



Response and Recovery

**MERCY Malaysia: Healing the Wounds
of Disaster and Conflict**

Gene Mustain, Centre for Asian Philanthropy and Society

Response and Recovery

MERCY MALAYSIA: HEALING THE WOUNDS OF DISASTER AND CONFLICT

Gene Mustain, Centre for Asian Philanthropy and Society

With emergency relief and long-term intervention, a humanitarian aid organization helps treat the physical and emotional wounds of people and nations across the Global South.

As is the case with so many natural disasters, the news came unexpectedly. Dr. Ahmad Faizal Mohd Perdaus is president of MERCY Malaysia, also referenced as MERCY, a humanitarian aid organization that provides medical care and disaster-related services to countries in crisis or non-crisis situations. He was on his way home from a meeting in Kuala Lumpur just after noon on Saturday, April 25, 2015, when he heard a bulletin on his car radio: *A major earthquake has hit Nepal; hundreds feared dead.* Nepal, Dr. Faizal instantly knew, was going to be a crisis.

As a volunteer, he had traveled with MERCY Malaysia emergency response teams to many nations to provide medical care in areas stricken by epidemics, floods, military conflicts, refugee crises, tsunamis, and typhoons. Now, as the organization's president, part of his job is to help decide where to deploy its resources, including which of its doctors and volunteers are best suited for the particular mission at hand, based on their specialties and experience. "I started thinking about how fast we could get to Nepal, and with



People along banks of Manik Urai River used small boats to reach neighbors stranded by the Yellow Flood.

which people,” Dr. Faizal, a specialist in internal medicine, later recalled.

It was going to be a complicated task, and it did not help that it was Saturday, a day off for almost everyone on MERCY Malaysia’s 50-person staff and for many of its volunteers. In a crisis situation, MERCY’s goal is to get its first team and their portable field hospital and bulky supplies to the scene within 48 hours and a second within 72. In a major crisis, the certain chaos unfolding at the scene will challenge the teams in unpredictable and possibly dangerous ways. “When the disaster hits, you have to sort out all kinds of issues, including the potential risks for your own people,” Dr. Faizal added.

Dr. Shalimar Abdullah, a long-time volunteer and also a member of MERCY Malaysia’s executive council, was at home packing for a conference of the Association of Southeast Asia Nations (ASEAN) when she heard another news bulletin.

Powerful earthquake shocks Nepal. Reports indicate 7.8 on the Richter scale. The bulletin was a timely reminder of the importance of the ASEAN meeting, where, prophetically, humanitarian experts were scheduled to practice coordinated responses to many hypothetical disasters: a typhoon, a chemical blast, a train wreck, landslides, flooding, an earthquake. Dr. Shalimar, an orthopedic surgeon, immediately locked onto one certain consequence of the Nepal earthquake. Building collapses, rock slides, and other havoc would mean, in addition to much death, many survivors with fractured limbs. “Earthquakes always correlate to orthopedics,” she later said. “And the logistics for providing help in the field can be overwhelming.”

MERCY’s executive director, Ahmad Faezal Mohammed, was home when he heard the news. *Death toll in devastating Nepal earthquake is rising. Thousands are missing.* The seeming scale of



Wooden homes 30 feet above Manik Urai River were no match for sudden flash flooding.

the disaster told him many governments and aid agencies would be assembling search, rescue, and medical teams and then rushing to Kathmandu, the capital of Nepal. Its airport, very near the earthquake's epicenter, was five hours away by air from Kuala Lumpur. "When I learned it was a 7.8 on the Richter, I knew it was going to be big," Faezal said. "From the early television footage, you could see there was massive destruction. I knew there would be a lot of bodies under the rubble."

Shah Fiesal Hussain, who captains MERCY's army of volunteers, was leading a field-training exercise for providing security in crisis situations for 24 new volunteers in the jungle north of Kuala Lumpur when the earthquake hit and Dr. Faizal called to alert him. The news was another timely reminder — the importance of training sessions, on security and many other matters, on a regular basis. "Getting people ready for deployment is emotional and physical, and you have to prepare them for how to handle it," he said. "Once a deployment is approved, you must move quickly. The earlier you get to the disaster scene, the greater the benefit."

A PRIVATE-PUBLIC PARTNERSHIP

Half a world away, in New York City, a senior humanitarian official at the United Nations began following the Nepal story closely. Tan Sri Dr. Jemilah Mahmood had more than professional reasons for monitoring this particular disaster. In 1999, while running a private medical clinic in Kuala Lumpur with her doctor husband, she founded MERCY Malaysia, which she now assumed would soon be deploying teams to Nepal.

The founding grew partly out of frustration with her inability to find a Malaysian organization for which she could volunteer to help those wounded or displaced by sectarian wars in Europe's Balkans region. Dr. Jemilah, a gynecologist and obstetrician, was especially moved by the plight of women and children in Kosovo. In letters to several humanitarian organizations, she said she would pay her own way there. None replied. Undeterred, she enlisted friends to help her incorporate her own

non-governmental organization (NGO). In June of that year, she and a few fellow doctors left for Kosovo. They paid their own way. Over the next few months, they returned to Kosovo four times.

