services, this continues to be an urgent concern.

Whereas our objectives remain firm, the underlying conditions change constantly. This is reflected in the operative work of our 74 full-time staff. Next to dispatching immediate relief in an emergency or disaster, as in 2015 when the devastating earthquake struck Nepal, it is important now more than ever to make concerted efforts to alleviate the effects of war, terror and forced migration. Unfortunately, the resulting inadequacy or complete lack of medical care has always factored in the work of action medeor. The sheer volume of refugees across the world, however, is unprecedented. To ensure their health we all, action medeor included, must be willing to strike out in new directions wherever necessary. An example here is the need to send medical supplies now also to refugees in Greece.

One change in direction that has begun is our focus on strengthening the structures of countries in the southern hemisphere by promoting the local supply of medicines. This goes hand in hand with the internationalization strategy of our aid organization. The success proves us right in our approach: revenues of action medeor in Tanzania doubled to 2 million euro in the last year.

As affordable and quality-assured medicines are ever more urgent in Africa we believe that the work of action medeor will continue to grow. We therefore plan to set up a further

central base here, alongside Dar es Salaam and Masasi, and use the new, sizeable warehouse in Kibaha, some 40 km outside of Dar es Salaam, as a distribution hub for East Africa. This will give us more space for medicine imports from the region and improve the storage quality. With our new central medicines warehouse that was opened last year in Lilongwe, the capital of Malawi, it would be the logical next step toward ensuring efficient, need-based aid services in the future.

The Board of Directors and the Executive Committee have now finalized preparations for the new Advisory Council. The statutory meeting was held on May 23, 2016. With old and new members of the Council involved in various different networks and dedicated to the work of action medeor, we expect our bedrock of friends and supporters to expand from here, encouraged by the planned increase in membership numbers of our aid organization.

Motivation and solid dedication are the hallmarks of each of our action medeor operatives and are the primary requirements that will help us build on our success in the last year. On behalf of the Board of Directors, may I therefore say a big thank you to the Executive Committee, all our members, our full-time and voluntary staff, our partners in the field, and to our ambassador, Anke Engelke.



Siegfried Thomaßen

President

Tönisvorst, June 2016



Status report: Business and the general environment

The work of action medeor in the past year focused heavily on medical aid for refugees in the Middle East and on supporting the victims of the catastrophic earthquake in Nepal. Thanks to our large medicines warehouse in Tönisvorst and many competent local partners, the organization was able to provide effective relief quickly and reliably. action medeor continues to act as a non-profit supplier of medicines and medical equipment for many small project partners in Africa, Asia and Latin America, meaning that around two thirds of all relief packages in 2015 each had a value of less than 2,000 euro.

At 8.6 million euro, medical relief in 2015 remained at a decent level despite the fact that many of our partners in the south can now source the necessary medicines locally. This is a welcome development that needs to be encouraged. Local pharmaceutical infrastructures could be improved in the context of pharmaceutical advisory services provided by action medeor.

Medical aid in our partner countries will be localized more forcefully still in the future. In Tanzania, for instance, a warehouse similar to Dar es Salaam was set up in the less developed south of the country to provide our partners there with significantly faster access to affordable and quality-assured medicines. In all medicine deliveries of around 2 million euro almost doubled here. Lilongwe in Malawi was established as a completely new site and commenced its non-commercial sale of medicines in December 2015.

Institutional support for action medeor projects once again improved and diversified. Funds from the German Federal Ministry for Economic Cooperation and Development (BMZ) totaled 1,342,087.50 euro, with 512,361 euro channeled into humanitarian aid and 829,726.50 euro into development work. At around 7.6 million euro, restricted and unrestricted donations remained at a high level in 2015. Along with many unrestricted individual donations, action medeor continues to receive project-specific donations through the German relief coalition Aktion Deutschland Hilft, the RTL-Stiftung—Wir helfen Kindern e.V., the German Lions aid organization “Hilfswerk der Deutschen Lions” and the aid organizations of the Bavarian and Baden-Württemberg Pharmacists (“Hilfswerk der Bayerischen Apotheker” and “Hilfswerk der Baden-Württembergischen Apotheker”).

Donations in kind totaled 2.7 million euro and were used specifically to provide medical aid to refugees in Syria and Northern Iraq.

Economic situation

1. Profit and net asset position

At around 16.3 million euro, total revenue was down by 500,000 euro on the previous year. Operating profit through objective-related operations allowing for departmental costing amounted to 109,000 euro in 2015 and was added to equity. Net assets decreased by 82,000 euro in total through a reversal of reserves of 200,000 euro for charitable purposes.

2. Events after the reporting date

No events of particular significance occurred since the conclusion of the fiscal year up until the signing of this report.

Opportunities, risks and forecast

Once again, two aspects in particular look set to pose significant challenges in the future: In our objective-related operations, the trend toward local procurement of medicines in partner countries is continuing. Increased activities in Tanzania and, more recently, in Malawi, however, are starting to put action medeor back on the map here.

In our business for charitable purposes, the slow but steady trend toward a decrease in regular donors requires new and innovative concepts to absorb the loss of donors and raise the volume of donations.

The development of our cooperation with corporate and network partners is progressing steadily, as increased social media activities help to raise the profile of action medeor across Germany.

Based on the strategic lines of action set out by the Board of Directors, action medeor has developed a concept that will take advantage of cross-departmental expertise, capacities and synergies in our organization and our branches in order to increase the efficiency and effectiveness of aid provided. Our objective-related operations and business for charitable purposes will be closely dovetailed in both their communication and activities.

