

HUMANITY FIRST

2010 ANNUAL REPORT

Mission Statement

Humanity First is a charitable trust established to promote and safeguard human life and dignity. It is a non-political, non-religious, non-sectarian international relief and development agency that works with the world's poorest and most vulnerable people.

Humanity First was established in 1995, and now has registered operations in 37 countries and projects in many more. Most of our aid workers and the management of Humanity First are unpaid volunteers and our administrative expenses are negligible. We are able to deliver significantly more aid value in the field from the funds we raise through volunteers, collaboration and global sourcing.

OBJECTIVES

- Relieve suffering caused by natural disasters or human conflict.
- Promote peace and understanding based upon mutual tolerance and respect.
- Strengthen people's capacity to help themselves.



Registered Operations

Australia

www.humanityfirst.org.au

Austria

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Bangladesh

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Belgium

Bremstraat 31, 9990 Maldegem

Benin

Quartier dudji,

01 BP, 1282 Porto-Novo

Burkina Faso

Sectuer 25, Somgande, Ouagadougou www.bf.humanityfirst.org

Canada

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Congo D.R.

Kinshasa

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Haiti

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Netherland

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....

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Niger

Niamey

Vigeria

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Norway

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Dakietan

111, Street 10, I-9/2, Islamabad, Pakistan www.humanityfirst.org.pk

Sao Tome

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Kaolack

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Germany Vereinsregister Nr: VR11185

US Incorporation EIN: 20-0464012

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Contents

07	Chairman's Review of 2010	
8	Our Impact in 2010	
10	Global Operations	
12	Sustainable Development	
14	DISASTER RELIEF	
15	Haiti Earthquake	
20	Pakistan Floods	
24	Indonesia – Mount Merapi Eruption	
26	Uganda Mudslides	
28	Other Disasters	
30	REGIONAL REVIEW	
30	North America	
30	Latin America & Caribbean	
30	Europe	
30	West Africa	
31	East Africa	
31	South Asia	
31	Australasia	
31	Middle East	
32	HUMAN FIRST PROJECTS	
32	Knowledge for Life	
33	Learn a Skill	
34	Water for Life	
35	Medical Assistance	
36	Feed a Village	
37	Social Services	
38	2010 Global Financial Data	
39	Partners and Collaboration	

Chairman's Review of 2010

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We would not be able to respond to disasters or manage such long-term projects without the continued support of our magnificent donors from all communities across the world. In times of disaster, even poor communities in Africa joined in the emotion to help their fellow citizens. Charity walks, dinners and other significant fundraisers were held in many countries.



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2010 was an extraordinary year for natural disasters, with over 22 million people affected, particularly in Pakistan, Haiti and Indonesia. The earthquake in Chile was even larger than that of Haiti at the start of the year, but thankfully it was too far underground to create the same level of havoc. There seem to be growing instances of flooding and storms triggered by repeated freak weather conditions. I am delighted that Humanity First was able to mobilize international teams so effectively in order to support over 165,000 victims in all parts of the world. This shows a new maturity for our organization.

What was most pleasing was the way that our approach to partnerships and collaboration bore fruit this year. HF was not only able to co-ordinate with the United Nations and its agencies, but also with a range of large and small aid agencies to share staff, resources and information in order to deliver better outcomes for the victims. This is surely the way that we must all work in the future, truly serving mankind and putting humanity before any vested interest.

Our long-term projects in the developing world took new shape and gathered pace. Our various educational programmes coalesced under the new banner 'Knowledge for Life', our existing Feed a Family, Agricultural and Desert Fridge projects grew in scope and were renamed 'Feed a Village', and our Medical programmes took more shape, not just in Africa, but also in Central America. Our approach to skills transfer to local clinicians rather than importing in doctors means almost 6 million people are getting much better care. Other key breakthroughs included a growth in vocational skills training, and the further deployment of water infrastructure in remote areas now serving just under 2 million people. With all of these projects and schemes, the aim is to optimize skills transfer to make our project teams independent.

Humanity First was registered in five new countries this year: Australia, Congo D.R., Niger, Senegal and Tanzania. Humanity First is now registered in 37 countries, and who would have thought 15 years ago that we would be working on such a truly global scale. We welcome these new country operations to the HF family and look forward to working with them on projects.

As the scale of our operations grows, so the need for standard procedures, tight governance and regular reporting also increases. During 2010, HF devoted a lot of effort to train and coach project managers both in our donor and project countries, and the results proved very worthwhile.

We would not be able to respond to disasters or manage such long-term projects without the continued support of our magnificent donors from all communities across the world. In times of disaster, even poor communities in Africa joined in the emotion to help their fellow citizens. Charity walks, dinners and other significant fundraisers were held in many countries.

Finally, on behalf of Humanity First International, we would like to wholeheartedly thank all of our volunteers and donors for their unselfish effort and continued support. Many of our volunteers put themselves in difficulty in order to help the most vulnerable, and for their strength of character and resolve, we salute them.

Ahmad Yahya Sayed Chairman – Humanity First

Our Impact in 2010

169,899

The number of victims provided with food, water, shelter and medical assistance following disasters in Albania, Benin, Chile, Ghana, Guatemala, Haiti, Indonesia, Madagascar, New Zealand, Niger, Pakistan, Poland, The Gambia and Uganda

47,870

The number of vulnerable and rural people provided with food, rations and agricultural support through Feed a Village

5,600,000

The number of people receiving better medical care through clinical training of local medical staff

31,665

The number of students trained since 2002 in IT and Sewing in 23 institutes in 12 countries

14,070

The number of students benefiting from our Knowledge for Life programme 27,946

The number of people assisted through our medical programmes

1,725,300

The number of people who were provided with safe drinking water daily































Global Operations

Humanity First is now registered in 37 countries across 6 continents, and active in over 50 countries. This is summarised in the table on the next page.





