



Celebrating Hope



2022 Mercy Ships Canada
Annual Report



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Image: Coumba, before surgery to release a burn contracture on her hand and arm. Coumba was burned at age 4, rescuing her brother from a cooking fire.



MISSION

Mercy Ships follows the 2,000-year-old model of Jesus, bringing hope and healing to the world's forgotten poor.



VISION

Mercy Ships uses hospital ships to transform individuals and serve nations.



VALUES

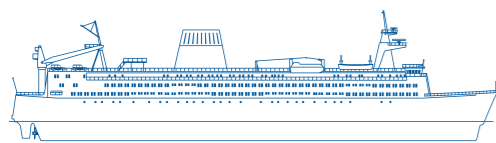
- Love God
- Love and serve others
- Be people of integrity
- Strive for excellence in all we say and do



IMPACT

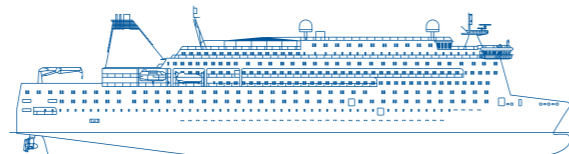
Each year, 16.9 million people around the world die due to lack of access to surgical care. Mercy Ships deploys hospital ships to provide free surgeries. Since 1990, Mercy Ships has conducted 42 field services in 14 African countries, most of which are ranked by the United Nations Development Index as the least developed in the world. In addition to surgical care, Mercy Ships creates lasting impact by training local medical professionals and strengthening in-country healthcare systems.

Our ships



The Africa Mercy

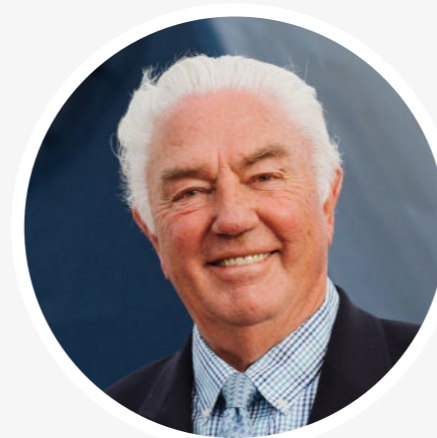
- 5 operating theatres
- 80 patient beds including: recovery, intensive care, and low dependency wards
- 6.0m Draft
- 152m Length
- 23.7m Breadth
- 16,572 Gross Tonnage



The Global Mercy

- 6 operating theatres
- 102 acute care beds
- 7 ICU/isolation beds
- 90 self-care beds
- 6.1m Draft
- 174m Length
- 28.6m Breadth
- 37,000 Gross Tonnage

"God is good. Mercy Ships and Africa together have the greatest future ahead."



Letter from the Founder

When Deyon and I began pursuing our dream of using hospital ships to reach people in need of hope and healing over 40 years ago, I never could have dreamed of what the future would hold. This previous year, in particular, has been one of great hope. Throughout 2022, I had the privilege of seeing promises fulfilled and hope and healing in action. From the return of the *Africa Mercy* to Senegal, to the fulfilment of our long-time dream of launching the *Global Mercy* with our African Partner countries, we have been in a season of blessing.

I will never forget standing on the bow of the *Global Mercy* last summer as it sailed in to join the *Africa Mercy* in Dakar, Senegal, and thinking, "God is good. Mercy Ships and Africa together have the greatest future ahead."

That future of Mercy Ships is possible because of the partnerships with the countries we serve, the compassion of our volunteer crew, and the generosity of our friends and partners. And for that, I am grateful.

As you read the following pages of our annual report, it is our hope that the stories of transformation and partnership continue to fuel your passion. You make these stories — from our efforts on board our hospital ships to our efforts around the continent — a possibility. Thank you.

Following the model of Jesus,

Don Stephens

Don Stephens

Letter from the Chair of the Board

Upon reflection, it's clear that Mercy Ships volunteers and partners have made a tremendous difference in many people's lives in Africa, providing vital surgical care to people who otherwise lack access to these services. Education and training are also offered to local professionals to help strengthen the delivery of health care in the nations we serve.

It's inspiring to see Mercy Ships taking a holistic approach to healthcare and recognizing the importance of providing medical care and building local healthcare systems' capacity. This approach can help to ensure that the impact of Mercy Ships' work is sustainable and that communities are better equipped to meet their ongoing healthcare needs.

The impact of Mercy Ships' work is alive and infused with hope because the free surgical services profoundly affect individuals, families, and communities. By working in close collaboration with partners in Africa, Mercy Ships has been better able to understand the specific healthcare needs and challenges facing these communities and tailor its programs to meet those needs.

In addition to the new hospital ship, the *Global Mercy*, you will read about the ground breaking baseline assessment, which surveyed more than 600 district hospitals throughout Africa and identified existing gaps in surgical, obstetric, and anesthetic care. The evaluation is essential in understanding the specific surgical healthcare needs and challenges facing African communities and developing targeted solutions to address those needs.

Mercy Ships Canada contributed to medical capacity building and health systems relationship development in Senegal and Guinea in 2022 via the Joint Programs Agreement with Mercy Ships. Three new 2022 initiatives were:

- Medical Waste Converter Installation Project (Senegal),
- Hope Medical Centre Equipment Project (Guinea),
- Gamal Medical Simulation Project (Guinea).

On behalf of the Board of Mercy Ships Canada, I invite you to review the 2022 Annual Report. In closing, I want to acknowledge and honour the commitment of our volunteers, donors, partners, Board members and vendors to our mission to bring hope and healing. Your ongoing support and contribution enable our shared service together to flourish. On behalf of our Board, I offer a heartfelt thank you.

Yours sincerely,

Alain-Michel Sékula

Alain-Michel Sékula, MBA, CMC, Colonel (Honoraire) FAC-CAF
Board Chair, Mercy Ships Canada



Letter from the Executive Director



In my 2021 Annual Report remarks, I prayed that in the year ahead, the beauty of the Lord our God would be upon us and establish the work of our hands among us. The results highlighted in the 2022 Annual Report reflect an answer to that prayer.

Mercy Ships' return to Senegal was a highlight. We are grateful both ships served there during the year. On a personal note, it was wonderful to be in Dakar to see the progress and achievements and the two hospital ships in operation. Seeing the two-ship fleet working side by side in Africa was truly inspiring. It is heart-warming to hear about the lives that have been transformed due to their efforts made possible with the support of our donors.

Lives continued to be transformed through the provision of surgeries and training on the *Africa Mercy*. Valuable training programs were also conducted on board the *Global Mercy*. More than 1,000 Senegalese healthcare professionals participated in 49,368 hours of courses, including SAFE Obstetric Anaesthesia, safe surgery, palliative care, nurse mentoring, and mental health, equipping them with the skills to strengthen their systems from within. I encourage readers to review the 2022 Annual Report and the appendix summarizing the programmatic work. The material provides deeper insights into Mercy Ships' work in Senegal and other African Nations.

Following the 2000-year-old model of Jesus has allowed Mercy Ships Canada to have a significant impact in 2022. In total, 78 Canadians plus family members served in volunteer roles in 2022. The dollar value of Canadians who volunteered their professional services was \$1,688,800. Mercy Ships Canada also continued to facilitate the secondment of staff members to the Mercy Ships international programs team.

The dedication and commitment of the international volunteer crew, local healthcare professionals, and Canadian national office staff is admirable. Thank you to our supporters, staff, volunteers, and partners for all the work you and the entire Mercy Ships team do to make a difference in the lives of people who lack access to surgical healthcare and for your unwavering commitment to bringing hope and healing to people in need.

Yours sincerely,

Darryl Anderson

Darryl Anderson
Executive Director, Mercy Ships Canada



Watch the 2022 Overview



2022 in Review Celebrating Hope in New Ways

For Mercy Ships, 2022 was a year filled with unique challenges, yet overflowing with restored hope and fresh opportunities for transformation. While our programs remained active in Africa throughout the pandemic, we longed for the day our ships could return. And in February 2022, there was a celebration like never before as the *Africa Mercy* returned to Senegal to fulfil a promise to patients long awaiting surgery.

The year also marked many milestones in the journey of the *Global Mercy*, including finishing a season of equipping in Antwerp, Belgium, and making a two-week visit to Rotterdam, the Netherlands. There, more than 25,000 visitors journeyed through her decks — both in person (12,300-plus) and virtually (13,000-plus) — in an unparalleled tour experience. We even welcomed some very special guests, including corporate partners from around the world, HRH Princess Anne of the U.K., and world-renowned opera singer Andrea Bocelli, who performed a concert on board.

Overall, the events led to more than \$41.5 million in earned media value and thousands of new volunteer leads, paving the way for more opportunities for impact.

In June, we operated a two-ship fleet side-by-side in Africa. The *Global Mercy's* first opportunity to participate in programmatic work resulted in training opportunities for 245 Senegalese healthcare professionals.

We worked together with Africa in new and profound ways, paving a path for monumental change. From the findings of an African-led International Symposium to the commitment to the Dakar Declaration for greater access to safe surgery, hope is on the horizon.

All the while, programs spanning Guinea, Liberia, Togo, Benin, and beyond continued to transform lives. Thank you for being a part of this story — and for celebrating hope together with Mercy Ships this year.

Image: The *Africa Mercy* and the *Global Mercy* together in Dakar, Senegal.



7
Countries with Active Programs



1,200+
Volunteers



200+
National Crew In Senegal



186
Local Partners



2,335
TOTAL Surgical Patients



3,201
TOTAL Surgeries



1,920
TOTAL Dental Patients



2,545
TOTAL Medical Capacity Building Participants



224,459
TOTAL Medical Capacity Building Participant Hours

Images: Daouda, age 13, before and after surgery on the *Africa Mercy* in Senegal.



Watch the Rotterdam visit recap

The Journey of the *Global Mercy* in 2022

From shipyard to service and back again — the *Global Mercy* sailed quite the journey in 2022. At the beginning of the year, the world's largest civilian hospital ship underwent equipping projects in ① Antwerp, Belgium before spending two weeks welcoming visitors in the ② Port of Rotterdam, the Netherlands.

Next, the *Global Mercy* continued a series of projects in ③ the Canary Islands, from equipping the operating rooms to refining the information systems.

In June 2022, we celebrated a long-awaited sight: the organization's first purpose-built vessel arriving where she was made to be. ④ In Africa.

Welcomed by H.E. President Macky Sall of Senegal, the *Global Mercy* joined the *Africa Mercy* in Dakar and was officially inaugurated into the Mercy Ships

fleet. The celebration included a symbolic torch ceremony signalling unity between the two ships.

During her season in Dakar, more than 245 healthcare professionals came on board for a series of eight medical capacity building courses. Of the 37 course facilitators, 27 were African.

The *Global Mercy* returned to the ⑤ Canary Islands to finish equipping projects and prepare for her first full field service scheduled for early 2023.

"This is history in the making . . . More lives and communities transformed, and more opportunities to stand alongside our partners in Africa to train and mentor the healthcare workers here and strengthen surgical systems."

— *Nathan Claus, Senior Director of Clinical Services*

Image: The *Global Mercy* arrives in Dakar, Senegal.



"This is history in the making... More lives and communities transformed..."

The Africa Mercy in Senegal

One Promise Fulfilled, Many Lives Changed

One of the greatest celebrations of hope took place February 1 when, after two years of waiting, the *Africa Mercy* arrived at the Port of Dakar, Senegal. She was greeted with music, dancing, and pure joy — because everyone present knew what the moment signified. There had been fears that Mercy Ships would not return, and her arrival was a symbol of a lasting commitment to the people of Africa — a promise fulfilled for hundreds of patients awaiting surgery.

With COVID-19 health and safety measures in place, the field service was soon underway. When the first patient, Sokhna, stepped on board to receive surgery, she said she wasn't nervous: "I feel just peace and joy."



Watch our first patients arrive on board

Image: Sokhna walks up the gangway on the *Africa Mercy*.

She had her eyes set on the light at the end of the tunnel: returning home, where her husband would see her healed from her cleft lip for the very first time.

Many patients would soon follow Sokhna up the gangway, with 695 people receiving operations on board the *Africa Mercy* this year. Meanwhile, 764 healthcare professionals received key training through a variety of Medical Capacity Building courses in Senegal, from safe surgery and sterile processing to palliative care, mental health, and more.

"Although Mercy Ships never really left Senegal, it was an honour and a blessing to return in 2022. This return would not have been possible without the partnership of the Senegalese government, which continued to walk closely with us through a difficult season. On behalf of Mercy Ships, I would like to extend a special thank you to President Macky Sall for his friendship and support, which enabled us to once again bring hope and healing to Senegal."

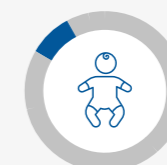
— Gert van de Weerdhof,



765
TOTAL Surgeries



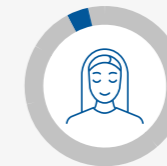
296
General Surgeries



68
Pediatric Specialized General Surgeries



252
Maxillofacial Surgeries



34
Women's Health Surgeries



90
Reconstructive Plastic Surgeries



25
Orthopedic Surgeries

Image: Aissatou, 4 years old, after surgery to repair her cleft lip.

Medical Capacity Building *in Senegal*

We are grateful both ships served in Senegal in 2022. Lives continued to be changed through surgeries and training on the *Africa Mercy*. Valuable training programs were also conducted on board the *Global Mercy*.

More than 1,000 Senegalese healthcare professionals participated in courses including SAFE Obstetric Anesthesia, safe surgery, palliative care, nurse mentoring, and mental health, equipping them with the skills to strengthen their systems from within.

