The vital force of La Chaîne de l’Espoir is simple: do everything to save the life of a child…
It has already been a year since I have talked to you with sadness and consternation about the violence of the world in which we live. Sadly in 2016, thousands of people have continued to suffer from barbarism, injustice and fear. Their life today is still seriously threatened.

Faced with such growing instability, La Chaîne de l’Espoir remains true to its original mission, which is to help vulnerable children by increasing access to quality healthcare. As stakeholders, we strive every day to build a more just world or, at least, some of its foundations.

In 2016, operating hospital centres have replaced projects initiated in previous years. The Mother and Child Centre in Kabul, opened last November, is an example. This maternity ward comes as an extension of the French Medical Institute for Children. Here, Afghan women are medically followed and can give birth in the best conditions. It is much more than just a gynaecology-obstetrics and neonatology department, it is a haven of peace and it means hope for all of Afghanistan.

In Senegal, the first surgeries have been carried out at the CUOMO Centre for Paediatric Cardiology in Dakar, which is the first cardiac surgery centre for all the children in the West African subregion.

It will make all the difference for that part of the world where life expectancy for many children with heart disease was, until then, significantly limited. Today in Kabul, children have a dignified birth while in Dakar, some of them are reborn to life.

The opening of such facilities entails us to pay real attention to the training and support of the local medical and surgical teams. While walls are built across borders and barriers to the transfer of techniques and knowledge are multiplied, La Chaîne de l’Espoir has chosen to reach out and build bridges between the countries. The Senegalese medico-surgical team of the current CUOMO Centre for Paediatric Cardiology was trained in Vietnam in 2016 as will the Malian team of the André Festoc Paediatric Cardiac Surgery Unit in Bamako scheduled to open in early 2018.

Through all of this, La Chaîne de l’Espoir pursues and will pursue its core mission, which is to treat children suffering from serious pathologies. Thousands of children, often between life and death and sometimes totally excluded from their family and society, are operated on and saved each year by our medico-surgical teams during missions.

True peace ambassadors fighting against inward-looking attitudes, these men and women make La Chaîne de l’Espoir’s heart beat throughout the world. With the help of our European network federated within the association, La Chaîne de l’Espoir – Europe, we can gather strength to save more lives.

Lastly, we don’t want to forget those without whom none of this would be possible, our generous sponsors, our beloved host families, our devoted volunteers and our faithful partners. I would like to extend my thanks to all of you: our work is far from over, together we should continue along the path begun more than 20 years ago and redouble our efforts to build tomorrow’s world, a world of greater justice and solidarity.

Thank you from the bottom of my heart.

Eric Cheysson
La Chaîne de l’Espoir is a collective adventure that binds us and gives us the strength to move forward…

OUR PROJECTS

Our vision

Everywhere in the world, millions of children are condemned owing to a lack of access to healthcare and education.

Driven by the conviction that it is impossible to ignore their suffering and abandon them to their fate, Professor Alain Deloche decided to embark on a unique humanitarian adventure; an alliance made strong by generosity, skills and energy, which would bring together willing kind-hearted men and women ready to rise to life’s many challenges.

La Chaîne de l’Espoir, founded in 1994 as a non-profit organisation ("loi 1901"), is currently chaired by Dr Eric Cheysson. As a major player in the medical field, we have created a network of medical and surgical expertise and excellence. We are actively engaged in long-term projects worldwide aiming to provide access to healthcare and education to the most destitute children and their families and communities.

Our missions

• Treat children and mothers in France or abroad who cannot be cared for in their home countries due to lack of funding, technology or specialised skills
• Provide on-site medical personnel with the specialised training needed to treat different illnesses
• Transfer medical technology and supply equipment and consumables in countries with insufficient healthcare facilities
• Promote the development of specialised hospital facilities suited to local needs
• Contribute to providing medical and surgical care to women and children living in precarious conditions
• Provide humanitarian assistance in the event of conflicts or natural disasters
• Combat starvation and malnutrition
• Offer medical assistance to disadvantaged people, primarily mothers and children, including purchasing and shipping drugs and health and nutrition products
• Promote access to education for impoverished children and women
• Participate in the defence of women’s and children’s rights
• Relieve human suffering by any possible means
• Support or participate in medical research projects and publications with the objective of improving or developing diagnostic methods and effective treatments
• Engage in all fundraising activities to finance actions matching the objectives of La Chaîne de l’Espoir.
Our approach

• To fulfil its missions, La Chaîne de l’Espoir calls on the generosity of the public and relies on funds from private donors, institutions and partner companies. The approach is based on multi-themed actions: collaboration with international organisations, governments and other local authorities, in France and in countries of intervention
• Partnership with any organisation or association with similar objectives, in France and abroad
• Organisation of information campaigns either for fundraising purposes or to make the public aware of the needs of children in distress
• Production of audiovisual educational and informative general interest broadcasts and organisation of conferences, seminars and training programmes
• Promotion in other countries of the creation of organisations with similar goals by allowing them the use of our name and brand La Chaîne de l’Espoir, thus guaranteeing the same respect for our rules and principles in these “affiliate organisations”
• Actions relayed in France and abroad by local groups gathered as “regional branches”
• Assistance of volunteer host families responsible for caring for and accommodating children transferred to and treated in France for the duration of their stay.

Our values

La Chaîne de l’Espoir values its donors’ trust and willingly gives full managerial transparency. We hold ourselves responsible and accountable to them and refuse to use any fundraising method which, through words or images, could harm the dignity of an individual or undermine respect for sacred beliefs.

La Chaîne de l’Espoir chooses service providers based on unprejudiced management principles, respect of the bidding process and use of multiple suppliers.

La Chaîne de l’Espoir provides its employees with an employment contract in compliance with the social law of each country, without discrimination as to race, nationality, gender or religion. We ensure that our representatives abroad abide by the local laws and respect the inhabitants and their beliefs and customs. Likewise, volunteers are bound by the organisation’s code of ethics and the ethical principles of their profession.

Lastly, La Chaîne de l’Espoir always tries to foster close relationships with the populations of the countries in which it works and ensures that its actions and methods are at all times consistent with its values.

Our guarantees

• We clearly indicate the destination of the funds collected from the public
• We use funds solely for the intended purpose and within a reasonable period of time
• We inform donors of any potential alternative appropriation of funds within the context of projects sanctioned by the organisation
• We provide donors with an annual report of the organisation’s accounts audited by an external auditor responsible for indicating in a clear and concise manner the amount of money received, their use and the portion allocated to the intended cause or project.
HIGHLIGHTS FOR 2016

Key figures, words and images for 2016.

1,200 meals distributed every day in Togo

11,000 children benefiting from the Education programmes

192 volunteer missionaries

Iraqi Kurdistan emergency

Inauguration of the Afghan Children's Pavilion in Kabul

First graduates of the Kabul PGME

68 tonnes of equipment and consumables shipped

Laying of the first foundation stone of the André Festoc Paediatric Cardiac Surgery Unit in Bamako

1 year later, Hassane & Boubacar are doing fine
Haiti emergency

Opening of consultations at the Cuomo Centre for Paediatric Cardiology

138 international missions

Creation of the Alain Deloche Foundation for Children’s Pavilions

HIGHLIGHTS FOR 2016

Total budget

Me 22

34 PSD-registered students

Opening of the Mother and Child Centre in Kabul and birth of the first baby

Approval of donations via SMS

100,000 children benefiting from Healthcare programmes

87 children transferred to France

Didier Lockwood’s concert at the Théâtre des Champs Elysées

200 girls enrolled in school in Sneh, India

A communication campaign for the children of Syria

Total budget

M€22
With a resolutely international approach, La Chaîne de l’Espoir was active in 25 countries in 2016 and on the scene of major humanitarian disasters.

ACHIEVEMENTS

Cardiology department at Calmette Hospital Cambodia (2001)
Maputo Heart Institute Mozambique (2001)
Houses of Hope Thailand (2004)
French Medical Institute for Mothers & Children Afghanistan (2005)
PROJECTS “ongoing in 2016”

Afghan Children’s Pavilion and FMIC extension  
Afghanistan (2016)

Cuomo Centre for Paediatric Cardiology  
Senegal (2016)

Dakar Children’s Pavilion  
Senegal (2017)

André Festoc Paediatric Cardiac Surgery Unit  
Mali (2018)
ACHIEVEMENTS

La Chaîne de l’Espoir

2016
ACHIEVEMENTS

International missions
Humanitarian aid
Logistics and procurement
La Chaîne du Savoir
Treatment in France

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International missions
Humanitarian aid
Logistics and procurement
La Chaîne du Savoir
Treatment in France
La Chaîne de l’Espoir was initially founded in order to provide sick children living in poor countries with the best possible care. In 2016, it has continued to welcome in France children who can’t be operated on in their own country.

In 2016, 87 children were transferred to France for surgery. 23 children came from Congo-Brazzaville, 23 from Mali, 9 from Chad, 8 from Senegal, 8 from Guinea, 4 from Madagascar, 3 from Cameroon and the 9 others came either from Burkina Faso, Burundi, Central African Republic, Djibouti, Mauritania or Niger.

La Chaîne de l’Espoir wishes to thank all the people involved in the Treatment of Children in France Programme. First of all, we want to thank the programme coordinators, all volunteers, who are present every day in our offices, at airports and in Paris hospitals to facilitate the arrival of the children. Nothing had prepared those children, between the ages of only a few months and 15 or 16 years, to leave their country, obtain a passport, take the plane, arrive in a foreign country so far away from their home and share our daily life in France during six to eight weeks.

The volunteers in our eight regional branches share the same commitment, the same responsibilities, and often the same sleepless nights.

Half of the children treated in France are hosted by our regional branches and their network of volunteers.

Our organisation lives and transmits the core values of the associative movement through its branches with volunteers.

Programme director:
Nathalie DE SOUSA SANTOS (France)

Programme Coordinators:
Chantal JACQUES,
Adeline DE SALVE,
Dr Nicole ARDAILLOU (France)

Location:
Paris and regional branches
(Caen, Rennes, Nantes,
Bordeaux, Toulouse,
Marseille, Nice-Monaco, Lyon)

Funding:
General public fundraising/
Private partnerships/
Partnerships with public and private institutions
united by a common goal: saving children.

Then volunteers place the children in host families, without whom our mosaic of hope would not work so efficiently. The role of the host families is essential as they welcome and comfort children before and after surgery.

They also have sleepless nights, they go back and forth constantly between hospital and consultation, consultation and laboratory...

Lastly, the travel by plane is made possible by the volunteers of Aviation Sans Frontières, who get organised to pick up the children at home and then accompany them, at all times of day and night. Aviation Sans Frontières is a dynamic and motivated long-term partner.

It is a succession of appointments, consultations, obtaining a passport, purchase of a plane ticket, warmth of the host family, surgery D-day, convalescence, which have contributed to put a smile back on the face of the 87 children treated in 2016!

THREE CHILDREN HAVE MARKED THE YEAR:
Gloria, 11 years old from Chad, who fell off her swing in 2015. She was diagnosed with bilateral temporomandibular ankylosis resulting in a permanent constriction of the jaws. She could not open her mouth anymore and was fed through tube feeding.

After a successful surgery, Gloria has benefited from physical therapy rehabilitation before returning home to her normal life and her former appearance.

The young Ibrahima from Mali risked having his leg amputated due to an aneurysmal cyst of the femur, impossible to treat in his country.

Following the surgery performed by orthopaedic specialists at Nantes Teaching Hospital and a rehabilitation period, he left on his two legs.

Finally, the one-year old Esther, from the Central African Republic, was born with facial deformity. She was suffering from dysphagia due to her deformity.

She underwent complex surgery to recover her true face and eat like any other child of her age to the delight of her parents.
In 2014, La Chaîne du Savoir Endowment Fund was created in order to fund medical training projects using new technologies. In 2015, La Chaîne du Savoir became a fully-fledged programme within La Chaîne de l’Espoir including two main projects: ECHOES and PERINAT.

FACTS AND FIGURES:

1 • The ECHOES project or training in distance live echocardiography for children

This project aims at creating a tele-ultrasound platform enabling the local medical teams to benefit from distance training and better diagnose children suffering from congenital or acquired heart defects. Cardiovascular diseases are the world’s leading cause of death. Every year, more than two million children are diagnosed with inborn (55% of cases) or acquired (45%) heart disease. Acquired heart diseases would be more efficiently treated if diagnosed on time with an ultrasound scanner. We need to train as many doctors as possible worldwide in paediatric cardiac ultrasonography, a discipline requiring experienced practitioners. Training is done through mentoring (currently face-to-face but virtual tomorrow). Nearly half of the diagnoses made in paediatric cardiology today are most likely wrong.

La Chaîne de l’Espoir has implemented the ECHOES programme since February 2015. Experts in paediatric cardiology (in France) are put in contact every week with doctors from the ECHOES network during distance or live ultrasonography sessions.

Experts can give a second opinion on the initial diagnosis thanks to live streaming. Children are examined, diagnosed and local teams are trained on an ongoing basis. Health centres already connected are as follows: The Children’s Pavilion in Cambodia, the French Medical Institute for Children in Afghanistan, the Maputo Heart Institute in Mozambique, the Fann National Teaching Hospital of Dakar in Senegal, the Luxembourg “Mother-Child” Hospital in Mali, the Atinkanmey Polyclinic in Benin, the Ignace Deen Teaching Hospital of Conakry in Guinea, the Tam Duc Heart Hospital and the Heart Institute of Ho Chi Minh City in Vietnam. Within the past year and a half, the project has taken off successfully with more than 1,000 children examined.

The first version of the ECHOES platform went online in November 2016, and it is now hosted on www.echoes.cloud. All the centres included in La Chaîne de l’Espoir network now have their own profile and user name. Tests proved conclusive with all the participating countries. Migration was carried out properly and ultrasonographies are now exclusively performed on the ECHOES platform.

2 • PERINAT project or obstetric and neonatal care training programme using digital tools

The project’s objective is to reduce perinatal mortality (maternal and child mortality) by training midwives and nurses in obstetric and neonatal care more quickly, with the help of digital tools (web). Every year, more than a million children in the world die during the first twenty
four hours of their life. In sub-Saharan Africa, 287,000 women die in childbirth from complications. All those deaths could be avoided with the presence of a qualified medical staff.

Complications during delivery account for 23% of perinatal mortality; they are due to limited knowledge on how to extract a baby and deficient skills in neonatal resuscitation. Most maternal deaths occur because of direct obstetric causes. Clinical examination and immediate care are therefore crucial.

Midwives need to visualise what they actually feel during the examination. Obstetrics requires the quick identification of anatomical structures just by touching them, and the inference of the severity of a case and act.

The project is based on the work of Dr Jean-Paul Renner who has been focusing for the last 20 years on the accurate modelling of the obstetric representations of delivery, by using 3D imaging and actual mechanics.

We will offer midwives the possibility to watch adequate birth representations and potential complications via a web site and a smartphone application.

Both tools make it possible to view the animations in 3D.

- **The two major challenges of these tools are as follows:**
  - Interactive training on childbirth based on animated 3D visualisations available in an interactive way.
  - Realistic simulator of the foetal structure enabling the midwife to have an exact representation of the foetus.

**Outlook for 2017**

Project implementation phase.

1. ECHoES
   An improved version of echoes.cloud will be launched in April 2017 offering easy online inscription and appointment booking.

   One of the goals for 2017 is to include new ultrasonography experts and connect ten additional health centres in the network. Finally, Echoes will integrate a new component with the development of distance obstetric ultrasonography, first tested in the maternity ward of the French Medical Institute for Children in Kabul.

2. PERINAT
   A goal for Perinat.net will be to finalise the website offering obstetric and neonatal training contents available for free on the web for future use during on-site training sessions. Another objective for 2017 is also to develop neonatal educational contents.
The “Procurement/Logistics” department of La Chaîne de l’Espoir was created in 2011. It is a key service in the organisation and carrying out of international missions. It is responsible for purchasing and shipping consumables and medical furniture in the countries of intervention. The medico-surgical teams can operate on children locally and rely on all the necessary equipment while benefitting from the quality of the infrastructures of La Chaîne de l’Espoir. In 2016, the Dakar Cuomo Centre for Paediatric Cardiology was entirely equipped by La Chaîne de l’Espoir, thus becoming a state-of-the-art centre for the treatment of children with heart defects in West Africa. In addition to the department, biomedical engineers are responsible for the medical and surgical equipment of the centres where the missions are taking place.

**A FEW KEY FIGURES FOR 2016:**
In 2016, more than 237 pallets and parcels have been shipped, which is more than 68 tons chartered to the countries of operation, and more specifically:
- **50 tonnes** for the Dakar Cuomo Centre for Paediatric Cardiology (CCPC) in Senegal,
- **8.3 tonnes** for the French Medical Institute for Children (FMIC) in Kabul, Afghanistan
- **9.7 tons** tons for the other hospitals.

As of today, La Chaîne de l’Espoir manages 9,000 references (sterile and non-sterile consumables, instrumentation, medical furniture and pharmacy) recorded in a computer database for easy traceability.

Regarding the biomedical centre, La Chaîne de l’Espoir uses a software package for maintenance management to ensure that equipment complies with European hospital standards.

Lastly, the team’s negotiations and trade relations as well as the management of donations have resulted in savings of over €400,000 on needs served compared with the list prices of suppliers.

**FROM PURCHASE TO FIELD PROCUREMENT:**

**Logistics plan of a medical mission**
- The needs of the medico-surgical teams (sterile and non-sterile consumables, instruments, medical furniture, etc.) are jointly defined by the missionaries, the procurement-logistics team and the programme coordinator.
- Procurement, shipping and final delivery are carried out by the Procurement/Logistics department.

