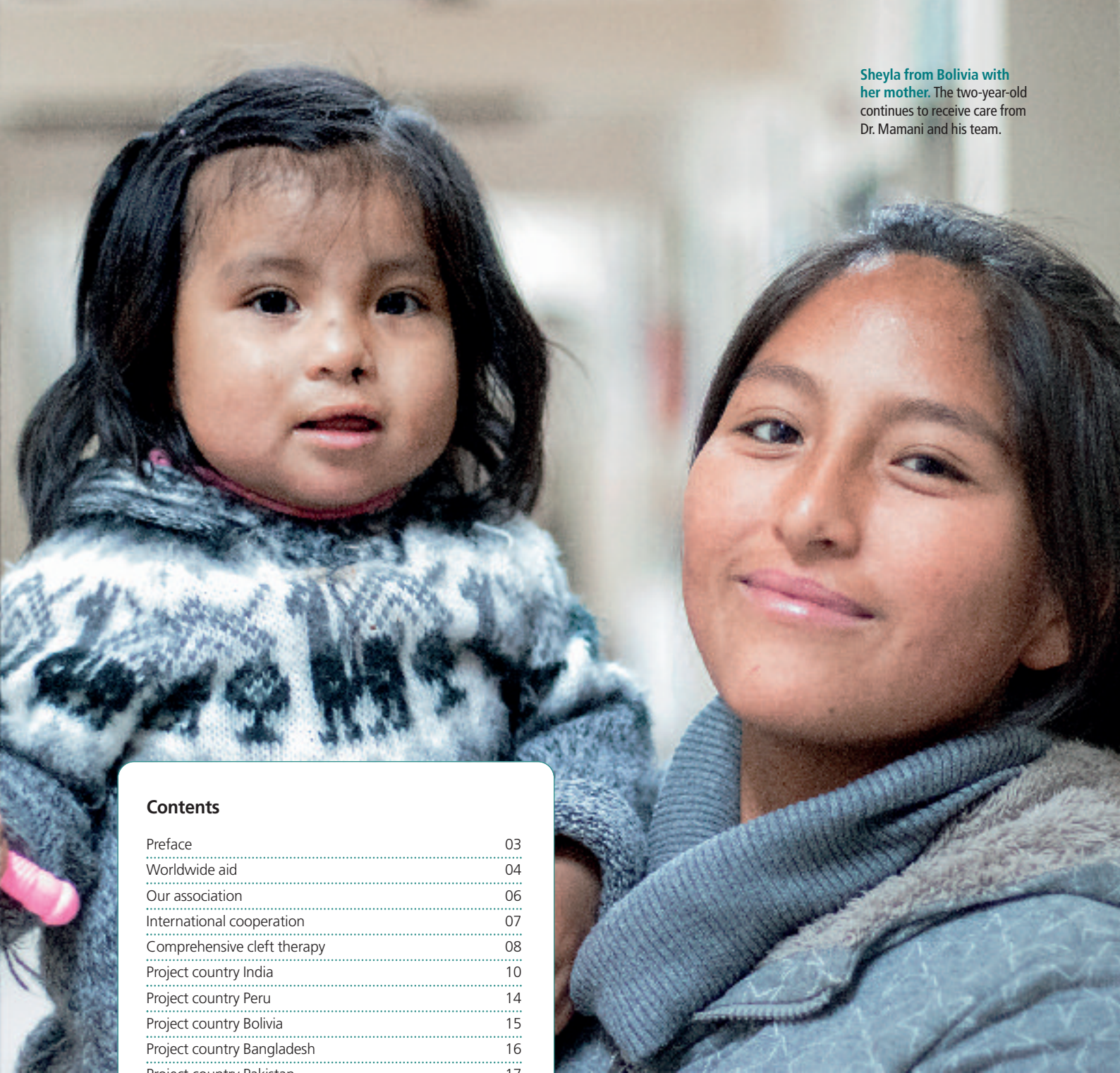




Worldwide aid for cleft children

Annual report 2019



Sheyla from Bolivia with her mother. The two-year-old continues to receive care from Dr. Mamani and his team.

Contents

Preface	03
Worldwide aid	04
Our association	06
International cooperation	07
Comprehensive cleft therapy	08
Project country India	10
Project country Peru	14
Project country Bolivia	15
Project country Bangladesh	16
Project country Pakistan	17
Project country Vietnam	18
Project countries Rwanda / Tanzania	19
Project country Afghanistan	20
Project country Indonesia	21
Thank you!	22
Some of our supporters	24
Finances and outlook	26

As a nonprofit association with the purpose of promoting charitable causes and public health, Deutsche Cleft Kinderhilfe e.V. is exempt from corporation tax under § 5 (1) No. 9 of the Corporation Tax Act (Körperschaftsteuergesetz) and exempt from trade tax under § 3 No. 6 of the Trade Tax Act (Gewerbesteuergegesetz), according to the latest exemption notice from the tax office Freiburg-city, tax number 06469/47127, from November 18, 2019 for the last assessment period 2016 - 2018

Imprint

Publisher:
Deutsche Cleft Kinderhilfe e.V.

Responsible:
Alexander Gross

Editing & text:
Deutsche Cleft Kinderhilfe e.V.

