

Annual Report 2012





Students of the Uhuru elementary school in Arusha, Tanzania.

Cover picture: action medeor partner Dr. Joseph Foblas in Haiti.

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Dear friends and supporters of action medeor:



When large-scale disasters take place, the most important thing is to save lives, tend to the wounded, and ensure that help is provided in a reliable and transparent manner even when time is short and the pressure is overwhelming. This is exactly what action medeor has done; for example when the massive earthquake shook Haiti in 2010, or when heavy floods ravaged Pakistan in 2011. When the acute emergency is over after the first several months, the camera teams leave the disaster zone, but people are left behind for whom nothing is as it was before. This is not only a matter of material things. The mind also needs time to come to terms with everything that has happened. It is especially important to keep the long-term consequences of a disaster in mind. For action medeor, this means ensuring that there is medical assistance even after the acute emergency has passed.

This is why action medeor is there not only immediately after a disaster takes place, but also during the time that follows. Our aim is to improve the living circumstances of the affected people in a lasting manner. But most of all, we attempt to prevent new disasters from occurring by implementing preventive measures. Such reconstruction projects and projects for preventing future disasters were a key aspect of the aid action medeor provided in Haiti, Pakistan and East Africa in 2012. Our actions in Haiti demonstrated that we are able to provide such aid even under difficult circumstances. In the fall of 2012, Hurricane Sandy left behind a trail of destruction. 20,000 people were left homeless and over 70 percent of that year's harvest were destroyed. In light of this, action medeor provided desperately needed food and water, as well as seeds for planting, and also delivered medicine to combat the recurrence of cholera.

Combating malaria remains one of our priorities. World-wide efforts have shown results, and the number of deaths has decreased by almost 25 % in the last decade as a consequence of awareness campaigns, the increased

use of mosquito nets treated with insecticides, improved diagnostic capabilities and access to effective medicines. However, 660,000 infections still result in deaths according to the World Health Organization, 90 percent of which are reported in Africa south of the Sahara. The urgency of this matter was emphasized in an exhibition on malaria in the state parliament building in North Rhine-Westphalia.

Anke Engelke has passionately supported medeor's initiatives for ten years now, especially in the fight against malaria. She also visits action medeor projects on a regular basis. We would like to express our gratitude for her dedication.

It is all of you, friends and supporters of action medeor, who have made it possible to provide all this aid. In addition, thanks to a great number of private supporters, the Lions aid organization and partners such as Stiftung RTL, Jungheinrich AG, Fortuna Düsseldorf and FedEx Express, action medeor was able to provide thousands of medical supply shipments and implement numerous projects worldwide during 2012.

We would very much appreciate your continued support in our future endeavors!

A handwritten signature in black ink, appearing to read 'Bernd Pastors'.

Bernd Pastors
(Spokesman of the Board)

A handwritten signature in black ink, appearing to read 'Christoph Bonsmann'.

Christoph Bonsmann
(Board Member)

Tönisvorst, June 2013



Together for Health – Our mission statement

The words “action” and “medeor” have their roots in the Latin language: “action” means “to act, to do”, and “medeor” literally means “I help, I heal”.

The terms “action” and “medeor” represent how we see ourselves as an organization and define action medeor’s mission statement.

Our vision

No human being should have to suffer or die from treatable or preventable diseases. Healthcare, which includes preventative care, medical care and the availability of medicine, should be accessible for everyone on the planet.

Our mission

action medeor is committed to providing access to medicine and ensuring the continuity of healthcare for people in need. In the event of emergencies and disasters, the aid organization provides help in a quick and unbureaucratic manner. The focus is always on providing those in need with medicine and medical supplies. In development cooperation projects, action medeor fights diseases of poverty such as malaria, tuberculosis and HIV/AIDS by advising on pharmaceutical and medical matters, organizes awareness campaigns, provides qualified personnel and sets up basic medical services. The aim is to provide our partners on the ground with support so that they can afford healthcare for their own people and permanently improve healthcare infrastructure.

As an integral component of civil society, action medeor also campaigns for solidarity and support. Through talks, exhibitions and special events, action medeor informs the

public about how poverty and disease are related, and makes people aware of the importance of maintaining a sustainable lifestyle. To achieve this, action medeor cooperates with other organizations and networks to positively influence domestic, European and international politics where health and development issues are concerned.

Our values

Solidarity and charity are what drive action medeor. We strive to safeguard both basic human rights and the right to healthcare, independent of age, gender, ethnicity, sexual orientation, or political or religious views. For action medeor, acting responsibly means working proactively with on-site partners as well as our own employees while treating them as equals. Both within the organization and in the public eye, action medeor works openly and transparently, and regularly reports on its activities.

For more information on our mission statement, please visit www.medeor.de/leitbild.



Civic involvement – The foundation of a aid organization

It all began with an idea. In 1963, led by Dr. Ernst Boekels, dedicated citizens from the cities of Krefeld and Tönisvorst began collecting donations of medicine for people in need in developing countries.

Their activities spread by word of mouth, and shortly thereafter, tons of pharmaceutical samples arrived in Tönisvorst from all over Germany. From this rapidly growing relief effort, action medeor was born in 1964.

From donations to manufacturing

A customized range of pharmaceutical products, it quickly became apparent that the medicine donated often did not correspond to what was needed in developing countries. At the same time, there was a need for medicines that action medeor did not have in its catalog, for example for the treatment of malaria or leprosy. In 1967, the organization decided to stop accepting donations and start manufacturing its own generic medicines.

Professionalizing relief efforts

In the beginning, the founders' homes served as a collection point for the donations of medicine, but they soon moved to a youth center, then to a dance hall, and finally to a school that was no longer in use. However, ten years after the founding of the aid organization, even this was not enough. In 1974, action medeor acquired its current premises in Tönisvorst and built offices to house its administration, accompanied by a large warehouse with an area of 2,000 m². Medicines could now be stored safely until they were required at a health post in Africa, Latin America or Asia. In 1998, a generous bequest allowed action medeor to renovate and enlarge the warehouse, increasing its storage area to 4,000 m².

action medeor through the years

Within half a century, action medeor developed into the largest medical aid organization in Europe. Over the years, it has assumed new responsibilities, such as providing qualified pharmaceutical advice. Today, action medeor provides assistance with developing all areas of health-care. In 2001, action medeor established a foundation of its own in order to ensure the organization's long-term stability. In 2004, action medeor founded a nonprofit subsidiary in Tanzania in order to better cope with the increasing need for medicine in East Africa, as well as to reinforce the local medical infrastructure.



Tönisvorster citizens sorting and packing medicine.



2012 – The year in figures

In July 1, 2012, Christoph Bonsmann joined action medeor as a member of the board. Two full-time board members now head the organization.

- » **65** full-time members of staff were employed at Tönisvorst. **20** volunteers lent us their time and energy, for example by helping out at information booths or offering us their pharmaceutical expertise.
- » For the first time, the aid organization offered an apprenticeship position as an event manager's assistant. This means that there are now a total of **5** trainees.
- » Pharmaceutical internships were organized for the first time. A total of **6** university students and **5** school students got the chance to gain valuable work experience and find out first-hand what working in an international aid organization is like.
- » action medeor's educational campaigns, which take the form of roadshows, exhibitions and campaigns, for example, have reached over **2,000** schoolchildren. In total, action medeor was present at **40** school events.
- » Of the **22,945** donors that actively supported the aid organization, **2,854** were new donors.
- » By the end of the year, action medeor had supported **53** projects worldwide in the areas of humanitarian aid, development cooperation, and pharmaceutical advisory services.
- » In its warehouse with an area of **4,000** m², action medeor stored **160** different medicines, which were essential for the provision of healthcare, according to the World Health Organization (WHO). In addition, the organization's inventory included **450** different medical supply items (equipment and consumables).
- » A customs warehouse set up in May now allows action medeor to obtain drugs from non-EU countries. For the first time, **5** drugs in action medeor's inventory come directly, i.e. without an intermediary distributor, from Asian countries.
- » The **10,785** packages which the aid organization sent to **109** different countries weighed **235** tons in total.
- » Over **77** percent of the total expenditure went toward medical aid, to aid projects for providing qualified pharmaceutical counseling, humanitarian aid and development cooperation that action medeor provided. The percentage of expenditure for marketing, communications and educational measures came to approximately **17** percent. Only **6** percent went toward the aid organization's administrative costs.

The medical aid organization in 2012 – Paths to aid



Medical aid

action medeor supplies health posts worldwide with high-quality and low-cost pharmaceuticals and medical supplies.



MEDEOR. HILFE IM PAKET.

Pharmaceutical advisory services

action medeor improves medical infrastructure in partner nations and trains qualified local pharmaceutical personnel.

Humanitarian aid

action medeor provides quick assistance worldwide in the event of emergencies and disasters, and goes on to provide assistance with rebuilding in the affected nations.

Development cooperation

Together with local partner organizations, action medeor implements long-term health projects and fights diseases of poverty.

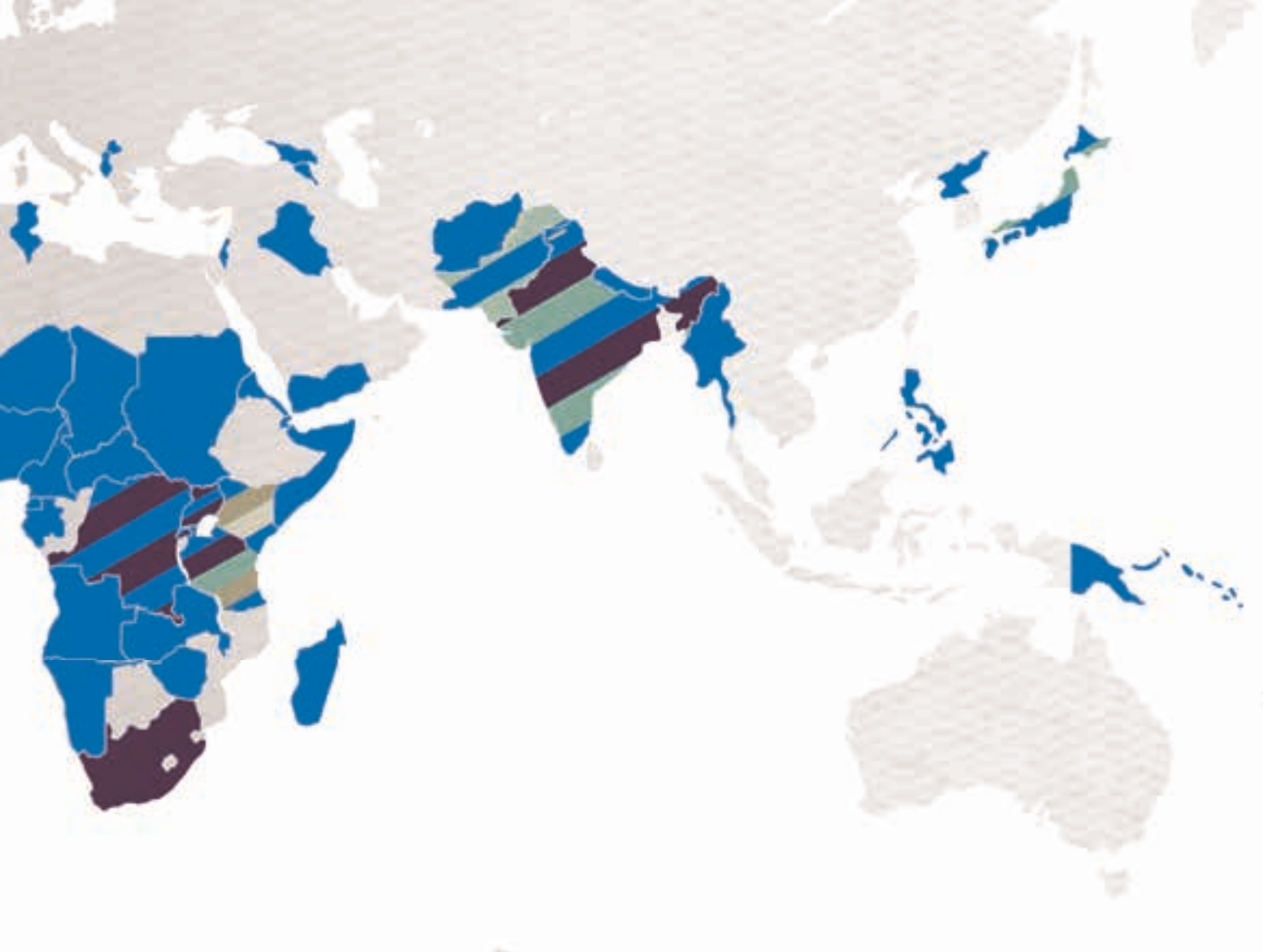
Helping out worldwide – Country overview

In addition to medical relief, action medeor also provides humanitarian aid in disaster situations, implements long-term health projects as part of development cooperation, and supports the improvement of local health services by providing qualified pharmaceutical advisory services. action medeor is currently active in 115 nations worldwide. The countries marked on the world map illustrate the main types of relief provided in each country. For medical aid, countries are marked for which total donations exceeded 10,000 euro each.