**THE EQUIPMENT OF HOSPITAL CENTRES:**
Two examples in 2016
- **CCPC in Dakar**
  Fully equipped by La Chaîne de l’Espoir, this centre consists of 2 operating theatres, an intensive care unit with 10 beds, a hospitalisation unit with 10 beds and a consultation unit able to receive 900 children every year.
- **FMIC in Kabul**
  La Chaîne de l’Espoir manages the continuous supply of drugs and consumables paid for by FMIC.
La Chaîne de L’Espoir has been active in Iraq since 2003 and has lead activities in cardiac surgery, paediatric surgery, and training with the sending of international surgical missions up until 2015. Starting in 2014, the Islamic State has been in full expansion in the Iraqi territory. This expansion was stopped in the North at the end of 2015 after the Kurdish army takeover of the Islamic State western areas of Nineveh plains and Mount Sinjar. These strongly militarised areas, the affiliations of which are now being contested between the central power, the Kurds, and the different local militias, have not provided any general or emergency surgery since the destruction of hospital infrastructures. La Chaîne de L’Espoir committed to re-establish surgery services for the population affected by the war in the cities of Rabia and Sinoni, near the Iraqi-Syrian border.

More recently, the fighting in Mosul, begun in October of 2016, is causing enormous needs in terms of emergency medical care and surgery.

La Chaîne de L’Espoir is extending its activities to contribute to the care of the population affected by the conflict: the wounded, internally displaced persons, refugees, and also local communities for which the access to care has been dramatically reduced. La Chaîne de L’Espoir has put in place an emergency room in the primary healthcare centre of Makhmur (Southeast of Mosul).

Finally, in the context of the war, La Chaîne de L’Espoir has mobilised its surgical and pharmaceutical expertise in order to respond to the need of the emergency hospital in Dohuk to reinforce its capacity for emergency care and orthopaedic surgery, activities aimed at preparing the hospital for a potential influx of the wounded.

SURGICAL CARE IN RABIA AND SINONI AND SUPPORT OF THE EMERGENCY HOSPITAL IN DOHUK

Beginning in June of 2016, this project was aimed at opening two operating theatres in remote and difficult to access areas where vulnerable populations live who have suffered greatly from clashes between the Islamic State and the Kurdish army. The closest surgical care is more than three hours away provided a person is authorized to pass the checkpoints.

The principle activities lead in 2016 made it possible to rehabilitate and fully equip two operating theatres, to recruit and supervise local surgery teams, and to start surgical operations at the end of December 2016 in Rabia.

Two teams, each composed of a surgeon, an anaesthetist, an assistant anaesthetist, an operating theatre nurse, a doctor, and two post-op nurses, take turns to assure that the operating theatre is open 24 hours a day, 7 days a week.

International expertise missions have helped the Iraqi teams to set up operational theatres and care protocols.

The impoverished local population and the neighbouring communities, equally in need of surgical services, are the primary beneficiaries.
These two operating theatres are also part of an anticipation and preparation process. While the fighting in Mosul continues, the military activities against the Islamic State will likely intensify in coming months in the areas close to Rabia and Sinoni, still held by the Islamic State. The two operating theatres are thus part of a global plan for the medico-surgical care of the civilian population who might flee in this direction and the wounded directly affected by the combat.

As part of the project, La Chaîne de L’Espoir has also sent a two-week surgical mission (an orthopaedic surgeon, an anaesthetist and a nurse) in April 2016 and a senior OT nurse during three months inside the emergency hospital of Dohuk. The exchange of skills, the audit of practices and recommendations, and management training for the operating theatre have contributed significantly to the increase of the quality of emergency surgical care.

**EMERGENCY MEDICINE IN MAKHMUR**

From the beginning of the fighting in Mosul (October 2016), La Chaîne de L’Espoir has conducted evaluations to define how to respond to the medical needs of the population affected by the new military activities.

At the beginning of November 2016, La Chaîne de L’Espoir decided to put in place an emergency room in the middle of the primary healthcare centre in Makhmur.

This city was a strategic location because it was a mandatory route for the evacuation of the wounded through the southern front to Erbil.

La Chaîne de L’Espoir immediately deployed a resuscitation physician and emergency nurses, and sent the necessary medical supplies and equipment. At the end of 2016, 350 people, directly fleeing the fighting in Mosul or from local areas that no longer had access to emergency care, could benefit from quality medical care and be transferred to the hospitals in Erbil, if necessary.

- **Outlook for 2017**

In 2017, La Chaîne de L’Espoir will continue to develop its medico-surgical programmes in this crisis zone and to reinforce its capacity to quickly mobilise the necessary medical and surgical expertise to respond to the needs of the community.

The operating theatre in Sinoni will open in January and the care capacity will be reinforced.

Several international expertise missions have already been planned to train and support the Iraqi medical teams: an emergency doctor, an orthopaedic surgeon and an anaesthetist will be deployed during the first quarter of 2017.

Finally, thanks to its continued presence in the field, La Chaîne de L’Espoir is constantly monitoring the humanitarian situation in order to better evaluate the needs, in particular those of the civilian populations touched by the ongoing violent conflict.

La Chaîne de L’Espoir has consequently already planned to open a third operating theatre in the Mosul region and to continue to devote itself to the emergency care of the most vulnerable and exposed men, women and children.
13.5 million people are in need of humanitarian assistance, 6.3 million internally displaced people, 4.8 refugees... More than ever, the escalation of violence in Syria during 2016 has destroyed the lives of the civilian populations. Jordan, a country that is host to close to 650,000 Syrian refugees recorded by the United National High Commissioner for Refugees (UNHCR) out of a population of 8 million, has already tightened its borders in 2016. With the exhaustion of their resources and the restrictions against them accessing the labour market, the refugees know a distinct degradation of their living conditions. Today, we estimate that 9 out of 10 Syrian refugees live below the poverty line as defined by Jordan. They face increasing difficulties accessing healthcare for which financial contribution is now required. In the context of the decrease in international funds, the pressure that the influx of refugees puts on the Jordanian healthcare system is also affecting vulnerable populations in Jordan.

2016 ACTIVITIES

Facing this unprecedented humanitarian crisis, La Chaîne de L’Espoir is mobilising to aid the Syrian refugee children as well as the most vulnerable Jordanian children since November 2012. In 2016, with the financial support of the European Civil Protection and Humanitarian Aid Operations (ECHO), the contributions of the UNHCR, the collaboration with the French embassy in Jordan, the authorities in Jordan, and a large network of local healthcare players, La Chaîne de L’Espoir has conducted seven missions (3 in cardiac surgery and 4 in orthopaedic surgery) to treat children suffering from cardiopathy or congenital orthopaedic deformities. 470 children and young adults have been examined, of which 128 have been operated on by La Chaîne de L’Espoir team.

Moreover, La Chaîne de L’Espoir is working to improve the skills of the Jordanian and Syrian medical and paramedical personnel. In 2016, 11 staff members of the Al Maqased Hospital received practical training in paediatric orthopaedic techniques in the operating theatre with La Chaîne de L’Espoir personnel.

29 staff members of Garden’s Hospital participated in a theoretical workshop in paediatric cardiac surgery.

• Outlook for 2017

The need remains immense as the financial costs of operations remain high. In 2017, La Chaîne de L’Espoir will seek to strengthen its action in Jordan in order to treat as many needy Jordanian and Syrian children as possible.
In 2016, Afghanistan remained one of the most dangerous and violent crisis zones in the world. The Global Peace Index (GPI) ranked it third after Syria and Iraq. The Taliban insurgency, the spread of ISIS, the unstable political environment, and the faltering peace talks between the Taliban and the Afghan government did not contribute to bring comfort to an exhausted nation.

Afghan security forces have been sorely tested by an active and efficient Taliban insurgency in a position to assert its authority in roughly 150 of the country’s 400 districts. Regular troops have lost on average 40 soldiers every day and suicide bombings have continued, including inside the security perimeters of Kabul, the capital city. Not to mention the deadly murderous missions of the Islamic terrorist groups, Al Qaeda and the Islamic State.

In a country hit by violence and frequent natural disasters, where life expectancy at birth remains of thirty years, less than that of French standard, where 9.3 million Afghans (i.e. one third of the population) rely on humanitarian assistance, substantial development progress has been made in the last fifteen years: namely, better access to health and education and development of infrastructures.

However, results remain insufficient in regard to accumulated delays and people’s expectations. At the last Brussels summit in October 2016, representatives from 70 countries, opposing the fatigue dreaded by Kabul, have agreed to offer assistance and empathy.

Against such a backdrop, our teams on the ground have remained fully committed despite political uncertainties and conflicts.

La Chaîne de l’Espoir and its partners (the French and Afghan governments and the Aga Khan Development Network) share the same priorities: bringing hope and ensuring access to specialised care for the most vulnerable populations and increasing skills.

THE FRENCH MEDICAL INSTITUTE FOR CHILDREN CELEBRATED ITS TENTH ANNIVERSARY IN 2016. IT HAS EXPANDED ITS ACTIVITY TO BECOME THE FRENCH MEDICAL INSTITUTE FOR MOTHERS AND CHILDREN

The year 2016 has consecrated a several-year mobilisation, culminating in the first graduation ceremony for the postgraduate paediatric medicine and surgery programme in March and the opening of the Mother and Child Centre in September. The volunteer missions of La Chaîne de l’Esper have of course greatly contributed to those graduations and the ongoing medical and paramedical training.
Missions of La Chaîne de l’Espoir in Kabul: 60% increase in activity between 2015 and 2016

La Chaîne de l’Espoir organised 87 missions in 2016 (i.e. 1,519 person days) at the French Medical Institute for Children in Kabul (FMIC) in order to offer better access to quality health care for the Afghan population: 57 medical and biomedical missions and about 30 missions related to coordination, architecture and communication.

8 long-term missions were organised with Dr Najibullah Bina (heart surgeon) who has operated on 281 patients (of which 43 were adults), close to 10% more than in 2015.

The significant increase in the number of missions was directly related to the preparation and opening of the Mother and Child Centre. Namely, 14 missions including midwives, gynaecologist-obstetricians, anaesthetists and neonatology paediatricians added up to the 35 other missions to accompany and strengthen the skills of our Afghan colleagues in heart surgery, orthopaedic surgery, ophthalmology, adult and child interventional cardiology, resuscitation, nursing care, and support and supervision of the quality of the hospital’s general services (laboratory, blood bank, hygiene and asepsis).

The opening of the Mother and Child Centre: FMIC becomes a 161-bed hospital and, as such, the largest public-private hospital in Afghanistan

15 years of commitment of La Chaîne de l’Espoir in Kabul have culminated with the opening of the gynaecology/obstetrics and neonatology department at FMIC. After six months dedicated to accompanying the recruitment process, writing procedures and training staff, the first baby was born on November 23rd. From its very beginning, FMIC has been considered as a reference for complex gynaecological and obstetrical cases within an exclusively feminine healthcare team.

Development of local skills in new departments

The interventional cardiology department, set up in mid-2015, had a fast-growing activity with 99 angioplasties and 256 angiographies performed in 2016. New cardiologists have been recruited and trained during missions organised by La Chaîne de l’Espoir.

The department is autonomous for angiographies and certain angioplasties on adults. The paediatrics activity was initiated at the end of the year by Dr François Sassolas, a cardiologist from Saint Etienne. Retinal surgery is also gradually picking up steam.

Developing and maintaining qualified staff at FMIC

Afghan emigration is significant and mainly concerns qualified resources. The medical community is obviously affected and FMIC is no exception. To compensate for an inevitable loss in human resources, the postgraduate training programme is essential for training medical interns, strengthening FMIC services and securing the future.

This programme also positions FMIC as a true centre of expertise nationwide for training doctors who will work in the provinces.

In 2016, FMIC enrolled 55 interns including 7 women. They are trained in paediatric medicine and surgery, radiology, anaesthesia, orthopaedics and cardiology. The first six graduates, interns in paediatrics and paediatric surgery, have been recruited at FMIC.

14 interns (of which 3 women) will graduate in March 2017; they will also be recruited in orthopaedics, cardiology and anaesthesia. To accompany the development of clinical services, doctoral training will incorporate three new specialties in March 2018: intensive care, gynaecology-obstetrics and heart surgery.

Access to health care for the poorest

In 2016, La Chaîne de l’Espoir maintained its contribution to the social welfare fund of FMIC with the

2016, CHRONOLOGY OF AN EXCEPTIONAL YEAR

28 January: Interventional cardiology, the Afghan team carries out its first angioplasty
6 March: First graduation ceremony for the postgraduate training programme
8 August: Opening of the Children’s Pavilion
7 September: Opening of gynaecology-obstetrics consultations at the Mother and Child Centre
3 November: 10th anniversary of FMIC
5 November: Opening of the Children’s Pavilion
14 November: Opening of the neonatology department at the Mother and Child Centre
21 November: Opening of the obstetrical technical platform
23 November: Birth of the first child
help of the French government, thus enabling indigent patients from the 34 provinces of Afghanistan to receive medical treatments. 4,352 hospitalised patients have benefited from the programme of solidarity, i.e. 71% of FMIC’s patients.

A very effective water treatment unit has been installed at FMIC as part of a partnership with the Suez Environnement Initiatives Fund, Dow France and ADH2OC. Most of the water used by the hospital is supplied by the city of Kabul and has standard food quality. An increase in the volume of activity and patients would lead to additional needs. Kabul’s supply capacity being questionable, it was necessary for the hospital structure to become independent to guarantee the bacteriologic quality of the water to be used at FMIC.

• **Outlook for 2017**
In 2017, La Chaîne de l’Espoir will continue to encourage care quality with a special focus on gynaecology-obstetrics, cardiology and the development of skills in retinal surgery. Supporting the quality of general services (laboratory, blood bank, hygiene and asepsis), essential for care quality, will also remain a key objective.

• **Promoting academic and practical training**
La Chaîne de l’Espoir is also stepping up its participation in the academic training in addition to the training provided within FMIC services.

There are two ways to do so: prepare interventions as part of training modules during scheduled missions and develop distance training via online platforms with experts on cutting-edge topics using distance teleconsultation and live streaming surgeries (cf. La Chaîne du Savoir).

La Chaîne de l’Espoir will also support the implementation of new academic training programmes in gynaecology-obstetrics, intensive care and cardiac surgery in March 2018.

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**FMIC’S VOLUME OF ACTIVITY IN 2016**

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
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</thead>
<tbody>
<tr>
<td><strong>Admissions:</strong></td>
<td>6,125</td>
</tr>
<tr>
<td><strong>Surgery (excluding cardiac):</strong></td>
<td>2,165</td>
</tr>
<tr>
<td><strong>Cardiac surgery:</strong></td>
<td>282 (238 paediatrics/44 adult)</td>
</tr>
<tr>
<td><strong>Consultations:</strong></td>
<td>128,096</td>
</tr>
<tr>
<td><strong>Laboratory procedures:</strong></td>
<td>366,985</td>
</tr>
<tr>
<td><strong>Radiology procedures:</strong></td>
<td>64,338</td>
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</tbody>
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**BACK ON 10 YEARS ACTIVITY IN PAEDIATRIC MEDICINE AND SURGERY**

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
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<tbody>
<tr>
<td><strong>Consultations:</strong></td>
<td>846,345</td>
</tr>
<tr>
<td><strong>Hospitalisations:</strong></td>
<td>46,371</td>
</tr>
<tr>
<td><strong>Surgeries:</strong></td>
<td>20,310  (of which 2,440 cardiac)</td>
</tr>
</tbody>
</table>
Treatment of sick children

The Children’s Pavilion (new terminology for the Children’s House programme) welcomes the most disadvantaged children from Afghanistan provinces and gives them access to the healthcare provided by the French Medical Institute for Mothers and Children, which is unavailable in their home province. In addition to the medical and surgical treatment covered by La Chaîne de l’Espoir, all their needs are paid for (transport, accommodation and food). There are several thousand visitors and about 100 patients on a waiting list every year. A total of 5,691 children have been operated on for free at FMIC since 2008.

Our objective for 2016 was to improve the conditions for receiving and looking after sick children and continue to treat as many impoverished children as possible.

• The new reception centre opened in August 2016
The construction started in 2015 was successfully completed and keys handed over on 3 August 2016. Operations were not interrupted and patients were moved from the old house to the new Children’s Pavilion.

As it is equipped with 45 beds including 8 for women, La Chaîne de l’Espoir will be able to provide wider access to the gynaecological, obstetrical, neonatal and paediatric care offered by the French Medical Institute for Mothers and Children.

• 1,037 children were housed and cared for in 2016
Medical care given to 1,037 children in 2016 represented 4,543 free consultations and 984 free surgeries.

There were on average 82 surgeries per month, most of them related to orthopaedic surgery (51%), cardiac surgery (24%) and general/plastic surgery (21%).
Year after year, gender parity continues to be preserved (48% girls in 2016). The age of patients has been decreasing steadily since 2008 and more than half the children received in 2016 were under the age of five. This shows the excellent condition of the project and the quality of references. The children come from the 34 provinces of Afghanistan and most of them from Kabul’s neighbouring provinces.

The concentration around the capital city can be explained by major internal population movements in the last years, particularly around Kabul’s province. Those flows accelerated in 2016 with the return of Afghan refugees from Pakistan (600,000 returned in the second half of 2016).

In 2016, the team of the Children’s Pavilion was rewarded for its eight years of commitment. Word-of-mouth referencing has doubled since 2015 and proves the strong reputation of the Pavilion (14% new children referred to the Pavilion as against 7% in 2015).

• **Outlook for 2017**

La Chaîne de l’Espoir will continue in 2017 more than ever to defend free access to quality specialty care for the most vulnerable children and women. The needs are enormous.

