



Penang Family Health Development Association 槟州家庭健康发展协会

PENYATA TAHUNAN 2022 **62nd Annual Report**

PILLAR1

PILLAR2

PILLAR3

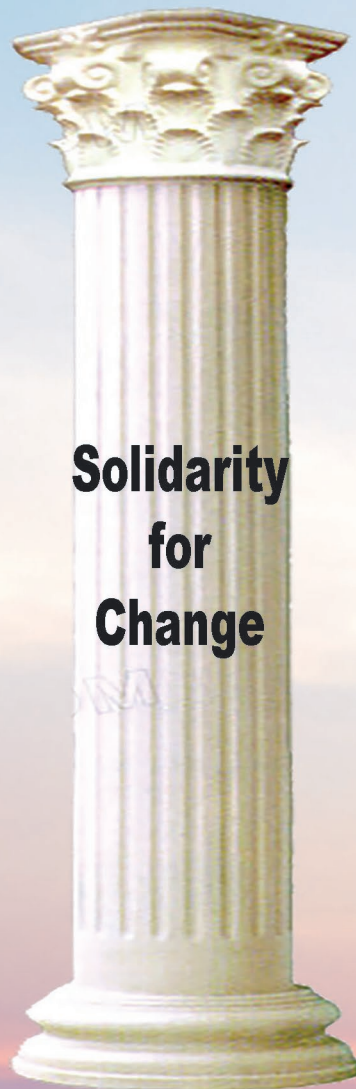
PILLAR4



**Centre
Care
on
People**



**Move
the
Sexuality
Agenda**



**Solidarity
for
Change**



**Nurture
our
Federation**

PERSATUAN PERKEMBANGAN KESIHATAN KELUARGA PULAU PINANG

Penang Family Health Development Association

槟州家庭健康发展协会

(Winner of Tun Dr Siti Hasmah Award, 2012)

The Penang Family Health Development Association (FHDA) is an NGO established in 1961 formerly known as Family Planning Association. We are a not-for-profit registered society with tax-exempt status for donors. FHDA is a partner organization of the Malaysian AIDS Council. Our NGO is a member association of the Federation of Reproductive Health Associations, Malaysia (FRHAM), which is an affiliate of the International Planned Parenthood Federation (IPPF).

We won the Tun Dr Siti Hasmah Award in 2012 for community work on AIDS. This award is presented by the Malaysian AIDS Foundation. In 2016, the then Deputy Minister of Health launched NGO-based Community Based HIV testing & counseling in collaboration for with Jabatan Kesihatan Negeri at FHDA, establishing referral / continuum of care at various Klinik Kesihatan.

Vision: To be a leading NGO in the field of sexual and reproductive health and rights
Mission: A caring and effective NGO in community health
Motto: My Body, My Responsibility

Clinical (Integrated Package of Essential Services aka IPES)

Services for all people - Hormone replacement therapy, wellness checks, family planning, pre and post HIV prophylaxis, women's health screening – blood hormone test, pap smear and ultrasound; men's health blood tests; vaccinations and STI/HIV rapid tests

Mental Health & SRHR

Counselling available - relationships, gender identity, sexuality, coping with adolescence, carers of special teenagers

Advocacy

Comprehensive sexuality education (CSE) for young people regarding family development, prevention of teen pregnancy, safe motherhood, and awareness of cyber sexual and gender based violence
Providing contraception to all who need to prevent unwanted pregnancy

Outreach (Leave no one behind)

Charity cash aid and supplies to children affected by HIV (MAY4Kids programme)
Support for women living with HIV ("Me And You" – MAY Support service)
"Safe motherhood and pre-pregnancy"- charity food supplies, vaccination subsidy and health screening for women at risk, needy refugees and marginalised migrants
Health screening and referrals – MSM, TG, women at risk, refugees, needy migrant women
SRH awareness education
We welcome volunteers.

Training

Peer education training (SRH course)
Single module – gender based violence, pregnancy, contraception, menstrual cycle, breast-examination,

breast cancer, breast feeding, safe sex & HIV/STI , LGBTIQ & SOGIE, support for carers coping with challenged special children

Health education packages for women's health

Training of trainers

Training of health service providers

Training of community health workers

We are CPD provider for MMA and MOH

Certified HRD Corporation trainer available

Young people

School, learning institutions, factory and business organization talks

We welcome interns.

Aged care

Charity home visits to vulnerable women at risk in the community

Publications

Bicara Komuniti manual (facilitators' guide)

Guidelines for HIV testing (registered National Library barcode, 2011)

Annual reports (visit our website: <https://www.penangfhda.org>)

Funding

Project grants AND need donations/sponsors for our charity services

Online donation Maybank account number: **MBB 5570 1800 0092**

Contact us

Persatuan Perkembangan Kesihatan Keluarga Pulau Pinang

(Penang Family Health Development Association)

Tunku Ismail Jewa Centre (office)

333 Jalan Perak

11600 Penang, Malaysia.

Tel. 6-04-2805594 ; fax. 04-2819380

H/P: +6011-3660 0297 (Whatsápp message for counselling appointment)

fB: Penang Family Health Development Association

Website url: ; <https://www.penangfhda.org>.

IG: penangfhda

Email address: info@fhdapenang.org.

Open: 9.00am-6.00pm, Tuesdays to Saturdays

Closed on Sundays, Mondays and Public Holidays

Penang Family Health Development Association

FHDA Kg Kolam (clinic)

16/18 Kg Kolam

10200 George Town, Penang, Malaysia

H/P: +6011-33068184 (whatsapp message for health screening)

Tel. 6-04-2622225

Open: 8.30am-3.30pm, Tuesdays to Saturdays

Doctor's sessions: 9.30am-12.00noon; Wednesdays, Fridays & Saturdays

Closed on Sundays, Mondays and Public Holidays

MESSAGE FROM PRESIDENT



The last year saw a positive revival of activities relating to outreach clinical visits, seminars with partner organisations and fund-raising. The mobile clinic initiative was a great success in that the team could go to remoter areas outside George Town to extend its services. In this regard, the team reached out to the Rohingya scattered communities in the northern region and was able to conduct clinic sessions with both men and women, including the distribution of contraceptives and condoms.

Emerging patterns of gender relationships involving the LGBTQ communities engaged the team in knowledge sharing and exchanges which further encouraged trends towards inclusivity, at the same time enabled programmes to draw in these emerging communities further into main-stream activities on reproductive health. It is hoped that this work will continue to flourish and leave a mark in the rehabilitation of vulnerable communities, in particularly refugees in the country.

A handwritten signature in black ink, appearing to read 'Wazir', with a stylized flourish underneath.

Prof Emerita Dato Seri Dr Wazir Jahan Karim
President

MESSAGE FROM CHAIRPERSON



For over 60 years, FHDA has delivered quality services, comprehensive information and advocated for sexual reproductive health and rights (SRHR) among more people. Looking back at the past 12 months, I am pleased that the pace and scale of delivery did not falter, but has remained steady in the face of the pandemic and other challenges.

In order to be impactful and to uphold SRHR for all especially those who are left out or left behind, FHDA has continued to focus on using innovative methods like expanding digital means to ensure information, education, service, commodities are available to communities. Telemedicine has provided SRH services including virtual counselling, consultation and follow-up; referrals and follow-up care; and online prescriptions.

A new framework by IPPF will also be our guide covering four pillars namely:

- Pillar 1: Centre Care on People
- Pillar 2: Move the Sexuality Agenda
- Pillar 3: Solidarity for Change
- Pillar 4: Nurture our Federation

We have been part of government initiatives through the Malaysian AIDS Council like the Differentiated HIV Services for Key Populations; and the MyICE (Malaysian Incentive Community Empowerment) Programme through the Registry of Societies. Through FRHAM, we were involved in the JTF/IPPF programme, Safeguard SRHR of Displaced Persons from Rhakine State in Malaysia.

Two years of the pandemic with the various MCOs has made fund raising difficult. Hence, we are grateful to donors who have not forgotten us. Two compassionate companies ran fund raising campaigns for us: Ain Hoa Beauty and Spa promoted facial vouchers while Viva Victoria delicious briyani sets. The Theng Kah Loke & Wong Ah Yin Charitable Trust provided food, subsidised cost for baby immunization at health clinics; and medical screening for safe motherhood for refugees and asylum-seeking migrants.

FHDA remains committed to its mission. This mission would not have been possible without the hard work and selfless dedication of many individuals and organisations. Thank you to the stakeholders for your trust and support without which we would not have been able to achieve this scale and depth of the impact. My thanks also go to the executive committee, volunteers and staff. FHDA will continue to improve its performance in the coming years.

A handwritten signature in black ink that reads "Yeap Meng Chee".

Yeap Meng Chee, BCN, PKT, PJK
Chairperson

OFFICIALS and COMMITTEE MEMBERS – 2022 -2023

TRUSTEES: Dato’ Khoo Yeoh Gan Hong, DSPN, DJN, PPN, PKT, PJK, PJM
 Dr Najeemu Hamzah
 Dr Pyar Kaur
 Dato’ Dr. Yee Thiam Sun, DMPN, DSPN, KMN, DJN, PKT, PJM

PRESIDENT: Prof Emerita Dato’ Seri Dr. Wazir Jahan Begum Bt. Abdul Karim

EXECUTIVE: Ms. Yeap Meng Chee, BCN, PKT, PJK – Chairman
COMMITTEE: Dr Dinesh Mahalingam – Vice Chairman
 Mr Lim Beng Poh, DJN, PKT, PJK, PPN – Hon. Secretary
 Dr Mallise Tong Mun Wah – Hon. Treasurer.
 Ms Heah Tze-Shuen (Natalie)
 Mr Goh Yong Jian
 Mr Damian Lee Wan Tong
 Ms Tan Lay Pheng, PJM.
 Dr (Mrs) Gan Kam Ling, PKT (co-opted)
 Mdm Jubaidah Nagoor, PPN, PJM (co-opted)

YOUTH REPRESENTATIVES: Ms Michelle Mah Huey-Li
 Ms Thurgkasiny Muthukumar

HON. INTERNAL: Mr Tan Tee Boon
AUDITORS: Ms Kalaivani Kaliaperumal

Executive committee member	16/2/22	23/3/22	13/5/22	3/6/22	18/3/23	TOTAL
Ms Yeap Meng Chee, BCN, PKT, PJK – Chairman	P	P	P	P	P	5/5
Dr Dinesh Mahalingam – Vice - Chairman	X	P	P	P	P	4/5
Mr Lim Beng Poh, DJN, PKT, PJK, PPN – Hon. Secretary	P	P	AP	P	P	4/5
Dr. Mallise Tong Mun Wah – Hon. Treasurer	P	P	P	P	P	5/5
Ms Natalie Heah Tze-Shuen	P	P	AP	AP	P	3/5
Mr Goh Yong Jian	P	P	AP	A/P	P	3/5
Mr Damian Lee Wan Tong	P	P	P	P	P	5/5
Ms Tan Lay Pheng, PJM	-	-	-	AP	AP	-
Mdm Jubaidah Nagoor PPN, PJM – (Co-opted)	AP	P	P	AP	AP	2/5
Dr. (Mrs) Gan Kam Ling, PKT – (Co-opted)	AP	P	AP	AP	AP	1/5

P – Present

AP – Absent with apology

AB – X

SUB-COMMITTEES 2022

Family Planning & Sexual Reproductive Health Services

Dr Choong Sim Poay - Chairman
Dr Dinesh Mahalingam
Dr Yim Poh Yin
Ms Tan Lay Pheng
Mdm Kalaivani Kaliaperumal

Young People & Sexual Reproductive Health

Ms Thurkasiny Muthukumar - Chairman
Ms Yeap Meng Chee
Ms Michelle Mah Huey-Li
Ms Natalie Heah Tze-Shuen
Ms Carlyn Gan
Mr Goh Yong Jian

HIV / STIs / Hep C

Dato' Dr Chow Ting Soo - Chairman
Dr Dinesh Mahalingam
Dr Ang Peng Peng
Dr Guan Han Lin
Dr Hor Chee Peng
En Bakhtiar Talhah
Ms Natalie Heah Tze-Shuen

Resource Mobilisation

Mr Bakhtiar Talhah - Chairman
Ms Yeap Meng Chee
Mr Lim Beng Poh
Mr Damien Lee
Dr Dinesh Mahalingam
Dr Mallise Tong Mun Wah

Management & Administrative

Mr Lim Beng Poh - Chairman
Ms Yeap Meng Chee
Dr Dinesh Mahalingam
Dr Mallise Tong Mun Wah

SUPPORTING STRATEGIES

Hon. Legal Adviser

Hon. AIDS Advocacy Adviser

Hon. MSM Programme Adviser

Volunteer Clinic Doctor

Ms Nadiah Abdullah

Dato' Dr Chow Ting Soo, DSPN, DJN.

Mr Bakhtiar Talhah

Dr Yim Poh Yin, PJK

REPRESENTATIVES TO EXTERNAL AGENCIES

Federation of Reproductive Health Associations Malaysia (FRHAM)

Ms Yeap Meng Chee (Vice-President re-elected)
Dato' Dr Yee Thiam Sun (Vice-President)
Dr Dinesh Mahalingam (Chairman of Medical Sub-Committee)

Delegates to FRHAM National Council

Dr Mallise Tong Mun Wah
Ms Michelle Mah Huey-Li
Dr Dinesh Mahalingam
Mr Damian Lee

Delegates to Malaysian AIDS Council

Mdm Jubaidah Nagoor
Mr Damian Lee
Dr Dinesh Mahalingam - Vice Chairman
Dr Mallise Tong Mun Wah - Treasurer

National Council of Women's Organisations (Penang)

Ms Yeap Meng Chee (Chairperson)
Dr Mallise Tong Mun Wah (Hon. Treasurer)

Majlis Kebajikan Masyarakat

Mr Lim Beng Poh



MEMBERSHIP AS AT 31 DEC 2022

MEMBERSHIP TYPE	NEW 2022		CUMULATIVE C/F 31 DEC 2022			TOTAL MEMBERSHIP 2022	NEW 2021			TOTAL MEMBERSHIP 2021
	M	F	M	F	TG		M	F	TG	
Ordinary	-	1	25	123	-	148	1			147
Life	1		95	134	-	230	1	1	1	228
ASSOCIATE	-	-	1	2	-	3	-	-		3
Youth	-	-	7	19	-	26	-	2		26
Total	1	1	128	278	-	406	2	3	1	404

The Association approved two (2) new memberships. One (1) male member and one (1) female member were recruited in 2022. Total membership is 406 including youth members under 24 years of age. Youth membership remains at 26.



Meeting of minds at MyHIVForum at UiTM Sungai Buloh.



Future FHDA leader.



Steven Yeap, intern turned volunteer.



Appreciating our donors.



TQ for being with us throughout 2022 (from left) : Chen, Lee, Yoke Peng, Hasra, Hezreen.