Cover image:
Roshni from India

Images:
Deutsche Cleft Kinderhilfe e.V.,
Elias Danner, (pages 10, 11, 27)

Layout & production:
MSG|media – Sebastian Schampera

Dear friends and supporters,

Dear friends and supporters,

looking back on the most successful year in the history of Deutsche Cleft Kinderhilfe is a great joy to me. Our main yardstick of success is the number of operations we make possible, which clear the path to a better future for cleft children from the poorest of families. Over the past two years, we have been able to increase the number of these operations by almost 1,000 each year: from 4,289 in 2017 to 6,280 in 2019! For this I would like to thank our partners and supporters worldwide and, of course, you. Together, you all have made it possible for us to help more children than ever before.

We had great plans for 2020. But due to Covid 19, we are now suddenly faced with completely new challenges. After further expanding our aid from January to March, most of our project partners have had to freeze their work since April. How long this difficult situation for us and especially for our cleft children will last depends on how the epidemic develops in our project countries and how quickly it can be contained.

We are in regular contact with our partners on site, working together to develop solutions that will allow us to resume our work as quickly as possible. Because the number of children that urgently need help and wait for their surgery grows every day. Many cleft children suffer from malnutrition. Their immune system is weak and as a result an infection with the corona virus can be dangerous for them.

The parents are very worried that their children will fall through the cracks, and that the operations that had been promised, or in some cases even already scheduled, will no longer be able to take place.

We are working with all our strength for these children and their families. Our long-term investments in local structures in the project countries and the resulting good contacts with our senior surgeons on site help us.

Now, despite these grave words, I wish you an entertaining read on our work over the last year. I would like to thank you very much for your support and for your trust. The cleft children and their families need you and us.

Sincerely, your

Frank Feyerherd

Prof. Dr. med. Frank Feyerherd, chairman of the board



AID FOR CLEFT CHILDREN V

In 2019, our activities spanned 12 countries in Asia, Central and South America and East Africa. The main focus of our aid for cleft children is the financing of operations, the central measure in cleft therapy. In some countries we are able to offer comprehensive treatment and provide the children with other necessary follow-up therapies. We also support two small projects with a focus on pre- and post-operative measures in Costa Rica and China.

Operations per year 2015 – 2019

2015	3,238
2016	4,225
2017	4,289
2018	5,088
2019	6,280

Operations by country since 2003

India	29,822
Bangladesh	5,963
Peru	4,582
Pakistan	3,470
Vietnam	3,178
Bolivia	2,013
Afghanistan	1,312
Cameroon	1,292
Philippines	679
Tajikistan	212
Indonesia	196
Rwanda	111
Burundi	85
Uganda	74
TOTAL	52,989

COSTA RICA

PERU

BOLIVIA



WORLDWIDE – SINCE 2002



OUR ASSOCIATION

Deutsche Cleft Kinderhilfe (DCKH) has been working to help children with cleft lip and palate since 2002. In our project countries, many families cannot afford their children's treatment. We finance the surgeries and follow-up treatments for these children. We work together with local doctors and thus help establish independent medical structures in the partner countries, with the goal of enabling sustainable medical development.

Board of Directors: Prof. Dr. med. Frank Feyerherd (volunteer), Thomas Schneider (volunteer), Alexander Gross

Managing Director: Alexander Gross (employee)

Board of Directors (volunteers): Dr. Dr. Oliver Blume, Ute Henninger-Sehling, Dr. Christian Rüschi. *The board of directors advises the board and controls budget compliance.*

Board of Trustees (volunteers): Prof. Dr. Dr. Jürgen Dieckmann, oral and maxillofacial surgeon; Prof. Dr. Dr. Götz Ehmann, oral and maxillofacial surgeon; Gunther Au-Balbach, oral and maxillofacial surgeon; Dr. Jos van den Hoek, orthodontist; *The board of trustees is a committee of experts with in-depth experience in the field of cleft lip and palate.*

Employees: 9, 6 of them part-time; **association members:** 9

Project managers DCKH: *India:* Dr. Dushyant Prasad; *Vietnam:* Dr. Daniel Lonic, Dr. Dushyant Prasad; *Afghanistan / Pakistan:* Dr. Ulrike Lamlé; *Bangladesh/Indonesia:* Dr. Dushyant Prasad, Dr. Ulrike Lamlé, Safowaan Bakee; *East Africa:* Gunther Au-Balbach, Dr. Dr. Oliver Blume; *Peru/Bolivia:* Sylvia Luedtke Haas, Stefanie Huter; *Costa Rica:* Dr. Martin Andreas

EXCERPT FROM THE STATUTES

The association's goals are realized especially via the following measures:

- Implementation and support of medical aid projects for the treatment of patients with cleft lip and palate [...] in close cooperation with local doctors and therapists,
- Implementation and support of measures to educate the population about cleft,
- Implementation and support of education and advanced training measures [...],
- Technical, organizational and financial support for the establishment of a suitable technical infrastructure [...],
- Assumption of costs for free or inexpensive treatments for needy patients with cleft lip and palate [...] including aftercare, especially of children and adolescents,
- Strengthening the general interest in working with cleft patients [...]

PARTNER ASSOCIATIONS

Our two partner associations in Switzerland and Austria share a common goal with us: to give children with cleft lip and palate a chance in life.