102 children were already registered on the Pavilion’s waiting list at the end of 2016.

2017 will be the year of the implementation of healthcare for women and newborns. To fulfil this mission, we continue to work on the mobilisation of our local partners surrounding patient referencing and the development of financial partnerships and innovative sources of funding in order to be able to maintain and increase the number of our patients.
University education

As part of the harmonisation of postgraduate degrees in West Africa promoted by the West African Health Organisation (WAHO), La Chaîne de l’Espoir supports the training of paediatric surgeons towards a Postgraduate Specialisation Diploma in Paediatric Surgery (PSD-PS) by sending missions of theoretical and practical training in newborn, child and adolescent care.

**SUPPORT TO PSDs IN PAEDIATRIC SURGERY IN WEST AFRICA**

La Chaîne de l’Espoir has been supporting PSDs in paediatric surgery in Cotonou (Benin), Abidjan (Ivory Coast) and Lomé (Togo) since 2014 by organising and fully financing common theoretical and practical training missions. In 2015, students going for the PSD in Conakry (Guinea) and in 2016, students from Dakar (Senegal), joined this project, which is a growing success.

- **Two training seminars in 2016**
  The first seminar took place in May 2016 at the Sylvanus Olympio Teaching Hospital in Lomé, with 23 students selected and supervised by their PSD directors. Pr Keyvan Mazda (Robert Debré Hospital, Paris) organised a theoretical and practical training session on hip malformation.

  Pr Yann Révillon (Necker Children’s Hospital) and Pr Agnès Liard (Rouen Teaching Hospital) described the treatment of malformative uropathologies including kidney disease, pyeloureteral junctions, bladder extrophy, etc.

  The second seminar was organised at the Albert Royer Hospital in Dakar in December 2016.

  A total of 34 students attended a first training course on neonatal surgical pathologies given by Dr Naziha Khen (Necker Children’s Hospital).

  Dr Didier Moukoko (Angers Teaching Hospital) gave a lecture on the malformations of the upper limb, and more specifically on the treatment of malformations of the brachial plexus.

  Five students have also been awarded scholarships: three students enrolled in the paediatric surgery PSD in Lomé and two students in Abidjan.
Paediatric surgery

La Chaine de l’Espoir supports the action of Friendship in Bangladesh since 2014. Friendship was founded by Runa Khan in 2002 to bring medical aid to the people living on the Char islands, who had no access to any healthcare structures.

Care provided on the three hospital ships answers the medical needs of a population of more than 10 million inhabitants. La Chaine de l’Espoir sends missions in paediatric surgery, orthopaedic surgery, plastic/reconstructive surgery and cardiology and gynaecology every year, according to Friendship’s needs.

MISSIONS IN 2016

In 2016, the operations of La Chaine de l’Espoir in Bangladesh have continued with four medical missions.

Pr Jean-François Mallet, orthopaedic surgeon, conducted a mission during which 75 children were examined, 10 children operated on and the staff trained in the rehabilitation of children suffering from cerebral palsy (CP).

The objective of a mission with Aline Perret, head nurse, was to assess the conditions of hygiene, train the nursing staff in the different techniques of sterilisation and note and prevent any potential dysfunction.

A mission conducted by Dr Bernard Ducassy, cardiologist, included the examination of 150 children with heart defects, the training of the local staff in the techniques of general medical consultation and the assessment with the local teams of the training needs and additional medical and paramedical skills requirements.

Dr Jean Porrini, gynaecologist, and Agnès Simon, midwife, conducted a mission designed to assess training needs for midwives and obstetrical surgery, and to improve the training of the local medical staff on the ships.

• Outlook for 2017

La Chaine de l’Espoir and Friendship have decided to pursue their collaboration with the implementation of a CP programme (7% of children suffer from cerebral palsy and are unable to walk) including three orthopaedic missions with an orthopaedic surgeon, a rehabilitation therapist and an anaesthetist. The first mission is scheduled for May 2017 with Pr Jean-François Mallet.

As soon as the hospital in the south of the country is opened in late 2017 or early 2018, La Chaine de l’Espoir will send a gynaecology-obstetrics mission to organise the further education of local staff. Friendship has required La Chaine de l’Espoir to schedule four more missions on the hospital ships (general medical consultation, visceral and plastic surgery, gynaecology).
Paediatric general surgery

Since 2012, La Chaîne de l’Espoir organises paediatric surgery missions, mainly on visceral-oriented issues, in the Cotonou Mother and Child Hospital, in collaboration with Pr Antoine Séraphin Gbenou, head of the paediatric surgery department.

PAEDIATRIC GENERAL SURGERY

In November 2016, a visceral and urology surgery mission was organised at the Cotonou Mother and Child Hospital with the participation of Pr Agnès Liard, Dr Lucie Grynbert and Louise Zmuda (intern) from Rouen Teaching Hospital.

14 children suffering from hypospadias, vesical exstrophy, cystostomy or abdominal tumours, were operated on during the mission.

The paediatric surgery staff, together with colleagues from anaesthesia and resuscitation and doctors in the postgraduate programme with their coordinator, Pr Armand Fiogbe, took an active part in this mission.

Pr Agnès Liard gave teaching conferences in addition to consultations, surgeries and visits to treated patients.

PAEDIATRIC SURGERY CONGRESS

In May 2016, La Chaîne de l’Espoir was involved in the organisation of the congress of the African Society of Paediatric Surgery in Benin under the authority of its chairman, Pr Armand Fiogbe. More than 250 participants from French- and English-speaking African countries attended the congress. 25 conferences and 122 communications were presented.

Pr Yann Révillon and Pr Agnès Liard, expert physicians, and Brigitte Perroux, operating theatre (OT) nurse, were sent by La Chaîne de l’Espoir. They gave lectures to attending surgeons and students during five conferences and one OT session.

Numerous meetings were organised with the African surgeons in order to develop the network of La Chaîne de l’Espoir.

ECHOES - LA CHAÎNE DU SAVOIR PROGRAMME

September 2016 saw the launching of the ECHOES programme in Benin, which is the eighth country benefiting from such an innovative opportunity.

This distance training programme relies on live streaming and aims at strengthening the skills of the local medical teams when diagnosing children with congenital heart defects.

Launched in Benin with Dr Philippe Adjagba from the Cotonou Teaching Hospital, this truly successful programme has reached more than 20 children in a 4-month period. Three of them will be sent to France in 2017 to receive surgery.
Schooling assistance

La Chaîne de l’Espoir started its programme focused on the school enrolment of disadvantaged children in Benin in 2011. Actions as part of the programme are undertaken jointly with the NGO Bien-Etre et Développement (BED). BED has been helping an impoverished population in several fields for more than 20 years and more specifically in the education sector by being present in two elementary and one secondary schools in the Hévié region, where its activity is concentrated.

**ACTIVITY IN 2016**

The material schooling assistance provided to the children studying in the supported schools is being continued in order to guarantee the quality of their education. Children have received school supplies, books, uniforms and food kits. Annual distributions aim at meeting their basic needs and providing them with nutritional support.

Furthermore, school children may enjoy medical services, if needed. At the end of 2016, more than one hundred children were receiving some kind of support.

Considering the rudimentary nature of conditions in schools, the other objective of the programme is to improve the child’s learning environment.

In 2015, the nursery school took place under a mango tree, in the middle of the Dossonou elementary school playground, due to the reassignment of the nursery classroom to the elementary class.

La Chaîne de l’Espoir initiated the building of two classrooms, one office shared by teachers, and administration and toilets.

The construction was completed in 2016 with the securing of the site with a fence, the electrification of the facilities, the purchase of school furniture and educational equipment, and the creation of a playground. The official handover ceremony with the headmistress was held at the start of the school year.

- **Outlook for 2017**

In 2017, La Chaîne de l’Espoir will extend its individualised support and its assistance to the nursery school. Additionally, a project to combat violence at school will be conducted by BED.

A new partnership with Racines, a Beninese NGO, will also be launched in 2017. It will focus on the sharing of school experiences and common projects will likely be carried out.

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**Activity:**
Schooling assistance

**Programme coordinators:**
Jennifer NAVARRO (France), Carine JONCKHEERE (Togo), and Bien-Etre et Développement NGO (Benin)

**Location:**
Hévié

**Funding:**
La Chaîne de l’Espoir

**Sponsors**
Reconstructive and plastic surgery of the face

Disfigured noma survivors, just like any people with a tumour or a cleft lip, are banished from societies where superstition plays a major role, as they are considered either bewitched or cursed. People suffering from such deformities encounter food difficulties, jeopardising their survival (impossible breastfeeding in case of cleft lip, recurrent aspirations) as well as hearing impairments, breathing disorders, speech defects and maxillodental disorders, etc. To remedy the difficulties of accessing quality healthcare in reconstructive surgery of the face and to deal with the scourge of noma, La Chaîne de l’Espoir launched a programme of care and training missions in Burkina Faso in 2014, with specialised surgeons.

MISSIONS IN 2016

In 2016, La Chaîne de l’Espoir carried out two missions. The team headed by Pr Narcisse Zwetyenga from Dijon Teaching Hospital consisted of surgeons, anaesthetists and nurses (Dijon, Paris, San Sebastian). Those missions have enabled 155 patients, all with complex pathologies, to be operated on: sequelae from noma, maxillomandibular tumours, head and neck tumours, clefts (cleft lip and palate), burn sequelae and severe facial abnormalities.

Each mission includes a training and skills transfer component between French/European and Burkinabe doctors. In 2016, a Postgraduate Specialisation Certificate in Maxillofacial Surgery was created in Burkina Faso. Students followed interventions and theoretical courses delivered by Pr Narcisse Zwetyenga.

To carry out its missions, La Chaïne de l’Espoir relies on a network of partner organisations for the enrolment of patients: Sentinelles, Hymne aux Enfants, Au Fil de La Vie (Mali) and Bilaadga. Bilaadga is also responsible for patient accommodation with the help of the volunteer nurses and facilitators from Ensemble Pour Eux regarding postoperative care and patient rehabilitation.

• Outlook for 2017
Given the real need for further action, the pattern of two missions a year will be maintained in order to continue the transfer of expertise.
Phnom Penh Cardiology Centre (PPCC) was founded by La Chaîne de l’Espoir in 2001. It became the Cardiology Department of Calmette Hospital (CDCH) in 2013. In July 2015, a partnership agreement specified the transfer of responsibility for the management of the Paediatrics Cardiology Centre (formerly called Children’s Pavilion) from La Chaîne de l’Espoir to Calmette Hospital on the first of January 2016.

La Chaîne de l’Espoir returned the premises of the Cardiac Children’s Pavilion to Calmette Hospital. The premises have been refurbished and renovated and are perfectly functional and adapted to their current paediatric mission.

La Chaîne de l’Espoir committed to give an annual subsidy for the organisation of the external paediatric cardiac consultation designed for deprived patients (consultation, medical examination, emergency hospitalisation related to consultation, etc.) for the years 2016 and 2017.

La Chaîne also pledged to finance at least 10 child surgeries per month in 2016 and 8 per month in 2017, according to adjusted operative packages.

The transfer of the paediatric unit to Calmette Hospital will be accompanied in terms of medical expertise and hospital management, via training and healthcare missions, and innovative initiatives in telemedicine and distance training.

Efforts focus on the training of the different CDCH categories of staff, in particular anaesthetists-resuscitators, cardiologists, interventional cardiologists, surgeons and paramedical personnel.

**ACTIVITY IN 2016**

• **Consultations**

In 2016, 4,424 children were examined leading to diagnosis, treatment and planning of heart surgeries. Upon arrival of the children at the Pavilion, nurses record patients’ data, take vitals (blood pressure, saturation, weight, height) and input them in the IT system (medical database).

Two heart consultation rooms are used to perform systematic echocardiography. Drugs are distributed for free according to a prescription delivered after a detailed explanation on how to use them, and a new appointment is made.
• **Surgical activity**
In 2016, 112 patients benefited from therapeutic treatments. Children in the programme may only be operated on after Pr Daniel Sidi (Necker Children’s Hospital) has given a second opinion via videoconference. The paediatric cardiology centre (still called Children’s Pavilion) has become the reference unit for postoperative care because of its strict monitoring with appropriate high-quality equipment, especially for echocardiography.

• **Telemedicine**
La Chaîne de l’Espoir has implemented a new programme since February 2015 entitled cardiac echocardiography via videoconference (cf. La Chaîne du Savoir). The medical team of the Children’s Pavilion has declared the programme useful and essential. It enables students and licensed doctors to follow vocational training and also contributes to more efficiently diagnose and schedule the children to be operated on. This programme also helps Cambodian doctors to overcome medical isolation.

The Cambodian medical and surgical team attends weekly sessions, live from Phnom Penh, with Pr Daniel Sidi in Paris.

No patient is accepted without a collective decision. Complex cases are discussed during videoconference sessions in collaboration with Necker Children’s Hospital staff. In 2016, 31 telermedicine sessions were conducted on a total of 166 patients.

• **Outlook for 2017**
Medical training improvements are expected in the fields of blood cardioplegia, surgeries on children weighing less than 10 kg and surgical techniques for complex medical conditions.
Neurosurgery

In Cambodia, La Chaîne de l’Espoir has traditionally been working on the development of two medical specialties: paediatric cardiology and neurosurgery.

Neurosurgery was not ignored in 2016 as two training missions took place in May and November at Kantha Bopha Hospital in Phnom Penh.

The missions were conducted by two neurosurgeons, Dr Didier Scavarda (Marseille) and Dr Jacques Beaurain (Dijon); they concentrated on the further training of the local teams with a special focus on complex cases.

Different pathologies were treated like dysraphism, brain tumour and vascular malformations. These missions will be extended in 2017 until full autonomy of the Kantha Bopha teams. It should be noted that La Chaîne de l’Espoir had previously trained the cardiac surgery medical teams of Kantha Bopha Hospital in the city of Siem Reap, during the twenty-some missions of Pr Gérard Babatasi over a 3-year period.

Those missions had demonstrated that the combination of the medical expertise of La Chaîne de l’Espoir and the hospital expertise of Kantha Bopha in Cambodia had led to the creation of expert teams and very efficient paediatric services. The objective for paediatric neurosurgery is similar.
Mother-child hospital in Bingerville

The Ivory Coast is a pioneering country in West Africa, which enjoys some political stability and double-digit economic development. La Chaîne de L’Espoir is convinced that efforts should be made to provide it with a high-quality healthcare system that will benefit not only the 26 million Ivoirians, but also neighbouring country populations.

In 2016, La Chaîne de L’Espoir continued its support of the Children of Africa Foundation, the foundation of the first lady, for the construction of the Dominique Ouattara Mother-Child Hospital in Bingerville, close to Abidjan, which intends to be a reference hospital for the sub region. After construction setbacks occurred in 2015, 2016 started at a good pace.

La Chaîne de L’Espoir team worked alongside the contractor to perfect the cohesion between the medical project and the construction of the building, so that the reception of patients would be high quality and adapted to the needs of everyone, the children’s and mother’s flow as practical as possible in a friendly and reassuring environment for the children, and that the specialties of the hospital, such as paediatric oncology, had a coherent place to assure quality services.

In 2017, La Chaîne de L’Espoir will be particularly active on recruitment and training.

However, La Chaîne de L’Espoir does not only focus on the health of mothers and newborns. Its objective is to return the Ivory Coast to its leading position in the treatment of heart diseases in children, which has been the case for many decades.

Alas, the events of 2010 and the following years have undermined this specialty, forcing local doctors to send many children with heart problems abroad, who could no longer be operated on locally.

La Chaîne de l’Espoir has received some of them.

In this context, contacts were resumed with the Institute of Cardiology in Abidjan, the reference centre for cardiology, along with the Minister of Health, Mrs. Paymonde Goudou-Coffie, to contemplate what kind of support La Chaîne de L’Espoir could provide for the Ivorian cardiac doctors.

In 2016, La Chaîne de L’Espoir, member of the Board of Directors of the hospital, has also participated in different meetings and events which will allow this hospital to offer high quality care accessible to all, including the most impoverished, from the end of 2017.

All aspects, such as equipment, procurement of supplies, economic model, information systems and recruitment and training of care staff, are studied jointly. In 2017, La Chaîne de L’Espoir will be particularly active on recruitment and training.

The objective is for the Ivory Coast to be able to operate on children with heart disease with a high level of expertise.
Paediatric general surgery

2015 was a particularly momentous year for La Chaîne de l’Espoir with the arrival in France of two conjoined Guinean babies, sharing the liver and separated at Necker Children Hospital in Paris. The surgery went very well and their return home was widely celebrated and advertised. It was a unique and unexpected event for such a modest family living in one of the poorest countries in the world.

In 2016, La Chaîne de l’Espoir continued to receive Guinean children in France in need of surgery. Eight children came for cardiac, visceral or reconstructive surgery. The commitment of the French Embassy and Consulate in Conakry was decisive, as visas have usually been obtained within a very short delay, even though children sometimes did not have any identification documents.

However, inviting children to France makes sense only if one day it will be possible to have them operated on in their home country in dedicated quality structures with skilled medical and surgical teams.

A fact-finding mission was therefore organised in July 2016 by Pr Lionel Coupris and Nathalie De Sousa Santos, programme Director at La Chaîne de l’Espoir, to make an assessment of the places where children could be operated on and paediatric teams trained. The mission was conducted by Pr Daniel Agbo-Panzo, a Guinean paediatric surgeon and friend of La Chaîne de l’Espoir, in collaboration with the PROSMI Foundation and the Foundation of the First Lady of Guinea.