The trips were symbols of another reason she founded MERCY Malaysia: to set an example for her fellow citizens. "I was always annoyed that Malaysians did not see their role in global humanitarian issues," she said. "I could not accept that development of a nation is not accompanied by development of your soul and solidarity with other people." Over the next few years, with little donor support, Dr. Jemilah and other volunteer doctors went on emergency or long-term missions to 14 countries, mainly in South-east Asia, but also north and central Africa, China, the Middle East, Japan, and North Korea. By December of 2004, Dr. Jemilah and MERCY Malaysia were widely admired at home. But the organization was seen as having little potential for growth in the humanitarian aid world because it depended on the unpredictable availability of a well-meaning but small group of doctors with little or no management experience.

That reputation started to change over the next year, however, and it began with one of the worst disasters in recorded history: a large Indian Ocean earthquake that set off a ferocious tsunami that left hundreds of thousands dead in 14 countries and washed most heavily over Aceh province in Indonesia. A MERCY Malaysia team got to Aceh as fast as it could, but its impact was limited, frustrating its leaders and volunteers and other Malaysians who wanted the country to do more to help other nations coping with disasters while also developing a greater capacity to prepare for and respond to crises at home.

At the time, Khazanah Nasional Berhad, the strategic investment fund of the Malaysian government, was in the conceptual stages of starting a corporate responsibility program. Khazanah, though owned by the Malaysian government, is a public limited company. One of its employees was a MERCY volunteer, and that connection led to a meeting between the managing director of Khaz-

anah, Tan Sri Azman Mokhtar, Dr. Jemilah, and others. The meeting led to what became Khazanah's debut program in corporate responsibility, and an emblem of how a public limited company can enable the development of civil society.

The meeting also led to transformational growth and impact for MERCY Malaysia. A well-meaning group of volunteer doctors became a professionally managed organization respected across the Global South, which includes much of Asia, the Middle East, and Latin America. In embarking on a partnership together, Tan Sri Azman was keen to ensure good governance, and that MERCY would develop into a strong, sustainable organization. At the request of Dr. Jemilah and with support from professional consulting firms, a diagnostic study was completed and reforms suggested to improve MERCY's operations pertaining to risk management, accountability, human resources, and IT.

This rigorous assessment and the resulting changes led to MERCY receiving certifications for humanitarian accountability, and to the strengthening of its charter and overall governance. In these achievements, Khazanah acted as a catalyst and critical partner. Compared to donors who provide only financial support for non-profit organizations, Khazanah's approach with MERCY Malaysia was unconventional. Before handing over any funds, it sought to understand MERCY Malaysia's DNA, its fundamental and distinctive characteristics. Late in 2005, after the assessments and recommendations, Khazanah and MERCY Malaysia entered into the first of two separate and successive three-year agreements in which Khazanah contributed up to US\$1 million a year to its new civil society partner.

The emphasis in the first agreement was on developing and shoring up MERCY's back-office operations by, among other initiatives, hiring paid administrators and staff, while also providing funding for emergency response and program development. The second agreement focused on extending support for similar capacity issues and on devising a multi-layer approach to humani-

tarian aid that went beyond emergency relief to recovery, prevention, and preparedness. As with the first agreement, MERCY was required to submit reports measuring the impact of its partner's donations. After the second agreement ended in 2011, Khazanah ended its contribution to the capacity development of MERCY while still contributing to crisis response.

By that time, MERCY was on its feet with a significant fundraising operation of its own. That was part of the plan all along, to have MERCY Malaysia achieve its own funding sustainability via Khazanah-supported strategic planning and financial support. "We are happy with our support and collaboration with MERCY Malaysia, especially in their early days. We focused on strengthening their organizational capabilities in order for MERCY to deliver their response effectively and with speed," said Shahira Ahmed Bazari, managing director of Yayasan Hasanah, a foundation Khazanah later formed to differentiate its investment management for the government from its growing commitment to corporate responsibility and capacity building



Dr. Shalimar Abdullah, a long-time volunteer, is also a member of MERCY Malaysia's Executive Council.



Rosamanita binti Zainal Abiden, a widow, and her four children and two of their playmates found shelter at MERCY Malaysia village in Kelantan.

for civil society partners. “This model of support — toward organizational development — created a funding model that paved the way in how we support other civil society organizations through our grants program,” she said.

Yayasan Hasanah focuses on five core areas: education; community development; environment; arts, heritage, and culture; and knowledge. MERCY, which falls within the core area of community development, exemplifies how Khazanah, and now Yayasan Hasanah, builds the capacity of its Civil Society Partner Organisations (CSPO) to sustain themselves operationally and financially. “We usually go in with an exit plan in view. We cannot continuously support our partners — then it’s almost like giving them a crutch for life!” said Shahira. “We are pleased to see how much MERCY Malaysia has grown. They carry the Malaysian flag high in their global humanitarian response efforts.

As they enter their next curve of growth, MERCY will need to review their new sets of challenges and continue to stay relevant, effective, and credible.”