➤ **Schweizer Hilfe für Spaltkinder, Therwil:** Our partner association is run entirely by volunteers working in a honorary capacity and finances the costs of treatments at our Indian cleft center in Patna.

➤ **Austrian Cleft Kinderhilfe, Dornbirn:** Our Austrian partner association was founded in late 2019. Building the structure of the organization is planned for 2020.

INTERNATIONAL COOPERATION

THREE PARTNERS, ONE PHILOSOPHY

In our almost two decades of work we have established ourselves as an internationally recognized organization in the field of aid for patients with cleft lip and palate.

Behind this development is our philosophy of giving cleft children from needy families access not only to qualified surgical care, but also to further necessary therapies. This sets us apart from most organizations in the field. We actively use this position to seek contact to other organizations that pursue similar goals. This has resulted in two fruitful collaborations in the past three years.

Together with the Noordhoff Craniofacial Foundation (NCF) from Taiwan, we began to expand our aid work for cleft children in Vietnam in 2016. Currently we are jointly funding one project in Ho-Chi-Minh City and one in Hanoi (see also page 18). In addition to the surgical interventions, we finance NAM therapy* as well as orthodontics, ear, nose and throat (ENT) medicine and speech therapy in the two partner hospitals.

Under the leadership of Dr. Samuel Noordhoff († 2018), the founder of NCF, the Chang Gung craniofacial center in Taiwan has developed into the world's leading treatment center. This unique competence is available to our teams for specialized advanced trainings. In Xi'an (China) we are jointly supporting a speech therapy project.

Jackie Elton, one of the co-founders of Transforming Faces (TF), was herself born with cleft lip and palate. Motivated by her experience, she focused on "comprehensive cleft lip and palate care", i.e. comprehensive cleft therapy, in her work for needy cleft children. In 2018 we started our cooperation with the Canadian organization. In our Indian treatment centers in Bangalore, Kolkata and Mysore, TF finances pre- and post-operative measures.



Together we have also been supporting a private facility in San José, the capital of Costa Rica, which works very efficiently in the areas of NAM and follow-up therapies. We are very grateful for this cooperation, which is characterized by the common understanding that a comprehensive and, above all, long-term treatment concept is crucial for sustainable therapy success.

**NAM is short for Nasoalveolar Molding. NAM therapy is a pre-operative measure which is initiated shortly after birth.*

COMPREHENSIVE CLEFT CARE

It is often not fully appreciated what it means for a child to be born with a cleft lip and palate. The effects go beyond the visible disfigurement, which still is enough to make many untreated cleft children live in isolation: Quite a few babies with cleft lip and palate die in the first year of life from the consequences of neglect or malnutrition. In addition, cleft can cause far-reaching functional impairments. With a therapy that is as comprehensive and long-term as possible, the life of a cleft child can be improved considerably.



FIRST STEP: THE

The surgery is the core measure in the treatment of a cleft. Performed by a qualified surgeon, it makes children with a cleft lip look "normal" again. If there is also a cleft

ORTHODONTICS AND DENTISTRY

A cleft lip and palate is often accompanied by severe misalignments of the teeth and jaw. Correcting these is a long-term process. Follow-up surgical interventions, for example bone transplants, are often necessary. In some of our treatment centers, children are treated with NAM therapy before the operation. In addition, almost all children in our project countries have dental issues due to poor dental care and oral hygiene.



SPEECH AND FUNCTIONAL THERAPY

Cleft children are impaired in their speech development due to the dysfunctionality in the mouth, jaw and throat. Many muscles are underdeveloped, and children with a cleft palate also have a characteristic nasal, often hoarse-sounding pronunciation. Oral motor skills and articulation are improved with speech and functional therapy. The child's self-confidence is also promoted through the intensive care.





SURGERY

palate, at least one further operation is required. An untreated cleft palate has serious consequences: The children cannot eat and drink properly and speak with difficulty.

PSYCHOSOCIAL THERAPY

Cleft children are different from other children. They look different, speak differently. Being different often leads to exclusion, ridicule and teasing. This can result in far-reaching psychosocial issues for the children. Early and continuous psychological support helps promote the children's self-confidence. It also helps the affected parents, for whom the birth of a child with a cleft causes tremendous stress and anxiety.



AWARENESS WORK

Often the parents know nothing about the treatment options and causes. The belief that the malformation is a punishment for a wrongdoing or sin is widespread. The education of the population is therefore an important part of our work. Different communication channels are used depending on the country and region. We reach out via posters, advertisements or social media channels. Project staff go from house to house, visit schools and markets to draw attention to our aid offers.



ENT CARE

With a cleft palate, pressure in the middle ear cannot be properly equalized. As a result, the ventilation of the middle ear is restricted, resulting in fluid retention. The children suffer from constant feelings of pressure, ear pain and in many cases from chronic inflammation of the middle ear. In the long run, the fluid buildup in the middle ear leads to impaired hearing and thus to problems in learning to speak.



> OUR PROJECTS

Amina underwent two operations (for her lip and her palate) in her first year of life. The next scheduled step in her treatment will be speech therapy.

OUR TREATMENT SPECTRUM

The range of treatments we can offer in our project countries varies. There are locations where our work is limited to performing the basic operations. Where more comprehensive care can be offered, we differentiate between projects where we offer some follow-up therapies in addition to the surgery and those where we can offer all relevant medical disciplines as part of a full comprehensive treatment concept.

