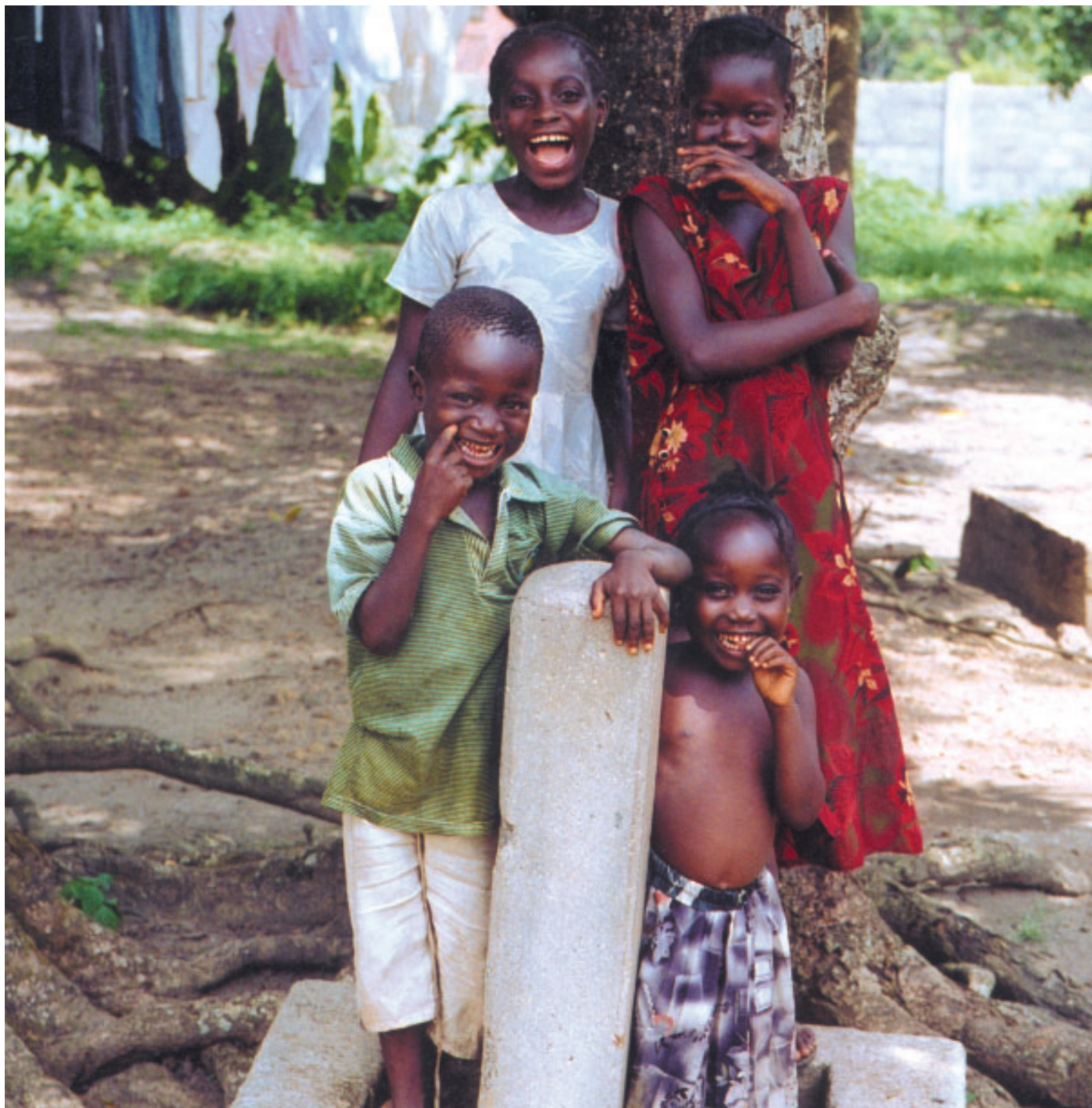


A REVIEW: 1993-2002



10 YEARS OF SAVING LIVES...

LETTERS

Letter from Geoff Prescott, CEO

This review reflects the 'can do' determination of Merlin's founders not to be passive when faced by suffering. It demonstrates that a comparatively small organisation can make a major difference to the world.

It is my great privilege to work with an extremely talented team – a team which spans 750 national and 65 expatriate staff in the 12 countries where we currently operate, as well as 30 staff at our London HQ. However, pride in our accomplishments is tempered by anger and sorrow at the continuing need for our work. If we now live in a global village, what an insecure and violent one it is.

As my first year as CEO of Merlin draws to a close, I feel honoured to be leading one of the UK's most dynamic and effective aid agencies as it celebrates its 10th anniversary. As we enter our second decade, we will ensure that Merlin continues to be a highly effective humanitarian force.

We look forward to meeting future challenges together.