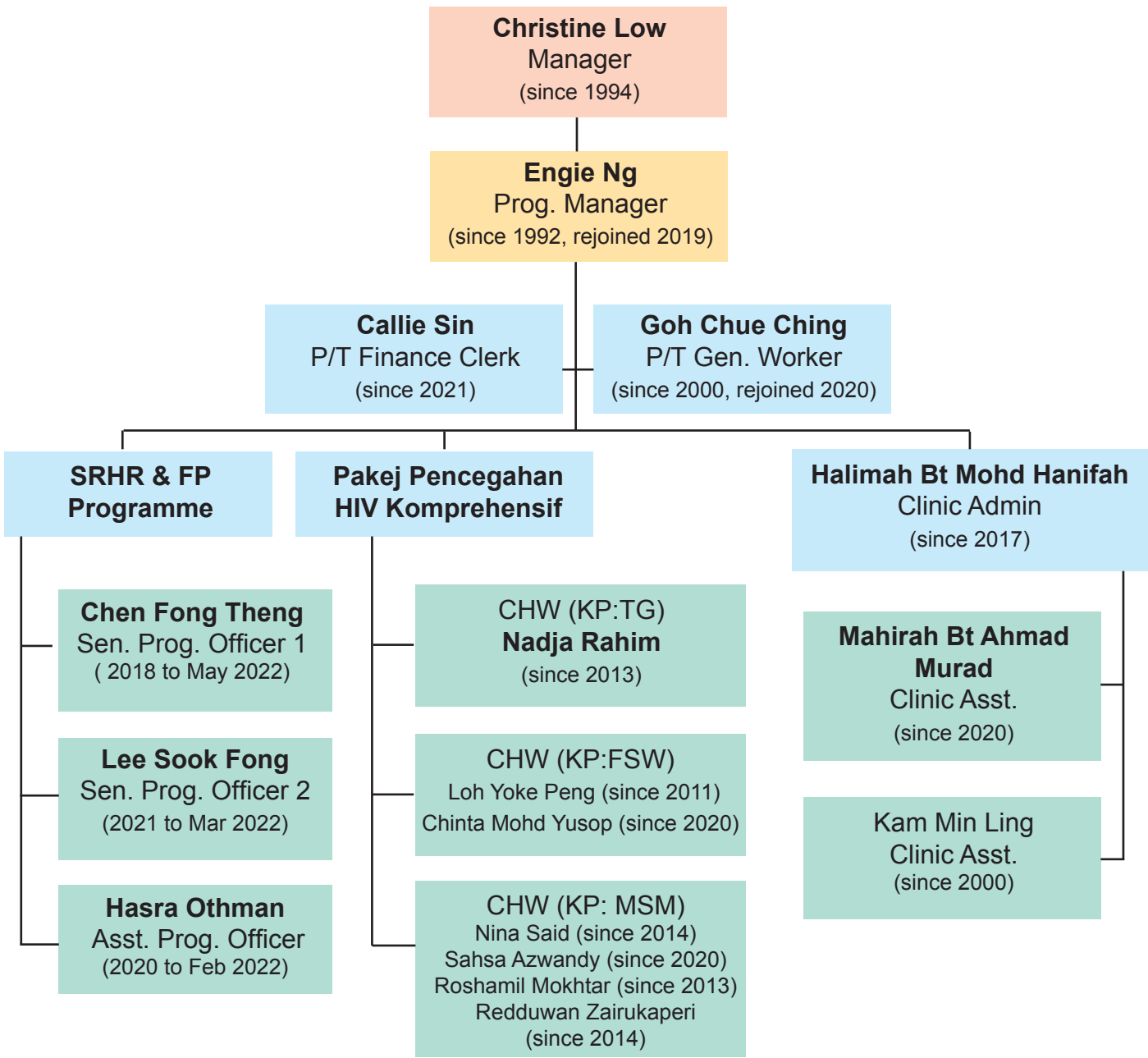
Goh (right) Head of Policy Manual Sub-Committee.

UPDATING MEMBERSHIP RECORDS

Members and/or their families are urged to notify the Hon Secretary of:

- change of address
- current e-mail address and mobile phone number
- awards and titles bestowed to members
- demise of members / family members.

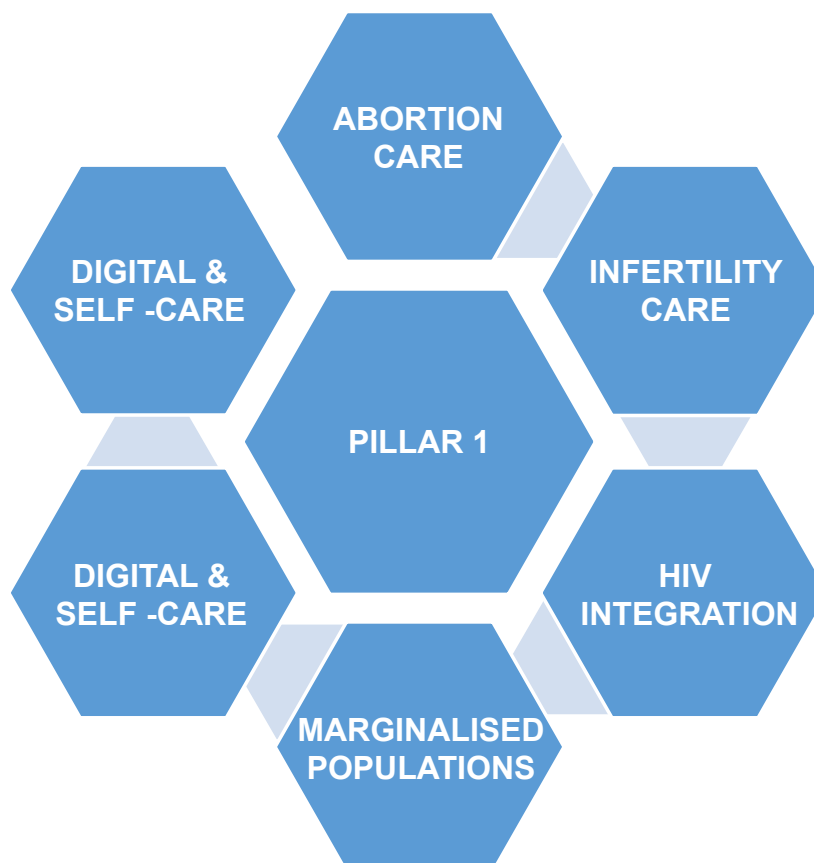
STAFF LIST AS AT 31 DECEMBER 2022



PILLAR 1: Centre Care on People

GOAL: Quality person-centred care to more people in more places

OUTCOME 3: Provision of quality and integrated SRHR services accessible by all especially the marginalised and underserved



Humanitarian Crisis

BIL	DESCRIPTIONS	DONORS
1	32 families given aid: Food supplies e.g. rice, cooking oil, tinned food, undergarments, sarong and maternity sanitary-pads for post-natal women; children, families who are jobless after MCO; and those who have just recovered from Covid 19.	TKLWAY
2	Basic medical screening, medical peripherals, gloves, test kits for 500 families	TKLWAY
3	Chinese New Year Hampers for needy families and elderly.	ROSE Charities
4	Female sanitary pads, sarong and female undergarments for girls and female refugees / women at risk / B40 families – poor and confined to home and no access to sexual reproductive health services	TKLWAY / IPPF
5	Payment for transportation for women and families who defaulted HAART treatment due to inability to pay for public transportation to hospital and health clinics	TKLWAY

Table 1: Sexual Reproductive Health Services

YEAR	2015	2016	2017	2018	2019	2020	2021	2022
TYPE OF SERVICES								
Pap Smear & Thin Prep	1388	1081	1034	755	748	562	357	378
HPV DNA							5	15
Breast Examination	1469	1140	1418	812	841	614	385	429
General Check by Staff	4329	3001	3751	2873	2714	3493	2670	2528
Minor Gynaecological Treatment	309	562	151	294	184	102	91	144
Ultrasound (Available since 2016)	0	386	568	567	625	483	355	391
Infertility Counselling	37	25	16	11	5	20	8	18
Marital Counselling	5	3	0	0	2	0	0	8
Pregnancy Testing (UPT)	47	59	53	24	22	23	31	37
Hormone Replacement Therapy	150	150	122	105	76	67	66	68
Hepatitis B Immunization	122	87	64	93	80	40	82	137
HPV* Vaccination	70	34	20	17	30	51	47	46
FLU VACCINE							103	39
Male Clients	312	510	314	142	284	719	762	1050
Youth Clients	87	212	88	53	?	114	235	208
Referral to Other Agencies	518	421	289	463	484	258	91	188
Obstetric						31	11	38
Abortion								4
Urology						42	79	101
SRH (other)-TG						35	67	199
PREP						101	110	131
PEP						18	20	20
HAART(ART)							3	40
Blood Test PPKPP (incl.HIV/VR/CD4)						425	573	387
Blood Test (STI/ VDRL/ Hep'A/ Hep'B/ Hep'C)						84	401	282
Rapid Test (SYP)								85
Rapid Test (HIV)						507	285	718

Table : PAP Smear Readings

YEAR	2015	2016	2017	2018	2019	2020	2021	2022
New	231	125	91	78	124	97	137	86
Repeat	1157	956	848	677	624	465	220	292
TOTAL	1388	1081	939	755	748	562	357	378
Normal	1079	940	823	644	687	481	264	233
Referral to specialist for abnormality / malignancy	72	51	21	21	10	4	2	9
Infection (Trichomoniasis, Moniliasis & Actinomyosis)	237	141	95	90	51	77	91	136
TOTAL	1388	1132	939	755	748	562	357	378

Table 3: Ultra Sound Readings

YEAR	2015	2016	2017	2018	2019	2020	2021	2022
New		386	55	75	113	107	113	102
Repeat		0	513	492	512	376	242	289
TOTAL		386	568	567	624	483	355	391
Normal						436	326	370
Referral to specialist for abnormality fibroid / cysts						11	1	13
						36	28	13
TOTAL						483	355	396

Digital Information and Care



FHDA Facebook post reaches around 1.4k (50.9% increase compared to 90 days prior), with 191 post engagements (reactions, comments, and shares) (increased by 148.1% compared to 90 days prior) at the last quarter of the year 2022.

-- The huge increase in reaches and reactions may be related to the main Counselling post featuring our three interns posted on 17 November 2022 - which reached 658 people (276% more people than our median post reaches [175 people]) and received 30 reactions (4x more reactions than our median post reactions [6 reactions])

FHDA Instagram post reaches 83 (increased by 31.7% compared to 90 days prior), with 42 post engagements (likes, comments, and shares) (declined by 49.4% compared to 90 days prior) at the last quarter of the year

- Instagram story reaches at 42 (90% increase compared to 90 days prior), with no engagements (likes, comments, and shares) for the same period of time. Likely due to more frequent postings of Instagram stories.



- Most of our Facebook page likers are people between 25-34 years old (around 40%) and from Penang (38.2%). Gender spread is minimal (with female 53.1% vs. male 46.9%)

written by Goh Yong Jian

<p>HIV & STIs / Others</p> <ul style="list-style-type: none"> • 556 clients were reached via social media • 434 clients were receiving online or F2F services 	<p>Infertility</p> <ul style="list-style-type: none"> • 18 callers; appointment made, seen and consulted 	<p>Abortion</p> <ul style="list-style-type: none"> • 15 callers; assessment done and referred
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HIV Integration

Activity	MSM	New Clients	Repeated Clients
HIV Counselling	498	324	174
VCT	366	241	125
CBT	132	83	49
Rapid Test Reactive	26	22	4
Confirmation Test	21	17	4
Starts HAART	19	13	6
STI Counselling	341	204	137
STI Blood test (lab)	259	154	105
STI : CBT	82	50	32
STI : Positive	3	2	1
STI : Treatment	3	2	1
Hep B	222	125	97
Hep C (CBT)	42	23	19
Hep C	250	151	99
Hep C positive & referred for treatment	2	1	1
Refer for PrEP	36	24	12
Refer for PEP	21	13	8

Activity	Women at Risk (WAR)	Transgender (TG)	New Clients (TG&WAR)	Repeated Clients TG&WAR)
HIV Counselling	189	118	135	172
VCT	77	70	77	70
CBT	112	48	58	102
Rapid Test Reactive	0	5	5	0
Confirmation Test	0	4	4	0
Starts HAART	0	6	5	1
STI Counselling	154	76	96	134
STI Blood test (lab)	59	52	45	66
STI : CBT	95	24	51	68
STI : Positive	2	0	2	0
STI : Treatment	2	0	2	0
Hep B	44	65	37	71
Hep C (CBT)	0	5	0	5
Hep C	86	43	32	58
Hep C positive & referred for treatment	0	0	0	0
Refer for PrEP	0	4	1	3
Refer for PEP	0	1	0	1



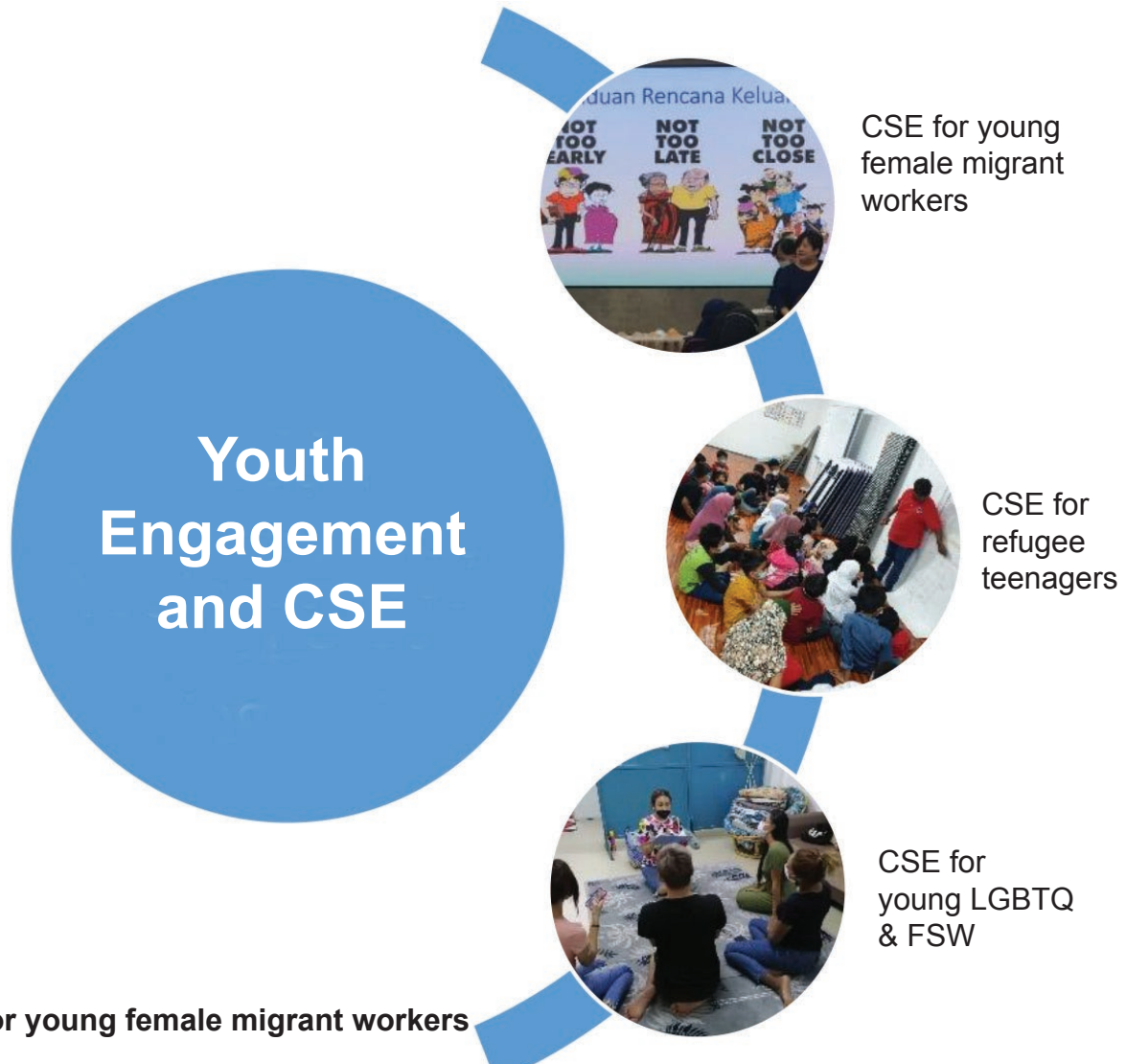
Reaching the Poor, Marginalised, Socially Excluded & Underserved Populations.