Afghanistan ■
Albania ■
Angola ■
Equatorial Guinea ■
Armenia ■
Benin ■
Bolivia ■ ■
Burkina Faso ■
Chile ■
Costa Rica ■
Djibouti ■

Ecuador ■
El Salvador ■
Eritrea ■
Gabon ■
Gambia ■
Georgia ■
Ghana ■ ■
Guatemala ■ ■
Guinea ■
Haiti ■ ■
Honduras ■

India ■ ■ ■
Iraq ■
Israel ■
Japan ■ ■
Yemen ■
Cameroon ■
Kenya ■ ■ ■
Columbia ■ ■
Congo ■ ■
Kosovo ■
Cuba ■



- Medical aid (> 10,000 euro worth of goods)
- Pharmaceutical advisory services
- Humanitarian aid
- Development cooperation

Liberia ■
 Madagascar ■
 Malawi ■
 Mali ■
 Malta ■
 Mexico ■
 Myanmar ■
 Namibia ■
 Nepal ■
 Niger ■
 Nigeria ■

Pakistan ■ ■
 Papua New Guinea ■
 Paraguay ■
 Peru ■
 Philippines ■
 Rwanda ■ ■
 Solomon Islands ■
 Zambia ■
 Senegal ■
 Sierra Leone ■
 Zimbabwe ■

Somalia ■
 South Africa ■
 Sudan ■
 Tanzania ■ ■ ■
 Chad ■
 Togo ■ ■
 Tunisia ■
 Uganda ■ ■
 Central African Republic ■

Medical aid

"I am glad that we've managed to set up a customs warehouse for action medeor. We are now able to obtain our medicine at a lower price, but with the same high quality as before."

Dirk Angemeer

Employee responsible for medical aid



Medical aid worldwide

About a third of the world population lives without adequate basic healthcare. Some of the main reasons are that critically essential medicines are unavailable, of poor quality, or too expensive in developing countries. In 2012, millions of people died from illnesses that were in fact preventable or easy to treat.

Medical aid is at the heart of the work that action medeor does. Its goal is to provide all people in developing countries with high-quality medicine, in sufficient quantities, at an affordable price. In addition to medicines, action medeor also stockpiles a comprehensive range of medical supplies necessary for providing healthcare. The recipients of the demand-oriented aid are local partners in project regions with whom action medeor works closely: small and large healthcare organizations, religious and non-religious institutions, and national and international aid organizations.

Worldwide network

Since its founding, the aid organization has established approximately 10,000 points of contact with partners in 140 nations worldwide. action medeor provides non-commercial aid and delivers exclusively to countries outside the EU. Medicines and medical supplies are provided at cost, or as full or partial donations, and are financed with proceeds from donations in Germany.

From Tönisvorst across the seven seas

In its warehouse with an area of 4,000 m² in Tönisvorst, action medeor stores over 160 different medications, which according to the World Health Organization (WHO), are essential for the provision of basic healthcare. Items are sent in space-saving, robust and low-weight packaging. This lowers transportation costs and enables the medicine to reach its destination safely. Pharmaceutical

manufacturers produce the medications according to orders placed by action medeor. These are generic medications; pharmaceutical drugs whose patents have expired and whose selling price is markedly lower than the usual prices in pharmacies. In addition, the minimum order volume is low enough that even the needs of smaller health posts can be satisfied.



Medicines from action medeor reach a charity clinic in the Philippines. The poor receive free care here.



Ready to go

The stockpiling of critical medicines in the warehouse in Tönisvorst, professional logistics management and cooperation with international organizations enable action medeor to act quickly to provide aid in emergency situations.

In 2012, action medeor sent 10,785 packages of medicine and medical supplies to a total of 109 countries. These aid packages had a total weight of almost 235 tons. Approximately 70 percent of this relief went to countries in Africa, such as Zimbabwe, Benin and Niger.

Emergency packages at the ready

Within 24 hours, action medeor can send medicine and medical supplies to countries around the world. This is especially important for disaster relief and humanitarian aid efforts. In such cases, Emergency Health Kits are used. These kits are emergency units that are each comprised of 31 packages and contain important relief supplies such as bandages, surgical tools, painkillers and intravenous solutions. With a single Emergency Health Kit, action medeor can provide medical care to 10,000 people for three whole months.

Customs warehouse for medicine from non-EU countries

In the past few years, the manufacturing of basic medicines has shifted from Europe to Asia. This is because producing them in Europe was no longer profitable. Companies in Asia produce these medicines at a much lower price without any loss in quality. Hence, in order to be able to purchase medications from non-EU countries as well, action medeor set up a customs warehouse in Tönisvorst, which was opened on May 1, 2012.

This has allowed action medeor to purchase high-quality pharmaceuticals at even lower prices, as well as afford greater quantities of them. Already by the end of the year, five different drugs in its core inventory were being supplied by Asian manufacturers. The customs warehouse will continue to be enlarged in the near future, and the number of medicines supplied by Asian manufacturers will also be increased. As is the case for European manufacturers, international quality standards also apply, and action medeor carries out regular inspections to ensure that these standards are being adhered to.



Photo © B. Betzelt

Employees at action medeor ensure that the medicine arrives safely, even in the remotest regions.



Quality is of the highest priority

Quality control plays a central role for action medeor. The organization enjoys the status of a pharmaceutical company and is an authorized wholesale distributor. This means that action medeor is under the oversight of the responsible state authority, the Düsseldorf District Council, which conducts strict inspections according to official pharmaceutical guidelines.

High-quality medicines are crucial for providing healthcare. However, fake and substandard pharmaceuticals that are offered in local markets make improving healthcare in developing countries difficult. In the worst case, they make the sick even sicker and may even lead to death. The medicine that action medeor sends to developing countries, on the other hand, is subject to strict quality guidelines.

Transparency during acquisition

As soon as new medicines and supplies are required to replenish the stocks in Tönisvorst, action medeor calls for bids on both national and international platforms. This tender for bids takes place according to the guidelines of the Humanitarian Aid & Civil Protection department of the European Commission (ECHO). The company that is able to manufacture and deliver the highest quality at the lowest cost then receives the contract.

International quality standards

All manufacturers that produce medicines for action medeor operate according to international quality standards and binding pharmaceutical rules, namely good manufacturing practices (GMP). The responsible state boards and recognized international institutions conduct regular inspections to ensure that they are adhered to. Furthermore, action medeor also carries out its own inspections of the manufacturers together with international pharmaceutical experts.

During these audits, the quality of the medical products is evaluated according to the principles of good manufacturing practices.

Prequalification and quarantine

Before a new manufacturer is considered as a supplier for action medeor, a suitability test is conducted. For example, audits are conducted and important documents, such as manufacturing licenses and inspection certificates, are also examined. If action medeor decides to award the contract, its own pharmacists also inspect the quality of each delivered product. It is only when the pharmacist in charge gives his seal of approval that the medicines are delivered worldwide. All deliveries from Asia are also subjected to an external analysis that is carried out by an internationally certified quality control laboratory.

For in kind donations, the following apply:

- » They have a long enough shelf life
- » They are suitable for use in developing countries and meet the quality criteria of the donor and recipient countries
- » They come from a reliable source
- » The drugs are on the Essential Drug List of the recipient country



In kind donations: effectively fulfilling demands

The drugs and medical supplies that action medeor ships to health posts around the world are funded in part by in kind donations. When this alone is insufficient, donations of medical products from pharmaceutical companies are invaluable.

In 2012, 31 companies from the pharmaceutical industry supported action medeor's efforts with donations of medical products, such as medications, medical equipment and consumables, worth a total of 2.14 million euro. Thanks to these valuable donations, health posts around the world were able to provide healthcare to needy patients in countries such as Zimbabwe, Gabon, Chile and the Philippines.

Why in kind donations are so important

Thanks to these in kind donations, action medeor is able to afford more aid than would be possible with financial donations alone. Especially for purposes of emergency and disaster relief, action medeor has an acute need for large quantities of essential medicines and medical supplies. This need can only be fulfilled with material donations.

Which donations are accepted?

action medeor contacts companies in the pharmaceutical industry the moment health posts have a concrete requirement for in kind donations. However, often the pharmaceutical companies also approach the aid organization directly, offering to provide in kind donations. In order to utilize the donations properly, and as required by the situation at hand, certain criteria must be fulfilled. Quality and the possible uses of the product have the highest priority. In addition, the value of the in kind donations should be high enough to warrant the shipping costs incurred. action medeor declines in kind donations that do not meet these

criteria. As a rule, samples for doctors and donations from private individuals are not accepted.

Why companies make in kind donations

Because action medeor places great emphasis on the transparent utilization of in kind donations, pharmaceutical companies can provide exactly the right kind of effective aid. This is because the products are delivered exactly where they are needed most.

Protemo is one of the many companies that supported action medeor in 2012

This company from Tönisvorst manufactures protective clothing and disposable products. Protemo donated articles with a total value of 30,000 euro, including products such as gloves, surgical coats and cotton buds, to the St. Dominic's Hospital in Ghana. Hartmut Bäumer, the CEO of Protemo, treasures his cooperation with action medeor:

"As Europe's biggest medical aid organization, action medeor knows exactly where what is needed and how in kind donations can be used most effectively. We appreciate the organization's professional know-how and the transparent manner in which it works. It is indeed a wonderful feeling to know that our donations help effectively."

Pharmaceutical advisory services

“Since 2005, we have regularly been conducting training courses for pharmaceutical personnel in Africa who are involved in the manufacture, quality control, distribution and approval of medications. I am thrilled that there is so much interest in these courses and the fact that this has improved the quality of locally produced pharmaceuticals.”

Christine Häfele-Abah

Employee responsible for pharmaceutical advisory services



Pharmaceutical advisory services helps make partner nations more independent

Developing countries lack not only basic healthcare infrastructure, but also qualified personnel. This is why action medeor promotes the imparting of professional knowledge.

By providing pharmaceutical advisory services, action medeor intends to effectively strengthen healthcare structures in its partner nations as well as secure the supply of quality medications for the population in the long term. Hence, one of its key aims is to train professional pharmaceutical personnel on the ground, and to qualify them with workshops and training courses. In addition, the employees of action medeor promote the local development and production of medications and the building of regional medicine distribution centers. The main focus in this case is on West and East Africa, in particular Tanzania and Haiti.

The transfer of knowledge builds competencies

As part of pharmaceutical advisory services, action medeor provides workshops and training courses on the topic of good manufacturing practices, quality control and product development. In 2012, action medeor conducted training sessions for professional pharmaceutical personnel in Tanzania and in Cameroon. The seminars were sponsored by the Deutsche Gesellschaft für Internationale Zusammenarbeit (German Society for International Cooperation or GIZ) and the WHO. In Haiti, a seminar for local pharmaceutical products was also held. Additional training sessions are planned for 2013 in Ghana and South Sudan, among other places. action medeor has increased cooperation with international organizations such as the World Health Organization (WHO) or the Ecumenical Pharmaceutical Network (EPN) for these types of activities. Senior

experts in the pharmaceutical industry often attend these training sessions and share their years of experience.

Pharmaceutical learning and development lab

Since 2007, action medeor has also supported the building and expansion of a pharmaceutical learning and development laboratory at the Muhimbili University in Daressalaam, Tanzania. The “Pharm R&D Lab” contributes significantly to improving the quality of local pharmaceutical products in Tanzania, in particular to the development and optimization of generics. Practical training courses for pharmacy students and pharmaceutical professionals are conducted regularly at the lab.



In 2012, a workshop on good manufacturing practices took place for the first time in Cameroon.



action medeor develops AIDS syrup for children

Over 3.4 million children worldwide, 90 percent of whom live in Sub-Saharan Africa, are infected with HIV. Industrially-produced AIDS medications are often not available in the appropriate dosages and form to be administered to these little patients. By developing a syrup that is specially designed for children, action medeor hopes to simplify the therapy.

Children below two years of age especially require medicine at an early stage, because their immune system is unable to fend off the virus. A child requires the same active ingredients as an adult, but in a different dosage. It is often not possible to simply break a tablet in half. Each substance present in the drug must be adjusted for the body surface and/or weight of the child, and recalculated on a regular basis. So far, the pharmaceutical industry has developed very few formulations for this target group.

