

Keeping you in touch with MERLIN around the world

## Shock waves

### AFGHANISTAN

As we go to press, MERLIN volunteers are urgently moving supplies of medicines, food and blankets through the remote mountains of northern Afghanistan to help survivors of the devastating earthquake.

Up to 50,000 people have been affected by the quake, which measured 6.1 on the Richter scale. Many are now living rough on the snow-covered mountain slopes, trying to protect themselves from bitter winds and freezing temperatures. Thousands have lost their homes and possessions and are acutely vulnerable to hypothermia, starvation and disease.

No-one knows for sure how many people were killed in the disaster: estimates vary from 2,000 to 4,600. In isolated villages reduced to rubble, the dead are still being recovered and buried. It is the survivors who need help now.

MERLIN volunteers have been working round the clock to get relief supplies to the quake zone by any means available. They led the first convoy of relief supplies to reach the epicentre, with a cargo of 20 tonnes of food and medicines. The journey took 2 days to cover 150 miles, on tortuous mountain roads damaged by earth tremors and freezing weather.

The convoy was organised by MERLIN volunteer Drew Gilmour, who spoke to Response from the quake zone. "The UN asked me to lead their convoy from the nearest airport at Faizabad, where MERLIN already has a base," he said. "After two days on unbelievably hard roads, we drove through the area which had been the epicentre of the earthquake, a place called Ganj. We saw chasms in the earth, nine feet wide and fifteen feet deep. We saw devastated villages. Some were completely levelled. One was like a sandcastle squashed by a giant hand.



"There were young people – survivors – shivering and freezing in wretched little huts. There were people huddled beside mud walls, the only shelter they could find, building little fires out of sticks.

"Even now," he added, "ten days after the quake, I see people without shelter, without food, without hope. It is heart-breaking."

For days, aid efforts were hampered by fog and snow which prevented supplies from arriving by air. As soon as the fog lifted, MERLIN's team in neighbouring Tajikistan flew in a helicopter with medicines, high energy biscuits and blankets. A second convoy has now been led in by road, carrying tents, ministoves and food.

Aid agencies have worked closely to co-ordinate the international response. MERLIN, World Food Programme, the

International Red Cross, MSF and Afghanaid are collaborating to protect the survivors. MERLIN has been asked to start an immediate vaccination campaign to immunise 25,000 people against measles, a highly contagious disease with fatal consequences in refugee situations. Yesterday the campaign began, with the inoculation of 500 children.

*This year MERLIN is 5 years old – and we're launching a Fifth Birthday Appeal to raise £750,000*

Page 3 MERLIN five years on Page 4 How to join the MERLIN 5Appeal

## Saving lives around the world

**September** **Afghanistan:** A severe outbreak of diarrhoeal disease is expected in the north of Badghis province, where up to 200 people die each year during the pistachio nut harvest, due to toxins in the nuts and other causes. MERLIN provides rehydration treatment and health education, substantially reducing the number of deaths.

**October** **Democratic Republic of Congo:** Volunteers return to restart our primary health care programme in the dense rainforests of Maniema district, having previously evacuated because of deteriorating security. The programme expands to support an extra 20 clinics in the bush around Punia and Kampene towns, serving civilians affected by the recent civil war.

**London:** MERLIN hosts an international tuberculosis conference, bringing together TB experts from Britain and Russia. The conference follows a ground-breaking decision by the Russian government to adopt MERLIN's TB project in Siberia as a pilot study for TB control throughout Russia. BBC1 broadcasts a special documentary on TB including film of MERLIN's TB project.

**November** **Congo-Brazzaville:** Following a military coup and civil war, civilians return to the capital city. MERLIN assesses their medical needs, resulting in a mass campaign to vaccinate 200,000 children against measles.

**Sudan:** An epidemic of sleeping sickness sweeps the South. MERLIN's assessment team recommend starting a programme against tsetse flies, which carry the disease. If successful, it will be a model for the control of sleeping sickness



Emma Bonino, the European Community's Commissioner for humanitarian affairs, visited MERLIN's project in Afghanistan in September. Since one in four Afghan children die before the age of five, Commissioner Bonino was particularly interested in MERLIN's mother-and-child feeding programme there, which aims to reduce child mortality rates. This project, in the remote mountains of Badakhshan, is funded by the European Community Humanitarian Office. Her visit and MERLIN's project were filmed by BBC1's Newsnight for two reports on British television. She is pictured with Medical Co-ordinator Panna Erasmus. (Picture: Kara Brydson)

across sub-Saharan Africa. This project is a collaboration with CARE International and the International Medical Corps.