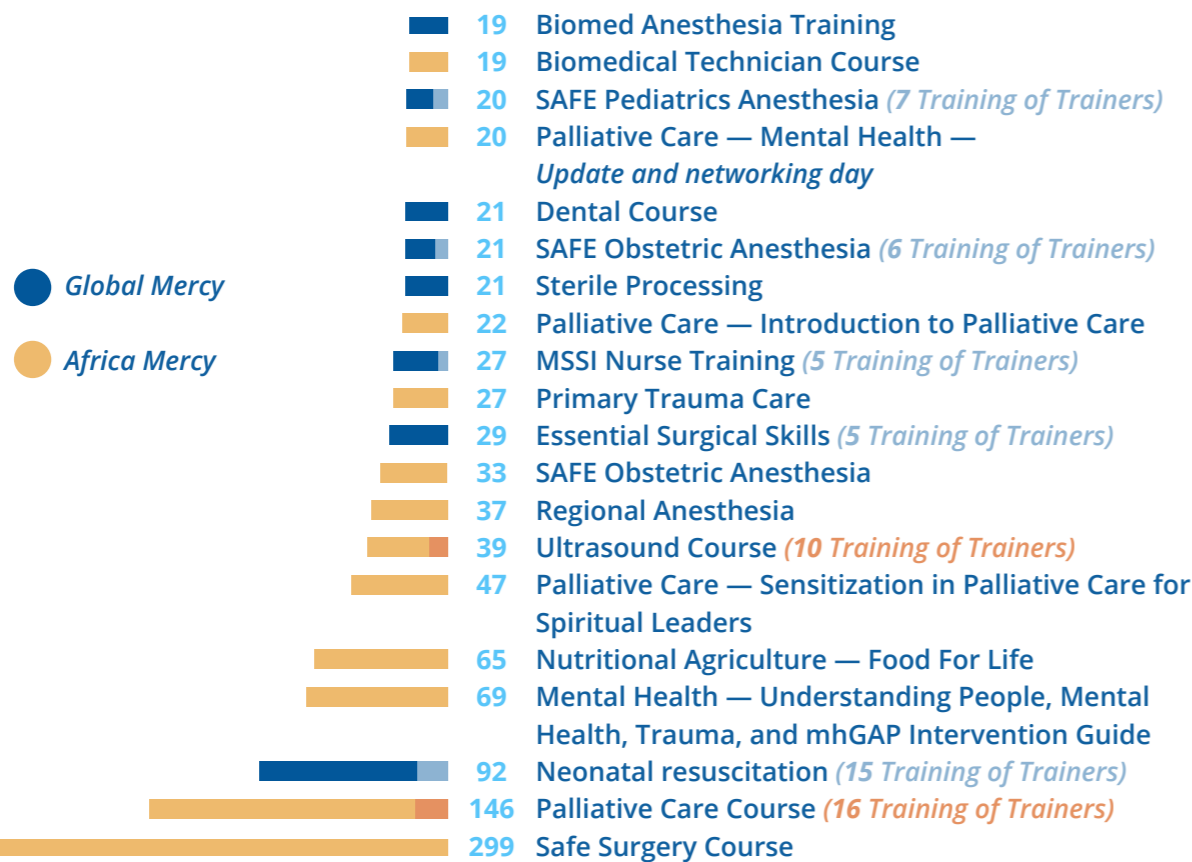


See the first MCB Courses on the *Global Mercy*

1,006
Unique MCB Course Participants

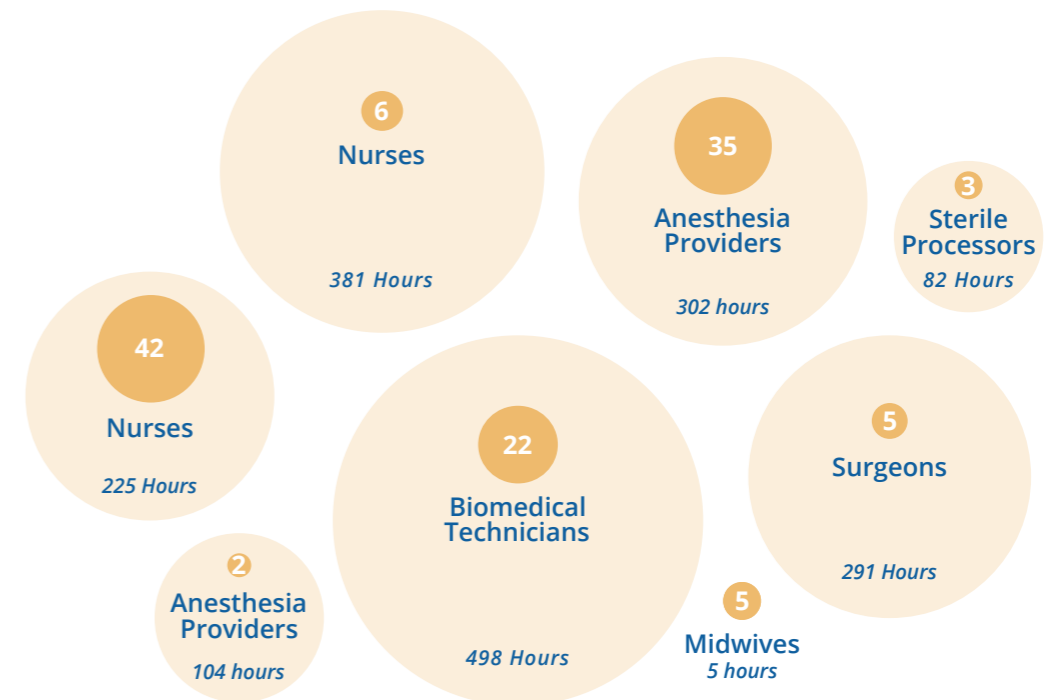
49,368
Participant Course Hours

PARTICIPANTS



115
Unique Mentoring Participants

1,887
Participant Mentoring Hours



Mentoring Participants Participant

Image: Senegalese surgeons during the Essential Surgical Skills training course on board the *Global Mercy*.



MCB Stories: Lasting Impact in Action

On the heels of the Dakar Declaration, we saw a growing focus on the future of sustainable, safe surgical care. On both the *Global Mercy* and the *Africa Mercy*, as well as across Africa, training continues to transform communities. Here are just two stories of surgeons who received training and now mentor others in their respective fields.

Dr. Mohamed Sabounji The Journey to Becoming Senegal's First Pediatric Orthopedic Surgeon

In Senegal, children with lower-limb conditions have struggled to find local specialists who can help. In a country of 16 million, there is not one pediatric orthopedic surgeon. Dr. Mohamed Sabounji aimed to be the first.

In 2019, he received training from Mercy Ships on the Ponseti method. It's the gold standard in correcting clubfoot, a treatable condition in which the foot is turned in or under, making walking difficult. Dr. Sabounji called the training "a life-changing experience, both personally and professionally."

He then partnered with Mercy Ships to develop a free clubfoot clinic in Dakar. Over five months, he treated 18 young patients, watching cast changes and rehab exercises correct twisted feet until they could walk with ease.

When the *Africa Mercy* left Senegal in 2020, Dr. Sabounji continued the clinic, building it up to treat over 50 cases a year.

In 2022, he resumed his mentorship on board the *Africa Mercy*.

"I got really lucky to be in the mentorship because it allowed me to be part of the whole treatment of clubfoot, from the casting to the relapses," said Dr. Sabounji. "I was afforded ample opportunity to get the training I need to improve my competence and my confidence."

He dreams of a future where children with a treatable condition will be able to access care quickly. On his path to becoming Senegal's first pediatric orthopedic surgeon, he is already making that dream come true.

Image: Dr. Sabounji with a clubfoot patient.

Dr. Charlotte Polle-Kaliti: The Surgeon at the Forefront of Women's Health



Watch Dr. Charlotte's Story

"...we can train local surgeons to pick up the mantle, we have a pool of experts who will continue with the work."

Growing up in a small village in Kenya, Dr. Charlotte Polle-Kaliti watched her neighbours, especially pregnant women, go without the healthcare they needed.

"I remember seeing a lot of suffering and disease," she said. "Women die giving life. You lose your life to gain life. And then those who survive, those who are lucky, end up having fistula."

Dr. Polle-Kaliti would later become the first person from her community to go into medicine. Today, she's the sole female fistula surgeon in Kenya — one of only 11 in total.

She's served on board with Mercy Ships three times, including this year in Dakar, where she performed 34 surgeries. Fourteen of those were fistula repairs.

"There are those who can give a coin, and there are those who can give their skills," she said.

But to Dr. Polle-Kaliti, training is just as important as performing surgery.

"You don't want to just come and help a few women and leave," she said. "The fact that we can train local surgeons to pick up the mantle, we have a pool of experts who will continue with the work."

As part of the MCB program, Dr. Polle-Kaliti recently had the opportunity to mentor Dr. Abdourahmane Diallo, a urologist from Senegal. He's now bringing that knowledge back to Hospital General De Grand Yoff in Dakar.

"That's the beauty of this mentorship; it will have a trickle effect," he said. "I have learned, so I will teach."



Images: Dr. Polle-Kaliti; Dr. Polle-Kaliti with an obstetric fistula patient; Dr. Polle-Kaliti mentoring Dr. Diallo on board the Africa Mercy.



Building a Better Future Together with Africa

The International Symposium was a culmination of months of planning and deliberations. It started with a critical baseline assessment study on the state of surgical, obstetric, and anesthetic (SOA) care access in Africa by the scientific committee in partnership with participating countries and other organizations. The study, the first of its kind in Africa, collected data on factors related to the provision, access, and operation of surgical, obstetric, and anesthetic health care systems in

28 of the 47 nations of sub-Saharan Africa, as defined by the World Health Organization (WHO).

During sessions held throughout the Symposium, there was a push for greater collaboration and partnership to help address the complex issues and challenges plaguing SOA care access in Africa.

This culminated in Ministers of Health, country delegates, and health experts confirming and forming the Dakar Declaration: a historic roadmap to accelerating safe surgical, obstetric, and anesthetic care in Africa over the next decade.

"It's a great day for the people of Senegal. We have been waiting for this day for the last two years... It's a huge opportunity for us to help our people in need of free surgery. We would like to really thank Mercy Ships for your trust, and also for your friendship."

— Dr. Serigne Diop, Senegalese Presidential Advisor



Images: (top) The Ministerial Summit during the International Symposium. (above) Dr. Serigne Gueye Diop, Presidential Advisor, is greeted by Gert van de Weerdhof, Mercy Ships CEO, at the Inauguration of the Global Mercy.

Kadidja's New Smile

At first glance, Kadidja is just like any other child. The 4-year-old girl is happy and energetic. She loves to dance, play, and eat good food. But something was holding her back.

Kadidja was born with a cleft lip. For four years, she endured the shame of looking different than other children. This was painful for both Kadidja and her mother, Ramata. "Since she was born, I refused to take her into the village because the other children would look at her and try to touch her nose and lips," Ramata said.

After three long years of waiting, hope was finally on the horizon. Ramata heard that Mercy Ships would sail to Senegal, so the mother and daughter journeyed to Dakar for surgery.

A week after Kadidja's successful operation, Ramata saw her daughter's new smile for the first time. In that moment, she was overflowing with love and delight.

"I am so happy. She looks so beautiful. When we go back to our village, everyone will treat her like a normal person. She can interact with other children again and she can go to school."



Watch Kadidja's Story

Images: Kadidja and her mother, before and after surgery.



The Indomitable Dedication of Volunteers and Staff

Returning our ships to service in Africa was a long-awaited answer to prayer — but it came at a cost. Operating a hospital ship in a pandemic environment has created exceptional challenges, felt most deeply by the volunteer crew on board.

A complex matrix of COVID-19 health and safety measures, designed to protect patients and crew alike, meant a field service that looked unlike any before. After putting their lives on hold to wait for months or even years to return to service, volunteers found themselves continually adjusting plans in the face of an ever-changing healthcare landscape. Recurring on-ship lockdowns, last-minute quarantines, and thorough COVID prevention policies required tremendous flexibility and sacrifice.

Yet despite the mental, emotional, and physical challenges, hope prevailed. Returning and new volunteers found themselves forming a

community and celebrating hope and healing as patients returned to the *Africa Mercy*, bringing new life to the ship. They remained eager to finish the field service well and carry out the mission, even at great personal sacrifice. Without their dedication, the transformations we saw this year would never have been possible. Thank you.

“2022 is the year that Mercy Ships brought the Africa Mercy back into service! God designed and equipped a unique group of people who stepped into the unknown world of COVID, surgeries, and a renewed field service. Despite the complications and challenges of the 2022 field service, the crew and day crew of the Africa Mercy enjoyed pouring the love of God into the people of Senegal.”

— John Mark Bray, Africa Mercy Managing Director

Eric Diatta The Translator Who Kept Hope Alive



When the *Africa Mercy* left Senegal earlier than expected in 2020, local translator Eric Diatta was the one to share the heartbreaking news with patients — but he held out hope that healing would return.

There were more than 1,000 patients with cancelled surgeries. So, Eric made a schedule and began calling every single patient once a month.

When the ship returned in February 2022, Eric was standing on the dock to welcome her.

After two years and thousands of phone calls, he was finally able to deliver some good news.

“You cannot imagine the joy that I am feeling inside me, not only for me but for the patients who have been waiting,” he said. “Finally, God made it possible for the ship to be able to come back.”

“You cannot imagine the joy that I am feeling inside me...”

Images: (left) Denise Clarke, volunteer preoperative nurse, during the patient admission process. (inset) Local translator Eric Diatta.



Dr. Mark Shrime Mercy Ships' New International Chief Medical Officer

In 2022, Mercy Ships welcomed a new International Chief Medical Officer, Dr. Mark Shrime. His robust background in global health has equipped him in profound ways for his new role.

He previously served as the O'Brien Chair of Global Surgery at the Royal College of Surgeons in Ireland, as the founder and Director of the Center for Global Surgery Evaluation at the Massachusetts Eye and Ear Infirmary, and as Research Director for the Program in Global Surgery and Social Change at Harvard.

He is the author of seminal papers on the global burden of surgical disease, the financial burden facing surgical patients, and the number of people who cannot access safe surgery worldwide. He has also served as a co-author on the Lancet Commission on Global Surgery.

He first encountered Mercy Ships in 2008 while volunteering as a surgeon in Liberia. Although he had worked in Mexico and Jordan during his earlier training, this was his first exposure to surgical care in post-conflict regions. Ever since, Dr. Shrime has been committed to serving on the *Africa Mercy* twice a year. He had long left his mark on the community — and he was ready to celebrate hope in a whole new way through this role.

"To overcome injustice and inequity in health, safe, affordable, and timely surgical care must be an indispensable part of any healthcare system. I look forward to working even more closely with the dedicated professionals in Mercy Ships, and in the countries with which we partner, to decrease the burden of unmet surgical need and to improve outcomes for patients."

Image: Dr. Mark Shrime in an operating theatre onboard the *Africa Mercy*.



"It felt like getting an extra gift."

Cire's Life-Changing Birthday Gift

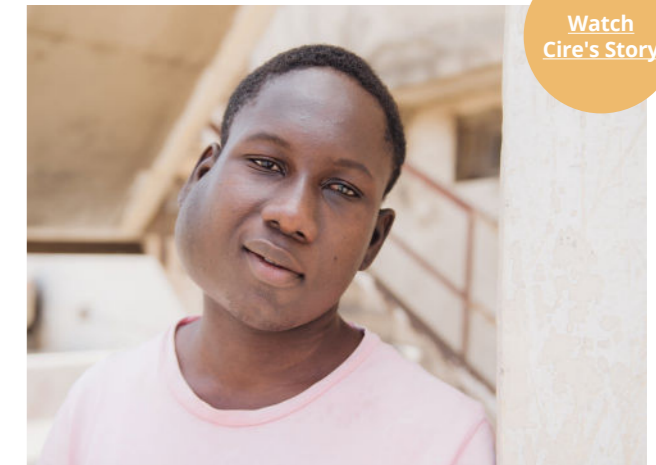
On the morning of his 20th birthday, Cire celebrated in an unusual way: being wheeled into the sterile operating room of the *Africa Mercy*. The moment had been years in the making for Cire, who was just 16 when a facial tumour started growing. His family could only wait and hope for a miracle.

