



MOAS

MAGAZINE

2018

One Year
of
Aid Stations

**Monsoon
season** in
Bangladesh

MOAS'
**Fourth
Anniversary**

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MOAS has been operational since 2014 and is registered in Malta, Italy and the UK, as well as having legal representation in Germany and the USA. MOAS is an international humanitarian organisation dedicated to mitigating loss of life and alleviating suffering for the world's most vulnerable communities.

MOAS Co-Founder & Director: Regina Egle Liotta Catrambone

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MOAS

An introduction from our Director

2018 was MOAS' fourth year of activity and, in line with our founding principles, we have continued to evolve to respond to challenges in the field.

In September 2017, we began our first mission on dry land in Bangladesh, in response to the humanitarian crisis triggered by the exodus of hundreds of thousands of Rohingya Muslims fleeing violence and persecution in Myanmar. After setting up two Aid Stations, or primary health centres, we treated over 90,000 patients in Shamlapur and Unchiprang. Throughout 2018 we made our Aid Stations available as vaccination centres, supporting campaigns led by the WHO and the Bangladeshi government. The MOAS team also took a leading role in preparations for the monsoon season, organising training and activities designed to prevent the devastation caused by high winds, heavy rains and flooding. The expertise developed in this area will be at the heart of our presence in Bangladesh in 2019, which will focus on training and capacity building, in line with the priorities established by the Joint Response Plan for the Rohingya Humanitarian Crisis. Meanwhile, our Aid Stations will be managed by the International Rescue Committee, who will continue to provide medical assistance to Rohingya refugees and their host communities.

Sadly, 2018 has seen little progress in responding to migration crises around the world. In fact, our global community is currently failing to respect and uphold human rights, as defined by many international conventions. The number of border walls and fences is growing, as governments promise an illusion of security at the expense of the most vulnerable. The Central Mediterranean route has been used by smugglers less than in previous years, but this has not meant

a lower rate of deaths at sea, nor an improvement in living conditions for those already on European soil. Meanwhile, Spain has welcomed the highest number of migrants seen in recent years, overtaking Greece and Italy. Traffic along the Balkan route, formerly abandoned, is once again on the rise, and an untold number of people are still trapped at European borders.

The crisis in Yemen has only deepened in the past year, as its death toll rises and malnutrition continues to spread. As I write, at the end of 2018, the death of little Amal has shaken the world for a few days, but nothing tangible has been done to prevent the death of other children. Around 14 million Yemenis – half the country's population – are now at risk of famine and 400,000 children are suffering from severe malnutrition. It is estimated that a child dies of starvation roughly every ten minutes.

But this has also been the year I met Alpha, a 20-year-old boy rescued at sea by MOAS in October 2016, who told me he had lost hope of surviving before he caught sight of our rescuers. Thanks to the support of Sant'Egidio, two years later Alpha speaks fluent Italian and is starting an internship; my hope is that Alpha will be helped to integrate further, and to become an active member of our shared society. In Bangladesh, meanwhile, Mohammed Yousuf has just celebrated his first birthday: born at the Aid Station in Shamlapur to a young Rohingya couple, Mohammed has given a deeper and more authentic meaning to the Christmas season for everyone at MOAS.

As we renew our commitment to assisting the most vulnerable communities in the world, we hope that, after all, the seeds of peace have been planted in 2018 and that they may germinate in 2019. Among the many measures that could help to manage global humanitarian crises, humanitarian corridors and functioning systems of relocation and resettlement would undoubtedly help to combat human trafficking and protect the world's most vulnerable people. The answer to global migratory challenges cannot be indifference, but must be rooted in solidarity and mercy, in our human capacity to feel the pain of the children, women and men risking their lives to seek peace and security.



THE ROHINGYA IN

BANGLADESH

On the 25th of August 2017, long-standing tensions in northern Rakhine State erupted into a campaign of brutal repression at the hands of the Burmese military. The Rohingya people, a Muslim ethnic minority, are considered illegal immigrants from Bangladesh and therefore denied citizenship in Myanmar, despite having lived in Rakhine State for centuries.

Today, almost 1 million Rohingya are living in under-served, under-funded refugee camps in the Cox's Bazar region of Bangladesh.

IOM Monthly Situation report, Nov 2018

919,000 Rohingya refugees in Cox's Bazar

706,000 arrived since 25th August 2017

Since August 2017, MOAS has focused on providing humanitarian assistance to Rohingya refugees who have fled violence and persecution in Myanmar, and entered neighbouring Bangladesh in search of assistance and safety.

The medical context is grim. As a population highly marginalised in Myanmar, few Rohingya people have ever received adequate healthcare. Meanwhile, endemic poverty in rural Bangladesh means local populations also have limited access to medical facilities.

Conditions on the ground are unhygienic and highly volatile. The spread of infections is facilitated by overcrowding in the camps and settlements. Access to clean water and sanitation facilities is extremely limited, increasing the risk of water-borne diseases – a problem only exacerbated by the region's monsoon season.

Shamlapur was affected by the unparalleled exodus that led around 700,000 Rohingya to seek sanctuary in Bangladesh in the space of a couple of months. This was not the first Rohingya exodus in recent history, but it was the largest, and its consequences have been devastating.

The impact of our work in the field was immense and rewarded our efforts to save lives. To the end of 2018, MOAS medical teams in Bangladesh treated 91,312 patients. 39% of our patients were women, and more than 46% were children.

Total Patients: Women, Men, Children

Category	Count	Percentage
Adult Women	42,370	46.4%
Adult Men	35,360	39.0%
Children	13,312	14.6%

Shamlapur Split: Women, Men, Children

Category	Count	Percentage
Adult Women	23,482	44.7%
Adult Men	21,778	41.5%
Children	7,224	13.8%

Unchiprang Split: Men, Women, Children

Category	Count	Percentage
Adult Women	18,888	48.6%
Adult Men	13,855	35.7%
Children	6,088	15.7%

Month	SHAMILAPRA	UNICHIPRA
Oct 2017	3800	3800
Nov 2017	7800	4800
Dec 2017	7200	6200
Jan 2018	4800	4200
Feb 2018	4800	4200
Mar 2018	4500	3500
Apr 2018	3200	2800
May 2018	3000	2800
Jun 2018	2800	2800
Jul 2018	3800	3200
Aug 2018	3200	2800
Sep 2018	2800	2500
Oct 2018	2500	2200
Nov 2018	1800	1500

AVERAGE NUMBER OF PATIENTS PER DAY PER MONTH

This bar chart displays the average number of patients per day per month for three categories: Shamlapur (blue), Unchprang (green), and Grand Total (teal). The data is presented for the months of October, November, December, January, February, March, April, May, June, July, August, September, October, and November. The Grand Total values are consistently the highest, followed by Unchprang, and then Shamlapur.

