

MALC
Established 1956

ANNUAL REPORT 2019

**STRENGTHENING
THE BOND OF HUMANITY**



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Vision:

Health and Inclusive Development for All.

Mission:

Being a health-based Not-for-Profit Organization, we are committed to:

1. Reduce the burden of Leprosy, Tuberculosis and Blindness in the country.
2. Promote prevention of disabilities and create an inclusive environment for persons with disabilities.
3. Promote prevention of malnourishment through primary health care for mothers and children.
4. Promote prevention of poverty-related diseases by giving coverage to Neglected Tropical Diseases.
5. Build the capacity of paramedics, undergraduate and post-graduate medical professionals.
6. Promote environmental improvement.
7. Increase awareness through Advocacy, Communication and Social Mobilization.
8. Respond to disasters for relief, rehabilitation and risk reduction.

Core Values:

We are committed to:

1. A person-centered approach.
2. Timely and quality care with dignity for all.
3. Good governance.
4. Respecting and protecting the environment and natural resources.
5. Innovation and keeping pace with technology.
6. Caring and sharing.

PRESIDENT'S MESSAGE

Most people live in this world as onlookers. They live their own lives, quite unconcerned with anything that goes on around them. If there is a road accident, they will stop, not to help, but to see what has happened and then move on after satisfying their curiosity.

Fortunately, there are some who do not remain indifferent, they are affected by the suffering, poverty, misery and injustices they see around them. They are moved by the plight of others and want to do something to change the situation.

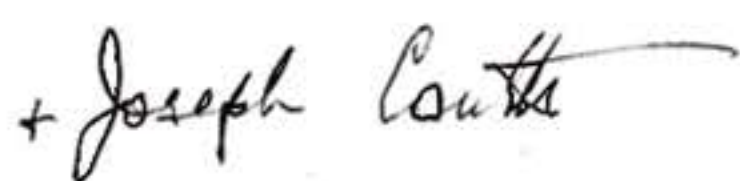
Sister Dr. Ruth Pfau was one such person "Doing nothing seemed intolerable" she wrote in one of her books. It was too difficult for her to be an onlooker when she first encountered so much suffering and misery on her arrival in Pakistan.

The establishment of the MALC resulted in controlling Leprosy in Pakistan, MALC then embarked on rendering the same services in the fields of tuberculosis, blindness control and care for disabled patients who have been largely neglected in Pakistan.

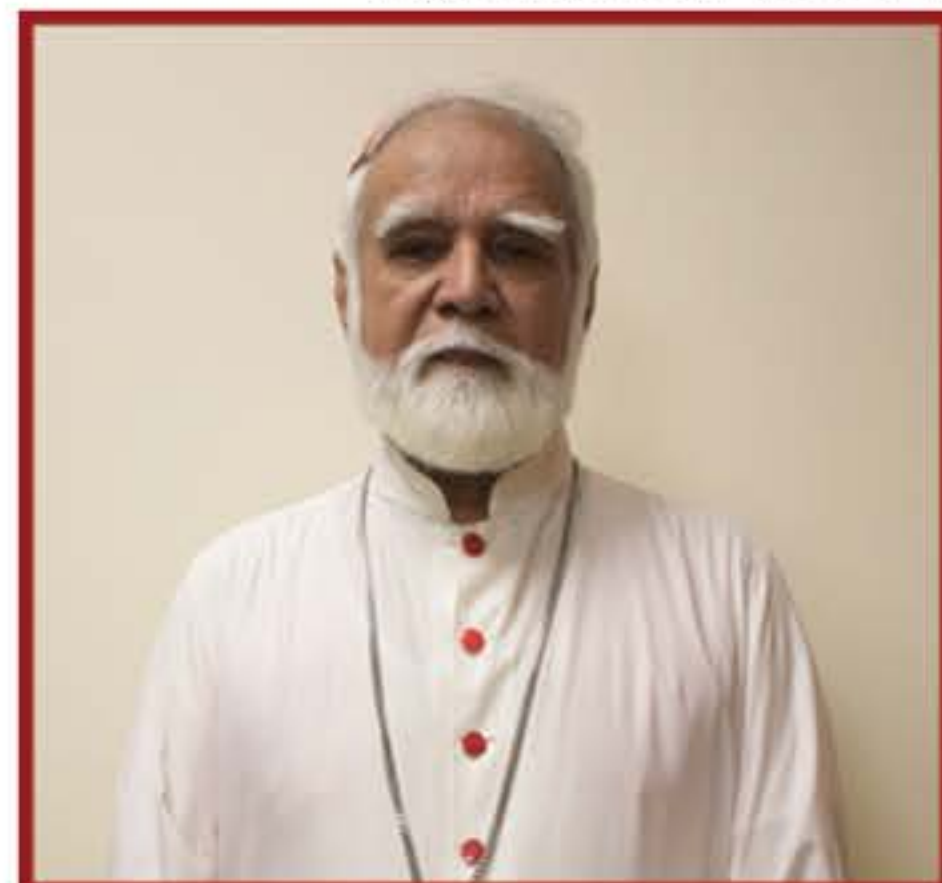
All this could not have been accomplished if Dr. Pfau had not seen the importance of forming a dedicated, hard-working and well-trained team to continue the work. They are no mere onlookers but highly-motivated men and women, with a common vision, working to bring change.

This band of field workers cannot continue the struggle without the support of many others: benefactors, friends and like-minded donors who sustain this struggle for change with their generous help.

This issue is dedicated to all those who chose not to be mere onlookers but, like Dr. Ruth Pfau, chose to work to bring a change, to light a candle rather than curse the darkness. May Almighty God bless, guide and strengthen them in this wonderful mission.



Joseph F. S. Coutts
(Archbishop of Karachi)
President, M.A.L.C. Governing Board



CEO'S MESSAGE

Miracles do happen, and we can give smiles back to people with a little bit of warmth and care. This is what happened, when Izatullah, a fifteen year old boy from a village in district Zhob, Balochistan, having congenital cataract in both eyes came with his father to one of our Eye Surgical Camps in Zhob.

It was enough for our team to assess the condition of Izatullah and the sufferings he must have gone through. Unlike normal camp settings, the team inquired about family details and came to know that five more siblings of Izatullah, four brothers and one sister had the same medical condition. The team's response was full of empathy, as arrangement from the visit to the family's house, transportation, boarding and lodging were taken care of. With such heart touching efforts of the entire team, it was only a matter of time that the remaining five siblings would be able to see the beauty of nature with their own eyes, which they did. The joy of the children and family had no bounds. There were tears of happiness all around.



The conscientious team was a group of both MALC and Balochistan Health Department workers; isn't it a touching story of human concern for their fellow human beings. Humanity does exist in the hearts of people, we just have to look around and trust the Almighty.

A soft tap on the conscious, is enough for a wake-up call to humanity. Yes! We as humans are not immune to feelings for our fellow human beings. A true service, well executed.

Thank you all for believing in us as the spirit moves on.



Mervyn Lobo

LEPROSY ELIMINATION



347

Patients Diagnosed
& Registered

138

Sindh (62 Karachi)

21

Balochistan

112

Punjab

69

Khyber Pakhtunkhwa

06

Azad Kashmir

01

Gilgit-Baltistan

438

Patients
Under Treatment

202

Sindh (102 Karachi)

32

Balochistan

93

Punjab

101

Khyber Pakhtunkhwa

09

Azad Kashmir

01

Gilgit-Baltistan

LEPROSY ELIMINATION – ACHIEVEMENTS

While Leprosy has been on a slow but sustained decline in Pakistan (annual new cases detected are 300-400), the variable and insidious nature of the disease requires the presence of Leprosy service for few more decades to come. According to the most recent document on Leprosy Elimination Strategy from WHO, early case detection of all patients, along with reducing disease related disability/deformity and social stigma are challenges yet to overcome.