"It (the tumour) wasn't beautiful; no one would want to have it on their face," says Cire, who constantly felt uncomfortable in public.

So, he travelled the distance across Senegal to the ship, where his birthday gift awaited as he finally received a life-changing surgery.

A few days later, volunteer nurses threw him a belated birthday party to mark the new year. *"It felt like getting an extra gift. I was grateful for the surgery and then they gave me this celebration. I was so happy,"* Cire recalled.

During his recovery, the main thing he looked forward to was simple: going back home and showing off the change in his face.



Watch
Cire's Story



Images: (top) Cire, during his birthday party in the wards. (above) Cire before and after surgery.

Celebrating Hope Across Africa

While the focus of the field service was on Senegal this year, Mercy Ships remained active in bringing hope and healing throughout Africa.



Image: Abraham, former Food for Life trainee and now staff member at Phaz Compassion in Benin.



Niger

This year, Dr. Tertius Venter returned to Niger and performed 47 plastic reconstructive surgeries. This effort fulfilled our 2020 commitment with CURE International to provide surgeries while our ships were out of service due to the pandemic.



47
Plastic Reconstructive Surgeries



Benin

This year, the Benin-based Food for Life infrastructure project began its second phase of construction on its way to providing a permanent space for students to learn about nutritional agriculture. Meanwhile, Food for Life courses continued, with 34 participants trained in 2022. These projects provide agricultural training and tools to course participants, who learn how to train others in turn, creating a ripple effect of transformation across Benin.



88
MCB Participants



68,561
Participant Hours

PARTICIPANTS

- 24 Essential Surgical Skills Course
- 64 Nutritional Agriculture —Food For Life



Guinea

Mercy Ships continued its partnership with Hope Ignited to build a pediatric centre of excellence, the first of its kind in Guinea and the site of life-changing surgical care for many years to come.

After partnering with Gamal Abdel Nasser University to run the dental program since 2018, Mercy Ships signed a memorandum of agreement to invest in an expansion of the clinic, allowing even more students to receive hands-on experience and education.



36
Maxillofacial Surgeries



147
MCB Participants



55,894
Participant Hours

PARTICIPANTS

- 13 Medical Education Sponsorship
- 24 Biomedical Technician Mentoring
- 110 Dental Partner Unit Mentoring Program



2,353
Ophthalmic Surgeries



5
MCB Mentoring Participants



695
Participant Hours

PARTICIPANTS

- 5 Surgeon Mentoring

Togo

It's been an exciting year of growth in Togo as we continued to partner with Dr. Wodomé's ophthalmic clinic and cataract surgical training program. We also supported the ongoing Cataract Campaign Togo Project, bringing free surgeries to patients around the country.

This also marks a second year of partnership with Sight.org, a Togo-based ophthalmic surgical NGO whose lead cataract surgeon was originally trained by Dr. Wodomé. In 2022, Mercy Ships funded 2,353 cataract surgeries for rural patients, many of whom otherwise lacked access to care.

Image: Dental student Francois training in the simulation lab at Gamal Abdel Nasser University in Conakry, Guinea.





Liberia

In Liberia, programmatic work continued through Mercy Ships' partnership with Lifebox. The collaborative Clean Cut Program helped hospital surgical teams set up quality assurance systems. We also ran a series of SAFE Obstetric Anesthesia courses both online and in person.

 **998** MCB Participants  **42,433** Participant Hours


PARTICIPANTS



South Africa

According to the World Bank, sub-Saharan Africa has an estimated maternal mortality ratio of 547 deaths per 100,000 live births, over two times that of the global rate. In response to this need, Mercy Ships provided SAFE Obstetric Anesthesia courses in South Africa in 2022, imparting skills and knowledge to course participants as well as training professionals to share these skills with others.

 **132** MCB Participants

 **3,948** Participant Hours

PARTICIPANTS



Image: Local trainer and anesthesia provider, Perry, teaches his fellow anesthesia nurses in SAFE Obstetric Anesthesia in Liberia.



"...I cannot wait to dance in my village and walk around to show that God is faithful..."

Twice the Hope, Twice the Healing for Maman

When Maman stepped on board a Mercy Ship in March 2022, it wasn't the first time. She first encountered Mercy Ships more than 20 years earlier when the *Anastasis* was in The Gambia. Then 46 years old, Maman had long been living with the effects of a condition called noma, a bacterial infection that removed the skin on one side of her face. It was a condition that she'd contracted as a child.

They recognized each other right away in a reunion that amazed him: "When I saw Maman again, it was great to see what impact our work here has on people's lives. Maman has a seat at the table of the human race again!"

This beautiful reunion was the start of Maman's second journey to hope and healing, as she received follow-up surgery.

Long-term volunteer maxillofacial surgeon Dr. Gary Parker performed Maman's first surgery all those years ago. And in 2022, he was back on board a Mercy Ship working in the operating room when he encountered her again.

"Once I am home, my children will be so happy to see me in good health. I cannot wait to dance in my village and walk around to show that God is faithful by bringing the ship back."

Image: Maman, after her surgery this year.

"He's back to being the real Diongnima."



Diongnima's Childhood Restored

Fourteen-year-old Diongnima spent most of his childhood with a tumour growing over his left eye. For nine years, the tumour brought physical challenges, obstructing his vision, but it took an even greater toll on him psychologically.

He loved to play soccer — but because of his limited sight, peers would tell him, "You can't play. Sit on the bench!"

"There were a lot of things I could not do because of the tumour," said Diongnima. Yet he always had his sights set on playing his favourite sport professionally.

Diongnima and his family learned about the free surgeries available on the *Africa Mercy* and decided to take a step of faith. They received a surgery appointment and came on board the ship.

After a successful surgery to remove the tumour, his family could tell that the healing went far beyond the physical. "He's back to being the real Diongnima," said his cousin, Mamadou.

Diongnima might have always dreamed of being an athlete, but after his time with Mercy Ships, he sees another path.

"I like the way they take care of the patients on the ship. It gives me great pleasure. Apart from becoming a professional soccer player, being a doctor is what I would like to become."



Images: Diongnima before and after surgery.



Looking to the Future: One Port, Two Nations

For many reasons, 2022 was very special. Now, Mercy Ships is poised and ready, anticipating a great year ahead.

In early 2023, the *Global Mercy* begins the next field service in Senegal and welcomes patients on board for the very first time. This will be an opportunity to continue meeting the need in Senegal, providing both surgical care to patients and medical training to local healthcare professionals.

While docked in Senegal, we are excited to serve in a new way — by welcoming patients from neighbouring country The Gambia to receive care on board. Up to 25 percent of patients in the next field service will come from The Gambia.

Then, in the second half of 2023, the *Global Mercy* will begin the next chapter in a 20-year history with Sierra Leone by sailing to Freetown for the next field service.

We also prepare to build a more permanent presence in Africa through the creation of the new Africa Service Center, which will serve as a hub for local country engagement teams. With Bernard van den Bosch as Director

and Dr. Juliette Tuakli appointed as Diplomatic Ambassador of Africa, along with continued support from Dr. Pierre M'Pele, we are further positioned for a future of collaboration and engagement with our African partners.

Meanwhile, the *Africa Mercy* will take a period of refit in Durban, South Africa, to receive maintenance and updates that will extend her lifespan for years to come.

"In order to run a two-ship fleet in a simplified and sustainable operating rhythm, it is crucial to have fully equipped vessels. The refit of the Africa Mercy is pivotal to us bringing even more hope and healing as the hands and feet of Jesus," said Robert Corley, chief operating officer. "During the refit, we will be replacing the main elevator, installing functional dining and galley services, while also upgrading our technology platforms throughout the ship. Not only will the work ensure compliance and long-term viability of the Africa Mercy, but it will also ensure we have an environment fully capable of serving our patients and crew on board."

We look forward to continuing to bring hope and healing in new ways in 2023!

Image: The *Global Mercy* in Dakar, Senegal.

Direct Medical Services

SURGERIES		TOTAL: 3,201
AFRICA MERCY	Totals	765
	SENEGAL	
	Totals	765
	General Surgery	296
	Maxillofacial Surgery	252
	Orthopedic Surgery	25
	Pediatric Specialized General Surgery	68
	Plastics Surgery	90
Women's Health Surgery	34	
OFF-SHIP		Totals 2,436
Guinea		Totals 36
		Maxillofacial Surgery - Dr. Diallo Surgeries 36
Niger		Totals 47
		CURE International Children's Hospital of Niger 47
TOGO		Totals 2,353
		Ophthalmic Surgery - Cataract Surgery Campaign 1,229
		Ophthalmic Surgery - Sight.org Partnership 188
		Ophthalmic Surgery - Togo Cataract Surgery 936
		Teaching Institute Investment

SURGICAL PROCEDURES		TOTAL: 3,936
AFRICA MERCY	Totals	1,271
	SENEGAL	
	Totals	1,271
	General Surgery	312
	Maxillofacial Surgery	554
	Orthopedic Surgery	92
	Pediatric Specialized General Surgery	108
	Plastics Surgery	170
Women's Health Surgery	35	
OFF-SHIP		Totals 2,665
Guinea		Totals 72
		Maxillofacial Surgery - Dr. Diallo Surgeries 72
Niger		Totals 134
		CURE International Children's Hospital of Niger 134
TOGO		Totals 2,459
		Ophthalmic Surgery - Cataract Surgery Campaign 1,278
		Ophthalmic Surgery - Sight.org Partnership 188
		Ophthalmic Surgery - Togo Cataract Surgery 993
		Teaching Institute Investment



UNIQUE SURGICAL PATIENTS		TOTAL: 2,335
AFRICA MERCY	Totals	695
	SENEGAL	
	Totals	695
	General Surgery	291
	Maxillofacial Surgery	222
	Orthopedic Surgery	25
	Pediatric Specialized General Surgery	68
	Plastics Surgery	67
Women's Health Surgery	32	
OFF-SHIP		Totals 1,640
Guinea		Totals 36
		Maxillofacial Surgery - Dr. Diallo Surgeries 36
Niger		Totals 47
		CURE International Children's Hospital of Niger 47
TOGO		Totals 1,557
		Ophthalmic Surgery - Cataract Surgery Campaign 790
		Ophthalmic Surgery - Sight.org Partnership 176
		Ophthalmic Surgery - Togo Cataract Surgery 591
		Teaching Institute Investment

DENTAL PATIENTS		TOTAL: 1,920
OFF-SHIP	Totals	1,920
GUINEA		
	Totals	1,920
	Gamal Dental Clinic	1,920

DENTAL ENCOUNTERS		TOTAL: 4,083
OFF-SHIP	Totals	4,083
GUINEA		
	Totals	4,083
	Gamal Dental Clinic	4,083

DENTAL PROCEDURES		TOTAL: 9,465
OFF-SHIP	Totals	9,465
GUINEA		
	Totals	9,465
	Gamal Dental Clinic	9,465

BASIC ORAL HEALTH INSTRUCTION		TOTAL: 1,826
OFF-SHIP	Totals	1,826
GUINEA		
	Totals	1,826
	Gamal Dental Clinic	1,826

Definition of terms related to Dental

- **Unique Dental Patients:** counts each unique dental patient only once even if they receive more than one procedure.
- **Dental Procedures:** counts each procedure (ie. Extractions, white fillings, amalgam fillings, etc.). Normally there are multiple dental procedures during one dental patient encounter.
- **Dental Patient Encounter:** some individuals might be counted twice if they return for separate treatments.

Definition of terms related to Surgical Areas

- **Unique Surgical Patients:** counts each unique surgical patient only once even if they receive more than one surgery.
- **Surgical Procedures:** a medical service provided to a patient. During one surgery, there may be more than one surgical procedure. *Example: Cataract Surgery — 1 surgical procedure to remove the cataract and 1 surgical procedure to insert the Intraocular Lens = 2 surgical procedures.*
- **OR Visits/Surgeries:** counts each visit to the operating room/theatre as a surgery/OR visit. *Example: a maxillofacial patient receives 1 surgery with 5 surgical procedures = 1 unique patient, 1 surgery and 5 surgical procedures. If the same patient goes back for his Iliac Crest Bone Graft surgery, and during that surgery there were 2 surgical procedures, then our records reflect 1 unique patient, 2 surgeries, and 7 surgical procedures for the Maxillofacial Surgical Project.*

Images: (Left) Dr. Rachel Buckingham, pediatric surgeon, and Dr. Mohamed Sabounji, MCB pediatric surgeon, during his orthopedic clubfoot mentoring experience in the OR. (Right) Sangone Diene, ward day crew, carries a patient's sleeping baby in the hospital.