Month	SHAMLAPUR	UNCHPRANG	Grand Total
OCTOBER	0.0	191.1	191.1
NOVEMBER	260.3	248.3	421.0
DECEMBER	244.7	197.4	431.5
JANUARY	186.4	107.7	279.8
FEBRUARY	165.7	143.8	310.6
MARCH	145.5	102.7	248.3
APRIL	84.4	97.1	171.5
MAY	69.9	72.2	132.4
JUNE	79.0	78.0	153.3
JULY	103.8	59.2	166.0
AUGUST	67.4	72.6	167.0
SEPTEMBER	80.1	68.5	150.0
OCTOBER	71.2	55.0	126.2
NOVEMBER	56.4	56.4	56.4

The figure consists of three pie charts arranged horizontally, separated by vertical lines. Each chart represents the gender distribution of children in a specific location.

- Total Children split per Gender:** A large pie chart showing a split between females (F, teal) and males (M, dark blue). The female segment is labeled with 21,039 and 49.66%. The male segment is labeled with 21,329 and 50.34%. A legend below indicates F = M.
- SHAMLAPUR Children split per Gender:** A smaller pie chart showing a split between females (F, teal) and males (M, dark blue). The female segment is labeled with 11,337 and 48.28%. The male segment is labeled with 12,145 and 51.72%. A legend below indicates F = M.
- UNCHIPRANG Children split per Gender:** A smaller pie chart showing a split between females (F, teal) and males (M, dark blue). The female segment is labeled with 9,184 and 48.63%. The male segment is labeled with 9,702 and 51.37%. A legend below indicates F = M.

Total Children split per Age

Age Group	Count	Percentage
<6weeks	5,269	12.44%
7 weeks - 2y	14,145	33.39%
>2y-12y	22,261	52.54%
13y-17y	693	1.64%

Unchirang Split of Children

Age Group	Count	Percentage
<6weeks	2,616	14.05%
7 weeks - 2y	410	2.17%
>2y-12y	9,093	48.15%
13y-17y	283	1.51%

SHAMLAIPUR Patients split per Community

Community	Percentage	Count
LOCAL	24.13%	22,032
NIRM	27.55%	25,154
GRM	5.80%	5,298
Other	42.52%	38,418

• LOCAL • NIRM • GRM

UNCHIPRANG Patients split per Community

Community	Percentage	Count
LOCAL	33.34%	30,441
NIRM	9.19%	8,352
GRM	0.04%	25
Other	57.43%	52,473

• LOCAL • NIRM • GRM

- Interesting to note here is how the proportion of Local vs Rohingya patient is significantly different between Shamlaipur and Unchiprang.

This is a reflection of the sites themselves and the camps in relation to local populations.

DISEASE CASES SEEN IN % OF TOTAL

Disease	% of Total
Mumps	0.014%
AWD	0.027%
Dysentery	0.022%
PID	0.052%
Pneumonia	0.002%
Anemia	0.000%
Pregnancy	0.008%
MI	0.039%
PTI	0.028%
AIDS	0.000%
Infectious Mononucleosis	0.000%
Cholera	0.001%
Gonorrhea	0.001%
AIDS	0.000%
Ascaris	0.006%
TB	0.003%
Suspected TB	0.000%

- Note that for each disease, cases that were labelled as that disease only and as "disease + fever" or "disease + cough etc." were also included.
- Also note that pregnancy includes miscarriages, stillbirths, and post-partum conditions.

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- Also note that pregnancy includes miscarriages, stillbirths and post-partum conditions.

Total Patients split per Gender

Gender	Count	Percentage
F	34,352	37.62%
M	56,960	62.38%

UNCHIPRANG Patients split per Gender

Gender	Count	Percentage
F	15,791	40.67%
M	23,037	59.33%

SHAMLAPUR Patients split per Gender

Gender	Count	Percentage
F	18,561	35.37%
M	33,923	64.63%

The figure consists of three pie charts arranged horizontally, separated by vertical lines. The first chart on the left is titled 'Total Patients Split per Age' and shows the distribution of 91,352 total patients by age group. The second chart in the middle is titled 'Shamlapur Patients: Adults VS Children' and shows the distribution of 26,450 patients from the Shamlapur facility by age group. The third chart on the right is titled 'Unchirang Patients: Adults VS Children' and shows the distribution of 24,852 patients from the Unchirang facility by age group. In all charts, the darker blue segment represents 'Adults' and the lighter blue segment represents 'Children'.

Category	Adults (Count)	Adults (%)	Children (Count)	Children (%)
Total Patients Split per Age	48,942	53.60%	42,370	46.40%
Shamlapur Patients: Adults VS Children	23,482	55.26%	29,002	44.74%
Unchirang Patients: Adults VS Children	18,888	51.35%	19,930	48.65%

Infants Over Time

Month	Total
Oct 2017	25
Nov 2017	115
Dec 2017	100
Jan 2018	75
Feb 2018	80
Mar 2018	80
Apr 2018	50
May 2018	65
Jun 2018	40
Jul 2018	15
Aug 2018	15
Sep 2018	20
Oct 2018	5

Infants Over Time Per Camp

Month	SHAM/PRAC	UNICH/PRAC
Nov 2017	75	25
Dec 2017	45	45
Jan 2018	35	45
Feb 2018	30	55
Mar 2018	35	40
Apr 2018	20	50
May 2018	10	25
Jun 2018	15	15
Jul 2018	18	8
Aug 2018	10	10
Sep 2018	5	15
Oct 2018	0	5

- We can observe a slight peak in May 2018, 9 months after the crackdown by the Burmese military began.
- Unchiprang had a higher number of children under 6 weeks than Shamlapur overall, however none have been seen at Unchiprang in July or October.

Split per Community over Time

Month	LOCAL (%)	REM (%)	GEM (%)
Blank	0	0	0
Sept 2017	0	0	0
Oct	15	5	8
Nov 2017	65	60	15
Dec	45	75	15
Jan	25	55	10
Feb	35	50	5
Mar	30	45	5
Apr	18	30	10
May	15	25	10
Jun 2018	12	28	5
Jul	10	35	5
Aug	18	30	5
Sep	15	28	5
Oct	12	22	5
Nov	10	15	5

- Overall, there have been significantly more new Rohingya patients than any other community.
- A peak was seen in the new Rohingya community in December.
- An increase in all communities can be observed between the months of June and July, coinciding with the start of the Monsoon season.