- ⇒ IPPF believes that everyone deserves access to sexual and reproductive health information and services without prejudice.
- ⇒ Our programmes and services are designed to respond to the needs of the urban and rural poor, adolescents, migrants, MSM, sex workers, injecting drug users, transgender or marginalized populations.



PILLAR 2: Move the Sexuality Agenda

GOAL: Societal and legislative change for universal SRR

OUTCOME 2: People in Malaysia are fully informed and empowered to act on SRH & Rights



1. CSE for young female migrant workers

Date /s	Activities	Activity / Topics Covered
16 Jan 2022 @ Batu Uban	for female migrant workers from Renases Factory 	<ul style="list-style-type: none"> • Sexual Reproductive Health • Cervical Cancer / PAP Smear • Breast Cancer / Mammogram • HIV & STIs • Family planning methods • Unplanned Pregnancy • On-site medical check-up and blood test
19 – 20 Sept @ Flex Factory	Program Kesihatan Wanita Flex 	<ul style="list-style-type: none"> • Sexual Reproductive Health • Cervical Cancer / PAP Smear • Breast Cancer / Mammogram • HIV & STIs • Family planning methods • Unplanned Pregnancy • On-site medical check-up and counselling



SRH awareness sessions for refugees

FHDA organized informal sessions to increase awareness and acceptance of family planning among the refugee community due to stigma and male-dominant culture. The Myanmar Muslim refugee women from Arakan who live in Penang, mainly Rohingya, were dependent on their men.

The community were vulnerable to teenage motherhood, lack of child spacing and required their husbands to lead them for health care. Maternal and women's health care were issues are of great concern.

FHDA organised awareness talks during outreach to homes of refugee hosts. We used IEC materials, streamers, breast examination teaching model, toy dolls, laptop to give gender-based violence information, family planning and condom usage videos in Rohingya language. These were sourced from the ICMC and Federation of Reproductive Health Associations, Malaysia.



✓ Jan to Feb 2023:
19 sessions - 786 participants
✓ Sep to Dec 2022:
27 sessions - 804 participants
Total reached: 46 sessions – 1590 participants.

Ms Engie Ng coordinated the SRH talks and would like to acknowledge the team of resource persons: Ms Yeap Meng Chee, Ms Tan Lay Pheng, Dr K. Kalaivani. Occasional helpers Ms Loh Yoke Peng, Ms Mahirah Murad, Ms Chinta Ardieyana Hilal Yusop, and not forgetting Ms S. Manohara and Ms Sally Alexander were active for a short stint in September 2022.

Challenges faced were that it was difficult to segregate by age groups, and participants were unpunctual at the refugee-hosted home sites. We thank the Medecins Sans Frontieres (MSF) mobile clinic for enabling a small second team focused on family planning and women's health to reinforce the message of family planning and family spacing as a way of life to provide for healthier mothers and infants. We are very grateful for the interpreters and peer leaders in the refugee community and MSF personnel who cooperated with us.

The refugees are resilient - we believe that these survivors will benefit from our outreach family planning messages and seek help or report those suffering from sexual & gender-based violence. In addition to SRH awareness talks FHDA conducted modular CSE programme (as per table below) .



Bil	Date	Site & CSE Partner	Trainers & Facilitators	Attendees
1	7.10.22 9.45am	Jelutong @ Selfless Together Learning Centre	Manohara Subramaniam, Hezreen Shaik Daud, Ooi See Hui, Farhana	50
2	7.10.22 11.30am			50
3	11.10.22 9.45am			50
4	11.10.22 11.30am			50
5	16.11.22 9.45am	Jelutong @ Selfless Together Learning Centre	Manohara Subramaniam, Engie Ng Lai Kin, Clifford	50
6	16.11.22 11.30am			50
7	30.11.22 9.45am	Jelutong @ Selfless Together Learning Centre	Engie Ng Lai Kin, Yeap Meng Chee, Tan Lay Pheng, Zul	50
8	30.11.22 11.30am			50

9	2.12.22 9.45am	Jelutong @ Selfless Together Learning Centre	Engie Ng Lai Kin, Yeap Meng Chee, Tan Lay Pheng, Zul	50	
10	2.12.22 11.30am			50	
11	3.11.22 2.00pm	Klinik Mewah 6, Butterworth (MSF)	Dr Choong Sim Poey, Tan Lay Pheng, Yeap Meng Chee	14	
12	3.11.22 4.45pm			Engie Ng Lai Kin, Christine Low Bee Cheng, Yong Poh Ling	14
13	12.1.23 2.00pm			Engie Ng Lai Kin, Yeap Meng Chee	16
14	12.1.23 3.15pm			Dr Choong Sim Poey, Tan Lay Pheng	16
15	13.10.22 11.00pm	Dewan Muafakat, Kota Giam, Jelutong	Engie Ng Lai Kin, Manohara Subramaniam	10	
16	7.11.22	Dewan Kelas Agama, Taman Pulasan	Engie Ng Lai Kin, Christine Low Bee Cheng	20	
17	27.11.22	Alma, Bukit Mertajam	Tan Lay Pheng, Loh Yoke Pheng	17	
18	28.12.22	Bukit Tambun, Simpang Ampat	Kalaivani, Tan Lay Pheng, Yong Poh Ling	19	
19	6.1.23	Pajak Song, Kepala Batas	Christine Low Bee Cheng, Tan Lay Pheng, Loh Yoke Peng	10	
20	14.1.23	Kampung Serata, Kulim		15	
21	16.1.23	Taman Inderawasih, Perai		20	
22	17.1.23	Teratak Bonda, Seberang Jaya		10	
23	4.2.23	Akasia Flat, Bayan Lepas	Engie Ng Lai Kin, Yong Poh Ling	16	
24	8.2.23	Kampung Benggali, Butterworth	Christine Low Bee Cheng, Chinta Mohd Yusop	20	
25	10.2.23	Telaga Air, Butterworth		17	







CSE for Key Populations (MSM / Tg and WAR)

PPHK (Pakej Pencegahan HIV Komprehensif) Projek reach-out to key populations community (MSM, Transgender & Women at Risk / WAR). The ultimate goal is to reach out to the community, share the information on HIV, STIs, Hep B, Hep C, educate and create awareness of the importance to go for "Testing & Treatment" (if confirmed to be infected with HIV or any type of STIs).



Nine (9) support groups were organised for clients to come together to listen to short briefing, new information and discussion

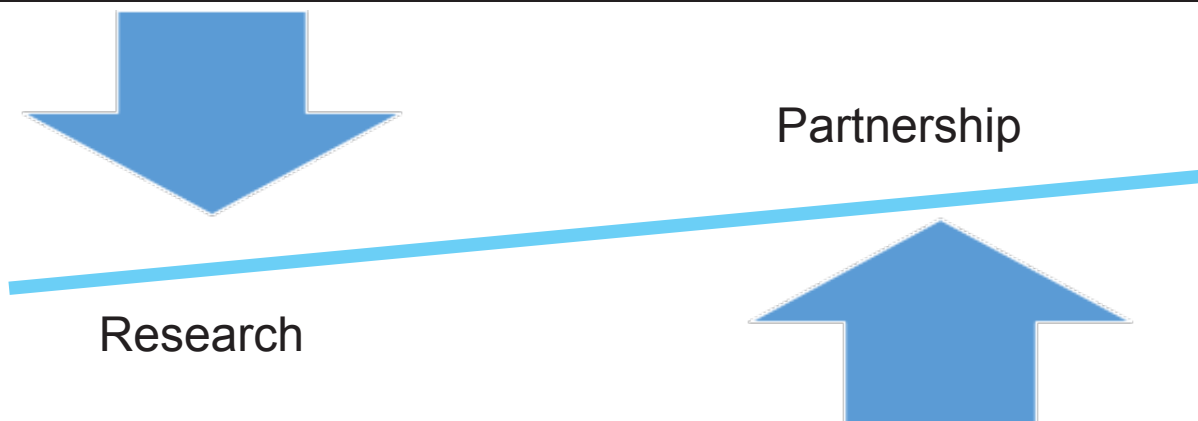
Nine (9) support groups were organised for clients to come together to listen to short briefing, new information and discussion






Date / Place	Support Group @ Topics	No of Pax
25 Jan 2022 @ Bkt Mertajam	Sex & Hepatitis C (topic chosen by clients). <ul style="list-style-type: none"> • They had heard of treatment for Hep C which is and free at public hospital. • Offered to do rapid test for Hep C for them. 	MSM @ 7 pax
25 Jan 2022 @ Bkt Mertajam	“Cara-cara menggunakan kondom “ <ul style="list-style-type: none"> • Experienced frequent condoms breakage • Type of lubricant to use together with condoms • How and where to keep the condoms 	Tg @ 6 pax
12 Feb 2022 @ Teluk Kumbar	Importance Test & Treat <ul style="list-style-type: none"> • Fear of treatment delay them to go for testing • Poor adherence to treatment • Anxiety and stress when advised to stop taking hormonal pills if on HAART (Tg) 	WAR & Tg @ 8 pax
25 Feb 2022 @ Perai	“Jenis-jenis Penyakit Berjangkit” (STI) <ul style="list-style-type: none"> • How many types? • Can they be cured? • What is the difference between HIV and STIs? • Can PrEP and PEP be used for STIs too. 	MSM @ 6 pax
6 Apr 2022 @ Lorong Gaharu	 Sexual Reproductive Health & STI <ul style="list-style-type: none"> • Importance of PAP Smear and Breast Examination • Family planning methods vs. condoms. • PrEP for women? We are using condoms and some taking oral contraceptives for double protection against unplanned pregnancy. • Fear of pregnancy is higher compared to STIs and HIV. 	WAR @ 6 pax
23 Apr 2022 @ Bkt Mertajam	Test & Treat – HAART <p>Q1. What is HAART? Q2. Is it effective? Q3. Can I miss the pills? Q4. What are the side effect Q5. How much does it cost per month?</p> 	MSM / Tg / WAR @ 25 pax
27 Aug 2022 @ Jelutong	HIV / STI / Hep B & Hep C <p>The difference between HIV and other type of STIs. How to recognise the symptoms, type of testing and treatments. Is the treatment effective and why would some tests still detect the Syphilis.</p>	MSM @ 6 pax
8 Dec 2022 @ Kg Kolam	PrEP @ KK Butterworth began in Jan 2023, PEP, Hep B, Hep C and JOM Test (Self-testing for HIV & Hep C) 	MSM, Tg, WAR @ 26 pax
10 Dec 2022 @ Bkt Mertajam	 Sexually Transmitted Infections: Gonorrhoea and Syphilis - symptoms, testing and treatment either at klinik kesihatan or private clinic	MSM & WAR @ 15 pax











PILLAR 3: Solidarity for Change










GOAL: Amplify impact by building bridges, shaping discourse and connecting communities, movements and sectors

OUTCOME 3: Policies and programmes that respect, protect and fulfil Sexual Reproductive Health and Rights (SRHR) and Gender Equity (GE) are implemented



	Programme Partners / Funders	
1	<p>Klinik Kesihatan Jalan Macalister</p> <ul style="list-style-type: none"> • Located in “Daerah Timur Laut” – clients live & work in George Town areas • Referred LGBT/WAR clients for HIV / STI full testing and treatment • Provide CBT training for staff CHW • Engaged in Stakeholders meeting at least twice a year to do case-sharing, outcome of projects, and forecast of projects. 	
2	<p>Klinik Kesihatan Bayan Baru</p> <ul style="list-style-type: none"> • Located in “Daerah Barat Daya” – clients from Bayan Baru & Bayan Lepas, Sungai Ara, Relau, Balik Pulau • Referred LGBT/WAR clients for HIV / STI full testing and treatment • Engaged in Stakeholders meeting at least twice a year to do case-sharing, outcome of projects, and forecast of projects. 	
3	<p>Klinik Kesihatan Butterworth</p> <ul style="list-style-type: none"> • Located in Daerah Seberang Perai Utara – clients from Bagan, Bagan Ajam, Penaga • Referred LGBT/WAR clients for HIV / STI full testing, treatment and free PrEP • Provide CBT training for staff CHW • Engaged in Stakeholders meeting at least twice a year to do case-sharing, outcome of projects, and forecast of projects. 	
4	<p>Klinik Kesihatan Seberang Jaya</p> <ul style="list-style-type: none"> • Located in Daerah Seberang Perai Tengah – clients from Seberang Jaya, Permatang Pauh, Bukit Mertajam, Juru, Perda • Referred LGBT/WAR clients for HIV / STI full testing and treatment • Wellness Hub facilities for clients – healthy living • Engaged in Stakeholders meeting at least twice a year to do case-sharing, outcome of projects, and forecast of projects. 	
5	<p>Klinik Kesihatan Bukit Panchor</p> <ul style="list-style-type: none"> • Located in Daerah Seberang Perai Selatan – clients from Jawi, Nibong Tebal, Bukit Panchor, Parit Buntar • LGBT/WAR clients for HIV / STI full testing and treatment, PrEP / PEP & prescription • Engaged in Stakeholders meeting at least twice a year to do case-sharing, outcome of projects, and forecast of projects. 	

6	<p>ID Clinic, Hospital Pulau Pinang</p> <ul style="list-style-type: none"> • Located in DTL, George Town • Referred clients who needed PEP, testing, counselling and prescription for PEP • Training programme for FHDA's staff and volunteers • Assisted in home-visit, counselling and defaulted cases 	
7	<p>ID Clinic, Hospital Seberang Jaya</p> <ul style="list-style-type: none"> • Located in SPT • Assisted with PMTCT case. • Young mother with 3rd pregnancy, and her husband (a drug user and jobless) • Missed her appointment as had no cash to pay for public transportation to ID Clinic, not enough cash to buy food and milk powder for two other children. Malaysian AIDS Council gave RM800.00 worth of vouchers for sundries, food, toddler diapers and milk powder. FHDA provided some baby clothing & infant diapers. 	
8	<p>Duta Ubat Hospital Seberang Jaya</p> <ul style="list-style-type: none"> • Three staff of FHDA trained as Duta Ubat – Engie Ng, Loh Yoke Pheng and Redduwan Zairukaperi • Organised a workshop on “Ubat dan Perjalanan Jauh” especially for ARV medication • Free gifts i.e air-tight containers and pill-cutters for staff and clients 	
9	<p>PKD Daerah Timur Laut (DTL)</p> <ul style="list-style-type: none"> • Karnival Jelajah Agenda Nasional Malaysia Sihat (ANMS) & Sambutan Hari Sukan Negara Peringkat DTL 2022 • Pameran dan pemeriksaan ujian saringan HIV / STIs 	
10	<p>PKD Daerah Seberang Perai Utara (SPU)</p> <ul style="list-style-type: none"> • Karnival Jelajah Agenda Nasional Malaysia Sihat (ANMS) & Sambutan Hari Sukan Negara Peringkat SPU 2022 • Pameran dan pemeriksaan ujian saringan HIV / STIs 	
11	<p>Jabatan Kesihatan Pulau Pinang</p> <ul style="list-style-type: none"> • Penang AIDS Officer, Dr Janizah Abdul Ghani as DHSKP Adviser and Mentor for FHDA, MOH grant recipient • Provided FHDA with HIV Rapid Test Kits and training • Engaged in Stakeholders Meeting for project's quarterly, half yearly and annual achievements, outcome and project improvement. 	
12	<p>Ministry of Health (MOH) Malaysian AIDS Foundation (MAF) Malaysian AIDS Council (MAC)</p> <ul style="list-style-type: none"> • Project Funding • Training and test kits (HIV, STI, Hep C) 	
13	<p>Grant for MyICE Programme (Malaysian Incentive Community Empowerment) given by Registry of Societies</p> <p>Series 1 – Customer Care Management Series 2 – Basic Counselling Skills Series 3 - Distribution of foodstuff to B40 families</p>	
14	<p>Renases Semiconductor Manufacturing Factory</p> <ul style="list-style-type: none"> • Workshop: Women's Health & Safety • Blood test and consultation by Dr Surinder Kaur • Lucky Draws for participants 	
15	<p>Flex Malaysia (Plant 5)</p> <ul style="list-style-type: none"> • Programme “Wanita Sihat Flex” • Sexual reproductive health services and counselling by Dr Surinder Kaur & Dr Yim Poh Yin • Door gifts for participants 	