Medical Capacity Building

		Number of MCB Participants	Participant Hours	
TOTAL: 2,545		224,459		
AFRICA MERCY	Totals	51	937	
	SENEGAL	Totals	51	937
		Anesthesia Mentoring	2	104
		Nurse Mentoring	6	381
		Sterile Processor Mentoring	3	82
		Surgeon Mentoring	5	291
		Regional Anesthesia Course	37	80
GLOBAL MERCY	Totals	245	4,592	
	SENEGAL	Totals	245	4,592
		Biomed Anesthesia Training	19	665
		Dental Course	21	294
		Essential Surgical Skills	29	390
		Essential Surgical Skills — Training of Trainers	5	60
		MSSI Nurse Training	27	813
		MSSI Nurse Training — Training of Trainers	5	172
		Neonatal resuscitation	92	633
		Neonatal resuscitation — Training of Trainers	15	116
		SAFE Obstetric Anesthesia	21	411
		SAFE Obstetric Anesthesia — Training of Trainers	6	39
		SAFE Pediatrics Anesthesia	20	441
		SAFE Pediatrics Anesthesia — Training of Trainers	7	35
Sterile Processing	21	525		

Definition of terms related to Medical Capacity Building

- Participants:** anyone who actively participates in any training program offered by Mercy Ships Medical Capacity Building programs. Only counts the nationals attending in the above charts, not Mercy Ships crew or volunteers.
- Training of Trainers:** MCB course and mentoring participants who receive additional instruction for the purpose of teaching others.
- Mentoring:** Delivered training tailored to individual needs; may or may not include curriculum. The goal is an increase in knowledge, skills, and aptitude as measured by mentor's evaluation of participant.
- Number of MCB Courses:** counts each training course provided. *Example: Essential Surgical Skills — 6 two-day courses + 3 Training-of-Trainers one-day courses = 9 courses.*
- MCB Course Hours:** total number of actual course hours. *Example: Essential Surgical Skills — 7 course hours per day x 2 days = 14 course hours.*
- MCB Participant:** the confirmed attendance of participants attending MCB courses and MCB mentoring — not unique MCB training participants. One may be mentored and also attend a course(s) and thus be counted twice. They are counted if they attended, even if they did not attend the entire course for all days.
- MCB Participant Hours:** counts actual number of training hours, rounded to the quarter hour (not including breaks), completed by MCB course and mentoring participants. *Example: Essential Surgical Skills — 9 participants perfect attendance for 14 hours (two days x 7 hours/day) = 126 participant hours.*

		Number of MCB Participants	Participant Hours
Totals		2,276	218,929
BENIN	Totals	88	68,561
	Essential Surgical Skills Course	24	348
	Nutritional Agriculture — Food For Life	64	68,213
GUINEA	Totals	147	55,894
	Biomedical Technician Mentoring	24	2,467
	Dental Partner Unit Mentoring Program	110	42,667
	Specialized Medical Education Sponsorship	13	10,760
LIBERIA	Totals	998	42,433
	Biomedical Technician Mentoring	15	418
	Leadership Development	264	3,190
	Lifebox	184	1,591
	Mental Health	201	5,694
	MSSI Nurse Training	40	3,144
	Neonatal Resuscitation Courses	62	315
	Nutritional Agriculture - Food for Life	54	25,675
	Primary Trauma Care Courses	43	1,422
	SAFE Obstetric Anesthesia Courses	81	575
OFF-SHIP	Totals	861	45,725
	Anesthesia Providers Mentoring	35	302
	Biomedical Technician Mentoring	22	498
	Midwives Mentoring	5	5
	Nurse Mentoring	42	225
	Biomedical Technician Courses	19	4,003
	Mental Health Course	69	2,661
	Nutritional Agriculture - Food for Life	65	29,860
	Palliative Care Course	146	1,170
	Palliative Care Course — Training of Trainers	16	287
	Palliative Care — Intro to Palliative Care	22	658
	Palliative Care — Sensitization for Spiritual Leaders	47	497
	Palliative Care — Update and Networking Day	20	80
	Primary Trauma Care Courses	27	588
	SAFE Obstetric Anesthesia	33	1064
Safe Surgery	299	1964	
Ultrasound Courses	39	951	
Ultrasound Courses - Training of Trainers	10	170	
SOUTH AFRICA	Totals	132	3,948
	SAFE Pediatrics Anesthesia	32	3,948
TOGO	Totals	5	695
	MCB Surgeon Mentoring - Togo Cataract Surgery Teaching Institute Investment	5	695

Mercy Ships Canada

Corporate Structure and Governance

Mercy Ships Canada is part of the global family of charities under the Mercy Ships banner. It is one of 16 National Offices which supports the work and are affiliated with the international charity, Mercy Ships.

The charitable purposes of Mercy Ships Canada is to alleviate the suffering of the poor, regardless of race, gender or religious background in developing nations around the world, following the model of Jesus, by mobilizing people and resources from across Canada to carry out programs and projects to develop and promote public health.

Mercy Ships Canada is Imagine Canada accredited which demonstrates our excellence and leadership in five key areas of operation: Board governance, financial accountability and transparency, fundraising, staff management and volunteer involvement.

Board and Management Roles

The Mercy Ships Canada Board of Directors is legally responsible for the overall control of the charity and for ensuring that it is properly managed.

The Board's principal roles are:

- Setting the vision and maintaining high standards of stewardship and values.
- Approving the mission, strategies, high-level policies and business plans.
- Appointing and overseeing the Executive Director.
- Monitoring performance and risk management.
- Reporting performance with integrity and transparency.
- Ensuring compliance with Canadian law.
- Managing its governance processes.
- Adding value by advising management.
- Representing the interests of Mercy Ships Canada's stakeholders.

The Board delegates responsibility for management to the Executive Director, who is responsible for developing the organization's plans, policies and processes, following Board advice and approval.

Board Composition

The Board is comprised of independent, unremunerated, non-executive Directors, who have a broad range of skills and experience. In 2021, the Board met 7 times and no new Directors joined the organization. Director recruitment, onboarding and training are overseen by the Executive Committee with support from management. As the Board continues to grow, the Directors are committed to the highest standards and encourages applications from a diverse range of individuals.

Board Committee

The Board has three committees:

- Executive
- Finance and Compliance
- Volunteer Crew and Human Resources

Board committees are established under formal terms of reference, which are reviewed annually. The committees include Directors with relevant skills and experience. The Board does not delegate major decision-making powers to the committees.

Board Expenses

No fees or remuneration are paid for serving as a Director of Mercy Ships Canada. Reasonable expenses incurred in the course of acting as a Director are reimbursed. This includes travel and accommodation expenses required to attend meetings as well as training and orientation expenses. Every effort is made to ensure costs are at a minimum.



Image: Canadian volunteers in front of the Africa Mercy

Financial Review 2022

Introduction

The financial summary below is based on the data contained in our 2022 Financial Statements audited by KPMG and available on the Mercy Ships Canada (MSCA) website: <https://mercyships.ca/en/impact-stories/annual-reports>

Revenue

Most of our donations come from regular people who generously donate whatever they can, as small or as large as that amount may be. Money donated to Mercy Ships Canada comes from many areas of the community, including individuals including wills and bequests, organisations such as churches and foundations. Canadian volunteers who serve with Mercy Ships also engage in fundraising efforts on behalf of MSCA.

Mercy Ships Canada had a successful year in terms of revenue. Total revenue for the year increased by 66 percent to \$4,790,649 (2021: \$2,886,291). Mercy Ships Canada’s cash revenue of \$3,082,496 was primarily driven by donations from individuals (49 percent), foundations (29 percent, third-party fundraisers (eight percent), corporations (four percent) and other (ten percent). The value of the contributed services of volunteers was \$1,688,800.



Expenses

Mercy Ships Canada expenditures totalled \$4,502,410 (2021: \$2,560,267). Charitable programs expenditures, which included contributed services utilized, were 85 percent (2021: 78 percent), representing an increase in charitable programs expenditure of seven percent. Expenditures for fundraising accounted for 11 percent and administration four percent.

Funds

At the end of 2022, total cash and cash equivalents was at \$2,047,909 (2021: \$1,846,104). There were no restricted funds that were subject to conditions imposed by donors.

Going Concern

We have set out above a review of the financial performance during the financial year and our cash and cash equivalents position at the year-end. We have adequate financial resources and have the structures in place to manage the business risks. In addition, our budgeting and forecasting processes have taken into consideration the current economic climate and its potential impact on both our various sources of revenue and expenditure. We have a reasonable expectation that we have adequate resources and control mechanisms to continue in operational existence for the foreseeable future. Further, we believe that there are no material uncertainties that may cast doubt on the charity’s ability to continue as a going concern. Therefore, we continue to adopt the going concern basis of accounting in preparing the annual financial statements.

Risk Management

The risks that the charity faces are detailed in an enterprise risk register, which the members of the Finance and Compliance Committee review on a quarterly basis. The risk register considered the Financial Perspective related to revenue, donor growth and costs efficiency. The Stakeholder Perspective addressed volunteer and donor issues. The Learning and Growth Perspective addressed risks related to human resources and organizational development. The Internal Business Process Perspective addressed compliance and operational excellence considerations.

The Finance and Compliance Committee oversees our banking arrangements with a focus on liquidity and the preservation of capital. Fundraising efforts are focused on a range of segments and levels to reduce the potential impact of any sector-wide downturn.

Mercy Ships communicates operating plans to Mercy Ships Canada regularly to help ensure alignment of activities related to volunteer crew staffing needs and programmatic activities. There is a Joint Programs Committee comprised of Directors of Mercy Ships Canada, the Executive Director of Mercy Ships Canada, and senior staff of Mercy Ships, who screen suitable projects and ensure funding sources for various projects are available.

The Directors of Mercy Ships Canada believe that appropriate policies to mitigate lower-level day-to-day risks have been adopted. They also believe that key financial systems are in place and appropriate internal controls are maintained for an organization of the charity’s size and complexity. The overall financial and operational control environment is regularly review by the Executive Director and the Director, Programs, Risk & Compliance with reports provided to the Finance and Compliance Committee.

Mercy Ships Canada Board of Directors

Chair
Alain-Michel Sékula

Vice Chair, Chair of the Joint Programs Committee
Bruce Murray

Secretary and Member of the Volunteer Crew & Human Resource Committee
Armin Tchakmakchiane

Treasurer and Member of the Finance and Compliance Committee
Lynda Beaudin

Chair, Finance & Compliance Committee
Claire Lewis

Chair, Volunteer Crew & Human Resource Committee
Lucien Bradet

Past Chair
John Treleaven

Image: Volunteers wave a Canadian flag upon arrival in Senegal.

Mercy Ships National Offices

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Since 1978:

- 2.86 million+** Direct beneficiaries
- 111,850+** Life-changing surgical procedures
- 530,630+** Dental procedures
- 52,870+** Professionals trained in their field of expertise
- 6,730+** Healthcare professionals trained to train others



Image: Coumba, after surgery to release a burn contracture on her hand and arm.

The work of Mercy Ships is only made possible by the generosity of supporters and volunteers.

Help Mercy Ships continue to provide life-changing surgeries and change the face of healthcare in African nations.

How you can help



Donate

Make a regular monthly donation to Mercy Ships. Visit mercyships.ca/donation



Nominate us

Nominate Mercy Ships as Charity of the Year partner in your workplace, school, church, or organization.



Come along

Attend or hold your own event or form a fundraising group in your local community, church, club, or workplace. Email msca@mercyships.ca



Remember us

Remember Mercy Ships in your will. Visit mercyships.ca/legacy-giving



Volunteer

Volunteer on board a Mercy Ship or contact us at mercyships.ca/volunteer



Follow us

Stay in touch and find out what you can do to help: [@mercyshipsca](https://twitter.com/mercyshipsca)

Find out more

mercyships.ca



Image: Carolina S Salazar Tobon, HOPE Center Facilitator, with patients.

bringing hope
and healing



Mercy Ships Canada

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A p e d i x



2022 Mercy Ships Canada
Annual Report

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1. The Relationship Between Mercy Ships Canada and Mercy Ships

Mercy Ships Canada (MSCA) is one of 16 National Offices affiliated with and supports the work of the international charity Mercy Ships. The programs of Mercy Ships provide free direct medical services and medical capacity building and foster the development of health care systems in developing countries, mainly in Sub-Saharan Africa.

Mercy Ships operates the *Africa Mercy* and the *Global Mercy* - the world's largest civilian hospital ship. The *Global Mercy* is scheduled for its inaugural field service in 2023. Founded in 1989, Mercy Ships Canada is a Canadian charity that mobilizes Canadians to volunteer onboard the hospital vessels of Mercy Ships and raises funds to support the program work of Mercy Ships.

Mercy Ships uses its hospital ships primarily for providing direct medical services, such as surgery and medical capacity building. Also, Mercy Ships supports the provision of direct medical services, medical capacity building and the development of local healthcare systems in the countries we serve. Direct medical service occurs through partnerships with other organizations when hospital ships are not in port. Our ships are docked at a local port during a typical 10-month field service when serving in a developing nation.

The consolidated Financial Statements of Mercy Ships provide a breakdown of Program Expenses related to Ship and Field Operations and Supporting Activities related to General and Administrative and Fundraising Expenses. Our ship-based hospitals are used for providing direct medical services, medical capacity building and volunteers contribute to health system development. Since the same physical facilities and volunteer crew serve multiple programs objectives simultaneously, Mercy Ships does not provide a disaggregated summary of expenses that are specifically allocating costs to each of the main programs service areas, at this time.

Mercy Ships Canada in this report provides some breakdown of our participation in the programs work of Mercy Ships. In part, because of a Joint Programs Agreement between Mercy Ships Canada and Mercy Ships that was entered into on January 1, 2017. Mercy Ships Canada and Mercy Ships agree that any resources committed by them within the scope of the agreement shall be disbursed only for charitable programs.

The Mercy Ships Canada-Mercy Ships Joint Programs Committee was comprised of the following members at the end of 2022:

- Bruce Murray, Board member, Mercy Ships Canada, (Committee Chair)
- Lucien Bradet, Board member, Mercy Ships Canada,
- Darryl Anderson, Executive Director, Mercy Ships Canada,
- Barney Goodall, Senior Director of Global Finance, Mercy Ships
- Heather Peterson, Interim Director of Global Recruitment, Mercy Ships

Under the direction of the Canadian Board and pursuant to the provisions of the Joint Programs Agreement, the Canadian National Office staff is involved in the recruiting, reviewing, screening,

recommending for use, approving and, if approved, training volunteers, and then supervising, monitoring, and overseeing the said approved volunteers' work in the approved programs throughout their authorized terms of service.

Mercy Ships is a member of the Evangelical Council for Financial Accountability (ECFA) which provides accreditation to Christian non-profit organizations that faithfully demonstrate compliance with established standards for financial accountability, fundraising, and Board governance. The following web link can be used to access Mercy Ships information: <https://www.ecfa.org/>.

Mercy Ships Canada is Imagine Canada accredited which demonstrates our excellence and leadership in five key areas: Board governance, financial accountability and transparency, fundraising, staff management and volunteer involvement.

Our Financial Statements and Annual Reports are available on our website at: <https://mercyships.ca/en/impact-stories/annual-reports/>.

2. Mercy Ships Philosophy of Service and Programmatic Pillars

The Mercy Ships philosophy of service inherently recognizes that the social determinants of health are complex. By following the 2000-year-old model of Jesus, we celebrate and embrace the dignity of all persons.

We know that health outcomes are intertwined with cultural, socioeconomic, political, and historical factors that global health and development decision-making, should not ignore. Therefore, coming alongside other people to provide free health care and undertake medical capacity building initiatives helps address equity issues and is at the forefront of our humanitarian work.

Mercy Ships Philosophy of Service

The philosophy of service illustrates how we put into practice our core values, mission, and vision.

Who Is Mercy Ships?

Central to who we are is our commitment to follow the way of Jesus who inspires and informs our calling to be a tangible expression of love. It is our aim, therefore, to be a catalyst for transformational development, which we understand to be a process by which we and others move towards wholeness of life with dignity and hope.

Fundamental Issue

Many of our global neighbours experience a complex system of disempowerment, often combined with broken relationships, that leads to being marginalized or even excluded from society. These marginalized and excluded neighbours and the communities in which they live, lack hope, which is foundational to the process of transformation.