**December** **London:** MERLIN hosts its first Annual General Meeting, an international gathering attended by trustees and staff from London and the field. Past achievements and future challenges are considered in four days

of intensive workshops and presentations. The AGM was sponsored by the Reuter Foundation and Cable and Wireless.

**Afghanistan:** For the first time, MERLIN volunteers prepare to stay in the remote mountains of Badakhshan through the harsh winter, so that they can continue essential support to the province's main hospital and health clinics. This area will be almost completely

cut off by snow until the Spring, so stockpiles of food and fuel have been laid in.

**Sierra Leone:** Despite escalating conflict in the East, MERLIN continues to provide emergency support for the civilian population in Kenema district, running a nutritional feeding programme for malnourished children and combating the worst epidemic of Lassa fever ever recorded.

**Liberia:** As the country rebuilds itself after civil war, MERLIN supplies essential drugs and medical equipment to 21 primary health clinics and 3 community hospitals deep in the rainforests of Nimba and Lofa counties. Refugees returning across the border from Sierra Leone bring the first cases of Lassa fever and the threat of a massive outbreak of malaria: MERLIN starts immediate programmes to prevent these becoming major epidemics.

**January** **London:** MERLIN launches a new programme of training courses for volunteers, aiming to support professional excellence in the field. The programme is sponsored by Glaxo Wellcome plc and the British Government's Department for International Development. (See page 3 for full report.)

**Chechnya:** Despite many recent kidnappings of aid workers in Chechnya and the surrounding area, MERLIN continues to run its healthcare programme through local staff. MERLIN is the largest external provider of health care in Chechnya, supplying 1.9 million litres of clean water per week to Grozny and drugs and equipment to 40 health centres.

**London:** MERLIN is five years old! Launch of its fifth birthday appeal to raise £750,000 in 1998.

# Letters from the field

## “Is this what my dream has become?”

### FORMER SOVIET UNION

**MERLIN's work would be impossible without the efforts and expertise of medical professionals in the countries where we work. Their story is seldom told. Here Dr Angie Bone considers the dilemmas which they face, taking as her example one of the countries which has broken away from the former Soviet Union and which is still finding its way.**

Imagine, if you can, living in a land controlled by a foreign state. Imagine having to accept an alien ideology. Imagine knowing that almost every aspect of your life is monitored and regulated, from your finances to the language you speak and the thoughts and beliefs you declare. You hardly notice the good things around you – that health care and education are free for all, everyone has a job, fuel is cheap and utilities are subsidised, that the state assists those in material need. You want your freedom – the freedom to go where you please and do as you will, to express yourself openly. You dream of your freedom to choose.

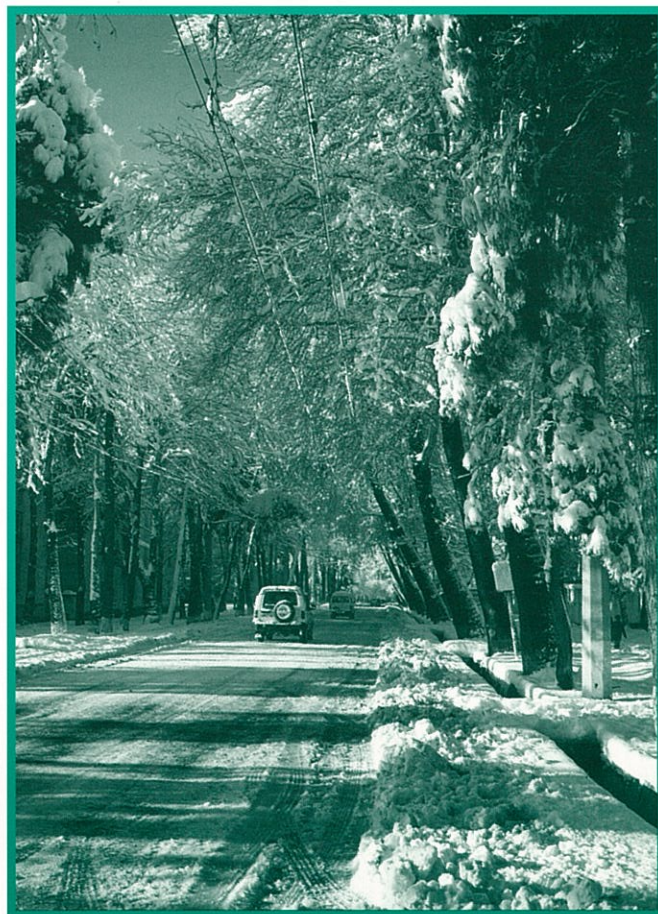
You work as a doctor in your local hospital. You've received a high degree of training and are certain that the techniques you've learnt are amongst the best in the world. Your salary is adequate and your patients respect you. There are abundant resources and you invariably have access to the treatments and interventions you need for your patients. Hospital beds are always available and waiting lists are unknown, because there are so many medical staff and facilities. Everything you need is always provided – it never occurs to you to ask how much it all costs or where the money comes from.