16	<p>ROSE Charities</p> <ul style="list-style-type: none"> Presented foodstuff to our B40 clients during Chinese New Year period 	
17	<p>Malaysian Society of HIV Medicine (MASHM)</p> <ul style="list-style-type: none"> My HIV Forum at UiTM Sungai Buloh, Kuala Lumpur. Ms Engie Ng (Prog Manager) and Dr Dinesh Mahalingam (FHDA Vice Chairman) spoke at the forum. Seminar HIV untuk Paramedic (SHIP) Zon Utara at Hotel Olive Tree, Bayan Lepas. Ms Christine Low (Manager) and Puan Jubaidah Nagoor spoke at the seminar. 	
18	<p>International Planned Parenthood Federation</p> <ul style="list-style-type: none"> Engie Ng attended IPPF Data Management Strategy Workshop @ Oakwood Hotel & Residence Kuala Lumpur Christine Low attended the ESEAOR Regional Quality of Care Workshop, Phnom Penh, Cambodia 	
19	<p>Japan Trust Fund (JTF)</p> <ul style="list-style-type: none"> Provided grant for Safeguarding SRHR of Displaced Persons from Rakhine State in Malaysia Penang, Kedah, Perlis and Selangor 	
20	<p>Malaysian Nurses' Association</p> <ul style="list-style-type: none"> Provided financial aid for HIV-infected / affected child or adolescent The financial aid aims to ensure the child / adolescent continues schooling and tuition. 	
21	<p>Klinik Mewah 6, Butterworth</p> <ul style="list-style-type: none"> Collaboration for training / dialogues and health camps for Rohingya refugees 	
22	<p>TKLWAY Foundation</p> <ul style="list-style-type: none"> Deworming, Vitamin C, Multivitamins, Canned food, dried noodles, biscuits, coffee and tea Milk powder Subsidized cost for baby immunization Medical Screening for safe motherhood for refugees and asylum-seeking migrants 	
23	<p>Pearl of Joy (POJ) Cell Group, EPCC</p> <ul style="list-style-type: none"> Co-organised the Christmas Gathering for FHDA's clients (MSM & TG) Presented 30 bags of goodies and foodstuff for clients Prepared finger-foods and cakes for the event Conducted Games, lucky draws and sing-along 	
24	<p>Fulijaya Manufacturing Sdn. Bhd. donated the 400 tubes of toothpaste for adults and children. These were distributed at our health camps.</p>	

PILLAR 4: Nurture our Federation

GOAL: Renew our charter, live our values and unleash our collective power

OUTCOME 4: A high performing, visible and accountable FRHAM

Sustainability

- increase local revenues i.e. fundraising project



Anti-discrimination and inclusion

- Efforts to ensure gender diversity, anti-racism, anti-discrimination in policy and practise in the MAs workforce
- LGBT staff



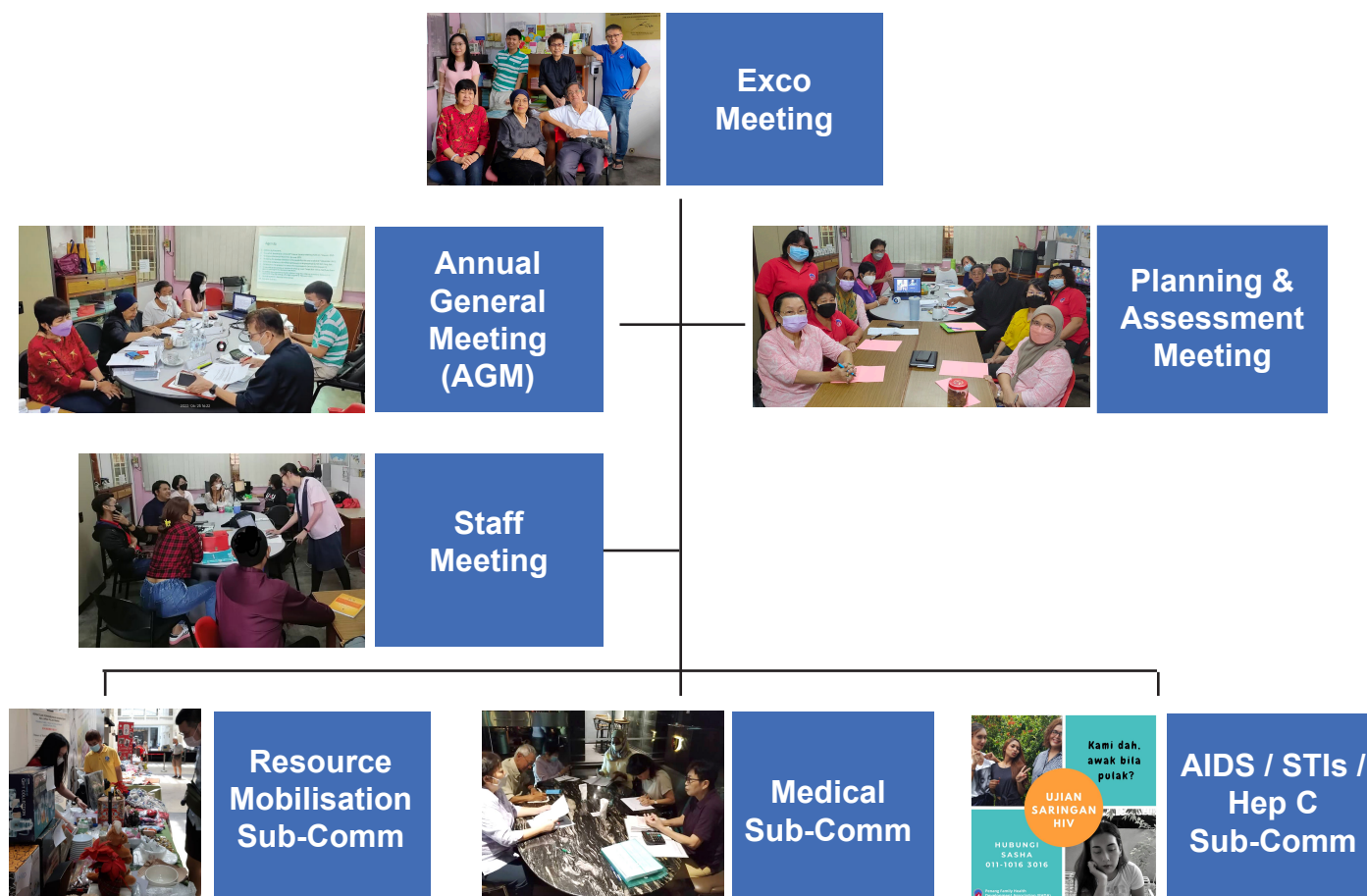
Month	Description – Programme Sustainability Efforts	Funders / Donors
Jan - Dec	Pakej Pencegahan HIV Komprehensif 2022	MOH / MAC
Sept -Dec	CROSSoVER Project 2022	JTF / IPPF / FRHAM
Jan & Sept	SRHR for migrant female workers 2022	NFIS
Jan - Dec	Programme for Women & Children 2022: To provide basic medical screening, deworming syrup / tablets for children from 1- yr to 12 yrs / multivitamins for women and men / STI rapid test kits / glucose test kits / milk powder & diapers for infants and children / foodstuff for affected families of Covid 19-related incidents e.g. loss of income.	TKLWAY

Jun – Oct	Hydrating Facial Treatment 2022 Charity Campaign: To sustain “Telemedicine Project” which started in 2020 during MCO. Enabling clients to access Sexual Reproductive Health, HIV, STI and treatment.	Ainhoa Beauty and Spa
Nov 22 – Mar 23	Nasi Briyani Set Charity Campaign to provide sexual reproductive health care to women and make continuous home visits to children as well.	Viva Victoria
Aug – Sept	MyICE 1, 2, 3 Series Programme: Food stuff to B40 families (FHDA clients).	Jabatan Pendaftaran Pertubuhan
Jan - Dec	Financial aid to buy Covid-19 self-test kits for FHDA staff	MAC
Jan - Dec	Received 100 boxes of Female Hygiene Kits for WAR (Women at Risk) clients.	MAC
Jan - Dec	Received 100 boxes of Home Care Covid 19 Kits for B40 families, undocumented and refugee families	MAC
Jan - Dec	Rapid Test Kits for HIV (Project PPHK)	JKN
Jan - Dec	Rapid Test Kits for STI (Project PPHK)	MAC
Jan - Dec	Rapid Test Kits for Hep C (Project PPHK)	MOH



FHDA does not discriminate on grounds of race, creed, colour, political beliefs or sexual preference. We have a widely-based membership and also staff.

GOVERNANCE, MANAGEMENT AND ADMINISTRATION



Date (2022)	Description	No of Pax
Feb 22 – Mar23	ExCo Meetings @ 5 times	32
23 Mar	Special Exco Meetings: To nominate Hon. Treasurer to replace Mr Ong Lay Seong who resigned	12
13 May	To nominate delegates to MAC BGM on 29 May 2022 – Kuala Lumpur	6
19 Mar	Assessment & Planning Meeting 2022	18
25 Jun	61 st Annual General Meeting (AGM)	25
28 Oct	Medical Sub-Committee Meeting	8
Jan & Feb	AIDS Sub-Committee Meeting met two (2) times online via ZOOM on 21 January & 10 February	14
April & May	Resource Mobilisation Sub-Committee Meeting for FHDA met four (4) times Dates: 1 April (4 pax), 20 April (10 pax), 11 May (12 pax), 13 May (9 pax)	35
Jan – Jun 22	FHDA Policy Update 2021 @ 8 times	42
Jan to Dec	Staff met 5 times: FP & SRH services, HIV & STIs & Hep C programme and others on 4, 6, 11, 21 and 28 of Jan	46
	Staff Meeting on 28 February	11
	Staff Meeting on 26 March	10
	Staff met 2 times on 14 & 30 of April	23
	Staff Meeting on 19 July	7
	Staff met 2 times on 17 & 30 of August	11
	Staff Meeting on 27 September	6
	Staff Meeting on 25 October	4
20 & 21 Apr	Year 2021 Account Audit	2
20 Jan	Annual Dinner 2022 for Staff & ExCo @ Kota Dine, Fort Cornwallis	24







STAFF AND VOLUNTEER DEVELOPMENT

Project specific objectives:

1. Update the administration skills and management knowledge of identified staff and volunteers.
2. Orientate newly recruited staff and volunteers vis-à-vis their roles, functions and responsibilities.
3. Strengthen leadership and governance of volunteers to increase proficiency for the association.

Date (2022)	Trainings / Workshops / Talks / Meetings	Attended by / As Resource Person (RP)
5 Jan	Mesyuarat Jawatankuasa "Technical Review Panel (TRP) bagi pemilihan projek-projek bantuan kerajaan berkaitan HIV / AIDS kepada Pertubuhan – pertubuhan Bukan Kerajaan (NGO)	Christine, Engie, Bakthiar, LimBP
6 Jan	Courtesy Visit by Ms Lee Kuen Khor (Gribbles)	Christine & Engie
10 & 11 Jan	 Site Visitation to FHDA by Mr Graham Smith (GF)	Christine, Engie, ChenFT, Roshamil, Redduwan, Nadja, LohYP, Sahsa, Nina, Raimie, Chinta 
16 Jan	Workshop: Women's Health & Safety @ Klinik Rakyat, Penang 	RP: Christine Low, Engie Ng, Chen Fong Theng & Lee Sook Fong
26 Jan	LET'S PrEP by Chamber Lab–Hetero	Christine, Engie, LeeSF, ChenFT, Hasra, LohYP, KamML, Mahirah, Halimah, Emma, GohCC, Chinta, Sahsa, Raimie, Redduwan, Nina, Roshamil, Penny
9 Feb.	ZOOM: 3 rd National Pre-Exposure Prophylaxis (PrEP) Consultation Meeting – MAC / MOH	Dr Dinish, Damien, Christine, Roshamil, Redduwan, Sahsa, Chinta
2 Mar	ZOOM: Project Achievement Meeting with Manohara, MAC	Christine, Engie, ChenFT, Roshamil, Redduwan, Nadja, LohYP, Sahsa, Nina, Raimie, Chinta
2 Mar	ZOOM: EMTCT Planning Meeting with Dr Karina Razali	Christine Low
8 Mar	Webinar: International Women's Day 2022 Dr Gan Kam Ling – speaker Prof. Dr. Noraida Endut - speaker Ms Yeap Meng Chee – moderator 	Prof Wazir , Dr Mallise, YeapMC, Dr Surrinder, Dr SP Choong, Halimah, Lee, Penelope, Pinnie, GohYJ, SimLB, Christine, Engie, Manohara, ChenFT
17 – 18 Mar	Lawatan Pemantauan dan Penilaian Projek PPHK di Pulau Pinang Geran KKM 2022 oleh Cik Manohara & En Chandran	Christine, Engie, ChenFT, Roshamil, Redduwan, Nadja, Yoke Peng, Sahsa, Raimie, Chinta, Nina
18 Mar	ZOOM: Mesyuarat bersama dengan Dr Janizah Abd Ghani	Christine, ChenFT
18 Mar	ZOOM: Technical Working Group (TWG) Updates for Female Sex Workers (FSW)	Christine Low
18 Mar	Stakeholders Meeting with Klinik Kesihatan Butterworth, SPU	Engie, LohYP, Redduwan, Roshamil, Chinta, Nadja