Mercy Ships Response

Our programs incorporate elements that demonstrate and communicate the mission of God revealed in the gospel stories of Jesus. For example, the blind see, the lame walk, those with diseases are restored to wholeness, the excluded are reintegrated into community, and the good news of the way of God is communicated to the poor.

How Does Mercy Ships Understand Poverty?

We understand poverty, defined as the absence of “shalom”, to be fundamentally relational - a manifestation of a broken world system separated from its creator. Shalom denotes a way of being that centers around a harmonious ecosystem rooted in relationship with God, self, others, and creation.

Fundamental Issue

Dysfunctional or corrupt systems and structural injustice at various levels of society constitute a primary catalyst for conditions of poverty in a family, community, city, or nation. Poverty cannot be fully explained without consideration given to underlying issues associated with a distorted worldview that leads away from the shalom in God’s kingdom.

Mercy Ships Response

We endeavor to promote unity among all individuals, communities, and organizations. This unity is not one of social or cultural conformity, but the "I am because we are" concept of *Ubuntu*, which affirms the intrinsic worth of every person, our mutual interdependence, and the value of working together for the common good.

What Are The Primary Services Mercy Ships Utilizes?

Mercy Ships uses hospital ships to transform lives and serve nations. We do this by providing surgical care as a direct means to repair or restore the capacity for physical well-being to individuals. We also work to strengthen the host nation's health systems through medical capacity building and health advocacy.

Fundamental Issue

The barriers to delivery of health care services may include an inadequate economic capacity or inadequate healthcare infrastructure. Both are closely tied to the issues that result from poverty. In low- and middle-income countries, nine out of ten people cannot access even the most basic surgical services.

Mercy Ships Response

We provide corrective surgical treatment and dentistry, which decreases disability, saves lives, and increases social and economic inclusion. Our partnership with the government of the host nation provides us with unique access to be able to influence systemic issues in the local health care delivery system and advocate for the improvement of health care nation-wide. We invest

in strengthening local health care systems through medical capacity building projects, such as training courses, mentoring opportunities, and targeted infrastructure projects, including quality improvement interventions.

Three Programmatic Pillars: Direct Medical Services (DMS), Medical Capacity Building (MCB) and Health Systems Relationship Development

Mercy Ships reviewed the strategic direction of the organization’s programmatic work in 2022. A new emphasis was given to the provision of direct medical services and education, training and advocacy which will lead to changes in 2023 and beyond. Thus, for the purposes of the 2022 Annual Report the information below reflects the three-pillar approach that was in effect in 2022.

Pillar #1 Direct Medical Services (DMS)

Our Direct Medical Services decrease the burden of unmet surgical need. We partner with each host nation’s Ministry of Health to offer free surgeries and post-operative care through our state-of-the-art hospital ships.

The major direct medical services and key performance indicators measuring impact are provided in tables on the following pages.

Women’s Health Background

Obstetric fistula, a major cause of maternal mortality and obstructed labor, is a preventable and mostly treatable condition that primarily affects young women from poor backgrounds. The United Nations Population Fund (UNFPA) estimates that every year between 50,000 and 100,000 women sustain an obstetric fistula during childbirth. The World Health Organization (WHO) estimates that more than two million women are currently living with obstetric fistulas, of which a large number are in sub-Saharan Africa. Obstructed labor and obstetric fistula account for six percent of maternal deaths worldwide.

Mercy Ships’ Goal

Mercy Ships aims to reduce the effects of fistula in women in Africa by providing specialized medical treatment and training.

Women’s Health		
Need	Typical Procedures	Activity KPI
Support and medical care for women who have suffered childbirth injuries.	Specialized surgeries such as obstetric fistula and other gynecological surgeries.	Number of surgical procedures performed per year.
<p>Impact Key Performance Indicator (KPI): Number of patients served per year.</p> <p>Mercy Ships provides specialized surgery, continuing the recovery process through education and social activities. An obstetric fistula is formed when the pressure from persistent contractions in prolonged labour cause a lack of blood flow to soft tissues caught between the</p>		

baby's head and the mother's pelvis. Without adequate blood flow the tissues die, creating a fistula between the birth canal and bladder and/or rectum.

Poverty and a lack of timely access to high-quality maternal healthcare, including delivery by caesarean section, are the primary indirect causes of obstetric fistula around the world. Mercy Ships performs free fistula repair operations for affected women on board its hospital ships. The healed patients are given new dresses and headaddresses as symbols of their restored life.

To help build the capacity of healthcare systems in developing nations to address the condition of fistula, Mercy Ships networks with and provides training for local and international healthcare professionals, including surgeons, nurses, and traditional birth attendants.

The impact of providing obstetric fistula and other gynecological surgeries results in the patient's overall quality of life improving. Living with a health condition means women can be ostracized from their families and communities. When people live in fear, shame, and isolation, their lives get stripped away because they cannot access healthcare. After repair, fertility and pregnancy outcomes may also be positively impacted. Access to proper medical attention affects more than just someone's health.

Mercy Ships has partnered with Freedom from Fistula Foundation to establish obstetric fistula clinics in Sierra Leone and Madagascar. Freedom from Fistula continue to operate these clinics so that women can access safe, affordable fistula surgery between ship visits.

Learn More: <https://mercyships.ca/en/fistula-womens-health-program/>

Midwife Video: <https://www.facebook.com/mercyshipscanada/videos/490488502372827>

Research link on long-term outcomes for women in Africa after fistula repair:
<https://bmcpregnancychildbirth.biomedcentral.com/articles/10.1186/s12884-015-0755-1>

Why is the Surgical Need in Low- and Middle-Income Countries So Extreme?

Across the world, there is a need for general surgeries to address conditions like goiters and hernias. For those in the poorest countries, the lack of access to safe, timely, affordable surgery means patients present with more severe and disabling diseases. These patients are often unable to work or attend school, may be rejected by their families and communities, and face subsequent worsening poverty.

For many people in the nations Mercy Ships serves, surgery — if available — is often located in urban areas and is cost-prohibitive. According to the World Health Organization, there is a critical shortage of all types of medical providers in low- and middle-income countries. Because of these limitations, general surgical needs such as hernias and goiters plague this region's adult and pediatric populations.

143 million additional surgical procedures are needed each year to save lives and prevent disability. This need is greatest in the poorest regions of the world, including Western, Eastern,

and Central sub-Saharan Africa, and South and Southeast Asia. According to Disease Control Priorities in Developing Countries, third edition, an estimated 1.5 million deaths per year could be prevented by making basic surgical procedures accessible.

In the absence of surgical care, case fatality rates are high for common, easily treatable conditions including appendicitis, hernia, fractures, obstructed labor, and congenital anomalies.

Mercy Ships’ Goal

In partnership with the host countries, Mercy Ships seeks to relieve the burden of disease and affliction among the poor and outcast by providing specialized, corrective surgical interventions for conditions such as hernias and goiters through the General Surgery program.

Services

Mercy Ships works in partnership with local and national governments, as well as with a variety of partners and physicians in the country, to provide specialized surgeries that will facilitate life-changing transformation. Mercy Ships has performed more than 108,000 lifesaving or life-changing surgical procedures, including obstetric fistula repair. Patients recuperate under world-class care in the ships’ hospital ward and outpatient care in the Hope Centre, where they are also provided with opportunities for moral and spiritual support.

Maxillofacial Surgeries		
Need	Typical Procedures	Activity KPI
Deformities caused by physical conditions such as tumours, cleft lips, cleft plate and noma.	Corrective and reconstructive surgeries to relieve deformities.	Number of surgical procedures performed per year.
<p>Impact Key Performance Indicator (KPI): Number of patients served per year.</p> <p>The conditions treated by Mercy Ships specialist surgeons are seen all over the world, but later diagnosis in host countries means patients have more severe and debilitating diseases.</p> <p>Cleft-lip and palate is the most common facial birth defect. Noma, or cancrumoris, is a rapidly progressive and often fatal infection affecting the mouth and face. Associated with poor sanitation and malnutrition, noma is almost exclusively seen in the poorest countries in the world. Predominantly affecting children aged 2-6 years, the disease can spread to the nose, lips, and cheeks. Though both preventable and treatable, thousands die from the condition each year. Those who survive are often severely disfigured and live with life-changing and threatening disfigurements.</p> <p>Getting the necessary maxillofacial surgical care and attention means people can work and take care of their families. For children, the result of surgery means that they can more naturally develop the eating and language skills necessary to grow. Without the surgery, people living with debilitating illnesses or deformities face real struggles and hardships that impact their daily lives.</p>		

Learn More: <https://mercyships.ca/en/maxillofacial-surgery>

Patient Story: Dreams of Being a Doctor: <https://mercyships.ca/en/dreams-of-being-a-doctor/>

Research link on access to oral and maxillofacial surgery in Sub-Saharan African countries:

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8449080>

Plastic Reconstructive Surgery		
Need	Typical Procedures	Activity KPI
Birth defects, burns and illness often cause deformities.	Corrective surgeries for burn-scar, contractures, benign tumours, chronic ulcers, combined fingers etc.	Number of surgical procedures performed per year.
<p>Impact Key Performance Indicator (KPI): Number of patients served per year.</p> <p>Across the world, there is a need for reconstructive plastic surgeries to address conditions like burn contractures, tumours, and conjoined fingers and toes. Burns are the fifth most common cause of non-fatal childhood injuries. Children under 5 years of age in the WHO African Region have over two times the incidence of burn deaths than children under five years of age worldwide. Benign skin growths such as cysts and lipomas begin as small growths but without treatment, can become disfiguring and debilitating. Webbing of the digits, or syndactyly, is caused by failure of the hand to develop normally during the first few weeks of pregnancy. This “webbing” is the most common abnormality of the newborn hand.</p> <p>Plastic reconstructive surgery helps address conditions that if treated in the early stages do not become life-threatening. The consequence of not having the surgery for many is a lifetime of pain, disability, rejection, and sometimes even death.</p> <p>Learn More: https://mercyships.ca/en/plastic-reconstructive-surgery</p> <p>Patient Story: Going the Extra Mile: https://mercyships.ca/en/going-the-extra-mile</p> <p>Research link on Sub-specialization in plastic surgery in Sub-Saharan Africa, capacities, gaps and opportunities: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4286228</p>		

Orthopaedic Surgeries		
Need	Typical Procedures	Activity KPI
Musculoskeletal conditions, neglected orthopedic trauma and joint disease.	Orthopaedic surgeries and treatments. Ponseti casting – non-invasive clubfoot correction and surgical interventions.	Number of surgical procedures performed per year.
<p>Impact Key Performance Indicator (KPI): Number of patients served per year.</p>		

Mercy Ships Orthopaedic Surgery focuses on pediatrics because the bone malleability in children makes recovery more effective than in adult patients. Although the primary focus of the Orthopaedic Surgery Program remains pediatric orthopaedics, Mercy Ships does perform a limited range of procedures on young adults up to around 30 years of age. Most patients require rehabilitation to facilitate recovery after surgery. For these patients, Mercy Ships offers physical therapy to improve range of motion, flexibility, and general mobility. These services are offered to orthopaedic and all other surgical patients requiring these services.

Mercy Ships offers treatment and training programs in a nonsurgical method to correct clubfoot in children under the age of two. Through a series of cast changes, a minor procedure to lengthen the Achilles tendon, and braces, clubfoot is corrected. Mercy Ships is committed not only to providing the treatment, but also to training local healthcare providers in this technique.

Orthopaedic surgeries and treatments allow patients to participate more fully in family and community life because they can become outcasts due to a lack of understanding of what caused the medical condition. When children are sick or not able to walk properly, they may not be able to attend school. However, access to the medical attention they need means an opportunity to become educated.

Learn More: <https://mercyships.ca/en/orthopaedic-program>

Patient Story: Double the Trouble, Twice the Joy: <https://mercyships.ca/en/double-the-trouble-twice-the-joy/>

Research link on orthopaedics in the developing world:

<https://online.boneandjoint.org.uk/doi/full/10.1302/2048-0105.12.360020>

Palliative Care		
Need	Typical Procedures	Activity KPI
Life-threatening illness.	An approach that improves the quality of life of patients and their families.	Number of patients served per year.
<p>Impact Key Performance Indicator (KPI): Number of patients served per year.</p> <p>Palliative care improves the quality of life for patients with a life-threatening illness and for their families. It aims to relieve suffering by treating pain and addressing other physical, psychological, social, and spiritual needs. Often, people who request surgical or medical help from Mercy Ships are unable to receive assistance because of inoperable and terminal conditions. Many of these people are physically suffering from incurable diseases as well as dealing with rejection, misunderstanding, and fear by their friends, families, and communities. There are few, if any, groups within the community that provide counselling, support, and end-of-life care to grieving families.</p>		

The Mercy Ships Palliative Care Team desires to compassionately serve those who cannot be helped by the organization’s surgical professionals. Physical, psychological, social, and spiritual needs are addressed by the team’s medical and counselling staff.

Learn More: <https://mercyships.ca/en/palliative-care>

Research link on palliative care in Africa: <https://www.africanpalliativecare.org>

General Surgery		
Need	Typical Procedures	Activity KPI
Neglected trauma, disease, and congenital conditions.	General surgeries such as hernias, goiters etc.	Number of surgical procedures performed per year.
<p>Impact Key Performance Indicator (KPI): Number of patients served per year.</p> <p>General surgeries allow patients to participate more fully in family and community life. Communities suffer when their members are unable to contribute due to illness. Access to medical care can strengthen and enable communities to grow and sustain themselves.</p> <p>Learn More: https://mercyships.ca/en/general-surgery</p> <p>Video: https://www.facebook.com/mercyshipscanada/videos/930019294205517</p> <p>Research link on what factors shape surgical access in West Africa: https://bmjopen.bmj.com/content/11/3/e042402</p>		

Dental/Oral Health Background

Severe periodontal (gum) disease, which may result in tooth loss, was estimated to be the 11th most prevalent disease globally. Oral diseases affected half of the world’s population (3.58 billion people) with dental caries (tooth decay) in permanent teeth being the most prevalent condition assessed. Oral diseases are the most common non-communicable diseases (NCDs) and affect people throughout their lifetime, causing pain, discomfort, disfigurement and even death.

Mercy Ships’ Goal

Mercy Ships aims to prevent and reduce the effects of a lack of oral healthcare by providing dental treatment and dental hygiene education and training.

Dental & Oral Health		
Need	Typical Procedures	Activity KPI
Prevent and reduce the effects of a lack of oral healthcare.	Provide dental treatment and dental hygiene services.	Number of dental procedures performed per year.
<p>Impact Key Performance Indicator (KPI): Number of patients served per year.</p> <p>Since 1978, Mercy Ships has provided over 521,000 dental treatments/procedures to more than 197,000 patients. The most common oral diseases are dental cavities and periodontal</p>		

(gum) disease, affecting all people regardless of socio-economic status. This situation is further exacerbated by limited access to dental care in low-resource settings. As a result, thousands of people suffer from dental pain for weeks, months, or years.