It is clear that Guinea is a very poor country with a particularly defective health sector that needs the support of La Chaîne de l’Espoir, other NGOs, and many other more powerful stakeholders. During this exploratory mission, no public hospital seemed to be properly functional and well equipped to welcome missions of La Chaîne de l’Espoir. Hospitals lack everything; infrastructures are old, decaying and poorly maintained. Buildings as well as medical equipment are in such an insalubrious state that it is not possible to even envision operating on fragile children.

La Chaîne de l’Espoir has also contemplated the construction and creation ex nihilo of a paediatric hospital but it would be beyond budget capacity.

There is good news however, as the Donka Teaching Hospital, one of the main hospitals in the country, was being renovated during the mission. Substantial budgets were granted to the Guinean government by foreign countries to finance its rehabilitation, the construction of new buildings, and the complete refurbishment of most of its units.

The paediatric surgery department, headed by Pr Daniel Agbo-Panzo, will be renovated to include twenty beds. La Chaîne de l’Espoir hopes that, by the end of 2017, it will be possible
to work in collaboration with the Teaching Hospital and to deploy French teams to conduct complex operations and strengthen the skills of the isolated local teams.

To ensure a long-term cooperation, La Chaîne de l’Espoir has not been idle in 2016 with the purchase and delivery of some new equipment (a surgical light) in order to equip a temporary operating theatre before the reopening of the operating theatre in Donka. The surgical light will be relocated there as soon as possible. Furthermore, two students in the paediatric surgery postgraduate programme attended our paediatric surgery regional training in Benin and Senegal. They were accompanied by Dr Daniel Agbo-Panzo.

Lastly, a student in surgery has received a scholarship from La Chaîne de l’Espoir to finance his studies abroad. La Chaîne de l’Espoir expects that, with time, it will be possible to develop a sustainable quality paediatric surgery in Guinea.
Achievements

HAITI
INTERNATIONAL MISSIONS

School enrolment

The “Haïti - Destination Ecole” (school destination) programme was initiated in 2010, following the earthquake, in partnership with a local association, the Paradis des Indiens Foundation. Its objective is to promote access to health care and a quality education for deprived children from the Abricots village. The programme consists of three major actions: provision of school supplies to the 2,500 children attending the 10 schools founded by our partner, operational support of the main school in Abricots village, and operational support of the health centre intended for the school children and their community.

Hurricane Matthew hit Abricots in early October of 2016 causing considerable damage. In the municipality, more than 80% of the buildings were destroyed or damaged.

Livestock and farm losses heavily impacted the life of the inhabitants leaving them in the greatest destitution.

The schools and the health centre of the Paradis des Indiens Foundation were severely hit, with buildings destroyed and the majority of roofs blown off.

Thanks to its local implantation, La Chaîne de l’Espoir was able to provide support to the children of the area and their family.

A doctor was sent over and half a ton of medications were shipped to the health centre. About 100 children were examined during the mission, which confirmed growing local health needs and an increase in diseases related to very difficult hygiene conditions and malnutrition. A local doctor was also recruited to strengthen medical services and assess the situation in order to reinforce the medium-term health structure.

An exact overview of the situation in the schools and the health centre was conducted by our partner during the last quarter of 2016 to estimate the reconstruction and rehabilitation works to be carried out.

Schools have resumed classes in November, sometimes under the cover of only a tarp.

In 2017, La Chaîne de l’Espoir wishes to encourage the rehabilitation of the health centre buildings and of the Abricots school.

La Chaîne de l’Espoir will be responsible for their operations. It will also strive to strengthen the health assistance to children with a particular focus on school health.

Activity:
Education support

Programme directors:
Sophie ROLLIN, Vincent PERROTTE (France), Paradis des Indiens Foundation (Haiti)

Location:
Abrisots village
Grand Anse Area

Funding:
La Chaîne de l’Espoir
In Haiti, the Minister of Public Health and Population (MSPP) shows a strong will to improve the training of healthcare professionals and thus childcare quality. The goal is to develop the country's healthcare system and substantially decrease morbidity-mortality in the next 25 years, in a context of articulate and dynamic socio-economic development.

In order to alleviate the problem of the health of Haitian children and to combat child mortality, the creation of a paediatric nurse diploma appears indispensable.

The nurses thus trained will contribute to the quality of the healthcare offer in Haiti and to the constant fight for improvement of health services in order to reduce child mortality.

To complete this project and develop the training curriculum, a think tank has been formed with MSPP representatives, the health care branch of Haiti Teaching Hospital, the management of the National Nursing School of Port au Prince, senior officers from the paediatric units and the team of Necker Children Hospital in Haiti (INPHA).

As part of MSPP’s goals, the training promotes the prevention of context-related risks and education in public primary, secondary and tertiary health.

In the best of interests of the child, the training offers preventive, curative and palliative care of a technical and relational nature suited to his/her age and development.

THE PROGRAMME IN 2016
The paediatric nursing training is 12 months long and attested by a state diploma delivered by MSPP. This training prepares learners to exercise diagnostic and therapeutic responsibilities within a project defined by doctors, and more particularly, the paediatricians with whom they work, in cooperation with the child and his/her parents.
• It also provides the human and material learning conditions for the development of the professional skills of a paediatric nurse and clinical specialist.

• The curriculum establishes a balance between the acquisition of professional knowledge and know-how, the mobilisation of information, and expertise in care situations, while relying on the command of concepts and the practice of professional analysis.

Learners complete internship in pediatrics, maternity, or neonatology. Their professional activity and previous experience being taken into account, they do not complete an internship at the place where they usually work.

The duration of the internship allows for permutation, acquisition of new skills, exchange of practices, and appropriation of theoretical knowledge. The duration is 120 hours.

Six supervisory and/or training missions have been organised by the INPHA’s team. 300 training hours have been delivered and 27 learners have received their paediatric nurse state diploma.

• Outlook for 2017

In 2017, thirty new learners will follow the training course. Considering the need to continue training efforts, it will be necessary to submit a request for funding for the three years to come for the long-standing nurse training programme in pediatrics.
Initiated in late 2011, this programme is designed to promote the education of deprived children in Rajasthan and is conducted in partnership with Taabar, an Indian NGO. Based in Jaipur, the programme consists of five major activities: day centre and educational support for children exposed to the dangers of the streets, empowerment of women in a situation of vulnerability via training, schooling of impoverished girls, assistance to children from isolated communities, and health education and care for children eligible for the programme and their community.

**DAY CENTRES**

Five years after the programme was launched, day centres prove to be useful in many ways. They offer material support, before or after school, for the schooling of 1,200 children, provide remedial classes, activities encouraging self-expression, and a daily meal.

The actions carried out in the day centres have had a positive impact on the children’s current and future education. Among the children who came to the centres at the beginning, a quarter had never been to school before and almost half of them gave up after a while. Today, this percentage is down to 10% and 15%, respectively. The commitment and enthusiasm of the children in the various activities highlight their fulfilment and self-confidence. Activities such as children parliaments, processions to claim their rights, dance, theatre, or science workshops, show how much confidence they have gained over the years.

Lastly, all the efforts to raise the awareness of the community and of the parents have been fruitful leading to a waiting list to enrol children in the centres, whereas a few years ago, they were expected to contribute to the family income.

**WORKSHOPS FOR WOMEN**

Beauty and sewing workshops intended to train women in income-generating activities in the district of Khor have continued in 2016. The workshops have been very popular inside and even outside of the community with the involvement of women from other neighbourhoods.

Meetings are organised to encourage women to share experiences and a centre providing guidance has also been opened to help them resolve their difficulties.
SNEH PRIMARY SCHOOL
Besides its global objective of providing young girls from disadvantaged communities with free education, this school gives older girls the opportunity to make up for their missed schooling and re-enter the school system because they can study several levels within one year. All the 200 girls attending school passed to the next grade in July 2016. In addition to their classes, they have also participated in many school activities designed to enhance their creativity and celebrate the country’s festivals.

SUPPORT TO ISOLATED COMMUNITIES
Education introduction classes to the 200 children from three communities in the suburbs of Jaipur, together with health and safety education sessions for their mothers, have been maintained three times a day with two teachers. Daily distributions of water to ensure sanitation and provide drinking water came along with distribution of hygiene kits.

Since 2015, book buses have made regular visits to the communities to encourage people to read.

MOBILE CLINIC
The clinic has continued touring its areas of intervention, providing free care and delivering prevention messages to all the children beneficiaries of the programme and their community.

Specialised consultations in gynaecology have also continued in 2016.
Paediatric surgery

La Chaîne de l’Espoir has been active in Iran since the foundation of La Chaîne de l’Espoir Iran (Zanjireh Omid Institute) by Maryam Marashi in 2007. It aims at providing high-quality care to children of impoverished families, particularly the children of Afghan refugees, and further educating Iranian paediatric surgeons in the fields of cardiac, orthopaedic and reconstructive surgery.

In 10 years, 64 care and training missions have been carried out in six partner hospitals: Medical Centre for Children, Imam Khomeini Hospital, Noor Afshar Hospital, Shahid Rajayi Hospital, Sina Hospital and Vali-e-As Hospital. More than 6,000 children have been treated. Iranian doctors also come to France every year to complete a training course. In 2015, Zanjireh Omid opened a Children’s House in Tehran to give free access to children coming from remote provinces.

MISSIONS IN 2016

In 2016, La Chaîne de l’Espoir sent eight missions (including a coordination mission) to Iran. In France, three Iranian doctors and four Iranian nurses came to Paris to complete advanced training at Necker Children’s Hospital and Robert Debré Hospital.

- **Orthopaedic and spine surgery**
  
  Pr Keyvan Mazda, an orthopaedic surgeon at Robert Debré Hospital in Paris, carried out two missions in 2016. 35 patients were examined and 25 children underwent surgery in September and December. Children mainly suffered from spinal pathologies, severe congenital and neurological scoliosis, and severe kyphosis.

  Dr Philippe Valenti, Dr Rui Ferreira, Dr Jean-David Werthel, Pr Keyvan Mazda and Dr Benjamin Lasry carried out two other missions. They examined 165 children of which 69 were operated on in April, September and December.

  The missions focused on surgery and the training of Iranian doctors to ensure a better treatment of complex pathologies like injuries to the brachial plexus.

- **Cardiac surgery and paediatric cardiology**

  Dr Y. Durandy and Dr J. Petit took part in a mission that included 25 consultations and 5 surgeries.

  That mission was also an opportunity to train Iranian doctors towards a better treatment of complex pathologies.
Dr Catherine Amrein, anaesthetist, was able to assess the intensive care unit implemented by Mrs Maryam Marashi and to make recommendations.

- **Training of the nursing staff**
  Aline Perret, senior health manager at La Chaîne de l’Espoir, trained the care staff in the different hygiene techniques.

- **Coordination and project follow-up**
  Françoise Monard, programme coordinator, went on mission in February 2016 to assess and study possible development paths for La Chaîne de l’Espoir in Iran.

- **The Children’s House in Tehran**
  The Children’s House in Tehran opened in 2015 to give access to high-quality free care to children from across Iran.

  With a permanent capacity for around 15 children and their mothers, this fully equipped medical facility provides pre and postoperative care, and includes examination and dental/speech-language care rooms.

  Classes are also organised so that children are not excluded from the social and school system.

  Doctors from La Chaîne de l’Espoir held their consultations at the Children’s House.

- **Outlook for 2017**
  In 2017, La Chaîne de l’Espoir will continue its collaboration with La Chaîne de l’Espoir Iran with the objective of increasing the training of Iranian surgeons in view of the opening in 2019 of the new paediatric hospital, the “Medical Center of Children”, in order to compensate for the lack of specialised paediatric surgeons. Ten Iranian doctors and nurses will be received in France. Three stays will be paid for by the Iranian Embassy in France.
Laos has a rather high child mortality rate with 51 deaths per 1,000 births. This rate is the highest in Southeast Asia. In comparison, there are only 3.34 deaths per 1,000 births in France. Despite a notable economic growth, Laos’s health system is still inadequate.

Despite the Franco-Laotian cooperation dating back to the 1970’s, there is a veritable lack in paediatric surgery, with training currently very limited. There are only two paediatric surgery departments in Vientiane, the capital city. The wards include a limited number of beds and only so-called simple surgeries are undertaken due to an insufficient operating intensive care unit for children. The majority of children are cared for by non-paediatric surgeons who try to adapt their techniques. However, most children (especially the younger ones) are referred to hospitals in Vietnam or Thailand whenever the family can afford it, which is rarely the case. Impoverished families have therefore access to incomplete child healthcare. Lastly, neonatal surgery is practically nonexistent. Considering this situation and a request from the faculty in Vientiane, a support programme for paediatric surgery has been put in place since 2011 under the initiative of Pr Pierre Hélardot.

**MISSIONS IN 2016**

In 2016, four missions were carried out in Vientiane at Mahosot Hospital and Children’s Hospital which included 66 operations on children.

In addition to the practical training during surgeries, theoretical courses are given by surgeons and anaesthetists from La Chaîne de l’Espoir. Some medical equipment was given to the benefit of the Children’s Hospital.

Mission after mission, the teams of La Chaîne de l’Espoir were able to assess progress made by the local teams. Current techniques in digestive surgery are now correctly mastered. Additionally, a significant improvement in postoperative care has been noted.

However, skill transfer still needs to continue for more complex operations.

**OUTLOOK FOR 2017**

In 2017, La Chaîne de l’Espoir wishes to maintain a sustained pace of 4 missions a year.

Needs in oncopaediatrics closely related to paediatric visceral surgery being high, we will assess the situation of care and operating forces in our partner hospitals.
Paediatric cardiac and orthopaedic surgery

Lebanon welcomes more than one million Syrian refugees registered by the United National High Commissioner for Refugees (UNHCR), which is close to a quarter of its population. Local authorities estimate that this number could be in the range of 1.5 million.

More than 7 refugees out of 10 live below the poverty line as defined by UNHCR, whereas Lebanese authorities estimate that 1.5 million Lebanese are considered vulnerable. Such a population influx has consequences on the health system. Pressure on the use of services results in a difficult access to care for the refugees as well as for the uninsured Lebanese patients. According to a UNHCR survey, the cost of healthcare not only strongly limits access but is also a factor driving the most vulnerable populations into poverty.

La Chaîne de l’Espoir has developed joint actions with the NGO Heart Beat/La Chaîne de l’Espoir Lebanon, founded in 2005 by Lebanese cardiac surgeons close to Pr Alain Deloche. The association operates on impoverished Lebanese or foreign children living in Lebanon in precarious conditions. Surgeries take place at the Hôtel-Dieu de France in Beirut, which is renowned for the quality of its care. Only four hospitals in Lebanon are able to perform paediatric cardiac surgery.

In 2016, 300 patients benefited from 160 surgeries and 140 catheterisations thanks to Heart Beat/La Chaîne de l’Espoir Lebanon. 13 of these interventions have been carried out with the financial support of La Chaîne de l’Espoir.

Since December 2016, La Chaîne de l’Espoir has been implementing a new programme to treat congenital orthopaedic defects.

The programme is financed by the Crisis Centre of the French Ministry of Foreign Affairs and established with the collaboration of a network of Lebanese paediatric orthopaedic surgeons and in partnership with URDA, a Lebanese NGO. In 2017, the programme will contribute to the treatment of at least 170 refugee or vulnerable Lebanese children.

Specialties:
Paediatric orthopaedic and cardiac surgery

Programme coordinator:
Lucie DECHIFRE (France)

Partner:
Heart Beat / La Chaîne de l’Espoir Lebanon

Location:
Beirut

Funding:
La Chaîne de l’Espoir / Crisis and Support Centre (France Ministry of Foreign Affairs)
Paediatric cardiac surgery

In Bamako, Pr Mamadou Diarra has created a paediatric cardiology unit which has become a national centre for Mali. However, cardiac surgical needs in Mali are permanent and growing. More than 2,000 cases identified by Pr Mamadou Diarra have life-threatening indications due to lack of care. The programme of La Chaîne de l’Espoir aims at training a team of Malian practitioners in paediatric surgery within the framework of the construction of a paediatric surgery unit inside the Luxembourg “Mother-Child” Hospital (LMCH), which is essential for the comprehensive care of children with heart disease.

• Partners
The creation of this new surgical technical platform has been made possible by a donation from Mrs. Thi Sanh Festoc to La Chaîne de l’Espoir, in honour of her late husband André Festoc. It was agreed with LMCH to call the future unit, the André Festoc Paediatric Cardiac Surgery Unit (AFPCSU).

ACTIVITIES IN 2016
• Studies and start of the programme
In 2016, La Chaîne de l’Espoir carried out several infrastructure missions regarding the drafting of the projects, the plans, and the technical specifications. The architectural programme, initially a rehabilitation project and now a construction project, was properly thought through with the collaboration of medical and non-medical stakeholders.

The idea is to create, inside the existing structure and as an addition to the LMCH, a technical platform including two operating theatres and their related rooms (sterilisation and resuscitation with six beds). The platform is a component of the hospital’s cardiac centre, including consultations and hospitalisation.

• Foundation stone laying
The AFPCSU’s foundation stone was laid on 1 November 2016 by Mrs Aminata Keïta, Mali’s first lady, in the presence of Mrs Marie Madeleine Togo, Health Minister, and Mr Boubou Cissé, Finance Minister. This local political and media event has been of great importance for LMCH.

• Outlook for 2017
After a necessary phase of preliminary studies in 2016 to draft the project, construction works are scheduled to start in March 2017 for an opening in early 2018. In addition to the architectural programme, an equipment plan is currently being finalised regarding the medical, hotel and IT equipment. The goal is to respond to the needs of the medical and paramedical teams, taking into account local conditions and international standards.