Geoff Prescott
January 2003


Letter from George Cox, Chairman

Since becoming Chairman of Merlin's Board of Trustees in 2001, I have been impressed constantly by the dedication and often by the courage of Merlin's doctors, nurses and logisticians. Their presence can literally mean the difference between life and death for countless people.

Coming from the business world, I also draw great satisfaction from knowing that Merlin is efficient as well as effective. 92 pence is spent directly on our programmes in the field – a reflection of Merlin's commitment to putting people first and making every donation count.

And those donations really are vital. They give Merlin the crucial flexibility to respond to crises quickly. Every donation means more lives saved, more suffering alleviated. It's as simple as that.

I am very proud to be part of the Merlin team as we celebrate our 10th anniversary. My thanks go to Geoff Prescott and all the Merlin staff, to our volunteers and donors, and to my fellow trustees for their hard work over the past twelve months.



George Cox
January 2003

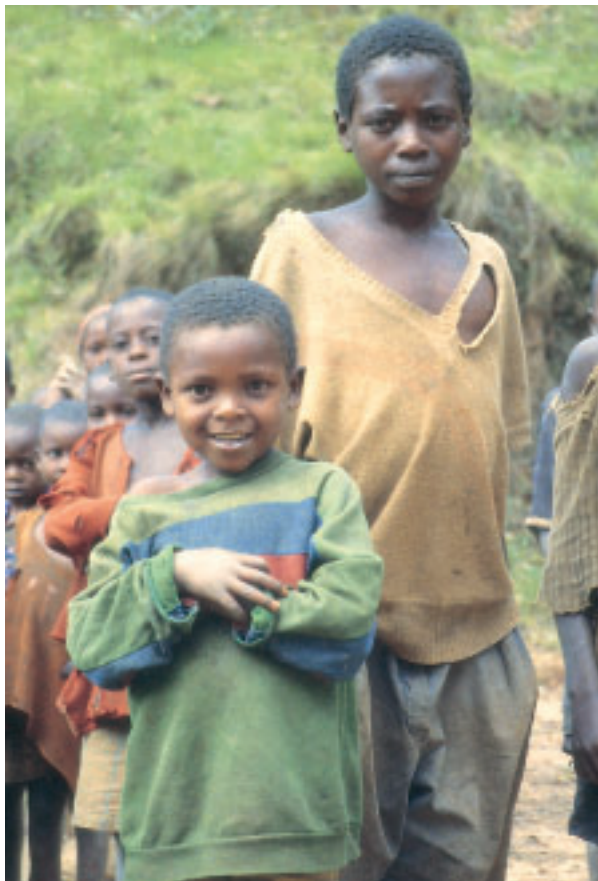
OUR MISSION

Merlin is a UK charity that provides healthcare in crises. Founded in 1993, Merlin has worked in 30 different countries and has helped save and improve the lives of millions of people.



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HOW IT ALL STARTED

Merlin's work is based on the humanitarian principle.

Regardless of race, gender, religion or politics, all people have a right to healthcare.

Merlin filled the need for a UK charity to apply this principle internationally in situations of crisis.

"The fundamental aim was to work with the most vulnerable people, where the local infrastructure had fallen away, in situations of conflict or natural disaster," says Nicholas Mellor, who founded Merlin with Dr Chris Besse and Mark Dalton in 1993.

Since 1993, Merlin has provided healthcare and humanitarian assistance in 30 countries.

EVERYONE HAS A RIGHT TO HEALTHCARE

"We recruited committed people who were hungry to make a difference," recalls Annie Macklow-Smith, whose background as a nurse brought her to Merlin in 1993. "From the start there was a big vision and an aggressive attitude. Staff and volunteers had to give 150%."

Dr Chris Besse adds, "The need was obvious, the people able to help were there – although they didn't always know it! The skill, joy and challenge of Merlin is putting the two together and making a difference."



10 Years of Disaster and Emergency Relief

CARING IN CONFLICT

In 1994, following the genocide in Rwanda, two million people fled across the border to Zaire. There, Dr Paul Eunson headed Merlin's team at the Ndosha children's refugee camp.

"The camp was unnaturally quiet for a place with so many children," he recalled. "They were not talking, laughing – or even crying."

Merlin's programme found innovative ways to combat post-traumatic stress syndrome, as well as other illnesses. "We held a dysentery song contest in which children competed for prizes. They sang and danced and put over their health message in a manner that was natural to their culture and easily understood by all the children. Their songs were broadcast on a local radio station to other camps."

Dr Eunson was awarded the Pierre Strauss International Medical Prize For Childcare for this work with Merlin.

SEEKING OUT NEED

In September 2000, hundreds of families escaped drought and fighting around their northern Afghanistan homes, and fled towards Tajikistan. But the Tajik government, fearing they might be overwhelmed, barred them entry. In no man's land on islands in the Pjang River, 10,000 were stranded. They did not just have nowhere to go. They were nowhere.