By 2015, Yayasan Hasanah’s financial support for MERCY was focused on funding for disaster preparedness, and for emergencies; which for the latter could be tapped within 24 hours of the start of a crisis so that, along with other purposes, an ERU team could arrive at the scene within the desired time, 48 hours. For Nepal, Yayasan Hasanah gave MERCY Malaysia US\$120,000 to get going fast.

DAY ONE

A couple hours after the ground started breaking apart in Nepal, MERCY Malaysia staff members began assembling in their offices to help with what they now knew was going to be a major mission. One of them created a WhatsApp group for her colleagues. Its name was to the point: “Nepal

Earthquake.” At 4 p.m. Shah Fiesal Hussain, head of volunteers, exited the jungle and left his trainee volunteers in the company of police officers helping out with the security lessons. He jumped into a van with two staff members, headed back to MERCY headquarters, and started calling core volunteers to learn who could go to Nepal quickly.

Meanwhile, executive director Ahmad Faezal Mohammed began calling counterparts in the United Nations Office for the Coordination of Humanitarian Aid (UN-OCHA), which collects and distributes information as crises develop anywhere in the world, and in the Asian Disaster Reduction and Response Network (ADRRN), a coordinating agency for humanitarian groups in 20 nations. After an afternoon of WhatsApp group texts and telephone calls, the two men and Dr. Faizal and other MERCY Malaysia leaders met at their Kuala Lumpur headquarters at 7 p.m.

It was Saturday, April 25, a little past seven hours into Day One of MERCY Malaysia’s emerging response. The question of whether to deploy an Emergency Response Unit (ERU) had already been resolved by headlines; the next question was, who would lead the team? Dr. Faizal and others quickly chose Dr. Heng Aik Cheng, an orthopedic surgeon and traumatologist, and veteran of many missions who also is one of two vice presidents of MERCY Malaysia’s Executive Council. They also chose six others to join him: two more medical volunteers, a nurse and an anesthesiologist, and four logistical experts. All, like Dr. Heng, were mission veterans. MERCY Malaysia wants experience-under-fire on its first ERU team.

Later that evening, the leadership team held discussions with Malaysian national authorities who wanted MERCY Malaysia’s ERU team to travel to Nepal with a government search-and-rescue team and another humanitarian aid organization, the Malaysian Red Crescent Society. As the nation’s prime minister would say the next day, the government wanted to show strong support for Nepal. The two nations have long-time political and economic ties.

DAY TWO

On the second day of MERCY Malaysia’s response to Nepal, Malaysia’s government announced that MERCY Malaysia and the Malaysian Red Crescent Society teams would fly to Kathmandu with its search-and-rescue team on a military plane. Malaysian Prime Minister Najib Razak promised Nepal “all possible assistance.” At 1 p.m., MERCY executive director Ahmad Faezal, briefed his executive council, which then endorsed the composition of the first ERU team. Faezal scheduled an operations meeting an hour later at the organization’s headquarters.

MERCY Malaysia is the secretariat for the ADRRN. In addition to consulting with its member nations to assess their interest or capacity to respond to Nepal, Faezal and other MERCY Malaysia leaders had to coordinate with international agencies such as the Global Health Cluster of the World Health Organization (WHO), which had already begun organizing operations with Nepal’s Ministry of Health. As expected, several countries and agencies were preparing to go to Nepal, and though the intent in such situations is obviously good, the result on the ground can be unintentionally bad, with groups and governments tripping over one another, setting up aid stations that duplicate services, handing out supplies that cause riots.

Because most of MERCY’s leaders had been on missions and also taken part in meetings in the eye of storms, they came to the 2 p.m. meeting knowing well what had to be done and how hard it would be. The still-unfolding drama in Nepal — a major aftershock had ripped through a region near Kathmandu an hour before the meeting — raised its energy level. For prior missions, Executive Council member Dr. Shalimar had served as a leader, organizer, field-hospital doctor, and logistical advisor at the scene of many horrific disasters, including the earthquake-induced tsunami that roared across Aceh in 2004. She knew each part of the pressure cooker. “We needed to plan it so that we could get to Nepal *tomorrow*,” she said. She knew not every organization would be particularly welcomed, but “we were getting in because of our reputation.”

In addition to picking the ERU team and coordinating with other groups about where to meet on the ground and what to do once there, MERCY Malaysia had to retrieve emergency equipment and supplies stored in a warehouse and prepare them for shipment. The supplies included huge tents for a field hospital and for providing shelter for the ERU team, in case housing could not be found in buildings still standing and considered safe. “At the outset, everything is difficult to coordinate,” Rossimah Mohamed, head of monitoring and evaluation for MERCY Malaysia, said after the mission was underway. “But it is essential, particularly in the first three weeks. The first three weeks, that is life-saving time.”

By the end of the meeting at headquarters, MERCY Malaysia had a plan. ERU team members knew with whom they would be traveling

and coordinating. The final go-ahead was given to transport the equipment and supplies to the airport and load it onto the military airplane. About 11 p.m. on Sunday, April 26, about 35 hours after the earthquake, the plane took off for Kathmandu, a five-hour flight away. The 48-hour window appeared to be in sight.

But as is often the case in disaster scenarios, some things did not go as planned.