Diseases % cases by site

Site	Series1 (%)	Series2 (%)
Mungo	0.2	0.2
AHD	4.0	1.9
Drynary	0.1	0.1
FOD	5.5	0.1
Pinnaroo	0.0	0.0
Anzley	0.1	0.1
Pregnancy	1.1	1.1
AIB	4.0	3.3
RM	4.0	1.8
ALOS	0.0	0.0
Sorehead Lyndham	0.1	0.1
Chana	0.1	0.1
Goolah	0.1	0.1
Asea	0.1	0.1
Acaash	0.1	0.1
TB	0.1	0.1
Sorehead TB	0.1	0.1

Xchange

Rohingya Snapshot Survey



The Xchange Foundation is MOAS' partner organisation, focusing on migration data and research.

Following our 2017 report into the extent and nature of the violence inflicted upon Rohingya civilians and the dynamics of their gruelling journeys across the border, we returned to Cox's Bazar in early 2018 to find out how this displaced community is adjusting to life in refugee camps. Working out of the MOAS Aid Stations in Shamlapur and Unchiprang, we interviewed 1,584 people to produce a snapshot survey of living conditions in the camps.

Over 70% of survey respondents were female, mirroring the gender imbalance in patients visiting the MOAS Aid Stations. Men were frequently targeted for execution in Myanmar, leaving women to flee alone or with children – though only after facing other types of targeted violence, including sexual abuse and brutal infanticides. Corroborating our previous findings, nearly one fifth of female respondents were widowed, compared to 4% of males.

88% of respondents had arrived in Bangladesh after August 2017, while 12% had fled earlier outbreaks of violence during the 1990s and early 2000s.



Almost all respondents held a Myanmar National Registration Card issued by the Bangladeshi government, marking a major development since October 2017: most of the people we had interviewed then had no ID, either because they had never been able to obtain documents in Myanmar or because their ID had been confiscated and destroyed whilst fleeing the country.

When asked about the number of people in their home, it was mostly female respondents who said they live in households of four people or fewer; on the other hand, the majority of male respondents said they live in households of five people or more. Given the vulnerability of female refugees to forced marriage, trafficking and exploitation, this gap could indicate a preference on the part of women and girls for living with a trusted male, where possible. Three quarters of respondents said the head of their household is a man, indicating widespread adherence to traditional gender roles. It is also worth noting there is no appreciable difference in household numbers between

refugees who arrived before August 2017 and those who arrived after, indicating that the organisation and structure of households has remained similar over the last three decades.

77% of respondents said they have children aged between 3 and 17, many of whom have no access to education. When asked why their children do not attend school, respondents mostly answered that they need to work, in the case of boys, or that they are considered too old, in the case of girls. Most respondents also said they are currently looking for employment, with many families struggling to survive on food aid alone. On a day-to-day basis, Rohingya refugees are primarily occupied with collecting firewood, food and water (the most common occupations in Shamlapur) or dealing with household chores such as cooking and cleaning (most common in Unchiprang).

THE ANDAMAN mission

In April 2018, MOAS deployed the M/Y Phoenix to the Andaman Sea on an observation mission to monitor maritime developments in the Rohingya refugee crisis.

The mission aimed to improve situational awareness of conditions in the Andaman and increase the transparency and accountability of maritime Search and Rescue (SAR) in the region, in line with MOAS' founding principle that no one deserves to die at sea. The mission was launched on April 3rd in response to confirmed reports of Rohingya attempting to flee Myanmar by sea in unsafe vessels. The MOAS team departed Galle, Sri Lanka on April 23rd and concluded operations in Pulau Weh, Indonesia on May 13th.

“One of the advantages of MOAS has always been our ability to deploy at very short notice,” said our founder, Chris Catrambone. “We were able to deploy very quickly – in fact, just three days after we decided we would come out to the Andaman Sea.”

During the course of this mission, M/Y Phoenix patrolled 2,674 nautical miles, or just over 4,950 kilometres. In total, the ship traversed five national SRRs (Search and Rescue Regions), namely those of Sri Lanka, India, Malaysia, Thailand and Indonesia.

Having reached the intended operational area on April 27th, our experienced SAR team remained on 24-hour lookout for objects appearing on radar without an AIS (Automatic Information System) response. Throughout the mission, the team investigated 408 contacts, or unidentified objects, mainly using the ship's high-powered binoculars. Most vessels of interest turned out to be small fishing boats, though some commercial and private vessels were also investigated. Rohingya are known to depart Myanmar in fishing boats, making it difficult to distinguish between genuine fishing trawlers and refugee boats.

After receiving confirmed reports that a Rohingya boat had left the coast of Sittwe, Myanmar on May 5th, MOAS took up position at the likeliest point of encounter, based on calculations of the boat's probable route and

“This crossing is much more dangerous than the Mediterranean,” said MOAS Captain Marco Cauchi. “It's days and days. They run out of food. They become dehydrated. These small wooden boats are not made for this long trip.”

”

speed. For several days, M/Y Phoenix patrolled the area of interest in the hope of intercepting the boat and providing whatever assistance might be required. On May 11th, however, MOAS learned through local news reports that the boat had been forced to return to Myanmar the previous day due to engine failure. Two days later, Rohingya sources reported that another boat had been intercepted by the Burmese Navy and returned to Myanmar.



“Despite the geographical distance, Rohingya stories of widespread violence and abuse remind us of the stories we used to hear from those who attempted the crossing in the Central Mediterranean. While of course these realities are different from each other, it is clear that the Rohingya are also unwanted people who are victims of abuse and violations. Their rights are denied and their dreams of safety destroyed, just like the dreams of those trapped in hellish camps in Libya or along the traffickers' routes all over Africa.”

” Regina Catrambone,
MOAS co-founder and director



Reflections on *Mother's Day*

In a piece published on Mother's Day 2018, MOAS Director Regina Catrambone reflects on the experiences of motherhood for those affected by humanitarian crises.

Imagine you live in a village where armed men suddenly arrive to kill its inhabitants. Imagine that your children can't go to school because reaching it exposes them to enormous risks.

Imagine you face a deadly journey only to reach a safe place for you and your loved ones, hoping that you will find peace. Imagine you walk kilometres or you board an unsafe vessel simply because you want to seek sanctuary after your home was destroyed.

Imagine you live in an overcrowded camp where everything is complicated. It is difficult to find clean water, to feed your family, to vaccinate your children and to protect them from diseases that might further deteriorate their health. Imagine you spend your life in constant fear that your children will go missing or your daughter will be abused.

Imagine you are sexually abused and become pregnant. Imagine you decide to keep the baby because children are innocent and they are not responsible for being born into a world that doesn't welcome them or respect their rights properly.

Unfortunately, this is the daily life of too many mothers who live in the constant fear of losing their children.