REGION	REGISTERED COUNTRIES	OTHER PROJECT COUNTRIES (last 2 years)	2010 KEY PROJECTS
Americas	Canada, Guatemala, Guyana, Haiti, USA	Chile, Peru	 Haiti Earthquake relief Chile earthquake relief Gift of Sight in Guatemala
Europe	Austria, Belgium, France, Germany, Macedonia, Netherlands, Norway, UK	Albania, Denmark, Ireland, Poland, Switzerland	 Flood relief in Albania and Poland Homeless support
West Africa	Benin, Burkina Faso, Congo. D.R., Ghana, Ivory Coast, Liberia, Mali, Niger, Nigeria, Sao Tome, Senegal, Sierra Leone, The Gambia	Togo	 Disaster relief for floods Campus development Ghana surgical mission Feed a village Water wells Knowledge for Life
East Africa and Middle East	Kenya, Mauritius, Tanzania, UAE, Uganda	Madagascar, Palestine, Kuwait, Qatar	 Uganda mudslides relief Gaza mobile library Campus Development Water wells Vocational training Uganda medical mission
Asia Pacific	Australia, Bangladesh, India, Indonesia, New Zealand, Pakistan, Sri Lanka	Fiji, Samoa, Philippines, Solomon Islands	 Pakistan Flood Relief Indonesia Mt. Merapi relief Orphan Care NZ disaster relief

Sustainable Development

'Give a man a fish and you feed him for a day, teach a man to fish and you feed him for a lifetime' - Confucius

It would have been easy for Humanity First to become a volunteer disaster relief and projects organisation with the focus on finding interesting projects for willing volunteers in Europe and North America to get involved in. However, our focus is on providing skills transfer to achieve independence for vulnerable communities through sustainable development. So what does sustainable development mean?

No project can be sustainable unless it takes into account the local economy, culture, geography, political and tribal landscape, and existing skills profile. To try to push a project across multiple countries without this level of analysis is doomed to failure, and an imposition of alien staff and techniques would lead to short term benefits, but long-term, the project would lose momentum as it would lack any kind of local context or ownership. Examples include our vocational training program. Universally, training in IT is required as the world moves to a knowledge economy, but to supplement this, in some areas there is a need for sewing skills, whilst in others, the greater demand is for bee keeping, livestock management, plumbing, electricians, carpentry, welding or car maintenance. Understanding the local economy and the desire to move from subsistence to commercial agriculture, or to support large-scale construction ensures that we provide the right

skills at the right time based on local need. This approach also means that at times, we will stop certain activities or decide not to get involved where we cannot add value. We have even closed down institutes when our ex-students have set up rival centres. That is real progress!

Geography plays a key role. For example in our Water for Life programme, generally we have deployed or refurbished hundreds of hand-pumps, but sometimes the geography means that the chances of hitting water by drilling are 10%, and there are some situations where a gravity-fed system or a metro filtration plant are more appropriate. We have even come across more significant boreholes done by other NGOs down to 100 metres where the depth of the bore has resulted in overly salty water which cannot be drunk or used for irrigation. Our Desert Fridge project is dependant upon the seasons. For example, it is only during the 6 months dry seasons in some parts of West Africa that they have access to clay to build the pots. Without this understanding, it is impossible to make progress and to get local co-operation.

In the early years of Humanity First, we had no shortage of clinicians willing to go to the developing world and offer their skills in a voluntary capacity for 1 or 2 weeks. However,

injecting high quality clinical services for two weeks can leave patients in a worse state afterwards. Therefore we evolved our programme to one of skills transfer to local clinicians such that they adopt international best practice themselves, and can provide a heightened clinical service to their local population for years to come. This is what we have been doing in Ghana, Uganda, Haiti, Guatemala, Burkina Faso and many other countries.

So Humanity First is using its local knowledge coupled with the ability to bring in cheap

resources via global sourcing and limited interventions from specialists from the developed world in order to provide the skills and resources to enable local teams to pick up and drive our projects. We are using modern technology to provide virtual refresher training to ensure that the training has been absorbed, and frequent reporting to monitor progress and benefits. We believe that this approach will lead to more sustainable development.



Disaster Response

2010 saw a number of disasters of various sizes across the globe. Smaller disasters were managed regionally or by the lead donor country, but the two major global disasters in Haiti and Pakistan resulted in fundraising in over 15 countries, coordinated medical assistance, shipments of donated aid items and collaboration with many other NGOs and partners. A summary of these disasters is provided below:

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HAITI earthquake

January 2010

At 17:00 on Tuesday 12 January 2010, a massive earthquake of magnitude 7.0 hit Haiti (the western part of the island of Hispaniola) killing 230,000, injuring 300,000 and leaving 3 million homeless. The situation was a disaster on a huge scale. Amidst the chaos of thousands of collapsed buildings, broken roads and carnage, dead bodies littered the streets of Port-au-Prince, Leogane, Jacmel, Carrefour and many smaller towns in the south-west of Haiti.

Humanity First Haiti had been registered for several years but needed significant assistance, so medical and logistical teams from Canada, the USA and the UK were mobilised, and over a 2 month period, around 120 clinicians and logisticians went in shifts to provide medical and other assistance. HF used the Dominican Republic as the logistics hub: Santiago and Santo Domingo for personnel, and Punta Cana for materials. Working closely with the UN and other NGOs, HF was able to secure light aircraft to transport teams from Santo Domingo to Port-au-Prince. 5 tonnes of medical supplies valued at over \$300,000 were

shipped in, and HF had 5 medical camps running, supported by mobile pharmacies. HF staff used their expertise to devise secure camps with triage and minor surgery areas. In Port-au-Prince, the base camp was established at the HF Office in the city, and additional accommodation tents were erected within the grounds and also in a neighbouring plot. Much of the infrastructure had been destroyed by the earthquake, so 2 generators were used to power the base camp and clinic. Teams took turns to work and provide security.

The HF team attended daily co-ordination meetings run by the UN in the city, and quickly began collaborating with WHO and other NGOs such as the Salvation Army. In some cases, NGOs shared drugs and medical supplies such as the St. Louis clinic and the Miami Medical Center. HF clinicians would often help out at their clinic in the evenings, as the operation went on, and also worked out of 28 mobile medical clinics in the south.

230,000 KILLED

300,000 INJURED

3,000,000 HOMELESS



HUMANITY FIRST 2010 ANNUAL REPORT

SOME STATS AND FIGURES

Over a 2 month period, 120 clinicians from USA, Canada and UK worked in shifts to provide help.



5 tonnes of medical supplies worth over \$300,000 were shipped in.



HF raised over \$850,000 from 17 countries and \$1 million worth of aid supplies.



27,000 medical cases dealt with.



Water filtration plant set by HF estabslihed to serve 7000 residents for 12 months.