Cooperating with Muhimbili University

This is why action medeor has developed a combination syrup for children in cooperation with the learning and development laboratory at the Muhimbili University in Daressalaam, Tanzania. This syrup is intended to improve HIV therapy for child patients. The project was sponsored by the aid organization Medicus Mundi Italy.

Easy and low-cost preparation

The syrup is a concoction that can be prepared, easily and at low cost, by local hospital dispensaries and which fulfills the required stability and quality standards. This combination syrup is prepared from commercially available tablets each of which contains only one of the three drugs Lamivudin, Abacavir and Nevirapin. A requirement for the medicine is that it remains stable at 30°C for the required time of four weeks. Therefore, in the lab at Tönisvorst, additional testing was done on the preparation of the syrup, and simple preparation instruc-

tions were written for the hospital dispensaries that would be involved.

First use in Burkina Faso

The project was presented at several international conferences in 2012. As a pilot project, the children's syrup is currently being manufactured and administered in a hospital in Burkina Faso.



At a lab in Tönisvorst, testing was done on the preparation of the syrup, and simple preparation instructions were written for the hospital dispensaries that would be involved.

Humanitarian aid

"I am extremely happy to see the progress that has been made in our projects in Haiti, Pakistan and Kenya. While there is still a lot to be done over there, the long-term improvements in the lives of the families there are already apparent for all to see. This is what encourages us."

Alexandra Geiser

Employee responsible for humanitarian aid



What do people require in case of emergency?

Famine in West Africa, floods in Pakistan, an outbreak of cholera in Haiti – action medeor provides humanitarian aid in many nations. Often, the people who are affected were already having difficulty providing for themselves and their families before these disasters took place.

As a aid organization, action medeor's goal is to alleviate the suffering of people in a state of urgent humanitarian need, independent of their origin, language, religion, political views, ethnicity or gender. The reasons for such emergencies may be natural catastrophes, epidemics, violent conflicts or the result of a complex, long-term crisis. In order to provide aid, the organization first discusses the situation with contacts on the ground as to which type of medical aid is most urgently needed. action medeor then informs international coordination agencies of the specific nature of their contribution and ships the relief packages within 24 hours. Partner organizations in the affected countries, international and national alliances and network partners, together with action medeor, ensure that the aid arrives safely and is utilized as quickly as possible on the ground.

Providing relief under demanding circumstances

Emergency situations present great challenges, whether due to badly damaged infrastructure, reasons of safety because of violent conflicts, or a combination of both. In order to provide the best possible emergency relief efficiently and transparently under pressure, action medeor adheres to recognized international standards, including the Code of Conduct (Humanitarian Charter and Minimum Standards in Disaster Response) and the Sphere Project (code of conduct for international aid organizations in disaster response).

Rebuilding destroyed livelihoods

Once mere survival is no longer an issue, it becomes necessary to better rebuild healthcare services that have been destroyed and to help those affected to better cope with future crises. This is currently underway in projects in Haiti, Pakistan, Japan and East Africa.

In 2012, action medeor implemented 20 projects in humanitarian aid and provided approximately 1.8 million euro of relief (27 projects with a total amount of 2 million euro in 2011). The humanitarian aid is financed through donations, foundations and the Ministry of Foreign Affairs.



action medeor is a member of the Aktion Deutschland Hilft (ADH) alliance, which is comprised of renowned German aid organizations. When a disaster occurs, they pool their resources in order to be able to provide quick and effective relief. Where needed, they cooperate to organize donation drives. In 2012, action medeor was allotted 1.4 million euro of funds by Aktion Deutschland Hilft (1.1 million euro in 2011).



Haiti: action medeor provides structural assistance

The images of the devastating earthquake in Haiti are still fresh in most people's minds. 220,000 lives were lost and thousands were injured in January 2010. The healthcare services in Haiti, which were insufficient to begin with, grew worse over the years with the collapse of the infrastructure.

Since then, action medeor has been supporting a number of projects that seek to permanently improve the living conditions of the Haitians and to secure the developmental progress achieved so far. In addition to better healthcare, comprehensive healthcare awareness campaigns and easier access to education are top priorities. This is because it is especially in rural areas that people have little knowledge and understanding of the prevention of contagious diseases.

Better living conditions for children

In Gressier, a village near the capital, a primary and secondary school were rebuilt after being completely destroyed by the earthquake, and school housing was also made available for 350 pupils. In Cerca-Carvajal, located in the eastern part of the country, local municipal representatives provide health education. Furthermore, a school is currently being expanded in order to increase access to education. In addition to better healthcare, it is also important to address the problem of malnutrition, especially among children. In Larmadelle, near Port-au-Prince, the nutritional program is currently aimed at up to 1,000 malnourished children and their families. Over 60 percent of the Haitian population is undernourished, and almost a third of children under five years of age suffer from growth defects.

Hurricanes and a renewed outbreak of cholera

In the past year, the people in Haiti suffered from the

aftermath of Hurricane Sandy and new outbreaks of cholera. action medeor organized relief packages worth a total of 42,000 euro for the treatment and prevention of cholera and also distributed hygiene kits, food packages for children, seeds, and small agricultural tools through local partners. The hurricane had destroyed harvests and arable land. Combining long-term activities and repeatedly necessary immediate aid is a constant challenge.



The children's aid foundation "Stiftung RTL – Wir helfen Kindern e.V." has supported action medeor's relief efforts in the aftermath of the earthquake from the beginning. Since 2010, the foundation has been supporting four projects in four different districts which provide medical care and healthcare to children and their families. Other key aspects are the reliable provision of food and the rebuilding of schools and student accommodation. In addition, the foundation financed the aid provided to the people affected after the hurricane, as well as after the renewed outbreak of cholera.

Kenya: faster routes to medical aid

In order to reach the nearest hospital, some inhabitants of North Kenya must travel distances of up to 170 km. This is exactly why it is so important that they are able to receive immediate medical help in the small health posts. However, such posts often only have the bare essentials.



Easily accessible health posts are especially important for mothers and children.

In cooperation with the German Institute for Medical Missions (DIFAEM) and the local partner organization African Inland Church (AIC), action medeor supports seven health posts in the regions of West Pokot, Turkana and Marsabit after providing emergency relief last year. These regions constitute a settlement area with 200,000 inhabitants. The

main responsibilities were providing a better supply of medicines and the acquisition of additional premises for in-patient treatments. In 2012, the expansion of the Lokori Health Center, in which a maternity ward would later be housed, began. Other construction and renovation works are also planned for the other six health centers. Sanitation facilities and a well are to be built, and the laboratory rooms and the clinic building will be renovated.

Through continuing education, healthcare personnel will be trained to perform diagnoses, in particular the early detection of high-risk pregnancies. They will also be trained in the administration of medicines. Employees of the Lokori Health Center have already been given advanced training on treating childhood diseases and in child health. Furthermore, events are also organized to promote healthcare awareness in the surrounding districts and schools of the health posts, for example in Loglogo and Namarey. Overall, the aim is to build trust in the healthcare services, so that patients come to the health posts in time.

Pakistan: focus on disaster relief

Massive monsoon rains and crumbling drainage systems caused floods in 2010 and 2011, especially in the districts of the Sindh province. In both years, action medeor provided disaster relief and launched a long-term health project in the preceding year. In addition, other measures for the prevention of future catastrophes are planned.



Houses are built on dams that are considerably higher than the last flood level.

In the first half of the year, action medeor continued to provide emergency aid to those affected by the floods in 2011. Since then, almost of 6,000 hygiene kits, 4,000 mosquito nets, blankets and water sterilization tablets were distributed to approximately 6,000 households. Mobile healthcare stations provided some 40,000 people with medical aid. An essential aspect of action medeor's involvement remains providing access to healthcare, especially to small children and mothers. This includes the training of 100 traditional midwives and providing them with a total of 2,000 sterile midwifery kits.

With the construction of twelve health posts, access to healthcare for the population of 50 villages has increased

substantially. The goal is to enable the health posts to operate independently in the future by the local districts without relying on outside financial help. Long-term development-oriented projects will be implemented to further strengthen their ability to help themselves. In order to do so, over 58 village commissions were created and 344 healthcare assistants trained in the Thatta district last year.

Due to the changing environmental and climate conditions, the number of natural disasters such as floods and droughts are expected to increase in the future. As part of the disaster relief efforts, action medeor built 130 flood proof housing units with their partner organization PVDP

for the people affected by the flood in the Mirpurkhas district. With the partner organization arche noVa, additional flood proof drinking water systems, hand pumps, washing areas and latrines were constructed in the villages that were part of the project. On the other hand, the inhabitants of the Thar desert near the Indian border are suffering the effects of increasingly long droughts. action medeor provided aid there with the implementation of a sustainable water supply system that made use of 75 rainwater cisterns.

These aid projects in Pakistan were financially supported by ADH and the Ministry of Foreign Affairs.

Japan: Coping with the threefold catastrophe is a continuing effort

Approximately 19,000 people lost their lives or are still missing to this day, as a result of the tsunami of March 2011. After the earthquake, tsunami and nuclear disasters, tens of thousands are still living in temporary living arrangements and under difficult conditions. Infrastructure has not yet been completely restored.



Children from Rikuzentakata and Kesenuma go on a field trip. They are receiving specialized psychological help.

In the past year, action medeor expanded its support to include people with disabilities. In addition to mini generators for children who required intensive care and who were reliant on a supply of electricity, a transportation vehicle which was specially adapted to the needs of people with disabilities was also acquired for future evacuations, the distribution of relief packages, as the transportation of patients.

Mémoire de Yuriage, a gathering place of remembrance, is now a place for people to meet and for visitors to learn about the events that took place. But most of all, it is a

memorial and a place for those affected by the disaster to come to terms with it mentally. Regular social activities help people to deal with their fears and their loss, and build a new community in this region, which was hit especially hard. Especially for people who are still living in evacuation centers or temporary housing, there are a variety of therapy programs, or "Tsudoi", that emphasize and organize field trips, group work and creative activities.

In total, action medeor implemented seven projects last year in cooperation with partner organizations AAR Japan and NICCO. These projects amounted to a total 400,000 euro in aid.

Development cooperation

"I am touched by the degree of solidarity and the tireless work of those with whom we work. It is amazing how hard our local partners are working with the numerous volunteer medical personnel to improve the health of people in their surroundings."

Barbara Kühlen

Employee responsible for development cooperation



Projects increase the chance of a healthier life

In 2012, action medeor implemented 24 development cooperation projects together with local partner organizations, 18 of which were in Africa, five in Latin America and one in India. Numerous awareness campaigns were organized, and they were able to reach thousands of people.

The projects focus on people whose health is at great risk, including babies and small children, pregnant women and mothers. Ethnic minorities that are at a social and economic disadvantage also receive extra aid.

Project goals on various levels

The projects were implemented in cooperation with local partner organizations and aim to permanently improve the health situation of these people, as well as strengthen local health structures. In order to do so, assistance is provided on many levels: In addition to ensuring the provision of basic healthcare and the treatment of life-threatening diseases such as malaria, HIV/AIDS and tuberculosis, prevention and awareness are also of key importance.

Local and effective

In these projects, people take on the role of disseminators. They disseminate knowledge that they have learnt in their communities and help to ensure that symptoms of illnesses are recognized in time, and that diseases are prevented. By providing basic and advanced training to local health personnel, valuable traditional knowledge is retained, and at the same time, linked to modern medical techniques. The traditional midwives who receive this continuing training are able to tend to women for the duration of their pregnancies and during birth. Therefore, in rural areas where the next hospital is much too far away, they help to significantly improve healthcare.

Financing the projects

The total funds for the development cooperation projects which action medeor implemented together with local partners in 2012 amounted to approximately 1.2 million euro (766,000 euro the previous year). These efforts were supported by the German Federal Ministry for Economic Cooperation and Development (BMZ), the state of North Rhine-Westphalia, and by foundations such as Stiftung RTL – Wir helfen Kindern e.V. These projects generally last between one and five years.



Mlope Kafui (23) und Koffi Bakar (32) are healthcare assistants and supporters of the medeor partner organization 2AD in the south of Togo.

Photo © B. Breuer



Guatemala: Supporting women's rights

In this society dominated by men, family planning and contraception are rarely spoken of. Extremely early and often consecutive pregnancies are the result, especially in rural areas. The mortality rate for the mother and the infant is extremely high, especially in rural regions and among the indigenous population.

In Totonicapán, as well as in most parts of the country, topics such as sexuality and contraception are taboo. Young girls often become pregnant unwillingly, and this reduces their chances of receiving education and becoming economically independent. Together with the partner organization PIES de Occidente, action medeor is campaigning for the right of these women to learn more about their bodies and achieve more self-determination.