My wish on Mother's Day is that we will be able to understand how difficult motherhood can be for a woman who has lost everything, who has seen her husband killed and is now solely responsible for her children in adverse living conditions.

On board the Phoenix, in the Mediterranean and Aegean Sea, and on land at our Aid Stations in Shamlapur and Unchiprang, I had the chance to witness first-hand the courage of mothers who never give up. So, my thoughts are with every single mother who had to hide her despair to become a perennial source of hope, with every single mother who daily



had to renew her determination to protect her family from unspeakable violence and hardships, who had to abandon weakness because life forced her to overcome all sorts of obstacles.

My thoughts are also with all the mothers who understand the pain and courage necessary to build a family and protect it from adversities, even though they have never gone through extreme situations.

This is why I am thankful to the big MOAS family, to our team and to our donors who help us to help those in need through their continuous support. Thanks to them, mothers can be treated and can be guaranteed a safe pregnancy, delivery and post-delivery recovery. Thanks to them, the sons and daughters of these mothers can find a welcoming place where someone takes care of their health, where they can receive a respectful welcome and the medical attention they need.



*A young girl waits in line
for her vaccination against
diphtheria*

Snapshots of childhood

The Rohingya refugee camps in Bangladesh are home to hundreds of thousands of children who have suffered through more than most people will in a lifetime.



*A small boy outside
his family's makeshift
shelter in Unchiprang
refugee camp*

*A Rohingya girl collects
clean water from the taps
inside our Aid Station*



*A Rohingya girl waits with her
mother at a food distribution
point in Unchiprang refugee camp*



*I am Dr. Mahmudul Hasan and
I work here as a station doctor.*

Life at the Aid Stations

MOAS Aid Stations are staffed by a dedicated team that includes doctors, nurses, medical assistants, pharmacists, midwives and medical logisticians. Here, Dr. Mahmudul Hasan tells us what it's like to work at the centre of the ongoing humanitarian crisis facing Rohingya refugees in Bangladesh.

I am Dr. Mahmudul Hasan and I work here as a station doctor. We visit patients in the consultation area and prescribe treatment.

There is also an emergency room here, where we treat urgent cases. Most of the patients are women or children.

Children mostly have acute respiratory tract infections, whereas most of the women come here during a pregnancy or because of infectious diseases. There are lots of infectious diseases in this area, as well as widespread skin diseases.



The humanitarian crisis has been happening here for the past twenty to thirty years.

The people who are living here are without shelter, they are helpless. They don't have food, proper accommodation or treatment.

We visit the Rohingya people and the local Bangladeshis. We treat them and give them medication for free. We also provide other medical support.

I feel good working here. It is very hard work in this type of crisis, but I feel very proud to be part of this MOAS team.

Xchange: Rohingya Repatriation Survey

For their second survey of 2018, in April and May the Xchange team interviewed over 1,700 Rohingya refugees living in Cox's Bazar district on their attitudes towards returning to Myanmar.

August 2017 saw hundreds of thousands of Rohingya Muslims from Rakhine State flee violence and persecution at the hands of the Myanmar military and ethnic Rakhine extremists. Over 700,000 survivors of these horrors now live in cramped camps across the Cox's Bazar district of Bangladesh. Despite conditions on the ground, refugees told us that they have never felt safer. At this juncture, there are questions surrounding what Rohingya refugees know and feel about the prospect of returning to Myanmar.

Our main focus in this survey was getting the Rohingya voice heard, something missing across the whole repatriation process. They have not been consulted, and we needed to find out how they felt and what they knew. As one of our interviewees said, "I'm a Rohingya and I want to show the world that I'm a Rohingya." We at Xchange hope that this project can be a start to making their voices heard.

” Maria Jones,
Senior Research Advisor at Xchange



Rohingya repatriation is not a new phenomenon. For decades, Rohingya people forced to flee to Bangladesh have been subject to return deals signed between the governments of Bangladesh and Myanmar. These deals have failed to include the Rohingya in negotiation processes, and claimed that Rohingya returns were voluntary even when they clearly violated international best-practices intended to prevent refoulement of refugees. Currently, it is unclear if or when the Rohingya in Bangladesh will return to Myanmar. The refugees themselves have, once again, been denied agency over their lives and futures.

Drawing on more than 1,700 surveys conducted across 12 camps in Cox's Bazar district (two officially registered government camps and 10 unofficial settlements), Xchange explores what the Rohingya themselves want from the repatriation process, what



XCHANGE
RESEARCH ON MIGRATION

return to Myanmar would mean to them, and what they know of proposed processes. Our findings illustrate striking truths about their understanding of the repatriation process and what would motivate them to return.

Just over half of the Rohingya refugees surveyed (51.6%) said they knew about a repatriation deal. Of those who did, 80% were not satisfied with the information they were given. Interestingly, almost all the people surveyed (99%) would willingly go back to Myanmar, but not without a series of conditions. These primarily focused on the right to citizenship and equal opportunities to move, work and learn. But when asked, almost 70% did not trust the Myanmar government to recognise these rights on return.

I am concerned that again we will talk about the Rohingya, but nobody will talk to them to understand their legitimate fears. Only if their needs are taken into account and their rights safeguarded will the Rohingya be able to return to their country of origin. If we fail entire generations of Rohingya looking for peace, we won't just be terribly unfair to them, but we will demonstrate the inability of the international community to comply with the existing conventions and treaties intended to protect the most vulnerable.

” Regina Catrambone,
MOAS co-founder and director

Monsoon season in Bangladesh



Many of the illnesses we have treated at our Aid Stations are caused by precarious hygiene. This was only worsened by the cyclone and monsoon season, with its continuous torrential rains washing away the facilities created to respond to the massive influx of Rohingya refugees.

In April 2018, we delivered two days' flood access training to 16 members of the MOAS team including doctors, pharmacists, nurses and support staff, reinforcing our commitment to providing emergency healthcare even in the most adverse conditions.

The training and equipment we have received will allow us to continue business as usual", explained Paul Chamberlain, MOAS Logistics Director. "This is not about providing anything special, but about giving our team the skills and equipment they need to cross flooded areas and continue providing vital medical services.

”

Between the 5th and the 10th of July 2018, 222mm of rain were recorded in Bangladesh. In some cases, rain continued for days and caused extensive damage. Then, on July 25th, an unprecedented 463mm of rain were recorded, with devastating impact. More than



4,400 refugees in the Cox's Bazar region were affected by torrential rains on that day, including at least 3,000 people affected by landslides, 700 by floods and 510 by water-logging.