HF was able to raise over \$850k in 17 countries as well as a total of over \$1 million worth of aid goods to support the mission, and as a result, on the ground, the team dealt with 27,000 medical cases, distributed 200 family tents and clothing (including from our partner 4Peace of Mind), 3,300 water survival boxes shipped out by our partner Aquabox in Derbyshire (UK), and provided food, water, tarps and plastic sheets. HF also provided daily supplies of food, water and diapers for 700 orphans, many of them living in tents outside their orphanages as they were too afraid to go back inside. HF also provided toys and other essential items. HF supported the following orphanages: Horizon De L'Espoir, Enfant Hatien Mon Freses, Life is Wealth, Orphelinat Manasse, Orphelinat Refuge D'emmanuel, Foundation Luce and Divine Ministries in Hope for Children as well as a school.

At the Dada Dou camp of 7,000 people run by the KT Foundation, HF volunteers built eight shower cubicles using wood and plastic sheets which were hugely appreciated. At the same camp, HF installed a water filtration plant to provide drinking water for 12 months for the 7,000 residents. In total, the HF team supported refugees at 16 camps in remote areas.

The HF team was also able to reach out to neighbouring towns and villages, and the medical team worked in Jimani (on the border with the Dominican Republic), Port-au-Prince, Carrefour, Gressier, Petit Goave, Leogane, Seguin and Jacmel supporting 50,000 victims of the earthquake.

The rehabilitation phase is likely to take several years. Initially HF has established long-term medical camps in Seguin near Jacmel and in Portau-Prince, which are running until the summer of 2011. In addition, we are training prospective local clinicians, and have a team of women supporting 75 patients with chronic conditions in the community. They also provide education on sanitation and water treatment tablets. The most common conditions are respiratory infection and gastroenteritis. In order to work with the remote



In Seguin, HF worked with Haitian Christian Outreach to re-open the Cloud Forest Clinic on 1 June. The clinic at an altitude of 5,600 ft offers services to a population of 60,000. Currently, the camps are seeing over 500 patients per week.



communities, HF has also provided a 4x4 vehicle which allows the team to transport more desperate cases to the larger hospitals.

Since the Cholera outbreak, our team has been visiting villages to educate communities on preventative measures around sanitation and

HUMANITY FIRST 2010 ANNUAL REPORT

hygiene, and distribute prevention flyers, aquatabs and oral rehydration solutions. Having revisited some of these villages, the team were encouraged to see a large drop in cases and deaths. The team has also been collecting water samples which have been analysed by MSF. The Cholera epidemic seemed to be subsiding by early 2011, and the HF team played their role in educating thousands of local villagers.



Providing clean water by Aquabox



Some of the many children left as orphans



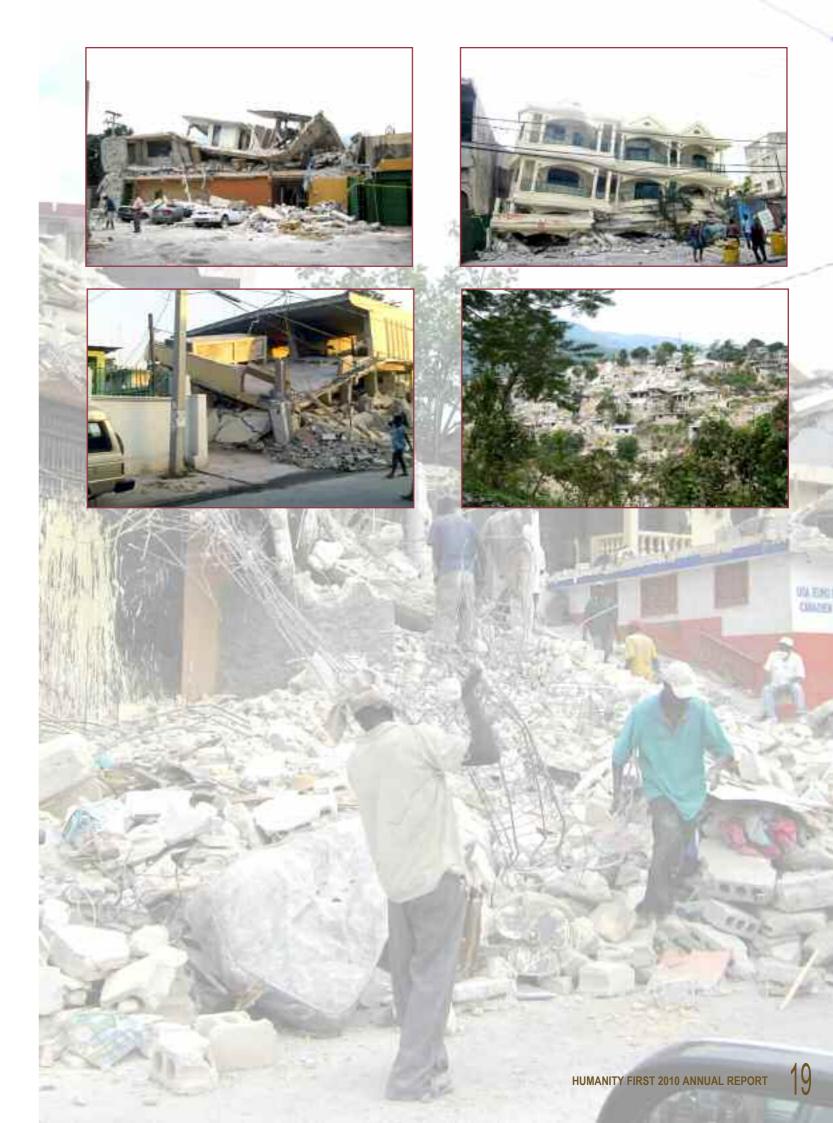
Queues of people at the HF medical tent



Our team in Seguin is also supporting 22 local orphans, and providing scholarships, English language classes and school kits (books and stationery) for over 400 children. The families looking after them are also being supplied with milk formula, corn meal, soy, flour, beans, rice and other high energy foods. Dr. Clayton Bell from the USA volunteered for the initial disaster relief efforts and was so struck by the level of need that he returned and is now spending 12 months in Seguin at the Cloud Forest Clinic. Several teams have visited for short stints at the clinic, and Dr. Bell says: "People in the States want to have; people in Haiti just want to live. To help alleviate the suffering of these people who have so little but deserve so much more, we are opening this free medical clinic." The rehabilitation efforts are expected to continue into 2013. We salute Dr. Bell's energy and dedication.