Little by little, it seems that the grip of the foreign state is loosening. You hardly dare to believe it. But all around, other subjugated states are breaking free and you know independence is on its way. Maybe now you can have everything you ever dreamt of – freedom, at last, is on the horizon.

But wait, who will take charge now? There's a power vacuum and the country's divided. Negotiations break down and fighting breaks out. You keep working, patching up the injured as best you can, but it's getting increasingly difficult as supplies are running low, the electricity's been cut and many of your colleagues have fled. You don't know how much longer you can keep this up.

Finally, the fighting moves away to a remote part of the country and a government is formed from your countrymen. They're not from your district and you're a bit suspicious, but everyone's tired of fighting. Maybe things will improve now. Inflation's ridiculous and everything's three times the price, but your salary hasn't matched it. When you get it, of course, it's late

more often than not. More of your colleagues leave, but the patients keep coming. There's nothing left to treat them with, so you have to tell them what to buy in the commercial pharmacies that are springing up all over the place. It shocks you to see how much a bag of intravenous fluid costs – it's the same as your monthly salary. The hospital autoclave has gone down, but there's no money to repair it and with only four hours of electricity per day, all the vaccines are going off.



You meet some ex-colleagues selling cigarettes and soft drinks on the side of the street. They tell you they earn more from their business than they did back at the hospital. Your salary has not appeared for the last three months and your kids look decidedly thin, although you know your wife's doing her best to raise money by selling your less important household items at the local market. You realise that you have no choice but to join the other doctors at the hospital and request 'gifts' from your patients.

Patients are presenting later and later in their illnesses now, hoping they'll get better without help. It's hardly surprising, given

that the hospital roof's leaking, there's no food or heating and they can ill-afford the drugs, 'gifts' or time off work. More and more seem to have typhoid, a disease that was almost unheard of in the old days, when sanitation and public health measures were rigorously enforced by the state. In those days, a communicable disease outbreak could lead to prosecution if someone was found to blame after the inevitable investigation by experts and the state police. Now, there doesn't seem to be much of an investigation and patients are dying. You wonder about the quality of the antibiotics on sale in the market.

You talk to the local epidemiologist, who says the typhoid's in the water. It's because the pipes haven't been maintained and are leaking and there's no chlorine available to treat the water. People have been told they should boil their water and wash their hands, but they prefer the taste of cool running water, and soap – well that's an expense many can't afford. “When they said ‘freedom,’” he jokes gloomily, “they didn't tell us they meant freedom for the bugs too.”

By now, there are lots of international agencies around. They come from wealthy countries and must have lots of money. Surely, they should be able to provide everything you need, just like the foreign country did in the old days. But they won't. They say they can't afford to fix the pipes. They say water consumption's too high and this makes the pressure low in the pipes, so typhoid in the sewage gets sucked in through the breaks. They say the best answer is for everyone to turn their taps off when they aren't using them. It's too simple – you don't believe them. Why can't they repair the system and provide chlorine – that's what the old regime would have done and it would have worked.