Outlook for 2016

Medical relief

Next to regular supplies to partners, the medical aid we provide from our base in Tönisvorst offers relief particularly in emergency and disaster situations. As always, this makes it vital that we maintain a good stock of relief supplies at our 4,000 m² warehouse at all times. The setup of our own local procurement centers in Tanzania and Malawi, the qualification of medicines regulatory authorities, and the training and development of pharmaceutical staff help to strengthen our local partners. This will mean a further increase in local procurement. With the purchase in 2015 of some land in Kibaha, 40km outside of Dar es Salaam, we are now pushing the setup of a new medicines warehouse that will serve as a logistics base for the region. In terms of medical aid from Tönisvorst, the challenge for us remains to stay economically viable while working in a fiercely competitive environment.

Health projects

The volume of projects run by action medeor has risen quite significantly in recent years, and so have project requirements, the number of staff and the degree of qualification of our team. Humanitarian Aid and Development Cooperation are now closely dovetailed in one department, enabling us to respond quickly and professionally to the challenges we may face. Effectiveness and efficiency considerations along with sustainability aspects are increasingly important in our health projects. Major projects, such as the extension of a hospital or the construction of a midwifery school are based on feasibility and external studies with context analysis, and always in agreement with, and with the involvement of, our partners. The aim here is to create the best possible setup for the long-term success of our project.

Pharmaceutical advisory services

The pharmaceutical advisory services sector is now also responsible for quality assurance, including supplier pre-qualification, at the action medeor structures in Malawi and Tanzania. In addition to this, we plan to expand our advisory services for public implementing organizations such as the German Society for International Cooperation (GIZ) or the National Metrology Institute of Germany (PTB) and, together with partner organizations, to offer more pharmaceutical components in development projects in the future.

Communications and fundraising

A constant challenge remains the age-related decrease in regular donors giving a minimum of once a year. Through a diverse set of measures, including social media aspects, we are seeking to win particularly the younger generation as donors. Building on our cooperation with companies and the integration of action medeor in various networks helps to raise the profile of action medeor at comparatively low cost. Further efforts will also be made in improving individual support services for premium donors and contributors.

ECONOMIC PLAN for 2016

in EUR

Monetary and in kind donations	10,640,000.00
Unused donations in 2015	2,320,000.00
Total	12,960,000.00

Cost of aid shipments	4,250,000.00
Projects	5,080,000.00
Pharmaceutical advisory services	80,000.00
Marketing, communications, and education	1,850,000.00
Administration	1,700,000.00
Total	12,960,000.00

Thank you!

The work of action medeor would not be possible without our many different sponsors and donors. On behalf of our team and all our local project partners, we at action medeor extend our deepest gratitude to you for your invaluable support in the last year!

A heartfelt thank you also to the following charitable organizations and public investors:



... and to the network partners of action medeor:



Our Guidelines

Mission. medeor – I help, I heal

As a non-governmental medical aid organization and part of civil society, our foundation is our donors, volunteers, full-time staff, and our global partners.

We provide ...

people in need with access to medicines and ensure continuous medical care.

... support and promote

local health care structures.

... enable

our partners and local people to improve medical care for themselves and those around them and so help to build stronger local communities and stable structures.

... fight

worldwide against diseases due to poverty, HIV/Aids, malaria and tuberculosis, as well as neglected tropical diseases.

... help

in emergency and disaster situations, both promptly and over the long term.

... educate

and raise awareness of health issues to prevent diseases.

... qualify

professional staff and help through transfer of knowledge to equip local partners with pharmaceutical and medical skills.

... campaign

for solidarity and support from the public highlighting the link between poverty and disease.

... change

opinions by educating people and by informing and sensitizing the public to health issues, but also with regard to common development objectives and sustainable living.

... pool

our resources with those of other organizations and networks in an effort to influence local, European and international policies on health and development issues.

Values. Our principles

Solidarity and charity are our driving force. We work to secure human rights and the right to health.

Independence and responsibility

We help others to help themselves and act responsibly both within our organization and outside.

Neutrality

We provide help and support, regardless of age, gender, ethnic origin, sexual orientation or political and religious views.

Respectful cooperation as equals

We respect the dignity and culture of our partners.

Transparency

We work on the basis of transparency and open communication in our organization and on the outside, and regularly give an account of our work.

Participation

We exemplify and promote participative cooperation both in our work with local partners and in our own organization. We believe that everyone stands to benefit.

Effectiveness and efficiency

Our actions and operational processes are focused on maximum effect at minimum cost.

Protecting resources

Our structures and processes are constantly adapted in a continual improvement process to ensure sustainable operations. Our aim is to leave as small a carbon footprint as possible.

Staff

We believe in staff development to ensure our team is able to deal with the human and professional demands. We expect from them that they continuously improve their knowledge and skills.

Contact us – we are here to help.

If you are interested in our work or have questions about your donation, please contact us.

We can also help you plan a private or corporate fundraising campaign and provide relevant information material.

www.medeor.de/en

Make a difference!

Sparkasse Krefeld
BIC: SPKRDE33
IBAN: DE78 3205 0000 0000 0099 93

Volksbank Krefeld
BIC: GEN ODE D1H TK
IBAN: DE12 3206 0362 0555 5555 55



Online donations
www.medeor.de/spenden

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