Annual Report 2016

A different kind of world needs a different kind of aid

For almost 50 years the aid and human rights organisation medico international has fought for social change. In solidarity with socially excluded and marginalised people in the global South, medico works to promote good living conditions for people which maximise health and social justice. The goal is not merely to reduce poverty, want and violence, but to identify and overcome their causes. The problem in the world is not too little aid, but rather the conditions that make more and more aid necessary.

For medico, aid is part of comprehensive political action in solidarity. Our efforts to support emancipatory processes are made in the awareness of the ambivalent consequences of aid. We operate on the maxim 'Defend, criticise and overcome aid'. The core issue is cooperation in partnership with actors in Africa, Asia and Latin America. Rather than exporting aid materials, staff or projects, we support local structures and initiatives. Our partners are not passive recipients of aid – instead, they are competent actors, themselves organising aid in the struggle for better living conditions and fighting for the human right to health.

Crises and emergencies are not natural phenomena. Poverty and violence have their causes in global relationships of exploitation and domination. This is why active and critical public relations work is a central task for medico international. Always standing up for the rights of the socially excluded, we are active in global networks, at events and through publications and campaigns. We keep people informed about forgotten conflicts, repressed interests and concealed dependencies. The goal is to establish and promote a transnational counterpublics which binds together the ideas of a good life, human rights with universal validity, social responsibility and institutionalised common goods accessible to all.
Dear reader,

“If we could succeed in showing that it can be done differently, we’ll have achieved a great deal.” The rallying cry of author and psychoanalyst Paul Parin, who was a member of the Board of Trustees of the medico foundation until his death in 2008, has lost none of its force. Many are still trapped in the neoliberal myth of “TINA” (there is no alternative). It seems they can sooner imagine the world’s downfall than the end of the prevalent economic order, with its roots in growth and profit. In the face of dramatically increasing social inequality, “business as usual” is absolutely unacceptable today. However, we cannot leave it to right-wing parties or populists to define the alternatives. In many countries, there has been a threatening upwelling of reactionary nationalism, authoritarianism and repression.

This makes it all the more important to increase the pressure for emancipatory alternatives. A future of solidarity is possible, as shown not least by the projects and ideas of our partner organisations. Aid to refugees provided by initiatives based on solidarity, civil society pressure for democratisation of the WHO, defence of the right to freedom of expression – all these are part of the great idea of a different world, a world of solidarity where people and things come without a price tag. The goal are social relationships which allow everyone everywhere to live a life of dignity and self-determination.

In all, we supported some 120 projects in around 30 countries in 2016. The great political and logistical challenges included aid for people penned in by war in Syria, the reconstruction efforts in the country’s Kurdish provinces, and assistance to refugees in Syria and the neighbouring countries. We paid much attention to improving safety at work, including in Bangladesh and Pakistan. In South Africa, we supported a programme to strengthen the role of healthcare workers. In Mali and Sierra Leone we helped deported migrants, and with smaller but highly effective measures we assisted people who had fled to Germany and Europe in general.

You can read more about all this in this annual report. Finally, we should like to thank our partner organisations in the global South with all our heart for their trust and cooperation, in our common commitment to showing that things can be done differently.

Most sincerely,

Brigitte Kühn
Chair

Thomas Gebauer
Executive Director
Twelve months, twelve events

Nepal
Sustainable reconstruction

Eight months after the earthquake, the Nepalese Government officially started the “Phase of Reconstruction” on January 16th. New projects were also started in parallel by a number of medico partners which had already provided emergency aid after the quake to create sustainable social infrastructures in the areas of education, agriculture and health.

Turkey
Ankara’s war

For months, the Turkish military have been carrying out a general onslaught against Kurdish self-administration in the south-east. Diyarbakir and Cizre – whole city districts have been destroyed, hundreds of thousands are fleeing. Faced by this humanitarian disaster, medico partners are providing emergency aid and legal advice and documenting human rights violations. At the end of the year, they were banned as well.

Brazil
The end of an era

President Dilma Rousseff is swept from office in a “legal coup”. The end of the Workers’ Party’s (PT) 13-year government project is the start of a rigorous neoliberal rollback, which is also forcing local medico partners to re-position themselves.

Guatemala
A historic ruling

For the first time, indigenous women have won a court case against former soldiers for sexual assault in the civil war. The ruling is the opening of other trials against impunity – a success of local medico partners who have been supporting witnesses and victims for many years.

Germany
Foundation stone for independence

Thanks to its increased assets, the “stiftung medico international” foundation has purchased a plot of land in Frankfurt East, and on June 9th the foundation stone was laid for the medico House, which will give the association and foundation greater independence.

Europe is closing in. One country after another is closing its borders, making the “Balkan route” a dead end for tens of thousands of refugees. While the pictures from Idomeni in Greece are going around the world, an Athen’s action group is opening the City Plaza Hotel in the capital’s centre as a refuge.