DAY THREE

It was late in the afternoon on Monday, April 27, three days into the drama, and Megawati Md Rashidi was exhausted and a bit agitated. For 18 months, she had been general manager of communications and fundraising for MERCY Malaysia. A week after the former marketing executive signed



Dr. Ahmad Faizal Mohd Perdaus, president of MERCY Malaysia, gets his heartbeat measured by a newly made friend.



Many homes and trees were destroyed on banks of Manik Urai River.

on, a typhoon hit the Philippines and she had to learn her job fast. Megawati had been awake since the day before. As she spoke, young staff members came in and out of her office to review suggested talking points for a radio station interviewer who wanted to help MERCY Malaysia raise money for its Nepal efforts. The emergency grant from Yayasan Hasanah was already in the bank, but MERCY Malaysia by 2015 relied substantially more on public donations — and grants from the private sector and other NGOs and foundations — to finance operations.

Megawati was agitated by what she had seen and heard so far in the media coverage, which to her had not communicated the dimension of the disaster. “We are quite offended by the media’s initial death toll reports,” she said. “Little do people know how big it is going to be with that 7.8 Richter. It’s always low-balled; we know it’s going to be higher. But they always low-ball it.” MERCY Malaysia’s experts, naturally, know a lot about earthquakes. This one broke only five miles beneath the surface, shallower than most and therefore more dangerous.

“Yesterday, there was footage of people digging up people with [their] hands,” Megawati said. “This is going to be bad.”

It also was going to be bad for another reason. The government airplane with MERCY Malaysia’s ERU team had not yet landed in Kathmandu. Neither had other airplanes; Nepal had closed its small airport the night before because it did not have room to park all the giant cargo airplanes seeking to land, and its air traffic controllers were overwhelmed. The Nepal government also feared further aftershocks. The earthquake’s epicenter was 50 miles north of the airport, which sits on a vulnerable shallow crust of land. MERCY Malaysia’s leaders and members of the first team had been through similar situations before and were well aware of what they meant: more death and suffering on the ground, more chaos when they arrived. “Our plane was diverted and is stuck in India at the moment,” Megawati said, frustration in her voice.

The plane was still 1,834 miles away from Kathmandu, about what it was when it left Kuala Lumpur. The 48-hour window was now closed.

DAY FOUR

It was about 11 a.m. on Tuesday, April 28, nearly four days after the earthquake. CNN was now reporting 4,800 “confirmed” dead. In his office near Megawati’s, executive director Faezal was looking a bit more relieved than he had yesterday. The airport had reopened to staggered arrivals and departures. The MERCY team was now at the airport coordinating with other agencies. In a few hours, the team would be treating the injured near a school 10 miles north of the airport in a battered community where about 10,000 people lived and where an unknown number had died. “It’s still going to be a challenging time for the team,” Faezal said, because they had spent restless hours in their hotel, waiting for word on when the airport would reopen “They are in Nepal now, but they haven’t had enough time to eat or rest and they have to get to work right away.”

He was manager of personal financing for a major bank in Kuala Lumpur before being recruited two years ago to direct MERCY’s management. He had the kind of background Khazanah wanted

back when it was evaluating whether to enter into a partnership with a well-meaning group of doctors who had little or no management experience, and take them to a higher level. The reason he took the job, Faezal said, “was definitely not money. But I’ve always been attracted to humanitarianism, and here was this organization growing from small to big. It’s still very new to me, but leaps can be made by instilling professional values.” At the moment, Faezal was overseeing the formation of a second ERU team for Nepal; three more were being planned. On short notice, it can be hard to find doctors and nurses who work for public hospitals that have to agree to grant them time off. Doctors who work for private clinics are usually more available. The latter was the case with the first ERU team sent to Nepal. “So when the government asked if we were ready to go,” Faezal said, “we said, ‘Yes MERCY is ready.’”

DAY FIVE, PART 1

It was now near noon on Wednesday, April 29, 2015, almost exactly five days after the earthquake. *The Times of India* was reporting that the death toll



Flood waters ripped through a home and left an armchair wedged high in a tree.

was 5,000 and counting. The dead now included eight Nepalese soldiers on a search-and-rescue mission and 17 climbers on Mount Everest. MERCY Malaysia's second team, with 11 members, was now on the ground. Its first team had so far treated 280 wounded. Shah Fiesal Hussain, the head of volunteer management, sat at a desk piled with papers and complications. He and the leadership team were now considering sending as many as 15 teams into the field. The more teams it dispatches, the deeper it has to reach into its talent pool.

The pool is theoretically 7,000-people deep, but of that, Shah Fiesal said only 4,000 are actually "active," and maybe 1,500 can be counted on to consider going. But more than 200 "are solid," ready to go at any time. His job now was to line up the solid. "You have people who say, 'I want to go', but aren't chosen," he added. "But why?" they will ask. With the medical part of it, they understand that; it takes a specific skill set. For the non-medical part of it, it's a bit challenging sometimes to tell them they're not going." The logistical work on a mission is more difficult than is understood by people who have not done it, so they have to be trained.