- ★ = basic operations
- ★★ = surgery + some follow-up therapies
- ★★★ = surgery + comprehensive follow-up care

INDIA

QUALIFIED TREATMENT FOR THE POOREST OF THE POOR

India is known as a land of contrasts. The difference between life in the city and life in the country is stark. Despite the economic growth and rapid development of the big cities, the situation of the rural population remains unchanged. Over 70 percent of the approximately 1.4 billion Indians live in rural areas. That is 900 million people who struggle to survive on an income of often not more than two euros a day.

Amina and her family live in a village in eastern India. Her father works as a day laborer and earns 300 rupees a day. Amina's mother Fatema sews saris for 200 rupees a week. If everything goes well, the family of five has 5,000 rupees a month to live on. That is about 65 euros.

Fatema had so much wished for a girl after having had two boys. When Amina is born with a cleft lip and palate, she is desperate. Why does her daughter look so different from her brothers? What should she do? Amina cannot swallow properly and is often sick. From the little money they have to live on, the parents now somehow have to pay for the medicines for Amina. The in-laws blame Fatema for everything. And other relatives and neighbors also shun her. Fortunately her husband stands by her and his daughter. When they hear about our aid project in Kolkata, their minds are made up immediately: Amina must get surgery, so that she will be able to grow up to be healthy, like her brothers!

Amina is doubly lucky: she has parents who fight for her and she is in the best hands at our cleft center in Kolkata. Dr. Siddhartha, our senior surgeon, has a qualified team of psychologists, speech therapists and orthodontists at his side. After the surgeries, they continue to care for the little patients with the necessary follow-up treatments. Amina has now undergone two operations; both her cleft lip and palate are closed. Speech therapy is planned in the further course of treatment. Kolkata is one of our six Indian locations offering comprehensive treatment. This approach provides holistic and long-term care to the af-



Project start: 2003 | Locations: 32

Operations 2019: 2,792

Operations total, all years: 29,822

Treatment spectrum: ★★ (6 centers)

★ (26 centers)

Partner organization: ABMSS, Bangalore

Funding: 725,944 euros



Amina is given special food after her surgery

ected children (see also pages 8/9). In addition to the substantial funding from our association, this is made possible in India through the cooperation with Transforming Faces (Canada) and the Persistent Foundation (India). Together with our partner organization ABMSS, which coordinates the individual projects in India and also independently raises funds, the four partners operate under the umbrella "Cleft India".

IMPRESSIONS FROM OUR WORK IN INDIA

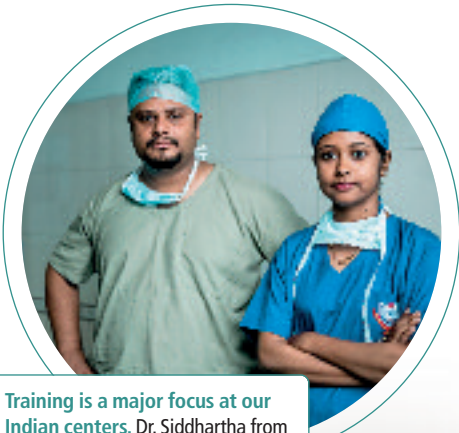
Our Indian partners were able to perform almost 2,800 operations in 2019. The number of treatment centers has also increased. The new locations are Aurangabad, Cuttack, Nagpur, Pandharpur and Sangli. Six centers in India provide comprehensive care: In Agra, Bangalore, Hyderabad, Kolkata, Mysore and Nagpur, all medical disciplines relevant to cleft therapy are offered (marked with ★★ on the map).

INDIA



Nine years separate the two pictures. That's how long Pallavi, who is now ten years old, has been receiving treatment at our center in Patna.





Training is a major focus at our Indian centers. Dr. Siddhartha from Kolkata has two young assistant doctors in his team, one male and one female. Pictured at his side: Dr. Debolina.

Some 40,000 children are born with cleft lip and palate in India each year. Many families cannot afford the treatment their children need: Around 80 percent of the Indian population have no health insurance. Some 150 passionate doctors, nurses, therapists and project employees at our Indian treatment centers work hard to ensure that cleft children have a chance in life. Almost 30,000 operations in 17 years are the happy result of our work in India.



Most of our patients live in severe poverty. Like Hussain's family: The family of six lives in a slum in Mysore.



Speech and functional therapist Lakshmi integrates yoga practice into her therapy work. The children enjoy the regular excursions to the city park.

PERU

HIGH-QUALITY CLEFT CARE

Our effort in Peru is an exemplary case of successful implementation of our interdisciplinary treatment approach. In addition to excellent surgical care, we offer patients a wide range of follow-up therapies.

One of our two long-term partners in Peru, surgeon Dr. Alberto Bardales, has a dedicated team at his side: three psychologists, a functional therapist, two speech therapists, a pediatric dentist and an orthodontist. They all work for Peruvian cleft children with all their heart and all their considerable skills. Patients outside the capital also get to enjoy this comprehensive care - in regions where otherwise little help is available. In 2019, surgical missions were performed to Puno, Cajamarca, Cusco, Huánuco, Arequipa and Huanayo. During these missions, Dr. Alberto Bardales treated 213 patients. Another 22 were treated by our second partner, Dr. Mario Cornejo.