Greece
A hotel as an alternative draft

Photo: medico

Photo: Markus Dorfmüller

Photo: Holger Priedemuth
South Africa
Against the drama

16 years after the first AIDS conference in Durban, 20,000 scientists and activists gathered on the same spot, including medico partners from South Africa and Lebanon. In the closing address, UNAIDS recognised the role of community health care worker in the context of HIV and AIDS, whose self-organisation is being supported by medico.

Germany
How free trade makes people ill

Shortly before the national action day against the planned TTIP and CETA agreements with 320,000 participants, the booklet “Right to profit” whith medico co-published is launched, showing how free trade and investment protection agreements are ruining health globally.

Turkey
Systematic repression

The AKP regime is taking the next step in the systematic repression of dissident voices and forces. Some 300 aid organisations, human rights foundations, child protection alliances, women’s associations and cultural and grassroots initiatives are being banned, including medico partners such as the Rojava Aid Association.

Pakistan / Germany
On the way to a precedent

Dortmund Appeal Court has awarded assistance with trial costs to textile workers from Pakistan in their case against KIK. A first success in litigation supported by medico over the textile company’s responsibility for a factory fire in Karachi.

Togo
Bottom-up migration policy

While the German Government and EU are using money and pressure in an effort to enlist African countries in their blockade of migration, the medico partner Visios Solidaires is inviting other west African organisations to a migration policy conference in Lomé. The civil society alliance is criticising Europe and the submissiveness of their own governments.

Syria / Iraq
Emergency aid is continuing

The fights in Rojava and for Mosul are causing new refugee flows. Despite all difficulties, medico and its partner organisations are managing to continue emergency aid, for example for Kurdish Kobane and refugees from Mosul in a spirit of solidarity.
In Turkey, there was nothing gradual about the shrinkage of democratic spaces in 2016 – they were dramatically collapsed. The attempted coup in summer gave the regime in Ankara a new excuse to shut down inconvenient forces in central areas of society. Tens of thousands were imprisoned or forced from office, press freedom was virtually abolished, members of parliament were jailed and opposition mayors removed. In November, there was the blow against an independent civil society. Some 370 civil rights foundations, child protection associations, women’s associations, cultural and citizen initiatives of all kinds were banned, including two medico partners, the Rojava Aid and Solidarity Association and the Mesopotamian Lawyers Association. They had already been coping with harassments, accounts blocked, employees arrested and food supplies confiscated. The ban is a strategic move, hitting two organisations which oppose the Turkish army’s war on Kurdish self-government in the south-east of the country. The Rojava association also supplies humanitarian aid to the citizens of the Kurdish cities who have been bombed out and exiled. The Lawyers Association has filed over 600 complaints against the destruction and confiscation of houses and properties. Seen in this light, the ban is a move to gag those who are helping publicise the domestic war and human rights violations.
Egypt

In February 2017, a photo of a barred door was again shown on medico’s home page. This time, it was for the El Nadeem Centre in Cairo’s city centre, the best-known treatment centre for the country’s victims of state and domestic violence. It has been providing direct psychological and legal assistance since 1993. Regardless of the political shifts in power in Egypt in recent years, the centre has unambiguously opposed all state, military and police violence against civilians. At the start of 2016 El Nadeem published an annual report – an “archive of oppression” – on the growing number of cases of torture to mark the anniversary of the 2011 uprising in the Arab Spring, and the ministries of health and the interior tried to close the centre. El Nadeem appealed the order, and carried on working. At the start of 2017, when the centre again reported on extra-legal killings, mistreatment and torture of prisoners in police stations and prisons, the police sealed the premises and banned all further activities – activities which are more important than ever in the struggle to regain the freedoms won in 2011.

Israel

At the end of 2015, the Israeli Cabinet approved a law imposing stricter regulation of the work of civil rights groups funded from abroad. This is another state action against domestic voices critical of the occupation or the government. At the same time, there has been an increase on a broad front in attacks, smears and extensive obstacles to the work of NGOs. These also affect medico partners such as Physicians for Human Rights – Israel, the Who Profits initiative, and above all Breaking Silence, a veterans’ organisation critical of the occupation. The latter was massively attacked by Jewish nationalist organisations, and by right-wing politicians. Undercover agents infiltrated for months of spying and attempting to provoke a shutdown of Breaking the Silence. The names and addresses of all the staff were publicised in the social media. The silence of the occupation should not be disturbed. “For 49 years we’ve imposed a military dictatorship in the occupied territories,” says Yehuda Shaul of Breaking the Silence. “Could we seriously have imagined that we could keep this situation on the far side of the Green Line and still hold on to democracy on our side?”