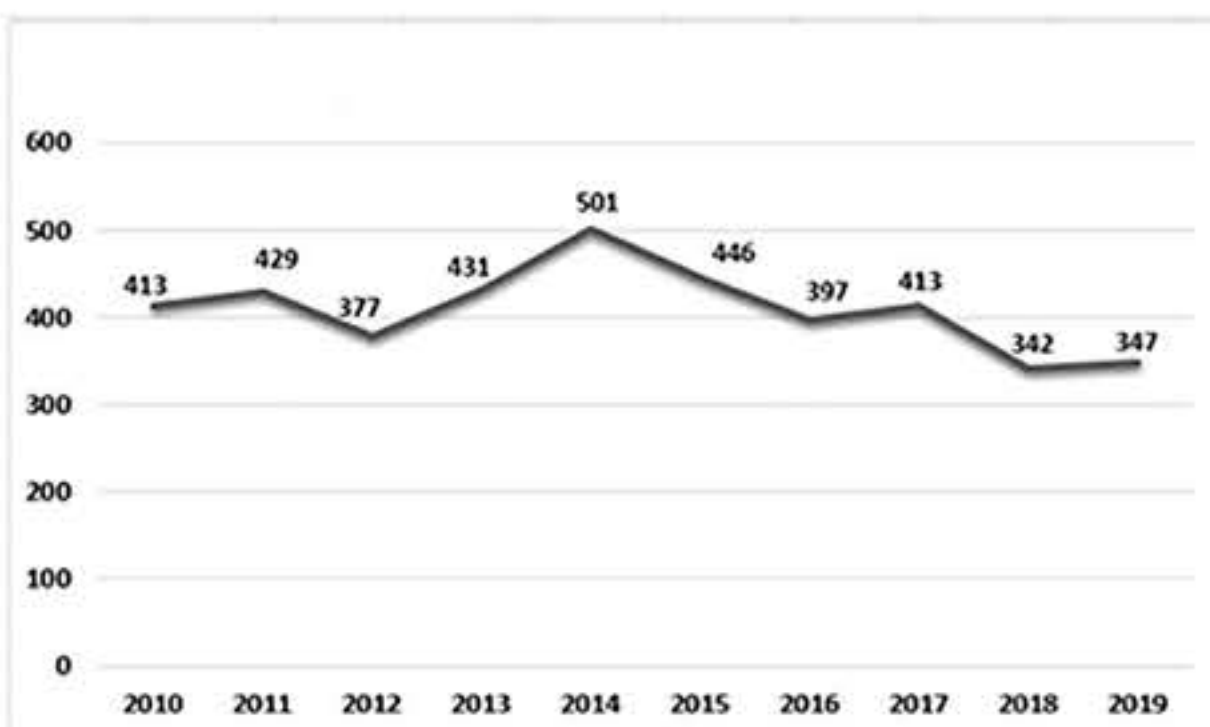
Karachi, the capital of Sindh province and the largest city of the country, still produces the highest number of new Leprosy cases. Besides this, foci for the disease are visible in other parts of Sindh and Balochistan. Similarly, Leprosy is still reported from certain districts of Khyber Pakhtunkhwa. Occasional cases do surface in Azad Kashmir and Gilgit-Baltistan, two areas where Leprosy is almost wiped out. It is a documented fact that the nature of the disease will continue to result in producing occasional patients in areas where the disease is culminating its natural course.

During 2019, our teams remained vigilant across the country for the timely diagnosis of new Leprosy cases. Dermatologists have now become the major source of referral of presumptive cases as the disease affects the skin of the individual at an early stage. Close family contacts form the second largest source as the disease is transmissible on prolonged close contact with an untreated infectious case. The rate for visible deformity/disability among new cases is at present a major challenge to overcome, and for which all efforts are underway.

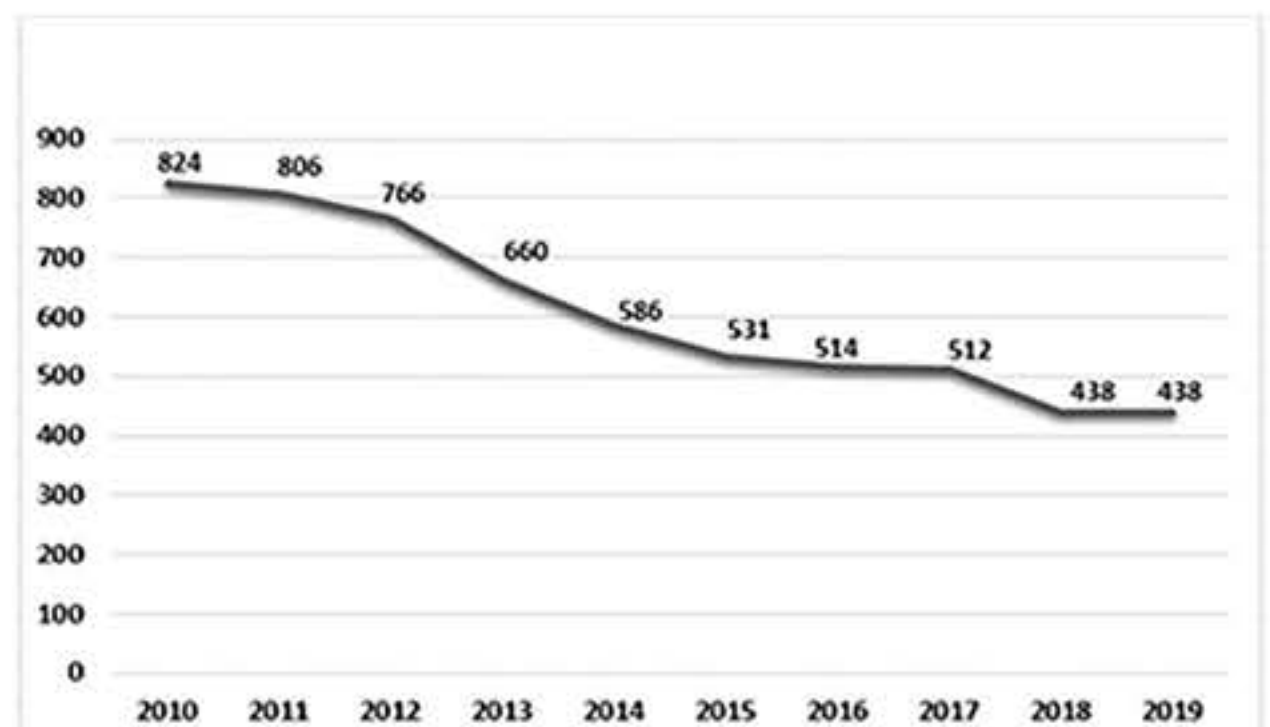
It is pertinent to note that apart from the dedication and hard work of Leprosy Team, the task of Leprosy control in Pakistan has been made possible through the generous support of German Leprosy and TB Relief Association (GLRA) and the Federal and Provincial Health departments of the country.

Graphs

New Admissions



Patients under Treatment



COMMUNITY BASED INCLUSIVE DEVELOPMENT FOR PERSONS WITH DISABILITIES



COMMUNITY BASED INCLUSIVE DEVELOPMENT (CBID) FOR PERSONS WITH DISABILITIES (PWDs)

Historically, Leprosy is known for disabilities and disfigurement along with gross social stigma, resulting in exclusion and marginalization of people affected by the disease. People affected by Leprosy have to endure not only the recurrent and often unpredictable complications of the disease but equally the stress of isolation and discrimination. Years of experience in the field has made the team realize about the importance of self-care, role of family and community, and the need of equitable opportunities for people afflicted by disabilities and discrimination. During this time, the team, apart from being committed to the cause, has also picked certain values needed for such individualized services.

According to conservative estimates, disability prevalence around the globe is around 15% of the total population. Majority of them live in the developing world, facing poverty and discrimination and are usually not a part of development process. The conventional approach for rehabilitation of persons with disabilities include financial support, special schools, and institutional based care. However, these services being concentrated in urban areas, reach only 2% of the target population. Women, children, and old aged people with disabilities are often further discriminated due to prevalent sociocultural barriers.

Realizing the need and with enough sensitization and experience, MALC has ventured out for “Community Based Rehabilitation” (CBR) or more recently termed as Community Based Inclusive Development (CBID) for people with disabilities (general and leprosy related). Selected team members were trained both within and outside the country, by renowned facilitators to understand the concepts, gain knowledge and skills necessary for field work.

At present, CBID work by MALC teams has been going on in Karachi and certain other selected districts of Sindh. The team has successfully completed a project of 3 years duration in Karachi, which covered services for over 3,500 people (adult, children) and is all set to embark upon a new project with the support of CBM International commencing in the last quarter of 2020.