La Chaîne de l’Espoir will simultaneously organise the training of the Malian medical and paramedical teams. A team of eight medical and paramedical Malian trainees will go to a partner hospital, for a six-month training period.
Cardiology and cardiac surgery

The Maputo Heart Institute (MHI) was founded in 2001 as a non-profit private hospital. Today, it is financially self-sustaining thanks to the diversification of its medical activities (general surgery, ophthalmology, orthopaedics, medical imaging, pharmacy and laboratory).

This financial autonomy allows it to deliver medical and surgical care to poorer patients. MHI is an essential reference hospital within the Mozambican health system due to the quality of its services and its education, as well as its relationships with major European and American cardiology hospitals.

**ACTIVITY IN 2016**

A surgery and cardiac catheterisation mission was carried out between 11 and 19 March 2016 by Dr Régis Gaudin (Necker Children’s Hospital) and Pr Philipp Bonhoeffer, with Dr Fidélio Arnaldo Sitefane, currently training in cardiac catheterisation at Necker Children’s Hospital. 12 children have been selected and operated on during the mission. 18 catheterisations have also been successfully performed.

Pr Daniel Sidi continued the training of cardiologists by giving several lectures focusing on pulmonary hypertension.

Like every year, La Chaîne de l’Espoir carried out a mission of technical support within MHI in November 2016 with the following objectives:

- Technical intervention on medical equipment if needed (preventive or corrective maintenance) to prepare the upcoming surgical mission,
- Support during the French surgical mission,
- Strengthening of the skills of MHI’s hospital technicians through theoretical and practical training.

From a technical point of view, the equipment is generally up-to-date (or new for the resuscitation unit following a recent investment).

However, due to the fact that hospital technicians have no biomedical training, the technical mission of La Chaîne de l’Espoir contributes to a regular yearly maintenance of anaesthesia and resuscitation ventilators (sensitive and essential equipment), as recommended by manufacturers. As many pieces of equipment as possible are controlled according to defined protocols.

With those various technical interventions, a certain level of security can be guaranteed during the mission’s
surgeries. If needed, the technician from La Chaîne de l’Espoir can quickly solve the problems encountered at perioperative, resuscitation, hospitalisation, or even sterilisation level.

As previously mentioned, the goal of the technical mission of La Chaîne de l’Espoir is also to strengthen the skills of MHI’s hospital technicians, who acquire enough essential biomedical expertise mission after mission to guarantee highly reliable medical equipment.

- **Outlook for 2017**

After the collapse of the local currency (metrical) that lost half of its value, it has become crucial to be able to supply MHI with cost-effective consumables. The assistance provided by La Chaîne de l’Espoir in 2017 should be in the form of a financial aid towards equipment and goods. La Chaîne de l’Espoir will also continue its training programme for biomedical technicians, surgeons and cardiologists.
Achievements

NEPAL

INTERNATIONAL MISSIONS

School enrolment

Launched in 2011 in partnership with the Children Protection Centers and Services, this programme aims at giving access to education to vulnerable children exposed to the dangers of life on the street. Day centres have opened in several regions of the country to provide academic support and after-school activities to more than 1,200 impoverished children, and to raise the awareness of parents surrounding the education and health of their children and the risks they face. All the children coming to the centres receive financial support for their education and daily light meals. The programme also provides support for the rehabilitation of children previously on the streets.

ACTIVITY IN 2016

In 2016, numerous and varied activities were organised in the centres: homework support, handicrafts and reading workshops, organisation of dance, song, and sports contests, awareness towards children’s rights, health and hygiene, danger from earthquakes, cultural information sessions, and celebration of traditional festivals.

Meetings with parents and teachers were also organised on various issues such as child safety, and child attendance and progress. Children have received uniforms, school supplies and sometimes warm clothing. Some have even benefited from free education costs (examination fees...).

Regional centres have been created in the remote districts of Kathmandu, at Sindhuli and Morang, to improve the supervision and quality of the services provided to the children, and to coordinate and enrich activities locally. With the opening of these new regional centres, some structures in remote areas were closed down. Eight new centres have also opened, mostly located in the schools of the supported children, to strengthen the link with those schools. The construction of the new regional centre in Dolakha, a district severely affected by the earthquakes in 2015, was also completed early in the year.

Lastly, kindergarten classrooms have been furnished and equipped in five schools in order to promote child development. This gives the elder sisters who were taking care of the children at home the opportunity to attend school.

• Outlook for 2017

In 2017, La Chaîne de l’Espoir wishes to continue and develop its actions within the centres and schools of intervention, with a particular focus on health and access to education for younger children.

Activity:
Education support

Programme directors:
Sophie ROLLIN (France), Children Protection Centers and Services NGO (Nepal)

Location:
Nepal

Funding:
La Chaîne de l’Espoir
Cardiac surgery

A cooperation in child cardiac surgery and training of doctors was initiated in 2015 at the request of the Embassy of Uzbekistan in Paris and Mrs Leila Karimova, the UNESCO representative of Uzbekistan and chairwoman of the Sen Yolg’iz Emassan Foundation. This foundation covers all the expenses related to the action of La Chaîne de l’Espoir in Uzbekistan.

ACTIVITY IN 2016

In 2016, two cardiac surgery missions were carried out by Pr Olivier Baron at the Center V. V. Vakhidov, in April and in September. They were the 4th and 5th missions since the beginning of the collaboration. At the same time, Aline Perret, senior health manager, conducted an assessment and training health mission in April.

Three cases of children with a delicate pathology were identified for surgery in France. The children were operated on in the department of Pr Olivier Baron, at Nantes Teaching Hospital.

Dr Alimov Omonjon-Baxtiyorovich and Dr Khakimjon Abralov-Kabuljanovich, both cardiac surgeons, and Jamaliddin O’g’li, cardiologist, completed their training at Nantes Teaching Hospital between March 8th and 15th. Bunyod Akbarkhonov, anaesthetist-resuscitator, attended a one-month training in Nantes.

La Chaîne de l’Espoir signed an agreement in 2016 for the purchase of equipment and consumables on behalf and at the expense of the Uzbek teams. As a result of its expertise in the purchase and supply of consumables in cardiac surgery, La Chaîne de l’Espoir also strives to advise its partners and facilitate their work.

- **Outlook for 2017**

In 2017, the training action in cardiac surgery and hygiene should continue. There is a high demand among doctors for further education.

More generally, discussions with the Faculty of Medicine of Nantes and Nantes Teaching Hospital will be conducted to establish a twinning project between the two structures. Exchanges will be more frequent, with the possibility to set up longer missions and maybe to have young Uzbek doctors stay in Nantes hospitals for extensive periods of time. A multiannual training programme will also be developed.
Central African Republic

Achievements

International Missions

Specialties:
- General surgery,
- Gynaecological and obstetric surgery

Programme directors:
- Nathalie DE SOUSA SANTOS (France), ALIMA NGO (CAR)

Location:
- Boda

Funding:
- ECHO

General surgery

In 2016 and until April 2017, La Chaîne de l’Espoir has been active in the Central African Republic, in the town of Boda. The NGO ALIMA required the assistance of La Chaîne de l’Espoir to strengthen the medical skills of the local staff of Boda’s hospital. In 2014, La Chaîne de l’Espoir already cooperated with ALIMA to build the capacity of the medical staff in different facilities around the Koulikoro region in Mali on a project designed for malnourished children suffering from malaria.

In Central African Republic, civil wars have been raging non-stop since 2004, not only destroying the economy but also bringing terror and suspicion between neighbours divided because of their political and religious affiliations.

Basic infrastructure has been completely decimated or abandoned. The health system has been seriously affected by war, with the destruction of hospitals and clinics, the fleeing or death of some doctors and the impossibility to supply health facilities with goods and basic drugs, sending thousands of wounded and sick wandering with nowhere to go to.

Many NGOs have been mobilising to address primary health issues (epidemics, malnutrition...), however, few of them have been able to provide surgical answers.

The collaboration between ALIMA and La Chaîne de l’Espoir was established in that field. ALIMA, which is present in multiple locations across the country, has decided to restart Boda’s hospital, located in a zone of raging conflicts, resulting in many injured and collateral damage because inhabitants are afraid to come out of their homes and go to facilities where they risk “facing their enemies” and losing their life.

Many women have therefore preferred to give birth at home in extremely precarious conditions and with frequent lethal or disabling complications.

Many families have holed up at home, with sick children and undernourished people.

Today, a still fragile peace has returned and the hospital is functioning again. Open to everyone, it remains in a poor condition.

ALIMA and La Chaîne de l’Espoir have supplied the hospital and operate on adults and children.

La Chaîne de l’Espoir has also provided a surgeon and an anaesthetist.

In this enclave town with precarious living conditions, our teams together with ALIMA’s and local teams have performed caesarean sections, various gynaecological and obstetrical surgeries, operated on closed or open fractures, amputations, hernia, burn sequelae, abscesses and all kinds of cuts and bruises.

The collaboration will continue beyond April 2017, according to available financing, to strengthen the skills of the Central African teams working in Boda.
According to the “Global Surgery 2030” report published in 2015 in the Lancet, the absence or lack of surgery was responsible for the death of 16.9 million human beings in 2010 (one third of world mortality), more than AIDS, tuberculosis and malaria together.

The conclusion, which corresponds to the Sustainable Development Goals of the United Nations, states that developing countries must have access to a simple, quality, easily available surgery, called “SURGERY FOR ALL”.

This is also the objective of the training mission organised by La Chaîne de l’Espoir in the North Kivu province. It is a region with six million inhabitants and only six qualified surgeons, and with recurring conflicts further aggravating the sanitary situation.

In May 2016, La Chaîne de l’Espoir set up a mission at the Charité Maternelle Hospital in Goma for the theoretical and practical training in essential surgery, anaesthesiology and perioperative care of several general practitioners coming from health centres or district hospitals in a situation of isolation.

The continuation of the training programme into two or three sessions per year is currently being organised at the request and with the support of the authorities.
Cardiology and cardiac surgery

For many years, La Chaîne de l’Espoir has fought the plight of congenital and acquired heart defects. In Senegal, more than 30,000 children suffer from such defects and 80% of them die before they reach the age of five, according to recent surveys by WHO.

With its partners, the Cuomo Foundation and Fann National Teaching Hospital, La Chaîne de l’Espoir strives to offer access to healthcare to as many people as possible, including in the West Africa subregion, with the construction of a paediatric cardiac surgical centre in Dakar.

**ACTIVITY IN 2016**
All of the actions carried out by La Chaîne de l’Espoir in 2016 were aimed at preparing the start-up of the surgical activity of the Cuomo Centre for Paediatric Cardiology (CCPC) launched in January 2017.

- **Training of the CCPC’s teams**
The objective is to offer children with heart defects systematic and sustainable care as well as monitoring by accompanying the local health care teams until they are fully autonomous. Three cardiac surgery missions were completed in 2016, under the direction of Dr Roux (Toulouse Teaching Hospital), Dr Huny, from the Lausanne Teaching Hospital (collaboration with Terre des Hommes Switzerland), and Dr Youssef (collaboration with Bambini Cardiopatici Nel Mondo - Italy).

During those missions, the Senegalese teams completed their training and operated on 18 children.
To complement the training provided in situ, La Chaîne de l’Espoir also offers internships abroad.

Dr Ba (surgeon) spent a year in France at Toulouse Teaching Hospital, in Dr Roux’s department. In addition to his training in Dakar by biomedical technicians and engineers from La Chaîne de l’Espoir, Oumar Thiam, a biomedical technician, had the opportunity to spend one month in France with the equipment manufacturers supplying the centre’s equipment.

Finally, thanks to the relationships of La Chaîne de l’Espoir with the Heart Institute of Ho Chi Minh City, a Senegalese team of 10 people, made of medical, paramedical and administrative staff, did 2 to 6 months training in Vietnam.

This south-south cooperation has enabled the future CCPC team to become acquainted with quality health care in a centre of excellence coping with similar pathologies and types of patients.

• The construction of the Cuomo Centre for Paediatric Cardiology
The encounter between La Chaîne de l’Espoir and the Cuomo Foundation has generated a unique project.

The centre’s building was completed at the end of August 2016 and equipped according to international health structure standards.

This centre, entirely dedicated to children, opened for consultations on 10 November 2016, in the presence of the Health Minister, Mrs Awa Coll Seck. On the very first day, 59 children were examined by a cardiologist and underwent ultrasonography.

• Outlook for 2017
The surgical activity of the centre will start up as early as January 2017. La Chaîne de l’Esper and the Cuomo Foundation will support the CCPC in its medical, administrative and financial activities until the Senegalese team has become fully autonomous.

Medical accompaniment will be undertaken in the form of training missions at CCPC. International expatriate teams (France, Canada, Italy) will rotate and work in tandem with the Senegalese teams to ensure the weekly continuity of the theoretical and practical training, and the operating programme.

Technical support is also planned to ensure optimal functioning.

The following actions have been planned: help to introduce medical protocols, support to the maintenance of building and equipment, assistance in managing pharmacy and expendable inventories...

Support will be provided to the teams of Fann National Teaching Hospital and CCPC, as part of the administrative and financial management of CCPC, with the presence of a coordinator working with the centre manager to establish activity, quality and finance indicators.

In 2017, the centre’s nascent activity will have numerous impacts in the medical as well as in the media sphere.

The inauguration of the centre in the spring of 2017 will allow an extended reach beyond Senegal and attract many patients from the subregion, who are inoperable at home.
Treatment of sick children

As part of the expanded care of children with heart disease in Senegal and the subregion, the Cuomo Centre for Paediatric Cardiology opened for consultations on 10 November 2016. To support this activity expected to increase with the start-up of the surgical activity in January 2017, La Chaîne de l’Espoir will set up a reception structure near the CCPC, with the help of Engie Foundation and Suez Foundation.

The Children's Pavilion will be the only structure dedicated to paediatric cardiology in the subregion. It will give patients and their relatives, who cannot find or afford accommodation in Dakar, access to healthcare at CCPS.

This programme is threefold: reception and accommodation of children from Senegal and the subregion during pre and postoperative consultations, social support with an educational component and a health education programme for mothers, to ensure a sustainable action in children care.

**Activity in 2016**

“In Senegal, it is difficult to keep a child inside... even a sick child” Pr Mouhamadou NDiaye, head of the cardiac surgery department at Fann National Teaching Hospital.

The Children's Pavilion was conceived to adapt to the local culture and practices. The architectural programme has been developed in accordance with local medical players to optimise the logistics of comprehensive care for children. The facility is built in compressed earth bricks (CEB) made by local companies. This implementation offers many structural and environmental benefits. CEBs are made of a mixture of earth, water and cement, compressed by a press. They offer a much better acoustic and thermal insulation than cement breeze blocks. Technical surveys were carried out late in the summer of 2016 and construction began in October. Construction completion is scheduled for May 2017.

**Outlook for 2017**

In 2017, upon completion, La Chaîne de l’Espoir will equip and open the reception structure for the children and their families coming from regions far away from Dakar and the subregion. With this programme, La Chaîne de l’Espoir wants to uphold the rights of impoverished children to benefit from medical and surgical care at the Cuomo Centre for Paediatric Cardiology. The Children's Pavilion will be able to accommodate up to 500 children every year, who will benefit from comprehensive care (medical and social) during the time necessary for pre and postoperative monitoring.
Education support

In their report published in 2016, Education in Thailand, OECD and UNESCO note that the Thai education system stands “at a crossroad”. Even though the significant investments made in education have allowed Thailand to have high school enrolment rates, too many poor children coming from disadvantaged rural areas still do not attend school. Many more do not acquire basic learning skills in the course of their schooling. There is also a worrying increasing trend in early dropouts (in 2013, 32% of children between the age of 15 and 19 interrupted their studies in secondary school). Gradually, a two-tiered system is emerging, that worsens social inequalities and compromises the socio-economic aspirations of the country.

It is in this context that La Chaîne de l’Espoir struggles to ensure access to quality education for the most vulnerable children. With the collaboration of the Kanlayanamit Teachers’ Group, La Chaîne de l’Espoir supported more than 2,000 children in 2016, through the distribution of scholarships for school supplies, uniforms, books, or to pay for school meals or transport fees to go to school.

The financial cost and the earnings loss that attending school may represent for poor families are nevertheless no longer the only barrier to accessing education in Thailand. Reducing educational inequalities can be achieved by improving both educational quality and school environment.

La Chaîne de l’Espoir and its partners in Thailand are committed to developing collective projects inside as well as outside of the classroom.

In 2016, the mobile library acquired new materials (books, tales, toys, small sporting equipment) designed to promote literacy for 5,450 children in 25 schools and give them the tools and skills necessary for their social and professional insertion.
To enrich teaching methods, the Kanlayanamit Teachers’ Group organised a teacher training workshop on teaching English based on phonetics, which is an efficient and fun method, very much appreciated by schoolchildren and teachers alike.

Learning science through play, vegetable gardens, cooking classes, handicraft, etc. are many ways to spark children’s curiosity and enhance their participation in the classroom and in society.

The improvement of children’s health is another priority for La Chaîne de l’Espoir. In 2016, more than 1,230 children in about 40 schools have had access to oral and dental care with prevention activities on dental hygiene.

Lastly, la Maison de l’Espoir, flagship project of La Chaîne de l’Espoir implemented by the Thai NGO, House of Hope, has welcomed, protected and accompanied 45 children in situations of severe psychosocial, family and emotional vulnerability by providing an environment promoting personal and collective development.

Thailand has undergone many socio-economic changes.