That was why Shah Fiesal was out in the jungle the day the earthquake hit, helping volunteers learn how to provide safety and security in the field. That is just one required non-medical skill, and for the others, MERCY Malaysia relies on a team of 30 volunteers — engineers, technicians, and its own logistics experts — to help teach them. One of the most important skills cannot be taught, only emphasized. The field requires fast adaptation and solving problems impossible to predict. "Okay, in Nepal when we got there, we needed two four-wheel drives and a big lorry to move things around," Shah Fiesal said. "Where are you going to find those in the middle of an earthquake zone? We did."

DAY FIVE, PART 2

A television crew wanted to interview Shah Fiesal about MERCY Malaysia in Nepal, so he left his office to conduct the standup interview near a row of cubicles for MERCY staff. Over the last few

days, they had been organizing the contents of several large blue plastic containers lined up along a hallway. These were medical supplies and other necessities future ERU teams would need in the field. The containers were around the corner from the office of Rossimah Mohamed, one of the most experienced MERCY leaders and now head of monitoring and evaluation.

She started as a volunteer in 2001, and though no one is keeping score, she has probably seen more mayhem and tragedy than any of her MERCY colleagues. In her experience, she said, people in other countries regard MERCY Malaysia as neutral and independent, which was not always the case with other humanitarian aid organizations, particularly those from the West. "People view Malaysia as neutral. It's like, 'You're from Malaysia? Oh, okay, Malaysia.' In Asian countries, the perception of some Western countries can be different."

Rossimah also served in post-tsunami Aceh province in Indonesia. She gave a year of her life to help its people recover physically and emotionally, and restore some order to their lives. The challenges of each mission clearly vary, but usually result in tours of a few days or a few weeks. Rossimah was in the field for three months before she came home for a rest and then went back out for three more months. Rossimah served in several posts for MERCY Malaysia before joining Yayasan Sejahtera, an NGO incubated by Khazanah in 2009 to work on poverty eradication programs. As with MERCY, the emphasis was on developing the capacity of groups to serve communities, rather than just donating money. Rossimah re-joined MERCY in 2014 and was assigned to monitor its internal governance and evaluate its external accountability. "If you want to grow, the governance must be there," she said. "And then we have to share our achievements with quality reports that demonstrate what we do, and that show how lives were changed and saved."

She added that MERCY spent so much energy responding to crises and providing its other health-care and risk-reduction programs in the field that

it sometimes does not focus enough on developing its most important resource, its own people. “We need to look at training and exchanges,” she said. “A lot on the ground is changing. The challenges are bigger.” She said one possibility is finding internships for MERCY Malaysia staff at larger humanitarian aid organizations with much experience at sorting things out on the ground. Dealing with different governments, different communities, and different NGOs, while navigating the politics — that is difficult,” she said.

DAY SIX

On April 30, 2015, several media organizations were headlining the story of a teenage boy just now pulled from the debris of a collapsed building. He survived by squeezing drinking water from wet clothes. The Associated Press was reporting that the death toll was now 6,000 and that 11,000 people had been injured. At MERCY Malaysia headquarters, Dr. Shalimar Abdullah said the nature of the Nepal crisis was starting to change, at least for the survivors. The trauma now was not so much physical as emotional: “A lot of the people arriving at the shelters are in need of psychological and social counseling.” As a result, MERCY was changing the composition of its outgoing teams, replacing orthopedists and traumatologists with counselors, public health experts, and general practitioners. “These situations require a lot of monitoring,” Dr. Shalimar said. “Could we do this, should we do that?”

MERCY Malaysia is also known as the Malaysian Medical Relief Society. Its Executive Council members, such as Dr. Shalimar, are elected, not appointed. The election turns on whether voters are society members or volunteers. People who become members can participate in its governance. They pay about US\$12 for a one-year membership or about US\$117 for a life membership. Either way, they have voting privileges on issues placed on the table at an annual meeting, and can stand or vote for Executive Council memberships. As a council member, Dr. Shalimar keeps her eyes on the big picture. The nature of humanitarian work, even for a small

organization with a now fairly successful fundraising record, always introduces a sustainability question. At the time of the Nepal earthquake, for example, MERCY had already committed substantial dollars and personnel to post-flood recovery for the people of the Kuala Krai district in the state of Kelantan.

She said MERCY’s sustainability question is compounded by personnel turnover. High-caliber managers can get higher salaries elsewhere. “It’s the old chicken-and-egg problem,” she added. “You can’t grow unless you pay more; you can’t pay more unless you get more funding.” In two more weeks, the Nepal crisis would wind down. The final toll, according to the Nepalese government: 9,018 dead, 21,952 injured. The figure for the dead was 1,000 more than the government estimated on Day One. The number at the outset had been low-balled.

It was Nepal’s worst disaster since 1934.

LIFE AFTER JIM

Jemilah Mahmood grew up in a large and diverse family given to helping others. Her father was Malay, her mother Chinese. Including their children from previous marriages, and children they adopted, they were the parents of 13. The family included Muslims and Christians. Mahmood, the youngest child, remembers parents who always encouraged her to volunteer at school and in the community, and a household where others came to live when their times were tough. “My father taught us to embrace the diversity of our family,” Jemilah recently recalled. After her father died when Jemilah was 11, her mother went to work to take care of the children remaining at home. Just before her mother died, Jemilah added, “She told me to do good in life and do the right thing. She also advised me to work hard and to strive for excellence.”

