Annual Report
2014
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The memory of first days of 2015 will remain with us for a long time to come. As a La Chaîne de l’Esper nurse, newly returned from Kabul, recounted to use how she had spent the previous night in that war-torn country at the bedside of a child with heart disease, we learned of the horrible events that had struck us right here in the heart of Paris.

Following the initial shock, we began to contemplate our work and to realise that even though La Chaîne de l’Espoir’s mission is grounded in generosity and empathy, within the context of the North-South divide, many of the counties in which we intervene are also places where we can become targets for individuals who feel oppressed and hold us responsible because we represent the Occident and the values it symbolises.

Moreover, in 2014, we had already been forced to cancel multiple missions for security reasons, as a result of the terrorist acts that shook our country. We were abruptly reminded of the realities which forced us to reflect and call into question our mission and our commitment.

Ultimately, these events brought us face to face with our convictions and strengthened our resolve to act, while of course taking all possible precautions to ensure, as always, that our representatives working abroad respect the laws of these countries, the people as well as their beliefs and customs.

Yes, we must continue our activity. After all, our reason for being is, first and foremost, to go where people are suffering. Driven by great compassion and the spirit of sharing, neither fear nor threat will ever undermine these convictions or drive us from the path we have chosen.

Through the symbolic value of our work, which is just as important as the medical work itself, we participate in the North-South divide dialogue. This critical exchange, within the context of which medicine is a formidable weapon for peace, is a way to combat prejudice originating in the inequality of birth place and the injustices that arise from crisis and conflict. We defend our vision and humanitarian convictions around the world. This motivates us to reach out to others, even those who potentially see us as enemies.

In addition, this same conviction, driving our need to share medical knowledge, finally gave birth to La Chaîne de Savoir in 2014. This will increase the impact of our projects with international colleagues through the use of digital technology.

Furthermore, over the last few months Chaîne de l’Espoir/Chain of Hope – Europe’s success has reinforced our network by greatly increasing our ability to intervene abroad, specifically in countries where alarming medical situations are synonymous with danger and fear.

Adversity often drives us to discover our true nature. These recent challenges demonstrate more than ever that we must stand together in solidarity.

Thank you all from the bottom of our hearts!

Dr Eric Cheysson
President of La Chaîne de l’Esper
Our projects

OUR VISION

All over the world millions of children are condemned to a life without education or healthcare. Driven by the conviction that it is impossible to ignore their suffering or abandon them to their fate, Professor Alain Deloche decided to embark on a unique humanitarian adventure— an alliance made strong by generosity, know-how and passion which would assemble a group of big hearted men and women, full of good will, ready each and every day to rise to life’s many challenges.

La Chaîne de l’Espoir, founded in 1994 in accordance with the 1901 French law governing non-profit organisations, is currently presided over 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 which aim to provide the most destitute children, their families and communities access to healthcare and education.

OUR MISSION

- To treat children and mothers in France or abroad who cannot be cared for in their own countries due to a lack of funding, technology or specialised skills
- To provide on-site medical personnel with the specialised training they need to respond to a variety of illnesses
- To supply countries with insufficient healthcare facilities with medical technology, equipment and disposable goods
- To promote the development of specialised hospital facilities suited to local needs
- To contribute to providing medical and surgical care to women and children living in precarious circumstances
- To provide humanitarian assistance in the event of war or a natural disaster
- To combat starvation and malnutrition
- To offer medical assistance to disadvantaged populations, primarily mothers and children, by supplying them with medications and health and nutrition products abroad
- To promote the education of at-risk women and children
- To participate in the defence of women’s and children’s rights
- To relieve human suffering by any possible means
- To support or participate in medical research projects and publications with the objective of improving or developing diagnostic methods and effective treatments
- To engage in all fundraising related activities which allow La Chaîne de l’Espoir to fund projects corresponding with its objectives.

OUR APPROACH

To fulfil these missions, La Chaîne de l’Espoir calls on the generosity of the public and relies on funds from private donors, institutions and partners.

This is our approach:
- To collaborate with international organisations, governments and other local authorities as well as public and private organisations in France and in countries of intervention
- To pursue projects in partnership with all other organisations or associations with similar objectives to our own in France and abroad
- To organise informational campaigns either for fundraising purposes or to heighten public awareness of the needs of children in distress
- To produce audio-visual educational and informative general interest programming, to publish materials and books and to organise conferences, seminars and training programmes
- To encourage the founding of organisations in other countries which share our 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 principals in these “affiliate organisations”
- To relay projects in France and abroad to local groups, “regional branches”
- To enlist the assistance of host families who take responsibility for housing children transferred to and treated in France for the length of their stay.
OUR VALUES

La Chaîne de l’Espoir values its donor’s confidence and is careful to offer them total managerial transparency. We hold ourselves responsible and accountable to those who chose to donate and refuse to use any fundraising methods which, through word or image, could threaten the dignity of an individual or fail to respect their belief system.

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

La Chaîne de l’Espoir provides its employees with a contract in full compliance with the relevant social legislation in the country in question, irrespective of race, nationality, sex or religion. We ensure that our representatives abroad respect the laws, inhabitants, beliefs and customs of the country in which they are working. Likewise, volunteers commit to the organisation’s ethical code and their profession’s ethical principles.

Lastly, La Chaîne de l’Espoir takes advantage of every opportunity to foster close relationships with the populations of the countries in which it works and reaffirms that its actions and methods are in accordance with its values.