In 2017, La Chaîne de l’Espoir will strive to reinforce overall consistency and the coherence of its actions with collective projects designed to improve the quality of education by providing individual support to the most vulnerable children.
Paediatric general surgery

La Chaîne de l’Espoir has been involved in the development of paediatric general surgery in Togo since 2012, in partnership with the paediatric surgery department of the Sylvanus Olympio Teaching Hospital in Lomé. This programme essentially targets the vocational training of the medico-surgical team of the department.

MISSIONS IN 2016

The first mission was carried out in March with Dr Julien Rod and Dr Nathalie Botto, both paediatric surgeons specialised in visceral and urological surgery. 19 children were operated on during this mission focusing on hypospadias.

Hypospadias is a defect of the urethra that opens along the underside of the penis instead of its tip.

The complexity of this type of intervention requires strong and specific training that will be consolidated during a second mission in March 2017.

Patient enrolment and patient data collection were carried out by highly committed and motivated students in the Lomé’s postgraduate programme in paediatric surgery under the supervision of Pr Jean-Pierre Gnassingbé, the coordinator of Togo’s postgraduate programme.

The second mission in December focused on maxillofacial malformations such as cleft lip and palate.

That mission was conducted by Dr Jean Vendroux, Pr Romain Vanwijck and Pr Francis Veyckemans. It put a smile back on the face of more than 15 children while training future paediatric surgeons.

ITINERANT MISSIONS

Since 2012, the programme has included paediatric surgery missions in different provinces of the country. Those itinerant missions are a unique opportunity for Togolese surgeons to operate on children who have no access to paediatric surgery. Surgeries are performed exclusively by the team of Pr Jean-Pierre Gnassingbé, head of the paediatric surgery department of Sylvanus Olympio Teaching Hospital, with the support of a French anaesthetist designated by La Chaîne de l’Espoir.
Prior to each mission, La Chaine de l’Espoir organises an exploratory mission in the hospitals of the selected regions with the managers of the paediatric surgery department of Sylvanus Olympio Teaching Hospital. The first itinerant mission was organised in June 2016 in Mango, a 7-hour bus ride away from Lomé. A team of 17 including Dr Chantal Chazelet, anaesthetist at Grenoble Teaching Hospital, mobilised efforts to reach a large number of children. Overall, 100 children were operated on in six days, using three operating tables. The main pathologies treated were: hydrocele, hernia (umbilical, testicular and inguinal), burn sequelae and bone diseases. The second itinerant mission was conducted in Sotouboua in September 2016.

A team of 16, seconded by Dr Charlotte Sgro, anaesthetist at Bordeaux Teaching Hospital, performed visceral, urological or orthopaedic surgeries on 108 children. Since the beginning of itinerant missions, more than 570 children from provinces have been operated on.

**DONATION - EQUIPMENT FOR PAEDIATRIC SURGERY OPERATING THEATRE**

In February 2016, La Chaine de l’Espoir offered Sylvanus Olympio Teaching Hospital equipment for the creation of an operating theatre specifically dedicated to paediatric surgery: an operating table equipped with instruments, a multi parametric monitor, a double surgical light as well as various paediatric accessories.
In Togo, the aim of the education programme of La Chaîne de l’Espoir is to develop a safe, protective and stimulating environment in our partner schools in order to improve the learning conditions for our schoolchildren. Vulnerable children can benefit from concrete actions that directly impact their welfare and development.

**ACTIVITY IN 2016**

*School canteen*

Many studies have shown that school canteens have a significant impact on the reduction of the drop-out rate and on the increase of educational attainment rates.

The canteen of Ajallé’s primary school was launched in 2012 and offers a balanced meal every school day to more than 1,200 children. The meals are prepared by seven canteen workers who receive yearly training on school health and hygiene.

*Learning enrichment and personal development of schoolchildren*

In 2015 and 2016, our NYAGBE pilot project proved to be a big success and was therefore extended to nine other schools. It enhances the child’s abilities and motivation during workshops designed to raise awareness and develop oral and written expression.

This project, strongly supported by the Togolese schools and the government, is fully integrated in the National Education Programme, while adding a dynamic, creative and innovative pedagogical approach.

*School health programme*

At the start of the 2016-2017 school year, La Chaîne de l’Espoir launched a new project in four pilot schools to improve school health. Committees of children, parents and teachers have received specific training in sex and health education in order to know, prevent and cure common or seasonal illnesses at school.

They have also taken lessons in personal hygiene, school sanitation and non-violence at school.

In 2017, a large awareness-raising programme is planned within the schools.

*Comprehensive answer to the educational needs of vulnerable children (2002-2016)*

This sponsoring programme enables more than 800 vulnerable children to go to school and receive proper vocational education by covering for all their school needs (school supplies and textbooks, uniform, sport outfit, hygiene kits, school fees).

Furthermore, this project also covers the full cost of their medical care and children benefit from an annual medical check-up.

This year, a “Children’s Festival” was organised to congratulate the best pupils who, despite difficult conditions at home, have demonstrated excellence or perseverance.
COMMUNICATION

La Chaîne de l’Espoir 2016
La Chaîne de l’Espoir is aware of the importance of its image among the general public and pays particular attention to its communication in terms of the visibility of its actions, its reputation, and its credibility.

Communication is used to enhance the confidence of long-term contributors and to reach new donors.

La Chaîne de l’Espoir uses all suitable media (written press, television, radio, and web) to present its actions, expand and strengthen its reputation, and reach new audiences.

INFORMING, RELAYING AND INTERACTING
Digital communication plays a prominent role at La Chaîne de l’Espoir. The website, dynamic and rich in content, takes netizens to the heart of its action by relying on the power of its images and videos.

La Chaîne de l’Espoir and its regional branches are strongly active on social networks and their digital community grows bigger every day with greater involvement and interaction.

Internet users share a common cause and relay the federating messages of La Chaîne de l’Espoir, thus contributing to raise the awareness of more and more people, particularly the younger generations.

IMAGE AT THE HEART OF OUR COMMUNICATION
Since February 2016, La Chaîne de l’Espoir has a new online photo library, a rich photo databank containing more than 11,000 downloadable photos in high resolution, taken by professional or volunteer photographers who accompany the association on its various missions.
In order to highlight the plight of the Syrian children victims, La Chaîne de l’Espoir has made a video with a young Syrian refugee living in Jordan who had his leg amputated after a rocket attack.

A football lover, Nizar keeps playing with his friends to overcome his disability.

La Chaîne de l’Espoir has arranged a broadcasting campaign with the advertising networks of the France Télévisions group to broadcast the spot during Euro 2016. The campaign also enjoyed strong visibility thanks to the free space donated by some major groups: Canal +, France Télévision, Lagardère Publicité, M6 and TF1.

Isabelle Adjani got personally involved by generously performing the voice over for the spot.

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From January to December, La Chaîne de l’Espoir takes part in various events across France. Whether it be for music, sports or culture, we can always count on enthusiastic volunteers to show their support and turn these happenings into must go to events.

**MONDAYS AT THE CHAÎNE**

- **11/01**
  David Weinberger
  “Shall we legalise cannabis?”

- **08/02**
  Olivier Weber
  “Daech, threat in the Middle East and in the West”

- **07/11**
  Christophe André
  “Mediation and medicine”

- **07/03**
  Pierre Botton
  “Fight against recidivism and fight against terrorism”

- **05/12**
  “The Iranian society in front of the regime”

**NO FINISH LINE® PARIS BY SIEMENS**
For its second edition, the 6,700 participants have run and accumulated 83,478 km during 5 days and 4 nights, non-stop. A record!

**DIDIER LOCKWOOD: 60 YEARS OF JAZZ**
Driven by Opéra Game, Didier Lockwood and his guests gave an exceptional concert in front of an audience of 1,600 at the Théâtre des Champs Élysées.

**FOCUS “events”**

**FEEDBACK ON THE FUNDRAISING CONCERT:** Youssou N’Dour, ambassador of La Chaîne de l’Espoir, gave a superb concert at Dakar Grand Théâtre on Sunday 3 April. 2,000 spectators responded to his call. On Youssou N’Dour’s initiative, the concert was organised to collect funds to finance 30 heart surgeries for children present at CCPC opening at the beginning of 2017. It turned out to be much more than a solidarity event, it was full of generosity: broadcasting of commercials, fundraising campaign with sponsors, and finally, based on the French Telethon, organisation of a live TV set in the Grand Théâtre with a call centre to collect donations by phone and SMS.

**MONDAYS AT THE CHAÎNE:** La Chaîne de l’Espoir has been organising monthly conferences open to the public since 2011: Mondays at the Chaîne. It is an opportunity to share and reflect on the world around us and to try and understand it to be one of its attentive and committed players. Every first Monday of each month, at the head office, a guest of choice gives a lecture. To view again the 2016 conferences, please refer to our website.
MAY

SAINT TROPEZ PHOTO GRAND PRIZE
For the 3rd edition, 650 amateur and professional photographers have tried their luck. 50 photographs out of the 2,000 sent have been selected by the jury and auctioned off by P. Cornette de Saint-Cyr.

MONDAYS AT THE CHAÎNE
04/04
Jacques Toubon
“The role of the Rights Defender in favour of refugees and isolated foreign minor children”

03/10
Alexandre Jardin
“Power and necessity of the associative world”

JUNE

OPEN OF THE SMILES OF HOPE
Upon request of the American Dental Club of Paris, 90 big-hearted golf players doubled efforts on the green for the 7th edition of the Saint-Nom-La-Bretèche tournament.

OCTOBER

PARIS 20 KM
For 7 years, a team made of one hundred runners proudly wears the colours of La Chaine in the race.

MONDAYS AT THE CHAÎNE
19/09
Pr David Khayat
“Is there anything like an anti-cancer diet?”

FOCUS
“Partners and players!”

THE AXA HEARTS IN ACTION 24H CHALLENGE: In early April, AXA Hearts in Action invited its runners to embark on an original challenge: a 24h relay race on the No Finish Line © Paris by Siemens. From Saturday 9 April 10 am to Sunday 10 April 10 am, no less than 90 AXA staff took turns to run as many miles as possible. Despite the rain, the cold of the night and the fatigue in the small hours, they set laps with a smile and a real team spirit. Some even came back the next days to build up additional miles! Our thanks go to AXA Hearts in Action.

AS & ASSOCIÉS CHESS SIMUL: On Wednesday 22 June, the Groupe AS & Associés organised an exceptional strategy evening in honour of the the Great International Master, Anatoli Kapov. It was an opportunity for the many invitees to play the champion in a simul. The mixing of worlds, with the support of a true partner, is representative of the functioning of today’s society. “This is the way humanitarian action can move forward” said Alain Deloche. La Chaîne de l’Espoir is very proud of this. Our thanks go to AS & Associés!
La Chaîne de l’Espoir shares its battle for hope and life with thousands of connected people, all of them becoming new links in the chain of solidarity.

**DIGITAL COMMUNICATION**

- **Facebook.com/chainedelespoir**
  - 52,365 fans
  - +126% 2015
  - 52,365 fans
  - +126% 2015

- **Twitter.com/chainedelespoir**
  - 5146 followers
  - +10% 2015
  - 5146 followers
  - +10% 2015

- **Instagram.com/chainedelespoir**
  - ~1,000 persons reached every day

- **www.chainedelespoir.org**

**2016**

- **556,000 emails sent**
- **1,500,000 emails sent**
- **2,901 likes**
- **1,347 followers**
- **521 followers**
- **106,958 views**
- **447,967 views in minutes**
- **82 publications**
- **+107% 2015**
- **+53% 2015**

**JOIN US!** www.chainedelespoir.org
La Chaîne de l’Espoir is represented outside its headquarters by volunteer teams located in the French regions. Volunteers are organised in 16 regional branches. They act on a daily basis to help the children supported by La Chaîne de l’Espoir: organisation of events for solidarity, communication with media, awareness activities in schools, and contact with local companies. For more than 20 years, they have been playing an important role in the continuity of the actions of La Chaîne de l’Espoir.

**400 VOLUNTEERS**
16 regional branches (of which 8 hosting children) and 3 local correspondents grouping 150 active volunteer members + 200 supporters + 50 volunteers within the Île-de-France network = **400 involved volunteers** (host families and missionaries excluded)

**103 EVENTS FOR SOLIDARITY**
More than 100 mobilisations in 2016: awareness, cohesion and fundraisers with many third parties: choirs, sports clubs, service organisations (Lions, Rotary and Kiwanis), sporting and cultural associations, music bands, theatre troupes, city halls and partners. Thank you!

**COMMUNICATION AND MEDIA**
Publications in the regional daily newspapers mainly about the 42 children operated on in the 8 regional Teaching Hospitals. Mobilisation on Facebook: 14 “branches” pages and more than 5,000 likes for these pages. To find them, type “La Chaîne de l’Espoir Ville”

**2016 Highlights**

**March**
Presentation of the cheque of the female Rennes Hermine club following their mobilisation in 2015, in the presence of Alain Deloche.

**April**
Dance show for the Evreux group of companies and presentation of the cheque in the presence of Bernard Pavy and Guy Lefrand, mayor of Evreux.

**September & November**
Two MicroDon fundraising events at Bordeaux-Pessac (Auchan) and Orsay (Franprix) to host children in both cities.

**December**
Gift wrap operation in the OXYBUL – EVEIL et JEUX shops of Créteil (94), Antony (92), Lyon (69) and at DARTY in Blagnac (31).
Main resources and allocation of funds in 2016

- **Reversal of provisions and other**: 3%
- **State subsidies**: 20%
- **Partners and private funds**: 8%
- **Legacies**: 15%
- **Individual donors**: 54%

**Resources**

M€21.61

**Expenditure**

M€21.20

- **Operating expenses**: 3%
- **Development**: 21%
- **Programme expenses**: 76%

- **Expenses 2016**: 55% + commitments: 21%

Your donations, legacies and subsidies are the heart of our human involvement...
RESOURCES
The organisation has 4 main sources of funding:

1. The general public represents La Chaîne de l’Espoir principal source of revenue. Individual donors support the organisation’s activities either through one-off donations to fund paediatric operations, or through regular donations funding mid to long-term projects, principally the organisation of local healthcare and training missions. Education programmes are mainly funded through child or programme sponsorship.

2. The companies and foundations, fund in full or in part La Chaîne de l’Espoir large projects through long-lasting partnerships, especially when it comes to hospital projects, healthcare, personnel training programmes and medical equipment projects. They also contribute to the Treatment of Children in France Programme, education programmes or, occasionally, to surgical operations of one or more children. La Chaîne de l’Espoir and partner companies also organise events and demonstrations (sports events, auctions, etc.) to encourage employees to rally around a common cause.

3. Institutional partners support La Chaîne de l’Espoir larger projects involving construction, renovation or projects to equip hospital facilities as well as training programmes for local doctors and surgeons, and emergency aid players.

4. La Chaîne de l’Espoir seeks to spark donors’ and the general public’s interest in leaving legacies by creating a dialogue and providing information in the newsletter, other publications and on the website. We develop a special relationship with donors through regular communication (the legacy brochure, information, etc.)

We solicit donations from the general public by mail, email and telephone. Regular donations by direct debit and online donations are our principal areas of development.

USE OF DIFFERENT SOURCES OF FUNDING BY ACTIVITY
In general, income contributed by the general public and legacies fund all kinds of programmes at La Chaîne de l’Espoir (treatment of children in France, healthcare missions abroad, education, training, equipment, etc.). Income contributed by companies and corporate partners, “dedicated funds”, fund programmes with clearly defined objectives, budget and requirements meeting the partner’s specifications. This could include specific healthcare programmes, medical training, child education, medical equipment or hospital projects.

VOLUNTEERING
Volunteers make an essential contribution to the organisation’s activities and growth.

Medical Volunteers:
In 2016, 192 missionaries volunteered for a total of 2,903 days for La Chaîne de l’Espoir, which represents a value of over €778K. These surgeons, doctors, nurses and medical technicians ensure the success and professionalism of La Chaîne de l’Espoir medical and paramedical missions abroad.

Host Families:
In 2016, 87 children were transferred to France and cared for by host families. The average stay was about 2 months; these families made a combined contribution of 5,220 days as well as the invaluable gift of serving as ambassadors for our organisation and witnesses to our work.

Head Office Volunteers:
Around 30 volunteers working in our head office contributed a total of 1,906 days of their time. They actively participate in administrative tasks, fundraising and the organisation of missions abroad.

Regional Branches:
16 branches with 150 active volunteers also participated in welcoming children to France for operations outside of Paris and contribute more and more each year to the organisation of events and demonstrations increasing La Chaîne de l’Espoir visibility and raising funds. The monetary value of these activities is estimated at €939K.
FUNDING PRINCIPLES AND ACTIVITY

2016

IN-KIND DONATIONS
Medical materials and equipment also represent an important contribution valued at €181K. Professional contractors also provide a variety of goods and services free of charge: communications, studies and facilities.

SKILLS-BASED SPONSORSHIP
Qualified employees are seconded by a company. It represents a precious form of aid for La Chaîne de l’Espoir and a source of personal satisfaction for those who contribute their time and energy. In 2016, La Chaîne de l’Espoir benefited from 5 skills-based sponsorships, the equivalent of 5 full-time jobs and valued at €383K.

PRINCIPAL ASPECTS OF RELATIONS/AGREEMENTS WITH FRENCH AND INTERNATIONAL ORGANISATIONS OPERATING ON BEHALF OF LA CHAÎNE DE L’ESPOIR
La Chaîne de l’Espoir collaboration with other organisations is defined by specific agreements stating the target beneficiaries, the objective, the proposed transactions, each party’s responsibilities, operations monitoring and reviews, the nature of external communications, the period of the contract, its termination and conflict resolution protocols.