Jemilah grew up during a period of particularly high inter-racial tensions, which culminated in deadly riots in Kuala Lumpur in 1969. Later on, she learned about the theory of conservative American political scientist Samuel Huntington, who in 1993 — a year after Dr. Jemilah graduated from medical school — wrote a book predicting that

future wars would not be between countries, but between cultures. “I wanted bridges built across cultures,” she said. “I feared the clash of civilizations. I didn’t want to believe Huntington could be right.” The world offered much evidence to support Huntington’s vision. During the late 1980s and the 1990s, the nation of Yugoslavia was dismembered along the religious and ethnic lines of its six republics, which resulted in new countries. One of them, Serbia, a land of Orthodox Christians, began to restrict the rights of ethnic Albanians, mainly Muslims, who lived in the region of Kosovo in Serbia. This led to the Kosovo War and, in 1999, Dr. Jemilah’s determination to travel to Kosovo and help displaced and injured people.

After founding MERCY Malaysia, she enlisted fellow doctors to go with her to Kosovo. It was the first of many missions to many countries over the next ten years of her leadership. In 2002, a group of like-minded Asian NGOs came together in Kobe, Japan, and founded the Asian Disaster Reduction and Response Network to promote South-South cooperation, and inspire one another to operate with confidence alongside their much larger counterparts from the United States and Europe. Its main mission was to promote government policies to help prevent water and food shortages as well as health crises, and respond to natural disasters. Dr. Jemilah served as chairperson from 2004 to 2009. Today, 20 nations and 52 NGOs coordinate their efforts. MERCY Malaysia was its first secretariat.

Dr. Jemilah next turned to her own organization. She worried whether it was strong enough to continue without her. In 2004, she gathered her executive committee for a retreat, went to a blackboard, and wrote a three-word question: “Life after Jim?” Her nickname in the family was “Jim,” and many of her friends and staff called her “Dr. Jim” when she became a medical doctor in 1986. She asked her team what would happen to MERCY if she died or left. To ensure that it lived on, she said, it had to be more about itself than any one person. To help that happen, she announced she would stay at MERCY no longer than 10 years. In 2009,

a decade after it was founded, she resigned. “I knew if I stayed beyond 10 years it would be hard to leave, and I feared MERCY Malaysia would be forever dependent on me as it had been born from a ‘start-up’ model where the founder played the key role,” she said. “For me, it was about serving the needs of people while inspiring a nation and never about me as an individual.”

Dr. Jemilah became chief of the Humanitarian Response Branch of the United Nations Population Fund, based in New York. Later, she worked in leadership roles leading the secretariat of the United Nations World Humanitarian Summit. In between, she returned to Malaysia for a fellowship at Khazanah in its investment strategy division and was a senior fellow at King’s College London. In January 2016, she took another top job at the International Federation of Red Cross and Red Crescent Societies, which has 189 member nations.

After her resignation from MERCY, she named her vice-president as her successor. Dr. Ahmad Faizal Mohd Perdaus had joined MERCY as a volunteer in 2003. Six months later, he was elected to its executive council. From 2003 to 2006, he also ran one of its non-disaster services, a drug rehabilitation program. While serving in both capacities and also operating his own private medical clinic, Dr. Faizal went on several missions across Asia and in Africa. As an executive council member, Dr. Faizal agreed that MERCY had become too reliant on its former president, and he does not want that to happen again. “Ten years from now,” he said, “I don’t want the average person to know who the president of MERCY Malaysia is. Who knows today who the president of Doctors Without Borders is? Whoever the president is, is not the most important thing. It’s the organization’s knowledge and ability that matter.”

Dr. Faizal said MERCY Malaysia, with Khazanah’s and Yayasan Hasanah’s help, became recognized internationally as a small but quality organization under his predecessor, “but there has been a deepening and broadening of that,” which has necessarily continued. Besides leading MER-

CY, he took leadership and advisory roles with several international humanitarian aid organizations. While recognized internationally, MERCY Malaysia remains identified with the Global South. “On the one hand, I’m glad for that,” Dr. Faizal said. “We are an indigenous organization, located in Malaysia, but known for our neutrality because of what we do in the field. On the other hand, I am frustrated because it means people tend to lock us into one place. But there’s no reason we can’t hold onto our values and aspire to the global stage.”

Dr. Faizal has ambitions of extending MERCY Malaysia’s impact to another continent, Europe. In September of 2014, it opened its first fundraising office in England, after completing a two-year-long NGO regulatory application. He said the office opens doors to international funding and MERCY operations across Europe. “We will be MERCY International instead of MERCY Malaysia when we do this,” he said. After their second formal three-year agreement came to an end in 2011, MERCY continued to receive some funding support from Khazanah and later Yayasan Hasanah.