Doctors from these agencies come to the hospital to deliver drugs, but there are never enough and it's usually tablets instead of injections. They say tablets are better, and that most patients don't need intravenous fluids and antibiotics, or vitamin and antipyretic injections. They say most people with diarrhoea don't need antibiotics. You don't believe them. You're proud of what you've been taught and you've used your methods effectively for years. They keep talking about the 'cost-effective use of resources,' but you don't really know what they mean. Isn't it just a euphemism for 'undertreatment'?

You ask one of these young, foreign doctors about her experience and whether she often deals with diseases like typhoid, cholera and malaria in her own country. She says: “No, not often, but I've seen a lot in Africa, where I've used these methods.” It's a defining moment. You think: “But this isn't Africa. Is this what my dream has become?” She sees the expression on your face and realises how unintentionally clumsy she's been. This isn't Africa and her approach has to be entirely different. She thinks how she would feel if, in less than a decade, she had watched the decimation of the health service she was once proud of, lost all the elaborate investigations, procedures and treatments she had come to rely on, and then was told by a young foreign doctor that her techniques were wrong.

## Where in the world...?

### Volunteers in the field

(as at 20.1.98)

#### Afghanistan

Jim Campbell  
Katie Cuming  
Panna Erasmus  
Drew Gilmour  
Maria Kirwan  
Dale Lightening  
Catherine Plumridge  
Adrian Porter  
Valerie Powell  
Susan Sandford  
Glyn Taylor  
Caroline Ward

#### Chechnya

Robert Bennett  
Tim Chiswell  
Jerry Cooper  
Christophe Petit  
Gail Taylor

#### Congo-Brazzaville

Ailsa Denny  
Carole Jegou  
Marie McGrath  
Marianne Parry  
Niall O'Keffee  
Peter Sinclair

#### D R Congo

Jonathan Campbell  
John Cobley  
Linda Cook  
Francois Declerck  
Jane Drapkin  
Paul Driscoll  
Francois Mwema  
Valerie Plaid  
Olivier Wszolek

#### Liberia

Simon Arthy  
Marianne Boillat  
Sophie Bruas  
Anna Cressey  
Sue Cutter  
Jenny Hopps  
Joseph Inganji  
Wendy Melville  
Derrick Tate

#### Moscow

Megan Thomas

#### Siberia

Gini Gleissberg

#### Sierra Leone

Richard Corbett  
Andy Featherstone  
Nzenge Mutota

#### Tajikistan

Barbara Pearcy  
Rob Stevens  
Justin Tait  
Simon Taylor

#### Uganda

Rendt Gorter

### Just back from overseas

#### Afghanistan

Tim Barker  
Nigel Barnden  
Hanna Froehle  
Yohannes Hagos  
Andy Howe  
Addi Koster  
Karine Zander

#### Albania

Lisa Coghill  
David Newall

#### Chechnya

Carol Fenn  
Robert Hodgson  
Daniel Kolthoff  
Smruti Patel

#### Congo-Brazzaville

Didier Assal  
Oliver Baron  
Jean Bernard  
Bouvier  
Marleen de Tavernier

#### D R Congo

Suzanne Anderson  
Ed Cooper  
Vincent Diamond  
Jasper Elgood  
Erich Hajek  
Nick Lessof  
Richard Oaten  
Mike Roe  
Jeff Warwick  
Nick Weatherill

#### Liberia

Rupert Gill  
Sadie Scullion

#### Moldova

Dennis Tracey

#### Montserrat

Jeremy Booth  
Mandy Grocutt

#### Moscow

Yves Heront

#### Siberia

Carl Clowes  
Fraser Wares

#### Sierra Leone

Guy Millington  
Kathleen Skinner

#### Sudan

David Kelly  
Sara Nam

#### Tajikistan

Angela Bone  
Peter Medway  
Koos Messelink  
Sarah Pitt

#### Thailand

Jessica Barry



### CONGO

Logistician Jonathan Campbell discovers the joys of rebuilding bridges in the Democratic Republic of Congo. Transport problems in the dense rainforest mean that medicines have to be carried by small plane, motorbike or even bicycle to reach civilians scattered in the civil war.