Project start: **2006**

Partners:

1) **Qorito, Lima/Head: Dr. Alberto Bardales**

2) **Cusco/Head: Dr. Mario Cornejo**

Operations 2019: **235**

Operations total, all years: **4,582**

Treatment spectrum: ★ ★ ★

Funding: **242,217 euros**



Volunteering her time: Sylvia Luedtke Haas is our volunteer project manager in Peru and accompanies the team on many of the missions.

BOLIVIA

CLEAR GOALS,
CONSISTENT STRATEGY

Pediatric surgeon Dr. Adolfo Mamani has been leading our aid project in La Paz since 2016. From the beginning he pursued the goal of giving his little patients access to comprehensive treatment. His mentor and motivator is our Peruvian surgeon Dr. Alberto Bardales. He trained Adolfo Mamani in cleft surgery over the course of more than three years.

"My colleague Alberto planted the seeds for the fruits that we can harvest today," said Dr. Adolfo Mamani in his opening speech at the 1st International Lip and Palate Cleft Palate Congress, which took place from July 31 to August 2, 2019 in La Paz. The focus of the professional exchange, in which some 200 surgeons, speech therapists, orthodontists and psychologists took part, was interdisciplinary treatment for cleft patients.

45 percent of the population of Bolivia live in poverty. The indigenous peoples living in the Bolivian highlands are particularly affected. They do not have access to qualified medical care. Dr. Mamani, like our second project partner, Dr. Mario Villalba, regularly travels to these regions to treat cleft children at local hospitals. In 2019, they were able to perform more than 300 operations.

February 2019, Oruro:
Jheferson, 7 months old,
with his grandmother
before his surgery.



Project start: 2010

Partners: 1) Cleft Bolivia Amar y Sanar,
Tarija/Head: Dr. Mario Villalba

2) Jiwaqui Bolivia, La Paz/Head: Dr. Adolfo Mamani
Operations 2019: 302

Operations total, all years: 2,013

Treatment spectrum: ★ ★

Funding: 119,843 euros



BANGLADESH

SURGERY NUMBERS DOUBLED

2019 was a milestone for our Bangladesh project. The expansion of our surgical team resulted in a massive increase in the number of cleft patients we were able to treat. With our four surgeons, we were able to perform 1,870 operations, after 761 in 2018.

The need for aid is great in Bangladesh. More than 40 percent of people live in extreme poverty. Many families live in poor conditions in the slums of the big cities. Around 6,000 children with cleft lip and palate are born each year. Our project locations are Bangladesh's two largest cities, Dhaka and Chittagong, in the south, and the city of Rajshahi in the northwest.

In rural areas, people are often afraid to entrust their children to doctors or to go to the city for medical treatment. To help them, our surgeons regularly organize operations outside of fixed locations in small provincial hospitals. It is important to win the parents' trust and convince them of the need to have their children treated. Education is therefore an important part of our work in Bangladesh.

Over the next years, we want to use our partner network to further develop our treatment concept beyond only the basic operations, so that cleft patients in Bangladesh too will finally have access to the follow-up therapies they need.

March 2019, surgical mission to Chittagong:
A hopeful mother awaits her little daughter's surgery.



Project start: 2010

Partners: Syed Nuruddin Ahmed

Development Foundation (SNAD Foundation)

Cooperation: Operation Cleft Australia (OCA)

Operations 2019: 1,870

Operations total, all years: 5,963

Treatment spectrum: ✨

Funding: 444,958 euros



PAKISTAN

3,470 SURGERIES
IN SIX YEARS

Pakistan is one of the fastest growing countries in the world. In 2019, more than 200 million people lived in Pakistan. With around six million births in 2019 and based on an incidence of 1: 500, some 12,000 children with cleft lip and palate are born in Pakistan every year.

Only about half of the children receive treatment. There are some plastic surgeons in Pakistan, but only a few operate cleft lip and palate. Most of them lack the know-how. In addition, the treatment of a child from a poor background is not very lucrative. There often is no room for the children in the public hospitals.

Our project in Pakistan is based in Karachi, the capital of the Sindh province. With around 15 million inhabitants, Karachi is one of the largest cities in the world. Outside the metropolis, life is rural. The rural population is very poor. The focus of our work in Pakistan is on performing the necessary operations. Our Pakistan project is led by plastic surgeon Prof. Ganatra. He operates in the Al Mustafa Medical center in Karachi and in various hospitals in the province of Sindh.



Project start: 2013

Partners: Al-Mustafa Welfare Society

Head: Prof. Muhammad Ashraf Ganatra

Operations 2019: 709

Operations total, all years: 3,470

Treatment spectrum: ★ ★

Funding: 227,649 euros

The training of young surgeons is very important to him. We are particularly pleased that several women are part of his team as surgeons. This is very unusual for Pakistan. After the operation, some of the patients are treated with speech therapy and orthodontic treatments. An expansion of these interdisciplinary structures in Pakistan is planned.



Professor Ganatra (center) with his young team.

VIETNAM

EXPANSION: THIRD LOCATION IN VIETNAM

Vietnam is one of our focus countries. We continuously work to advance our mission of enabling cleft children from needy families to receive sustainable help.