SECTOR-WISE INTERVENTIONS DURING THE REPORTING YEAR 2019

1. HEALTH: Promotion, Prevention, Medical Care, Rehabilitation and Assistive Devices	
PWDs, family members and community workers trained in health promotion activities	32
People assessed for disabilities	152
PWDs referred for specialized medical and physiotherapy services	226
Family members trained in physical exercises	117
PWDs supported in Assistive Devices	30
2. EDUCATION: Primary, Non-formal and Lifelong Learning	
PWDs obtained Inclusive education	11
3. LIVELIHOOD: Skills Development, Self-employment, Wage Employment and Social Protection	
PWDs facilitated in skills learning	44
PWDs facilitated in establishing own business	1
PWDs facilitated in acquiring workplace adaptation and job placement	4
4. SOCIAL: Personal Assistance and Social Justice	
PWDs trained in physical exercises and activities of daily life through house visits	226
PWDs facilitated in obtaining Disability Certificate and National Identity Card	1,435
5. EMPOWERMENT: Advocacy, Communication and Social Mobilization	
PWDs trained in self-advocacy	67
Awareness programs conducted in communities	3
PWDs enrolled in electoral list	98
PWDs registered in Self-Help groups	10

TUBERCULOSIS CONTROL



ACHIEVEMENTS:

Indicators	2017	%	2018	%	2019	%
Annual New Admissions	9,739		9,204		8,801	
Pulmonary Patients	7,458	77%	7,017	76%	6,691	76%
Sputum Positive Patients (among pulmonary patients)	3,036	31%	2,936	32%	3,115	35%
Female cases	4,947	51%	4,568	50%	4,459	51%
Children cases	115	4%	80	3%	91	3%
Treatment Success Rate		92%		92%		93%
Contacts examined for TB	39,396		28,904		20,016	
Cases found	765	8%	621	7%	698	8%
Persons reached by social mobilization	353,848		410,526		391,546	

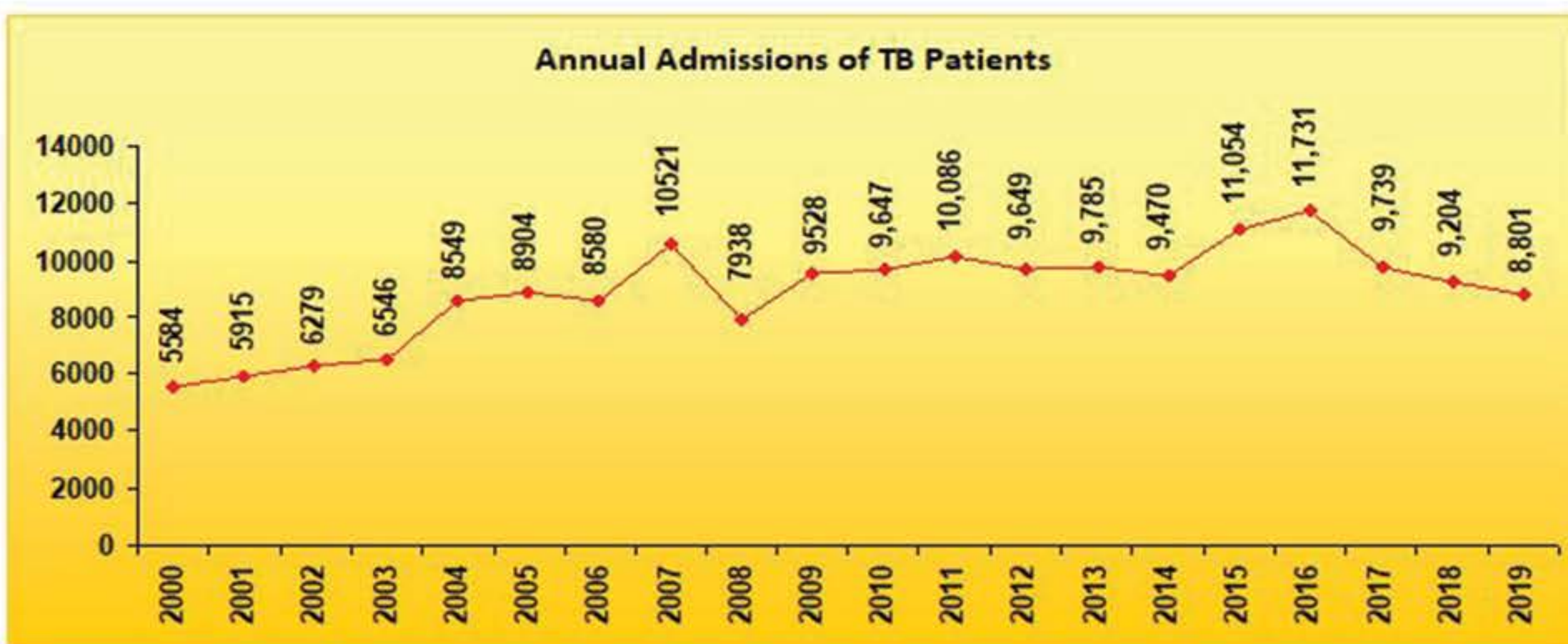
TUBERCULOSIS CONTROL ACTIVITIES:

MALC initiated its TB Control Activities in 1975 in Azad Kashmir and the Northern Areas, presently known as Gilgit-Baltistan. Currently, MALC provides support to the National and Provincial TB Control Programs in detection and treatment of TB cases particularly in Azad Kashmir, Gilgit-Baltistan, and selected districts of Sindh and KP. In Karachi, where MALC's main office is located, the organization has been running TB control activities since 2002 through 12 centres equipped with trained and experienced doctors and paramedical workers. In recent years the organization has also upgraded its TB diagnostic capabilities for Karachi with the addition of GeneXpert machines besides microscopy and radiology. In 2015, MALC joined Mercy Corps as sub-recipient (SR) to work in selected districts of Azad Kashmir, Gilgit-Baltistan, and KP for the Public-Private Mix (PPM) aspect of National TB Control Program supported by the Global Fund. The project is in the mid of its second phase known as New Funding Request (NFR), which will end in December, 2020.

Through the person centered approach, the organization not only endeavours for proper and timely diagnosis and treatment, but also ensures additional services like screening of close family contacts, and mass awareness of the disease. MALC, on an average attends 9,000–10,000 TB patients on annual basis, while maintaining a treatment success rate of over 90%.

ACHIEVEMENTS THROUGH PUBLIC PRIVATE MIX (PPM)

Indicators	Azad Kashmir				Gilgit-Baltistan		KP	Total
	Bagh	Bhimber	Kotli	Mirpur	Gilgit	Diamer	Chitral	
New cases diagnosed	193	170	196	172	182	170	137	1,220
Sputum Positive cases	100 (52%)	87 (51%)	26 (13%)	79 (44%)	37 (23%)	34 (20%)	31 (24%)	394 (33%)
Contacts examined	382	337	160	345	172	122	48	1,566
Chest Camps conducted	11	10	2	11	11	9	2	56



PREVENTION OF BLINDNESS (POB)



PREVENTION OF BLINDNESS (POB)

With the help of trusted partners, in the last 25 years, the POB activities have expanded to provide eye care to needy communities across Pakistan. Like Leprosy, field work has remained a strong point of eye care. Eye units established at MALC Hospital in Karachi, Gwadar and Turbat (Balochistan) have been providing required necessary secondary support for outpatient consultations, refractions and needed surgeries. In 2019, the organization has established another centre in Kandhkot (Sindh) with an equipped operation theatre and OPD facility for eye patients apart from working for Leprosy elimination and TB control in the area.

The eye unit in MALC main hospital in Karachi has all the latest essential equipment / instruments needed for quality eye care. The unit has been performing quite well for the past 5-6 years with an annual average of 1,800-2,000 Cataract surgeries with excellent results. Realizing the need of eye care for patients with Diabetes Mellitus, an afternoon clinic has been established, where qualified and experienced doctors and paramedical workers provide consultations and required management. In 2019, over 1,500 Cataract surgeries were performed through 12 free surgical camps held in remote areas of Balochistan. It is equally important to highlight that both static and field based eye care services have maintained a high Cataract success rate with over 95% of patients regaining optimal post-operative vision. Furthermore, school children were routinely screened for early detection of refractive errors and other eye conditions to avoid late complications. All of these services are being provided with the support from government, corporate donors, and individual philanthropists.