For over a year, the only humanitarian aid they had was Merlin's. Mobile clinics delivered primary healthcare, medicines and maternity support. Merlin also trained refugees in basic diagnosis and treatment. Mass immunisation of children against measles, polio, tetanus and diphtheria achieved 95% coverage.

In April 2002, after the fall of the Taliban, the refugees returned to their homes. Merlin was part of the co-ordinated effort to ensure that they set out with food and other essentials. Their villages continue to receive healthcare from Merlin clinics.

In 2001, for her ongoing work with Merlin, especially on the Pjang River islands, nurse and midwife Valerie Powell was made an MBE.



"Managing risk was always a very important part of Merlin's operations. It's an area where our expertise is unique."

Nicholas Mellor, co-founder of Merlin.



REACTING FAST

Rwanda, April 1995: 20,000 survivors of a massacre in Kibeho refugee camp were herded into a football stadium at gunpoint. It was a chaotic and desperate situation.

Within hours, Merlin doctors set up an emergency field station inside the stadium. Teams treated 700 individuals in a single afternoon.

Merlin established temporary field posts for thousands of refugees forced from other camps. Teams carried out immediately necessary treatments like re-hydration and wound dressing, and also vaccinated against measles.

When huge numbers of people are displaced, epidemics are almost inevitable unless action is taken. Tackling measles, one of the main killers of children under five years, is always a priority.

COPING WITH DISASTER

Natural disasters are inevitable. It is essential to be ready to deal with them.

On 17th January 2002 the Nyiragongo volcano in the Democratic Republic of Congo erupted and destroyed one third of Goma town. Lava flows enclosed 100,000 people. Hospitals and health services were in ruins. There was shortage of food, water and shelter.

Merlin set up emergency clinics within 72 hours, one for the trapped population and another on the Rwandan border, where 6,000 refugees were passing each hour. Families were also provided with blankets, shelter and clean water.

With Merlin's assistance, health centres coped with a doubling of demand, and Goma's General and Maternity hospitals quickly re-activated their services.

Merlin provided crucial help following earthquakes in Afghanistan (1998) and India (2001). Currently, Merlin maintains in-country emergency capacity in 8 countries including Tajikistan, Sierra Leone and the Democratic Republic of Congo and is ready to intervene anywhere when disaster strikes.

10 Years of Helping People Access Healthcare

IN NEGLECTED PLACES

After independence in 1991, the people of Tajikistan succumbed to waves of crisis. The highly centralised Soviet system imploded. National income crashed by 40%. Fifty thousand people died in a civil war that displaced a sixth of the population – up to half a million people emigrated.

Merlin's first project was in response to a massive typhoid outbreak in 1996. Hospitals had no drugs and no clean water. Despite a ceasefire, violence was rife.

Medicines, training, and water and sanitation facilities from Merlin helped rehabilitate health structures in the south of the country where the need was most urgent.

New forms of malaria posed a serious problem, compounded by the stigma it drew as a 'third-world' disease. Cases were being misdiagnosed, leading to many unnecessary deaths. Merlin established correct malaria protocols and provided training in good practice. Over the years, Merlin's programme has expanded across the south and west, covering much of the country. The experience from this work will shortly be applied regionally, with new programmes in neighbouring Uzbekistan and Kyrgyzstan.

TRAINING FOR THE FUTURE

Training gives people a future and makes Merlin's work endure.

Among ex-prisoners and other socially marginalised people in Russia, Tuberculosis (TB) rates are desperately high. Returning to Freedom (a local non-governmental organisation), Dzerzhinsk TB dispensary and Merlin teamed up in 2002 to begin a new TB programme in Nizhniy Novgorod Oblast, north of Moscow.

Facilitated by Merlin, "staff received training in World Health Organisation TB control strategies, and this has opened them up to wider international experience and other approaches to TB treatment," says Alexei Kaligin, the chief TB doctor at Dzerzhinsk dispensary. "The training has given me and my staff new focus, and helped us develop a fresh strategic direction for our work."

Knowledge is a resource that makes the difference between life and death. Congolese traditional birth attendants, refugee health-workers in Afghanistan, Kenyan shopkeepers taught to treat simple malaria – there are countless examples of people whose knowledge has brought benefit to those around them after Merlin training.



"It's very exciting, there's a lot of job satisfaction. It's so exciting when people come to a mobile clinic and they haven't seen a health centre in their community for ten years."

Rose Agengo, Merlin Primary Healthcare Supervisor, Kono, Sierra Leone



IN THE FACE OF PREJUDICE

Merlin nurse Rachael Tapsell was the first western woman allowed into Kandahar after the Taliban take-over in October 1994.

Until Merlin's arrival, the authorities had banned male doctors from treating women, banned female healthcare professionals from practising, and banned women from attending clinics. Rachael's presence on the team enabled Merlin to negotiate with the authorities to establish dedicated clinics for women and children.