Within the context of these activities, La Chaîne de l’Espoir collaborated with the following organisations in 2016: ALIMA, Bien-Etre et Développement (Benin), The French Medical Institute for Children (Afghanistan), AKDN, Terre D’Azur (Burkina Faso), Assohuma (Burkina Faso), Congo Assistance (Congo Brazzaville), Chenn Espwa Foundation (Haiti), "Paradis des Indiens" Foundation (Haiti), Taabar (India), Maputo Heart Institute (Mozambique), Children Protection Centers and...
La Chaîne de l’Espoir also collaborates with La Chaîne de l’Espoir branches located in other countries (Germany, Belgium, UK, Cameroon, Iran, Italy, Lebanon and Portugal).

NEW PROJECTS
• In Afghanistan, a new maternity hospital opened in November inside the French Medical Institute for Mothers & Children (FMIC). FMIC offers Afghan women and mothers a broader range of healthcare in gynaecology, obstetrics and neonatology. Local medical teams are daily supported by the teams of La Chaîne de l’Espoir. They are trained in neonate care, high-risk pregnancies, physiologic births, gynaecological pathologies and obstetrical emergencies. In order to empower the local teams, they will continue to be accompanied in the years to come.

• In Senegal, the Dakar Cuomo Centre for Paediatric Cardiology (CCPC) was delivered in September and consultations started in November. CCPC has 10 inpatient beds and 10 resuscitation beds and is equipped with a top-notch technical platform with two operating theatres, a consultation service and a Children’s Pavilion designed to accommodate 18 children and their relatives. The centre is ready to welcome children with heart diseases from Senegal and the entire subregion of West Africa. The training of the local team started in 2016 continues with medical and surgical teams coming regularly to encourage the surgical, medical, paramedical and administrative support of sick children.

• In Mali, following the laying of the foundation stone of the André Festoc Paediatric Cardiac Surgery Unit on November 1, the construction works for this department dedicated to children with heart defects have started inside the “Luxembourg” Hospital in Bamako. The surgery waiting list for this future centre already includes 2,000 children. In view of its opening in early 2018, La Chaîne de l’Espoir is planning to train and accompany the Malian team that will perform surgeries in the years to come.

• In Haiti, La Chaîne de l’Espoir, together with the Institut Necker de Pédiatrie en Haïti (INPHA), partakes in the training project of Haitian nurses and their specialisation in paediatrics. The training programme leading to a qualification (the paediatric nurse state diploma) was created by the Haitian government, in cooperation with Haitian national bodies and experts from La Chaîne de l’Espoir. In 2016, 300 hours of training were given to 27 nurses during several medical missions, as part of this programme.

• In Iraqi Kurdistan, a region affected by terrible conflicts and major Syrian refugee influx, no more general or emergency surgery services are provided to the populations. In the absence of any hospital structure, this project started in 2016 made it possible to rehabilitate and fully equip two operating theatres in Rabia and Sinoni, to recruit and supervise local surgery teams, and to start surgical operations at the end of December 2016 in Rabia.
La Chaîne de l’Espoir, established in accordance with the July 1st, 1901 French law governing non-profit organisations, was registered under no. W75118297 on December 12th, 1994 at the Paris Prefecture.

The scope of La Chaîne de l’Espoir annual report

La Chaîne de l’Espoir members
La Chaîne de l’Espoir has 216 active members (including 22 founding members), all of whom vote.

Management
La Chaîne de l’Espoir is governed by the Board of Directors which chooses from amongst its members the Executive Committee consisting of a chairman, a vice-chairman, a general secretary, a deputy general secretary and a treasurer. Operational management is overseen by a general manager, a chief administrative and financial officer, a director of development and a director of programmes.

LA CHAÎNE DE L’ESPOIR BOARD OF DIRECTORS 2016

Executive Committee
Chairman:
- Dr Eric CHEYSSON, Chief of Vascular Surgery at René Dubos Hospital, Pontoise (France)
  End of term: June 2017
Vice-chairman:
- Dr Philippe VALENTI, hand surgeon at Jouvenet Clinic, Paris (France)
  End of term: June 2017

General Secretaries:
- Dr Sylvain CHAUVAUD, cardiovascular surgeon, Paris (France)
  End of term: June 2017
- Françoise MONARD, senior consultant - End of term: June 2017
Treasurer:
- Emile DINET, SENY Group Deputy General Manager
  End of term: June 2017

Members
- Pr Gérard BABATASI, Chief of Cardiac Surgery at Caen Teaching Hospital, Caen (France)
  End of term: June 2020
- Valérie BERNIS, ENGIE Deputy General Manager
  End of term: June 2020
- Dr Michel CYMES, ENT doctor, Paris (France) - End of term: June 2017
- Gonzague DESFORGES, engineer
  End of term: June 2020
- Philippe DUMAS, General Finance Inspector
  End of term: June 2017
- Denis DUVERNE, AXA Group Non-Executive Director
  End of term: June 2020
- Jean-Claude LAFEUILLE, engineer - End of term: June 2017
- Pr Antoine LAFONT, cardiologist, Paris (France)
  End of term: June 2020
- Jacques MAILLOT, Nouvelles Frontières’ Founding President
  End of term: June 2020
- Sébastien PRAT, lawyer, Paris (France)
  End of term: June 2020
- Dr Xavier RAINGEVAL, anaesthetist, Paris (France)
  End of term: June 2018
- Pr Yann REVILLON, former Chief of Paediatric Surgery at Necker Children’s Hospital, Paris (France)
  End of term: June 2019
LA CHAÎNE DE L’ESPOIR
SPECIALISED COMMITTEES

• Executive Committee
  The Executive Committee’s role is to implement the Board of Directors’ decisions and to guarantee that La Chaîne de l’Espoir missions and activities are carried out properly.
  It consists of the Directors of the Board and the operational directors of La Chaîne de l’Espoir. The Executive Committee meets once a month.

• Financial Committee
  The Financial Committee’s role is to inform the Board of Directors of decisions regarding strategic financial management such as equity capital policies or investment strategies.

• Risk and Internal Audit Committee
  The Risk and Internal Audit Committee is an internal supervisory organ which actively promotes risk prevention and the observance of governance rules.
  Its role is to assess the risks faced by the organisation (risk mapping) and ensures that the efficiency of the organisation’s risk prevention procedures.
  It also guarantees that the organisation complies with governance rules, and implements procedures with adequate management controls and that the company accounts are properly prepared and audited according to regulations.

• Conflicts of interest
  Conflicts of interest with partners and suppliers, and as a component of governance, are managed by compliance with a number of procedures and the implementation of internal control mechanisms to ensure respect of the principle of the segregation of duties. This set of good practices enables La Chaîne to internally address potential conflicts of interest.

• Main measures taken to ensure adequate internal control
  La Chaîne de l’Espoir regularly enlists the help of outside professionals and volunteers to audit its procedures and strategies. The Risk and Internal Oversight Committee is in charge of this supervisory strategy. La Chaîne de l’Espoir also has to account to various external bodies responsible for auditing the sound management of the organisation and its governance policies.
  - The Charter Committee, a monitoring agency, brings together French organisations and foundations all abiding by a series of ethical principles relating to budgetary rigour, account transparency and governance.
  - The IDEAS Label is a recognition of the good level of conformity of La Chaîne de l’Espoir in the field of governance, financial management and effective action based on audits carried out by independent professional experts. IDEAS founders are the Compagnie Nationale des Commissaires aux Comptes, the Conseil Supérieur de l’Ordre des Experts Comptables and the Caisse des Dépôts.
  - Deloitte, an independent statutory auditor, attests to the discipline of our management.

• Assessment of the impact and efficiency of the action of La Chaîne de l’Espoir
  Close contact with the health authorities of the countries concerned by the programmes of La Chaîne de l’Espoir facilitate the assessment of the programmes’ usefulness and efficacy. Prior to the implementation of a programme, several assessment missions are carried out to determine the context, the needs, the number of beneficiaries, the objectives, the actions to be undertaken, the expected outcome, human and material resources, and the viability and sustainability.
  A provisional budget is then drafted. The monitoring and evaluation of the programmes is based on these elements. The indicators are used to measure results. According to them, programmes may be continued and extended, or stopped. If needed, programmes can be assessed by specialised external companies.

Major international institutional donors (ECHO, AFD, OCHA, etc.) control our operations and our management and governance modes, at the head office as well as in the field.

- La Chaîne de l’Espoir may be audited by the Cour des Comptes at any time.

- Dr Dominique TOURNAY, cardiovascular anaesthetist, Paris (France)
  End of term: June 2018
- Paris Hospitals and Public Assistance (represented by Ms Florence Veber, AP/HP Director of International Affairs)
  End of term: June 2021
La Chaîne de l’Espoir relies on a team of salaried employees but also on a substantial network of volunteers including administrators, host families, doctors, paramedical personnel and technicians in France, as well as a network of volunteer doctors, paramedical personnel and technicians for international missions.

NUMBER OF EMPLOYEES AT THE END OF 2016
As of 31 December 2016, La Chaîne de l’Espoir employed 42 full-time equivalent workers.

This is an increase from previous years and indicates La Chaîne de l’Espoir continuing development.

Directly dependent local structures also employ numerous local and expatriate workers:
- Afghanistan branch 22 employees
- Cambodia branch 2 employees
- Iraq branch 10 employees
- Jordan branch 1 employee
- Thailand branch 3 employees
- Togo branch 8 employees
- Senegal Branch 3 employees

When it comes to skills-based sponsorship, 5 employees have been made available to La Chaîne de l’Espoir by their respective employers.

NUMBER AND ROLE OF VOLUNTEERS
In addition to the remarkable work of our 300 host families, La Chaîne de l’Espoir also receives regular volunteer support from hundreds of doctors, nurses and hospital technicians taking part in long or short-term medical missions.

Furthermore, over 200 volunteers in Paris and other French cities contribute their logistical, technical, administrative and financial expertise on a regular basis. They also organise fundraising events.

REMNURATION POLICY WITHIN THE ORGANISATION
Remuneration at La Chaîne de l’Espoir is based on each employee’s professional experience, skills and the nature of their responsibilities.

The organisation has implemented a coherent salary scale and carries out regular assessment interviews with each employee.

Combined, the 3 highest earner’s yearly salaries come to €262,724.

CODE OF ETHICS AND PROFESSIONAL CONDUCT
The Code of Ethics aims at defining and spreading the values and professional conduct, which La Chaîne de l’Espoir undertakes to follow in the course of its activity.

All those working or being in relation with La Chaîne de l’Espoir are subject this Code.

By signing this Code, all the employees have demonstrated their attachment to the humanitarian and ethical principles of La Chaîne de l’Espoir.
Our thanks go to

Treasurer’s Report

page 80

Auditor’s report

page 84

2017 Budget

page 88

Our thanks go to

page 89
Dear Members and Friends of La Chaîne de l’Espoir,

I have the pleasure of presenting you with the 2016 Treasurer’s Report. In 2016, La Chaîne de l’Espoir total resources, including extraordinary items and financial income, amounted to €21,607k. Total expenditure, including financial and exceptional expenses, came to €21,203k.

The result for the year is a surplus of €405k.

2016 numbers are taken from the Income and Expenditure Statement.

INCOME

Overall in 2016, the total income stated on the Income and Expenditure Statement amounted to €21,607k, a decrease of €783k compared to 2015 (-3.5%). In 2015, a non-recurring donation of €5M significantly increased private resources.

I • State Subsidies
State subsidies increased from €1,358K in 2015 to €4,437K in 2015 (+227%). In 2016, La Chaîne de l’Espoir benefitted from a range of institutional subsidies (ECHO, MAE, French Embassy in Afghanistan, ARS, OCHA) for specific projects in Afghanistan, Jordan, Lebanon, Iraqi Kurdistan, Comoros and Central African Republic.

II • Donations from the General Public
Income originating from the general public (excluding legacies) have remained stable (+1%) compared with 2015 at €11,616K (€11,501K in 2015). Fundraising costs have increased by €332K (+12%) due to fundraising campaigns for new regular donors ultimately securing fund-raising from the general public.

The net funds raised (donations from the general public less collection costs) was down 2.5%, from €8,748K to €8,531K. Donations from the general public remain the organisation’s main source of funds (54%).

III • Legacies and Contributions
Legacies and contributions increased by €1,799K compared to 2015 at €3,162K (+132%). Legacies for an amount of €2,521K are still being processed, which indicates a steady increase for that type of income.

IV • Private Partners
Contributions from private partners were down €4,588K (-73%) from the previous year at €1,693K. In 2015, we received a €5,000K grant from a private Foundation to fund the construction of the Centre for Paediatric Cardiology in Dakar. This project was initiated in June 2015 and will be completed in February 2017.

V • Financial Income
Financial income amounted to €138K, up €12K from 2015 (+9.4%), reflecting a dynamic investment policy to compensate for the sustained slump in savings rates.

VI • Reversal of Provision
To hedge the risk related to an outstanding amount for the French Medical Institute for Women and Children in
Kabul, a provision of €101K was recognised at the end of the 2015 fiscal year. This amount having been paid off, the provision was reversed in 2016.

Dedicated funds received in 2015 and unspent during that year have been carried forward for €276K in 2016 income.

**EXPENDITURE**

**I • Current Expenditure**

Operating expenses are stable at 2.8% of total expenditure. Development costs (fundraising, communication, donation management, tax receipts, and data collection) also remain controlled at €4,368K (20.6% of total expenditure).

Current expenses increased by 8.9% from €4,563K in 2015 to €4,969K in 2016 and account for 23.4% of total expenditure.

**II • Social Aid Missions**

Programme expenditures amounted to €11,643K in 2016 and €4,561K secured for future commitments in 2017. In terms of ratios, 76.4% related to operating expenses of which 54.9% were spent on social aid missions in 2016 and account for 21.5% on outstanding commitments.

**III • Provisions**

La Chaîne de l’Espoir, in accordance with prudential accounting, provisioned €30K in relation to a labour court litigation.

**NET INCOME ALLOCATION**

As seen above, the fiscal year shows a surplus of €405K, upon which the Board of Directors agreed and that is proposed to you today. The Board of Directors proposes to the General Meeting to allocate this amount to our non-profit organisation fund. This fund will thus amount to €5,752K, not included the project reserves and funds dedicated to specific actions.

This would allow the organisation to face a decrease in income from fundraising as well as to provide emergency relief assistance if necessary and start new projects awaiting funding.

In 2016, the organisation benefitted from the following non-monetary contributions:

**I • Volunteers**

By processing administrative transactions, we know the exact number of volunteers (surgeons, doctors, nurses, anaesthetists) on La Chaîne de l’Espoir missions.

During 2016, they contributed an estimated 2,903 business days, corresponding to €778K.

**II • Volunteers at the Head Office and in Regional Branches**

There are close to 50 volunteers at the head office (including 22 members of the Board of Directors) and 156 working in regional branches. In 2016, the time contributed by volunteers working for the organisation is estimated at 9,018 business days, equivalent to €1,519K.

**III • Premises**

Paris Hospitals and Public Assistance (Assistance Publique - Hôpitaux de Paris, AP-HP) provides La Chaîne de l’Espoir with 1,212m² of office space at a price far below market value. The savings for 2016 are estimated at €285K.

**IV • Disposable Goods and Medical Equipment**

Up to €181K worth of medical equipment and disposable goods were donated by various hospital facilities and laboratories in 2016.

**V • Advertising Space**

Various advertisers and partners contributed €408K worth of advertising space and other forms of communication (press, radio, TV, documentaries) in 2016.

**VI • Host Families**

The crucial importance of the work carried out by host families who welcome children to France cannot go unrecognised.

They take children into their homes (accommodation, food, activities) and accompany them when they travel (to the airport, hospital consultations, meetings to coordinate with the organisation, etc.).

In 2016, it is estimated that the total value contributed by these volunteers, who welcomed 87 children, amounted to €313K.

**VII • Skills-Based Sponsorship**

Our partners have made 5 employees available to us throughout the year, constituting an in-kind donation of €383K.

The total monetary equivalent of all in-kind voluntary contributions is estimated at €3,066K.

All included, La Chaîne de l’Espoir now has more than €25M at its disposal to carry out its projects.
TREASURER’S REPORT

EVOLUTION OF MANAGEMENT RATIOS
Key figures for 2016:
I - Operating expenses represent 2.8% of all total expenses (including future commitments) in 2016, reflecting our efforts to control operating costs.

II - Fundraising costs, as compared with funds contributed by the general public (including legacies and contributions), come to 20.9% versus 21% in 2015 with a 15.6% increase in net funds contributed.

III - The ratio of fundraising costs relating to the funds (including legacies and donations) contributed by the general public is 20.9%, in line with 2015. The amount collected has increased and net funds contributed are up 15.6%.

BALANCE SHEET
La Chaîne de l’Espoir balance sheet shows a total of €34,721K, up 46% from the previous year. Net position was down 79% (€10,805K in available assets and €8,027K in contingent liabilities) at €2,778K still indicating financial stability and a total absence of financial risk. Equity increased by 2.5%.

BUDGET FOR 2017 FISCAL YEAR
The proposed provisional operating budget amounts to €38,265K, up 77% compared with 2016. Since the construction of phase II of the Kabul hospital and the Dakar Cuomo Centre for Paediatric Cardiology (CCPC) to be completed in 2017, the €9.0M investment subsidy granted by AFD to fund the Kabul project and the €4.8M in locked-in funds for Dakar CCPC will be entirely carried forward in the income statement under both income and expenses.