The UK team are given a warm welcome upon their return at Heathrow airport



PAKISTAN floods

August 2010

Flooding due to excessive Monsoon rains in July and August 2010 across Pakistan affected 21 million people in an inundation that covered vast areas of the country over 1200 miles. 3.5 million children were in urgent need of food and medication to fend off malnutrition, malaria and water-borne diseases. The UN reported hundreds of thousands of cases of diarrhea, malaria, skin conditions and acute respiratory infection. The fact that the infrastructure had been washed away by ferocious floodwaters made access to the needy even harder.



Moderate Flooding Heavy Flooding Dams THE Operations NEW DELHI Belechisten

2010 Pakistan Floods HF Operations Map

Humanity First Pakistan began assessment and relief activities in that first week across the country with a local team of 200 in the districts of Rajanpur, Dera Ghazi Khan, Muzaffargarh, Layyia, Jacobabad, Jhang, Nowshera, Larkana, Ghazir, Swat and Gilgit. HF opened relief channels and was provided with free logistics for aid from Europe and North America by PIA. HF's main operational bases were in Islamabad, Faisalabad and Karachi. At the same time, a global appeal was launched across 15 countries and over \$1.1M was raised. In addition, aid worth \$650k was donated by many of our partners in North America, Europe, South Asia and the Middle East.

> 21 million people affected over 1200 miles



Eight year old Amreen washes dishes in rainwater in Khwas Koorona Village in Khyber-Pakhtunkhwa

Over a period of 12 weeks, HF staff distributed over 1,137 family tents, 1,340 water survival boxes, 2,716 blankets and sleeping bags, 2,400 lifestraws, 1,100 mosquito nets, 51 camp cots, 1,280 towels, weekly food rations for over 6,000 people, hygiene kits, emergency medical kits and other supplies. HF handed out 2,480 gift packs to children in the region. In addition, many other

shipments arrived from Europe, the Middle East and North America consisting of tents, cholera kits, blankets, water purification tablets, life straws, high-energy biscuits and dried milk powder. Over 150 tonnes of food aid was delivered. HF established 2 tent villages in the south supporting hundreds of refugees from the floods.





Humanity First Eid gift packs were distributed to almost 2500 children









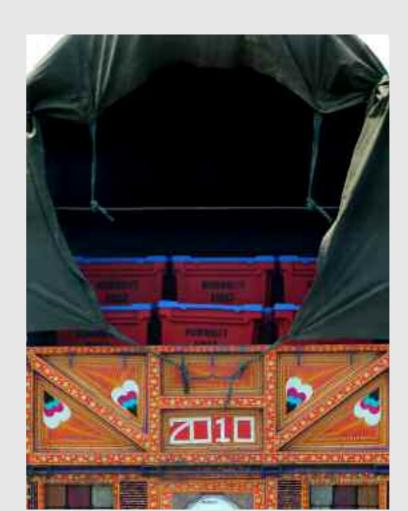
50 tonnes of food were delivered by HF





A medical team on the ground continued to run several camps every week manned by a team of local doctors. The team treated over 18,000 patients. At least 53,099 people were assisted in the initial phase.

As the rehabilitation phase began, HF helped farmers to restore 2,000 acres of arable land for wheat farming by providing them with seeds, fertilizer, access to a tractor and irrigation. HF also began to establish 110 hand-pumps to provide safe water in rural areas (19 completed in 2010), and rebuild 400 homes (100 completed in 2010) in a manner that each of the family units could be extended over time. The rehabilitation programme is likely to continue into 2012.









INDONESIA Volcano eruption

October 2010

Ongoing eruptions from 25 October 2010 at Mount Merapi in central Java, Indonesia, killed 353 people leaving several hundred missing, and 320,000 displaced. Eruptions and gas clouds continued to affect the local area until 10 November. This region is prone to such disasters and the local HF team has been responding since 2004.

HF's local team in Yogyakarta set up an emergency response facility at the Maguwoharjo stadium in Yogyakarta providing a soup kitchen and trauma management. In total, HF assisted 36,000 refugees (10% of the displaced population) with regular hot meals and drinks and medical treatment.









The mountain continued to erupt until 30 November 2010





UGANDA mudslides

March 2010

Heavy rains on the border region between Uganda and Kenya on 1 March 2010 caused landslides in the district of Bududa in eastern Uganda. Many villages and towns in the foothills of Mount Elgon were affected, particularly Nameti, Kubewo and Nankobe. Thousands of homes were affected, and many schools, markets, farms, churches and roads were destroyed or badly damaged. Reports suggested that the death toll was over 300 with hundreds more missing, presumed dead.

Humanity First Uganda was on the scene the same day and helped to establish a refugee camp at

Bulucheke supporting victims for 3 months. 200 tents provided temporary shelter for 3,000 villagers, and the camp also provided food, water supply and sanitation, with medical support provided by HF. The HF operation included a triage tent and a temporary health centre. The medical camp saw 80-120 patients daily and treated conditions such as malaria, diarrhea, pneumonia, asthma and seasonal diseases as well as reproductive health. The camp also provided antenatal care and periodic vaccination programmes.



Children at HF Bulucheke Camp



Tented Village



Receiving donation from ABACUS

Other NGOs such as the FIMRC, ABACUS Pharmacy and Arlington Academy of Hope (AAH) helped with essential supplies such as a microscope, IV fluids, syringes, antibiotics and other supplies.

The team worked with UNICEF, Save the Children, the Red Cross and the Ugandan Peace Corps, with daily progress meetings held in Mbale.



Group photo with partners FIMRC

HUMANITY FIRST 2010 ANNUAL REPORT

Other Disasters

2010

ALBANIA

In January, Albania was affected by heavy rains and floods from the Adriatic Sea resulting in flooding in Shendjin and Lezhe in the west. HF assisted 200 families with food parcels and blankets.

BENIN

October saw heavy rains and flooding in Benin. HF sent 65 tonnes of food aid including maize, rice, salt, sugar and oil to support 20,000 people.

CHILE

Soon after the disaster in Haiti, an even larger earthquake of magnitude 8.8 struck Chile on February 27 at 03:00 near Conception. There were 521 fatalities, but the damage and injuries were much less than expected due to the depth of the earthquake. After an assessment, it was decided that there was sufficient medical cover in place, so HF dispatched 20 generators so that relief teams could operate in the open for a few weeks whilst the local infrastructure was restored.



GHANA

At the same time, Ghana was affected by flash floods that affected 33,000 people, and HF provided \$1,000 to support the victims.