In addition, Merlin offered education for women and traditional birth attendants on issues like nutrition and birth spacing. Local female doctors and nurses were given the chance to work again.

After a few months, the principle of access to healthcare for women was accepted. Merlin provided not only essential care and training, but also a model of empowerment and advocacy for the basic rights of women.

MOBILE HEALTHCARE

Sierra Leone, 1999: Thousands of people in the Western Rural Region were driven back and forth as government troops and rebels struggled for control of the capital, Freetown. Government health posts had no medicines or equipment. The unpaid, poorly trained staff were often absent.

From Freetown, in co-operation with the Ministry of Health and Sanitation, Merlin began providing healthcare for settlements and camps using mobile clinics.

How do mobile clinics work? A nurse, a nursing assistant and a health promotion officer pay regular visits to each settlement. They give treatment, immunisation and health advice for free. Community collaboration is always central – talking about problems, getting feedback and building respect.

Mobile clinics bridge the gap when fighting is in progress or when infrastructure has been destroyed. In 2002 tens of thousands of refugees returned to Kono, Sierra Leone. Merlin mobile clinics now serve this region, while a parallel Merlin project helps to rebuild government health posts for a stable, sustainable future.

10 Years of Combating Disease

Merlin has ten years of experience combating disease under adverse circumstances in crisis-ridden locations. Long-term, specialist Merlin programmes around the world fight TB, Lassa fever and malaria. These diseases are preventable and treatable. What kills is lack of resources and lack of knowledge.

LASSA FEVER

Lassa fever is a neglected disease. The people it afflicts are poor, so despite causing many deaths every year in West Africa it is under-researched.

War kills with disease as often as it kills with violence, and disease does not distinguish between civilian and soldier. In Sierra Leone, civil unrest has hindered Lassa patients from reaching hospital, increasing fatalities. Movement of people due to fighting has helped spread Lassa to new areas, and overcrowding makes it harder to isolate and control the disease.

Victims require expert care. Relatives who tend patients at home are at high risk. Merlin supports the only dedicated Lassa fever hospital ward in the world, in Kenema, Sierra Leone, as well as providing training and community education. Soon a new laboratory will facilitate diagnosis and research. The strategy of social mobilisation and swift clinical care of patients is highly cost effective.

No other charity specialises in Lassa fever. Intense fighting has occasionally hindered but has never stopped the programme.

MALARIA

Each year, 300 million people suffer malaria, and a million die. The most vulnerable are children and pregnant women.

In 1998 Merlin became a leading partner in the World Health Organisation's Roll Back Malaria initiative. Merlin contributes its expertise and experience to the campaign to halve malaria in participating countries by 2010.

Thousands of people in Tajikistan, Sierra Leone, the Democratic Republic of Congo, Liberia, Guinea, East Timor, Mozambique, Kenya and Irian Jaya have benefited from Merlin's malaria programmes. The work has included cost-effective prevention strategies, treatment, education, management of outbreaks in emergencies, and research.



"Simple malaria is so easy to treat but people haven't got access to any services."

Nurse, Sierra Leone.



TUBERCULOSIS (TB)

The World Health Organisation (WHO) has declared TB a "global emergency". Eight million people catch TB every year, and three million are killed by it. Rates of infection are on the increase in most continents.

After the collapse of the Soviet Union, the Siberian TB control programme fell apart. An epidemic resulted, with a dangerous proliferation of multi-drug-resistant strains.

Working closely with local partners in Tomsk, Merlin combined a new WHO strategy, Directly Observed Treatment Short-course (DOTS), with the best aspects of traditional Russian practice, to create a cost-effective, culturally appropriate programme. DOTS is two and a half times cheaper than conventional methods, which require long-term medication and monitoring.

To treat multi-drug-resistant TB extremely expensive drugs are required. The World Health Organisation provides these drugs at low cost to a handful of organisations that are able to demonstrate very high standards of practice. Merlin is one of these.

In 1997 the Russian Ministry of Health recognised Merlin's groundbreaking work by making Tomsk their flagship programme for the treatment of TB nationwide. Merlin now runs TB projects in Nizhniy Novgorod (north of Moscow), Georgia and Tajikistan.

HIV/AIDS

The social disruptions and population displacements which occur in crisis situations bring with them the risk of increased rates of infection with HIV/AIDS.

HIV prevention is integrated into all Merlin programmes.



Making a World of Difference

"Before Merlin's arrival, there were lots of infections and diseases. Merlin told us that our drinking water was bad and showed us how to get good drinking water. Now the children are happy and healthy and we are happy about that."

Chairman of the Village Development Committee, Bandasuma village, eastern Sierra Leone.