MALC Hospital, Karachi

Services	Achievements
Total Eye Consultations	33,070
Number of patients seen	16,519
Number of Cataract surgeries with IOL done	2,078
Number of Visual Acuity (VA) performed	23,436
Number of Refractions done	5,552

Gwadar and Turbat Base Hospitals in Balochistan

Services	Achievements
Total Eye Consultations	40,923
Number of patients seen	40,923
Number of Cataract surgeries with IOL done	339
Number of VAs performed	36,025
Number of Refractions done	2,752
Number of Eye glasses dispensed	2,752

Eye Camps in Balochistan

Services	Achievements
Total Eye Consultations	17,126
Number of Cataract surgeries with IOL done	732

Primary Eye Care Services through sub-centres

Services	Achievements
Total Eye Consultations	102,947
Number of patients seen	80,213
Number of Cataract surgeries with IOL done	1,674
Number of VAs performed	85,207
Number of Refractions done	12,392
Number of Eye glasses dispensed	21,677
Population screened	99,985
Number of children screened in schools surveys	16,999
Awareness/Health Education given to public	280,120
Vitamin 'A' Capsules distributed	42,902
Tetracycline Eye Ointment prescribed	3,689

MOTHER AND CHILD HEALTH CARE

Mother and Child Health Care (MCHC) was initiated in 1981 at a small clinic established in an Afghan refugee camp on the outskirts of Karachi. The aim was to provide primary health care to a segment of society, who otherwise had limited or no access to a proper health facility. Over the years the clinic has evolved into a centre providing regular outpatient consultations by a doctor, immunization services and nutritional support for children under five years of age.

Pakistan has one of the highest maternal and under five mortality rates in the world. The sad part is that a significant portion of these deaths are preventable with timely provision of primary health care. Realizing the need and leveraging on the experience gained from work at Afghan camp, MALC in last 3-4 years has expanded the MCHC services to selected sub centres in Karachi, Badin, Tando Jan Muhammad and Kandhkot in Sindh. During the same period, the organization with the support from corporate donors has also ventured out in Khewra and Sheikhupura (Punjab) to provide MCHC services through community health clinics. The scope and nature of services are almost same in all these clinics with minor variations. The purpose of these clinics is to ensure safe motherhood by providing micronutrient supplements to females of child bearing age, regular antenatal checks, with routine lab tests and ultrasound (in certain centres). Likewise, children under five years of age not only get consultations and treatment for routine ailments but they are also followed for proper physical development through awareness to their mothers and provision of nutritional supplements to the children.

ACHIEVEMENTS 2019:

	Karachi	Sindh	Punjab		Total
			Khewra	Sheikhupura	
Female Consultations	7,433	4,656	4,339	2,973	19,401
Child Consultations	10,612	5,216	2,364	4,787	22,979
Antenatal Consultations	1,458	1,112	511	234	3,315
Post-natal Consultations	365	111	-	-	476
Child Vaccination	473	50	-	-	523
Women immunized for TT	274	52	-	-	326
Nutrition support to children	1,033	2,116	-	-	3,149
Children monitored for Growth	7,230	3,706	1,273	2,917	15,126
Children treated for Diarrhea	1,426	811	-	-	2,237



TRAINING, ADVOCACY, COMMUNICATION AND SOCIAL MOBILIZATION

The Training Institute at MALC has been conducting regular training courses of Leprosy, TB, Eye, General Health & Hygiene for over 50 years. Besides training, visits by undergraduate students from different medical colleges of the city also continued to gain Leprosy knowledge and an insight of a successful Leprosy Control in Pakistan. MALC main hospital in Karachi has been recognized as facility for mandatory training of candidates pursuing FCPS II (Dermatology). Other post graduate medical students (Dermatology) also attended the hospital as part of their training. Students from Nursing schools and paramedical institutes regularly visit the facility for Leprosy awareness sessions. Besides this, teams go out in the field to raise health awareness in public and selected communities.

ACHIEVEMENTS:

Paramedical workers trained in Leprosy through a one-year training course	16
Paramedical staff provided updated knowledge of Leprosy, TB and Eyes	123
Leprosy Orientation sessions conducted for medical students	4
Undergraduate and Postgraduate students participated in Leprosy orientation sessions	900
Nursing students provided necessary knowledge about Leprosy, TB and Blindness	756
Awareness sessions conducted in general public and targeted communities	10
People participated in awareness sessions	2,000
Conferences conducted on Leprosy in different medical and educational institutions	20
Community Volunteers engaged in case finding activities for Leprosy and TB	50
Medical Officers and Dermatologists contacted for early case detection activities	500
LHVs, Midwives and Paramedics given awareness on Mother and Child Health Care	650
Teachers given awareness on Leprosy, TB, Eyes, Disabilities and Inclusive Education	240
NGOs, and Health Institutes approached to form network for services related to Persons with Disabilities	70
Sessions held on management skills	20



GOVERNING BOARD

1. **H.E. Joseph Cardinal Coutts,**
Archbishop of Karachi Diocese,
President
2. **Mrs. Ainee Shehzad,**
Principal,
Habib Public School,
Chairperson,
Fundraising Committee of MALC,
Secretary
3. **Mr. Irshad Hussain,**
Senior Fiscal Administrator,
Treasurer
4. **Mr. Burkard Koemm,**
Chief Executive Officer,
German Leprosy & TB Relief
Association, Germany,
Member
5. **Mr. Ernst Hisch,**
Member Ruth Pfau Stiftung
(Ruth Pfau Foundation) Germany,
Member
6. **Engr. Eugen Wollfarth,**
H.E. The Consul General,
Consulate General of the Federal
Republic of Germany,
Member
7. **Mr. Anwarul H. Haidri,**
Industrial Relations & IR Advisor,
Member
8. **Professor Tasnim Ahsan,**
Executive Director,
Jinnah Postgraduate Medical Centre
(JPMC) Endocrinologist,
Medicell Healthcare Services,
Member
9. **Professor Dr. Nabila Soomro,**
Director Institute of Physical
Medicine & Rehabilitation,
Dow University of Health Sciences,
Member
10. **Sr. Dr. Marie Frings,**
Doctor in Medicine,
Baccalaureate in Philosophy,
Member
11. **Sr. Jeannine Geuns,**
Founder Member of MALC,
Director Manghopir Development
Program (Retd.),
Member Congregation of Daughters of the
Heart of Mary (DHM),
Patron

INTERNATIONAL PARTNERS

The successful partnership with international donor agencies and friends continued throughout the year who supported various ongoing projects of health developments. The long-standing association of the following partners with MALC has been vital for the program as none of the activities would have been possible without their support:

1. German Leprosy & TB Relief Association (DAHW), Germany
2. Maria Laach, Lepra Hilfswerk, Germany
3. St. Francis Leprosy Guild, England
4. Caritas, St. Pölten, Austria
5. Basler Lepra-Hilfe, Switzerland
6. Beata Brunner, CHRISTOPHORUSVEREIN / Schweiz. Freundeskreis Dr. Ruth Pfau, Switzerland
7. Christoffell Blindenmission (CBM), Germany
8. Kindermissionswerk, Germany
9. Missio, Austria
10. Missio, Aachen, Germany
11. Missio, Munich, Germany
12. World Health Organization (WHO), Geneva
13. Mercy Corps
14. German Embassy, Islamabad
15. New Zealand High Commission
16. Lebenshilfe e.V., Berlin, Germany
17. Salvatoriaanse Hulpactie v.z.w., Belgium
18. MIVA, Austria
19. The i-Care Foundation



CORPORATE SPONSORSHIP:

The listed companies have exhibited their support through the adoption of health centres and sponsoring various health development initiatives of MALC in the country:

	<p>M. Hanif Charitable Trust continued adoption of MALC's Medical Centre (Orangi Town) to support free services to marginalized communities for Leprosy, TB, Eye Care, and Mother and Child Health.</p>
	<p>Pakistan Petroleum Limited continued adoption of Dr. Ruth Pfau Health Centre Kandhkot in Sindh along with Eye care services in Turbat Balochistan.</p>
	<p>K-Electric continued their generous support through free and uninterrupted power supply to MALC Hospital, Karachi. KE also supported in conducting eye camps in Karachi slum areas.</p>
	<p>United Bank Limited continued adoption of Leprosy-TB centre Kohistan, Khyber Pakhtunkhwa.</p>
	<p>English Biscuit Manufacturers (Pvt) Limited continued adoption of the Health Centre at Landhi-Korangi for providing free treatment services to Leprosy, TB, Eye patients, and Mother and Child Health Care services in the area.</p>
	<p>New Zealand High Commission supported MALC in conducting eye surgical camps in Balochistan.</p>
	<p>Sui Southern Gas Company continued adoption of Mirpurkhas Centre in Sindh and Gwadar Centre in Balochistan.</p>
	<p>ICI Pakistan Foundation continued sponsoring Mother and Child Health Care services to the deserving people through Humqadam Community Centres, Khewra and Sheikhpura in Punjab.</p>
	<p>HBL Foundation continued their support in sponsoring free eye surgical camps in different areas of Balochistan along with TB services for deserving communities of Kohistan.</p>
<p>We also thank all our anonymous donors for their continuous support towards providing free of charge treatment to Leprosy, TB and Eye patients along with our extended services for Mother and Child Health Care and Community Based Inclusive Development for Persons with Disabilities.</p>	

FUNDRAISING:


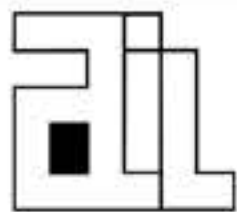
















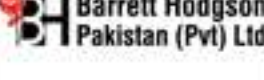

The Fundraising Committee of MALC has been achieving remarkable success not only in raising funds, but also in promoting MALC and its health care services in the corporate sector. This year, the committee raised a sum of Rs. 7,420,000 through various fundraising campaigns. The Committee is comprised of the following members:

Ms. Ainee Shehzad	Chairperson	Ms. Shamsha Hashwani	Member
Ms. Amna Mullick	Member	Ms. Zahida Habib	Member
Ms. Asma Maqbool	Member	Ms. Zoya Nathani	Member
Ms. Ayesha Mir	Member		
Ms. Farheen Mukaty	Member	Advisors:	
Ms. Maha Illahi Ghani	Member	Mrs. Ghazala Ahmed	
Ms. Mehreen Dawood	Member	Dr. Romina Mirza	
Ms. Mona Rameez	Member	Mr. Aziz Khan	
Ms. Nargis Soorty	Member		
Ms. Sabina Bawany	Member		
Ms. Sara Saigol Mushtaq	Member		

INTERNATIONAL BENEFACTORS:

Swiss Friends of MALC, Switzerland
Ms. Ruth Zumbuehl, Switzerland
Mr. Braukmann, Germany
Mr. Harald Kischlat, Germany
Mr. Werner Sygnecki, Germany
Ms. Claudia Villani, Austria
Mr. Martin Van Camp, Belgium
Ms. Sorya Lippert, Germany
Mr. Michael Hing Wuen, Hong Kong
Ms. Regine De Clercq-Ali, Monbil Foundation, Italy
Mr. Emil Wyss, Former Consul General of Switzerland, Karachi

DONATIONS IN KIND:

Medicines and Medical Supplies		Kitchen Supplies and Miscellaneous Donations in Kind	
	ATCO Laboratories (Pvt) Ltd.		Agar International (Pvt) Ltd.
	Brookes Pharmaceuticals (Pvt) Ltd.		Agro Processors & ATM Gases (Pvt) Ltd.
	Getz Pharma (Pvt) Ltd		Dalda Foods (Pvt) Ltd.
	Hilton Pharma (Pvt) Ltd.		Edhi Welfare Trust
	Sami Pharmaceuticals		Mirpurkhas Sugar Mills
	Zafa Pharmaceuticals Private Ltd.		Nestle Pakistan Ltd.
	Bosch Pharmaceuticals (Pvt) Ltd.		Unilever Pakistan
	Provincial TB Control Program (PTP)		Shahpur Industries
	Reckitt Benckiser Pakistan Ltd.		Tapal Tea (Pvt) Ltd.
	Barrett Hodgson Pakistan (Pvt) Ltd.		
	Hospital Supply Corporation		

CORPORATE/INSTITUTIONAL DONORS 2019

DONORS	AMOUNT	DONORS	AMOUNT
PAKISTAN PETROLEUM LIMITED	16,950,000	INDUS MOTOR COMPANY LIMITED	200,000
ICI PAKISTAN FOUNDATION	7,198,100	MULLER & PHIPPS PAKISTAN (PRIVATE) LIMITED	200,000
HBL FOUNDATION	5,000,000	HAJI MUHAMMAD MEMORIAL TRUST	200,000
HANIF ADAMJEE CHARITABLE TRUST	1,500,000	AL MEEZAN INVESTMENT MANAGEMENT LTD.	200,000
JUBILEE LIFE INSURANCE	1,500,000	PAK ARAB PIPELINE COMPANY LIMITED	200,000
PAKISTAN BAIT-UL-MAL	1,270,000	FAYSAL ASSET MANAGEMENT LIMITED	200,000
MUHAMMAD AMIN WAKF ESTATE	1,000,000	ABL ASSET MANAGEMENT	200,000
UNITED BANK LIMITED	850,000	CDC TRUSTEE AL-AMEEN ISLAMIC DEDICATED	153,569
CITI BANK	800,000	SONERI BANK	150,000
NEWZEALAND HIGH COMMISSION	700,000	JAFFERJEES (PVT) LIMITED	150,000
HILTON PHARMA PVT LTD	682,300	CDC TRUSTEE AL-AMEEN SHARIAH S F	128,189
THE I- CARE FOUNDATION	562,341	CDC TRUSTEE PIML ISLAMIC EQUIT	125,000
DAWOOD HABIB MEMORIAL TRUST (MUSLIM HABIB)	500,000	MEEZAN BANK LIMITED	100,000
HABIB METROPOLITAN BANK LTD.	500,000	KAUSAR GHEE MILLS PVR LTD	100,000
CYAN LTD	500,000	HAJI MUHAMMAD BENEVOLENT TRUST	100,000
ENGRO FOUNDATION	500,000	CDC TRUSTEE JS ISLAMIC DEDICATED EQUITY FUND	76,086
HAJI MUHAMMAD WELFARE TRUST	400,000	CDC TRUSTEE JS ISLAMIC FUND	57,075
THAL LIMITED	350,000	CDC TRUSTEE A-AMEEN ISLAMIC A.A.F	54,327
ORIX LEASING PAKISTAN LIMITED	300,000	UBL FUND MANAGERS LIMITED	50,000
COWASJEE FOUNDATION	300,000	INSHIPPING (PRIVATE) LIMITED	50,000
CLIPPERS	300,000	AGRIAUTO INDUSTRIES LIMITED	50,000
MCBFSL TRUSTEE ABL ISL. STOCK FUND	298,349	HELIX PHARMA (PVT) LIMITED	50,000
DR. HASHMATULLAH MALIK / TAJ MEDICAL CENTRE	250,000	CDC TRUSTEE AL-AMEEN ISL. R.S.F.E.S.F	30,097
FEROZ VERANI C/O AGHA SUPER MARKET	250,000	KANDAWALLA TRUST	30,000
THE HUB POWER COMPANY	250,000	HOSPITAL SUPPLY CO.	25,000
SOURCE TEX	250,000	EFU GENERAL INSURANCE LTD	25,000
K-ELECTRIC LIMITED	200,000	TAPAL ENERGY (PRIVATE) LIMITED	25,000
ALLIED ENGINEERING & SERVICES PVT. LTD.	227,000		

We wish to acknowledge & convey our sincere thanks to all our friends & well-wishers who helped us through donations. For sake of brevity, above is a list of those donors, who have contributed Rs.25,000/- and above during 2019.