23 Feb	Training: How to do CBT? / Pre & Post Test Counselling / Making Referrals to klinik kesihatan by Ms Engie & Ms Chen	Nina, Roshamil, Redduwan, Chinta
22 – 24 Mar	Bengkel Pengukuhan Pelaksanaan Projek 2022 – MAC / MOH at Hotel Concorde Kuala Lumpur	Christine Low
31 Mar	Stakeholder Meeting with Klinik Kesihatan Bukit Panchor, Seberang Perai Selatan	Roshamil, Nadja, LohYP, Redduwan
8 Apr	Stakeholders Meeting with Klinik Kesihatan Bayan Baru, Daerah Barat Daya	Engie, Raimie, Nadja, Sahsa, Chinta
12 Apr	Webinar: Launch of Good Practice Guide on Engagement with Human Rights Systems – UNHCR	Christine Low, Engie Ng
15 Apr	Stakeholders Meeting with Klinik Kesihatan Jalan Macalister, Daerah Timur Laut	Sahsa, Raimie, Nadja, Nina, Engie
16 Apr	Bengkel: Jom Pupuklah Kesihatan Mental Anda – Kesihatan Mental Wujud! @ Swiss Garden Residences Kuala Lumpur	Chinta, Nadja, Nina, Sahsa
Apr – May	Latihan Program Saringan HIV oleh Komuniti (CBT) @ KK Butterworth & KK Jalan Macalister	 LohYP, Chinta, Nadja, Nina
13 May	GOOGLE Meet: “Understanding FHDA’s Policy on the Prevention of Sexual Exploitation and Abuse (PSEA)”	RP: Chen Fong Theng
18 May	ONLINE: HIV RTK – Pre & Post Test Information : “The Anxiety of The Results”	RP: Chen Fong Theng & Engie Ng
20 May	Courtesy Visit by Mr Chung Han Yang, DNDi	Christine, Engie
21 May	Program Duta Kenali Ubat Anda : Perjalanan dan Ubat at FHDA Jalan Perak, P.Pinang Trainer: Pn Lee Li San	YeapMC, Christine, Engie, ChenFT, Halimah, LohYP, Roshamil, Redduwan, Nadja, Nina, Chinta, Emma
24 May	Courtesy Visit by Medecins Du Monde (MDM), Malaysia	Christine, Engie
25 May	ZOOM: JDT Think Tanker – SOGIE Is it at risk? By Mr Chung Han Yang, DNDi	Christine, Engie, ChenFT, Nina
28 May	Mesyuarat Agung Dwi Tahunan Ke 16 (MAC) @ Swiss Garden Residence, Kuala Lumpur	Dr Dinish, Dr Mallise, Pn Jubaidah
May - Jun	Latihan Program Saringan HIV oleh Komuniti (CBT) @ KK Butterworth	Roshamil
3 Jun	 ZOOM: HIV Update Speaker: Dr Ang Peng Peng	Yeap MC, Jubaidah, Damien, Lim BP, Steve, Christine, Engie, LohYP, Nina, KamML, Redduwan, Roshamil, Chinta, Sahsa, Nadja, Halimah, Mahirah
4 Jun	Courtesy Visit by North South Initiative (NSI)	Lim BP, Christine, Nina, Nadja, Redduwan
8 Jun	Mesyuarat Jawatankuasa “Technical Review Panel (TRP) bagi pemilihan projek-projek bantuan kerajaan berkaitan HIV / AIDS kepada Pertubuhan – pertubuhan Bukan Kerajaan (NGO)	Christine Low, Engie Ng, Chinta, Sahsa
10 Jun	 ZOOM: Training on HIV Prevention PrEP & PEP Speaker: Dr Leong Kar Nim	Christine, Engie, LohYP, ChenFT, Nina, Halimah, Nadja, Chinta, Roshamil, Redduwan, KamML, Steve, YeapMC, Dr YimPY, Dr DineshM, Dr Mallise
20 Jun	Commemoration of World Refugee Day 2022 -Refugee Centre at UNHCR	Dr Dinesh Mahalingam
20 – 21 Jun	Bengkel Paralegal Komuniti 1.0 @ Penang Bayview Hotel, George Town Penang	 Engie, Chinta, Nadja, Sahsa
21 Jun	Taklimat Pengurusan Kajian Integrated Bio-Behavioral Surveillance (IBBS) 2022	   Christine, LohYP, Nina
23 Jun	Seminar HIV untuk paramedic (SHIP) Zon Utara @ Hotel Olive Tree, Bayan Lepas	RP: Christine Low

24 Jun	Kursus "AIDS and STI Updates" untuk anggota kesihatan peringkat SPS 2022	RP: Christine Low / Loh Yoke Peng
28 Jun	Kursus "Pemantapan AIDS / HIV / STI / Hepatitis C di kalangan kakitangan kesihatan DTL 2022	RP: Christine Low / Engie Ng / Loh Yoke Peng
30 Jun	Forum Komuniti "Mak Nyah" Tahun 2022 At Regal Park Hotel, Kuala Lumpur	Chinta , Shasa
17 July	ZOOM: Taklimat Pra-Pemilihan Country Coordinating Mechanism (CCM) untuk Key Populations (KPs) dan People Living with HIV (PLHIV)	Christine , Engie
27 July	Bengkel Pengurusan Kesihatan Wanita @ SJK © Li Tek 'A" PPD Pulau	RP: Christine Low / Engie Ng
1 – 3 Aug	New Strategic Framework (2023 – 2028) 3 Year Business Plan (2023-2025) Workshop @ SRH Training Centre, FRHAM	  Christine Low, Engie Ng
3 Aug	ZOOM: 7 th Asia Pacific Conference on Public Health; Symposium 8: HIV Prevention and Challenges in a changing Landscape of Drug Use	Christine Low, Engie Ng, Nina, LohYP, Redduwan, Roshamil, Chinta, Sahsa, Nadja
12 Aug	ZOOM: Taklimat Kesedaran Penyakit Cacar Monyet @ "Monkey Pox" untuk PKK yang bertugas di luar kawasan Lembah Kelang	Christine Low, Engie Ng, Nina, LohYP, Redduwan, Roshamil, Chinta, Sahsa, Nadja
12 Aug	ZOOM: Consultation on IPPF's Results Framework 2023 – 2028	Christine Low, Engie Ng
13 – 14 Aug	Malaysian Incentive Community Empowerment (MyICE) Siri 1: Perhubungan Pelanggan @ FHDA Jalan Perak for 20 pax	RP: Yeap Meng Chee Chen Fong Theng 
15 – 19 Aug	IPPF Data Management Strategy Workshop At Oakwood Hotel & Residence Kuala Lumpur	Engie Ng
27 – 28 Aug	My ICE Siri 2: Kemahiran Asas Kaunseling & Pengurusan Kes @ FHDA Jalan Perak for 18 pax	RP: Ms Yeap Meng Chee, Ms Chen Fong Theng
3 Sept	Talk: "Remaja & Kesihatan Seksual" @ St Joseph's Home, Penang Road	RP: Christine Low / Manohara
13 Sept	Karnival Jelajah Agenda Nasional Malaysia Sihat (ANMS) & Sambutan Hari Sukan Negara Peringkat DTL 2022	Engie, Sahsa, Nina, Redduwan, Roshamil
13 – 14 Sept	Bengkel Training of Trainers Paralegal Komuniti @ Malaysian AIDS Council, Sentul	 Chinta, Shasa
19 – 20 Sept	Program Wanita Sihat Flex @ Flex Malaysia (Plant 5)	Resource Persons 
21 Sept	Talk: "Remaja & Kesihatan Seksual" @ Convent Light Street School (Form 5 Girls)	RP: Christine Low / Manohara
24 Sept	My ICE Series 3: Distribution of foodstuff for B40 group @ FHDA Jalan Perak for 25 pax	RP: Ms Yeap Meng Chee, Ms Engie Ng 
28 Sept	Google Meet: Majlis Perasmian Program Jelajah Agenda Nasional Malaysia Sihat (ANMS) Peringkat Daerah di Negeri Pulau Pinang	Yeap MC

9 Oct	Talk: Breast Cancer Awareness @ Belle Wonder Beauty Salon, Farlim			RP: Loh Yoke Peng, Engie Ng
10 – 14 Oct	ESEAOR Regional Quality of Care Workshop, Phnom Penh, Cambodia		Christine Low	
16 Oct	Karnival Jelajah Agenda Nasional Malaysia Sihat (ANMS) & Sambutan Hari Sukan Negara Peringkat SPU 2022		Nina, Nadja, Sahsa, LohYP	
15 – 16 Oct	MY HIV Forum at UiTM Sungai Buloh, Kuala Lumpur		YeapMC, Engie Ng, Manohara, Roshamil, Redduwan	
28 Oct	Mesyuarat Penggunaan Ubat Berkualiti – Pengguna (PUB-P) Bersama Duta Kenali Ubat Anda, Hospital Seberang Jaya Tahun 2022		Engie Ng, Redduwan, LohYP	
9 Nov	Stakeholders Meeting with Klinik Kesehatan Sungai Dua, Daerah Timur laut		Nadja & Sahsa	
Dec 22 & Jan 21	Latihan Program Saringan HIV oleh Komuniti (CBT) @ KK Butterworth & KK Jalan Macalister		Redduwan & Sahsa	
2 Dec	Penang Hospital World AIDS Day Celebration 2022, Auditorium Hospital Pulau Pinang		Dr Yim PY, YeapMC, Halimah, Mahirah, Chinta, Nadja, Nina, Sahsa	
3 Dec	ZOOM: Pembentangan Kajian Kualitatif HIV- “Understanding HIV Seroconversion Among Key Populations: A Quality Study”		Christine Low, Engie Ng, Dr Mallise	
8 Dec	Christmas Gathering: Equalize The Responsibility @ FHDA Kg Kolam		YeapMC, Dr Mallise, Christine, Engie, Nadja, Sahsa, Chinta, Nina, Halimah, Mahirah, GohCC	
10 Dec	WAD 2022: Equalize The Score – Pertandingan Bowling di Ole Ole Bowling, Mydin BM with 60 pax		RP: Roshamil, Redduwan, Christine, Engie, Halimah, YeapMC, TanLP, LohYP	
19 Dec	ZOOM: Mesyuarat Maklum Balas KK Model & Sistem M& E (Part 1) at Tamu Hotel & Suites, Kuala Lumpur		Christine Low, Engie Ng, Nina, LohYP, Redduwan, Roshamil, Chinta, Sahsa, Nadja	
19-20 Dec	ZOOM: Mesyuarat Sistem M& E (Part 2) Tamu Hotel & Suites, Kuala Lumpur		Christine Low	
22 Dec	Kelas Pengajian Agama Islam untuk komuniti MSM & TGs @ Prominence Condo, Bandar Perda oleh Prof. Dr Nizam, Prof. Dr Amir, Ustaz Hadi Aroff. Kelas ini dijalankan pada setiap hari Khamis		Roshamil, Redduwan dan 12 orang kawan	

Upscaling Quality and Integrated SRHR services for Key Populations



“Our services in the area of transgender health has been growing slowly but steadily. Ironically, even in this area, there is inequity between the genders.

Women who seek transition to men come to us more than men who wish to transition to women. There’s a reason for this - currently, the drugs used for female to male transition in our country are available as injections - which are difficult, if not impossible to self-administer. For male to female transition, the commonly used medication can be taken orally. This means they often self-medicate.

An important problem is that when medication is self-purchased, there is no medical supervision. This problem is compounded when the medication is bought online via

popular shopping platforms. There is no assurance that the medication is even authentic. Thus, safety and efficacy issues can arise.

More needs to be done to inform the transgender community who seek hormone therapy to go to the right healthcare provider so that they can be assessed and managed safely and effectively.”

– Dr Yim Poh Yin

Taking cognizance of this fact, FHDA felt there is a need to have a more appropriate venue where clients can consult in a safe environment.



The Medical Sub-committee held two meetings viz 28 Oct 2022 and 9 May 2023 to discuss this matter. The meeting decided to re-locate this service to Klinik Rakyat, Batu Uban.

MyICE (MALAYSIAN INCENTIVE COMMUNITY EMPOWERMENT) Programme by Penang FHDA

FHDA Penang secured a RM10,000 grant under MyICE from Registry of Societies Malaysia Societies to run a programme in three series for its staff, volunteers and clients. The main aim was to upgrade the skills of staff and volunteers in customer care management, basic counselling and case management skills, and also to provide aid to B40 clients.

The first series “Customer Care Management” was held on 13 and 14 August 2022 and was conducted by Yeap Meng Chee, an HRDCorp certified trainer. 22 participants attended the programme which focused on essential customer communication skills like active listening, empathy, and problem-solving.

Basic Counselling and Case Management Skills were topics for the second series. The workshop was held on 27-28 August 2022, attended by about 20 people; and conducted by Chen Fong Theng, a qualified counselor with Master’s in Social Work.

Series 2 was a follow-up on what participants learnt in the first workshop. The sessions focused on concepts and techniques of counselling and case



Album Gambar

Siri 1 : Bengkel Pengurusan Perhubungan Pelanggan



Album Gambar

Siri 2 : Bengkel Kemahiran Asas dan Kaunseling



management – how to get information and respond appropriately.

Participants learnt a lot from the hands-on and participatory techniques used in the sessions. Interesting video clips and role plays also kept them engaged in the learning.

Subsequent to Series 1 and 2, participants were asked to identify B40 clients who needed food supplies. 25 clients were identified. In the final Series 3, they came to receive the goody bags comprising rice, cooking oil and other foodstuff on 24 September 2022. They were also introduced to FHDA and its services.

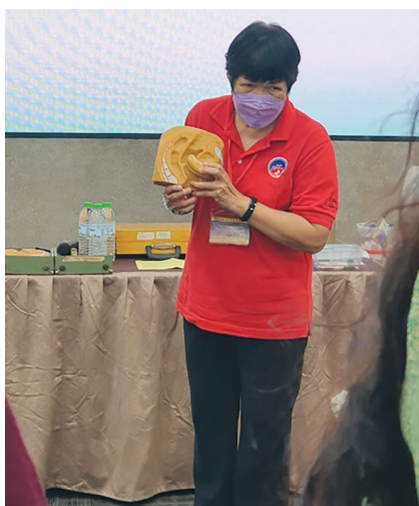
ADDRESSING THE NEEDS OF WOMEN AT RISK OF HIGHER MORTALITY AT YOUNG AGE

- THEY CAME ON A JOURNEY FOR A BETTER LIFE BUT MAY PAY WITH THEIR LIVES



Though COVID has become endemic and less deadly, we have continued our services for refugees with multi stakeholders. In 2022, FHDA served about 4000 new beneficiaries with SRH /GBV screening, family health education, FP awareness, provided voluntary contraception / referral on request with several strategies such as home visits, outreach, community health camps, SRH awareness talks and CSE modules for young people. We conducted training of FRHAM service providers on 26-27 Nov 2022, with online refresher in Dec 2022. Our team helped to serve in Kangar & Alor Setar with the collaboration Perlis FPA & Kedah FHA.

Our staff, volunteers, anonymous charity food suppliers, collaborators, sponsors AND cash donors gave us the courage despite many challenges not least of which is discrimination and xenophobia. We advocate safe motherhood to save the lives of women and children. Many of the asylum seekers are low literacy child brides with teen pregnancies. We strive to change the most common phrase used for charting last menstrual period "USOD" (unsure of dates) to empower the girl child to write the date in a notebook.



WOMEN'S HEALTH



Our organization worked with two factories in 2022 to provide peer education training for women migrant workers so that these women would reach out to their own community. A e-handbook was published by research principals for the previous years' 2020-2021 action intervention project :

Miles, L. Endut, N., Freeman, T., Ying, K., Lai, W.T., & Mat Yasin, S. (2022). "A Handbook to Support the Sexual and Reproductive Health Needs of Factory Women Migrant Workers". Unit for research on Women and Gender (KANITA), Universiti Sains Malaysia.



Sex education advocates hail condom demo in school

Interview with Dr Dinesh Mahalingam, FHDA Vice-chairman cum FRHAM Medical Committee Chairman



Federation of Reproductive Health Associations' medical committee chairman Harry Dinesh said the use of a phallic object would help give students a good understanding of how to use a condom.

However, he said, it was crucial that the module be comprehensive and there be an awareness programme for students to understand the subject.

“Sex education needs to be approached from a wider perspective, where students must be taught that safe sex helps prevent diseases, avoids unwanted pregnancies, and reduces baby dumping,” he said.

Extract from Free Malaysia Today(FMT) published on 28 July 2022

FHDA celebrated IWD by holding a webinar graced by two women activists. Dr Gan Kam Ling spoke on Stop the Bias – Women’s Health: Experiences from the Field while Prof. Dr Noraida Endut, Gender Equality for a Sustainable Tomorrow – Situation of Migrant Women Workers in Malaysia. Both highlighted challenges faced by women and girls who often lose out and tend to fall into poverty, poor healthcare with education opportunities curtailed.

Undocumented migrant workers, many of whom were daily wage earners or work informally, faced sudden loss of income and employment as employers temporarily cease operations due to the Malaysian Government-imposed lockdown measures (Movement Control Order). Where businesses continue to operate, there have been reports of labour rights violation like excessive working hours and non-compliance in terms of preventive measures (e.g. physical distancing) to prevent the spread of the virus.

Access to health services for undocumented migrant workers, particularly important during a pandemic, was further constrained by fear of arrest and detention by law enforcement authorities due to their documentation status.

Women tend to have higher risks of gender-based violence. The Ministry of Women and Family Development reported a 57% increase in calls to its helpline for survivors of domestic violence, though undocumented migrant workers might not be in the position to seek help. In addition, women migrant workers may need to handle potentially life-threatening situations e.g. delivering a baby on their own, having no access to appropriate sanitation facilities to protect their reproductive health.