In this scenario, MOAS teams faced enormous challenges every day. In August, when torrential and uninterrupted rains were preventing patients from reaching the Aid Stations, four team member set up a drop-in centre close to the entrance to Shamlapur refugee camp, visiting some 90 patients per day. In the volatile context of Rohingya camps and settlements, extreme weather is a real and devastating threat, whose main victims are the most vulnerable individuals.

Unfortunately, the response of the international community to this dramatic humanitarian crisis is to turn a blind eye, confirming its short-sightedness and largely ignoring calls to action and to raise funds. According to the 2018 Joint

Response Plan for the Rohingya Humanitarian Crisis, 951 million USD were needed to cover all sectors and activities, but only a fraction of this was raised.

What does this lack of funding mean for those who work to support local and Rohingya communities in Bangladesh? It means that you have to overcome many more obstacles to serve thousands of children, women and men. It means that you don't simply carry out your allotted tasks, but also live in a constant struggle to reach whoever needs your assistance. It means that you keep on asking yourself if you have enough medicines to treat every patient.

The lack of funds to support an effective response to the Rohingya crisis during the monsoon season demonstrates international egoism and indifference. Imagine your children dying of treatable diseases just because you cannot access or afford medicine.

” Regina Catrambone,
MOAS co-founder and director

DEFENDING HUMAN RIGHTS

While the world sits in relative silence, human rights abuses take place all over the globe. What are they and why are they important?

Human rights cover every area of human activity. According to the International Bill of Human Rights, a person's ability to speak freely, access education and have a decent standard of living are fundamental rights. Human rights are inalienable, universal and interdependent: every human being, regardless of class, race, sex or nationality, is inherently entitled to them.

Though similar notions have existed for centuries, the adoption of the Universal Declaration of Human Rights (UDHR) marked a milestone in the conception of human rights as we know them today. It was the first time a group of countries agreed to work together to set down a list of fundamental rights inalienable for every individual. The UDHR was adopted on December 10th 1948, a day that has since been celebrated as Human Rights Day. The International Covenant on Civil and Political Rights and the International Covenant on Economic, Social and Cultural Rights, which both came into force in 1976, expanded human rights provisions to include, for example, freedom of assembly and the right to health. These Covenants, together with the UDHR, form the so-called International Bill of Human Rights. Each person's ability to enjoy their human rights is dependent on the ability of others to respect them. Consequently, there is a degree of responsibility that comes with the enjoyment of human rights. But with barbarous human rights abuses taking place across the world, it is easy to become overwhelmed and fall into apathy.

The ongoing Rohingya crisis is a perfect example of the price some have paid for the world's indifference to human rights. As one of the most persecuted minorities in the world, human rights for the Rohingya community are extremely constrained. The Myanmar government refuses to recognise them as a Burmese ethnic group and instead refers to them as 'Bengali', thereby rendering them stateless. As part of its discriminatory practices against the Rohingya, the Myanmar government implements restrictions on their freedom of movement, employment, marriage, education, religion, and land and property ownership, among others. The Rohingya need permission to marry or travel outside their cities, a clear breach of their human rights.

If there is anything to be learnt from the past year, it is that now is the time to fight apathy and indifference. The key in fighting indifference is staying active. Spreading the word on social media, bringing up human rights in your conversations and engaging in community activism will ensure discussions continue to take place. In July 2018, Erin Ersoon – a Swedish student – gained worldwide attention for stopping the deportation of an Afghan man by refusing to take her seat on the plane. Her actions were broadcast on every major media outlet, shedding light on the lack of durable solutions for refugees in Europe. Erin serves as an example of the tremendous power and potential we all have as agents of change.

While the International Bill of Human Rights was an essential step in the provision of human rights, its guidance can only become a reality through the coordinated support of governments, community groups and civil society. Active and undefeated citizens are a **key element in ensuring human rights abuses like the Rohingya exodus never occur again.**





Host Communities Survey

Since August 25th 2017, an estimated 706,000 Rohingya Muslims have crossed the border from Myanmar into Bangladesh.

They live in make-shift camps across Cox's Bazar, one of the poorest areas in the country. This influx has put a huge strain on local Bangladeshi communities, in a region already struggling to cope with extreme poverty, high population density and the effects of regular natural disasters.

While Bangladesh has kept its borders open and allowed the Rohingya to seek temporary shelter in Cox's Bazar, ongoing uncertainty around the possibility of their safe and voluntary return has meant the situation remains precarious. This has significant consequences for local communities, as

the lack of infrastructure to support refugees places increasing burdens on public expenditure, service delivery and the labour market.

During June and July 2018, Xchange collected over 1,700 testimonies from Bangladeshi residents of Cox's Bazar district. The aim was to understand how the Rohingya refugee population is perceived by local communities.

It is clear from the survey results that the local Bangladeshis are empathetic and understanding towards the situation of the Rohingya, even feeling a sense of responsibility towards them. A majority of respondents demonstrated that they understood

the Rohingya did wish to return to Myanmar (73%), but feared returning in current conditions (80%), which almost all found reasonable (97%). However, respondents were not optimistic about their own future in Bangladesh, and felt that overpopulation and competition between the two communities for resources and jobs was inevitable and unsustainable. As this survey and the Rohingya Repatriation Survey show, both communities feel powerless; they only hope for a solution before the situation becomes untenable.

MOAS' fourth anniversary

On Saturday 30th of August 2014, the newly-launched Migrant Offshore Aid Station carried out its first rescue in the Mediterranean Sea.

Two weeks later, our crew had rescued and assisted over 1,500 people in coordination with Italy's Mare Nostrum mission. Four years on from that pivotal moment, we reflect on the humanitarian crisis still unfolding at sea.

in 2018, we celebrated the four-year anniversary of the launch of the first MOAS mission. On the 25th of August 2014, the M/Y Phoenix sailed out of Valletta harbour, in Malta, and headed for the Search and Rescue zone. Five days later, our professional



crew of seafarers, medics and humanitarians carried out the first maritime rescue ever undertaken by a civil society organisation. The M/Y Phoenix, a 40-metre Canadian trawler newly refitted as a Search and Rescue vessel, was equipped with two drones to monitor its surrounding area and provide real-time updates to MOAS and to maritime Rescue Coordination Centres.

MOAS co-founder and director, Regina Catrambone, said at the time: *"Getting this project off the ground has not been easy.*

Much has changed since we came up with the idea last summer. Mare Nostrum has started successfully, but unfortunately its future is not guaranteed. Meanwhile, more people have been displaced from Syria, Iraq and Gaza. Boats have now started to reach Italian shores unchecked, many of them full of unaccompanied minors. The Ebola outbreak has further complicated matters. In the face of all this, MOAS has kept in mind one fundamental belief: nobody deserves to die at sea."