A tailored transmission of knowledge

In workshops, women are educated on topics such as hygiene, nutrition, danger signals during pregnancy, family planning and women's rights. Schoolchildren deal with topics such as teenage pregnancies and family violence by taking part in activities such as plays followed by discussion sessions. In order to minimize risks before and during pregnancies, 365 traditional midwives were given additional training and provided with supplies. In addition, twelve committees were set up to help pregnant females in emergencies.

Reports of initial successes

The mortality rate for mothers in the project region has decreased, and the health situation of women and mothers has markedly improved. Traditional midwives are now able to identify danger signs earlier during pregnancy as well as during birth, and can take the right course of action. The number of preventive and follow-up examinations has increased significantly, as has the amount of

supervision given to pregnant mothers and newborns. The number of preventive examinations conducted by traditional midwives as well as the number of births they supervised increased greatly, from 240 to 1,265 and from 588 to 2,073, respectively during the period of the project. The number of corresponding referrals to public health institutions has also increased, a sign of better cooperation and increased faith in the public healthcare system. Men have shown greater awareness where topics such as family planning and women's rights are concerned.

Raising awareness among the youth

However, even with these successes there is a long way to go until people have an attitude towards sexuality and pregnancies that is characterized by openness and the right to self-determination. So that young people also gain an awareness of these topics, action medeor will be supporting further training measures in a follow-up project for 200 teachers from 80 schools in the Totonicapán administrative region during the 2013 school year. They will be supplied with illustrative teaching materials on the topic of sexuality and will be able to pass on this new knowledge to their students.

Mexico: Healthcare and birth care

Most of the residents in remote Mayan communities in the extreme south of Mexico live below the poverty line. Especially children suffer from respiratory infections, the flu and dysentery. Newborns are most at risk. Healthcare is insufficient in these areas.



The construction of a health center is making great progress.

With the support of the German Federal Ministry for Economic Cooperation and Development, an existing health post is being expanded with another building and a maternity unit. Construction began in January 2012, and the center is slated to open in April 2013. 20 health

promoters will be supporting the doctor and increasing healthcare awareness in the surrounding highland communities. Central topics include not only the prevention, diagnosis and treatment of diseases, but nutrition, hygiene and sanitary facilities are also some of the issues discussed. 18 midwives will be providing improved prenatal and postnatal care for pregnant mothers and helping out with uncomplicated births in the new maternity unit. The project is also financing two professional midwives.

The awareness campaign will take place over the radio and through posters, and is expected to reach up to 30,000 people. Key aspects are the early detection of risks related to giving birth, the prevention of violence against women and other topics of sexual and reproductive health.

The project was implemented in cooperation with Madre Tierra México, and will last for a total of three years, concluding in 2014.

DR Congo: Malaria and AIDS awareness

Due to a situation resembling a state of war in the eastern part of the Democratic Republic of the Congo, sexual assaults on girls and women are constantly taking place. This puts them at a high risk for HIV infection. In addition, children and pregnant women are especially in danger of contracting malaria.



The team of the partner organization AFPDE.

The people in the project region in South Kivu know very little about how diseases are spread and how to prevent being infected with HIV or malaria. In addition, the extremely low availability of HIV tests means that pregnant women are often unable to get tested for an infection. Together with the partner organization Association des Femmes pour la Promotion et le Développement Endogène (AFPDE), action medeor organized over 300 awareness events and reached over 25,000 people. Over 15,000 condoms were distributed and 400 households received a mosquito net. In addition, together with the Swiss organization miva, action medeor sponsored a vehicle so that the project team can now reach the villages more easily.

In test centers, almost 3,000 people can get tested for HIV at no charge. Those affected receive psychological help from AFPDE and are referred to the nearest hospitals to receive treatment. A credit program has enabled 150 HIV patients and other community members to take part in self-help measures that bring income.

Through project activities, 75 percent of which were sponsored by the German Federal Ministry for Economic Cooperation and Development, a total of 100,000 people can be reached. The project will last for three years and concludes in 2015.



Awareness activities on malaria and HIV/AIDS in villages taking part in the project were very well-received.

Guatemala: Exchanging experiences with Latin American Partners

Projects supported by action medeor in Latin America are often similar in their aims, activities and methods.



Sharing experiences: The participants of the 11 partner organizations take advantage of synergies to increase added value.

Many partners support activities such as the training of local medical assistants, access to basic medicines in remote villages, the manufacturing of plant-based remedies, and health protection through awareness campaigns and informing young people and women about their rights.

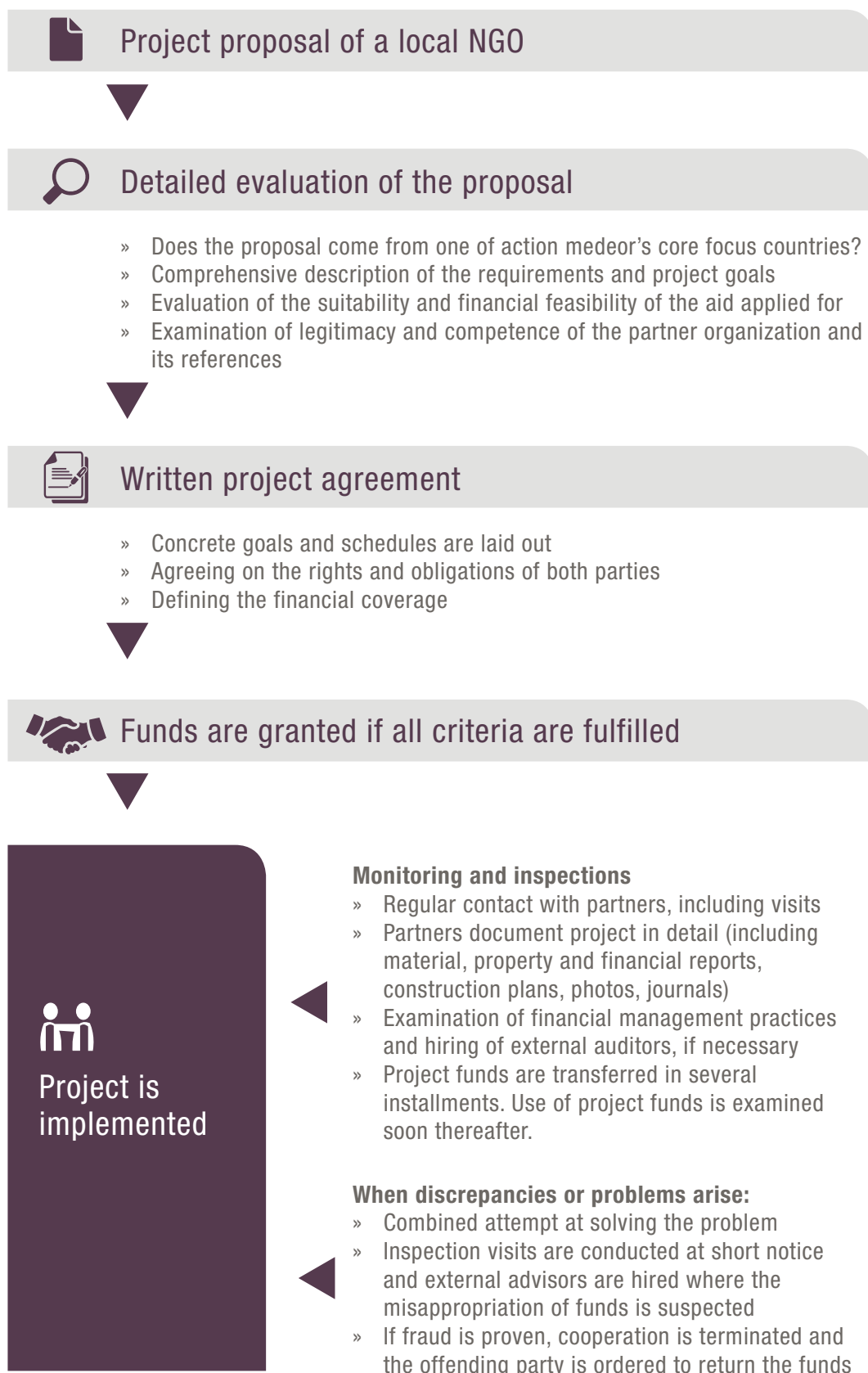
In such situations, the same important questions are raised:

- » What are the suitable general conditions for successful health projects?
- » How can long-term success be guaranteed?
- » What role can volunteer medical assistants play?

In order to create a forum for the exchange of information, a conference involving eleven partner organizations from Bolivia, Ecuador, Guatemala, Columbia, Mexico and Haiti was organized in June 2012. A follow-up document was compiled that contained recommendations for each organization, action medeor, the respective governments and the donors at large. All involved parties were impressed by the dynamic of this professional forum and remarked that it was an extremely enriching experience.

How is a project implemented?

action medeor receives numerous project proposals from local non-governmental organizations (NGOs) in Africa and Latin America. But what are the criteria for choosing which projects receive our cooperation and financial support?



Alliances and networks

action medeor is a member in a number of organizations and alliances. Its activities in associations and networks, and cooperation with other aid organizations help to more strongly consolidate common interests and goals and implement them more effectively.



Third-party funding

In addition to donations, public and private grants are also an important source of support for the implementation of action medeor projects worldwide. With third-party funding, action medeor is able to provide even more aid.



Aid in 2012 – Project overview

Country	Project focus (period)	Local project partners	Funding provided by	Project expenditure 2012 (Euro)
PHARMACEUTICAL PROJECTS: LOCAL MEDICATION DEVELOPMENT, BASIC AND ADVANCED TRAINING FOR PERSONNEL				
Africa, Asia	Support for local pharmaceutical production (2012)	Local pharmaceutical manufacturers		7,478.00
Germany	Organization of the symposium “Local manufacturing and access to medicines” (2012–2013)	GIZ	GIZ	3,000.00
Haiti	Pharmaceutical training and minilab for the University (2012–2013)	Pharmaceutical industry		21,859.50
Kenya	Artemisia extraction (process optimization) (2011–2012)	ABE		1,007.40
Sierra Leone	Support for pharmaceutical training measures (2012)	EPN		2,005.00
Tanzania	ARV product development (2011–2013)	MUHAS Laboratory		4,557.55
Tanzania	Expansion of an analysis laboratory (2010–2012)	MUHAS Laboratory	GIZ	16,566.96
Tanzania	Technology transfer and the local production of antiretroviral drugs (2006–2013)	TPI	EU	675,622.14
Tanzania, Cameroon	GMP Workshops (2012)	TFDA, TPI, Cinpharm	GIZ	47,288.58
HUMANITARIAN AID PROJECTS: ACUTE EMERGENCIES AND RECONSTRUCTION RELIEF SPANNING SEVERAL YEARS FOLLOWING CONFLICTS AND DISASTERS				
Haiti	Construction of a primary and secondary school and student housing (2011–2015)	HKH, Fondation Rinaldi	Stiftung RTL	37,561.73
Haiti	Health and education for children and their families in rural Cerca-Carvajal (2011–2013)	CSDI	Stiftung RTL	401,624.58
Haiti	Healthcare and nutritional therapy for children and their families (2011–2014)	FEJ	Stiftung RTL	152,723.55
Haiti	Improving sanitation by providing training in the construction of dry toilets (2010–2012)	DESWOS	ADH	13,694.00
Haiti	Improving the health and hygiene situation of women and children in Cerca-Carvajal (2011–2012)	CSDI	ADH	3,936.14
India	Reactivation of the basic health centers Thoduvai and Tranquebar (2011–2012)	SEEDS	Hartmannbund-Stiftung	30,000.00
Japan	Acquisition of a vehicle for people with disabilities for the Japan Disability Forum in Fukushima (2012–2013)	AAR	ADH	27,336.64
Japan	Construction of a memorial site and a meeting center for tsunami victims in Natori City (2012–2013)	NICCO	ADH	11,720.69
Japan	Renovation of the heating system in a home for the disabled (2011–2012)	AAR	ADH	16,755.66
Japan	Psychosocial care for especially needy tsunami survivors (2011–2012)	NICCO	ADH	25,000.40
Japan	Psychosocial care for especially needy tsunami survivors (follow-up project) (2012–2013)	NICCO	ADH	174,252.87
Japan	Distribution of generators to households with disabled children (2011–2012)	AAR	ADH	11,947.07
Japan	Distribution of relief packages to the disabled in Miyagi and Fukushima (2012)	AAR	ADH	119,514.75
Kenia	Improving rural healthcare facilities in Turkana by providing them with medicine (2011–2012)	MEDS	LAV Bayern, Lions Club Bayern Süd	13,922.62
Pakistan	Disaster prevention through the construction of flood-proof housing (2012)	arche noVa	ADH	157,083.49
Pakistan	Mobile healthcare and distribution of relief packages in Umerkot in the Sindh province (2012)	PVDP	AA, ADH	74,688.35
Pakistan	Mobile healthcare and distribution of relief packages in Umerkot in Taluka Samaro (2011–2012)	PVDP	AA, ADH	39,133.63
Pakistan	Sustainable water supply in the Thar desert (2012)	PVDP		16,057.83
Pakistan	Improving healthcare for victims of the flood (2011–2013)	PVDP	ADH	103,406.13
Pakistan	Distribution of relief packages to households and mobile healthcare in Umerkot (2011–2012)	PVDP	ADH	12,280.27