More than 100 people attended this interesting webinar and there was a lot of interaction between speakers and the attendees.

WEBINAR
INTERNATIONAL WOMEN'S DAY REGISTER NOW >

8 March 2022
8:00pm - 9:30pm

TOPICS:

STOP THE BIAS - WOMEN'S HEALTH: Experiences from the Field
Dr Gan Kam Ling
Consultant Obstetrician & Gynaecologist, Putrajaya GAG, Putrajaya, Kuala Lumpur

Gender Equality for Sustainable Tomorrow - Situation of Migrant Women Workers in Malaysia
Prof. Dr. Noraida Endut
Lecturer, Faculty of Health Sciences, Universiti Kebangsaan Malaysia

Moderator:
Ms. Yeap Meng Chee
Managing Family Health, Development Association

Live Streaming:
@Zoom & Facebook

ACRONYMS

ARV	Anti Retroviral (Therapy)
CHW	Community Health Worker
CSE	Comprehensive Sexuality Education
EMTCT	Elimination of Mother-to-Child Transmission
FHDA	Penang Family Health Development Association
FP	Family Planning
FRHAM	Federation of Reproductive Health Associations Malaysia
FSW	Female Sex Worker
GF	Global Fund
HAART	Highly Active Anti-Retroviral Therapy
HIV	Human Immuno-deficiency Virus
ID	Infectious Diseases
IEC	Information, Education and Communication
IPPF	International Planned Parenthood Federation
JKN	Jabatan Kesihatan Negeri
JTF	Japan Trust Fund
KK	Klinik Kesihatan
LGBTQ	Lesbian, Gay, Bisexual, Transgender, Queer
MA (IPPF)	Member Association
MASHM	Malaysian Society of HIV Medicine
MoH	Ministry of Health
MOU	Memorandum of Understanding
MSF	Medecins Sans Frontieres
MSM	Men having Sex with Men
MyICE	Malaysian Incentive Community Empowerment
NGO	Non-Governmental Organisation
PEP	Post-exposure Prophylaxis
PMTCT	Prevention of Mother-to-Child Transmission
PPHK	Pakej Pencegahan HIV Komrehensif
PrEP	Pre-exposure Prophylaxis
SDG	Sustainable Development Goals
SGBV	Sexual and Gender-Based Violence
SMA (FRHAM)	State Member Association
SRH	Sexual and Reproductive Health
SRHR	Sexual and Reproductive Health and Rights
STI	Sexually Transmitted Infection
TG	Transgender
TKLWAY	Theng Kah Loke & Wong Ah Yin Charitable Trust
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commission for Refugees
WAR	Women at Risk
WHO	World Health Organisation

Registration No: PPM-003-07-16011962

**PENANG FAMILY HEALTH DEVELOPMENT
ASSOCIATION
(PERSATUAN PERKEMBANGAN KESIHATAN KELUARGA
PULAU PINANG)
(Register in Malaysia)**

**REPORTS AND FINANCIAL STATEMENTS
FOR THE YEAR ENDED
31 DECEMBER 2022**

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Statement of functional expenses	9 - 11
Statement of cash flows	12
Notes to the financial statements	13 - 24

Alan Yoon Associates
Chartered Accountants
銀倫會計師樓 AF : 1302

Registration No: PPM-003-07-16011962

**PENANG FAMILY HEALTH DEVELOPMENT ASSOCIATION
(PERSATUAN PERKEMBANGAN KESIHATAN KELUARGA PULAU PINANG)
(Register in Malaysia)**

STATEMENT BY COMMITTEE

We, the undersigned, being the Committee of **PENANG FAMILY HEALTH DEVELOPMENT ASSOCIATION (PERSATUAN PERKEMBANGAN KESIHATAN KELUARGA PULAU PINANG)**, state that, in their opinion, the financial statements of the Association set out on pages 5 to 25 are drawn up in accordance with International Planned Parenthood Federation, (“IPPF”) accounting policies, Malaysian Private Entities Reporting Standard and the requirements of the Societies Act, 1966 so as to give a true and fair view of the financial position of the Association as at 31 December 2022 and financial performance of the Association for the year ended 31 December 2022.

On behalf of the Committee



YEAP MENG CHEE
Chairperson



DR TONG MUN WAH MALLISE
Treasurer



LOW BEE CHENG
State Manager

**REPORT OF THE INDEPENDENT AUDITORS TO THE MEMBERS OF
PENANG FAMILY HEALTH DEVELOPMENT ASSOCIATION
(PERSATUAN PERKEMBANGAN KESIHATAN KELUARGA PULAU PINANG)
(Registration No: PPM-003-07-16011962)
SOCIETIES ACT, 1966**

Report on the Audit of the Financial Statements

Opinion

We have audited the financial statements of Penang Family Health Development Association (Persatuan Perkembangan Kesihatan Keluarga Pulau Pinang) (“Association”), which comprise the balance sheet as at 31 December 2022 of the Association, the statement of income, expenses and changes in undesignated fund balance, statement of functional expenses and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies and other explanatory notes, as set out on pages 5 to 25.

In our opinion, the accompanying financial statements give a true and fair view of the financial position of the Association as at 31 December 2022, and of its financial performance and cash flows for the year then ended in accordance with International Planned Parenthood Federation, (“IPPF”) accounting policies, Malaysian Private Entities Reporting Standard and the requirements of the Societies Act, 1966 in Malaysia.

Basis for Opinion

We conducted our audit in accordance with approved standards on auditing in Malaysia and International Standards on Auditing. Our responsibilities under those standards are further described in the Auditors’ Responsibilities for the Audit of the Financial Statements section of our report. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Independence and Other Ethical Responsibilities

We are independent of the Association in accordance with the By-Laws (on Professional Ethics, Conduct and Practice) of the Malaysian Institute of Accountants (“By-Laws”) and the International Ethics Standards Board for Accountants’ International Code of Ethics for Professional Accountants (including International Independence Standards) (“IESBA Code”), and we have fulfilled our other ethical responsibilities in accordance with the By-Laws and the IESBA Code.

Emphasis of matter

We draw attention to in Note 4 to the financial statements, which discussed the recent outbreak of the Covid-19 pandemic has spread throughout the world and is impacting worldwide economic activity. Conditions surrounding the Covid-19 pandemic continue to rapidly evolve and government authorities worldwide have implemented emergency measures to mitigate the spread of the Covid-19. The outbreak of the Covid-19 pandemic and the related mitigation measures may have an adverse impact on global economic conditions as well as on the Association’s business activities. The related financial impact on the Association due to the uncertainty in the current economic situation cannot be reasonably estimated at this time. Our opinion is not modified with respect to this matter.

Responsibilities of the Committee for the Financial Statements

The Committee of the Association is responsible for the preparation of financial statements of the Association that give a true and fair view in accordance with International Planned Parenthood Federation, (“IPPF”) accounting policies, Malaysian Private Entities Reporting Standard and the requirements of the Societies Act, 1966. The Committee is also responsible for such internal control as

the Committee determine is necessary to enable the preparation of financial statements of the Association that are free from material misstatement, whether due to fraud or error.

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

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements of the Association as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with approved standards on auditing in Malaysia and International Standards on Auditing will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with approved standards on auditing in Malaysia and International Standards on Auditing, we exercise professional judgment and maintain professional scepticism throughout the audit. We also:

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

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

Other Matters

This report is made solely to the members of the Association, as a body, in accordance with the requirements of the Societies Act, 1966 and for no other purpose. We do not assume responsibility to any other person for the content of this report.

ALAN YOON ASSOCIATES
AF 1302
Chartered Accountants
Teluk Intan,
Date:

YOON CHUNG SIN
01975/10/2024 J


Registration No: PPM-003-07-16011962

**PENANG FAMILY HEALTH DEVELOPMENT ASSOCIATION
(PERSATUAN PERKEMBANGAN KESIHATAN KELUARGA PULAU PINANG)
(Registered in Malaysia)**

BALANCE SHEET AS AT 31 DECEMBER 2022

	Note	2022			2021	
		RM	RM	RM	RM	RM
		Unrestricted	Donor Restricted	Total	Total	Total
ASSETS						
Current Assets						
Cash And Cash Equivalents:						
Cash and Bank Balances	5	185,798	0	185,798	133,089	
Interest Bearing Deposits	5	55,656	0	55,656	54,542	
Inventories	6	23,417	0	23,417	25,920	
Other Receivables and Prepayments	7	7,188	0	7,188	13,389	
Security Deposits		6,836	0	6,836	6,810	
Total Current Assets		278,895	0	278,895	233,750	
Non-Current Assets						
Property And Equipment	8	8,131	0	8,131	23,840	
Total Non-Current Assets		8,131	0	8,131	23,840	
TOTAL ASSETS		287,026	0	287,026	257,590	


Ms Yeap Meng Chee
Chairperson


Dr Tong Mun Wah Mallise
Treasurer


Ms Low Bee Cheng
State Manager

The accompanying notes form an integral part of the financial statements.

Registration No: PPM-003-07-16011962

**PENANG FAMILY HEALTH DEVELOPMENT ASSOCIATION
(PERSATUAN PERKEMBANGAN KESIHATAN KELUARGA PULAU PINANG)
(Registered in Malaysia)**

BALANCE SHEET AS AT 31 DECEMBER 2022 (CONT'D)

	2022				2021	
	RM	RM	RM	RM	RM	RM
	Unrestricted	Donor Restricted	Total	Total	Total	Total
LIABILITIES AND FUND BALANCES						
LIABILITIES						
<u>Current Liabilities</u>						
Payables And Accruals	48,349	0	48,349	48,349	65,401	
Tenant Deposit	4,400	0	4,400	4,400	3,450	
Total Current Liabilities	52,749	0	52,749	52,749	68,851	
TOTAL LIABILITIES	52,749	0	52,749	52,749	68,851	
FUND BALANCES						
Designated Fund	71,155	37,847	109,002	109,002	109,002	
Undesignated Fund	125,275	0	125,275	125,275	79,737	
Total Fund Balances	196,430	37,847	234,277	234,277	188,739	
TOTAL LIABILITIES AND FUND BALANCES	249,179	37,847	287,026	287,026	257,590	

Note

9

10


Ms Yeap Meng Chee
Chairperson


Dr Tong Mun Wah Mallise
Treasurer


Ms Low Bee Cheng
State Manager

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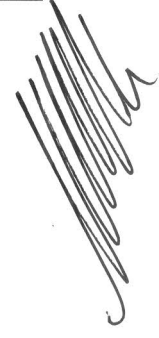
**PENANG FAMILY HEALTH DEVELOPMENT ASSOCIATION
(PERSATUAN PERKEMBANGAN KESIHATAN KELUARGA PULAU PINANG)
(Registered in Malaysia)**

**STATEMENT OF INCOME, EXPENSES AND CHANGES IN UNDESIGNATED FUND BALANCE FOR THE YEAR ENDED
31 DECEMBER 2022**

	2022		2021	
	RM	RM	RM	RM
	Unrestricted	Donor Restricted	Total	Total
GRANT INCOME				
MAC / MOH – GLOBAL FUND TRANSITION FUND	0	7,880	7,880	149,808
MAC - COVID 19 HUMANITARIAN AID	0	0	0	(108)
FRHAM / IPPF	0	0	0	28,816
GLOBAL FUND – DHSKP PROJECT / PENANG	0	0	0	109,849
USM NFIS PROJECT	0	25,966	25,966	(20,966)
UNHCR	0	6,773	6,773	140,963
PPHK2022	0	297,298	297,298	0
FRHAM / IPPF (CONCEPT GRANT)	0	10,591	10,591	0
OTHER GRANTS AND DONATIONS				
OTHER INCOME:				
CLINIC INCOME	258,768	0	258,768	198,975
CONTRACEPTIVE INCOME	19,185	0	19,185	17,240
RENTAL INCOME	20,000	0	20,000	12,750
DONATION / SPONSORSHIP	120,861	0	120,861	30,282
TOTAL INCOME CARRIED FORWARD	418,814	348,508	767,322	667,609



Ms Yeap Meng Chee
Chairperson



Dr Tong Mun Wah Mallise
Treasurer



Ms Low Bee Cheng
State Manager

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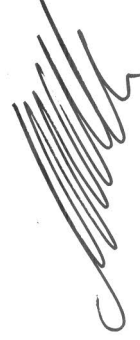
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(Registered in Malaysia)**

**STATEMENT OF INCOME, EXPENSES AND CHANGES IN UNDESIGNATED FUND BALANCE FOR THE YEAR ENDED
31 DECEMBER 2022 (CONT'D)**

	2022			2021	
	RM	RM	RM	RM	RM
	Unrestricted	Donor Restricted	Total	Total	Total
TOTAL INCOME BROUGHT FORWARD	418,814	348,508	767,322	667,609	
FIXED DEPOSIT INTEREST	1,113	0	1,113	912	
FOOD FAIR DONATION	1,000	0	1,000	750	
GAIN ON DISPOSAL OF PROPERTY AND EQUIPMENT	9,699	0	9,699	0	
INCENTIVE INCOME	0	0	0	764	
MEMBERSHIP FEES	40	0	40	700	
DONATION OF SOUVENIRS, PRELOVED	0	0	0	69	
PERKESO WAGE SUBSIDY	0	0	0	15,600	
PROJECT INCOME - REIMBURSE	75,911	0	75,911	77,607	
PROJECT INCOME	40,694	0	40,694	0	
OTHER INCOME	639	0	639	231	
	547,910	348,508	896,418	764,242	



Ms Yeap Meng Chee
Chairperson



Dr Tong Mun Wah Mallise
Treasurer



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State Manager

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**PENANG FAMILY HEALTH DEVELOPMENT ASSOCIATION
(PERSATUAN PERKEMBANGAN KESIHATAN KELUARGA PULAU PINANG)
(Registered in Malaysia)**

**STATEMENT OF INCOME, EXPENSES AND CHANGES IN UNDESIGNATED FUND BALANCE FOR THE YEAR ENDED
31 DECEMBER 2022 (CONT'D)**

PROJECT EXPENSES
Outcome 1 : O1 Advocacy & Champion Rights
Outcome 2 : O2 Awareness & Empowerment
Outcome 3 : O3 Integrated & Accessible Services
Outcome 4 : O4 Governance, Management, Development & Sustainability

TOTAL EXPENSES

SURPLUS / (DEFICIT) F INCOME OVER EXPENSES

UNDESIGNATED FUND

BALANCE AS AT 1 JANUARY

UNDESIGNATED FUND

BALANCE AS AT 31 DECEMBER

	2022			2021	
	RM	RM	RM	RM	RM
	Unrestricted	Donor Restricted	Total	Total	Total
	0	0	0	0	0
	0	0	0	0	0
	237,455	381,582	619,037	641,809	641,809
	231,843	0	231,843	374,274	374,274
	469,298	381,582	850,880	1,016,083	1,016,083
	78,612	(33,074)	45,538	(251,841)	(251,841)
	87,604	(7,867)	79,737	331,578	331,578
	166,216	(40,941)	125,275	79,737	79,737

Ms Yeap Meng Chee
Chairperson

Dr Tong Mun Wah Mallise
Treasurer

Ms Low Bee Cheng
State Manager

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**PENANG FAMILY HEALTH DEVELOPMENT ASSOCIATION
(PERSATUAN PERKEMBANGAN KESIHATAN KELUARGA PULAU PINANG)
(Registered in Malaysia)**

STATEMENT OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED 31 DECEMBER 2022

	O				2021
	0 1	0 2	0 3	0 4	
	Advocacy & Champion Rights	Awareness & Empowerment	Integrated & Accessible Services	Governance, Management, Development & Sustainability	2022
	RM	RM	RM	RM	RM
Accommodation fee	0	0	700	300	1,000
Accounting fee	0	0	0	10,200	10,200
Affiliation fee	0	0	0	200	200
Assessment and quit rent	0	0	0	2,040	2,040
Audit fee	0	0	0	1,800	1,800
- Under provision in prior year	0	0	0	0	0
Bank charges	0	0	117	84	201
Banner / posters charges	0	0	37	79	116
Computer accessories and repair	0	0	530	1,053	1,583
Clinic expenses	0	0	28,388	0	28,388
Condolence and bereavement	0	0	0	0	0
Contraceptives and consumables	0	0	5,011	0	5,011
Clinic purchase	0	0	123,548	356	123,904
Depreciation	0	0	0	15,708	15,708
Domain and hosting fee	0	0	0	60	60
Electricity, water and sewerage	0	0	2,606	6,550	9,156
Balance carried forward	0	0	160,937	38,430	199,367
					162,810

The accompanying notes form an integral part of the financial statements.