*A special farewell to Annie Macklow-Smith, who has left MERLIN's London staff to study tropical nursing at the Liverpool School of Hygiene and Tropical Medicine. Almost every volunteer who MERLIN has sent to the field was chosen or looked after by Annie, in her four-year stint as Human Resources Co-ordinator. Annie worked for MERLIN in the field herself – as a nurse in the Rwandan civil war – a vocation to which she is now returning.*

To volunteer,  
call  
0171 487 2505

# MERLIN five years on



◀ Nurse Manjit Kaur and friend in central Africa

Picture: Howard Davies

## Now we are 5

**It's a long way from a front room in London to a front line in Afghanistan, but that is the journey which MERLIN has made in the five years since it was founded by three friends with a lot of conviction but not so much organisation.**

Today MERLIN has emergency teams in some of the remotest places on earth, co-ordinated from a bustling headquarters building in Westminster. But in the beginning, back in 1993, it was just a doctor, a manager and a logistician, using someone's spare bedroom for an office and whatever equipment they could beg or borrow.

"When Nick Mellor, Mark Dalton and I set out from the front bedroom of my little mews house," says Dr Christopher Besse, "we could never have dreamt that after only five years, there would be 600 people representing MERLIN in the field, with 40 at head office."

The three founders had a concept which was simple but bold: to create a specialist medical organisation which would respond quickly and effectively to disasters anywhere in the world, sending out doctors, nurses, medicines, equipment – whatever was needed, whenever it was needed. Their mission would be to care for the sick, prevent diseases, and rebuild local health services to a state of self-sufficiency.

Such bodies existed in other countries but not in Britain, where our highly trained medical community did not have an organisation devoted to channelling its enthusiasm for overseas volunteering.

It was a simple idea – and one which has proved highly successful. Starting with a convoy to Sarajevo carrying £1m worth of medicines and food, MERLIN has sent missions to 32 countries since 1993. The amount of aid which we provide has grown consistently (see graph), as the international aid community has come to recognise MERLIN's expertise. Today, the British and American governments and the European Community fund major

projects with us, while we work closely with United Nations agencies such as UNICEF and UNHCR.

The most recent sign of MERLIN's emergence as a serious player in the aid game is our acceptance onto the Disasters Emergency Committee last year. DEC is a co-ordinating body for the UK's 15 main charities involved in disaster relief overseas, including Oxfam, Red Cross, Save The Children and Christian Aid. MERLIN is now a member of its executive committee, and will be involved whenever the agencies decide to launch a national appeal for a major emergency overseas.

This new status is based not on hype but on hard work in the field. In several particularly difficult locations over the past year,

*"We have stayed true to our founding principles – to providing a swift response for real needs"*

MERLIN has been the lead agency, providing the bulk of the international community's relief effort and co-ordinating the activities of others. In eastern Congo, we were the only agency for many months to reach thousands of civilians who were scattered through the dense rainforest and exposed to malaria, malnutrition and dysentery. In war-torn Sierra Leone, we led an international team of experts against the worst epidemic ever known of the deadly tropical disease Lassa Fever. In the bombed-out city of Grozny, we were the last major agency to remain, providing medicines and

over a million litres of clean water a week to the few hospitals still functioning among the ruins.

And for the past four years, MERLIN has pioneered the introduction of modern treatments for tuberculosis in Russia, where an epidemic of national proportions is now receiving government attention. In an official decree from Moscow, MERLIN's project in Siberia has been accepted as a blueprint for tuberculosis programmes throughout Russia.

"The key to our success is that we have stayed true to our founding principles," says Medical Director Bruce Laurence. "MERLIN programmes are always founded on a swift response to real needs, and aim for excellence in the delivery of medical care."

The constant striving for medical excellence was recognised in 1996, when MERLIN was awarded a prestigious international medical prize, the Pierre Straus Prize. This was awarded for a childcare programme which we ran in Ndoshu Orphanage in Zaire, where thousands of children had fled from the Rwandan civil war.

Although MERLIN has stayed true to its first principles, in some practical ways it has changed. As the number and scale of operations have grown, it has taken on more staff at headquarters in London and developed organisational structures to match. Professionalisation has become an important priority, both at London and field levels, and the first Director of Human Resources has just been appointed. But MERLIN remains relatively small and light on administration, with some 40 London staff running operations predicted this year to be worth over £7m.

A second major change is a new emphasis on fundraising. Marketing Director Derek Wyeth explains: "In the beginning MERLIN put all its effort into getting the field operations right. But now we realise that we must increase our fundraising from independent sources. Independent funding is the guarantee of independent action."