Guatemala

In recent years, the Guatemalan judicial system in cooperation with the International Commission against Impunity in Guatemala (CICIG) has struck some startling blows against the country’s corrupt oligarchy. medico partners also prepared the path to greater justice in the country. The organisation ECAP has devoted itself for decades to psychosocial work in the context of reappraising and investigating the dictatorship, and in this context also supported the lawsuits. Among other causes, the human rights lawyers of the Bufete de Derechos Humanos and the International Commission of Jurists (CIJ) were involved in the conviction of ex-dictator Rios Montt for genocide and the punishment of the former military for abducting and enslaving women from the village of Sepur Zarco. Since then, however, medico partners have themselves become targets of an increasingly aggressive right wing, as a result of their defence of indigenous communities against large-scale projects, and their involvement in the Creompaz case, in which high-ranking military are charged with the violent disappearance of 558 people. Threats and charges against the lawyers Ramón Cadena (CIJ) and Michael Mörth (Bufete, CIJ) of “engaging in a criminal conspiracy” were followed by a search of Cadena’s house in Guatemala City. Documents were reviewed, and a laptop and cellphones were stolen. Other valuables remained unaffected.

Christian Sälzer
Another reason for the failure of the government project of the Workers’ Party (PT) was the media monopoly of the old elites. Antonio Martins’ discussion portal Outras Palavras supports left-wing points of view.

“Every major defeat is cause for concern. But certain aspects have strengthened the sense of powerlessness in the long months of the coup in Brazil. How could a downgraded parliament, backward media and decadent companies win?” This is the introduction of a multi-part analysis of Brazilian conditions which Antonio Martins published in 2016, including in medico (www.medico.de/projekte/brasilien). The journalist’s questions about the role of mass media in the impeachment of Dilma Rousseff in summer 2016 are not surprising. For months, the country’s biggest media group, Rede Globo, had fanned the right-wing protest against Rousseff, hyping semi-legal budget tricks as treason. In contrast, the media monopoly, owned by a small number of families, very rarely offers details of the corruption in the conservative parties and their clientelist self-enrichment policies. In the thirteen years of PT rule there was no change in the monopoly in the major media – nor were changes made to the subsidies for private media companies.

Antonio Martins confronts this domination with other information and a different form of communication. The former activist of “attac” and one of the co-founders of World Social Forums, which were born in Brazil’s Porto Alegre in 2001, Martins has been part of the search for alternatives to capitalist socialisation for decades. After a period as joint editor of the Brazilian edition of Le Monde diplomatique, he founded Outras Palavras in 2009, together with other journalists. This news and discussion portal, supported by medico since 2016, combines critical journalism with the new options in communication: dialogue and participation, social media, blogs, and above all workshops and seminars on journalism. Close cooperation with a major network enables the editors in São Paulo to produce news articles on current affairs and in-depth background contributions. In line with its constant search for social alternatives, it also criticises the development model focused on industrialisation and major projects, which the PT governments also pushed through despite opposition by indigenous peoples and left-wing protests.

Martin explains that the seizure of power by a right-wing government is forcing the editorial team to confront a social policy rollback, and also to reappraise the failed left-wing government project. His analysis ends with a question that is also a challenge: “The struggle against the Brazilian system and to overcome inequality is more pressing than ever. On the other hand, the defeat of the Left marks the failure of a project we were all associated with in one way or another. Are we bold enough to overcome this project, to go beyond it?”

Moritz Krawinkel
Juliet Kabe from Khanya College, Johannesburg, is fighting for decent working conditions for community health workers.

“What do you do as a community health worker if you’re supposed to help a patient take medicine, but they don’t have enough to eat and can’t tolerate the medicine on an empty stomach. Do you give them the medicine anyway? Or do you go off and buy food with your own money?” When Juliet Kabe worked in a poor district as a community health worker, she was confronted daily with this dilemma of needing to make up for what unequal living conditions and poverty are doing to people’s lives. This experience moved her very deeply, and brought her to tackle the precarious situation of health workers. For a paltry wage and largely without any rights, the women and few men in this field perform an extremely important function in the public health service. Juliet is now working at Khanya College, Johannesburg, and is fighting for better working conditions for health workers in communities in the Gauteng Province. Since 2014 Khanya College has been working with six partner organisations on a network project supported by medico for strengthening self-organisation of care workers. With a tremendous talent for organisation and a lot of fervent commitment, Juliet helped achieve a first major success in 2016. The Labour Court recognised on 18 March 2016 that care workers are not voluntary aides but workers, so that the normal labour laws apply to them as well. This was a pioneering ruling. But the ink was hardly dry when the Ministry of Health started unceremoniously outsourcing the employment contracts to a private company. However, the women in the Gauteng Community Health Care Forum refused to capitulate. They organised committees in almost 80 local clinics, followed by petitions, information events and protest marches, until the Minister of Health was forced to respond to the protest. The outcome is still uncertain.

Regardless of that, however, the project has created a movement for self-empowerment among these previously exploited individuals. Juliet explains that a platform was created which the care workers used to network, where they can talk about their experiences and concerns, and also about their common struggle. “In everyday life, the women are often left on their own resources. But here, they can back each other up.” She herself has been changed by the medico network project. “I’ve learned how to draw up budgets, write reports and manage projects myself. This gives me strength.”