ZAKAT/DONATIONS:

DONORS	AMOUNT	DONORS	AMOUNT
LIBERTY MILLS LIMITED	1,250,000	MR. AZAM SHAFQAT	200,000
MR. R. ZAKIR MAHMOOD ASLAM	1,200,000	MR. TARIQ MOHIYUDDIN KHAN	200,000
MR. MOHAMMAD ASLAM	1,000,000	MUHAMMAD SHAFI TRUST	200,000
SOORTY ENTERPRISES PPVT LTD	1,000,000	MR. KHALEEL AHMED	200,000
MR. MUIB ISLAM	689,413	MR. SOHAIL	200,000
ST. PATRICK'S GIRLS' HIGH SCHOOL	538,301	MR. SAAD IQBAL	185,000
MR. ABDUL RAZAK DAWOOD	500,000	MR. ARSHAD SULTAN	175,000
MS. AMBREEN KHALID	500,000	MR. ATHAR SULTAN	175,000
MRS. NIDA ASLAM	480,000	MS. SAJIDA SULTAN	150,000
MR. MICHAEL HY TONG	474,245	MR. MUHAMMAD TARIQ BUTT	150,000
AL BADAR WELFARE TRUST	400,000	DAR UL ADVIAT	150,000
MR. TAUQEER EHSAAN RANA	400,000	MR. MUNAWAR ALI KASSIM	150,000
MR. MUHAMMAD ABDULLAH	350,000	SYED GHAZANFAR ALI AHMED	150,000
MR. MICHAEL PRIEBIS	322,866	MR. SHEHRAYAR SALIM SHAM	150,000
ST. MICHAEL'S CONVENT SCHOOL	311,670	MR. JAHNGIR MALIK	150,000
SYED MOHAMMAD QASIM KAZMI	310,000	DR. NADIS	138,200
MS. SADAF SAEED	300,000	KARACHI HIGH SCHOOL	128,145
ST. PATRICK'S BOYS' SCHOOL	288,663	MS. NADIA LAKHANI	125,000
MR. SALMAN M. SHAIKH	266,455	HAJI ALLAH RAKHA SULTAN ALI & FAMILY	120,000
MR. EMIL JOHANN WYSS & OR ARIYANI W.	250,000	MR. MOHAMMAD AKHTAR	110,000
MS. SHAHEEN AMIN	250,000	MS. SANOBER AHSAN	100,000
(LATE) M. I. MAHOMEDY & FAMILY	250,000	BUSINESS LINK INTERNATIONAL PRIVATE	100,000
MR. MOHSIN GODIL	250,000	MS. AYESHA NAFEES	100,000
MR. ABDUR RAHIM	250,000	THE AKBAR FOUNDATION	100,000
MR. SHEHZAD HASAN	250,000	MR. MUHTASHIM AHMED ASHAI	100,000
MR. GHUFRAN	250,000	MS. MASHMOOMA ZEHRA MAJEED	100,000
ST. JOSEPH'S CONVENT SCHOOL	222,684	AES SCHOOL FOR GIRLS (OVERSEAS CAMPUS)	100,000
MAMA PARSIS GIRLS' SEC. SCHOOL	203,820	KARACHI GRAINS PVT LTD	100,000
ANTHONY F. D'SOUZA & SIENNA D'SOUZA	200,000	MAJEED MARGARET WELFARE TRUST	100,000
MR. AQUEEL E. MERCHANT	200,000	KHAWAJA BASHIR AHMED	100,000
MR. HASHIM RAZA	200,000	MR. MUHAMMAD HABIB UR REHMAN	100,000
MS. LILY R. DOSSABHOY	200,000	MR. TARIQ HAFIZ KHAN	100,000
MR. KAMRAN MIRZA	200,000	MR. ABDUL QADIR BUKSH PATHAN	100,000
MR. KHALEEL AHMED	200,000	MR. IMRAN MAQBOOL	100,000
MR. SHAH MANSOOD	200,000	MR. IRFAN MUNEER	100,000
AES SCHOOL FOR GIRLS (MAIN CAMPUS)	200,000	CHHOTANIS	100,000
ANAM FABRICS PRIVATE LIMITED	200,000	MR. KHALID MALIK CHAWALA	100,000
ARIF HABIB	200,000	MRS. GHAZALA AHMED	100,000
SAUDI PAK INDUSTRIAL & AGRICULTURAL	200,000	MR. MUHAMMAD ALMAGIR KHAN	100,000

ZAKAT UTILIZATION REPORT DURING THE YEAR 2019

RECEIPT & UTILIZATION ACCOUNT		
For the period January to December 2019		
ZAKAT ACCOUNT		
	Rupees	
RECEIPT		
Zakat received during 2019	22,862,760.13	
Total receipts upto December 31, 2019		22,862,760.13
UTILIZATION		
ITTEHAD MANZIL – (Home for Patients with Disabilities)		
Food & Ration Supplies	2,459,884.71	
Utilities - Gas, Electric & Generator Fuel	323,005.50	
Medicines - Local Drugs	52,690.25	
Bedding and Linen	20,587.50	
Laundry Expenses	52,213.50	
Salaries & Allowances Medical staff	1,046,304.00	
Salaries & Allowances Admin staff	611,796.60	4,566,482.06
HOSPITAL – (Wards)		
Food & Ration Supplies	3,569,159.54	
Medicines – Local Drugs	4,061,098.62	
Medical Supplies & Lab solution	913,441.02	
Bedding & Linen	223,230.00	
Laundry Expenses	339,150.00	9,106,079.18
EYE HEALTH CARE PROGRAM		
Salaries & Allowances Doctors	3,469,941.00	
Salaries & Allowances Medical staff	2,179,795.00	5,649,736.00
MALC LEPROSY CENTRES KARACHI		
Medicines – Local Drugs	2,157,036.90	
Salaries & Allowances Doctors	1,383,426.00	3,540,462.90
Total Utilization of Zakat upto December 31, 2019		22,862,760.13

SHARI'AH COMPLIANCE CERTIFICATION



ALHAMD SHARIAH ADVISORY SERVICES

(PVT) LIMITED

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ
نَحْمَدُهُ وَنُصَلِّي عَلَى رَسُولِهِ الْكَرِيمِ

NOV 30, 2019

SHARIAH APPROVAL FOR PAYING ZAKAT TO

MARIE ADELAIDE LEPROSY CENTRE

INTRODUCTION:

MALC (Marie Adelaide Leprosy Centre) is one of the largest NGO in the country, with its headquarters in Karachi. Its core activities concern Leprosy Elimination, TB & Blindness Control, Mother & Child Health Care (MCHC) & Community Based Inclusive Development (CBID) all over the country while also serving as a secondary referral facility for Leprosy patients, nationwide, who are treated FREE OF CHARGE, irrespective of caste or creed.

METHOD OF UTILIZATION OF ZAKAT AND DONATION:

The financial needs of MALC are being covered by General Donations & Zakat that individuals & corporate contribute. After verification of Zakat eligibility, the specifically assigned official of MALC requests permission to collect Zakat on behalf of Zakat eligible patients and to spend it directly on their medical and healthcare expenses as per the conditions of Zakat form. According to these limits MALC uses Zakat funds very carefully.

SHARIAH RULING:

We confirm that Marie Adelaide Leprosy Centre has appointed Alhamd Shariah Advisory Services (Pvt.) Limited as Shariah Advisor to guide the management in collection and utilization of Zakat and to ensure that the whole process is Sharia-compliant, both in letter and in spirit.

Based on our review, we hereby confirm that MALC collects and spends Zakat fund in accordance with the instructions of Shariah. It is also confirmed that whosoever will give Zakat to Marie Adelaide Leprosy Centre; their Zakat will be paid as per Shariah point of view.

May Allah give in the mission of Marie Adelaide Leprosy Centre more blessings and sincerity. Aameen

Mufti Muhammad Ibrahim Essa
Chief Executive Officer
Alhamd Shariah Advisory (Pvt.) Limited



Mufti Uzair Bilwani
Research Scholar
Alhamd Shariah Advisory (Pvt.) Limited

Note: This certificate is valid till 30th Nov 2020

INDEPENDENT AUDITOR'S REPORT

To the Board of Governors of Marie Adelaide Leprosy Centre

Report on the Audit of the Financial Statements

Opinion

We have audited the annexed financial statements of **Marie Adelaide Leprosy Centre** (the Organization), which comprise the balance sheet as at **31 December 2019**, and the income and expenditure account, the statement of comprehensive income, the statement of changes in accumulated fund, the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies and other explanatory information, and we state that we have obtained all the information and explanations which, to the best of our knowledge and belief, were necessary for the purposes of the audit.

In our opinion and to the best of our information and according to the explanations given to us, the balance sheet, the income and expenditure account, the statement of comprehensive income, the statement of changes in accumulated fund and the statement of cash flows together with the notes forming part thereof conform with the accounting and reporting standards as applicable in Pakistan.