And independence remains a watchword. MERLIN prizes its neutrality in the field, despite working in some of the most highly-charged political arenas in the world. It insists that all programmes begin with its own independent assessment of medical needs. It continues to help those in need regardless of their race, politics or religion.

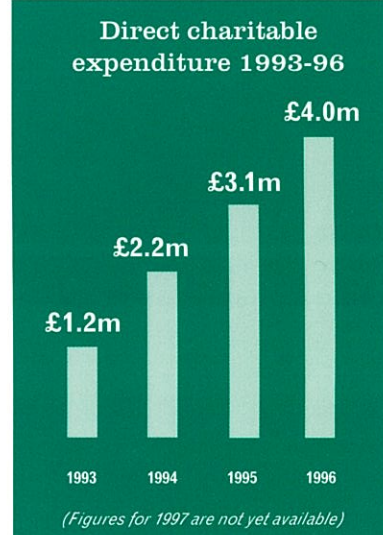
"We want to go on helping those who need us," adds Derek Wyeth. "That is why this year we have launched a Fifth Birthday Appeal: to celebrate our achievements to date, and to take them into the future."

"When I think of all this," concludes Christopher Besse, "I know that MERLIN's future is very exciting."

*The amount of aid which MERLIN provides has increased year after year.*

*Only 10% of our funding is spent on overheads, so 90p out of every £1 given to MERLIN is spent on providing emergency medical aid.*

*Most of our funding comes from the European Community, the British Government, the US Government and the United Nations. We also raise money from the general public, corporate supporters and charitable foundations.*



## Professional developments

**MERLIN has launched a comprehensive training package for overseas aid workers. It will teach volunteers about many aspects of management, as well as more traditional field skills such as communications and healthcare. This is a practical solution to growing demands for relief organisations to improve their professional standards. The new courses are a key component in supporting our field staff and demonstrate MERLIN's commitment to their professional development.**

MERLIN's Chief Executive Dr Christopher Besse commented: "MERLIN is leading the way in increasing professionalism and quality in aid work abroad. Doctors, nurses and support staff may be very experienced in their UK-based jobs, but they need training and support to deliver appropriate, quality health care in a disaster zone. This training initiative will develop skilled aid professionals to benefit all agencies across the sector. With these courses behind them, aid workers can hit the ground running whenever and wherever professional relief is needed – fast."

The initiative has received pledges of support from other leading aid agencies including the Red Cross and Oxfam. Glaxo Wellcome plc and the British government's Department for

International Development are funding the programme of training courses for project managers, health workers, and administrators. The programme includes:

The MERLIN Management in Relief and Emergency Course: a five day residential course to prepare both medics and support staff for a managerial role. It will be held in April and November.

The MERLIN Public Health in Relief and Emergency Course: an eight day residential course for qualified health professionals who wish to develop skills in the relief environment. The course will run in February and October.

The MERLIN Project Support in Relief and Emergency Course: a series of modular residential courses, held in May, training individuals in logistical and technical support to field projects.

The MERLIN Induction to Relief and Emergency: a general introduction for people who will be working with MERLIN overseas. Courses will run four times a year.

Courses cost £300 including full board, except the Induction course which is free to MERLIN volunteers. Those who go on to work with MERLIN in the field will have £200 of their course fees reimbursed. For details, contact Sarah Hall on 0171 487 2505.

**A new forum for Britain's medical aid agencies to pool their experiences has been created, co-ordinated by MERLIN's medical department.**

Meetings of the new UK Medical NGO Liaison Group have been attended by senior representatives of the main NGOs, the Department for International Development and academic institutions, with the aim of discussing topics of common interest and ensuring that medical NGOs speak with one voice on important issues. The inaugural meeting in November, led by Dr John Seaman, looked at the future role of medical NGOs. The January meeting was led by Dr David Nabarro, Chief Health and Populations Advisor at DfID, and focussed on medical implications of the Government's recent White Paper on overseas aid. Both took place at MERLIN's offices in London. Attendance is by invitation: please contact Tim Healing at MERLIN for details and meetings in 1998.