Between 2014 and 2017, MOAS teams aboard the M/Y Phoenix – and, later, the Topaz Responder – saved over 40,000 lives in the Central Mediterranean and Aegean. In August 2017, however, we decided to suspend our maritime operations, not wanting to become part of a mechanism focused only on pushing people back from European shores. Since then, we have been dismayed to note growing hostility towards migrants and refugees in many parts of Europe, concerted efforts to criminalise Search and Rescue NGOs, rising mortality rates along the Central Mediterranean route, and increasing threats to the safety and security of those who save lives at sea.

Today, our Director says: *"Four years ago, MOAS carried out its first rescue in the Mediterranean Sea. Motivated by Pope Francis' words against the globalisation of indifference, we rescued more than 40,000 people who could have perished along the Central Mediterranean and Aegean routes. Since September 2017, we have been working in Bangladesh to provide medical assistance to Rohingya people and Bangladeshi host communities. However, we continue to be deeply concerned about Europe's inability to find humane, fair solutions, and to monitor the growing number of casualties at sea. We call for the immediate adoption of solutions based on the principles of humanity and solidarity to safeguard those in search of peace."*

MOAS stands in solidarity with organisations saving lives in the Mediterranean Sea, and with all humanitarian organisations working to alleviate the suffering of migrants and refugees around the world. We call for a renewed focus on the humanitarian dimension of the Mediterranean crisis, so often forgotten amidst the political vitriol, and for coordinated, long-term solutions to the challenges posed by mass migration.

Humanitarian work in action

Our Head of Operations Franco Potenza coordinating aerial support for our SAR mission



A MOAS team member lifts a baby off a rubber dinghy and onto our rescue ship



August 25th 2018 marked the fourth anniversary of the launch of MOAS operations. In the four years that have passed, MOAS' humanitarian operations – in the form of Search and Rescue missions in the Central Mediterranean and Aegean, aid deliveries to Bangladesh, and the opening of two Aid Stations to assist the Rohingya and local populations in Cox's Bazar – have rescued and assisted over **130,000 people**.


MOAS delivers humanitarian aid to the Bangladeshi government via the port of Chittagong



Our pharmacists distribute medication free of charge at the Shamlapur Aid Station



MOAS



In an article first published by The Guardian in October 2018, MOAS Director Regina Catrambone reflects on the difficulties for Search and Rescue organisations in the Mediterranean.

Hate speech has silenced the voices of those risking death on Europe's seas. Lack of empathy has dehumanised people fleeing war and hunger. We must look past statistics and listen to their stories.

Risking DEATH

on Europe's seas

According to the UN refugee agency (UNHCR), at least 1,778 people have perished this year in the attempt to cross the Mediterranean Sea, the world's deadliest migratory route. But European political leaders rarely mention this figure as they celebrate the results of their current migration policies. This is the highest percentage of fatalities ever recorded along this route.

Since last year, migrants, refugees and asylum seekers have been represented increasingly as numbers, their ordeals under-reported or minimised, their lives used as statistics, not flesh and blood. But when the official narrative is limited to numbers and figures, people disappear.

Risking DEATH

on Europe's seas

So what's happening to vulnerable mothers and children stranded, for instance, in Libya? What about elderly people? Who is taking care of them? Are medical conditions being treated?

Violence in Libya has escalated recently, further exacerbating a volatile environment that puts at stake the lives of hundreds of thousands of vulnerable people trapped amid chaos. There are a number of detention centres, the locations of which vary, where access is mostly forbidden to humanitarian organisations. The UN has often declared that working in Libya is extremely difficult and dangerous, and its staff on the ground can't cover all humanitarian needs.

Last December, the Migrant Offshore Aid Station (MOAS) could see first-hand the dangers of the situation on the ground and assisted the UNHCR's staff during an evacuation flight to Niger, where 51 children, 22 women and one man found shelter after a long stay in Libya. Nonetheless, the resettlement plan didn't work as expected, and many people are still waiting to start their new life in another country. As migration flows intensified in 2013, public opinion showed indignation and empathy, political leaders promised to take immediate action to prevent further deaths and humanitarian organisations consolidated more efficient patterns to welcome rescued people at disembarkation ports.

All eyes were focused on the survivors of desperate journeys, but the sea was still killing an unknown number of children, women and men. At that time, MOAS was created to mitigate the loss of life and to allow journalists to document what it meant to be in distress out at sea. The impact of these life-saving operations was unparalleled for three main reasons: fewer and fewer people died, journalists joined us

and we gave voice to the rescued. But, our missions were not limited to rescue. We also provided post-rescue care to migrants and refugees. During their time spent on board, the people rescued didn't receive only food, water, clothes and blankets, but also comfort and care from the MOAS team.

No one could say they didn't know what was going on out at sea. Our mission helped people to share their stories – of trafficking and of hope.

Now, it's all over. Since the end of 2016, the process of dehumanisation has progressively escalated, its peak coming in 2017 when fake news and hate speech reinforced a criminalisation of solidarity. The lack of European empathy and the failure of relocation schemes profoundly changed the way we can operate, and reduced the capacity to perform rescues at sea.

Almost all humanitarian boats were forced to suspend or redeploy their missions elsewhere. Merchant ships no longer perform rescues because, they say, they are afraid of being left adrift while waiting to be notified of a disembarkation port while those who survive almost fade away.

The evolution of migration flows and policies has constantly silenced the voices of migrants and refugees. We have never known so little about them. Official figures are likely to be underestimates, so we don't know how many people perish crossing the desert or the sea. We fail to help them if they end up in Libya and we neglect their lives when they step off the boat.

They become invisible because we talk about them, but never talk to them, to listen to their stories. It's easy to dehumanise people whose lives, faces and dreams are unknown. We don't need much strength to offend and be cruel about people who are just represented by a number. Numbers don't have feelings, scars or wounds.

But behind those figures there is a person with flesh and bone, with dreams and a soul, in search of a peaceful future.

#GIVINGTUESDAY

MOAS has been taking part in Giving Tuesday since 2014, and over the last four years we have benefited tremendously from the public's generosity. On November 27th, we were honoured to be supported by British actor Colin Firth. Read his message below and help us spread the word!



Today, there are more than 65 million forcibly displaced people in the world.

They are fleeing violence, poverty and persecution. They just want to feel safe.

MOAS strives to be wherever they are needed the most, providing medical services and aid to the world's most vulnerable communities.

It costs just 6 Euros for MOAS to provide life-saving medical treatment to one person in need.

With your help, they can continue to provide aid and assistance along the world's most dangerous migration routes.

This Giving Tuesday, help them **to make a difference.** Please give whatever you can, and help MOAS save a life today.