Mercy Ships conducts free dental clinics, providing relief from infected or rotting teeth, performing extractions, and inserting fillings. Mercy Ships works to improve oral health in developing countries through dental hygiene education and the training of local health personnel. Mercy Ships, where possible, works alongside local dentists. In doing so, Mercy Ships facilitates an exchange of understanding and expertise between dentists of different cultures who are working within the same discipline.

Access to free dental and oral health services helps patients overcome the fact that for many people, medical attention is just out of reach. It’s either not financially possible or available. The stark reality is that many people are living with treatable health conditions but because they cannot get treatments, or surgeries, they live in pain with a condition that can contribute to a more serious health need.

Learn More: <https://mercyships.ca/en/oral-health>

Video: <https://www.facebook.com/mercyshipscanada/videos/770105413803268>

Research link on review of dentistry in West Africa – challenges and prospects:
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7861189>

Ophthalmic Issues Background

Eye conditions that are treatable in their early stages in high-income countries are frequently left untreated in the poorest parts of the world, often leading to impairment or blindness. At present at least 2.2 billion people around the world have a vision impairment, of whom at least 1 billion have a vision impairment that could have been prevented or is yet to be addressed.

36 million people are blind worldwide.

60 percent of the world’s blind live in sub-Saharan Africa, China, and India.

50 percent of the world’s blind suffer from cataracts.

Eye Care		
Need	Typical Procedures	Activity KPI
Preventable blindness.	Ophthalmic surgeries and eye care. Surgical intervention to reduce blindness caused by cataracts.	Number of procedures performed per year.
<p>Impact Key Performance Indicator (KPI): Number of patients served per year.</p> <p>Since 1978, Mercy Ships has provided over 55,000 life-changing ophthalmic surgical procedures and performed more than 381,000 eye consultations. Mercy Ships ophthalmic</p>		

surgeons perform free, vital eye operations to restore patients' sight and improve their quality of life. Eye conditions are often treatable in their early stages but lack of access to safe, affordable care leads to visual impairment and blindness.

Most blindness is curable and could be avoided by prevention and early treatment. Blind people in the countries that Mercy Ships partners with are often ostracized and considered outcasts in their communities. Blindness in children affects their psychomotor and social development and most blind children are unable to go to school. Access to free eye surgeries helps patients overcome preventable blindness.

The stark reality is that many people are living with treatable health conditions but because they cannot get treatments, or surgeries, they are going blind and are not able to be fully educated, be part of family or community life or work.

Mercy Ships cataract operations are performed using the latest methods and technology. Mercy Ships eye surgeons perform procedures to correct pterygium (growths on the cornea of the eye), strabismus (crossed eyes), eyelid deformities, and replace painful or disfiguring blind eyes with prostheses. In addition to the surgical focus, Mercy Ships provides training opportunities for local surgeons and eye care professionals to help build the in-country capacity to provide eye care services.

Learn More: <https://mercyships.ca/en/eye-care>

Video: Nearly everyone will experience eye health issues in their lifetime.
<https://www.facebook.com/221898276380/videos/1793146587539629>

Research link on facing the crises in human resources for eye health in Sub-Saharan Africa:
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5820633>

Pillar #2 Medical Capacity Building (MCB)

Our Medical Capacity Building programs improve patient outcomes by supporting surgical systems to become more effective, efficient, and responsive. By strengthening the capacities of the surgical system, we can sustainably improve the quality of life for people in need. We align with each host nation's goals to focus on health workforce capacity building, international best practice, quality improvement processes, infrastructure improvements, and more. Our MCB programs also include mental health and palliative care.

Medical Capacity Building		
Need	Typical Activities	Activity KPI
Simply increasing the number of surgeries is not sufficient; enhancing quality of care is critical as well. Training	Carrying out and overseeing the training of health care professionals.	Number of health care professionals that participated in the training and capacity

<p>professionals to administer patient-centered services, using simple techniques and processes that save lives is essential to meeting the goal of improved surgical care.</p>	<p>Educating and instructing the public on the prevention of, and curative measures for health problems. Professionals we train include the following: surgeons, nurses, anesthesia providers, sterile processing technicians, surgical support, medical leaders, mental health, and other health care or social work.</p>	<p>building activities each year.</p>
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Impact Key Performance Indicator (KPI): Number of participants trained.

Mercy Ships works with partners and stakeholders to develop capacity building projects that improve the quality of services across an entire hospital setting, from strengthening technical skills and human capital, to improving working conditions and quality of care. There are many impacts when countries cannot offer all the medical care needed. Medical capacity building, education, and training, strengthens a nation’s health delivery system and can help address the challenges.

Mercy Ships healthcare training programs aim to enhance the standards of care within the surgical ecosystem in partner hospitals or other healthcare institutions. With this objective in mind, the organization has developed practical and relevant healthcare training projects that share knowledge, skills, and professionalism to each participant. These training opportunities include structured observation, courses, and mentoring.

Structured observation sessions allow local healthcare professionals to experience a high-quality, patient-oriented hospital on the *Africa Mercy* and the *Global Mercy*. Courses teach specific skills and information on improving standards of care and personal medical practices. Mercy Ships courses utilize a combination of lectures, simulations, and workshops, often in partnership with other internationally renowned organizations.

Mentoring projects encourages a personal relationship and trust between the project facilitator and the participant, leading to targeted, in-depth clinical teaching for individuals. When possible, Mercy Ships offers a combination of mentoring and courses to various healthcare workers in a particular hospital or specialty unit (for example, maxillofacial surgeon, anesthesia provider, OR, and ward nurses), creating a Partnership Unit Mentoring Program (PUMP). PUMPs encourage an even greater degree of teamwork, communication, and attention to process measures. This serves to improve standards of care and patient safety.

Learn More: <https://mercyships.ca/en/training-capacity-building>

Video: <https://www.facebook.com/mercyshipsCanada/videos/1074223956324862>

Pillar #3 Health Systems Relationship Development

Our activities support national and local health systems to better understand and respond to the surgical needs of their populations long-term. By partnering with our host nations, we can collectively improve quality of life and reduce unmet surgical needs. We collaborate with key decision-makers in host nations to identify areas of need within the surgical care systems and implement policy and practice changes to encourage access to safe, affordable, and timely surgery.

Health Systems Relationship Development		
Need	Typical Activities	Activity KPI
<p>Mercy Ships works with host nations to strengthen the local healthcare system, while serving the dire and immediate needs of the host country.</p>	<p>Conducting and overseeing infrastructure and other related construction programs, including but not limited to:</p> <p>(1) Renovation of facilities in support of direct medical services.</p> <p>(2) Renovations at partnering hospitals and other health care facilities in support of medical training programs.</p> <p>(3) Construction of land-based health care or related facilities.</p>	<p>Project specific.</p>
	<p>Delivering, supervising, repairing, managing, and overseeing any equipment, supplies, vehicles, food, and other necessities of life and/or any related items required from time to time to operate and maintain the hospital ships and/or to conduct any of the programs.</p>	
	<p>Distributing medical equipment donations and other related supplies for use in health care training and/or infrastructure and related construction programs.</p>	
<p>Impact Key Performance Indicator (KPI): Project specific.</p> <p>Mercy Ships uses a collaborative approach to create a customized partnership with every nation we are invited to serve.</p>		

Healthcare is often difficult to access for those living in low- and middle-income countries. In addition to the cost of services and limited healthcare staff, the lack of high-quality infrastructure in many hospitals and clinics further hampers access to quality care. Facilities often lack the requisite access to water, electrical services, and equipment needed to provide basic hygienic care in hospitals. By refurbishing and redeveloping healthcare facilities alongside Mercy Ships training projects, Mercy Ships can partner with host countries to support their improved healthcare.

Video: <https://www.facebook.com/mercyshipsCanada/videos/677608086231696>

How We Work

To implement our philosophy of service, Mercy Ships takes a phased approach consisting of the following steps:

- **Phase One:** Protocol signing with host nation.
- **Phase Two:** Assessing the need.
- **Phase Three:** Ship deployment and/or medical capacity building.
- **Phase Four:** Medical capacity building, training, and support.
- **Phase Five:** Impact evaluation.

3. Charitable Purposes of Mercy Ships Canada

The charitable purposes of Mercy Ships Canada are to alleviate the suffering of the poor, regardless of race, gender, or religious background in developing nations around the world, following the model of Jesus, by mobilizing people and resources from across Canada to carry out programs and projects to develop and promote public health.

We aim to develop and promote public health by:

Direct Medical Services (DMS)

- Operating one or more hospital ships.
- Conducting medical and health care programs ashore in related facilities.
- Providing medical, surgical, eye, dental, health and related support services.
- Acquiring and distributing, medicine, medical equipment and supplies, fuel, tools, and any related materials necessary to deliver basic care for the hospital ships, land-based programs, and related facilities.

Medical Capacity Building (MCB)

- Offering specialized training to local health care professionals.
- Advancing education through the provision of medical and surgical training to local health professionals and medical leadership development.

Health Systems Relationship Development

- Providing construction and renovation services to local health care infrastructure, including hospitals, clinics, and medical training facilities to improve surgical capabilities.

- Reducing malnutrition and increasing food security by improving skills and practices in agriculture and horticulture.

A primary means in which we fulfill our charitable purpose are by mobilizing Canadian volunteer crew members to serve with Mercy Ships and involving Mercy Ships Canada staff with initiatives and funding projects.

4. Sustainable Development and the Environment

How is Mercy Ships connected to the SDGs? (SDG #3 Good Health and Well-Being)

The 17 Sustainable Development Goals (SDGs) were created by the United Nations as a universal call to end poverty, protect the planet, and ensure that by 2030, all people enjoy peace and prosperity. Mercy Ships activities support and align with the SDGs, with a particular emphasis on SDG 3: Good Health and Well-Being. We believe that health is at the center of these goals. Without good health, other vital pieces – like quality education, economic growth, and clean energy – are not truly sustainable.

As surgical and anesthesia specialists in eight areas – plastic reconstructive, maxillofacial, pediatric orthopedic surgery, general surgery, pediatric general surgery, women’s health (including obstetric fistula), ophthalmic, and dental – our programs focus on attaining the

Environment

Mercy Ships strives for excellence in sustainability in all areas of its operations. As such, the below initiatives are in place as part of the organization’s plan for environmental sustainability:

Mercy Ships complies with many international standards, one of which is the International Convention for the Prevention of Pollution from Ships Maritime Pollution (MARPOL 73-78) standards. This is the main international convention covering prevention of pollution of the marine environment by ships – and regulates what the ships do to minimize waste, oil, sewage, garbage, and air pollution. Mercy Ships worked with biotech anti-fouling specialist company I-Tech AB to implement organic anti-fouling elements to the ship, reducing drag and improving engine efficiency and overall sailing performance.

The *Global Mercy* was built to minimize its ecological footprint where possible. Mercy Ships contracts skilled technicians from generator engine manufacturers to handle maintenance and repairs on board, ensuring the ship’s generator engines are operating at the highest levels of efficiency to reduce emissions. Mercy Ships exclusively uses clean fuels with low sulfur content to minimize our impact on the environment. Additionally, the ships also sail at low speeds between ports. To prevent the transfer of invasive species to countries and regions where the

ship travels and docks, a Ballast Water Treatment System (BWTS) was installed on the *Africa Mercy*.

All waste electrical and electronic equipment (WEEE) produced during a field service is properly stored onboard until it can be transported to Europe for treatment, recycling, and recovery. The *Africa Mercy* and the *Global Mercy* have waste converters onboard, which turns medical waste into sanitized dust.

5. Mercy Ships 2022 Impact Summary

Mercy Ships worked on the ground throughout Africa to provide life transforming training and treatment. Our 2022 Annual Report entitled **Celebrating Hope** provides a summary of the direct medical services provided along with the Medical Capacity Building training and mentoring, infrastructure projects, Partnership Unit Mentoring Program (PUMP), and equipment donations and investment projects across the continent. Our work also included multi-country eLearning opportunities and direct patient care designed to support and strengthen healthcare systems in the nations we serve.

The information in the Mercy Ships Canada 2022 Annual report is available at <https://mercyships.ca/en/impact-stories/annual-report/>. The purpose this Appendix is to provide supplemental insights.

What We Did – Direct Medical Services (DMS)

2,665 surgical procedures

9,465 dental procedures

1,826 basic oral health instructions

3,560 surgical and dental patients

Surgical

Surgical Procedures in the context of direct medical services refers to a medical service provided to a patient. During one surgery, there may be more than one surgical procedure, and this is where we capture that information. For example, orthopedic surgery on a patient suffering from windswept knees may require one surgical procedure on each knee (thus a total of two surgical procedures performed during one surgery). This would be counted as one patient, one surgery, two surgical procedures.

Age: Adult: 18 years and older and Child 17 years and younger - consistent with the WHO's definition.

Gender: 'Female' includes adult women, children, girls, and babies. 'Male' includes adult men, teen, children, boy and babies.

Dental

- Dental Patient Encounter - some individuals might be counted twice if they return for separate treatments.
- Dental Procedures - each procedure (i.e., extractions, white fillings, amalgam fillings, etc.) is counted and normally there are multiple dental procedures during one dental patient encounter.
- Unique Dental Patients - figure reflects the number of unique dental patients - not counting the same dental patient more than once.

Age: Adult: 18 years and older and Child 17 years and younger - consistent with the WHO's definition.