Country	Project focus (period)	Local project partners	Funding provided by	Project expenditure 2012 (Euro)
DEVELOPMENT COOPERATION PROJECTS: BASIC HEALTHCARE, FIGHTING HIV/AIDS, MALARIA AND TUBERCULOSIS				
DR Congo	HIV/AIDS awareness and tests (2012)	AFPDE		23,372.64
DR Congo	HIV/AIDS awareness and tests in four health zones (2012)	APED		13,611.52
DR Congo	Malaria and HIV/AIDS awareness and distribution of mosquito nets (2012–2015)	AFPDE	BMZ	62,219.15
DR Congo	Medical and psychosocial care for HIV/AIDS patients (2011–2013)	Pharmakina		8,113.82
Ghana	Roof renovations for a training center (2012)	ATBAWA II	NRW, GIZ	7,722.91
Ghana	Renovation of a clinic building and accompanying personnel housing (2011–2012)	The African Challenge	NRW, GIZ	27,607.60
Guatemala	Further training for midwives and the organization of health campaigns (2011–2012)	Ak'tenamit		4,152.73
Guatemala	Partner summit in Antigua: Latin American partners share their professional experience (2012)			23,823.68
Guatemala	Improving the health of mothers in indigenous communities and further training for traditional midwives (2009–2013)	PIES de Occidente		72,014.81
India	Bandages for leprosy patients (2012–2013)	Dr. Rousselot		3,500.00
Kolumbien	Prevention of gender-based violence and sexually transmitted diseases (2010–2013)	Taller Abierto	BMZ	45,247.88
Mexiko	Construction of a health center with maternity unit and training of promoters and birthing assistants (2011–2014)	Madre Tierra	BMZ	247,846.46
Ruanda	HIV/AIDS prevention through theatrical performances and support for HIV self-help groups (2009–2012)	RAPP	BMZ	45,991.39
South Africa	“Garden of Colors” in Elim (2012–2013)	Elim Hlanganani		1,235.15
South Africa	Construction of a new and larger health post for HIV/AIDS patients (2011–2013)	Thabang	BMZ	307,510.90
Tanzania	Combating malaria: Reconstruction of children's ward, renovation of hospital, awareness campaigns (2007–2012)	Diocese of Mbinga	Stiftung RTL	90,520.71
Tanzania	Medical equipment for maternity unit (2012–2013)	Endulen Hospital	FedEx Express / United Way Worldwide	40,274.78
Tanzania	Water supply for an orphans' village (2012)	Partnerschaft für Afrika	Hilfswerk der Deutschen Lions	29,137.94
Togo	Combating malaria and HIV/AIDS (2012–2015)	2AD		699.41
Togo	Measures for providing income and medicines – Solidarity funds for HIV/AIDS patients (2010–2013)	ARBES II		32,336.67
Togo	Project evaluation: Bringing malaria and HIV/AIDS under control (2012)	2AD III		2,425.33
Togo	Consultations and medical care for young sex workers (2012–2015)	PSAS	BMZ	28,560.12
Togo	Consultations and medical care for young sex workers (2012)	PSAS		6,354.56
Uganda	Improving healthcare for pregnant women with HIV (2011–2013)	ACCOD		22,836.80



Transparent and responsible communication

The work action medeor does is dependent on the dedication of many individuals. The higher the number of people who donate to the aid organization, the greater the amount of relief the organization is able to provide in its partner countries. The basic requirements are popularity and trust.

Investments in public relations, advertisements and fundraising are essential for making the aid organization action medeor known to the public, informing people about its work and projects, building trust, establishing a relationship with donors and to getting new donors involved. In order to do this, action medeor makes use of various means of communication: and personally approaches people through street campaigns, donation drives, information booths, or talks at schools.

Responsible management of donation funds

The most cost-effective use of funds is heavily emphasized. Where possible, advertising is done at little or no cost. For this, action medeor cooperates with partners in print and TV media who grant the organization free ad space or time. Please refer to the action medeor website for a detailed list of service providers who have cooperated with action medeor. Relative to the total budget, the fraction of expenditures for marketing, communications and educational activities totaled 16.6 percent.



The German Central Institute for Social Issues (DZI) regularly audits charity organizations such as action medeor with respect to their legitimacy and their cost-effective use of donation funds, as well as truthful, non-ambiguous text and media advertising. action medeor has received the DZI donation seal of approval every year of its existence.



In addition, action medeor has been a member of the German Donations Council (Deutscher Spendenrat), an umbrella organization for charitable organizations which collect donations, since 2013.



Education requires solidarity

action medeor aims to raise awareness for problems in developing countries with the help of developmental education work. Over 3,000 persons were reached by direct contact in talks, exhibitions, donation drives, information booths and information days in 2012. 2,000 schoolchildren alone were informed of the living conditions of people in developing countries and the aid that action medeor provides worldwide.

Focus on crisis regions in the press

The focus of press relations in 2012 was mainly on relief for crisis regions in Syria, West Africa and Haiti. In the regions affected by famines in East and West Africa, as well as for Syrian refugees, action medeor continuously provided relief, which was picked up by the press. action medeor's quick response to Hurricane Sandy and the disaster relief it provided to those affected also received repeated attention from the press.

A more reader-friendly website

The action medeor website was revised and made more reader-friendly in order to better cater to the reading habits of those aged 50 and above, who make up the largest proportion of donors. Changes to the font size resulted in a complete overhaul of the layout, which went online in November.

"Malaria. We won't stand for it!"

This was the name of the exhibition in the state parliament building in North Rhine-Westphalia. Information panels, a mosquito net installation, photos and films informed visitors about this life-threatening contagious disease. The exhibition was inaugurated on October 5 by the president

of the state parliament, Carina Gödecke, and Bernd Pastors, board member at action medeor. Among the guests present were numerous politicians, donors and partners of the organization.

action medeor's colorful summer festival

In June, the aid organization greeted over 2,000 visitors who came to Tönisvorst for the action medeor summer festival. The festival featured handicrafts from all over the world, a raffle with sponsored prizes, food and drink, an interesting music program, exciting talks by action medeor employees, and of course, a look behind the curtains of the largest European medical aid organization.

Benefit gala with WDR 2 host Steffi Neu

On the third Sunday of advent, action medeor hosted its traditional benefit gala for the 14th time. The popular radio host, Steffi Neu, presented a diverse musical program at Seidenweberhaus in Krefeld. The benefit gala was sponsored by generous companies from Krefeld. The main sponsor of the evening was the Hülsemann car dealership; acting as co-sponsors were the banks Sparkasse Krefeld and Volksbank Krefeld, and the energy consulting company Peter Nieskens.

Getting to know what donors think

In order to find out what is important to action medeor donors and how satisfied they are with the work action medeor has done, the organization carried out a donor survey in 2012. The responses of 616 donors have helped action medeor communicate better with donors and the public.



Support from celebrities

With a variety of different donation drives, school classes, organizations and private individuals get involved on behalf of people in need. In such situations, action medeor can also count on support from celebrities.

“1:0 against malaria!” with Fortuna Düsseldorf

On World Malaria Day on April 25th, the cooperation of the football club was announced publicly at a press conference in Düsseldorf. Using the slogan “1:0 against malaria!” a great number of activities were organized together with the club that year, and donations were collected for action medeor. Fortuna’s aim was to provide the aid organization with support and make more people aware of it, as well as of the dangerous tropical disease malaria, and to collect donations to fight the disease, because even a single euro can finance a malaria treatment.

For World Malaria Day on April 25th, action medeor organized a walk-in malaria maze, an information booth and many activities to participate in for a period of two days. Together with its ambassador, Anke Engelke, and the Fortuna Düsseldorf board members Peter Frymuth and Paul Jäger, action medeor board member Bernd Pastors reminded the public that, on average, one child dies of malaria every minute.

Helpball – Help from handball athletes

Achieving more with fun and commitment–this is the aim of the handball team of the St. Tönis Gymnastics Association. The initiative was founded by Christian Hülsemann, CEO of the Hülsemann car dealership and himself a former active handball player.

Anke Engelke wins on a celebrity quiz show

For the fourth time, Anke Engelke sat in Günther Jauch’s seat and won 125,000 euro for action medeor on a celebrity quiz show event in June. The winnings will go to a malaria project in Togo. The dedicated action medeor ambassador has been supporting the organization since 2003. Anke Engelke travels to health projects regularly to see for herself the work the aid organization does and the progress it has made.



The St. Töniser handball athletes help support a project in South Africa with their donations.



Cooperating with companies

It's a win-win situation: action medeor works together with a number of companies that each provide help in their own way.

In addition to one-time donations, some companies decide to align their commitment strategically. As a cooperation partner, action medeor is enjoying an increasing amount of popularity, for example through partnerships with FedEx Express and Jungheinrich AG.

FedEx Express supports health of mothers and children

Since 2012, FedEx Express has been dedicated to the improvement of the health of mothers and children in northern Tanzania. Thanks to the donation of approximately 40,000 euro, a hospital and a new birthing station could be supplied with medicines and medical devices and a solar collector installed in the Endulen region. This hospital provides healthcare for over 72,000 people.

Jungheinrich AG's spare change initiative

Since 2011, the intralogistics specialist, Jungheinrich AG, has been supporting the medical aid organization with material donations and donation drives. In March, its management launched a charity drive in which the employees donated the amount after the decimal point on their pay slips to action medeor. More than 1,200 employees have taken part so far.

Three questions for Hans-Georg Frey, head of the board at Jungheinrich AG



Photo © J. Scheffler

Why did you decide to cooperate with action medeor?

For many years now, as part of our corporate social responsibility program, our company has been supporting aid organizations and other charity organizations with financial and in kind donations. Long-term sustainability is an important aspect and component of our company strategy. We want to do our part for society and the economy in the areas of education, science and environmental protection with our industrial truck technology and intralogistics know-how. It was a natural decision to support a dedicated aid organization such as action medeor. action medeor is a great fit for our core business and is a great NGO partner; we see eye-to-eye.

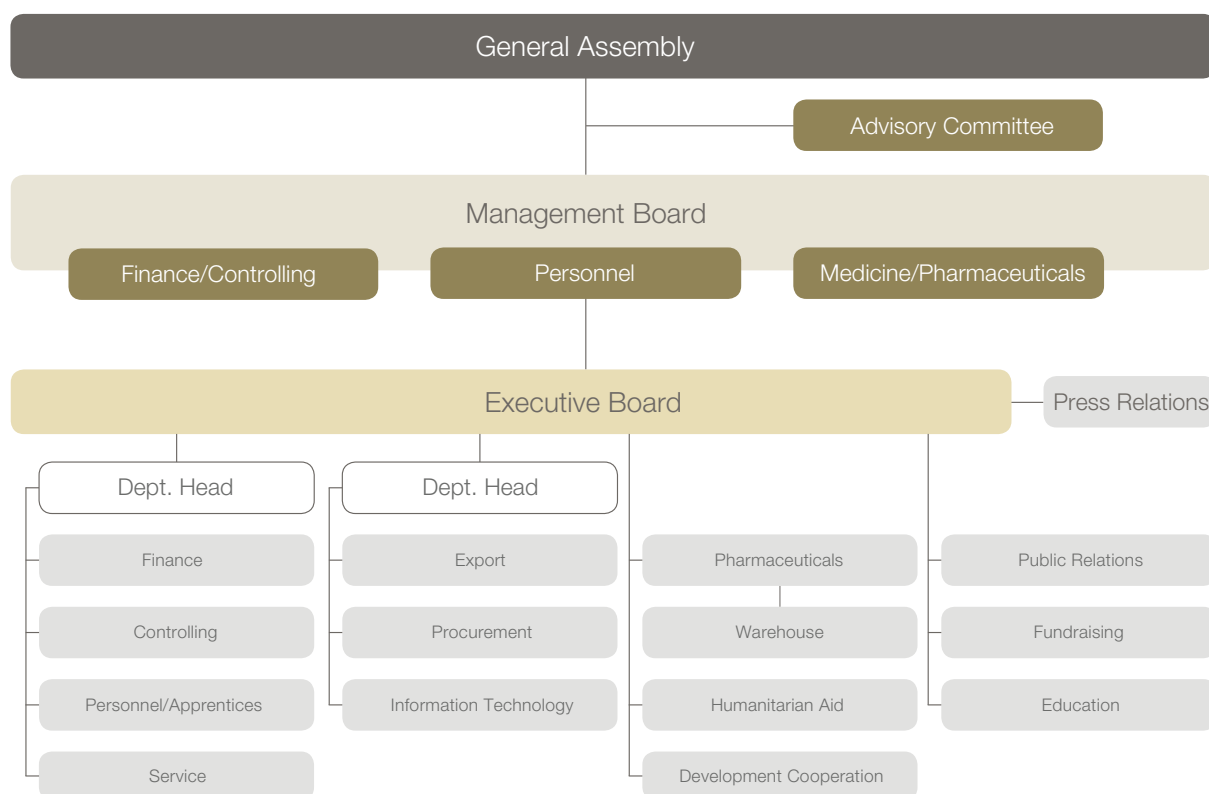
What projects are planned for the future?