A CHRISTMAS MESSAGE FROM OUR DIRECTOR

“Today we welcomed new-born Mohammed Yousuf. Both mother and baby are doing well. His father is very happy and can't wait to introduce him to their community.”

One year ago, this message announced the birth of the first baby delivered in our MOAS Aid Station in Shamlapur, a few months after the beginning of our mission in Southeast Asia.

To the end of November 2018, our Aid Stations in Shamlapur and Unchiprang provided medical assistance to over 90,000 children, women and men. Our patients were members of the Rohingya and Bangladeshi communities who received free medicine and healthcare in an extremely volatile environment, created by the arrival en masse of more than 700,000 Rohingya who fled Myanmar starting on August 25th, 2017.

Mohammed Yousuf is the first child of a young Rohingya couple. Since his birth, he has come to the MOAS Aid Station in Shamlapur for regular check-ups. His mother, 25 years old, was also born in a Bangladeshi refugee camp, where her parents sought sanctuary in 1994 during a previous exodus from Myanmar. In the 1990s, persecution pushed around 250,000 Rohingya to cross the border into Bangladesh, and 20 refugee camps were created to welcome new arrivals. However, controversial repatriations began soon after, despite strong opposition from international human rights organisations. By 2003 there were only two camps, where some 50% of the population was severely malnourished.

Between September 2017 and May 2018, it is estimated that more than 16,000 children were born in refugee camps and makeshift settlements in Cox's Bazar. This means that around 60 babies a day are taking their first breath in appalling conditions, away from home, to mothers who have survived displacement, violence, trauma and, at times, rape. Moreover, to May 2018, only 18% of new mothers delivered in a medical centre assisted by professionals. The aim of the MOAS mission in Bangladesh has been to provide humanitarian aid and high-quality medical assistance, and stand in solidarity with the Bangladeshi government in its effort to welcome a historically persecuted community. From the start, the MOAS medical teams have made a huge difference to thousands of patients in Unchiprang and Shamlapur.

Mohammed Yousuf gave deeper meaning to the Christmas season and to our mission. The wish of my family in creating MOAS was to help other families in need, and once again, this wish came true. At Christmas time, we do not merely celebrate a festivity: the new-born baby embodies our commitment to celebrating and protecting every single life. Christmas for us is the smile of a new mother, the very first cry of a baby, and the joy of a father relieved that his family is in a safe place.

Since the launch of our mission in Bangladesh, we have treated 42,370 children and confirmed our commitment to assisting the world's most vulnerable migrant and refugee communities. The MOAS Aid Stations have stayed open even in extreme weather to guarantee medical care to those in need. They have been used as vaccination centres in cooperation with the WHO and Bangladeshi government, and have become a place where anyone can find assistance, sanitation facilities, clean water and toys for their children.

Our wish for Mohammed Yousuf's family is that their dream will come true, and their son will become a doctor in a place where many are illiterate because of a lack of proper education. Moreover, we wish a merry and joyful Christmas to the MOAS family of donors, supporters and volunteers everywhere. Let's commit ourselves to looking at every single human being as the most precious gift.



Mohammed and his family, one year on

2018 has been a year of both challenges and achievements. Read our end-of-year round-up to find out what we've been doing and what the next year will hold.

BANGLADESH



When MOAS arrived in Bangladesh in September 2017, we were one of the first NGOs to respond to the Rohingya exodus from Myanmar, sparked by an outbreak of brutal violence on August 25th. Witnessing a desperate need for medical care to alleviate the suffering of thousands who were fleeing across the border injured, traumatised and exhausted, by November 2017 we had opened two Aid Stations, or primary health centres, to serve the fast-expanding refugee population and its host communities. To the end of November 2018, the MOAS Aid Stations in Shamlapur and Unchiprang provided vital medical assistance to over 90,000 children, women and men. Our Aid Stations stayed open year-round, were used as vaccination centres in coordination with the WHO and Bangladeshi government, and became a space of respite and comfort for Rohingya and Bangladeshis alike.

During the rainy season – between June and November – we focused on ensuring the Aid Stations were equipped to withstand high winds and heavy rains, and to treat an

increasing number of patients. Every year, Bangladesh faces a cyclone and monsoon season that can bring severe flooding, flash flooding, water-logging and wind damage. In response to these threats, MOAS created mobile medical units to provide rapid-response care for people affected by landslides and floods; the teams received Flood Safety and Flood Rescue training, allowing them to cross flooded ground in safety and transfer injured people to the Aid Stations for treatment.

At the start of December, we launched our plans for new programming, developed in line with the 2019 priorities released by the Joint Response Plan for the Rohingya humanitarian crisis. Throughout the coming year, MOAS will continue to operate in Bangladesh, running training and capacity-building projects in partnership with other

A Summary of 2018

NGOs and agencies. Our interventions will focus on flood and landslide rescue, water safety, and the provision of services to remote or inaccessible areas. In order to safeguard the right to healthcare of all those who have come to rely on the MOAS Aid Stations, we have also finalised an agreement

with the International Rescue Committee, who have taken over use of our assets and sites, and will continue to provide medical assistance in Shamlapur and Unchiprang.

ANDAMAN SEA

Just after Easter, MOAS launched an observation mission in the Andaman Sea to monitor maritime developments in the Rohingya refugee crisis. The mission was announced on April 3rd in response to confirmed reports of Rohingya attempting to flee Myanmar by sea in unsafe vessels. The MOAS team departed Galle, Sri Lanka, on April 23rd on board Search and Rescue vessel M/Y Phoenix, and concluded operations in Pulau Weh, Indonesia, on May 13th. During this time, M/Y Phoenix patrolled 2,674 nautical miles, or over 4,950 kilometres.

Having reached the intended operational area on April 27th, the MOAS team remained on 24-hour lookout for objects appearing on radar without an AIS (Automatic Information System) response. Throughout the mission, the team investigated 408 contacts, or unidentified objects, mainly using the ship's high-powered optic systems. Most vessels of interest turned out to be small fishing boats, though some commercial and private vessels were also investigated. Rohingya are known to depart Myanmar in fishing boats, making it difficult to distinguish between genuine fishing trawlers and refugee boats.

After receiving confirmed reports that a Rohingya boat had left the coast of Sittwe, Myanmar, on May 5th, MOAS took up position at the likeliest point of encounter, based on calculations of the boat's probable route and speed. For several days, M/Y Phoenix patrolled the area of interest in the hope of intercepting the boat and providing whatever assistance might be required. On May 11th, however, MOAS learned through local news reports that the boat had been forced to return to Myanmar the previous day due to engine failure. Two days later, Rohingya sources reported that another boat had been intercepted by the Burmese Navy and returned to Myanmar.