Direct Medical Services Demographic 2022

Mercy Ships Direct Medical Services, Surgical and Dental Patients			
Program Description	Female	Male	Total
Dental Care- Dental Campaign	110	136	246
Adult	81	106	187
Child	29	30	59
Gamal Dental Clinic	904	770	1,674
Adult	789	664	1,453
Child	115	106	221
Guinea Maxillofacial Surgery	9	27	36
Adult	6	19	25
Child	3	8	11
Niger Plastics Surgery	25	22	47
Adult	1	2	3
Child	24	20	44
Togo Cataract Surgery Campaign			
Adult	462	328	790
Togo Sight.org Partnership			
Adult	88	88	176
Togo Cataract Surgery Teaching Institute Investment			
Adult	341	250	591
Grand Total	1,939	1,621	3,560

What We Did – Medical Capacity Building (MCB)

Medical Capacity Building Program Demographic 2022

Mercy Ships Medical Capacity Building, Participant Hours of Training 2022			
Program Description	Female	Male	Total
Biomed Anesthesia Training	72	593	665
Biomedical Technician Courses	318	3,685	4,003
Biomedical Technician Mentoring	289	3,094	3,383
Dental Course	182	112	294
Dental Partner Unit Mentoring Program	17,037	25,630	42,667
Essential Surgical Skills - Training of Trainers	36	24	60
Essential Surgical Skills Courses	194	544	738
Leadership Development	1,466	1,725	3,190
Lifebox	849	707	1,591
MCB Mentoring	0	21	21
MCB Surgeon Mentoring	135	560	695
Mental Health	3,499	4,855	8,354
MSSI Nurse Training	3,247	712	3,957
MSSI Nurse Training - Training of Trainers	71	101	172
Neonatal Resuscitation Courses	791	157	948
Neonatal Resuscitation Courses - Training of Trainers	61	55	116
Nutritional Agriculture	40,329	83,419	123,749
Palliative Care	1,762	930	2,692
Palliative Care Courses	524	219	743
Physiotherapy Courses	972	701	1,672
Primary Trauma Care Courses	1,033	977	2,011
PUMP: Albert Royer Hospital	529	521	1,049
PUMP: Barthimee Hospital	201	118	319
Regional Anesthesia	18	62	80
SAFE Obstetric Anesthesia	2,355	2,233	4,587
SAFE Obstetric Anesthesia - Training of Trainers	48	39	87
SAFE Pediatric Anesthesia	915	883	1,798
SAFE Pediatrics Anesthesia - Training of Trainers	14	25	39
Safe Surgery	868	1,507	2,373
Specialized Medical Education Sponsorship	1,144	9,616	10,760
Sterile Processing	325	200	525
Ultrasound Courses	760	361	1,121
Grand Total	80,041	144,383	224,459

Medical Capacity Building by Country in 2022

In 2022, Mercy Ships was involved in medical capacity building initiatives on six countries in Africa. The data in the table below reveals that Senegal was the country with the largest number of MCB participants with 44 percent of the total number of participants. In comparison, Benin,

Guinea, and Senegal were the leading countries when measuring the number of participant hours of medical capacity building.

Mercy Ships Medical Capacity Building, Summary 2022				
Country	# of MCB Participants	Participant Hours	% Participants	Participant Hours
Senegal	1130	51,255	44%	23%
Liberia	998	42,434	39%	19%
Guinea	147	55,894	6%	25%
South Africa	132	3,948	5%	2%
Benin	88	68,561	3%	31%
Online	46	1,672	2%	1%
Togo	5	695	0%	0%
Total	2,546	224,459	100%	100%

Mercy Ships Medical Capacity Building, By Country 2022		
Benin	# of MCB Participants	Participant Hours
Essential Surgical Skills Courses	22	348
Nutritional Agriculture	46	68,213
Total	88	68,561

Guinea	# of MCB Participants	Participant Hours
Biomed Technical Mentoring	24	2,467
Dental Partner Unit Mentoring Program	110	42,667
Specialized Medical Education Sponsorship	13	10,760
Total	147	55,894

Liberia	# of MCB Participants	Participant Hours
Biomedical Technician Mentoring	15	418
Leaderships Development	264	3,190
Lifebox	172	1,591
Mental Health	201	5,694
MSSI Nurse Training	40	3,144
Neonatal Resuscitation Courses	62	315
Nutritional Agriculture	54	25,675
Primary Trauma Care Courses	43	1,422
SAFE Obstetric Anesthesia	81	575
Safe Surgery	66	410
Total	998	42,434

Online	# of MCB Participants	Participant Hours
Physiotherapy Courses	46	1672
Total	46	1,672

Senegal	# of MCB Participants	Participant Hours
Biomed Anesthesia Training	19	665
Biomedical Technician Courses	19	4,003
Biomedical Technician Mentoring	22	498
Dental Course	21	294
Essential Surgical Skills	29	390
Essential Surgical Skills - Training of Trainers	5	60
MCB Mentoring	1	21
Mental Health	69	2,661
MSSI Nurse Training	27	813
MSSI Nurse Training - Training of Trainers	5	172
Neonatal Resuscitation Courses	92	633
Neonatal Resuscitation Courses - Training of Trainers	15	116
Nutritional Agriculture	65	29,860
Palliative Care	218	2,692
Palliative Care Courses	43	743
Primary Trauma Care Courses	27	588
PUMP: Albert Royer Hospital	44	1,049
PUMP: Barthimee Hospital	48	319
Regional Anesthesia	37	80
SAFE Obstetric Anesthesia	54	1,475
SAFE Obstetric Anesthesia - Training of Trainers	6	39
SAFE Pediatrics Anesthesia	20	441
SAFE Pediatrics Anesthesia - Training of Trainers	7	35
Safe Surgery	173	1,964
Sterile Processing	21	525
Ultrasound Courses	43	1,121
Total	1,130	51,255

South Africa	# of MCB Participants	Participant Hours
SAFE Obstetric Anesthesia	97	2,540
SAFE Obstetric Anesthesia- Training of Trainers	7	48
SAFE Pediatric Anesthesia	26	1,356
SAFE Pediatric Anesthesia- Training of Trainers	2	4
Total	132	3,948

Togo	# of MCB Participants	Participant Hours
MCB Surgeon Mentoring	5	695
Total	5	695

Major Medical Capacity Building Program in 2022

Data in the table below illustrates that Mercy Ships medical capacity building initiatives in Nutrition Agriculture, Dental Partner Unit Mentoring Program and Specialized Medical Education Sponsorship were the top three programs when assessed by the impact measurement of participant hours.

Program Name	# MCB Participants	Participant Hours	% Program Participants
Mental Health	270	8,355	11%
Leadership Development	264	3,190	10%
SAFE Obstetric Anesthesia	232	4,589	9%
Palliative Care	238	2,692	9%
Lifebox	184	1,591	7%
Nutritional Agriculture	183	127,750	7%
Safe Surgery	170	2,374	7%
Neonatal Resuscitation	154	948	6%
Dental Partner Unit Mentoring	110	42,667	4%
SAFE Pediatrics Anesthesia	102	1,797	4%
Primary Trauma Care Courses	70	2,010	3%
MSSI Nurse Training	67	3,957	3%
Biomedical Technician Mentoring	61	3,383	2%
PUMP: Barthimee Hospital	48	319	2%
Physiotherapy Courses	46	1,672	2%
PUMP: Albert Royer Hospital	44	1,049	2%
Palliative Care Courses	43	743	2%
Ultrasound Courses	43	1,121	2%
Regional Anesthesia	37	80	1%
Essential Surgical Skills	29	390	1%
Essential Surgical Skills Courses	24	348	1%
Dental Course	21	294	1%
Sterile Processing	21	525	1%
Biomed Anesthesia Training	19	665	1%
Neonatal Resuscitation Courses - Training of Trainers	15	116	1%
SAFE Obstetric Anesthesia - Training of Trainers	13	87	1%
Specialized Medical Education Sponsorship	13	10,760	1%

SAFE Pediatrics Anesthesia - Training of Trainers	7	35	0%
Essential Surgical Skills - Training of Trainers	5	60	0%
MCB Surgeon Mentoring	5	695	0%
MSSI Nurse Training - Training of Trainers	5	172	0%
SAFE Pediatric Anesthesia - Training of Trainers	2	4	0%
MCB Mentoring	1	21	0%
Total	2,546	224,259	100%

Mercy Ships recognizes that people need more than just access to healthcare. They need access to food and nutrition. To help address these issues in host countries, Mercy Ships has been implementing Food for Life programs since 1997. Food for Life projects impact lives by training people how to sustainably produce nutritional food and crops.

Since 2009, Mercy Ships has trained and updated the methods of over 390 nutritional agricultural trainers serving a number of Classroom Learning well-established NGOs in Africa. Our projects teach effective methods of food production and preparation. Mercy Ships works with participants to rebuild, restore, and renew their lives, land, communities, and nations through sustainable, organic agricultural development.

Mercy Ships Canada National Office Staff

Four national office staff members primarily support the work of providing direct medical services, medical capacity building and health systems relationship development: the Executive Director, the Director of Programs, Risk and Compliance, the Volunteer Crew Administrator, and the Regional Representative for Quebec. Support for their work is also provided by accounting and administrative staff members.

Darryl Anderson
EXECUTIVE DIRECTOR

In part, the Executive Director’s mandate is to work collaboratively across Mercy Ships, with our partners, donors, volunteers, Board members, and staff to mobilize French and English-speaking Canadians to volunteer their service onboard the m/v *Africa Mercy* and m/v *Global Mercy* as the second hospital ship prepares and enters into service: lead growth, including the value of the contributed services of the Canadian volunteer crew.

Rosie Smyth
DIRECTOR OF PROGRAMS, RISK AND COMPLIANCE

The Director of Programs, Risk and Compliance’s role is to be accountable for the leadership, development and implementation of all programs and risk management initiatives and to ensure the organizational health and sustainability of Mercy Ships Canada’s efforts in the short and long-term.

An Carson
VOLUNTEER CREW ADMINISTRATOR

The Volunteer Crew Administrator role provides the administration required to support the recruitment, staffing and fundraising efforts required to mobilize Canadians to serve with Mercy Ships. The role helps with the identification of individuals into the volunteer talent pool and the coordination of the staffing functions related to the field service deployment.

Catherine Tremblay
REGIONAL REPRESENTATIVE, QUEBEC

The Regional Representative role is to help implement the mission of Mercy Ships Canada in a designated region or linguistics community within Canada. The individual works with their teammates to help identify, equip, and mobilize Canadian volunteers. The Regional Representative is the “face” of Mercy Ships Canada within a designated area.

Direct Medical Services (DMS) - Mercy Ships Canada

Canadian volunteer crew members are a primary way in which Mercy Ships Canada contributes to the provision of direct medical services of Mercy Ships.

In total, **78** Canadian volunteer crew served in 2022. There were 78 volunteers that were reviewed and recommended by the Volunteer Crew & Human Resource Committee and approved by the Mercy Ships Canada Board.

VOLUNTEER CREW

Number of Longer-Term Canadian Volunteers Served in 2022:

- 15 longer term crew (including 8 children)

Number of Shorter-Term Canadian Volunteers Served in 2022:

- 63 shorter term crew members

Prior to the pandemic, approximately 100 to 125 Canadian volunteer crew would serve throughout the year with Mercy Ships.

The number of Canadian volunteers that served in a calendar year is the highest level of aggregation for describing the volunteer crew program. Yet, it is important to recognize that in a year individuals may serve in different ways. Some people will service in a single role for their entire service, some people will serve more than once in the same role, and other people will transition from their original role on the ship to another role. The information indicates that medical positions accounted for 63% of roles, technical positions 13% of roles, and general positions 25% of roles.

Volunteer Crew Key Performance Indicators

Using a framework found in the literature and published by the Canadian Centre for Philanthropy in 2002 entitled, *Assigning Economic Value to Volunteer Activity: Eight Tools for Efficient Program Management*, Mercy Ships Canada developed three baseline key performance indicators (KPIs) for our volunteer crew program. It is important to note that these direct MSCA measurements do not attempt to capture the value of the surgical procedures, medical training and capacity building initiatives provided by the volunteers.

1. Human resource productivity measures describe how Mercy Ships Canada volunteers extend our organization's personnel resources beyond your existing budget.

The contributed services amount for volunteer Canadian citizens who donated their professional services in 2022 was **\$1,688,800**. This amount is based on hours worked multiplied by the hourly wage attributed to each role. For comparison, the Mercy Ships Canada value of volunteer contributed services in previous years was as follows:

2021	\$ 554,189
2020	\$ 471,088
2019	\$1,269,762
2018	\$1,793,667

2. Volunteer program efficiency measure provide the context for explaining the value of the Mercy Ships Canada volunteer program.

The volunteer investment ratio is used to measure the return on the money Mercy Ships Canada invests in its volunteer program. In 2022, for every dollar that Mercy Ships Canada invested in the volunteer program, we receive a return valued at **\$3.72** in unpaid volunteer activity.

The value 3.72 is calculated by the following formula: Total dollar value of contributed services/Total financial investment on volunteer program or (\$1,688,800/\$453,501). MSCA volunteer crew program funding included expenses related to crew fees and crew travel.

Medical Capacity Building (MCB) and Health Systems Relationship Development - Mercy Ships Canada

Mercy Ships Canada contributed to medical capacity building and health systems relationship development in Senegal and Guinea in 2022 via the Joint Programs Agreement with Mercy Ships. The main initiatives were:

- A. Medical Waste Converter Installation Project (Senegal),
- B. Hope Medical Centre Equipment Project (Guinea),
- C. Gamal Medical Simulation Project (Guinea) .

Each of the following projects below fulfills one or more parts of the charitable purposes of Mercy Ships Canada.

Medical Capacity Building /Health Systems Relationships Development	
Project Name	Charitable Purposes
Medical Waste Converter Installation Project (Senegal)	To develop and promote public health by acquiring and distributing medicine, medical equipment and supplies, fuel, tools, and any related materials necessary to deliver basic care for the above-referenced hospital ships, land-based programs, and related facilities.
Hope Medical Centre Equipment Project (Guinea)	To develop and promote public health by acquiring and distributing, medicine, medical equipment and supplies, fuel, tools, and any related materials necessary to deliver basic care for the above-referenced hospital ships, land-based programs, and related facilities.
Gamal Medical Simulation Project (Guinea)	To develop and promote public health by offering specialized training to local health care professionals. To advance education through the provision of medical and surgical training to local health professionals and medical leadership development.

A. Medical Waste Converter Installation Project (Senegal)



Fatick Centre Regional Hospital

Goal: Provide to hospital sites that have been identified by the MSAS (Ministry of Health and Social Action) in Senegal, six medical waste converters that are to be installed, commissioned and operational by the end of 2022.

Project Time Frame: December 2021 -December 2022.

Summary of Activities and Expected Outcomes

Activities	Outcomes	Status as of Dec 31, 2022
1. MSAS procures six (6) medical waste converters and associated equipment and infrastructure in 2021 and 2022.	Six medical waste converters and associated equipment and infrastructure are procured.	Completed.
2. MSAS installs six (6) medical waste converters in 2022 at the selected sites.	Six medical waste converters are installed at the selected sites.	Two (2) units are installed. Four (4) units are pending installation based on available electricity.
3. MSAS commissions six (6) medical waste converters for operation in 2022.	Six medical waste converters are commissioned and operational.	Commissioning of the medical waste converters and handover is scheduled for February 2023.

Summary of Expenditures:

Total expenses as of 2022: CD \$1,293,162 or US \$994,740 (CD \$669,829 disbursed in 2022).

B. Hope Medical Centre Equipment project (Guinea)



Dr. Simeon using the computer system during a medical consultation.

Goal: Provide equipment for the Hope Medical Centre in Guinea to continue providing care to the local population.

Project Time Frame: July 2022 to May 2023.