GUATEMALA

On 31 May, tropical storm Agatha passed over Guatemala releasing record rainfall (the worst since 1949) resulting in mudslides and flash floods. 40,000 people were made homeless. HF responded immediately by providing food and water for a week to 240 displaced families in the town of Antigua.

MADAGASCAR

During April, Madagascar was battered by Cyclone Hubert which left 14 dead, over 3,000 homes destroyed or damaged, and 38,000 people displaced. HF worked with local organizations to provide warm clothing, shelter, food and water to dozens of stricken families.

NEW ZEALAND

New Zealand suffered two smaller disasters towards the end of the year. On 4 September, the city of Christchurch was hit by an earthquake of magnitude 7.1 at 04:36. HF responded to a national appeal by supporting the NZ Red Cross with \$3,000. Then on 19 November, an explosion at the Pike River Mine near Greymouth claimed the lives of 29 miners. Again HF contributed \$2,500 towards the Mayor's trust fund for the families of the victims.



NIGER

Niger is one of the poorest countries in the world. It first suffered a terrible drought in the early summer months leading to wide-scale starvation, and then when the beleaguered people had planted their crops and were expecting a harvest, the river Niger flooded destroying crops and homes. HF delivered 25 tonnes of food aid to the victims and also clothing for 2,500 people.



POLAND

Poland also suffered heavy rains and flooding in June around the Vistula and Oder rivers through which 50,000 people were affected. Once again, HF had a team of 15 who were able to provide food, water, blankets and clothes to over 200 families in Tarnobrzeg in the south of Poland.



THE GAMBIA

Heavy rains on 31 July in the Upper River region of the The Gambia resulted in wide-scale flooding in Basse, Kabkama, Sambatako, Birifu and many other surrounding villages. Around 1200 people were affected and displaced. HF donated 1.2 tonnes of rice to those families.

HUMANITY FIRST 2010 ANNUAL REPORT

Regional Review

NORTH AMERICA LATIN AMERICA THE CARIBBEAN EUROPE WEST AFRICA EAST AFRICA SOUTH ASIA AUSTRALASIA MIDDLE EAST

NORTH AMERICA

Our Food Bank in Canada continued to provide much needed food parcels to over 7,000 needy people. The USA continued their *Our Kids, Our Future* initiative for children struggling in the education system. The organic farm in St. Louis provided an outlet for poor people unable to access fresh fruit and vegetables.

LATIN AMERICA AND CARIBBEAN

Guatemala was newly registered and therefore HF took proactive steps to provide eye surgery facilities and disaster relief in various towns. However, the main focus was on Haiti following the earthquake, and a global team of over 400 HF volunteers supported efforts to provide medical assistance, shelter, food and water to over 50,000 people. Ongoing efforts in Haiti include water treatment facilities and two medical clinics in Seguin and Port-au-Prince.

EUROPE

In the context of global disasters such as Haiti and Pakistan, many new countries in Europe took an interest in raising funds in collaboration with our registered countries. It was encouraging to see so much activity in Belgium, Denmark, France, Germany, Ireland, Netherlands, Norway, Switzerland and the UK. There is a growing army of volunteer doctors, engineers and teachers that have been visiting Africa and in response to global disasters, but also there has been an increase in collaboration with other agencies and organizations to send relief supplies from Europe. HF supported homeless and vulnerable people with food, clothing and bedding in France and Germany. HF also responded to local disasters in Poland and Albania.

WEST AFRICA

In this region, Senegal and Niger were newly registered. The focus was on developing and trialing the Knowledge for Life and Feed a Village concepts whilst maintaining momentum around Water for Life and Medical projects. Libraries and science labs were established in several secondary schools in the region, and this project is being expanded further in 2011. The Gift of Sight programme grew in strength in Burkina Faso, Benin and Sierra Leone with over a thousand cataract operations supported. New crop

processing facilities were provided in Gambia and Ivory Coast and the cassava processing unit in Liberia continues to work. Significant work was done in Gambia, Sierra Leone, Liberia, Ivory Coast, Ghana, Mali, Benin, Sao Tome, Nigeria and Burkina Faso. In terms of small-scale disasters, HF responded to requests from Niger, Benin, Ghana and Gambia.

EAST AFRICA

This year, Mauritius and Tanzania were registered, and already Mauritius has been very effective at raising funds for HF both for international and local needs. In Uganda, our medical team responded to the mudslides, and we continued to develop the campus in Budaka. Feed a Village was expanded into Uganda with the provision of a rice hulling machine. Water projects were also conducted in Kenya and Uganda.

SOUTH ASIA

There were two major disasters in South Asia this year, the floods in Pakistan and the eruption of Mount Merapi in Indonesia. In both cases, the established HF teams with experience from disasters five years ago in the region were able to marshal a quick response at scale for a total of almost 90,000 victims.

AUSTRALASIA

Australia was registered this year and will work closely with New Zealand on regional projects. The New Zealand team worked hard to raise funds for global disasters in Haiti and Pakistan. The NZ team also actively supported local appeals for the Christchurch earthquake and the Pike River mine disaster, and also assisted poor school children in Auckland as well as refugees in the NZ Refugee Centre who lacked basic supplies during the cold winter period. The NZ team also assumes responsibility for relief projects in the rest of the Pacific region.



HF continued to partner with Save the Children on the mobile library project in Gaza. HF teams were also very active in the region raising funds for global appeals for Haiti and Pakistan. HF's team in the Middle East is gaining in project management experience and gradually taking ownership of projects in East Africa. In the UAE, the team arranged for regular blood donations in Dubai.









30

HUMANITY FIRST PROJECTS

For over a decade, Humanity First has been delivering long-term projects in the developing world around healthcare, education, social care, training and infrastructure. The focus is on skills transfer to help these communities regain their independence and dignity. This section provides a summary of progress against these international programmes, particularly in Africa, Latin America and Asia where the need is greatest.

KNOWLEDGE FOR LIFE

This year, HF began a new programme to establish libraries and science laboratories in schools in rural parts of Africa. Currently, the education process even at secondary school level lacks practical tuition. HF deployed packs of science lab equipment including a skeleton, globe, microscope, various charts, magnets, weights, optical instruments, electrical meters, models of body parts and kits for specific physics experiments. It took a few months to overcome pricing and import restrictions for some items such as chemicals. During the year, the science lab project was piloted in Gambia at various Senior Secondary Schools in Barra, Basse, Bansang, Mansa Konko and our own school in Yundum. In 2011, this project is being extended to Burkina Faso, Mali, Ivory Coast, Senegal, Liberia, Uganda, Ghana, Sierra Leone and Kenya. Feedback has been very positive, and we are also getting specific requests depending on local needs and shortages for example Bunsen burners, pipettes and burettes.