In cooperation with the world-renowned Noordhoff Craniofacial Foundation (NCF) from Taiwan we started a project in Ho-Chi-Minh City in the south of Vietnam in 2016. Together, we promote comprehensive care for cleft patients through surgery, orthodontic and speech therapy treatments as well as preoperative NAM therapy for newborn babies in the Odonto-Maxillo-Facial Hospital, a municipal specialty clinic for oral and maxillofacial surgery. A second joint project followed in mid-2019, with the National Children's Hospital in Hanoi as the project partner. These two projects are supervised by the Munich surgeons Dr. Daniel Lonic and Dr. Dr. Denys Loeffelbein, working as unpaid volunteers. Together with Dr. Ai from Hanoi, our first Vietnamese partner, we were able to implement 208 operations across our three Vietnamese projects in 2019.



Project start: 2006

Partners: 1) Center for Researching and Aiding Smile Operation (OSCA), Hanoi/Head: Dr. Ai
2) Odonto-Maxillo-Facial Hospital, Ho Chi Minh City
3) National Children's Hospital, Hanoi
Cooperation (2/3): Noordhoff Craniofacial Foundation Taiwan (NCF)

Operations 2019: 208

Operations total, all years: 3,178

Treatment spectrum: ★ ★ ★

Funding: 91,581 euros



Cleft child during a surgical mission in Ho Chi Minh City.



Dr. Lonic, Prof. Lo, Dr. Duong, Dr. Loeffelbein (left to right)



Dr. Ai examines little Chi before her operation.

RWANDA/TANZANIA

GREAT NEED
IN EAST AFRICA

We have been active on the African continent since 2003. Our starting project was Cameroon, which we ended in 2014 after almost 1,300 operations. In East Africa, we started our aid work in Uganda in 2009, with regular surgical missions and the training of an African team. This was followed by adding projects in Rwanda (2011), Burundi (2015) and Tanzania (2016).

From the beginning, our effort in east Africa has been supported by the German doctors Oliver Blume and Gunther Au-Balbach. The oral and maxillofacial surgeons are on site once a year. Rwanda was their destination in 2019. From February 8th to 17th they, together with our African team, provided surgeries to cleft children in Gitwe.

The patients were exclusively babies and toddlers. Most of them were in a desolate condition, malnourished and sometimes very sick. A child that cannot drink properly from his or her mother's breast is left to its fate. Six weeks after birth, the children are below their birth weight.

Surgery under these circumstances is a major challenge for surgeons and anesthetists, but for the little patient it is usually the only chance to survive. 16 children were successfully treated during our relief mission. At our fixed project location in Rulenge (Tanzania), our partner Laurent Siborurema, a Rwandan surgeon trained by us, performed 18 further operations.



Project start: 2011 Rwanda/2016 Tanzania

Team DCKH: Dr. Dr. O. Blume, Gunther Au-Balbach

Team Africa: surgeons Dr. Laurent Siborurema (Rwanda) and Dr. Deus Twesigye (Uganda), Anesthetist Dr. Emmanuel Munyarugero (Uganda), Sister Caroline Nakyanzi (Uganda)

Partner in Tanzania: Diocese Rulenge-Ngara

Operations 2019: 34

Operations total, all years: 203

Treatment spectrum: 🌟

Funding: 50,836 euros



Gunther Au-Balbach (left) with Dr. Dr. Oliver Blume



Hand in hand for a child's life.

AFGHANISTAN

MAXIMUM DEDICATION
FROM OUR TEAMS

According to Unicef, Afghanistan is one of the deadliest war zones in the world. Between 2009 and 2018, some 6,500 children were killed and another 15,000 injured. To date, more than 400,000 children have fallen victim to landmines.

The security situation still was very difficult in 2019. Attacks continue to be part of everyday life for people. Many families in the underdeveloped country live in extreme poverty. Available medical care is poor. Only few of the approximately 2,500 children born with cleft lip and palate every year receive treatment. Our gratitude goes to our four surgeons, who provide aid to Afghan cleft children despite the associated risk to their own lives. The happy result: 1,312 operations in nine years.



Project start: 2010

Partners: 1) Dr. Sebghatullah Natory, Kunduz

2) Dr. Habibullah Atif, Faizabad

3) Dr. Nooria Zia & Dr. Wahed Ershad, Mazar-i-Scharif

Operations 2019: 120

Operations total, all years: 1,312

Treatment spectrum: ✨

Funding: 29,187 euros



Help is desperately needed: Childhood in Afghanistan is colored by violence and deprivation.

INDONESIA

HELP FOR CLEFT CHILDREN
ON REMOTE ISLANDS

Indonesia consists of 17,508 islands. 6,044 islands, about a third, are inhabited. Many island regions of Indonesia are remote and difficult to reach.

Far from the main islands of Indonesia, the inhabitants of smaller islands suffer under a poorly developed infrastructure. Importantly, there is a lack of medical infrastructure coverage. Many families cannot afford to travel the distances to the next hospital, which can be considerable. As a result, we time and again come across older cleft children who have not yet been treated. The poor infrastructure also poses a major challenge for our local partners when it comes to organizing and carrying out relief work. Nevertheless, we were at least able to finance a surgery for ten cleft children last year – ten lives improved!