Maria Hartmann and Usche Merk
### SUMMARY OF PROJECTS

## PROJECT OVERVIEW

### SUPPORTED PROJECTS BY REGION

### AFRICA

**Egypt**
- Core support for El Nadeem Center for Rehabilitation of Victims of Violence
  - € 6,172.84 (incl. support from stiftung m.i.)

**Kenya**
- Advocacy for health and human rights in Kenya, Kamukunji Paralegal Trust (KAPLET)
  - Participation in the presentation of a shadow report to the 57th session on the Convention on Economic and Social Rights (CESR) on the implementation of economic, social and cultural rights in Kenya, KAPLET
- Support of LGBTI Refugees and Asylum Seekers (CESSI), KAPLET
  - € 36,232.06

**Mali**
- Core support for Association Malienne des Expulsés (AME)
- Contribution to jubilee symposium (20 years of AME), AME
- Support to deported and rejected migrants in Mali. Improvement of conditions of reception, Association des Refoulés d’Afrique Centrale au Mali (ARACEM)
  - € 62,000.00

**Mauretania**
- Legal advice and social support to migrants, regional networking of organisations working on the respect of the rights of migrants, Association Mauritanienne des Droits de l’Homme (AMDH)
  - € 30,000.00

**Sierra Leone**
- Strengthening rights and access to health care – paralegal programme in Kono District, Network Movement for Justice and Development (NMJD)
- Strengthening self organisation of deported ex-asylum seekers and their advocacy, Network of Ex-Asylum Seekers Sierra Leone (NEAS) and Conscience International (CI)
- Regional networking – participation of NEAS-SL representatives in the jubilee symposium of the Association Malienne des Expulsés (AME) in Bamako, Mali
  - € 30,849.25 (incl. support from stiftung m.i.)

**South Africa**
- Strengthening self organisation of community care workers in South Africa and their representation in the public health sector, Khanya College, People’s Health Movement – South Africa, Section 27, Sinani, Sophiatown Community Psychological Services (SCPSS)
- Strengthening the political and social human rights of people with HIV/AIDS, Sinani
- Core support for Sinani
  - € 389,795.80 (incl. support from BMZ)

**Western Sahara**
- Provision of medication and medical equipment for Sahrawi refugee camps and capacity development for pharmaceutical staff, Ministry of Health of the Sahrawi Arab Democratic Republic (DARS)
- Contribution to the improvement of working and storage conditions in the central warehouse of the personnel of the Sahrawi Ministry of Health, DARS

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**AFRICA**

**Egypt**

**Kenya**

**Mali**

**Mauretania**

**Sierra Leone**

**South Africa**

**Western Sahara**

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**AFRICA**

**Egypt**

**Kenya**

**Mali**

**Mauretania**

**Sierra Leone**

**South Africa**

**Western Sahara**
Sri Lanka
- Supporting the sustainable resettlement for internally displaced people in northern Sri Lanka, Social, Economical and Environmental Developers (SEED)
- Foster a culture of peace in war-torn communities, SEED
- Community based conflict transformation and peace building: Ex-
- Change programme between SEED (Sri Lanka) and Sinani (South Africa)
- Core support for SEED
€ 282,643.71 (incl. support from BMZ and stiftung m.i.)

Zimbabwe
- HIV prevention and health promotion for Women / Lesbians, Gays and Lesbians of Zimbabwe (GALZ)
€ 41,038.94 (incl. support from stiftung m.i.)

ASIA
Afghanistan
- Addressing ethnic conflict in Afghanistan at the grassroots level, AHRRD
- Core support for AHRRD
- Reimobilisation of peaceful and democratic forces for social change, AHRRD
€ 103,799.48 (incl. support from AA and stiftung m.i.)

Bangladesh
- Rehabilitation fund for Rana Plaza workers and other victims of disasters in the textile industry, Gonoshasthaya Kendra (GK)
- Fact finding mission Rana Plaza factory collapse, European Centre for Constitutional and Human Rights (ECCHR)
€ 29,053.98

Nepal
- Youth work camps for re-building communities and promoting accountability, Association of Youth Organizations in Nepal (AYON)
- Nepal Youth Corps: Engaging youth in community empowerment, enhancing youth leadership and facilitation, AYON
- Integrated approach for preparing school stakeholders for rehabilitation and improvement education, health and sanitation of schools and livelihood possibilities of community, Health And Nutrition Development Society (HANDS) and Environmental Camps for Conservation Awareness (ECCA)
- Health, Engineering and Agriculture Project (HEAP-Nepal), Nepal Development Society (NEOS)
€ 535,374.93

Pakistan
- Establishment of a provincial level disaster risk management center in Karachi, Health and Nutrition Development Society (HANDS)
- Disaster prevention and disaster resilient rehabilitation in northern Sindh, HANDS
- Lighting Lives in Pakistan – LED solar lights for rural Sindh, HANDS
- Community health initiative on mental, maternal and child health in Karachi, HANDS
- Support of peasants movement and a model cooperative farm, National Trade Union Federation (NTUF)
- Labour rights and improving working conditions of workers in the global supply chain, NTUF
- Support of the claim for damages by victims of the garment factory fire against KK Textilien, European Center for Constitutional and Human Rights (ECCHR)
- Example of KK – a virtual model of the genuinely fatal working conditions in garment factories in southern Asia, ECCHR
€ 528,798.82 (incl. support from BMZ)