1993 - 1995

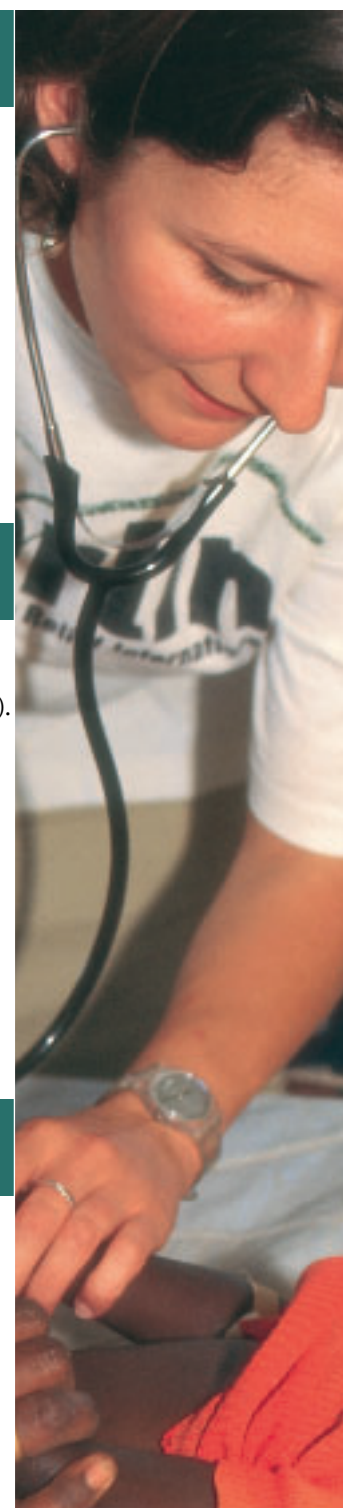
Bosnia: 370 tons of emergency food rations delivered to Sarajevo.
Nagorno-Karabakh: 10,000 children vaccinated against measles.
Azerbaijan: primary healthcare and mobile clinics.
Georgia: medical supplies for war wounded.
Russia: tuberculosis control in Tomsk, Siberia (until 2003).
Zaire: healthcare to war refugees (until 1997).
Rwanda: healthcare in civil war (until 1997).
Afghanistan: cholera programme, and healthcare for women and children (until 1999).
Chechnya: health infrastructure development and vaccination (until 1998).
Sierra Leone: feeding and healthcare in civil war (to present day).

1996 - 1998

Sri Lanka: training and emergency preparedness.
Democratic Republic of Congo: healthcare and infrastructure development in civil war (to present day).
Liberia: healthcare and infrastructure development in civil war (to present day).
Montserrat: assessment of healthcare needs for DFID following volcanic eruption.
Tajikistan: healthcare and infrastructure development (to present day).
Yemen: healthcare in flood emergency.
Congo-Brazzaville: large-scale measles vaccination.
Afghanistan: rapid response following two earthquakes.
Albania: aid to refugees and rehabilitation of public health facilities (until 2001).
Indonesia: disease control in remote areas of Irian Jaya afflicted by El Niño weather (until 1999).
Kenya: malaria control following a massive epidemic in Wajir province (until 1999).
Sudan: sleeping sickness programme and emergency feeding.

1999 - 2001

Honduras: mobile clinics and anti-malaria programme after devastation by Hurricane Mitch.
Kenya: response to massive highland malaria outbreak (to present day).
Afghanistan/Tajikistan: healthcare for refugees on the Pjäng river islands (until 2002).
East Timor: emergency control of malaria and other vector borne diseases.
Mozambique: emergency aid to 250,000 people affected by flood.
Serbia: emergency supplies and rehabilitation of health facilities (until 2002).
Guinea: anti-malaria programme in refugee camps.
India: post-earthquake rehabilitation in Gujarat (until 2002).
Nigeria: response to Lassa fever outbreak.



FOCUS ON 2002

AFGHANISTAN

In Takhar and Kunduz provinces Merlin combats dramatic increases in the spread of malaria and leishmaniasis, another parasite-born disease. Target population 300,000.

Merlin supports 24 clinics. In each clinic health workers are being trained in diagnosis and treatment, in forecasting and responding to outbreaks, and in managing drug stocks, also supplied by Merlin.

In Takhar, Baglan and Kunduz provinces diarrhoea, malaria, malnutrition, measles and respiratory infections are major causes of death.

Merlin established four fixed primary healthcare facilities as well as running mobile clinics in remote areas.

DEMOCRATIC REPUBLIC OF CONGO

Fighting and general insecurity persist in many parts of the country, which war has ravaged for almost ten years. Merlin has been helping since 1997. Target population over 1 million.

Merlin supports more than eighty health centres and four hospitals, providing primary healthcare, drugs, maternal and child health services, and monitoring for epidemics. The effectiveness of Merlin's emergency response capacity was proved after the volcanic eruption at Goma. Traditional birth attendants and community health workers received training, and midwives who participated in earlier schemes had further on-the-job tuition.

In the Kindu area, peasant farmers had been unable to access their fields for over three years, due to conflict.