Project start: 2014

Partners: RSUD Dr. Saiful Anwar Hospital

Head: Prof. Bambang Pardjianto

Operations 2019: 10

Operations total, all years: 196

Treatment spectrum: ★

Funding: 5,912 euros



Dr. Ulrike Lamlé (left) manages our aid project in Indonesia. To her right: Prof. Bambang with project staff.

Hand in hand for cleft children

6,280 operations in 2019: Our gratitude goes out to our many supporters and friends in Germany and around the world. It is you who collectively have made this incredible result possible. With your donations, your personal commitment, and time and again with new ideas to draw attention to our work for cleft children and thus expand our network.

On behalf of all "our" cleft children and their families, I would like to thank you all from the bottom of my heart. The thousands of lives of cleft children we are able to change for the better every year truly are the happiest entry in our yearly balance sheet for me as the managing director of Deutsche Cleft Kinderhilfe.



*A heartfelt,
"Thank you!"*

Sincerely, your

Alexander Gross,
Managing Director Deutsche Cleft Kinderhilfe e.V.

IN MEMORIAM

Almost 90,000 euros of our donation income in 2019 came from three legacies. Bequests are a gift that keeps on giving for the entire life of the cleft children that can be treated thanks to them. They are an investment into the future of children who would have to live much more difficult lives without our help. A "last will" for the good of many children. For us, such bequests are a truly humbling display of trust in our work. For this we say thank you from the bottom of our hearts.

From the bottom of our hearts we say thank you!

Our deepest gratitude goes out to our institutional, corporate, and private supporters, who so substantially support our work for cleft children.

Institutional donors

 Lore-Keller-Stiftung					
 Chow Thai Fook Medical Foundation	 Federal Foreign Office	 Operation Cleft Australia	 Hans und Elfriede Westphal-Stiftung	 BMZ	 Sternstunden e. V.
 Bild hilft e.V. <i>Ein Herz für Kinder</i>	 Dr. Martin Andreas Stiftung	 Charlotte-Steppuhn-Stiftung	 Schweizer Hilfe für Spaltkinder	 Margarete Müller-Bull Stiftung	 Nader Etmenan Stiftung
 The Global Children Foundation	 Laki Kids International e.V.	 Geschwister Kauffmann-Stiftung	 Stiftung Hilfswerk Dt. Zahnärzte	 Lucas Volk-Stiftung	 24 gute Taten e.V.

Corporate partners and private sponsors

- | | | |
|---|--|--|
| <ul style="list-style-type: none"> > Plastimat GmbH > Amann Gierbach AG/Amann Gierbach GmbH > MESTO Spritzenfabrik Ernst Stockburger GmbH > Sunshine Smile GmbH | <ul style="list-style-type: none"> > Bundesverband Dt. Kosmetiker/-innen e.V. > NTD NewTech Development GmbH > Change Sportswear GmbH & Co. KG > botiss dental GmbH/ botiss medical AG | <ul style="list-style-type: none"> > Singhoff GmbH > BFS health finance GmbH > Families Markus and Thomas Alber > Dr. Andreas Raab |
|---|--|--|



A SEAL OF CONFIDENCE: since 2012 (based on the 2010 annual financial statements) we have been proud bearers of the DZI donation seal for our responsible use of the funds donated to us. In order to maintain the seal, we undergo strictly regulated audits of our finances every year. The seal is awarded by the German Central Institute for Social Issues (DZI) based in Berlin. The DZI donation seal certifies that the certified organization makes responsible and diligent use of the donations entrusted to them.



What's the world without glitter?

Glitter for a donation: That is the wonderfully joyful idea behind the "glitter ladies" who bring their "glitter mobile" to music festivals. The mission of the two glitter ladies Hanna and Julia from Bielefeld: to conjure up a sparkle in the faces of festival goers with lots of glitter and at the same time help cleft children. Thanks to the glitter ladies' efforts, three children were able to receive surgery in 2019.

A COMMON CAUSE: EVENTS & CA



Home game in Freiburg

The annual tarte flambee campaign, initiated by the Binder family of the Lindenbrunnenhof in Forchheim, has become a tradition by now. In 2019, the people of Freiburg even got to enjoy the Binders' tarte flambée twice: in spring, as usual, under the auspices of Christa and Otmar Binder at the Stühlinger farmer's market in Freiburg, and then again, for the first time, at the Wiehre market as well. Always on board with great passion: the tarte flambé bakers Iris and Jürgen Wirth. The Endingen-based butcher Markus Dirr contributed the hearty toppings enjoyed by patrons at the Wiehre market. The tangible result of both actions: An incredible 1,210 euros in donations, and enriching exchanges with many interested passersby.



415 cleft children say "thank you"

On September 28, 2019, MESTO, a manufacturer of portable sprayers based in Freiberg, Baden-Württemberg, celebrated their 100th anniversary. MESTO is a family business and has been a loyal supporter of our work for cleft children for ten years. In wonderful late-summer weather, the anniversary was celebrated in the Wagenhallen in Stuttgart with family, employees and business partners. In lieu of jubilee gifts to the host, owner Bernd Stockburger presented a check to our employees Ulrike Claassens and Andrea Weiberg: 19,190 euros for cleft children to reflect 1919, the founding year of the traditional company - generously rounded up. What would the world be missing without MESTO? Our contribution to the answer: The smile of 415 cleft children!