*RESPONSE is published quarterly by MERLIN, a British medical charity which provides emergency medical care in disasters worldwide.*  
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# Supporters' News

Please support  
the **merlin**  
5th birthday appeal

## Announcing – the MERLIN 5 Appeal

MERLIN is five years old! We are celebrating with a Fifth Birthday Appeal – 5Appeal – which will run throughout the year. Our aim is to raise £750,000, to assure MERLIN's stability and independence in its second half-decade. We anticipate a series of events and activities in the coming months, culminating in a spectacular birthday party at Christmas time to celebrate the appeal's success.

MERLIN has come a long way since January 1993, when it was started by a group of friends determined to meet the need for emergency medical aid to people caught up in disasters. Five years on, MERLIN is established as Britain's emergency medical relief specialist, working with the British Government, the European Union and the United Nations. We currently have some 60 volunteers deployed in eight countries, from West Africa to Siberia to Afghanistan. Last year MERLIN joined the Disasters Emergency Committee, we were asked by the British Government to stand by off Montserrat, and we began our first projects funded by the US Government.

Although MERLIN is now an established international aid agency, it is still small and intends to remain so. We shall continue to specialise in a rapid response to medical emergencies, sending volunteer doctors, nurses and support personnel wherever they are needed.

**And the need for us to sustain an effective emergency medical relief capability is greater than it has ever been.**

To ensure that we can do so, we must establish a voluntary income 'emergency fund' that is independent of specific programme funding from governments.

Independent funding will allow MERLIN to maintain key staff posts in London, carry out emergency medical assessment missions (which are not covered by government funding), and keep a reserve 'stockpile' of emergency equipment and medicines – so we can always respond without delay. It will also give us more flexibility to design programmes as we think best.



Nurse Ailsa Denney helping Rwandan refugees

Picture: Howard Davies

Please help MERLIN to sustain its independence and quality of response by taking part in our Fifth Birthday Appeal. There are several ways of supporting the 5Appeal:

**Organise an event** Could you or anyone you know organise a MERLIN fundraising event this year? The number 5 (or 50 or 500) might be a theme – e.g. a 5-mile sponsored run or walk, or a 50-length sponsored swim. Perhaps a dinner party or summer garden party where guests make a £5 donation to MERLIN. Or will your family be celebrating a fifth or fiftieth birthday which could be linked to MERLIN's anniversary?

**Organise a promotion** We hope to stage a number of joint promotions with commercial businesses and would be grateful to hear of further possibilities. For example, a restaurant or hotel might add 5% to the bill as a donation to MERLIN, or there could be joint promotions in shops with 50p or £5 per sale going to MERLIN.

**Joint anniversaries and celebrations** We should like to hear of other anniversaries this year where there might be the possibility of a joint celebration with MERLIN.

**Make a donation** A wonderful way of supporting MERLIN's 5Appeal, of course, would be to make a donation. The form below may be useful. If you would like to consider making a regular donation by covenant or standing order, or pledging a legacy, please let us know. This would be extremely valuable.

Please contact Kate Mervyn Jones at MERLIN (tel 0171 487 2505) if you would like to discuss taking part in MERLIN's 5Appeal. We should be happy to supply sponsorship forms, leaflets, running vests and other materials.

**Thank you for supporting MERLIN's Fifth Birthday Appeal. Response will keep you informed of progress throughout the year.**

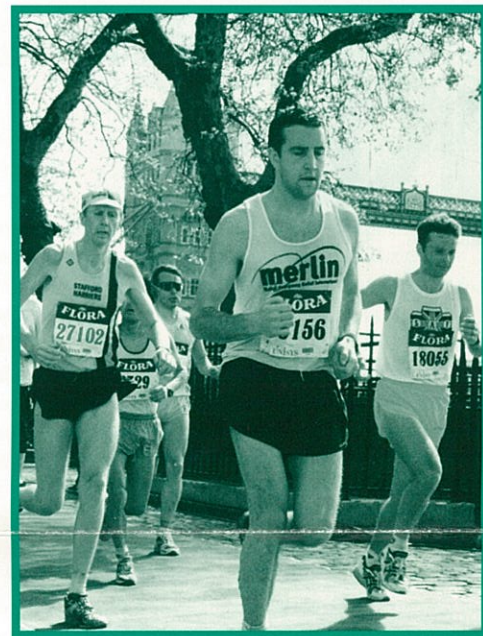
## Coming next

### Calling all City whizz-kids

MERLIN is planning its annual foreign exchange trading game, The MERLIN Exchange, for June 1998. If you would like to enter a team to trade against some of the world's top financial institutions, or to receive more information, call Kate Mervyn Jones on 0171 487 2505 or Claire Meyer on 0171 223 9739.