Philippines
- Fighting hunger, rebuilding lives: a reconstruction and rehabilitation program for typhoon–Haiyan devastated communities in Samar, Samahang Operasyong Sagi (SOS)
- Assistance for the affected population by typhoon Nona, SOS
- Capacity building plan to ensure continuity of fighting hunger, Rebuilding Lives Program, SOS
- Four years after Yolanda/Haiyan: The state of the people. Research, organizing and advocacy on super-typhoon, IBON Foundation
€ 321,821.12

LATIN AMERICA
Brazil
- Universal right of access to health, Centro Brasileiro de Estudos de Saúde (CEBES)
- Asserting the right to health, and networking with JnT in Maranhao, Instituto Políticas Alternativas para o Cone Sul (PACS)
- Asserting the right to health, and networking with PACS in Rio de Janeiro, Justiça nos Trihos (JnT)
- German global players in Brazil. How do companies deal with human rights?, Forschungs- und Dokumentationszentrum Chile-Lateinamerika (FDCL)
- Strengthening the federal school of the Brazilian landless movement (MST) and their allies, Escola Nacional Florestan Fernandes (ENFF)
- Strengthening the opposition communications work in Brazil, Otras Palavras
€ 115,645.00 (incl. support from stiftung m.i.)

El Salvador
- Strengthening the structures of the National Health Forum (FNS) in the districts of San Salvador and La Libertad, Asociación de Promotores Comunales Salvadoreños (APROCSAL)
- Strengthening the structures of the National Health Forum (FNS) in the districts of Usulután and San Salvador, APROCSAL
- Expenditure on the Central American office
€ 35,846.05

Guatemala
- Empowerment of youth and children in indigenous communities in the North of Guatemala, Asociación Coordinadora Comunitaria de Servicios para la Salud (ACCESS)
- Defending the economic, social, cultural and environmental rights in the region Izalco, ACCESS
- Strengthening of local capacities for food security, and supporting self-organization in the region Las Pozas, Sayaxché, Petén, Loq’ Laj Ch’oc, Sagrada Tierra
- Struggle against impunity and for the democratisation of the legal system, Comisión Internacional de Juristas (CIU) & Bufete Jurídico de Derechos Humanos (BUDH)
- Strengthening youth leaders of the Maya Q’eqchi community in the region Sayaxché, Petén, Sagrada Tierra
- Forest project, Fundación Centro de Servicios Cristianos (FUNCEDESSCR)
- Dealing with the psychosocial impact of grave human rights violations, Equipo de Estudios Comunitarios y Acción Psicosocial (ECAP)
- Expenditure on the Central American office
€ 270,856.96 (incl. support from BMZ and stiftung m.i.)

Haiti
- Emergency aid in Goyavier after Hurricane Matthew, Service Ocu-
ménique d’Entraide (SOE)
- Strengthening peasant movements in their struggle for human rights, South-South exchange with Brasil, Escola Nacional Florestan Fernandes (ENFF)
- Strengthening the rule of law and the struggle for the respect for human and civil rights in Haiti, Réseau National de Défense de Droits Humains (RNDHH)
- Relief for victims of hurricane Matthew in Les Irois, Grand Anse, RNDHH
€ 281,496.29 (incl. support from BMZ)

Mexico
- Caravan of the Mesameamerican Migrant Movement, Movimiento Migrante Mesoamericano (M3)
- Human rights work of the hostel for migrants “La 72”, “La 72” Hogar – Refugio para Personas Migrantes
- Expenditure on the Central American office
€ 55,208.92
**NEAR EAST, MIDDLE EAST**

**Iraq (Kurdish regions)**
- Support for internally displaced persons from central Iraq and disaster preparedness for new refugees from Mosul, HAUkari e.V.
- Expansion of Culture and Youth Centre in Kifri as a dialogue centre between internally displaced persons and host communities, HAUkari e.V.

€ 85,508.85

**Lebanon**
- Core support for Marsa Sexual Health Center, MARSA
- Empowering Palestinian refugee youth, Nashed Association
- Primary health care for Syrian refugees in the Beqaa valley and in Beirut, AMEl Association
- Strengthening women and young people in activities for community development in marginalised Palestinian communities in Greater Beirut and southern Lebanon, Popular Aid for Relief and Development (PrRD) € 596,072.29 (incl. support from AA)