In sub-Saharan Africa, children are educated in either French or English, but often lack textbooks and access to library facilities. Initially HF collected and distributed 6,000 good quality reference and curriculum books in English to schools in Uganda, Sierra Leone and Gambia. In this exercise, HF is providing books and posters, and also encouraging the use of multi-media documentaries to bring to life subjects such as science for children who will seldom have a chance to witness or experience these phenomenon for themselves. The plan is now to extend this to many other countries, and also to provide material in French for the Francophone countries. In addition,



over 7,500 students in Sierra Leone benefited from the distribution of exercise books and stationary sets to primary schools in the country.

In the USA, HF issued 4 mini-grants to motivated teachers in New Orleans through the 'Our Kids, Our Future' programme. This has now also been expanded to 5 other cities in the USA to improve the performance of schools and children in deprived areas.

HF has also been assisting needy schools in North America, The Caribbean, Europe, Africa and Asia with textbooks, sports equipment, uniforms and scholarships. In Niger, HF assisted 82 deaf children with school uniforms and 400 orphans and poor children were provided with books and stationery. 300 poor students were helped in Macedonia.



During 2010, over 13,000 children have benefited from Knowledge for Life and the scale is expected to grow significantly over the next three years.

LEARN A SKILL

HF has been training poorer communities in vocational skills through the 'Learn a Skill' programme since 2002. This year, key milestones were the opening of a new sewing centre in Uganda and HF becoming a Microsoft Academy Partner in order to provide MCSE training to students in Africa. A summary of our delivery of vocational training is in the following table:

Region	Countries	Number of IT Centres	No. of Sewing Centres	IT Graduates
Americas	Guyana	0	0	150
Europe	Kosovo	0	0	50
West Africa	Benin, Burkina Faso, Ghana, Ivory Coast, Mali, Niger, Nigeria, Sierra Leone, The Gambia	12	6	30,841
East Africa	Uganda	1	1	574
Asia Pacific	Indonesia	1	1	100
	TOTAL	14	8	31,715





WATER FOR LIFE

In 2010, the team worked hard to deploy and refurbish hand-pumps and gravity-fed systems as well as water filtration solutions in a number of countries including Kenya, Uganda, Pakistan, Benin, Ghana, Liberia, Gambia, Guatemala, Ivory Coast, Mali, Tanzania, Nigeria and Haiti. During 2010, an additional 151 water projects were done making the total to date as shown in the table at the bottom of the page:

In the case of disasters, HF also distributed short-term water filtration and survival boxes in Haiti and Pakistan with the assistance of Rotary charities WorldWaterWorks and Aquabox, but also trialled the new lifestraws in Pakistan which allow people to safely drink contaminated water using a filtration straw for over 12 months.

In December, HF brought a compressor and truck in Benin to be able to more cost effectively rehabilitate boreholes in that area and already 33 pumps have been rehabilitated there.

The focus is on the provision of clean drinking water, but HF has also been running many sanitation projects including building 25 latrines in the remote village of Char Onda in Bangladesh and training people in remote parts of Haiti on how to avoid and contain the spread of waterborne diseases through better sanitary practices.







Region	Countries	Types of Water Projects	Number of Installations	Estimated population benefitting
Americas	Brazil, Guatemala, Haiti	Water filtration units (mid sized), hand- pumps	43	28,000
West Africa	Benin, Burkina Faso, Ghana, Ivory Coast, Liberia, Mali, Niger, Nigeria, Sierra Leone, The Gambia	Hand-pumps, gravity- fed water projects and water harvesting	481	428,900
East Africa	Kenya, Uganda, Tanzania	Hand-pumps, gravity fed water projects	4	4,100
Asia Pacific	Bangladesh, Indonesia, Pakistan	Hand-pumps, Metro filtration plants	61	1,289,400
		TOTAL	589	1,750,400

MEDICAL ASSISTANCE

The long-term medical program in Uganda continued, with additional teams from the UK continuing the process of skills transfer. Around 18% of the country's doctors and nurses have been trained in the latest techniques in resuscitation, neonatal care, maternal care and chronic condition management, and as a result, a population of over 5.5 million are receiving much better quality care. One of the volunteers Kalpesh Diyar commented:



"I am honoured to be able to help those in need and help to train others to do the same. It is not often that you get to work with such driven and dedicated individuals as those I have met in Humanity First."



In The Gambia, medical camps were held in Panchang near Farafenni where over 80 villages have no nearby clinics or access to drugs. A longer-term plan is being devised with the Ministry of Health to transfer skills to community nurses and midwives along the lines of the work being done so effectively in Uganda.



A team of 11 doctors and medical staff from Johns Hopkins Hospital in the USA visited Ghana once again in May to train local clinicians. Apart from performing 30 surgical procedures at Daboase District Hospital, the team also conducted a peadiatric laparoscopy lecture at Korle Bu Teaching Hospital. The Medical Laboratory, which is adjacent to Daboase Hospital and aims to provide desperately needed diagnostic services to the local community, is making good progress. 10 tonnes of donated medical supplies valued at \$225K were shipped to Ghana this year.

In Guatemala, HF initiated the Gift of Sight program. In September, the team conducted its first mission and performed 25 ophthalmic procedures and trained local staff and physicians at the Barbara Clinic (a facility managed by the Universidad Francisco Marroquin).



In Burkina Faso, regular medical camps are being run in the Sahel region in the north-east. In Benin, HF conducted 86 free Hernia operations in January and October with the assistance of the head surgeon from the German district hospital in Darmstadt-Dieburg. 10 medical camps were run especially after the October floods where patients were seen and provided with free medication. During the trips, 23 local paramedics and doctors were trained by HF.



The Gift of Sight project is growing. HF runs a cataract clinic in Ouagadougou, Burkina Faso, where hundreds of sight-saving operations have been done. Similarly, operations were done in Guatemala and 100 operations were done in Porto-Novo in Benin where the free operations were announced on local radio and the 100 most deserving patients selected. A similar programme is being established in Sierra Leone in 2011. However the project is not just restricted to surgery. With the help of many opticians in Germany, HF ran 13 eye camps in Benin and after assessments, prescription glasses were provided to 2,500 people. HF is now establishing a longer-term relationship through its optical centre in Porto-Novo.