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**PENANG FAMILY HEALTH DEVELOPMENT ASSOCIATION
(PERSATUAN PERKEMBANGAN KESIHATAN KELUARGA PULAU PINANG)
(Registered in Malaysia)**

STATEMENT OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED 31 DECEMBER 2022 (CONT'D)

	O 1		O 2		O 3		O 4		2022		2021	
	Advocacy & Champion Rights	RM	Awareness & Empowerment	RM	Integrated & Accessible Services	RM	Governance, Management, Development & Sustainability	RM	RM	RM	RM	
Balance brought forward	0		0		160,937		38,430		199,367		162,810	
Fundraising expenses	0		0		7,644		0		7,644		0	
Gift, aids, token and commission	0		0		4,165		1,700		5,865		7,979	
HDRF	0		0		0		0		0		300	
Honorarium	0		0		49,680		3,100		52,780		9,190	
Insurance (Property, Fixed assets)	0		0		0		1,237		1,237		2,490	
Medical expenses	0		0		4,775		0		4,775		10,859	
Medical claim	0		0		2,139		673		2,812		61,683	
Office expenses	0		0		5,109		4,588		9,697		8,971	
Office building (Rental, maintenance fee)	0		0		17,655		12,276		29,931		22,341	
Project activities	0		0		3,300		0		3,300		61,351	
Professional fee	0		0		23,940		10		23,950		23,575	
Printing and stationery	0		0		4,017		2,548		6,565		8,465	
Postage and courier charges	0		0		287		71		358		244	
Refreshment	0		0		1,365		1,251		2,616		10,095	
Balance carried forward	0		0		285,013		65,884		350,897		390,353	

The accompanying notes form an integral part of the financial statements.

Registration No: PPM-003-07-16011962

**PENANG FAMILY HEALTH DEVELOPMENT ASSOCIATION
(PERSATUAN PERKEMBANGAN KESIHATAN KELUARGA PULAU PINANG)
(Registered in Malaysia)**

STATEMENT OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED 31 DECEMBER 2022 (CONT'D)

	O 1		O 2		O 3		O 4	
	Advocacy & Champion Rights RM	Awareness & Empowerment RM	Integrated & Accessible Services RM	Governance, Management, Development & Sustainability RM	2021 RM	2022 RM	2021 RM	2022 RM
Balance brought forward	0	0	285,013	65,884	390,353	350,897	390,353	350,897
Repair and maintenance	0	0	0	1,808	5,535	1,808	5,535	1,808
Salary and allowance	0	0	306,007	159,153	572,566	465,160	572,566	465,160
Service tax	0	0	0	0	534	0	534	0
Stamp duty	0	0	20	84	227	104	227	104
Training and development	0	0	700	0	0	700	0	700
Uniforms	0	0	0	0	360	0	360	0
Taxation	0	0	0	0	456	0	456	0
Telecommunications	0	0	6,046	1,187	19,170	7,233	19,170	7,233
Travel and subsistence	0	0	21,251	1,557	25,891	22,808	25,891	22,808
Vehicle running cost (Road tax, insurance)	0	0	0	2,170	991	2,170	991	2,170
	0	0	619,037	231,843	1,016,083	850,880	1,016,083	850,880

Yeap Meng Chee

Ms Yeap Meng Chee
Chairperson

Dr Tong Mun Wah Mallise
Dr Tong Mun Wah Mallise
Treasurer

Ms Low Bee Cheng
Ms Low Bee Cheng
State Manager

The accompanying notes form an integral part of the financial statements.

**PENANG FAMILY HEALTH DEVELOPMENT ASSOCIATION
(PERSATUAN PERKEMBANGAN KESIHATAN KELUARGA PULAU PINANG)
(Registered in Malaysia)**

**STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 31 DECEMBER 2022**

	Note	2022 RM	2021 RM
CASH FLOW FROM OPERATING ACTIVITIES			
Surplus / (Deficit) before tax		45,538	(251,841)
Adjustments for:			
Depreciation of property, plant and equipment		15,708	16,970
Gain on disposal of property and equipment		(9,699)	0
Interest income		(1,113)	(912)
Operating surplus / (deficit) before working capital changes		<u>50,434</u>	<u>(235,783)</u>
Decrease in inventories		2,503	5,892
Decrease / (Increase) in receivables and deposits		6,175	(12,576)
(Decrease) / Increase in payables and deposits received		<u>(16,102)</u>	<u>49,004</u>
Net cash generated from / (used in) operating activities		<u>43,010</u>	<u>(193,463)</u>
CASH FLOWS FROM INVESTING ACTIVITIES			
Interest received		1,113	912
Proceeds from disposal of property, plant and equipment		<u>9,700</u>	<u>0</u>
Net cash generated from investing activities		<u>10,813</u>	<u>912</u>
CASH FLOWS FROM FINANCING ACTIVITY			
		<u>0</u>	<u>0</u>
Net increase / (decrease) in cash and cash equivalents		53,823	(192,551)
Cash and cash equivalents at beginning of the year		<u>187,631</u>	<u>380,182</u>
Cash and cash equivalents at end of the year		<u>241,454</u>	<u>187,631</u>
Cash and cash equivalents comprise:			
Cash and bank balances	5	185,798	133,089
Interest bearing deposits – building fund	5	<u>55,656</u>	<u>54,542</u>
		<u>241,454</u>	<u>187,631</u>

The accompanying notes form an integral part of the financial statements.

**PENANG FAMILY HEALTH DEVELOPMENT ASSOCIATION
(PERSATUAN PERKEMBANGAN KESIHATAN KELUARGA PULAU PINANG)**
(Registered in Malaysia)

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 DECEMBER 2022**

1 GENERAL INFORMATION

The Penang Family Health Development Association (Persatuan Perkembangan Kesihatan Keluarga Pulau Pinang) (the “Association” or “FHDA”) is a voluntary not for profit organisation registered in 1961.

The administration office is located at 333, Jalan Perak, 11600 Jelutong, Pulau Pinang and also houses one of the clinics (FHDA Jalan Perak).

The objectives of the Association are as follows:-

- (a) To promote sexual and reproductive rights as human rights;
- (b) To encourage individuals to take control of their reproductive lives;
- (c) To educate the public on the relationship between population, resources, development, environment and family planning;
- (d) To promote equality between men and women;
- (e) To promote choices in reproductive health;
- (f) To act as the liaison body between associate members the Federation of Reproductive Health Associations Malaysia, National Population and Family Development, Ministry of Health and any other agencies interested in reproductive health; and
- (g) To raise funds in furtherance of the above objects.

The Association shall not discriminate on grounds of race, creed, colour, political belief, or sex and provide for a widely based membership.

Its main programme is promoting access to sexual and reproductive health, family health and family development services using four key strategies (O1-Advocacy and Champion Rights, O2 - Awareness and Empowerment, O3-Intergrated and Accessible Services and O4-Governance, Management, Development and Sustainable).

Tuanku Ismail Jewa Centre (formerly known as Family Development Centre) launched on 24 October, 2009 in memory of the Association’s late past President.

The Association is a member of the Federation of Reproductive Health Associations, Malaysia (“FRHAM”).

The principal sources of revenue are project grants channelled through the FRHAM and International Planned Parenthood Federation (“IPPF”), Malaysian Government, Malaysian AIDS Council, (“MAC”) Global Fund clinic services.

The accompanying notes form an integral part of the financial statements.

1 GENERAL INFORMATION (CONT'D)

In order to carry out its task, the Association conducts the following services:-

- (a) Providing clinical reproductive health screening and family wellness services, sexually transmitted infections (STI) clinic, contraception and abortion counselling;
- (b) Supporting HIV/AIDS prevention, screening, treatment adherence and charity supplies rendered to families living with HIV;
- (c) Conducting health information, education and communication campaigns, which cover the underserved and underprivileged communities (such as lower income, elderly, disabled) through outreach mobile clinics and by applying audiovisual materials;
- (d) Empowering young people on sexual and reproductive health and rights to make life choices through youth camps and youth peer activities;
- (e) Improving access to family and sexual health services to marginalised groups and their families. The marginalised groups classified as key populations by the United Nations include sex workers (SW), men who have sex with men (MSM), transgender / transsexual (TG / TS), drug users (DU);
- (f) To implement the programme by hiring staff, maintaining equipment and buildings for the office, centres and clinics at Perak Road, Kampong Kolam in George Town, Jalan Pegawai in Bukit Mertajam, Penang;
- (g) Assessing and reporting the effect and conduct of the four strategies undertaken.

The financial statements of the Association are presented in the functional currency, which is the currency of the primary economic environment in which the entity operates. The functional currency of the Association is Ringgit Malaysia as the sales and purchases are mainly denominated in Ringgit Malaysia and receipts from operations are usually retained in Ringgit Malaysia and funds from financing activities are generated in Ringgit Malaysia.

2 SIGNIFICANT ACCOUNTING POLICIES

The financial statements have been prepared in accordance with the International Planned Parenthood Federation, (“IPPF”) accounting policies, Malaysian Private Entities Reporting Standard and the requirements of the Societies Act, 1966 in Malaysia.

The financial statements have been prepared on the historical cost basis, except for the revaluation of certain assets and liabilities.

The principal accounting policies adopted are set out below:

2.1 PROPERTY, PLANT AND EQUIPMENT

The cost of an item of property, plant and equipment is recognised as an asset when it is probable that future economic benefits associated with the item will flow to the Association and the cost of the item can be measured reliably. After recognition as an asset, an item of property, plant and equipment are measured at cost less any accumulated depreciation and any accumulated impairment losses.

The accompanying notes form an integral part of the financial statements.

2 SIGNIFICANT ACCOUNTING POLICIES (CONT'D)

2.1 PROPERTY, PLANT AND EQUIPMENT (CONT'D)

Depreciation is provided on a straight-line method so as to write off the depreciable amount of the following assets over their estimated useful lives, as follows:

	<u>Rate</u>
Freehold building	5%
Leasehold building	5%
Equipment	5% - 20%
Furniture and fittings	20%
Motor vehicle	20%
Renovation	10%
Signboard	10%

Depreciation of an asset begins when it is ready for its intended use.

If there is an indication of a significant change in factors affecting the residual value, useful life or asset consumption pattern since the last annual reporting date, the residual values, depreciation method and useful lives of depreciable assets are reviewed, and adjusted prospectively.

The carrying amounts of items of property, plant and equipment are derecognised on disposal or when no future economic benefits are expected from their use or disposal. Any gain or loss arising from the derecognition of items of property, plant and equipment, determined as the difference between the net disposal proceeds, if any, and the carrying amounts of the item, is recognised in profit or loss. Neither the sale proceeds nor any gain on disposal is classified as revenue.

2.2 IMPAIRMENT OF ASSETS, OTHER THAN INVENTORIES AND FINANCIAL ASSETS

At each reporting date, the Association assesses whether there is any indication that an asset may be impaired. If any such indication exists, the recoverable amount of the asset is estimated.

When there is an indication that an asset may be impaired but it is not possible to estimate the recoverable amount of the individual asset, the Association estimates the recoverable amount of the cash-generating unit to which the asset belongs.

The recoverable amount of an asset and a cash-generating unit is the higher of the fair value less costs to sell and value in use. In assessing value in use, the estimated future cash flows are discounted to their present value using a pre-tax discount rate that reflects current market assessments of the time value of money and the risks specific to the asset.

If the recoverable amount of an asset or a cash-generating unit is less than the carrying amount, an impairment loss is recognised to reduce the carrying amount to its recoverable amount. An impairment loss for a cash-generating unit is firstly allocated to reduce the carrying amount of any goodwill allocated to the cash-generating unit, and then, to the other non-current assets of the unit pro rata on the basis of the carrying amount of each appropriate asset in the cash-generating unit. Impairment loss is recognised immediately in profit or loss, unless the asset is carried at a revalued amount, in which case it is treated as a revaluation decrease.

The recoverable amount is the higher of an asset's or cash-generating unit's fair value less to sell, value in use and zero.

The accompanying notes form an integral part of the financial statements.

2 SIGNIFICANT ACCOUNTING POLICIES (CONT'D)

2.2 IMPAIRMENT OF ASSETS, OTHER THAN INVENTORIES AND FINANCIAL ASSETS (CONT'D)

An impairment loss recognised in prior periods for an asset or the appropriate assets of a cash-generating unit is reversed when there has been a change in the estimates used to determine the asset's recoverable amount. An impairment loss is reversed to the extent that the asset's carrying amount does not exceed the carrying amount that would have been determined, net of depreciation, if no impairment loss had been recognised in prior periods. A reversal of an impairment loss is recognised immediately in profit or loss, unless the asset is carried at revalued amount, in which case it is treated as a revaluation increase.

2.3 INVENTORIES

Inventories are measured at the lower of cost and estimated selling price less costs to complete and sell. Cost of inventories comprises all costs of purchase, costs of conversion and other costs incurred in bringing the inventories to their present location and condition. Cost of inventories is measured by using the First-in First-out method.

At each reporting date, inventories are assessed for impairment. If an item of inventory is impaired, the carrying amount is reduced to its selling price less costs to complete and sell; the impairment loss is recognised immediately in profit or loss. At each subsequent reporting date, the Association makes a new assessment of selling price less costs to complete and sell. If there is any indication that an impairment loss recognised in prior periods may no longer exist or when there is clear evidence of an increase in selling price less costs to complete and sell due to changed economic circumstances, an impairment loss is reversed to the extent that the new carrying amount is the lower of the cost and the revised selling price less costs to complete and sell.

Inventory donated by IPPF are stated at the landed cost of inventories at port of entry, customs clearing and forwarding charges are expensed during the financial year of acquisition.

2.4 FINANCIAL ASSETS

Financial assets are recognised in the statement of financial position when the Association becomes a party to the contractual provisions of the instrument.

On initial recognition, financial assets are measured at transaction price, include transaction costs for financial assets not measured at fair value through profit or loss, unless the arrangement constitutes, in effect, a financing transaction for the counterparty to the arrangement.

After initial recognition, financial assets are classified into one of three categories: financial assets measured at fair value through profit or loss, financial assets that are debt instruments measured at amortised cost, and financial assets that are equity instruments measured at cost less impairment.

i) Financial Assets At Fair Value Through Profit Or Loss

Financial assets are classified as at fair value through profit or loss when the financial assets are within the scope of Section 12 of the MPERS or if the financial assets are publicly traded or their fair value can otherwise be measured reliably without undue cost or effort.

Changes in fair value are recognised in profit or loss.

The accompanying notes form an integral part of the financial statements.