The spare change initiative, which we conceived of to provide action medeor with even more support, will be enlarged to include other parts of our group. The donation funds we collect at the end of the year, which we will double, will also be used for other projects, e.g. in Zambia.

What has this cooperation done for your company?

Jungheinrich is an international company. For us, relief and aid should be given not only in our own backyard, but also brought to where it is needed most.

Organizational chart



In 2012, 65 full-time employees were employed by action medeor, and 20 volunteers supported the aid organization with lecturing activities and as pharmaceutical experts. Positions on the Management Board and the Advisory Committee are voluntary as well. No expense payments are made.

The General Assembly

The General Assembly is the governing body of the society and is responsible for such tasks as approving the annual accounts, the approval of the Management Board, the Advisory Committee and the Executive Board, as well as the election of the Management Board and the Advisory Committee. On December 31, 2012, the General Assembly consisted of 56 individuals.

The Management Board

Positions on the Management Board are voluntary. Among its duties are the preparation and calling of the General Assembly, the approval of the business plan and verification of annual accounts. The Management Board meets every two months, but reviews the key data monthly. There are three committees appointed by the Management Board, with the core tasks of human resources, finance and controlling, and medicine and pharmacy. The committees have advisory powers with respect to the Management Board. The members of the Management Board are: Heinz Gommans, Krefeld (President), Heinrich Lauf, Viersen (Vice-President), Siegfried Thomaßen, Tönisvorst (member), Prof. Marlis Hochbruck, Karlsruhe (member), and Dr. Thomas Menn, Potsdam (member).

The Executive Board

According to the statutes of the organization, the Executive

Board consists of one or more full-time members. It is responsible for managing the organization. The Executive board is appointed and dismissed by the Management Board. The Executive Board is to inform the Management Board of all important matters. The full-time Spokesman of the Board of action medeor is currently Bernd Pastors. Christoph Bonsmann has been an additional appointed Management Board member since July 1, 2012.

The Advisory Committee

The voluntary members of the Advisory Committee are elected by the General Assembly on the recommendation of the Presidium for a period of three years. The Advisory Committee advises the Presidium in the execution of its duties. In particular, it expresses its opinion on the motions of the Presidium to the General Assembly and makes recommendations. Members of the Advisory Committee are: Suffragan Bishop Karl Borsch, Diocese of Aachen (chairman), Walter Schöler, Tönisvorst (deputy chairman), Walter Otto Fricke, Krefeld (MdB-member of parliament), Uwe Schummer, Willich (MdB), Dr. Gisela Schneider, Tübingen (Deutsches Institut für Ärztliche Mission), and Christine Busch, Düsseldorf (regional church official).

The organization's charter can be viewed on www.medeor.de. You may also request a copy to be mailed to you.

The Management Board's Report

In the past year, four fundamental changes were made that were decided on during a Management Board strategy session in 2011.

A new mission statement

We are pleased to announce that we have reached our goal of creating a new mission statement for action medeor by 2013. In addition to the board members and the Advisory Committee, we were also able to actively include all employees in this process. This is because the mission statement, which embodies the vision, mission and values of the organization, reflects the current and future orientation of action medeor. Therefore, it is important for people to be able to strongly identify with its content.



The Management Board and the Advisory Committee of action medeor.

Dual management system

As of July 1, 2012, Christoph Bonsmann has given a boost to the top management of action medeor as a new board member. This will allow the increasingly varied and comprehensive duties of the organization to be assumed by two board members in future. As the spokesman for the Management Board, Bernd Pastors, who was previously the only member of the Management Board, is responsible for Personnel, Finance, Controlling, Marketing, and Communication. Christoph Bonsmann, who has been the head of pharmaceutical advisory services for ten years, was the department head for Pharmacy, Development Cooperation and Humanitarian Aid. As a board member, the 46 year-old pharmacist will continue to be responsible for these areas.

Customs warehouse

In order to be able to procure high-quality medicines

from non-EU countries at an affordable price in future, a customs warehouse was set up within the warehouse at Tönisvorst last year. This customs warehouse will be enlarged to include the entire medicine warehouse in the medium term.

Combining two departments

The transition from acute disaster relief to reconstruction projects, and finally to projects of development cooperation, is a fluid process. In order to plan this process more efficiently in the future, and to be able to use internal synergies optimally, both departments were combined to form a single project division.

In the name of the Management Board, I thank all supporters of action medeor, the members, the Advisory Committee and all employees for their dedicated and successful work in the past year.

Heinz Gommans
(President)

action medeor mourns Hans Hochbruck

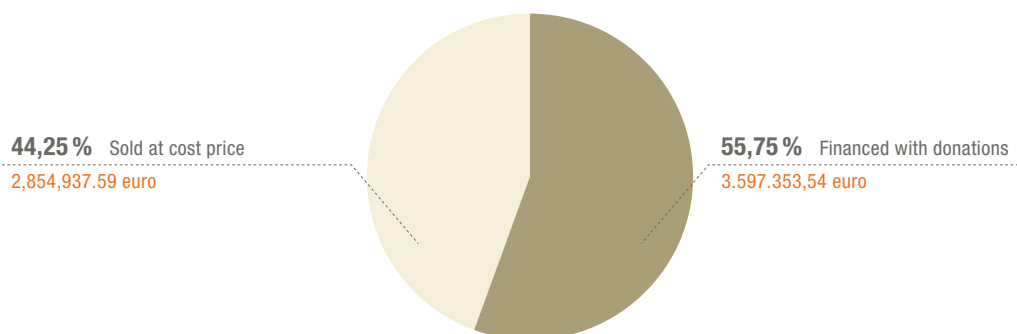
A sad piece of news reached the organization in March 2013: Hans Hochbruck, who was the president of action medeor for many years, passed away as a result of a traffic accident at the age of 87. He had been with action medeor since its founding in 1964, and after spending 15 years on the Management Board, he led the organization for nine years. The foundation for important structural processes was laid thanks to his administrative and leadership abilities. During his project trips to Senegal and many Eastern European countries, among other places, he always had an ear for the needs and concerns of the people there. Hans Hochbruck remained dedicated to action medeor till the very end. We will miss him greatly.



Overview of relief provided, donations and third-party funding

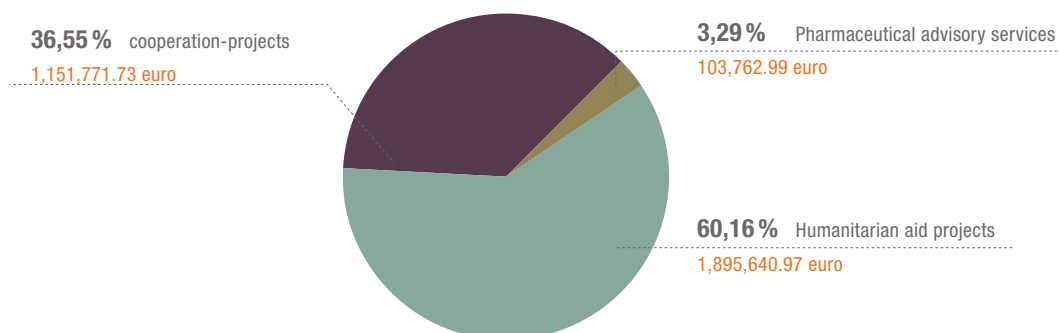
Expenditures for medicines

100 % Total
6,452,291.13 euro



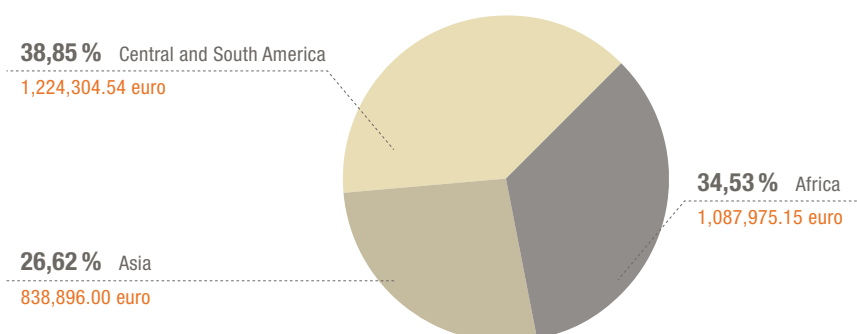
Relief project expenditures by department

100 % Total
3,151,175.69 euro



Project expenditures by continent

100 % Total
3,151,175.69 euro



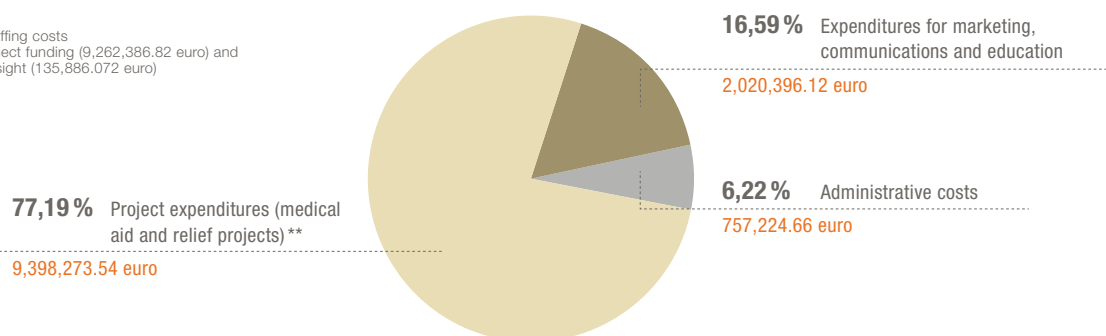
Total expenditures *

100 % Total

12,175,894.32 euro

* Including staffing costs

** Includes project funding (9,262,386.82 euro) and project oversight (135,886.072 euro)

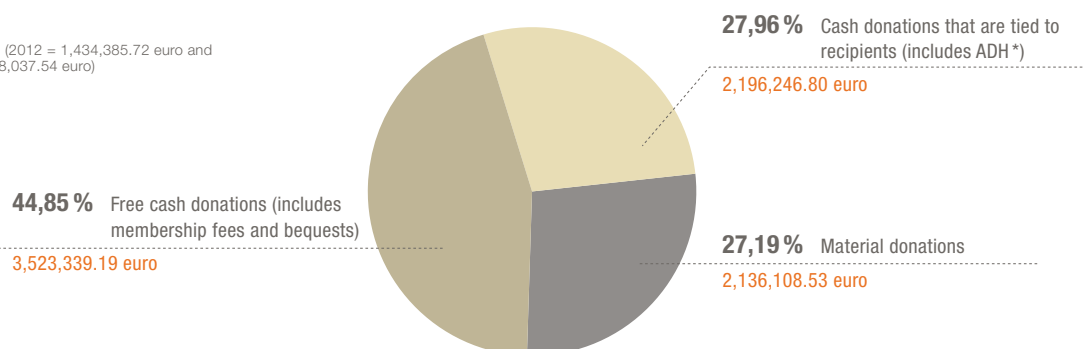


Proceeds from donations

100 % Total

7,855,694.52 euro

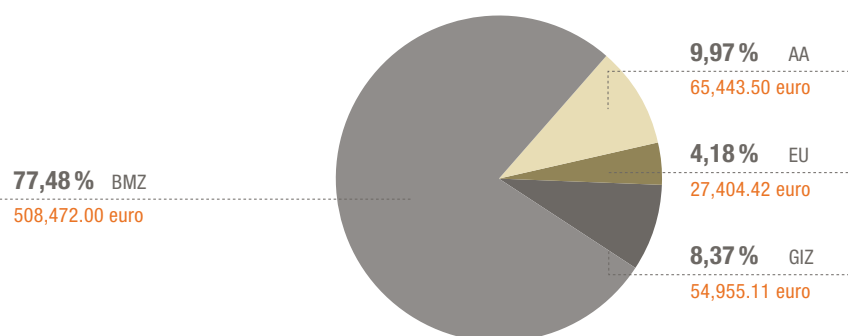
* ADH funding (2012 = 1,434,385.72 euro and 2011 = 1,148,037.54 euro)



Third-party funding

100 % Total

656,275.03 euro



Balance sheet as of December 31, 2012

German medical aid organization action medeor e.V.