### Running that extra mile

MERLIN would like to hear from anyone who has managed to secure a place for the 1998 London Marathon, and is still wondering which charity to run for. We are looking for dedicated runners, prepared to don our fabulous running vests, so if you or anyone you know have a place in this year's race, please do contact Kate Mervyn Jones on 0171 487 2505.



## Thank you

### To all our donors...

We would like to extend our sincere thanks to all our donors throughout 1997, and to those of you who received and returned our supporter survey. We hope you will continue to support MERLIN in 1998 and look forward to keeping you in touch with all our activities.

In particular we wish to thank the following:

**Companies, trusts and foundations:** The Aquarian Healing Trust, The Ashden Charitable Trust, The Ashworth Charitable Trust, The Balcraig Foundation, Bank of America NT & SA, BT Global Finance, PG & NJ Boulton Trust, Cable & Wireless plc, The Capital Group, Sr Antoine de Castellane, Claris, Cotswold Outdoor Ltd (London branch), Craigmyle Charitable Trust, Emerging Markets Charity for Children, Emerging Markets Forum, Glaxo Wellcome plc, Instinet UK Ltd, The John Ellerman Foundation, Lupin Laboratories Ltd, Medical Export Group of the Netherlands, Visa International.

**Schools, churches and other organisations:** Bromley College, Convent of Poor Clares (Arundel), English Speaking Church (Luxembourg), Inner Wheel Club of Cockermouth, Inner Wheel Club of Keswick, Ongar United Reformed Church, PCC of St Michael and All Angels Parish, Royal Army School of Catering, Royal Free Hospital School of Medicine, St Katharine's Church (Merstham), Women's Fellowship of Acton Baptist Church.

### Office help

A number of sponsors have provided support in kind for our London office. We would like to thank: DLC Disco for providing great music at the AGM party; Trees On The Green for once again donating a Christmas tree for our foyer; Claris for networking software; Zeneca for personal computers.

## Please support our Fifth Birthday Appeal

I would like to help the 5Appeal by –

- ☐ Organising a fundraising event      ☐ Running a joint promotion      ☐ Celebrating a joint anniversary

I would like to help the 5Appeal by enclosing a donation for –

- ☐ £20      ☐ £50      ☐ £100      ☐ £250\*      Other £ \_\_\_\_\_

\* If you are a UK taxpayer, and you give a donation of £250 or more, it is worth a third as much again to us when you fill out a Gift Aid form. We would be delighted to send you one.

How to make your donation go further –

- ☐ I would like information about how to make tax-efficient donations  
☐ I would like information about making a covenant or standing order pledge to MERLIN  
☐ I would like information about making a legacy pledge to MERLIN

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone number \_\_\_\_\_

Job Title \_\_\_\_\_

Organisation \_\_\_\_\_

Please make cheques payable to 'MERLIN'. For credit card donations, please call 0171 487 2505. Please return this coupon to: MERLIN, 14 David Mews, Porter Street, London W1M 1HW. Reg. charity 1016607.

## Recent events

### The MERLIN Ball

MERLIN's most glamorous fundraising event took place at The Waldorf Hotel in London, at the end of September. Raising £35,000, the evening was a great success, largely due to the considerable efforts of the Ball Committee and its chairwoman Dr Jackie Von Baillou. MERLIN staff certainly enjoyed themselves, especially one medic who has since been on crutches after a rather energetic rendering of The Twist!

### The Emerging Markets Game

A huge thank-you to the Emerging Markets Forum and BT Global Finance, for their support and input to The MERLIN Emerging Markets Game. This was a great evening, based around a trading simulation and quiz on emerging markets in Eastern Europe. As well as raising large sums of money for MERLIN, all the participants enjoyed a friendly competition, and we hope to repeat this success in 1998.

### Christmas Concert

We were thrilled to welcome many regular guests, all in fine voice, to our 1997 Carol Concert at St Francis of Assisi Church in London. The evening also included mulled wine and a raffle in which MERLIN's Chairman was the lucky winner of one of Lonely Planet's Travel Guides to Africa.