**Palestine/Israel**
- Improving access to essential health services and provision of medications in the West Bank and in Gaza, Palestinian Medical Relief Society (PrMRs)
- Strengthening of health services and patients in dealing with non-communicable diseases in Gaza, PrMRs
- Purchase of an ambulance vehicle for the PrMRs emergency services
- Impact study on School for Community Health, PrMRs
- Defense of Palestinian land rights in the Jordan valley, Union of Agricultural Work Committees (UAWC)
- Core support for Physicians for Human Rights – Israel (PHR-IL)
- Mobile clinics programme 2016 in the occupied territories, PHR-IL
- Support for the Open Clinic Jaffa, PHR-IL
- Core support for Breaking the Silence
- Core support for Who Profits
- Core support for the Legal Center for Arab Minority Rights in Israel (Adalah)
- Support for EU advocacy & lobbying for a just Middle East policy, European Middle East Project (EuMEP)
- Core support for the Freedom Theater Jenin, The Freedom Theatre (FTF)
- Early detection of breast cancer, awareness and support of women in the Gaza strip, Culture and Free Thought Association (CTFA)
- School health program, Medical Relief Society Jerusalem
- Core support to alternative media work by Israel Social TV
- Expenditures of medico’s Palestine & Israel office € 2,184,775.59 (incl. support from AA and stiftung mi.)

**Syria (incl. Rojava)**
- Humanitarian assistance for Syrian-Palestinian refugees in Yelda and Yarmouk, JAFRA
- Support for the gynecology department in a health centre in Kobanê, Rojava Derneği
- Support of displaced Syrian-Palestinian girls and young women in Ein-El-Hilwet-Camp (Saída), Nashed Association
- Expansion and support to health services in northern Syria (Rojava) and Shengal (northern Iraq) and emergency aid for people from Mosul who fled to Rojava, Coordination of Rojava Health Council
- Supporting a women’s centre in Dourma
- Garbage removal, disease prevention campaigns and rehabilitation of a blood bank in the region Daraa, Adopt a Revolution (Aar) and Civil Society Center (CSC), Daraa
- Support for self-administered schools in Erbin, Local Coordination Committees (LCC)
- Expenditures of medico’s regional office € 1,492,969.59 (incl. support from AA and stiftung mi.)

**Turkey (Kurdish regions)**
- Support of Kurds in Turkey affected by the fighting and food aid for those who fled from besieged regions, Rojava Derneği (Hilfe und Solidarität mit Rojava e.V.)
- Legal assistance for Kurds that are threatened by expropriation in Dyarbakir-Sur, Mesopotamia Lawyers Association € 101,551.43

**OTHER**

**Global Health**
- Institutional and program support for People’s Health Movement (PHM)
- Support for 8th International People’s Health University in El Salvador, Movimiento para la Salud de los Pueblos América Latina (MSP-LA) via Centro de Información y Servicios de Asesoría en Salud (CISAS)
- Development of a key issue paper „Health in humanitarian Assistance“, Koordinierungsausschuss Humanitäre Hilfe des AA, medico
- Support for Medicus Mundi International and Global Geneva Health Hub
- Advancing proposals for Corporate Responsibility for Health in the extractive sectors in East and Southern Africa, EQUINET via Training and Research Support Centre (TARSC) € 164,886.24 (incl. support from AA and stiftung mi.)

**Migration**
- Critical public relations and training, Bundesarbeitsgemeinschaft der psychosozialen Zentren für Flüchtlings- und Ausländerhilfe (BAPFF)
- Campaign for the improvement of access to health services for asylum seekers, Büros und Netze für medizinische Flüchtlingshilfe (Medibüros)
- Moving Europe, Forschungsgesellschaft Flucht und Migration (FFM)
- Documentary on Australian refugee policy, Internationaler Menschenrechtsverband Bremen
- Therapeutic network for refugees – counseling, referral, training, Frankfurter Arbeitskreis Trauma und Exil e.V. (FATRA)
- Academy on migration in Africa and advocacy to African heads of government, Association Visions Solidaires
- Monitoring mission on migration policy in Niger, Association Visions Solidaires
- Support to accommodation for fleeing women and their children in Morocco, Afrique Europe Interact (AEI) and Association des Refugiés et Demandeurs d’Asile Congolais au Maroc (ARCOM)
- Support to vulnerable refugees in Athens, DItyo
- Travelling exhibition on the Balkan route, University of Göttlingen
- Support for refugees, Anti-Rassismus-Telefon Essen (ART) € 384,964.44 (incl. support from stiftung mi.)

**List of abbreviations**
- AA: German Federal Foreign Office
- BMZ: German Federal Ministry for Economic Cooperation and Development
- ECG: European Community Humanitarian Office
- MAP: Medical Aid for Palestine, Canada
- TARSC: Training and Research Support Centre
- CH: medico international schweiz
- m.: m.i.: medico international foundation
The total budget available to medico international in the period under review was €18,435,427.67. Compared to the previous year, this is an increase of 11.7%, primarily due to the growth of €1.2 million in public sector grants.

INCOME
Donations received by medico in 2016 totalled €5,364,799.21. Public sector grants also increased in the year under review, rising 26.9% to €5,607,551.51, but still not at a level which would be a danger to medico’s independence. The increase of permanent supporters is gratifying, with further growth of 220.