In Pakistan, two complete sets of Olympus Endoscopy and one complete set of Colonoscopy equipment were donated to two major clinical facilities to serve both adult and paediatric patients.

FEED A VILLAGE

The Desert Fridge project continued to be adopted as pot makers were trained and villagers educated in the solution in Gambia, Mali and Ivory Coast. In Mali, 3 villages near Djinni have actively adopted the system. In Gambia, pots are now being made for domestic use in Faraba, Badibou, Gunjur, Mbyla and Keerpateh. In Ivory Coast, many villagers were trained in the concept near Korhogo.

Whilst pot in pot desert fridges are being produced in the dry season, there are issues with the transport of pots to market, and also if produced at a large size, the design becomes brittle. HF has been working with Swansea University in the UK on a new concept Cold Store. The idea being finalized as a prototype would

use local materials and solar power technology to enable $1500 \, \text{kg}$ of produce to be stored at $13\text{-}21^{\circ}\text{C}$ and at 90% humidity. The concept is being designed to be affordable for rural villages and an outline design developed with Swansea University in Wales is shown above.

In Canada, the Food Bank continues to serve over 7,000 people in the Greater Toronto Area with a 2-week pack of grocery supplies. 90% of these clients receive deliveries to home as they lack transportation, whilst 10% are walk-in clients. The service reaches the needy in York, Toronto and Windsor. Many local volunteers and organizations such as Leon's Furniture have helped with resources and volunteers to improve the efficiency of the food bank and to provide a better service to the needy. An increased number of centers for the vulnerable were referred to the Food Bank this year including the Elspeth Heyworth Center for Women, St. James Drop-in Center, Hincks Dellcrest Center (mental health) and the Ontario Disability support program.



"I am very grateful that you guys were there for me; somewhere I could turn and get help when I needed it the most, and I appreciate it very, very much!" Lanah Henry, Toronto

The Feed a Village project is emerging in different forms in different countries. In general, HF is assisting farmers with crop cultivation including fencing plots, providing seeds and tools, access to irrigation and cultivation machinery, and then providing



villages with equipment to process the harvested crops into higher value products. Examples include cassava processing in **Liberia** and Fabaina **(Sierra Leone)**, rice hulling in Butajela **(Uganda)** and cous milling in Sitta **(Gambia)**. In many of these areas, it is the women who do a lot of the gardening and access to local water for irrigation is a key element of the project. Our existing Feed a Village projects are already benefiting over 38,000 people.

In the **USA**, our organic farm in St Louis is thriving. Organic fruit and vegetables were sold at market and also donated to vulnerable families in the Walnut Park community.

In **Pakistan**, after the floods, HF assisted hundreds of farmers to cultivate land for wheat and helped to re-cultivate 2,000 acres of land in a crop compensation scheme. Each farmer was supplied with seeds, fertilizer, irrigation and access to a tractor to churn the soil. The new harvests are already emerging.

Meanwhile, the Feed a Family project continues to support vulnerable families across Africa with fortnightly ration packs.

SOCIAL SERVICES

In several countries, HF assisted vulnerable people who lack the resources to fend for themselves. HF continues to support orphan projects in various countries including Indonesia, Pakistan, Haiti, Nigeria, Benin and Burkina Faso. In Benin, HF is supporting 50 orphans in the northern town of Porga and is looking to extend this to an additional 50 orphans in 2011. In Niger, over 300 orphans were assisted with educational resources. Orphan care requires long term planning, security and an annual capital injection to maintain the quality of facilities, so HF is considering future projects with care.

Support of the homeless and the poor is an area of need even in the developed world. In France, every month the team has been providing homeless and very poor people in Paris and Sarcelles with food, hot drinks, sleeping bags and hygiene kits including soap, toothpaste, razors, deodorants and other items. Similarly HF has also provided equipment for the disabled to a social centre in St. Leu la Foret. In Germany, HF has been helping the homeless around Hamburg. HF collected clothing, games and magazines and a tea service for a shelter. Weekly soup kitchens were run in Philadelphia, USA. In Canada, apart from the Food Bank, HF also provided warm meals to the homeless in Toronto and Montreal. One of our newest operations on the island of Mauritius donated boxes of warm clothing and blankets to 40 families near Bel Ombre in July. Elsewhere, HF provided food and household supplies in the Philippines to 155 needy families in Zamboango and Navotas. In New Zealand, in August, HF provided emergency blankets and cooking utensils to refugees recently released from the NZ Refugee Centre. In 2009, HF NZ also began a local project called Breakfast for Kidz aimed at ensuring that children from poorer communities get a proper breakfast at school. HF worked with 2 schools in Auckland and provided daily food for 40 children across 2 schools. This scheme is being expanded to other schools in 2011.

Supplementing healthcare services is a growing requirement as the world goes through the financial crisis. In the UK, HF has been assisting hospices that look after end of life patients. In the Greater Manchester area, HF has also been assisting vulnerable and disadvantaged youths with activity programs to boost their confidence, hand-eye coordination and communication skills. This will be expanded to other cities in the UK in 2011. In the UAE, HF arranged for regular blood donations to the Dubai Blood Donation Centre at Al Wasl Hospital. When the floods hit Pakistan, over 125 volunteers participated for over a month in a blood drive for victims through the Pakistan Association of Dubai.