MOAS remains gravely concerned about the dangers faced by Rohingya refugees attempting to reach Malaysia or Indonesia by boat, and calls on the international community to urgently establish an independent maritime mission to safeguard the human rights of desperate people forced to flee violent oppression in Myanmar.



YEMEN

At the start of December, MOAS launched a new campaign to bring pharmaceutical aid, famine relief and medical care to Yemen. An estimated 57,000 people have died in Yemen's brutal conflict since 2015, while 3.9 million are forcibly displaced. Over 22 million civilians – 80% of the national population – are in desperate need of humanitarian assistance, but with air strikes frequent and violence spread out across the country, access lines have been severely restricted, resulting in a devastating famine. Meanwhile, with 14.8 million people unable to reach healthcare or clean water, Yemen has seen the worst cholera outbreak of modern times.

At the time of writing, one 40-foot container filled with famine relief in the form of nutritional supplements and one 20-foot container filled with pharmaceuticals and medical equipment are en route to the Yemeni port of Aden. Upon arrival, this aid will be distributed to established primary healthcare providers through the health cluster and nutrition pipeline with the support of ADRA, MOAS' partner in Yemen. With this mission, MOAS will reach thousands of people in dire need of famine relief and medical assistance

CAMPAIGNS

MOAS continues to advocate for the creation of safe and legal alternatives to the perilous migrant journeys that claim thousands of lives each year.

You can join the conversation via the hashtag **#SafeAndLegalRoutes**, or support our campaign by buying a MOAS t-shirt via **www.worthwearing.org**.

To help us continue providing aid and assistance to the world's most vulnerable migrant communities, please donate what you can via **www.moas.eu/donate**.



A Summary of 2018



MOAS VOLUNTEERS

The chance to undertake a position as an EVS/ESC (European Voluntary Service/ European Solidarity Corps) volunteer at MOAS was a valuable experience providing diverse professional development, useful insights, and exciting challenges to overcome.

I had been looking for an opportunity to work for a cause I truly believed in, as my personal, professional and academic interests lie mainly with issues surrounding migration and humanitarian assistance. When offered an EVS/ESC position with MOAS, an organisation known worldwide for providing vital humanitarian assistance to refugees and migrants fleeing violence and persecution, it seemed like an opportunity not to be missed. Being able to contribute in any way I could, through my skills and experience, to many of the different projects MOAS is involved in was a dream both personally and professionally. Of course, this meant relocating to Malta for the duration of the period, and adapting to Maltese life. This has been such a positive experience that I am currently intending to stay in Malta beyond the end of my time as a volunteer.

One of the biggest perks of working for MOAS has been the



hands-on experience and exposure that you get, unlike what usually happens at bigger, top-down humanitarian organisations. Being able to work closely with senior members of staff, as well as being present in meetings when key decisions are taken, has offered me a vital and comprehensive glimpse into the inner workings of an international humanitarian NGO.

Part of my time with MOAS was spent assisting with the projects of Xchange, MOAS' research partner. Being involved in their projects provided a platform to expand my research abilities within the migration arena, while confirming for me the potential of data to transform public perceptions of human migration.

Without a doubt, however, the best thing about volunteering for MOAS has been its people. It has been an absolute honour to learn from and work with extremely talented professionals who are genuinely passionate about their work and the impact that it has on the lives of so many.

Throughout my time here I have grown immensely, both personally and professionally. Those who have ever been involved in volunteering will know what I'm talking about, and for those still thinking about whether volunteering is for them, I hope this glimpse into my placement with MOAS has opened your eyes to the immeasurable benefits for individuals and society alike.

Maria, MOAS volunteer 2018

BELGIUM

March 15th, Antwerp

Encounter: Youth for Peace, Community of Sant'Egidio



MALTA

May 23rd & 24th, St Julian's

Seminar: Maritime and Migration Challenges in a Global World, Nautical Institute



ITALY

March 26th, Palermo

Award: Tessera Preziosa, Mosaico di Palermo

"If people ask me how many migrants live in Palermo, I reply: none! If you live in Palermo, you belong to Palermo."

Leoluca Orlando,
Mayor of Palermo



MALTA

June 27th, Valletta

Demonstration: European solidarity to change the Dublin Regulation

"Today, in light of a rise in anti-EU feelings and rampant discrimination, we all have to commit to reviving Europe's founding principles, the most important one being solidarity."

Regina Catrambone
MOAS co-founder and director



ITALY

October 15th, Bologna

Conference: Bridges of Peace, Community of Sant'Egidio

"We thought we were dying, we were praying... then the MOAS vessel approached and saved us."

We were overjoyed to stumble across Alpha, rescued by MOAS in 2016, at this meeting in Bologna.



GERMANY

November 12th, Berlin

Conference: 6 Degrees, Institute for Canadian Citizenship



FRANCE

December 10th, Strasbourg

Award: Sakharov Prize for Freedom of Thought

MOAS was honoured to be awarded second place in this prestigious prize, alongside other NGOs protecting human rights and saving migrants lives in the Mediterranean Sea.



AROUND MOAS THE WORLD

MOAS supporters

Among our many wonderful donors and partners, we particularly want to thank those who visited us in Bangladesh in 2018. It was a pleasure to show you around, and we hope to see you again soon!



Alberto Quattrucci from the Community of Sant'Egidio visiting our pharmacy



A representative of our partner organisation Pharmacists Without Borders



Our donor Ed Shapiro on a visit to the MOAS Aid Stations with co-founder and director Regina Catrambone



MOAS

Your Donation Saves Lives

If you would like support our humanitarian efforts, you can donate online at moas.eu/donate or affect by bank transfer.

EU

Beneficiary Name: **Migrant Offshore Aid Station**
Bank Name: **Lombard Bank Malta plc**
IBAN: MT15LBMA05000000000001180113787
SWIFT Code: LBMAMTMT

GERMANY

Kontoinhaber: **M.O.A.S.**
Bank: **Hamburger Sparkasse**
IBAN: DE48 2005 0550 1002 2118 01
Kontonr. 1002 2118 01 BIC: HASPDEHHXXX

UK

Beneficiary Name: **Migrant Offshore Aid Station (MOAS) UK**
Bank Name: **Lloyds Bank**
Account Number: 39002760
Sort Code: 30-90-89
IBAN: GB33LOYD30908939002760

ITALIA

Beneficiario: **MIGRANT OFFSHORE AID STATION ITALIA** Onlus
Banca: **BNL S.p.A.**
IBAN: IT02P0100503337000000003138
SWIFT Code: BNLIITRRXXX

USA

Beneficiary Name: **Global Impact – MOAS Fund**
Bank Name: **Bank of America**
Account Number: 435023384035
SWIFT Code: BOFAUS3N