Basis for Opinion

We conducted our audit in accordance with International Standards on Auditing (ISAs) as applicable in Pakistan. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Organization in accordance with the International Ethics Standards Board for Accountants' Code of Ethics for Professional Accountants as adopted by the Institute of Chartered Accountants of Pakistan (the Code) and we have fulfilled our other ethical responsibilities in accordance with the Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Board of Governors for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the accounting and reporting standards as applicable in Pakistan and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Organization or to cease operations, or has no realistic alternative but to do so.

The Board is responsible for overseeing the Organization's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs as applicable in Pakistan will always detect a material

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misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with ISAs as applicable in Pakistan, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Association's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Association's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditors' report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditors' report. However, future events or conditions may cause the Association to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the Board regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Other matter

The financial statements of the Organization for the year ended 31 December 2018, were audited by another auditor who expressed modified opinion on those financial statements on 21 June 2019 in respect of completeness of recording some portion of income received in cash from donors.

The engagement partner on the audit resulting in this independent auditor's report is Shaikh Ahmed Salman.



Chartered Accountants

Place: Karachi

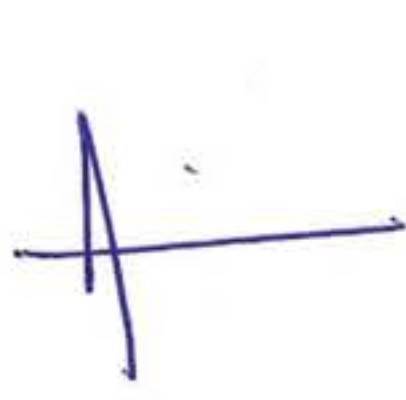

Date: 13 August 2020

**MARIE ADELAIDE LEPROSY CENTRE
BALANCE SHEET
AS AT DECEMBER 31, 2019**

	Note	2019 ----- (Rupees) -----	2018 -----
ASSETS			
NON-CURRENT ASSETS			
Property and equipment	5	82,555,684	79,671,303
CURRENT ASSETS			
Inventories	6	6,680,458	7,067,749
Advances, deposits and receivables	7	15,033,624	19,197,881
Short-term investments	8	328,574,063	302,366,383
Accrued mark-up	9	15,959,842	9,743,407
Cash and bank balances	10	11,231,973	45,906,620
		<u>377,479,961</u>	<u>384,282,040</u>
TOTAL ASSETS		<u><u>460,035,645</u></u>	<u><u>463,953,343</u></u>
NON-CURRENT LIABILITIES			
Staff retirement benefits - gratuity	13	28,556,899	27,462,746
CURRENT LIABILITIES			
Liabilities against 'revolving funds held in trust'	14	35,360,564	33,346,666
Trade and other payable	15	8,424,054	11,666,966
		<u>43,784,618</u>	<u>45,013,632</u>
NET ASSETS		<u><u>387,694,127</u></u>	<u><u>391,476,965</u></u>
NET ASSETS REPRESENTED BY:			
Unrestricted funds			
- General funds		167,912,008	164,244,846
Restricted funds			
- Deferred income	11	94,833,238	118,041,973
- Endowment Fund	12	124,948,881	109,190,146
		<u>219,782,119</u>	<u>227,232,119</u>
		<u><u>387,694,127</u></u>	<u><u>391,476,965</u></u>

The annexed notes from 1 to 20 form an integral part of these financial statements.


Mervyn Francis Lobo
Chief Executive Officer

 
Ainee Shehzad Irshad Hussain
Members of Governing Body

MARIE ADELAIDE LEPROSY CENTRE
STATEMENT OF INCOME AND EXPENDITURE
FOR THE YEAR ENDED DECEMBER 31, 2019

	2019			2018		
	Unrestricted	Restricted (note 11)	Total	Unrestricted	Restricted	Total
INCOME						
Donations						
- Foreign	-	158,574,832	158,574,832	-	159,340,196	159,340,196
- Local	14,406,799	46,569,264	60,976,063	16,000,912	35,113,480	51,114,392
- Government of Sindh	-	20,020,000	20,020,000	-	12,500,000	12,500,000
	<u>14,406,799</u>	<u>225,164,096</u>	<u>239,570,895</u>	<u>16,000,912</u>	<u>206,953,676</u>	<u>222,954,588</u>
Deferred income						
Opening balance	-	118,041,973	118,041,973	-	155,282,487	155,282,487
Closing balance	-	(94,833,238)	(94,833,238)	-	(118,041,973)	(118,041,973)
Donation income recognised	<u>14,406,799</u>	<u>248,372,831</u>	<u>262,779,630</u>	<u>16,000,912</u>	<u>244,194,190</u>	<u>260,195,102</u>
Other income						
- Fund raising events / school fees and other related income	-	19,128,013	19,128,013	-	19,796,561	19,796,561
- Capital gain on mutual funds	-	-	-	955,860	-	955,860
- Income / gain on other investments and bank deposits	23,613,448	172,765	23,786,213	13,413,446	-	13,413,446
- Gain on disposal of property and equipment	493,216	-	493,216	933,000	-	933,000
Total income for the year	<u>38,513,463</u>	<u>267,673,609</u>	<u>306,187,072</u>	<u>31,303,218</u>	<u>263,990,751</u>	<u>295,293,969</u>
EXPENDITURE						
Salaries and training expenses	(1,660,205)	(180,682,994)	(182,343,199)	(2,882,226)	(177,169,744)	(180,051,970)
Maintenance expenses (Operations)	(17,871,471)	(68,885,601)	(86,757,072)	(10,657,194)	(68,803,066)	(79,460,260)
Administration expenses (Operations)	(2,087,306)	(18,105,014)	(20,192,320)	(2,584,358)	(17,747,391)	(20,331,749)
Exchange loss	(2,400)	-	(2,400)	(3,130)	-	(3,130)
Depreciation	(13,224,919)	-	(13,224,919)	(12,887,701)	(270,550)	(13,158,251)
Total expense for the year	<u>(34,846,301)</u>	<u>(267,673,609)</u>	<u>(302,519,910)</u>	<u>(29,014,609)</u>	<u>(263,990,751)</u>	<u>(293,005,360)</u>
Surplus for the year	<u>3,667,162</u>	<u>-</u>	<u>3,667,162</u>	<u>2,288,609</u>	<u>-</u>	<u>2,288,609</u>

The annexed notes from 1 to 20 form an integral part of these financial statements.


Mervyn Francis Lobo
 Chief Executive Officer



 
Ainee Shehzad **Irshad Hussain**
 Members of Governing Body

MARIE ADELAIDE LEPROSY CENTRE
STATEMENT OF CHANGES IN ACCUMULATED FUND
FOR THE YEAR ENDED DECEMBER 31, 2019

	Unrestricted funds	Restricted funds			Total
	General fund	Endowment Fund	Deferred income	Sub-Total	
Note	----- (Rupees) -----				
Balance as at December 31, 2017	161,956,237	99,579,798	155,282,487	254,862,285	416,818,522
Surplus transferred from income and expenditure account	2,288,609	-	-	-	2,288,609
Net deferred income / unutilized restricted funds transferred from / (to) income and expenditure account	11 -	9,610,348	(37,240,514)	(27,630,166)	(27,630,166)
Balance as at December 31, 2018	<u>164,244,846</u>	<u>109,190,146</u>	<u>118,041,973</u>	<u>227,232,119</u>	<u>391,476,965</u>
Surplus transferred from income and expenditure account	3,667,162	-	-	-	3,667,162
Net deferred income / unutilized restricted funds transferred from / (to) income and expenditure account	11 -	15,758,735	(23,208,735)	(7,450,001)	(7,450,001)
Balance as at December 31, 2019	<u>167,912,008</u>	<u>124,948,881</u>	<u>94,833,238</u>	<u>219,782,119</u>	<u>387,694,127</u>

The annexed notes from 1 to 20 form an integral part of these financial statements.