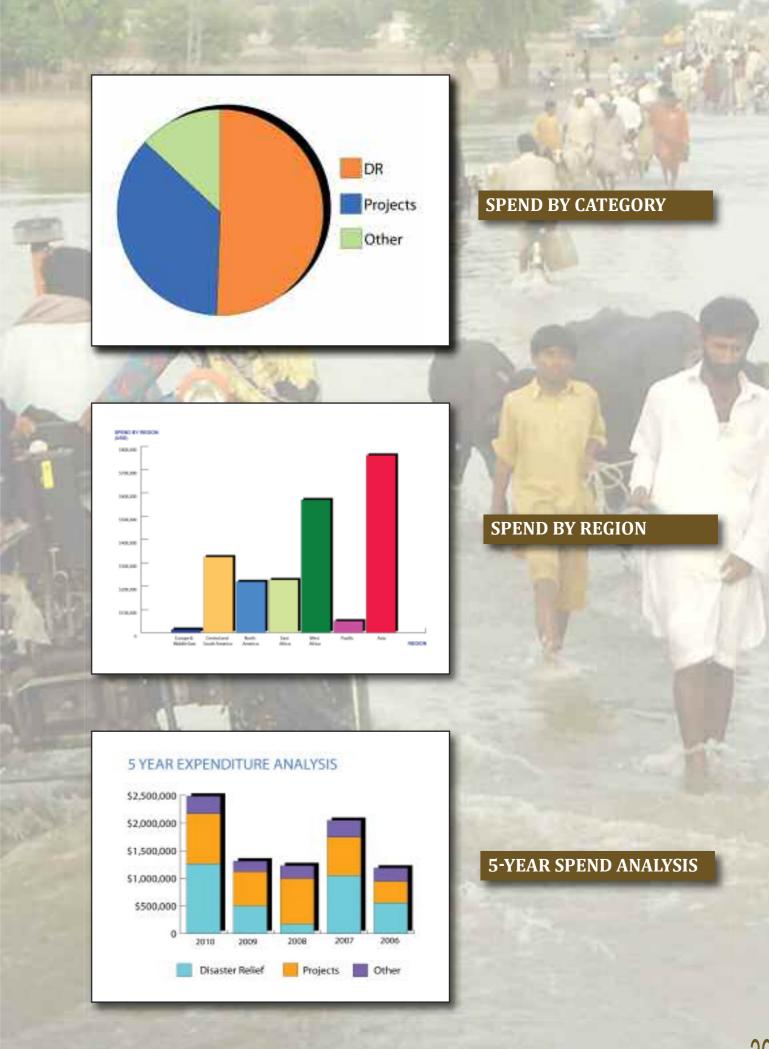
	2010	LUUU	2000
GLOBAL INCOME	Income \$	Income \$	Income \$
Basic Income	3,438,682	1,479,212	1,124,612
Fundraising Events	156,971		
Grants	574,518	44,378	11,027
Merchandise Sales	76,317		12,562
TOTAL INCOME	4,246,487	1,523,590	1,148,201
PROJECT EXPENDITURE	13,883	185,931	
Gaza Relief	22,554		80,522
Learn a Skill	51,786	67,182 34,482	60,366
West Africa Flood Relief	297,273	157,619	138,786
Water for Life	67,472	20,074	130,700
Orphan Care	48,908	79,728	128,377
Education Projects	13,386	31,551	120,377
Agricultural Projects	96,669	4,581	2,602
Homeless & Social Care		129,940	83,126
Feed a Family / Village	216,981 30,045	64,725	259,879
South Asia Earthquake 2005 Rehabilitation Asia Tsunami 2004 Relief	30,043	50,045	45,045
	311,089	21,029	17,100
Haiti Disaster Relief	18,470	21,029	17,100
Bangladesh Relief Projects	26,949	23,431	16,223
Gift Of Sight	12,770	2,821	13,430
Aid Consignments	62,799	59,097	26,047
Medical Projects	13,807	39,097	20,047
Guatemala Relief Project	2,939		
Philippines Relief Project Other Relief Projects	117,737	76,079	99,409
Pakistan Flood Relief	700,597	70,073	33,403
Bangladesh Cyclone Relief	700,007	61,466	1,203
European Projects		01,400	14,700
West African Projects	40,469	30,772	18,361
East African projects	10, 100	15,706	2,555
TOTAL EXPENDITURE	2,166,584	1,116,259	1,007,731
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OTHER EXPENDITURE			
Administrative Costs	137,852	136,754	158,928
Governance Costs	17,778	2,631	15,799
Fundraising & Marketing	140,164	30,600	44,189
Merchandise (assets)	23,138	23,640	
TOTAL OTHER COSTS	318,932	193,625	218,916
TOTAL EXPENDITURE	2,485,515	1,309,884	1,226,647

2010

2008

2009

- These are consolidated global unaudited accounts for 2010. Each registered HF entity provides independently audited accounts in their country of registration in accordance with legal regulations governing charitable organisations and NGO's.
- The financial data above does not include the value of voluntary hours worked by 1,657 expert volunteers worldwide, or their largely voluntary contributions towards travel and subsistence costs.
- 2010 was dominated by the two massive disasters in Haiti and Pakistan which drew a disproportionate amount of funds towards the Asia and Central and South American regions.
- Administration costs rose to cover the number of newly registered HF entities during 2010.
- There were 28 permanent or part-time staff working for HF, more than 80% of those indigenous staff in Africa or Asia.



HUMANITY FIRST 2010 ANNUAL REPORT

NOTES

COLLABORATION AND PARTNERS

The following are some of the organisations that have helped us during the last three years and without their support, materials and donations, Humanity First would not have been as successful:

- ABACUS Pharmacy,
- Abbott
- Academies International
- Ace Taxis
- Action Medeor
- Ahmadiyya Muslim Jama'at (AMJ)
- Amsterdam Municipality
- Apotheker Helfen e.V.
- Aquabox
- Arlington Academy of Hope
- Ascribe Ltd
- BARAL
- B Braun
- Blacks
- British Airways
- Charlton Public School
- Day Lewis Pharmacy
- Dedon
- Ferozsons
- FIMRC
- Funds Partnership
- German Army
- Gold Cross Cargo
- Go Transit (Toronto)
- Haitian Christian Outreach
- Herbert Carnegie Public School
- Hewlett Packard (HP)
- Human Aid e.V. Worms
- IAAAE
- ING Bank
- Johns Hopkins University Hospital
- KT Foundation
- Leon's Furniture
- Lifestraw
- Louis-Honore Frechette Public School

- Lysol
- Medecins sans Frontieres (MSF)
- Metrolinx (Toronto)
- Microsoft
- Morrisons
- National Health Service (NHS)
- OCBC Private Banking
- Oxfam
- 4Peace of Mind
- Petzl
- PIA
- Red Cross and Red Crescent
- Rotary International
- Salvation Army
- Save the Children
- Shooting Star Children's Hospice
- Service Canada
- Swansea University (UK)
- Swiss Finance Corporation
- St. Mary's Hospital (Albany)
- Tesco
- The Creative Kitchen
- The MI Group
- Thomas Cook Airlines
- Toronto Transit Commission
- United Nations
- UNICEF
- Vango
- Vaughan Community Healthcare Center
- Walt Disney Co.
- Welt Hunger Hilfe
- Wilsons
- World Health Organisation (WHO)
- World Water Works



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