ASSETS	2012 (EURO)	2012 (EURO)	2011 (EURO)
A. FIXED ASSETS			
I. Intangible assets	55,026.67		69,556.50
II. Tangible assets	3,304,145.30		3,476,666.72
III. Financial assets	116,523.62	3,475,695.59	116,308.35
B. FLOATING ASSETS			
I. Stocks			
1. Raw and operating supplies	2,673,292.79		2,284,912.89
2. Advance payments	0.00	2,673,292.79	0.00
II. Accounts receivable and other assets			
1. Receivables from supplies and services	159,814.30		380,160.27
2. Receivables from investee companies	198,665.67		164,953.41
3. Other receivables	86,778.69	445,258.66	92,872.47
III. Receivables from major projects		526,998.00	649,626.96
IV. Investments		57,940.00	58,897.00
V. Cash on hand and cash in banks			
1. Cash on hand	5,116.29		4,808.45
2. Cash in banks	4,105,223.11	4,110,339.40	6,242,553.87
C. ACCR. EXP. AND DEFERRED INCOME		11,016.40	7,820.16
		11,300,540.84	13,549,137.05
LIABILITIES	2012 (EURO)	2012 (EURO)	2011 (EURO)
A. NET ASSETS			
Balance 01.01.2012	10,444,799.19		10,309,551.52
Revenue from bequests	-170,250.26		27,775.58
Withdrawals from reserves for intangibles	-601,744.33		0.00
Revenue from purpose enterprise	58,203.95		107,472.09
Balance 31.12.2012		9,731,008.55	
B. RESERVES			
Other reserves		42,871.00	89,711.83
C. DONATIONS AND PROJECT FUNDS NOT YET USED		1,080,714.55	1,848,712.00
D. FUNDS FOR MAJOR PROJECTS NOT YET USED		25,450.25	749,982.91
E. Liabilities			
1. Amounts owed to credit institutions	109.65		0.00
2. Liabilities from supplies and services	66,608.43		95,892.52
3. Amounts owed to affiliates	791.40		11,010.55
4. Other liabilities	352,987.01	420,496.49	309,028.05
		11,300,540.84	13,549,137.05

Accounting and valuation policy

The annual accounts (balance sheet and profit and loss account) of the society were prepared in accordance with the principles of proper accounting and adhering to the regulations applying to all traders in Sections 242 ff. and 264 ff. of the German Commercial Code (HGB). The balance sheet was drawn up on a statement of accounts form and was structured based on Section 266 of the HGB. The special features of the society as an organization to canvass on behalf of charity were included in accordance with Section 265 of the HGB. The structure of the profit and loss account was based on Section 275, paragraph 1 of the HGB, using the cost of sale method. The balance sheet was audited by an independent financial auditor according to the principles of Sections 316 ff. of HGB. This is a voluntary audit in accordance with Section 12, paragraph 3 a of the articles of association of the action medeor Foundation. In the course of the audit, the audit standard "Auditing of alliances" (IDW PS 750) and the IDW statement on the presentation of society accounts (IDW RS HFA 14) as well as on organizations collecting donations (IDW RS HFA 21) were adhered to.

The **intangible assets** were valued at purchase price and written off linearly on the basis of what is normally a three-year period of use, according to Section 253 paragraph 3 of HGB and Section 7 paragraph 1 p. 1 of EStG (Income Tax Act).

Fixed assets are valued at purchase cost according to Section 255 par. 1 of HGB, after depreciation by the planned straight line method, taking into account depreciable asset life. The item "Zugang Gebäude" (access to building), refers in particular to expenditures for insulation-related works done on the warehouse from the year 2008. The depreciation rate for the building is 2 % and 4 % and for the courtyard attachment and exterior plant between 5.26 % and 10 % per year. For assets of minor value worth more than 150.00 euros but not more than 1,000.00 euros, a collective entry was made in the current reporting year in accordance with Section 6, par. 2a of the EStG, depreciated at a rate of 20 %.

In the context of **financial assets**, the society in particular holds with 100,000.00 euros a 100 % share of the charitable action medeor International Healthcare GmbH, as well as shares in the Ökumenischen Entwicklungsgenossenschaft e. V. to the value of 11,083.62 euros.

The **stocks** of current assets were in principle valued at purchase cost taking into account lower-of-cost-or-market principle according to Section 254 par. 3 of the HGB and are divided into medicines, equipment, packaging material and handicrafts.

Receivables and other assets are set at their face value and listed individually. Of the receivables from supplies and services, 35,990.82 euro had not yet been paid as of April 4, 2013.

The receivables from the major project Lokale ARV-Produktion decreased to 526,998.00 as of December 31, 2012. In a contract from 24th November 2006, the organization committed itself to the European Commission to carry out a major project in Tanzania for the production of HIV/AIDS medicines. The project started on December 1, 2006, with an initial operational phase of 40 months. This was extended on February 11, 2010 to 72 months, lasting until November 30, 2012, with an amendment to the contract mentioned above. The European Commission granted yet another extension lasting until May 31, 2013. In 2008, a partnership agreement with the project partner was signed, under which the partner was committed to supporting the project with 727,902.00 euro.

The **investments** of the current assets are shown at purchase cost taking into account the lower-of-cost or market principle according to Section 254, par. 3 of the HGB.

Cash on hand and cash in banks were set at the respective nominal values

The **deferred income** item covers costs before the balance sheet date according to Section 250, par. 1 of the HGB, insofar as they represent costs for a specified time after the balance sheet date.

The **reserves** were set in accordance with Section 253, par. 1 p. 1 of the HGB, based on a reasonable commercial estimate at the time when they are expected to be called. They take account of recognizable risks and unknown liabilities.

The **donations and project funds not yet used** are liabilities from not yet spent freely disposable donations as well as donations in kind. Cash liabilities (free and tied to recipients) were recognized as liabilities with the repayment amounts on the balance sheet date in accordance with Section 253, para. 1, p. 2 of the HGB. The not yet used payments in kind were set at their current value. In the case of free donations and donations in kind, this relates to donations which have not been allocated to certain recipients. The free donations include donations from greeting cards totaling 14,607.80 euro as well as income from granting by bequest. The donations tied to recipients are recipient-specific donations and donations arising from "sponsorship campaigns". The use of donations tied to recipients is treated in bookkeeping terms as credits in the relevant debtor account of the recipient. They were shown on the balance sheet day under miscellaneous liabilities. As of December 31, 2012 they have not yet been used in full for delivery of medicines and equipment.

Profit and loss statement from January 1 to December 31, 2012

German medical aid organization action medeor e.V.

	2012 (EURO)	2012 (EURO)	2011 (EURO)
1. Income from sales	2,854,937.59		3,760,439.29
2. Proceeds from the investment of donations	5,853,465.96		6,456,54.06
3. Proceeds from the contributions of third parties to projects	2,809,535.65		5,095,390.16
4. Other forms of revenue	77,641.97	11,595,581.17	74,618.00
5. Expenditures for raw and operational materials		-4,453,019.40	-4,922,761.06
6. GROSS PROFIT		7,142,561.77	10,464,231.45
7. Personnel expenses			
a) Wages and salaries	-1,927,655.58		-1,882,046.01
b) Social security contributions and expenditures for pension and support	-404,435.34		-389,538.52
c) Voluntary social security payments	-27,863.96	-2,359,954.88	-26,065.90
8. Depreciation of intangible and tangible assets		-304,114.65	-295,866.96
9. Other operating expenses		-5,042,371.96	-7,797,029.75
10. OPERATION PROFIT		-563,879.72	73,684.31
11. Other interest and similar income		50,939.73	52,174.71
12. Interest and similar expenses		-30,600.39	-18,386.93
13. NET PROFIT		-543,540.38	107,472.09
14. Withdrawals from reserves for intangibles		601,744.33	0.00
15. REVENUE FROM PURPOSE ENTERPRISE		58,203.95	107,472.09

Explanatory notes on the profit and loss account

The profit and loss accounts were prepared in accordance with the regulations applicable to all traders in Sections 238 ff. and 264 ff. of the German Commercial Code (HGB). The structure was based on Section 275, paragraph 1 of the HGB, using cost of sales method.

The **revenue** from sales consists of the supply of medicines and equipment as well as the providing of pharmaceutical advisory services at cost price.

The **proceeds from the use of donations** arise when costs financed by donations are treated as a reduction in the entry "donations not yet used". These costs include the donation of medicines and equipment, the cost of public relations, the implementation of projects, pharmaceutical advisory services and the management of donations.

The **other operational costs are administrative costs** as well as costs for carrying out projects for development cooperation, humanitarian aid, pharmaceutical consultations and education and public relations. The costs

for the transport of medicines and equipment to the destination countries come to a total of 494,565.23 euro. The costs of supplements and information material for donation campaigns come to a total of 427,767.15 euro. According to the provisional calculations for the calendar year 2011, the share of administrative and marketing and communications costs comes to 22.81 % (in the previous year 20.05 %).

The **payment of employees** is done according to the scale of civil services (TVöD) and of wholesale and foreign trade. The payment of pharmacists is based on the pay scale for pharmacy staff. The wages and salaries include salaries for the management level (two board members and two department heads) amounting to a total of 299,707.11 euro.

Interest and similar income come primarily from the management of assets.

More information can be found in the 2012 year-end statement, which can be viewed at www.medeor.de/jahresbericht.

Audit certificate



The action medeor foundation

"I am glad that the foundation has become so popular. Since the program was conceived in mid-2012, we have received five loans. These funds we have been entrusted with have already been put to work."

Linda Drasba

Your point of contact at the foundation



Giving the gift of health – Enabling futures

Health for all, worldwide – This has been the goal that action medeor has strived for from the beginning. The organization founded the action medeor Foundation in 2001 in order to achieve this goal and to provide the aid organization with a stable and long-term foundation.

The foundation provides a permanent source of aid that will last well into the future. Assets placed with the action medeor Foundation remain 100 % intact. This is because the foundation uses only the interest generated from these assets. The funds obtained in this manner are used to support action medeor's various activities.

A variety of possibilities

The action medeor Foundation offers a variety of options to provide a permanent source of aid. Choosing to entrust us with your assets increases the foundation's assets and consequently the interest received, which is then used to support a range of projects. If a donor would like to decide how the revenue from his endowment is used, he may choose to support a particular theme fund or create his own foundation fund as part of the action medeor foundation. Foundation loans allow donors to make a certain amount of money which is currently not required by the donor to be loaned to the foundation for a limited period of time. This loan will be returned in full at the end of the retention period.

Bequeathing assets to the foundation

Many people would like to help even after they have passed on to the next world. By including the action medeor Foundation in their wills, people can also donate assets to the foundation as part of their legacy. action medeor organizes informational evenings on the topic of bequests twice a year. An experienced attorney informs

interested parties on the basics of inheritance law and the different donation options.

Developments in 2012

The action medeor Foundation had approx. 1.15 million euro in assets at the end of the year (2011: approx. 1.13 million euro). With revenue from interest, the aid organization enables healthcare worldwide. An increasing number of people include action medeor in their wills. In 2012, the foundation received approx. 176,000 euro from bequests (2011: 31,272 euro). In addition, over the year, the foundation was endowed with loans with a total worth of 105,000 euro from committed donors. Interest from these loans are also used to fund action medeor projects.

You can use the fold-out card on the last page to request information brochures on endowments and wills. Linda Drasba will be glad to answer any questions you may have. All information will be handled with discretion.

Tel.: 0049 (0) 2156/97 88-173.

Balance sheet as of December 31, 2012

The action medeor Foundation

ASSETS	2012 (EURO)	2012 (EURO)	2011 (EURO)
I. NON-CURRENT ASSETS			
Financial assets		800.00	800.00
II. CURRENT FIXED ASSETS			
1. Securities	982,232.67		963,193.90
2. Cash in banks	276,543.23		147,712.68
3. Other receivables	23,057.28	1,281,833.18	25,157.44
		1,282,633.18	1,136,864.02

LIABILITIES	2012 (EURO)	2012 (EURO)	2011 (EURO)
I. EQUITY			
1. Endowment			
Basic assets	457,583.16		457,583.16
External donations	624,144.74	1,081,727.90	605,144.74
2. Funds carried forward			
from basic assets	61,389.25		59,483.81
from external donations	26,370.48	87,759.73	6,647.83
II. RESERVES		2,499.00	2,499.00
III. AMOUNTS OWED TO CREDIT INSTITUTIONS		0.00	0.55
IV. OTHER LIABILITIES		110,646.55	5,504.93
		1,282,633.18	1,136,864.02

The increase in the balance sheet total in 2012 was mainly due to foundation endowments. The foundation has offered this new option for providing aid since mid-2012. The five loans with a total sum of 105,000 euro are to be found under the entries "Other liabilities" and "Cash in

banks". The annual result for 2012 from the two foundation assets worth 19,722.65 euro was added to the funds carried forward from external donations. 1,905.44 euro from the annual result for the year 2012 was added to the funds carried forward from basic assets.