Summary of Activities and Expected Outcomes

Activities	Outcomes	Status as of Dec 31, 2022
1. a) Identify equipment items needed at the hospital. b) Mercy Ships Equipment Donation Review Team will review the request with a focus on suitability and perceived sustainability.	a) Equipment items needed at the hospital are identified. b) Mercy Ships Equipment Donation Review Team approves the request if criteria needs are met.	a) Completed. b) Completed.
2. Items procured, purchased, shipped, and delivered.	Hope Medical Centre receives the equipment ordered from suppliers.	Report on first 50% of items received and reviewed. Next payment of 40% is in process.
3. Hope Medical Centre biomed and technical staff install the equipment.	Hope Medical Centre successfully installs and uses the equipment.	First 50% donation of items are installed and in use at the hospital.

Summary of Expenditures:

Total expenses as of 2022: CD \$118,346 or US \$91,036 (CD \$222,499 disbursed in 2022).

C. Gamal Medical Simulation Project (Guinea)

Goal: Mercy Ships recognizes this unique opportunity to partner with Gamal Medical School in fulfilling its vision of meeting the medical training and healthcare needs of the Guinean population.

Project Time Frame: December 2022 to September 2023.

Summary of Activities and Expected Outcomes

Activities	Outcomes	Status as of Dec 31, 2022
1. a) Finalize the equipment and supplies needs list. b) Mercy Ships Equipment Donation Review Team will review the request with a focus on suitability and perceived sustainability and approve if criteria needs are met.	a)List of items needed are identified and approved. b) Mercy Ships Equipment Donation Review Team approves the request if criteria needs are met.	a)Completed. b) Completed.
2. Items identified are procured, purchased, shipped, and delivered to the school.	Medical school receives new supplies/materials needed to continue training.	Procurement of items completed. Purchasing started in December 2022. Shipping and delivery scheduled for June 2023.
3. Technical staff install the equipment.	Equipment is installed and ready for use.	Equipment installation is scheduled for July 2023.

Summary of Expenditures:

Total expenses as of 2022: CD \$0 (CD \$158,588 disbursed in 2022).

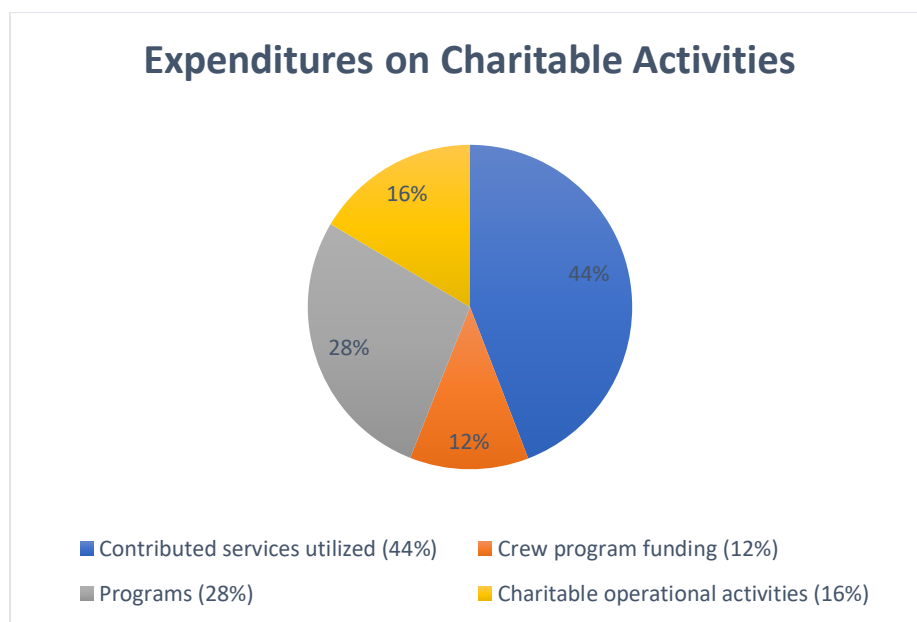
Health Systems Relationship Development - Mercy Ships Canada

Canadian staff members seconded to Mercy Ships were a primary way that Mercy Ships Canada contributed to the development of health systems relationships. One Canadian staff member was seconded to Mercy Ships for the role of the Pharmacy Clinical Coordinator which supervised the installation on the ships of a new Electronic Patient Medical Record system and new pharmacy operating system. Another Canadian staff member seconded to Mercy Ship country engagement team was on leave of absence for a portion of 2022.

6. Mercy Ships Canada Programs Activities 2022 Expenses Summary

A summary of the Mercy Ships Canada charitable program activities is summarized below.

Expenditures on Charitable Activities		
Direct Medical Services	Contributed services utilized	\$1,688,800
Direct Medical Services	Crew program funding	\$453,501
Health Systems Relationship Development/ Medical Capacity Building	Programs	\$1,052,911
Health Systems Relationship Development	Charitable operational activities	\$629,384
	Total	\$3,824,596

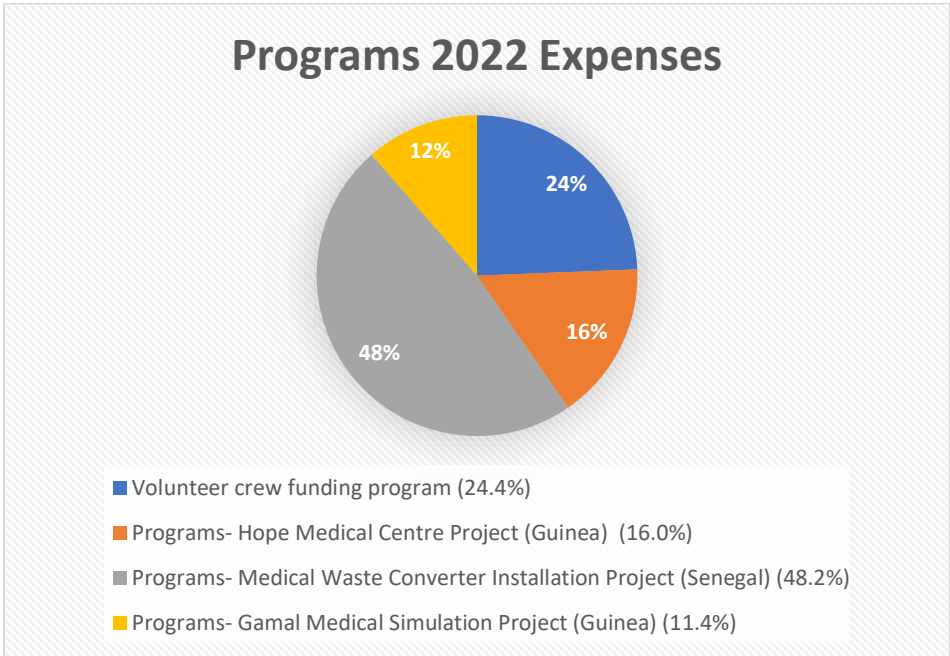


Our 2022 Financial Statements, which can be found at (<https://mercyships.ca/en/impact-stories/annual-reports>), includes our Statement of Operations which outlines the revenue and expenses.

Canadian Volunteer Crew and Program Activities

Mercy Ships Canada is able to spend our financial resources on programs outside of Canada facilitated by a Joint Programs Agreement with Mercy Ships. Below is a breakdown of our expenditures on program activities.

Mercy Ships Canada Programs 2022 Expenses		
Direct Medical Services	Volunteer Crew program funding	\$338,777
Health Systems Relationship Development	Programs- Hope Medical Centre Equipment Project (Guinea)	\$222,499
Health Systems Relationship Development/Medical Capacity Building	Programs-Gamal Medical Simulation Project (Guinea)	\$158,588
Health Systems Relationship Development	Programs- Medical Waste Converter Installation Project (Senegal)	\$669,829
	Total	\$1,389,693



The Mercy Ships Canada T3010 Registered Charity Return for 2022 that can be found at https://apps.cra-arc.gc.ca/ebci/hacc/srch/pub/dsplyBscSrch?request_locale

7. Programs Insights and Lessons Learned

Programs Insights

Joint Programs Committee (JPC) Membership:

- In 2022, the Committee experienced membership changes with MSO members, which required onboarding the new members so that they could become fully familiar with the work of the JPC.

- Members from MSO commented on how processes, such as MSCA’s project priorities established by the MSCA Board and a risk-based project decision matrix, have provided the parties greater clarity in the identification, preliminary screening, and the recommendation phase of our project management.
- Email approval of projects for the JPC and the MSCA Board allowed the approval process to occur in a timely manner instead of waiting for quarterly meetings.

MSCA Funding Contributions:

- MSCA, in 2022, had cash available in the CD \$1,000,000 range for projects that helped facilitate multi-year funding opportunities.

Environmental, Social and Governance (ESG):

- The Global Network for Anti-Corruption, Transparency and Accountability in Health (GNACTA), in collaboration with the World Health Organization Health System’s Governance and Policy Unit, reports that healthcare is particularly vulnerable to corruption in a wide range of areas, such as procurement, infrastructure, and service delivery. Corruption causes severe financial waste and undermines the trust that underpins effective, equitable, and responsive healthcare.
- GNACTA further notes that while corruption occurs in all countries, high levels of corruption in healthcare are often found in countries with major socio-economic inequalities and poor health outcomes, posing serious challenges to achieving Universal Health Coverage. Anti-corruption, transparency, and accountability (ACTA) measures have not achieved marked reductions in healthcare.
- MSCA acknowledges that having environmental, social and governance strategies can bolster our effectiveness, align our operations more closely with our mission, and earn and keep the trust of our donors. The emerging topic under social and governance is anti-corruption. The need for anti-corruption awareness and mitigation measures in project selection and implementation have been raised and discussed by the MSCA Board. Moving forward the parties to the JPC will continue to discuss the best way to align MSCA’s and MSO’s policies, procedures, and Memorandum of Agreements to reflect an anti-corruption viewpoint and right to audit.
- MSCA management has researched and with input from legal counsel and MSCA Board members prepared a draft Anti-Corruption policy that reflects the following type of considerations:
 - Anti-corruption and bribery in Canada are enforced principally under two federal statutes.
 - Foreign bribery under Canadian law is governed by the Corruption of Foreign Public Officials Act (“CFPOA”) which makes it an offence to: i) directly or indirectly give, offer or agree to give or offer any form of advantage or benefit to a foreign public official to obtain

an advantage in the course of business; or ii) engage in certain accounting practices where those practices are employed for the purpose of bribing a foreign public official or concealing a bribe.

- Domestic bribery and corruption are governed under the Criminal Code which prohibits various forms of corruption including bribery of various officials, frauds on the government, breach of trust by a public officer and secret commissions, as well as various corrupt accounting and record-keeping practices.
- Unlike the United States, there is no central regulatory body responsible for the investigation of anti-corruption matters in Canada. Both the CFPOA and the Criminal Code are addressed as police matters and investigated and enforced by the RCMP.
- In Québec, anti-corruption compliance is also enforced by the Unité permanent anticorruption (“UPAC”) pursuant to the province’s Anti-Corruption Act. UPAC employs personnel from different agencies across Québec, including the Sûreté du Québec, the anti-fraud squad of Revenu Québec and the anti-collusion unit of Transports Québec, among others.
- Foreign companies and individuals are subject to the corruption offences in either the CFPOA or the Criminal Code if the offence is deemed to have taken place in Canada.
- Both individuals and companies can be held liable under Canada’s anti-corruption laws and may be subject to significant fines and maximum jail terms ranging between five to 14 years. Companies will be held liable where the act was committed with the knowledge of a “senior officer”, as defined under the Criminal Code. Recent case law has established this includes individuals responsible for managing an important aspect of an organisation’s activities, including middle management.
- Canada is a party to several international anti-corruption conventions obligating it to maintain and enforce appropriate anti-corruption legislation. Canada has faced increasing international pressure in recent years to increase its anti-corruption enforcement.

Impact of COVID-19 and Supply Chain:

- The COVID-19 pandemic amplified health systems’ vulnerability to corruption by exacerbating pre-existing corruption drivers and vulnerabilities, revealing how corruption can exacerbate the spread of a virus and prolong a health emergency.
- Supply chain disruptions caused delays in 2022 in the transport of the medical waste converters which impacted the Medical Waste Converter Installation project in Senegal. Disruptions also delayed the equipment for the Nurse Anaesthesia Re-Investment project in Guinea.

8. Mercy Ships Partnerships

In 2022, one of our goals as an organization was to help as many people as we do during a normal field service. We were able to achieve this thanks to partnerships with other organizations and Ministries of Health, ongoing training programs, and direct medical care in several of our partner nations.

A few of the current international partners for Mercy Ships include the WHO (World Health Organization) Regional Office for Africa, SPECT (Sterile Processing Education Charitable Trust), Medical Aid International UK, Cure International, WFSA (World Federation Society of Anesthetists), WACS (The West African College of Surgeons) and YWAM (Youth With A Mission) among many others.



9. Appendix A: Charity Ranking Organization's Methodology

We recognize that Mercy Ships philosophy of service may be different from how others approach their work. For example, effective altruism started in the 2000s as a philosophical and social movement that focused on doing the most good for the highest number of people in an impartial manner. It has since given rise to popular non-profit organizations such as GiveWell and Charity Intelligence Canada.

In summary, effective altruism aims to:

- Identify the best global problems to focus on, based on the magnitude of effect on human well being, and how practical or solvable the issue is.
- Encourage cause-neutrality (i.e., detachment of personal interests with a particular problem) and follow whichever path the evidence decides as the 'most worthy cause'.
- Identify the best charities by evaluating interventions by cost-effectiveness (i.e., cost per disability-adjusted life years, \$/DALY).

In 2006, Charity Intelligence Canada started researching and analyzing charities, gathering the data that they believed was most important. The organization collects information in charities' management and operations, analyzes financial data, and digs into available information on the social results produced by charities – the impact of the charities' programs. It also assesses charities' demonstrated impact per dollar donated in a manner consistent with effective altruism.

Mercy Ships Canada acknowledges that insights can be learned by applying an “effective altruism” lens or other rating approaches to discussing the impacts of our work. Yet, in doing so, we also recognize that different philosophies of service or charity rating methodologies may yield a variety of insights. Therefore, readers are encouraged to become aware of a charity rating agency's underlying philosophy and the strengths and limitations to judge the impact of any charity's work, including Mercy Ships Canada.

We note that the application of effective altruists can result in a bias towards funding global health issues with a clear and singular technological solution. It may not fully recognize approaches that work alongside others to address social determinants of health or induce structural change because no key performance indicator could determine success or measures everything that matters. Furthermore, addressing the unmet need for access to safe, timely and affordable surgery for people in great need Mercy Ships has made a clear decision not to be cause neutral and engage in charitable activities concerned with justice.