Mervyn Francis Lobo
 Chief Executive Officer

 
Ainee Shehzad Irshad Hussain
 Members of Governing Body

MARIE ADELAIDE LEPROSY CENTRE
CASH FLOWS STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2019

Note	2019 ----- (Rupees) -----	2018 -----
Cash flows from operating activities:		
Surplus for the year	3,667,162	2,288,609
Adjustments for non cash items:		
Depreciation	13,224,919	13,158,251
Return on Investments and bank deposits	(23,786,213)	(13,413,446)
Provision for staff retirement benefits - leave encashment	852,810	5,109
Provision for staff retirement benefits	1,208,998	(2,978,039)
Amortisation premium on short term investments	557,688	1,048,205
Capital gain on mutual funds	-	(955,860)
Gain on disposal of property and equipment	(493,216)	(933,000)
	(8,435,014)	(4,068,780)
Working capital changes		
Decrease / (increase) in inventories	387,291	(66,084)
Decrease / (increase) in advances, deposits and receivables	4,164,257	(7,566,738)
(Decrease) / increase in Trade and other payable	(3,242,912)	1,017,617
Increase in liabilities against 'revolving funds held in trust'	2,013,898	272,892
Increase in restricted funds - Endowment Fund	15,758,735	9,610,348
Decrease in restricted funds - deferred income	(23,208,735)	(37,240,514)
	(4,127,467)	(33,972,479)
Payments of staff retirement benefits	(967,655)	(337,916)
Cash used in operating activities	(9,862,973)	(36,090,566)
Cash flows from investing activities		
Purchase of property and equipment	(16,118,084)	(22,027,320)
Proceeds from sale of property and equipment	502,000	933,000
Additions to short term investments	(328,574,063)	(277,759,324)
Proceeds from short term investments	301,808,695	318,923,531
Mark-up received on investments and bank deposits	17,569,778	9,956,862
Net cash used in investing activities	(24,811,674)	30,026,749
Net decrease in cash and cash equivalents	(34,674,647)	(6,063,817)
Cash and cash equivalents at the beginning of the year	45,906,620	51,970,437
Cash and cash equivalents at the end of the year	11,231,973	45,906,620

The annexed notes from 1 to 20 form an integral part of these financial statements.


Mervyn Francis Lobo
Chief Executive Officer

 
Ainee Shehzad Irshad Hussain
Members of Governing Body

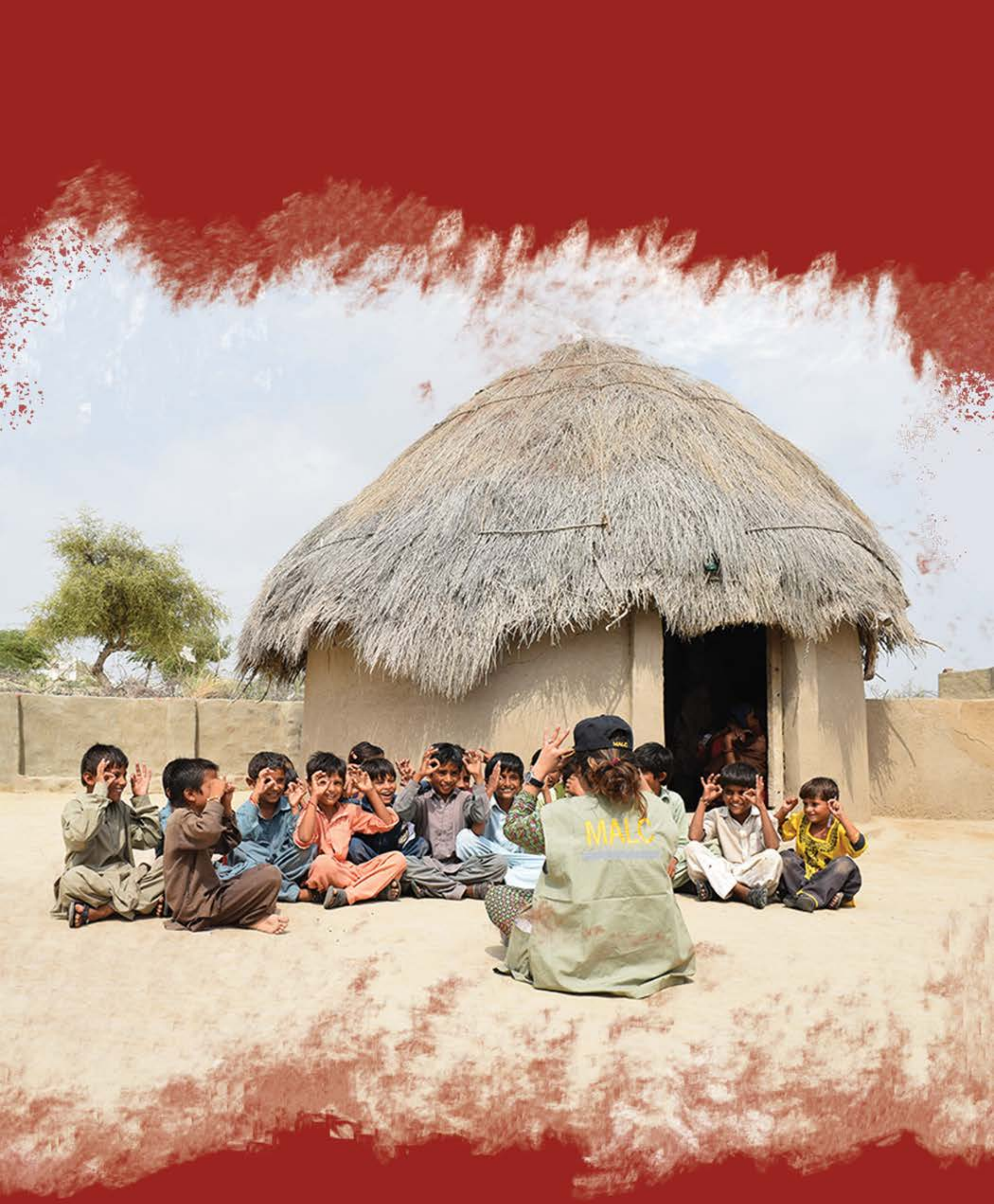
APPEAL:

MALC is providing free treatment to the patients affected by Leprosy, Tuberculosis and Eye-related diseases. With your support we have been able to treat thousands of people in 157 centres across the country. In the year 2019, our friends have supported us with Zakat amounting to Rs. 22,862,760 which was spent on free treatment and rehabilitation of Leprosy patients in the hospital in line with Shari'ah guidelines. We are confident that your support will continue to help poor and needy people of the country. To help continue our work, individual supporters can contribute with Zakat and Donations for the following:

- Rs. 5,000 to operate one deserving Cataract patient with Intra-Ocular Lens.
- Rs. 10,000 for complete treatment of a Leprosy patient.
- Rs. 15,000 for rehabilitation of a patient with Disabilities.
- Rs. 25,000 for surgical intervention of a Leprosy patient or a person with disabilities.
- Rs. 30,000 to support the education of one child for one year.
- Rs. 50,000 to set up a small business for a person with disabilities to live a life with dignity.

Individuals/Corporations can adopt one of our following projects for at least 2 to 3 years to meet its annual running cost and to ensure continuation of health services for deserving patients and communities free of charge. Project proposals are available at MALC and can be forwarded on request:

- Rs. 7,000,000 Food expenses of patients admitted in Wards/Ittehad Manzil.
- Rs. 5,000,000 Purchase of TB medicines.
- Rs. 5,000,000 Purchase of general medicines.
- Rs. 3,500,000 Maintaining Ittehad Manzil (Day Care House for Patients with Disabilities).
- Rs. 2,500,000 Running expenses of one ward in the hospital (indoor care of ulcer patients).
- Rs. 1,500,000 Purchase of Intra-Ocular Lenses (IOLs) for deserving Cataract patients.
- Rs. 1,500,000 Running of a Leprosy-TB, Blindness Control Centre.
- Rs. 1,500,000 Community Based Inclusive Development project for PWDs.
- Rs. 1,500,000 Up-gradation of medical equipment.
- Rs. 1,500,000 Health facilities of patients in MALC OPD.
- Rs. 1,200,000 Procurement of eye medicines.
- Rs. 500,000 Conducting one Eye surgical camp in remote areas.
- Rs. 300,000 Conducting one Medical camp in remote areas.



MARIE ADELAIDE LEPROSY CENTRE

Mariam Manzil, A.M. 21, Off Shahrah-e-Liaquat, Saddar, Karachi.

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[f](#) MarieAdelaideLeprosyCentre | [t](#) @malcpak | [i](#) @malcpak | [v](#) /malcpak | [in](#) /malc-pak