EXPENDITURE
In 2016 medico again received the Seal of Approval of the German Central Institute for Social Issues (DZI). Expenditure on statutory operational activities in 2016 totalled €10,701,147.69, or 92.06% of total expenditure. This breaks down into €8,768,987.91 (75.44%) spent on project support, €1,081,120.33 (9.30%) on project planning measures and €851,039.45 (7.32%) on campaigning and awareness-raising work. Expenditure on advertising and administration was €923,122.09, 7.9% of total expenditure. Project expenditure in the year under review increased by 30.8%.

PROJECTS
In all, we supported around 120 projects in the year under review, including – as a continuation of current programmes – emergency services to Syrian refugees in Lebanon and the Kurdish regions in the north of Syria, strengthening health services in Palestine and supplying medication to the Sahrawi refugee camps. We paid great attention to efforts to improve safety at work and compliance with social standards, including in Bangladesh and Pakistan.

RISKS AND OPPORTUNITIES
The solid financial basis for medico’s work was further consolidated in 2016. The tremendous response medico encountered in 2016 in public and in the media shows strong agreement with medico’s goals and concerns. Pressure for alternative social policies plays a great role here. This shows the strength of medico’s particular approach of disclosing the scandals of misery and injustice while, through concrete projects and clear political demands, presenting a vision of other conditions in a world of solidarity. The societal spectrum in which medico intervenes includes church communities, Third World initiatives and solidarity committees trade unions, political associations, universities and research and culture up to state entities. We are particularly happy about our growing success to interest younger people in medico’s work. The risks apparent in medico’s work relate primarily to our partners in the South. They are facing a double-edged problem, with on the one hand a growing gap between the demand for action that they see and the funding actually available for it, and on the other hand the increasingly controlling and sometimes openly repressive state measures that are steadily reducing the space for civil society engagement.

CONCLUSION
medico can count on a sound base for its engagement, and is satisfied that its independence of state grants continues to be guaranteed. The tremendous response to medico shows how rapidly awareness is growing that the world’s problems cannot be solved by aid alone. It is still necessary to emphasise a critical concept of aid which is expressed in solidarity with and support for all those striving to assert the right to health in their specific life context.

Thomas Gebauer
## OVERALL RESULT

### INCOME

<table>
<thead>
<tr>
<th>Source</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary donations</td>
<td>4,699,963.76</td>
<td>4,743,510.96</td>
</tr>
<tr>
<td>Donations from ‘Bündnis Entwicklung Hilft’</td>
<td>864,835.45</td>
<td>1,340,829.15</td>
</tr>
<tr>
<td>Grants - public funding</td>
<td>5,433,294.67</td>
<td>4,234,929.97</td>
</tr>
<tr>
<td>Grants - non-public funding</td>
<td>174,258.84</td>
<td>182,293.90</td>
</tr>
<tr>
<td>Contributions of the medico international foundation</td>
<td>280,000.00</td>
<td>130,000.00</td>
</tr>
<tr>
<td>Bequests</td>
<td>222,115.49</td>
<td>49,138.37</td>
</tr>
<tr>
<td>Fines</td>
<td>11,396.00</td>
<td>52,920.00</td>
</tr>
<tr>
<td>Interest and other income</td>
<td>8,972.61</td>
<td>19,862.67</td>
</tr>
<tr>
<td>Member fees</td>
<td>7,433.12</td>
<td>8,737.64</td>
</tr>
<tr>
<td>Income for other accounting periods</td>
<td>0.00</td>
<td>54,537.70</td>
</tr>
<tr>
<td>Other revenues</td>
<td>8,481.70</td>
<td>34,358.56</td>
</tr>
<tr>
<td><strong>TOTAL INCOME</strong></td>
<td><strong>11,508,749.64</strong></td>
<td><strong>10,851,116.92</strong></td>
</tr>
</tbody>
</table>

### Reserves

According to § 58 No. 6 of the German fiscal code (Abgabenordnung-AO) as at 01 January: 4,693,979.43 3,697,745.42

for projects that were scheduled in the previous year but whose issuing of funds could not or could only partially be completed by 31 December and are for earmarked remaining funds and for securing the Association’s institutional viability.

Free reserves according to § 58 No. 7a of the German fiscal code (AO): 1,992,000.00 1,732,000.00

**Association Capital – As at 01 January**: 240,698.60 224,266.35

**BUDGET**: 18,435,427.67 16,505,128.69

### EVOLUTION OF INCOME [IN EURO M]

![Graph showing the evolution of income over years](chart.png)

- **Direct donations to medico**
- **Donations from ‘Bündnis Entwicklung Hilft’**
- **Grants**
- **Other income**

### Financial Report

14
## Expenditures

<table>
<thead>
<tr>
<th>Item</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project funding</td>
<td>8,768,987.91</td>
<td>6,703,505.18</td>
</tr>
<tr>
<td>Project management</td>
<td>1,081,120.33</td>
<td>982,266.55</td>
</tr>
<tr>
<td>Campaigning and education work and awareness raising in line with statutes</td>
<td>851,039.45</td>
<td>930,911.44</td>
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<tr>
<td>Advertising and general public relations work</td>
<td>286,488.59</td>
<td>297,900.94</td>
</tr>
<tr>
<td>Administration</td>
<td>638,833.50</td>
<td>663,866.55</td>
</tr>
</tbody>
</table>