2 SIGNIFICANT ACCOUNTING POLICIES (CONT'D)

2.4 FINANCIAL ASSETS (CONT'D)

i) Financial Assets At Fair Value Through Profit Or Loss (Cont'd)

If a reliable measure of fair value is no longer available for an equity instrument that is not publicly traded but is measured at fair value through profit or loss, its fair value at the last date that instrument was reliably measurable is treated as the cost of the instrument, and it is measured at this cost amount less impairment until a reliable measure of fair value becomes available.

ii) Financial Assets That Are Debt Instruments Measured At Amortised Cost

After initial recognition, debt instruments are measured at amortised cost using the effective interest method. Debt instruments that are classified as current assets are measured at the undiscounted amount of the cash or other consideration expected to be received.

Effective interest method is a method of calculating the amortised cost of financial assets and of allocating the interest income over the relevant period. The effective interest rate is the rate that exactly discounts estimate future cash receipts through the expected life of the financial assets or, when appropriate, a shorter period, to the carrying amount of the financial assets.

iii) Financial Assets That Are Equity Instruments Measured At Cost Less Impairment

Equity instruments that are not publicly traded and whose fair value cannot otherwise be measured reliably without undue cost or effort, and contracts linked to such instruments that, if exercised, will result in delivery of such instruments, are measured at cost less impairment.

iv) Impairment Of Financial Assets

At the end of each reporting period, the Association assesses whether there is any objective evidence that financial assets that are measured at cost or amortised cost, are impaired.

Objective evidence could include:

- significant financial difficulty of the issuer; or
- a breach of contract; or
- the lender granting to the borrower a concession that the lender would not otherwise consider; or
- it becoming probable that the borrower will enter bankruptcy or other financial reorganisation; or
- observable data indicating that there is a measurable decrease in the estimated future cash flows from the financial assets since the initial recognition of those assets.

The accompanying notes form an integral part of the financial statements.

2 SIGNIFICANT ACCOUNTING POLICIES (CONT'D)

2.4 FINANCIAL ASSETS (CONT'D)

iv) Impairment Of Financial Assets (Cont'd)

For certain category of financial assets, such as trade receivables, if it is determined that no objective evidence of impairment exists for an individually assessed financial asset, whether significant or not, the assets are included in a group with similar credit risk characteristics and collectively assessed for impairment.

Impairment losses, in respect of financial assets measured at amortised cost, are measured as the differences between the assets' carrying amounts and the present values of their estimated cash flows discounted at the assets' original effective interest rate.

If there is objective evidence that impairment losses have been incurred on financial assets measured at cost less impairment, the amount of impairment losses are measured as the difference between the asset's carrying amount and the best estimate of the amount that the Association would receive for the asset if it were to be sold at the reporting date.

The carrying amounts of the financial assets are reduced directly, except for the carrying amounts of trade receivables which are reduced through the use of an allowance account. Any impairment loss is recognised in profit or loss immediately. If, in subsequent period, the amount of an impairment loss decreases, the previously recognised impairment losses are reversed directly, except for the amounts related to trade receivables which are reversed to write back the amount previously provided in the allowance account. The reversal is recognised in profit or loss immediately.

v) Derecognition Of Financial Assets

Financial assets are derecognised when the contractual rights to the cash flows from the financial assets expire, or are settled, or the Association transfers to another party substantially all of the risks and rewards of ownership of the financial assets.

On derecognition of financial assets in their entirety, the differences between the carrying amounts and the sum of the consideration received and any cumulative gains or losses are recognised in profit or loss in the period of the transfer.

2.5 CASH AND CASH EQUIVALENTS

Cash and cash equivalents in the statement of cash flows comprise cash and bank balances, short-term bank deposits and other short-term, highly liquid investments that have a short maturity of three months or less from the date of acquisition, net of bank overdrafts.

2.6 FINANCIAL LIABILITIES

Financial liabilities are recognised in the statement of financial position when the Association becomes a party to the contractual provisions of the instrument.

On initial recognition, financial liabilities are measured at transaction price, include transaction costs for financial liabilities not measured at fair value through profit or loss, unless the arrangement constitutes, in effect, a financing transaction for the Association to the arrangement.

The accompanying notes form an integral part of the financial statements.

2 SIGNIFICANT ACCOUNTING POLICIES (CONT'D)

2.6 FINANCIAL LIABILITIES (CONT'D)

After initial recognition, financial liabilities are classified into one of three categories: financial liabilities measured at fair value through profit or loss, financial liabilities measured at amortised cost, or loan commitments measured at cost less impairment.

i) Financial Liabilities Measured At Fair Value Through Profit Or Loss

Financial liabilities are classified as at fair value through profit or loss when the financial liabilities are within the scope of Section 12 of the MPERS or if the financial liabilities are publicly traded or their fair value can otherwise be measured reliably without undue cost or effort.

If a reliable measure of fair value is no longer available for an equity instrument that is not publicly traded but is measured at fair value through profit or loss, its fair value at the last date that instrument was reliably measurable is treated as the cost of the instrument, and it is measured at this cost amount less impairment until a reliable measure of fair value becomes available.

ii) Financial Liabilities Measured At Amortised Cost

After initial recognition, financial liabilities other than financial liabilities at fair value through profit or loss are measured at amortised cost using the effective interest method. Gains or losses are recognised in profit or loss when the financial liabilities are derecognised or impaired.

Effective interest method is a method of calculating the amortised cost of financial liabilities and of allocating the interest expense over the relevant period. The effective interest rate is the rate that exactly discounts estimate future cash payments through the expected life of the financial liabilities or, when appropriate, a shorter period, to the carrying amount of the financial liabilities.

iii) Loan Commitments Measured At Cost Less Impairment

Commitments to receive loan that meet the conditions of Section 11 of the MPERS are measured at cost less impairment.

iv) Derecognition Of Financial Liabilities

Financial liabilities are derecognised when the obligation specified in the contract is discharged, cancelled or expires.

Any difference between the carrying amounts of the financial liabilities derecognised and the consideration paid is recognised in profit or loss.

The accompanying notes form an integral part of the financial statements.

2 SIGNIFICANT ACCOUNTING POLICIES (CONT'D)

2.7 REVENUE

i) Grant Income

All grants are recognised on an accrual basis. Where income from donors is restricted for specific activities, the income is deferred and released to income when the funds are expended on those specific activities.

2.8 EMPLOYMENT BENEFITS

i) Short-Term Employment Benefits

Short-term employment benefits, such as wages, salaries and other benefits, are recognised at the undiscounted amount as a liability and an expense when the employees have rendered services to the Association.

The expected cost of accumulating compensated absences are recognised when the employees render services that increase their entitlement to future compensated absences. The expected cost of non-accumulating compensated absences, such as sick and medical leaves, are recognised when the absences occur.

The expected cost of accumulating compensated absences are measured at the undiscounted additional amount expected to be paid as a result of the unused entitlement that has accumulated at the end of the reporting period.

The expected cost of profit-sharing and bonus payments are recognised when the Association has a present legal or constructive obligation to make such payments as a result of past events and a reliable estimate of the obligation can be made. A present obligation exists when the Association has no realistic alternative but to make the payments.

ii) Defined Contribution Plan

Contributions payable to the defined contribution plan are recognised as a liability and an expense when the employees have rendered services to the Association.

3 CRITICAL ACCOUNTING JUDGEMENTS AND KEY SOURCES OF ESTIMATION UNCERTAINTY

3.1 CRITICAL JUDGEMENTS IN APPLYING THE ACCOUNTING POLICIES

In the process of applying the Association's accounting policies, the Committee is of the opinion that there are no instances of application of judgement which are expected to have a significant effect on the amounts recognised in the financial statements.

The accompanying notes form an integral part of the financial statements.

3 CRITICAL ACCOUNTING JUDGEMENTS AND KEY SOURCES OF ESTIMATION UNCERTAINTY (CONT'D)

3.2 KEY SOURCES OF ESTIMATION UNCERTAINTY

The key assumptions concerning the future, and other key sources of estimation uncertainty at the reporting date, that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next year, other than those disclosed in the Notes, are as follows:

i) Depreciation of plant and equipment

The cost of an item of plant and equipment is depreciated on the straight-line method or another systematic method that reflects the consumption of the economic benefits of the asset over its useful life. Estimates are applied in the selection of depreciation method, the useful lives and the residual value. The actual consumption of the economic benefits of the plant and equipment may differ from the estimates applied.

ii) Write down for obsolete or slow-moving inventories

The Association writes down its obsolete or slow-moving inventories based on assessment of their estimated net selling price. Inventories are written down when events or changes in circumstances indicate that the carrying amounts could not be recovered. Management specifically analyses sales trend and current economic trends when making this judgement to evaluate the adequacy of the write down for obsolete or slow-moving inventories. Where expectations differ from the original estimates, the differences would impact the carrying amount of inventories.

4 EVENT AFTER THE REPORTING PERIOD

The global pandemic outbreak of Covid-19 remained after the financial year end. The Covid-19 pandemic continues to adversely affect the global economy including the regional economies in which the Association operates.

The Malaysian Government in response to this threat had imposed emergency mitigation measures nationwide, requiring most businesses to restrict business activities. Even though the Covid-19 pandemic in Malaysia have reached its endemic stage and the Malaysian Government have relaxed most of the emergency mitigation measures, the continuous effect of the Covid-19 pandemic may still adversely impact the Association.

Before the current financial statements were approved and authorised for issue, the Committee had considered the nature of the impact from the Covid-19 pandemic in Malaysia, which may impact the financial position, financial performance and cash flow of the Association after the reporting date.

The Committee concluded that the impact from the outbreak of Covid-19 pandemic does not significantly affects the fair values of the financial assets and non-financial assets of the Association, including the classification of current and non-current items presented on the reporting date.

The Committee has indicated the Association's intention to remain in operation and that the Association is able to meet its payment obligations that fall due within the next twelve months from the date of this report.

The accompanying notes form an integral part of the financial statements.

5 CASH AND CASH EQUIVALENTS

	2022	2021
	RM	RM
Cash in hand	2,740	5,211
Cash at bank	183,058	127,878
Interest bearing deposits – building fund	55,656	54,542
	<u>241,454</u>	<u>187,631</u>

6 INVENTORIES

	2022	2021
	RM	RM
Antibiotic (tablets)	202	81
Anti fungal	2,394	2,010
Contraceptives	10,557	9,320
Hormone replenishment therapy	1,673	1,701
Others	5,094	9,647
Vitamins (tablets)	2,833	2,566
Anti hypertensive	271	223
Lipid lowering	393	372
	<u>23,417</u>	<u>25,920</u>

7 OTHER RECEIVABLES AND PREPAYMENTS

	2022	2021
	RM	RM
Other receivables	5,443	10,654
Prepayments	1,745	2,735
	<u>7,188</u>	<u>13,389</u>

The accompanying notes form an integral part of the financial statements.

8 PROPERTY AND EQUIPMENT

	As at 01 January 2022 RM	Additions RM	Disposals RM	As at 31 December 2022 RM
<u>Cost</u>				
Freehold building	190,000	0	0	190,000
Leasehold building	90,025	0	0	90,025
Equipment	263,354	0	0	263,354
Furniture and fittings	12,372	0	0	12,372
Motor vehicle	108,744	0	(70,262)	38,482
Renovation	78,310	0	0	78,310
Signboard	1,858	0	0	1,858
	744,663	0	(70,262)	674,401
	744,663	0	(70,262)	674,401

	As at 01 January 2022 RM	Charges for the year RM	Disposals RM	As at 31 December 2022 RM
<u>Accumulated Depreciation</u>				
Freehold building	180,500	9,499	0	189,999
Leasehold building	90,025	0	0	90,025
Equipment	263,115	156	0	263,271
Furniture and fittings	11,408	321	0	11,729
Motor vehicle	108,742	0	(70,261)	38,481
Renovation	66,205	5,594	0	71,799
Signboard	828	138	0	966
	720,823	15,708	(70,261)	666,270
	720,823	15,708	(70,261)	666,270

	2022 RM	2021 RM
<u>Carrying Amount</u>		
Freehold building	1	9,500
Leasehold building	0	0
Equipment	83	239
Furniture and fittings	643	964
Motor vehicle	1	2
Renovation	6,511	12,105
Signboard	892	1,030
	8,131	23,840
	8,131	23,840

The accompanying notes form an integral part of the financial statements.

9 PAYABLES AND ACCRUALS

	2022	2021
	RM	RM
Payables	37,000	52,196
Accruals	11,349	13,205
	<u>48,349</u>	<u>65,401</u>

10 DESIGNATED FUND

	Unrestricted Termination Reserve RM	Clinical Service Reserve RM	Donor Restricted Global Fund RM	Inventory Fund RM	Total RM
At beginning and end of the year	<u>20,753</u>	<u>35,958</u>	<u>37,847</u>	<u>14,444</u>	<u>109,002</u>

11 INCOME TAX

The Federation of Reproductive Health Association, Malaysia (“The Federation”) and its affiliated State member associations (including Penang Family Health Development Association formerly known as Penang Family Planning Association until its change for name in 2008) have been exempted from income tax under Section 127 (1) (b) of the Income Tax Act, 1967 in Malaysia. However, under the Finance Act, 1986 in Malaysia, this exemption had been withdrawn with effect from the financial year ended 31 December 1987 (year of assessment 1988).

On 12 January 2021, approval was obtained from the Director of Inland Revenue Board for the Federation and its affiliated members to be exempted from income tax with effect from the Year of Assessment 1988 (year ended 31 December 1988) until the Year of Assessment 2024 (year ended 31 December 2024) under Paragraph 13 Schedule 6 of the Income Tax Act, 1967 (as amended) in Malaysia. Hence, no provision for income tax has been made in the financial statements of the Federation. By virtue of the Association being a member of the Federation, no provision for income tax was made in the financial statement of the Association. This is consistent with the basis adopted in the financial statements of the Federation.

12 AUTHORISATION FOR ISSUE OF THE FINANCIAL STATEMENTS

The financial statements of the Association were authorised for issue by the Committee on 02 June 2023.

The accompanying notes form an integral part of the financial statements.

TERIMA KASIH

THANK YOU

謝謝

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ありがとう

Ministry of Health, Malaysia
Malaysian AIDS Council
Malaysian AIDS Foundation
Malaysian Society of HIV Medicine (MASHM)
Japan Trust Fund
International Planned Parenthood Federation
Federation of Reproductive Health Associations, Malaysia
Theng Kah Loke & Wong Ah Yin Charitable Trust
Jabatan Pendaftaran Pertubuhan (Registry of Societies, Malaysia)
Medicins Sans Frontieres (Penang)
Selfless Together Learning Centre, Jelutong
Ain Hoa Beauty & Spa Sdn Bhd
Belle Wonder Beauty Salon
Viva Victoria Restaurant
Fuli Jaya Manufacturing Sdn Bhd
Malaysian Nurses Association, Penang Branch
National Council of Women's Organisations, Penang
Pearl of Joy CG, EPCC
Hospital Pulau Pinang (ID Clinic)
Hospital Seberang Jaya (Duta Ubat, Jabatan Farmasi)
Jabatan Kesihatan Negeri Pulau Pinang
Pejabat Kesihatan Daerah of all districts- Timur Laut, Barat Daya, SPU, SPT, SPS
Klinik Kesihatan Jalan Macalister, Sungai Dua DTL, Tanjong Bungah
Klinik Kesihatan Bayan Baru
Klinik Kesihatan Seberang Jaya
Klinik Kesihatan Bukit Panchor
Pejabat Zakat Bandar Perda
Rose Charities, Penang
Centre for Research on Women & Gender (KANITA), Universiti Sains Malaysia
Reproductive Rights Advocacy Alliance Malaysia
Klinik Rakyat Family Planning Services Sdn Bhd
Renasas Semiconductor (M) Sdn Bhd, Bayan Lepas
Flextronics Technology (M) Sdn Bhd, Bukit Minyak
All our donors, volunteers, supporters and staff.
All those who contributed to Penang Family Health Development Association in 2022.

On behalf of about total 7000 beneficiaries of our programme, we, the Executive Committee and management of FHDA thank you for your help.