Profit and loss statement from January 1 to December 31, 2012

The action medeor foundation

	2012 (EURO)	2012 (EURO)	2011 (EURO)
1. Donations	50.00		50.00
2. Interest and similar income	39,331.27		43,443.25
3. Income from write-ups	290.00		669.25
4. Capital gains	23,929.99	63,601.26	7,445.00
5. Write-offs on securities	-2,509.06		-4,072.69
6. Bank charges	-5,674.78		-5,536.30
7. Losses from disposals	-5,851.88		-11,567.68
8. Audit costs	-2,499.00		-2,626.00
9. Public relations and printed material	-8,761.32		0.00
10. Other expenses	-513.54		-196.49
11. Expenditures conforming to statutes	-16,000.00		-12,200.00
12. Other taxes	-163.59	-41,973.17	0.00
13. PROFIT OR LOSS FOR THE YEAR		21,628.09	15,408.34
14. Allocation of revenue reserves		-21,628.09	-15,408.34
		0.00	0.00

The action medeor Foundation documented a profit of 21,628.09 euro for the 2012 business year. Due to the higher profits from the sale of securities as well as the decrease in losses from the sale of securities, the profit increased by 6,219.80 euro as compared to the previous

year. The annual profit of 21,628.09 euro was generated from basic assets (1,905.44 euro) and two foundation funds (21,628.09 euro). The president of the foundation, Bernd Pastors, carries out his duties voluntarily, as do the other members of the panel.



action medeor Tanzania – A reliable partner for local health posts

action medeor has constructed a local pharmaceutical distribution center in Daressalaam, Tanzania, action medeor International Healthcare gGmbH, which supplies religious and non-commercial health posts in the country and in neighboring countries with affordable and high-quality medicines.

The charitable organization action medeor International gGmbH, founded in Tanzania in 2004, is a 100 % subsidiary of the medical aid organization action medeor. It is financed with donations to action medeor and surcharges on the pharmaceuticals which cover operating costs. action medeor Tanzania works exclusively with authorized supplies and reliable manufacturers. Its activities are inspected annually by external auditors.

Developments in 2012

In 2012, the amount of aid provided by the Tanzanian pharmaceutical warehouse was increased. action medeor Tanzania supplied 204 health posts with medicines and medical equipment for approximately 1.2 million euro, 10 percent more than in the previous year. In addition, the organization oversaw four health projects in the north of the country, which was affected by the drought in East Africa.

In addition to its core activities, action medeor Tanzania offers the Tanzanian team, which has now grown to include eleven people, with secure jobs. In order to cope with the increasing importance of the gGmbH and its close integration with action medeor itself, an additional voluntary director was appointed in 2012 to work alongside Christoph Bonsmann and Bernd Pastors.

Better healthcare in the south of Tanzania

action medeor Tanzania is currently faced with a huge

challenge: In particular, the rural health posts in the south have only restricted access to medicine due to their remote location. The action medeor partners often have to undertake long journeys to Daressalaam in order to obtain medicine and equipment for their health posts. This is time-consuming and expensive.

In order to improve access to medicine for the remote and rural health posts, action medeor Tanzania plans to build an external warehouse in the city of Masasi in the south of the country in 2013. Local partners here will have the same inventory stock as in the warehouse in Daressalaam at the same prices. After a planning and reconnaissance phase which started in 2012, the move into the new warehouses will begin in 2013, as will the hiring and training of new staff. The first medicines are slated to be delivered from the warehouse in Masasi to the health posts in mid-2013.

The construction of the additional warehouse in Masasi was made possible by the professional team in Daressalaam headed by the action medeor Country Director Karl Friedrich Steinhausen and the Managing Director Gerald Masuki. In addition, Jungheinrich AG provided valuable support for the storage facility.

Balance sheet as of December 31, 2012

action medeor International Healthcare gGmbH

ASSETS	2012 (EURO)	2012 (EURO)	2011 (EURO)
A. FIXED ASSETS			
I. Intangible assets	11,335.44		8,903.56
II. Tangible assets	16,359.58	27,695.02	20,539.34
B. FLOATING ASSETS			
I. Stocks		256,516.11	286,399.36
II. Accounts receivable and other assets			
1. Receivables from supplies and services	169,802.15		161,859.61
2. Receivables from shareholders	791.40		11,010.55
3. Other receivables	8,299.87	178,893.42	20,328.59
III. Cash on hand and cash in banks		177,493.32	219,985.77
C. ITEMS ACCRUED AND DEFERRED		7,809.56	8,113.55
		648,407.43	737,140.33

LIABILITIES	2012 (EURO)	2012 (EURO)	2011 (EURO)
A. EQUITY			
I. Share capital	100,000.00		100,000.00
II. Profits/losses carried forward	40,191.57		35,504.07
III. Annual surplus	11,877.39	152,068.96	4,687.50
B. RESERVES			
1. Tax reserves	4,800.00		33,600.00
2. Other reserves	31,337.48	36,137.48	9,456.95
C. DONATIONS AND PROJECT FUNDS NOT YET USED		85,859.84	114,232.27
D. LIABILITIES			
1. Liabilities from supplies and services	204,295.69		227,053.98
2. Amounts owed to shareholders	147,925.56		164,953.41
3. Other liabilities	22,119.90	374,341.15	47,652.15
		648,407.43	737,140.33

Profit and loss statement from January 1 to December 31, 2012

action medeor International Healthcare gGmbH

	2012 (EURO)	2012 (EURO)	2011 (EURO)
1. Income from sales	1,231,969.99		1,123,996.11
2. Income from the use of donations	99,810.35		85,716.69
3. Changes in stock	-29,883.25		-14,065.62
4. Other operational revenue	38,576.78	1,340,473.87	117,724.04
5. Purchases			
a) Expenditures for goods purchased	-885,205.43		-905,350.66
b) Expenditures for services purchased	-12,073.62	-897,279.05	-28,148.44
6. Staffing costs			
a) Wages and salaries	-167,988.68		-100,426.33
b) Social security contributions and expenditures for pension and support	-51,675.83	-219,664.51	-50,657.55
7. Write-offs		-12,733.54	-12,270.11
8. Other operating expenses		-179,627.92	-203,239.78
9. Other interest and similar income		1,194.12	910.47
10. Interest and similar expenses		-8,232.46	-9,501.32
11. Profit from normal business activities		24,130.51	4,687.50
12. Tax on income and revenue		-12,253.12	0.00
13. ANNUAL SURPLUS		11,877.39	4,687.50

action medeor International Healthcare gGmbH recorded a profit of 11,877.39 euro in 2012. The eleven employees and the on-site qualified AGEH personnel were able to increase revenue by almost ten percent. Despite the increase in staffing costs due to new hires and compen-

sation for inflation, the gGmbH was able to more than double the profit as compared to the previous year. Bernd Pastors and Christoph Bonsmann, the directors of the gGmbH, perform their duties voluntarily.

Status report

Presenting the organization and its operations

action medeor's activities in 2012 consisted mainly of medical relief deliveries, mostly to Haiti, Zimbabwe and Benin. Thanks to the large medicine warehouse in Tönisvorst and a great number of competent local partners, the organization was able to provide effective medical relief quickly and reliably.

In addition to emergency and disaster relief, action medeor has always been, and continues to be, a valued charitable purchaser of medicines and medical products for a great number of small project partners in Africa, Asia and Latin America. For example, in 2012, approximately 73 percent of all relief packages had a value of only 2,000 euro.

Overall, the number of medical deliveries is decreasing, while many partners in the South are currently able to fulfill their needs by purchasing medicines locally. By providing qualified pharmaceutical advice, action medeor has worked intensively on improving local infrastructure, thereby helping to maintain a high standard of quality. This has allowed a large portion of medical relief for East Africa to be processed directly via action medeor International Healthcare gGmbH, and not through the medical warehouse in Tönisvorst. This also allowed over 1.2 million euro in medical relief to be processed on-site in 2012.

The institutional support of action medeor projects totaled approximately 850,000 euro. Sources of third-party funding, such as the German Federal Ministry for Economic Cooperation and Development (BMZ), the Ministry of Foreign Affairs, the World Health Organization (WHO), and the Deutsche Gesellschaft für Internationale Zusammenarbeit (German Society for International Cooperation or GIZ) trust in the ability of action medeor to provide competent relief.

The amount of funds donated was able to be maintained at a high level in 2012, in part because action medeor was able to obtain special funding through the disaster relief association "Aktion Deutschland Hilft" and the foundation "Stiftung RTL – Wir helfen Kindern e. V."

Economic situation

1. Proceeds and assets

With total proceeds of 11.6 million euro, 3.8 million euro less funding was available than in the previous year. Thanks to the newly-introduced cost-center accounting, positive earnings of 58,000 euro could be recorded for the year 2012, which counts towards our own equity.

From the dissolving of reserves amounting to 601,000, which were deferred for project obligations in 2013 and 2014, the net assets have been reduced by a total of 543,000 euro.

2. Addendum

At the time our report was compiled, no occurrences of special interest took place after the end of the business year.

Description of the opportunities and risks of future development and prognosis

In the future, the development of the economic purpose enterprise will, in addition to the cost trend for warehousing, quality control and the fulfillment of orders, depend mainly on the general import situation in the partner countries. Furthermore, the construction and development of local structures for the production and distribution of medicines, which action medeor supports, also need to be considered. This development will shift the relief from Europe directly to Africa, allowing it to become more stable. A consequence of this development is the reduction in relief provided by action medeor from its medicine warehouse in Tönisvorst. With the establishment of a customs warehouse, the expansion of the product range and close cooperation with local procurement stations in Africa, we plan to cut back the sale of medicine over time.

In years with a high number of disasters, during which action medeor is needed as a quick and reliable partner, the relief provided by action medeor will naturally increase.

The demand for providing basic and further training for pharmacists in Africa is continually increasing. In order to provide long-term development for our partners in countries in the South, action medeor will continually expand its activities in this area.

In order to secure long-term financing for the many duties action medeor has, it continues to be necessary to increase the amount obtained from regular donations. With the increasingly positive trend for regular donations, the expansion of online fundraising activities and the increased willingness of companies to provide their cooperation, we are on the right track.

Outlook for 2013

Disaster follow-up and prevention

For the area of humanitarian aid, the tasks in the coming year will also consist of continuing with reconstruction projects, especially those which were initiated after the large-scale earthquake in Haiti and the severe floods in Pakistan. The emphasis is on reducing the effects of future catastrophes by implementing preventive measures. In Pakistan, for example, new housing is being built on dams, so that they will be protected from future floods.

Fighting diseases of poverty

Project work will continue to concentrate on fighting HIV/AIDS and malaria. Important aspects of this project are increasing awareness and preventive measures, and increased access to diagnosis and therapy options. action medeor will be putting special emphasis on improving the health of mothers and their children in the following year as well. This includes the basic and advanced training of midwives in order to better handle high-risk pregnancies.

Professional pharmaceutical consulting in South Sudan

action medeor has planned comprehensive training activities for qualified pharmaceutical employees in South

Sudan. In doing so, the organization is making an important contribution in a country where health and education have been neglected for many years due to internal conflicts.

Additional expansion of customs warehouse

In order to obtain medicines that are both high-quality and low-cost, action medeor will continue to expand the existing customs warehouse over time in 2013. This will make more storage space available for purchasing goods from non-EU countries.

Expanding activities in Tanzania

Since 2005, action medeor has been represented in Tanzania by the charity subsidiary, action medeor International Healthcare, headquartered in Daressalaam. In order to ensure a better supply of medical items to religious and non-commercial health facilities in the south of Tanzania, an additional distribution center is to be constructed in Masasi.

Economic plan 2013

ECONOMIC PLAN 2013	EURO
Financial and in kind donations	7,300,000.00
Donations not yet used 2012	1,000,000.00
TOTAL	8,300,000.00
Medical aid *	3,200,000.00
Pharmaceutical advisory services *	250,000.00
Humanitarian aid *	1,560,000.00
Development cooperation *	300,000.00
Marketing, communications and education	1,740,000.00
Administration	1,250,000.00
TOTAL	8,300,000.00

* Project expenditures

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