CAMPAIGNS FOR CLEFT CHILDREN

ATMs call for donations

Shortly before Christmas 2019, the company transact Elektronische Zahlungssysteme GmbH launched an unusual campaign for our cleft children. The company from Martinsried near Munich made their nationwide Euronet ATM network available to us as advertising space free of charge for four weeks. A highly visible publicity campaign in the most active time of the year for donations.



EXPANDING WHILE STAYING FOCUSED

A guiding principle of our work, which has shaped our efforts since the beginning, is the long-term and sustainable development of our cleft projects. We use our funds in a targeted manner and steer development in close cooperation with our local partners.

Our focus countries are Bangladesh, Bolivia, India, Pakistan, Peru, Vietnam and East Africa. In East Africa, our surgeons work across borders: so far operations and training have taken place in Uganda, Burundi, Rwanda and Tanzania, and our trained surgeons routinely go on missions in other countries in the region.

This is particularly important since there is a great shortage of surgeons qualified to operate children with cleft lip and palate in all of these countries. Training surgeons is therefore just as vital a task as treating children. Thanks to our continuous training efforts over the past ten years, we have been able to build up an independent African medical team. In 2020 we are starting a new project for Somali cleft children, who not only live in Somalia, but also in Ethiopia, Djibouti and Kenya. We are planning to establish a cleft center in Somalia in 2021 in cooperation with the aid organization Somcare.

In Bangladesh, we far exceeded our original goal for 2019 of doubling the number of operations: Instead of the 1,500 operations we had expected, we closed 2019 having performed 1,870! The expansion of interdisciplinary structures continues in Peru and Bolivia. Our Bolivian surgeon Dr. Adolfo Mamani, who was trained by our Peruvian surgeon Dr. Alberto Bardales, organized the 1st international Cleft Lip and Palate Congress in 2019 in La Paz, which focused on the comprehensive treatment of cleft children. We are also expanding our organization in Bolivia: A contract with the Cochabamba-based Bolivian organization Ayninkuna as a new, third project partner has been signed. Measured by the number of operations and locations, India was again our largest project country in 2019: We are happy to report 2,780 surgical interventions and five new locations. In Pakistan, Prof. Ashraf Ganatra carried out 709

operations last year. We have worked out a two-year project renewal agreement with him until 2022, under which 1,000 children will be able to receive an operation each year and which will in the future also include speech therapy and orthodontic measures.

Since 2019 we have also been able to offer cleft children in northern Vietnam a comprehensive treatment. After a successful start in Ho Chi Minh City, a cleft center in the National Children's Hospital in Hanoi is our second cooperation in Vietnam with the Taiwanese aid organization Noordhoff Craniofacial Foundation (NCF).

Looking ahead

The ongoing pandemic will have a massive impact on our activities in 2020. Lockdown measures go hand in hand with postponements of surgeries for not immediately life-threatening conditions. Each of our projects is affected. The result: thousands of cleft children waiting for their operation. In this global crisis, our investment in sustainable aid and independent structures in our project countries is paying off. In a time of closed borders, the cooperation with local doctors ensures that our help for cleft children can continue.

Advertising & public relations

Our offline communication in 2019 was based around seven donation letters and the annual report. Concept and text were developed internally, MSG / Media - Sebastian Schampera was commissioned for the design. Service providers for printing and mailing were Burger Druck (Waldkirch), Drescher Full-Service Versand (Offenburg) and a + s Dialog Group (Ditzingen). Our e-mail newsletter (system: Rapidmail), which went out seven times in 2019, was one of the main online information sources, alongside our website, spalkinder.org, which was relaunched. The relaunch was supported by The CookieLabs (Munich). Our TV spot was again broadcast pro bono on various RTL media group channels in 2019.

ANNUAL FINANCIAL STATEMENT 2019

The record number of 6,280 operations naturally resulted in further expenditure growth. The total expenditure of EUR 2.486 million was offset by an income of EUR 2.494 million in the reporting year. 8,000 euros of donated funds were not spent and booked accordingly. 81.3 percent of total expenditure (EUR 2.020 million) went into project funding: EUR 1.702 million in direct medical aid, 307,000 euro in project coordination and support, 11,000 euros for specialist information as per our statutes. Fundraising costs were EUR 382,000 (15.4 percent) and administrative expenses were EUR 82,000 (3.3 percent).

Our annual financial statements are audited by an auditing company and published on our website in October 2020 in a detailed version of the annual report.

Zest for life: Amina (see also pages 10/11) is healthy and full of energy shortly after her surgery.



*Thank you all
from the
bottom of our
hearts!*

A gift of good fortune: Jheferson from Bolivia (see page 15) had a successful surgery.

**Deutsche
CLEFT
Kinderhilfe e.V.**
Comprehensive care for children
with cleft lip and palates

Stühlingerstraße 11
79106 Freiburg im Breisgau
Germany
Phone: +49(0)761 137 976-0
info@spaltkinder.org
www.spaltkinder.org

Bank account
Bank für Sozialwirtschaft
IBAN: DE46 2512 0510 0008 4842 00
BIC: BFSWDE33HAN
SEPA creditor identification number:
DE56ZZZ00000147759



The German Central Institute for Social Issues (DZI) has reviewed our use of funds. As a badge of the responsible use of the funds entrusted to us, Deutsche Cleft Kinderhilfe proudly bears the DZI donation seal.