**TOTAL EXPENDITURES**

<table>
<thead>
<tr>
<th>2016</th>
<th>9,624,269.78</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>9,578,450.66</td>
</tr>
</tbody>
</table>

**Reserves**

According to § 58 No. 6 of the German fiscal code (AO)

**as at 31 December**

<table>
<thead>
<tr>
<th>2016</th>
<th>4,480,088.44</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>4,693,979.43</td>
</tr>
</tbody>
</table>

For projects that were scheduled in previous year but whose issuing of funds could not or could only partially be completed by 31 December and are for earmarked remaining funds, and for securing the Association’s institutional viability.

**Free reserves according to § 58 No. 6 of the German fiscal code (AO)**

<table>
<thead>
<tr>
<th>2016</th>
<th>2,106,000.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>1,992,000.00</td>
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</tbody>
</table>

**Association Capital – As at 31 December**

<table>
<thead>
<tr>
<th>2016</th>
<th>225,069.45</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>240,698.60</td>
</tr>
</tbody>
</table>

**BUDGET**

<table>
<thead>
<tr>
<th>2016</th>
<th>18,435,427.67</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>16,505,128.69</td>
</tr>
</tbody>
</table>

### Project Expenditures by Region

![Pie chart showing project expenditures by region](chart.png)
### MEDICO INTERNATIONAL E.V. – ORGANISATIONAL STRUCTURE

#### ANNUAL GENERAL MEETING

**SUPervisory Board**
- Brigitte Kühn, Chair
- Dr. med. Anne Blum, Deputy Chair
- Rainer Burkert, Deputy Chair
- Johannes Katzan, Member of the Board
- Helga Riebe, Member of the Board
- Margit Rodrian, Member of the Board

**Management**
- Thomas Gebauer, Executive Director
- Florian Bernhard-Kolbe, Assistant to the Management

**Supervisory Board**
- Karin Urschel, Head of Projects; Project Coordination (PC) South America
- Johannes Reinhard, Head of Administration and Finance
- Katja Maurer, Head of Public Relations

**Projects Department**
- Dr. Sönke Widderich, Deputy Head of Department, PC Southern and Southeast Asia
- Peter Biermann, PC Central America and Mexico
- Eva Bitterlich, PC Emergency Relief
- Sabine Eckart, PC Migration, PC Kenya, Western Africa and Zimbabwe
- Anne Hamdorf, PC Haiti and Western Sahara
- Wilhelm Hensen, PC Kurdistan
- Till Küster, PC Syria and Lebanon
- Usche Merk, PC Psychosocial Work, PC South Africa and Sierra Leone
- Hendrik Slusarenka, PC Emergency Relief
- Dr. med. Andreas Wulf, PC Health, PC Middle East

**Administration and Finance Department**
- Jens-Alexander von Bargen, Deputy Head of Department, Controlling, Finance and Accounts
- Jan Krabbe, Donations Administration and Support, Legacies, Field Offices, Advocacy Projects
- Bernadette Leidinger-Beierle, Accounts
- Anke Prochnau, Accounts
- Nicole Renner, Accounts
- Andrea Schulte, Accounts
- Uwe Schäfer, EDP and IT
- Kristina Schusser, Personnel Administration

**Financial Project Coordination, Co-financing and Donations**
- Philipp Henze, Susanne Huber, Elena Mera Ponce, Rachide Tennin, Rita Velásquez

**Medico Office Central America**
- Herlon Vallejos, Office and Financial Coordination

**Medico Office Palestine and Israel**
- Dieter Müller, Office Director
- Laila Yousef, Financial Coordination
- Rojan Ibrahim, Project Coordination
- Nida Ataya, Project and Administration Finances
- Wardeh Barghouti, Office and Administration

**Medico Office Western Sahara (in Algeria)**
- Amokrane Tagett, Financial Coordination
- Salim Ali, Logistics, Monitoring
- Mehdi Mohammed Lamin, Assistant, Logistics

**Public Relations Department**
- Bernd Eichner, Deputy Head of Department, Press Relations, Emergency Relief
- Marek Art, Office Management, Event Organisation, Proofing
- Dr. Marcus Balzeritz, Beyond Aid, Psychosocial and Social Work
- Anne Jung, Campaigns, Health
- Gudrun Kortas, Donor and Benefactor Communications
- Moritz Krawinkel, Online Editor, Latin America
- Dr. Ramona Lenz, Migration
- Riad Othman, Near East Coordinator
- Dr. Thomas Seibert, Human Rights, Conferences, Southern and Southeast Asia
- Anita Starosta, Donor Communications
- Frank van Oyen, Office Management, Event Organisation
- Jürgen Wälther, Homepage

**As at: 01.05.2017**