Some of the money continued to support national and international emergency disaster relief as well as for disaster preparedness in line with Yayasan Hasanah’s support for national disasters during three stages of response. The first stage is emergency response, addressing the critical needs during the first few weeks of the disaster; the second is rehabilitation and recovery, helping people get back on their feet; the third is increasing preparedness, prevention, and mitigation, by implementing programs about knowing what to do to prevent the next disaster

In Kelantan, on the East Coast of Malaysia in December of 2014, people were not prepared.

YELLOW FLOOD

It became known as “Bah Kuning,” or Yellow Flood. Looking down on the Manik Urai River from a narrow ledge on a high overpass that connects two villages on opposite banks, it was easy to see why. The villagers are used to flooding, but in

December 2014, swelled by days of rain, the river tore through this area with velocity no one had ever seen, forcing many thousands to flee to higher ground. It brought miles of thick mud with it. After the river receded, the Malaysian sun reappeared and over several weeks baked the water and mud into what looked like a long ribbon of moldy cornbread. Yellow Flood.

Said Alhudzari, MERCY Malaysia’s head of relief operations, stood on the overpass and pointed toward one of the riverbanks. It rose about 100 feet above the river surface and was strewn with large fallen trees, rusted sheets of tin, and what looked like huge collapsed stacks of firewood. The tin and wood were from humble homes that no longer existed. He turned and pointed up the river. “The flood rose above a railway bridge and caused its collapse,” he added. “The train that used that bridge won’t reach Kelantan for at least two more years now.”

At the height of the flooding, on December 29, 2014, about 234,000 people in Kelantan had been affected in some way: suddenly homeless; stranded in areas with no access to roads; trapped on the high floors of schools; forced to huddle on hilltops that had become islands, cut off from food or water; living in evacuation camps, mourning the loss of a family member or friend. Between 20 to 30 people died, with another 100 injured. MERCY’s head of relief operations paid his first visit to Kelantan on January 6, 2015. ERU teams, using boats and aided by government helicopters, had taken the wounded or infirm to a hospital saved by high ground. They had also handed out food, water, and hygiene kits. But now it was time for recovery and rehabilitation — Stage Two. MERCY staff and volunteers dug wells to provide fresh drinking water; they cleaned debris from schools and public facilities; they gave children clean clothes and supplies for returning to school.

Said began meeting with national and local officials and other NGOs to find tents and temporary shelter for about 2,000 suddenly homeless. One of his messages in the early days of any recovery is that people have to try to bounce back quickly. “You also have to understand the things that went

wrong and the things you're doing wrong so that you can prepare for the next time," he said. One thing that had been a challenge in Kelantan was that local officials and residents had not prepared themselves as they should have if they had followed Stage Three of a disaster: preparedness, prevention, and mitigation. The residents had built rickety wooden homes beside riverbanks, structures with no chance of withstanding a torrent of water that in some areas rose three feet in 10 minutes.

Post-flood, MERCY built about 150 temporary shelters, made of wood and zinc, but not placed on riverbanks and which would be torn down and recycled once the national and local governments built permanent homes. That was the plan, but it had not moved forward much by May of 2015. MERCY Malaysia's temporary and efficiently designed two-room, box-like shelters were sprinkled across the region, but several were grouped together in an area now known as "MERCY Malaysia Village." It also was where it had set up its Kelantan command post. It allotted shelters based on who seemed the most in need. In some cases, that resulted providing housing for women with children who had lost their husband and father.

One of them was Rosmanita binti Zainal Abidin, who had lived in the village since March 5, in a shelter known as House 22. She had four children. She said the stress of trying to provide for his family in the flood's wake had led to two strokes in 23 days and caused her husband's death at age 48. The village is not far from where the mud-caked ruins of some shattered wooden homes were strewn across the ground. "The people here, they had time to escape, but they returned to nothing," said Rachel Yao, as she walked along a path beside collapsed homes. Rachel is a young MERCY staff member who helped coordinate MERCY's command center in Kelantan. "See that tent over there," she said, pointing toward a small, royal blue canvas shelter. "A woman comes there every day to pray. Her husband died."

Everyone on the MERCY staff and each volunteer who helped in Kelantan has a powerful story

to tell. "There was a house found in the middle of a road in one village," recalled Mohamed Noor Bin Suleiman, a MERCY volunteer who oversaw logistics and security on the ground in Kelantan during the emergency and recovery phases. "I asked a village leader, 'Who is the owner of that house?' He said, 'I know every house here, and that house is not from this village'." In early May 2015, MERCY Malaysia was moving into the prevention and mitigation stage. It was trying to get the national and local governments to pick up the pace in housing and get people out of shelters and tents. It was promoting a law against building homes on the riverbanks. It was providing psychological and social counseling for the traumatized.

Several people over the last several weeks had gotten panicky over the mere sight of a gray cloud, said Zairi Abdullah, a local government official, at the MERCY command center. During the worst of the Yellow Flood, more than 100 people took shelter in his home near the top of a hill. "They came to live with us because they had nowhere to go," he said.

LESSONS AND CHALLENGES

A big takeaway from the case of MERCY Malaysia is the importance of building internal capacity and skills, and the role business and business expertise can play in civil society development. The corporate responsibility programs of Khazanah, and later its sister foundation Yayasan Hasanah, went far beyond financial support. They brought reforms in governance that led to a stronger organization now on the doorstep of international expansion.