Merlin set up feeding centres to assist more than 5,000 malnourished children and pregnant and lactating mothers.

GEORGIA

Afflicted by economic decline and civil unrest, at least 35% of Georgia's population lives below subsistence level. Worsening poverty has meant increased TB. Target population 75,000.

Merlin is supporting the Georgian National TB programme in piloting integrated quality-controlled TB diagnosis and management in Shida Kartli region. The work includes laboratory refurbishment for the Regional Hospital and three rural clinics, and creating training programmes in accordance with WHO protocols.

IVORY COAST

Rebels led by disgruntled army personnel control half the country, and hundreds of thousands of people have fled their homes. Target population 30,000.

Immediate threats include lack of primary healthcare, lack of sanitation and increased disease due to suspension of immunisation. In Duekoue, Daloa and Bonoula, Merlin runs mobile clinics for internally displaced people, and helps provide clean water and sanitation facilities. Training programmes have begun for local health staff to improve capacity.

KENYA

It is estimated that 72 Kenyan children die from malaria every day. Merlin works in Kisii and Gucha districts where the disease accounts for a third of all deaths. Target population 1 million.

Merlin's programme improves detection, diagnosis, and treatment. Co-ordination of malaria control activities and empowerment of communities to combat the disease are central to the initiative. Laboratory technicians, nurses, shopkeepers and teachers have been trained in diagnosis, treatment of simple malaria, and prevention methods.

Wajir District has the lowest health status in Kenya and sees regular cholera outbreaks.

Cholera and many other illnesses are spread through poor sanitation. In close co-operation with local authorities, Merlin's water sanitation project in Wajir puts in place improved procedures for waste disposal, provides equipment, and enhances logistical capacity. The project trains the community in preventing and treating disease.

LIBERIA

Liberia has suffered civil war for many years. Target population 500,000.

Following successful programmes in Lofa and Nimba counties, Merlin supports networks of primary healthcare centres in River Cess, Grand Bassa and Sinoe, and improves local capacity with training for health workers and midwives.

Large numbers of refugees have fled to Liberia from the civil war in Ivory Coast.

Merlin gives emergency support to deal with the influx, providing supplies, mobile clinics and healthcare personnel.

OCCUPIED PALESTINIAN TERRITORIES

Restrictions on movement imposed on the general population, including health workers, limit access to healthcare. Target population 100,000.

Merlin maintains an international humanitarian presence and responds to emergency health needs. Merlin brings mobile clinics to villages and provides training to local staff for situations when conflict prevents referral. Women in villages are trained in the basics of home child delivery.

RUSSIA

In the 1990s the prevalence of multidrug resistant TB became a frightening problem. Target population 1 million.

Having developed new, effective systems for TB treatment in Tomsk, Siberia, and raised capacity, Merlin is handing over this project to the Tomsk health authorities. Nizhniy Novgorod (north of Moscow), Georgia and Tajikistan are now benefiting from Merlin's nine years of experience in Siberia.

SIERRA LEONE

After a ten-year civil war, the provision of health services is crucial to rebuilding communities and ensuring the return of stability. Target population 700,000.

Merlin supports the Ministry of Health and Sanitation in providing primary healthcare in Tonkolili, Kono and Kenema districts. Kenema Hospital benefits from materials, drugs, training, support for maternal healthcare and more. Merlin also supports primary level maternal healthcare in Kenema districts and provides training and hygienic equipment for a network of traditional birth attendants.

Serious but preventable diseases are rife. Fifty percent of the people Merlin treats have malaria-related illnesses.

To combat malaria, Merlin trains, educates, and supplies bed-nets. In Kenema, Merlin supports the only specialist Lassa fever treatment ward in the world, and is helping to set up a specialist laboratory. Merlin builds latrines and wells, trains people in their construction and maintenance, and conducts public health education.

Sierra Leone has received a large number of refugees from the civil war in Liberia.

Health support and supplementary feeding for 8,000 refugees is provided by Merlin at Largo refugee camp.

TAJIKISTAN

Seven years have passed since the civil war, yet Tajikistan is still unstable and its economic situation dire, with increasing incidence of communicable diseases of poverty like malaria and HIV/TB. Total target population 3.6 million.

In the last year, focussing on the poorest areas of Khalton Oblast, Merlin has provided essential drugs to 83 medical facilities, supported 130 laboratories and conducted training programmes. Mass vaccinations were carried out to combat a measles epidemic in Rasht Valley. Merlin is re-equipping the specialised TB hospital in Khalton Oblast.

Poor rural communities, the most vulnerable to malaria, have little access to education or government assistance.

In collaboration with the World Health Organisation's Roll Back Malaria initiative, Merlin equips laboratories and trains technicians and community activists.

SERBIA

War and economic collapse seriously damaged Serbia's health infrastructure. Target population 100,000.