I • Income
Estimated operational income is €32,850K
- From the General Public: €12,400K are expected. An increase of 8% is estimated, primarily related to a larger number of regular direct debit donors.
- Fundraising from Partners and Sponsors: €6,300K are expected for 2017, up 368% including disposal of fixed assets for €4,800M for the Cuomo Centre for Paediatric Cardiology in Dakar.
- State Subsidies: The 2017 budget amounts to €12,000K, breaking down to €9,000K related to the AFD funding allocated to the construction of the phase II of the FMIC (Kabul) and €3,000K, taking into account recurring support from AFD and the French Embassy in Afghanistan, as well as expected funding for Jordan, Iraqi Kurdistan, Comoros and Burkina Faso.
- Legacies and donations: By their very nature, legacies are difficult to budget; however, this kind of contribution is important for La Chaîne de l’Espoir. In 2017, the estimated budget is €2,000K.
Expenditure
Expenses are estimated at €37,600k. They break down as follows:

- **Treatment of Children in France:** €1,500k, in line with 2016, about 100 children will receive treatment over the year. Children are brought to France from abroad to receive surgical care in Paris, Toulouse, Nantes, Caen, Lyon, Rennes, Nice, Marseille or Bordeaux.

- **Treatment of Children Abroad:** An estimated €30,500k, up 300%. It breaks down as follows:
  - €9,000k to fund the construction of the Mother and Child Centre of the FMIC in Kabul, recognised as income (institutional funds)
  - €4,800k for CCPC in Dakar, recognised as income (private funds)
  - €15,000k for known and listed programmes and missions (Afghanistan, Cambodia, Togo, Senegal, Mali, Jordan, Lebanon, Iraq, Chaîne du Savoir, etc.)
  - €1,700k for Education programmes

- **Head Office Operating Expenses:** €500k. This budget has been increased (+25% compared with 2016). It reflects the general increase in expenses while accounting for less than 2% of total operating expenses.

- **Development:** The estimated budget for 2017 is €5,200k, up 15% to develop and fund our programmes. However, this increase is less significant than the global raise of expenses, thus improving our management ratios.

  This budget breaks down as follows:
  - Direct Marketing: €3,700k
  - Private and Institutional Partnership: €500k
  - Communication: €1,000k

OUTLOOK FOR 2017
Figures established in the first few months of 2017 seem to confirm the budget allocated to the various sectors and approved by the Board of Directors in January.

Fundraising from the general public is stable compared with 2016 and slightly lower than estimated. State and private subsidies are in line with budget.

CONCLUSION
In 2017, La Chaîne de l’Espoir will continue to pursue its established strategies:
- increase regular donations by direct debit
- increase legacies and contributions
- develop sponsorship policies to increase partnerships and collaborative projects
- develop hospital projects with several on-going projects in 2017: completion of the construction of the phase II of the FMIC in Kabul, construction of a Centre for Paediatric Cardiology in Dakar and construction of a Paediatric Surgery Unit at the Luxembourg Mother and Child Hospital in Bamako
- launch emergency relief operations, especially in Iraqi Kurdistan and Jordan

Despite a continuing tense economic situation, the organisation continues to develop its activities, improve its management ratios and diversify its funding.

Lastly, I wish to emphasise once again the importance for the organisation of in-kind donations. They not only have represented a contribution of more than €3.86M but also, and most of all, a driving force for the development of La Chaîne de l’Espoir activities maintaining our spirit of partnership and enhancing our domestic and international reputation.

In this spirit, we would like once again to recognise the remarkable contributions of our host families and our volunteers. We thank them wholeheartedly.

Emile DINET
Treasurer
# AUDITOR’S REPORT

## BALANCE SHEET

<table>
<thead>
<tr>
<th>ASSETS (€)</th>
<th>31/12/16</th>
<th>31/12/15</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fixed assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Concessions, patents, similiar rights</td>
<td>163,975</td>
<td>134,455</td>
</tr>
<tr>
<td>Intangible assets</td>
<td>25,029</td>
<td>25,029</td>
</tr>
<tr>
<td>Constructions</td>
<td>7,753,300</td>
<td>7,753,300</td>
</tr>
<tr>
<td>Other tangible fixed assets</td>
<td>832,208</td>
<td>783,592</td>
</tr>
<tr>
<td>Tangible assets</td>
<td>16,032,200</td>
<td>16,032,200</td>
</tr>
<tr>
<td>Other financial assets</td>
<td>27,750</td>
<td>27,750</td>
</tr>
<tr>
<td><strong>Total Fixed Assets</strong></td>
<td>24,834,462</td>
<td>918,047</td>
</tr>
<tr>
<td><strong>Current assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advances and prepayments on orders</td>
<td>146,995</td>
<td>146,995</td>
</tr>
<tr>
<td>Other liabilities</td>
<td>3,130,127</td>
<td>3,130,127</td>
</tr>
<tr>
<td>Investment securities</td>
<td>2,671,428</td>
<td>22,892</td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
<td>4,473,478</td>
<td>4,473,478</td>
</tr>
<tr>
<td>Prepaid charges</td>
<td>405,848</td>
<td>405,848</td>
</tr>
<tr>
<td><strong>Total Current Assets</strong></td>
<td>10,827,875</td>
<td>22,892</td>
</tr>
<tr>
<td>Foreign exchange gains</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td>35,662,337</td>
<td>940,940</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LIABILITIES (€)</th>
<th>31/12/16</th>
<th>31/12/15</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Non-profit organisation fund</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-profit organisation fund</td>
<td>5,347,487</td>
<td>4,771,529</td>
</tr>
<tr>
<td>Reserve for various projects</td>
<td>1,300,000</td>
<td>800,000</td>
</tr>
<tr>
<td><strong>Fiscal year outcome</strong></td>
<td>404,531</td>
<td>1,075,958</td>
</tr>
<tr>
<td>Investment subsidies</td>
<td>9,453,412</td>
<td>9,449,654</td>
</tr>
<tr>
<td><strong>Total Non-profit organisation funds</strong></td>
<td>16,505,431</td>
<td>16,097,141</td>
</tr>
<tr>
<td><strong>Provisions and dedicated funds</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provisions</td>
<td>247,832</td>
<td>50,000</td>
</tr>
<tr>
<td>Dedicated funds</td>
<td>9,941,336</td>
<td>5,655,925</td>
</tr>
<tr>
<td><strong>Total provisions &amp; dedicated funds</strong></td>
<td>10,189,168</td>
<td>5,705,925</td>
</tr>
<tr>
<td><strong>Debts</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loans and other borrowings</td>
<td>5,500,491</td>
<td>-</td>
</tr>
<tr>
<td>Accounts payable</td>
<td>1,486,768</td>
<td>1,042,816</td>
</tr>
<tr>
<td>Tax and social liabilities</td>
<td>431,977</td>
<td>474,639</td>
</tr>
<tr>
<td>Other</td>
<td>541,112</td>
<td>361,367</td>
</tr>
<tr>
<td>Deferred income</td>
<td>66,452</td>
<td>140,000</td>
</tr>
<tr>
<td><strong>Total Debts</strong></td>
<td>8,026,799</td>
<td>2,018,822</td>
</tr>
<tr>
<td><strong>TOTAL LIABILITIES</strong></td>
<td>34,721,398</td>
<td>23,821,888</td>
</tr>
</tbody>
</table>

Balance sheet and income statement form an indissoluble whole.
## INCOME STATEMENT

(€) | 31/12/16 | 31/12/15
---|---|---
### Operating income
- **Fundraising** | 14,848,129 | 17,536,514
- **Sponsorship income** | 1,625,934 | 1,611,652
- **Other income** | 268,976 | 661,559
- **Operating subsidies** | 4,437,183 | 1,357,765
- **Total (I)** | 21,180,222 | 21,167,489

### Operating expenses
- **Other purchases and external expenses** | 11,560,121 | 11,007,294
- **Taxes** | 213,440 | 203,288
- **Salaries and payroll** | 1,944,277 | 1,779,344
- **Payroll taxes** | 854,113 | 790,398
- **Amortisation** | 25,115 | 27,731
- **Depreciation** | - | 100,674
- **Provisions** | 30,000 | 10,000
- **Other charges** | 1,700,969 | 1,583,657
- **Total (II)** | 16,388,036 | 15,502,386

### Operating surplus/(deficit) (I) – (II) = (III)
- | 4,792,186 | 5,665,103

### Financial income
- **Other interest and similar income** | 103,909 | 110,379
- **Release of provision** | 22,177 | -
- **Foreign exchange gains** | 12,165 | 15,616
- **Net income on disposal of investments and loans** | - | 428
- **Total (IV)** | 138,251 | 126,423

### Financial expenses
- **Provisions for depreciation** | - | 45,069
- **Interest payable and similar income** | 23,391 | 22,337
- **Foreign exchange losses** | 6,992 | 13,441
- **Total (V)** | 30,383 | 80,847

### Financial surplus/(deficit) (IV) – (V) = (VI)
- | 107,868 | 45,577

### Current surplus/(deficit) (III) + (VI) = (VII)
- | 4,900,055 | 5,710,680

### Non-recurring income
- **On management operations** | 13,041 | 30,946
- **On capital transactions** | - | 500
- **Total (VIII)** | 13,041 | 31,446

### Non-recurring expenses
- **On management operations** | 54,063 | 56,852
- **On capital transactions** | - | 13,986
- **Depreciations & provisions** | 167,832 | -
- **Total (IX)** | 221,895 | 70,838

### Non-recurring surplus/(deficit) (VIII) – (IX)= (X)
- | (208,854) | (39,392)

### Unused funds carry-forward from previous years
- | 275,752 | 1,064,950

### Projected use of allocated funds
- | (4,561,163) | (5,655,925)

### Income taxes
- | 1,258 | 4,355

### TOTAL INCOME
- | 21,607,266 | 22,390,308

### TOTAL EXPENSES
- | 21,202,735 | 21,314,350

### SURPLUS/(DEFICIT)
- | 404,531 | 1,075,958
INCOME STATEMENT

(€) 31/12/16  31/12/15

<table>
<thead>
<tr>
<th>VOLUNTARY IN-KIND CONTRIBUTIONS</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Volunteers</td>
<td>2,992,980</td>
<td>3,271,870</td>
</tr>
<tr>
<td>In-kind donations (services)</td>
<td>407,584</td>
<td>95,259</td>
</tr>
<tr>
<td>In-kind donations (goods)</td>
<td>465,352</td>
<td>456,068</td>
</tr>
<tr>
<td>Total voluntary contributions in kind</td>
<td>3,865,916</td>
<td>3,823,197</td>
</tr>
<tr>
<td><strong>Expenses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social aid missions</td>
<td>1,271,382</td>
<td>1,536,448</td>
</tr>
<tr>
<td>Fund-raising related costs</td>
<td>1,466,584</td>
<td>1,302,009</td>
</tr>
<tr>
<td>Operational costs and others</td>
<td>1,127,950</td>
<td>984,740</td>
</tr>
<tr>
<td>Total voluntary contributions in kind</td>
<td>3,865,916</td>
<td>3,823,197</td>
</tr>
</tbody>
</table>

Balance sheet and income statement form an indissoluble whole.
<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Voluntary Contributions</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income</td>
<td>2,992,980</td>
<td>3,271,870</td>
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</tr>
<tr>
<td><strong>Expenses</strong></td>
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<td></td>
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<tr>
<td>Operational costs and others</td>
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<td>984,740</td>
</tr>
<tr>
<td><strong>Total voluntary contributions in kind</strong></td>
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<td><strong>3,823,197</strong></td>
</tr>
</tbody>
</table>
## 2017 BUDGET

### EXPENDITURE (k€) 2017

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme expenses</td>
<td>32,000</td>
</tr>
<tr>
<td>Treatment of Children in France</td>
<td>1,500</td>
</tr>
<tr>
<td>Treatment of Children Abroad</td>
<td>15,000</td>
</tr>
<tr>
<td>FMIC PHASE II Kabul + CCPC</td>
<td>13,800</td>
</tr>
<tr>
<td>Education</td>
<td>1,700</td>
</tr>
<tr>
<td><strong>Current expenses</strong></td>
<td>5,700</td>
</tr>
<tr>
<td>Operating Expenses</td>
<td>500</td>
</tr>
<tr>
<td>Development</td>
<td>5,200</td>
</tr>
<tr>
<td>Direct Marketing</td>
<td>3,700</td>
</tr>
<tr>
<td>Communication</td>
<td>1,000</td>
</tr>
<tr>
<td>Partnership</td>
<td>500</td>
</tr>
<tr>
<td><strong>Provisions</strong></td>
<td>100</td>
</tr>
<tr>
<td>Provisions for Healthcare</td>
<td>-</td>
</tr>
<tr>
<td>Provisions for Education</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total operating expenses</strong></td>
<td>37,800</td>
</tr>
</tbody>
</table>

### INCOME (k€) 2017

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current income</td>
<td>32,850</td>
</tr>
<tr>
<td>General Public Fundraising</td>
<td>12,400</td>
</tr>
<tr>
<td>One-off Donations</td>
<td>4,600</td>
</tr>
<tr>
<td>Regular Donations (automatic debit)</td>
<td>5,100</td>
</tr>
<tr>
<td>Online Donations</td>
<td>600</td>
</tr>
<tr>
<td>Sponsors</td>
<td>1,600</td>
</tr>
<tr>
<td>Other Donations (events, etc.)</td>
<td>500</td>
</tr>
<tr>
<td>Private Partners</td>
<td>1,500</td>
</tr>
<tr>
<td>CCPC</td>
<td>4,800</td>
</tr>
<tr>
<td>Legacies and Contributions</td>
<td>2,000</td>
</tr>
<tr>
<td>State Subsidies</td>
<td>3,000</td>
</tr>
<tr>
<td>FMIC PHASE II Kabul</td>
<td>9,000</td>
</tr>
<tr>
<td><strong>Other Income</strong></td>
<td>150</td>
</tr>
<tr>
<td>Reversal of provisions &amp; transfer of expenses</td>
<td>5,415</td>
</tr>
<tr>
<td>Reversal of healthcare provisions</td>
<td>5,157</td>
</tr>
<tr>
<td>Reversal of education provisions</td>
<td>258</td>
</tr>
<tr>
<td><strong>Total operating income</strong></td>
<td>38,265</td>
</tr>
<tr>
<td>Surplus</td>
<td>465</td>
</tr>
</tbody>
</table>
ECHO has provided some financial aid to more than 200 partner NGOs. In 2013, La Chaîne de l’Espoir joined this network of European NGOs and signed the Framework Partnership Agreement (FPA), renewed in 2014. Since the partnership’s finalisation, the ECHO financial contribution to the projects of La Chaîne de l’Espoir amounted to €4,450,000 over the 2014-2016 period. In 2016, €2,150 in ECHO subsidies co-financed projects to fight malnutrition in the Central African Republic and Mali, as well as projects to provide access to health care and medico-surgical services for refugees in Jordan and Iraq.

MINISTRY OF FOREIGN AFFAIRS AND INTERNATIONAL DEVELOPMENT
The Ministry of Foreign Affairs and International Development is committed to act for peace, security and Human Rights worldwide. Today, it is one of the largest funding partner of La Chaîne de l’Espoir. Since 2005, its financial support to the projects of La Chaîne de l’Espoir through its different services of international cooperation and development assistance (previously DG-CiD, CDCS, SCAC, FSD of embassies) amounts to €9,431,353. Various embassies (Haiti, Senegal, Cambodia, Afghanistan) contributed €7,274,005 while €2,157,348 was provided by DG-CiD and CDCS.

• The French embassy in Afghanistan
Since 2007, it has allocated €6,872,616 to projects to reinforce Afghan human resource capacities at the French Medical Institute for Children (FMIC). The embassy also finances access to medical and surgical care for destitute children as part of the quadripartite partnership signed in 2006 between La Chaîne de l’Espoir, FMIC, the French government and the Afghan government. In 2016, the French embassy contributed €1,270,000 to the Afghanistan programme.

• The Crisis and Support centre/Dg-CiD
It helped funding projects in Afghanistan, Iraq, Lebanon, Haiti and Iran for €2,157,348 (2010-2016). In 2016, €650,000 was raised to finance the surgery care programme of Syrian refugee children and disadvantaged Lebanese children with orthopaedic pathologies in Lebanon, and the surgical emergency programme in war zones in Iraq.

AGENCE FRANÇAISE DE DEVELOPPEMENT – AFD
In 2016, AFD continued to support La Chaîne de l’Espoir for the ninth year running. The aid provided has contributed to the opening of the maternity of the French Medical Institute for Mothers & Children and the start of its operations.
OUR THANKS GO TO

PARTNERS

PRIVATE COMPANIES/MEDIA

FOUNDATIONS AND CORPORATE FOUNDATIONS
Axa Atout Cœur, Children of Africa, Fondation CMA CGM, Fondation Crescendo, Fondation Cuomo, Fondation Deerfield, Fondation de France, Fondation Engie, Fonds Initiatives Suez, Fondation Orange, Fondation PSA Peugeot Citroën, Fondation Siemens, Fondation Thierry

INSTITUTIONS
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Bernard Magrez SAS supports the school enrolment and psychosocial support programme for thousands of children from Buriram in Thailand in a position of extreme economic and social vulnerability.

In 2016, 43 children from the “House of Hope” orphanage have been taken care of, 1,671 children enrolled in the programme have benefited from dental care and between 63 and 80 children have been awarded scholarships.

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Since 1997, the Clarins Award for Children’s Rights has been rewarding “big-hearted” women, among whom two public figures dear to La Chaîne de l’Espoir: Mireille Darc and Marine Jacobemin.

Thanks to the awards attributed in 2002 and 2006, 130 Cambodian children have received surgery in Phnom Penh and hundreds of Afghan children have been treated in Kabul. Clarins also finances child surgeries at the Cuomo Centre for Paediatric Cardiology (CCPC) in Dakar since 2015.
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