The reforms were the result of analyses undertaken prior to the start of a partnership defined by formal agreements and regulated by annual auditing and close monitoring. The emphasis of the corporate responsibility model here was based more on institution building than financial support. As Shahira, managing director of Yayasan Hasanah, said, "Organizational development is just as important as program funding. In fact, it is probably more sustainable." The reforms led to programmatic as well as governance changes. In the beginning,

MERCY Malaysia focused on emergency relief and its aftermath, and on medical care. Those remain priorities, but in consultation with its partners, it also developed a systematic approach to areas hit hard by disaster – going beyond emergency relief to recovery, prevention, and preparation.

The reforms also helped MERCY Malaysia to engage effectively with its community of volunteers and supporters, while also raising some of the money it needs to fund current and future operations without the assistance of a pool of donors, except in emergencies. Malaysians who might not have the time or particular skill to volunteer for MERCY Malaysia in the field can still be part of its mission. They can buy annual or life memberships in the Malaysian Medical Relief Society that entitle them to become part of its policy development and governance.

The community engagement model can work, but at the same time, the level of community involvement in Malaysia poses a challenge. Executive council member Dr. Shalimar Abdullah, a veteran of many missions, worries about whether enough doctors will volunteer their time and skills to re-



Shah Fiesal Hussain captains MERCY Malaysia's army of volunteers.

place those who pull back from field work. Another mission veteran, Rossimah Mohammed, wonders whether too many Malaysian young people are too materialistic, unlike the way she and Dr. Jemilah were in MERCY Malaysia's formative days. "I worry that too many of them never aim to be part of society," she said. "Too many believe it is unfair not to make the most money they can."

The money MERCY Malaysia gets from selling annual or life memberships and from citizens who respond to specific appeals in emergency situations, such as the Nepal earthquake, is hardly enough to sustain non-emergency operations. The organization must continue to build fundraising capacity, as it has through the years of its relationship with Khazanah and Yayasan Hasanah. MERCY Malaysia was committed to recovery-and-rehabilitation work in the flood-damaged areas of Kelantan state when the earthquake struck in Nepal. Yayasan Hasanah stepped in with emergency money to help get the ERU teams to Kathmandu, but the ideal end of a corporate responsibility program is for the partner to be completely on its feet. For that, MERCY Malaysia needs to attract more money from its principal donors: other NGOs, foundations, and overseas philanthropists.

More money might mitigate one more challenge related to the funding question that everyone in civil society recognizes, the chicken-and-egg problem described by Dr. Shalimar — holding on to staff, or in her words: "You can't grow unless you pay more; you can't pay more unless you get more funding." Regardless of whether they are stagnating or growing, every organization confronts challenges. Next to the obstacles it overcame as it grew from a small group of well-meaning doctors to a humanitarian aid organization respected across the Global South, MERCY Malaysia's challenges seem manageable. Its responses to the Nepal earthquake and the Yellow River flood suggest it will continue carrying the Malaysian flag, high wherever it goes. 🌱

This case study was made possible by the support of Yayasan Hasanah, the foundation of Khazanah Nasional Berhad.

QUANTITATIVE INDICATORS

Financial

Planned budget or income versus actual expenditure for the fiscal year*	Income: RM23.098 million (US\$6.601million) Expenditure: RM15.841 million (US\$4.527 million)
Income composition by source: individuals, corporations, events, trusts, other (please specify)	Private Sector: 45% Public: 22% NGOs/associations: 15% Government: 18%
Income composition: domestic versus international	Domestic: 94% International: 6%

Personnel

Staff retention rate	74 % (37) staff retained in 2014
Turnover rate	26 % (13) staff left in 2014
What is the board composition?	Board of Trustees: Private/Corporate Sector – 4 Academic Sector – 1 Executive Council: Medical and Health Sector – 6 Academic Sector – 2 Private/ Corporate Sector - 5
How many meetings does the board hold per year?	Board of Trustees meetings – 2 Executive Council meetings -- 6
How many staff members are there?	50
How many staff members have attended some non-profit or management training course?	2

Quantitative Indicators Continued

Organizational

Do you publish an annual report?	Yes
How many sites/locations do you currently operate in?	12 countries: Malaysia, Indonesia, Philippines, Myanmar, Cambodia, Sri Lanka, Somalia, Afghanistan, Bosnia, Syria, Iraq, Palestine.
Do you measure results?	<p>Yes.</p> <p>Project results measured include:</p> <ul style="list-style-type: none"> - Number of mobile clinics operated - Number of teachers, communities trained on disaster preparedness - Number of WASH Programmes (hygiene kit distributions and hygiene education) - Number of psychosocial activities. - Number of beneficiaries who have received vaccinations and immunizations - Number of buildings, community facilities reconstructed - Number of patients treated
What types of outreach?	Print, social media, TV, radio
Do you regularly meet with government representatives?	Yes
If yes, on a scale of 1-3 how close is the relationship with government? 1 = not close; 2 = somewhat close; 3 = very close	Closeness of relationship = 3

* Exchange rate, RM 3.499 = US\$ 1 as of December 2014. OANDA