Merlin provided emergency winter supplies for vulnerable groups, assisted with technical repairs to four Belgrade hospitals, and supported primary healthcare in eastern Serbia by giving training and equipment. The programme was completed in November 2002.

ASSESSMENTS

Assessments of health needs in crisis situations around the world identify sites for future programmes, and also make an important contribution to humanitarian monitoring.

In 2002 Merlin conducted assessments in Angola, Burkina Faso, Ethiopia, Georgia, Guinea, Ivory Coast, Malawi, Nepal, Nagorno-Karabakh, the Occupied Palestine Territories and Somalia. To carry out these essential precursors to every project, Merlin is entirely dependent on the generosity of individual and corporate supporters, and private trusts and foundations.

EVIDENCE BASED HUMANITARIAN AID PROJECT

Commenced in 1999, the Mellon Project is a partnership with London School of Hygiene and Tropical Medicine, and is funded by the Andrew W. Mellon Foundation.

The project seeks to develop and enhance the evidence base for public health interventions in complex emergencies and related settings. Reaching beyond purely medical approaches, it incorporates inputs from the disciplines of international relations, anthropology, peace building studies and the study of humanitarianism. A central outcome is to bridge the knowledge gap between humanitarian policy makers and field practitioners.



Merlin People

Over ten years, many exceptional individuals have worked with Merlin. Here are just two.

JEANNOT WABULAKOMBE NURSE, DEMOCRATIC REPUBLIC OF CONGO



I work at the moment in eastern Democratic Republic of Congo in a reproductive health programme in Goma health zone. Before Goma, I worked in Maniema province in Beni.

The area of my expertise is public healthcare in complex situations. I'm a Senior Nurse Supervisor but currently I'm the acting medical co-ordinator for the Reproductive Health Goma programme. I'm also a member of the Democratic Republic of Congo emergency team. My work is important because it reduces the high mortality in a crisis situation, it works where there is lack of governance

and systems, and it helps where the community is unable to cope with health issues.

The challenges I have to overcome are many. There is the lack of motivation for Ministry of Health staff and the lack of government policies. There is the lack of qualified medical staff and the non-functional health facilities. There is the lack of community awareness – the community uses private clinics where the quality of healthcare is poor. There is the distance between clinics and the referral health facilities, and the poor state of the roads (medicines and equipment needs

to be carried on motorbikes and on foot). There are the religious obstacles and the cultural impediments. There is the insecurity and the poverty itself.

Our achievements are due to situational leadership, teamwork and partnership. The team with which I work is multi-disciplinary, ready to react when there is need, it's flexible.

Working for Merlin is a real pleasure. Merlin is a good organisation because the objective is the sustainability of the programmes.

AILSASINCLAIR NURSE, UK



An experienced nurse, Ailsa Denny, as she was then, sent her CV to Merlin in 1994, having seen TV reports of a cholera epidemic among Rwandan refugees in Zaire. Forty hours after an interview she was aboard a plane to Goma. It was the start of four remarkable, challenging and occasionally terrifying years.

Nine months in Africa was followed by a posting to Chechnya. Because of the ongoing war there had been no adequate vaccination regime for years. Ailsa worked within the Ministry of Health planning immunisation campaigns. Grozny was

a very tough environment. Moving around the city involved negotiating with conscripted Russian soldiers. The tinkling sound on the roof during an artillery bombardment, a colleague explained, was shrapnel. Ailsa was amazed by the resilience of the population in these terrible circumstances.

She then spent 15 months in Rwanda. A million refugees were returning to the country, and emergency healthcare for them was an urgent priority. Ailsa's last posting with Merlin was to carry out a measles vaccination

programme in Congo-Brazzaville. Measles is one of the seven major killers in developing countries, and poses an especially severe threat in crisis situations. Civil war had destroyed all infrastructure, and in the streets there were frequent gunfights between armed groups.

While in Congo-Brazzaville Ailsa was filmed by the BBC, and a documentary about her was broadcast as part of a series about women working in health titled *Medicine Women*.

Accounts

We don't waste our supporters' donations on unnecessary organisational costs. Of every pound, 92 pence is spent directly on our programmes in the field.

Statement of Financial Activities	£ 000s 2002	£ 000s 2001
Income		
Programme Income	7,312	7,140
Other Income	630	650
Total Income	7,942	7,790
Expenditure		
Direct project Expenditure	7,349	7,303
Fundraising costs	131	147
Management and Administration	476	739
Total Expenditure	7,956	8,189
Net Movement for the year	-14	-399
Reserves at year end	172	186

Highlights

Merlin has turned round the operations of the charity in 2002 and significantly reduced annual operating deficits. Fundraising expenses are only 1.65% of total expenditure. General management and administration expenses are only 6.5% of total expenditure. In sum, 92 pence in every pound is Direct Charitable Expenditure.

The above information is extracted from the financial statements for 2002, copies of which are available from the Administrator, Merlin, 3-15 Trinity Street, London SE1 1DB.

The financial statements were audited by Kingston Smith, Chartered Accountants, whose report was unqualified.

Merlin (Merlin Emergency Relief International) is a registered charity no. 1016607.



FOCUS ON THE FUTURE



Sadly, our mission – to be an independent force saving lives and alleviating suffering – looks to be just as relevant in the years to come as it was when Merlin was founded a decade ago.

Thirty wars are being fought at the time of writing. TB, HIV and malaria are spreading continually. In countless countries, people are helpless should natural disaster strike.

And in some respects, the global response is worsening.

Humanitarian intervention is increasingly politicised. For those who live where the rich nations hold no interests, for the citizens of the 'failed states,' for ordinary people who live in countries controlled by adversaries of the West, there is desperately little help or hope.

Neutrality and impartiality are central to humanitarian work. It is the role of Merlin to stubbornly focus on people as individuals, regardless of all politics.

In crises, healthcare needs proliferate as healthcare provision collapses. Merlin is the only UK charity which specializes in bridging the gap.

Our Commitment

- Merlin is committed to helping people in the most desperate circumstances in the most dangerous and remote places in the world. This will remain our focus.
- Merlin will act in situations neglected by the wider world – in 2003 we will continue to work in the Democratic Republic of Congo, Liberia, Somalia and Tajikistan.
- Merlin will work with local professionals and health authorities to make projects sustainable from the start.

With your support and your donations, we will bring healthcare to whomever needs it, whatever their circumstances, wherever they are.

Friends of Merlin

PRINCE HARRY

Merlin won royal recognition when Prince Harry donated the proceeds from syndication of his official 18th birthday photographs to help our humanitarian cause. He announced his gift after participating in an educational programme at Osmani School in Tower Hamlets, London, given by Merlin staff.

SIMON LLOYD, MERLIN MARATHON RUNNER

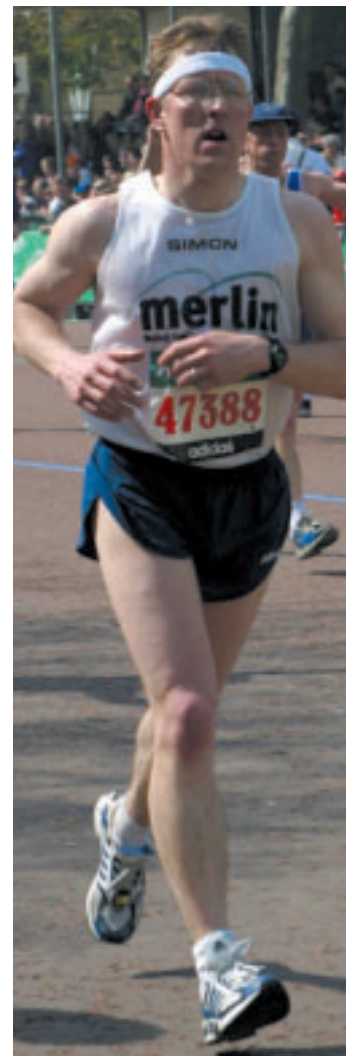
Simon Lloyd has run five marathons raising money for Merlin – that's 131 miles, 165 yards. However, "my efforts are not significant by comparison to those who work for Merlin," he says. "I hold enormous respect for those who have acted on the good intentions which many of us have. Raising money for a good cause is one small way I can help."

MARTIN BELL, OBE - MERLIN PATRON

"Merlin's work is very important. It is not a huge charity, it is not everywhere, and it selects its target missions quite carefully, but it is most effective at providing services and medical help which no one else can, and it does that consistently in some really uncomfortable corners of the world. The world would be a much poorer place without Merlin and much more dangerous. And people would suffer more than they do."

STEPHANIE COOK, MBE - MERLIN PATRON

"The work that Merlin does is absolutely crucial. It is one of the few charities that provides rapid relief in emergency situations and disaster zones, working in remote areas of the world. And what makes Merlin stand out in particular is that it recruits local people – it gets the local population involved so once the charity has left the good work can be carried on. That involves medical education as well as educating the community in health and hygiene, and that is such an important part of the work that is being done."



Without our Supporters Merlin is Nothing but Good Intentions.

“Merlin owes gratitude to more people and organisations than we can possibly list here. We extend our warmest thanks and appreciation to each donor, supporter and friend who has helped us since 1993. Every single donation makes a difference. Thank you for them all.”
 Geoff Prescott, CEO of Merlin

Patrons

- Sir Donald Acheson
- Mr. Martin Bell OBE
- Dr. Chris Besse
- Dr. Stephanie Cook MBE
- Prof. June Clark
- Mr. Nick Danziger
- Mrs. Jessica Douglas-Home
- Lord McColl of Dulwich
- Mrs. Mary Fagan
- Mr. Martin Griffiths
- Mr. Eric Newby
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