OUR GUARANTEES

- To clearly indicate the destination of funds donated by the general public
- To use funds solely for the intended purpose within a reasonable period of time
- To inform donors of any potential alternative appropriation of funds within the context of projects sanctioned by the organisation
- To provide donors with an annual report of the organisation’s accounts, audited by an external auditor who must indicate in a clear and concise manner: the quantity of funds received, their use and the portion consecrated to the intended cause or project..

La Chaîne de l’Espoir is a member of the Comité de la Charte du don en confiance, an institution certifying the ethical behaviour of social and humanitarian organisations which appeal to public generosity. We also received the IDEAS Label (Institute for the Developments of Ethics and Action for Solidarity) in 2012 which attests to the quality and transparency of an organisation’s governance, financial management and the efficacy of its projects. Lastly, in February 2014, La Chaîne de l’Espoir became the first European NGO to receive an Excellence Award from the European Foundation for Quality Management. This accreditation, synonymous with excellence and professionalism, evaluates an organisation’s efficacy based on the following criteria: strategy, leadership, human capital, and, of course, results.
Key facts & figures

BUDGET: €19M

- 168 international missions
- Over 100,000 children benefited from our healthcare programmes
- Over 500 volunteers (doctors, nurses, hospital technicians, host families, head office and branch personnel)
- Nearly 5,000 children underwent surgery
- Nearly 11,000 children benefited from our education programmes

La Chaîne de l’Espoir celebrated its 20 years

Chaîne de l’Espoir
Chain of Hope
Europe founded

Creation of an endowment fund,
La Chaîne du Savoir
(The Chain of Knowledge)

Afghanistan
The foundation stone was laid for the New Afghan Children’s House in Kabul.

Burkina Faso
A facial plastic and reconstructive surgery programme was launched primarily to care for child victims of noma.

Cambodge
The Centre for Neurosciences of Phnom Penh was inaugurated.

Senegal
The Paediatric Heart Institute in Dakar project feasibility study was approved and the Cuomo Foundation committed to fund its construction.
2014 Achievements

Healthcare for children in France

Humanitarian assistance

Missions abroad
Healthcare for children in France

Twenty years ago, La Chaîne de l’Espoir was founded in order to transfer children to France for surgical treatments which were unavailable in their countries of origin due to a lack of hospital facilities and specialised medical training.

Today, even though our other healthcare programmes have developed and been extended to numerous other countries, the Healthcare for Children in France Programme is still very much a part of our mission and remains an asset to the many children from underdeveloped countries who lack access to the surgical care they need. We would like to thank our devoted host families without whom, this programme would not be possible.

2014: 89 CHILDREN TREATED

In 2014 La Chaîne de l’Espoir transferred 89 children to France for surgery, 87 of whom were from African countries, mostly Congo-Brazzaville, Madagascar and Mali. La Chaîne de l’Espoir also transferred 2 children suffering from serious war related injuries from Iraqi Kurdistan to France.

77 children underwent surgery for heart disease and 12 others had conditions calling for orthopaedic operations. Of the 89 children we transferred, 43 were welcomed by our regional branches in: Bordeaux, Lyon, Marseille, Nantes, Nice-Monaco, Rennes and Toulouse.

FUNDING:
General public fundraising/Private partnerships/Partnerships with public and private institutions
Healthcare for children in France
Humanitarian Medical Aid

ASSISTANCE PROGRAMME FOR SYRIAN REFUGEE CHILDREN

Since March 2011, more than 3 million people have fled Syria, including a large number of woman and children. The vast majority of these refugees end up in Jordan (600,000) or Lebanon (over 1 million) where they live in extremely precarious conditions.

1- The Orthopaedic Surgery Programme
In response to a request made by the Unified Medical Syrian Bureau (UMSB), a network of Syrian refugee doctors in Jordan, La Chaîne de l’Espoir mobilised in 2012 to come to the aid of child refugees who are direct victims of the conflict, suffering from injuries and trauma requiring treatment. From November 2012 to May 2014, 7 surgical missions were carried out benefiting around 100 children. In 2013, 9 children were transferred to France for treatment.

The Orthopaedic Surgery Programme continued in 2014 with a surgical mission in February at Dar Al-Salam Hospital under the direction of Dr Philippe Valenti (36 consultations and 16 interventions). A consultation mission was led by Dr Jean-François Mallet in May in order to lay the groundwork for later missions. 87 patients were examined and around 40 were selected for surgical treatment. Other missions were scheduled but had to be postponed as Dar Al-Salam Hospital was no longer able to accommodate aid workers. Given the situation, we cannot hope for an improvement in the standard of living for refugees, especially children. La Chaîne de l’Espoir intends to continue this programme in 2015 as soon as a new hospital facility has been chosen.

Funding for the Orthopaedic Surgery Programme in 2014:
La Chaîne de l’Espoir

2 - The Cardiac Surgery Programme
Since January 2014, La Chaîne de l’Espoir has also mobilised on behalf of refugee children with heart disease and, for financial reasons, no access to healthcare. This medical and surgical assistance programme has been put in place in both Jordan and Lebanon.

- Jordan
La Chaîne de l’Espoir sent an exploratory mission in January 2014 to evaluate the needs of refugee children with heart disease in Jordan. An agreement was struck with Istitchari Hospital, a fully equipped private facility in Amman, to carry out surgical missions at preferential rates. 26 consultations took place and 7 children were selected for surgery on the first surgical mission. Dr Sylvain Chauvaud led this mission in May 2014. The UMSB
organised consultations with new patients and appointments with the children who had been previously selected. Of the 40 consultations, 12 children received follow-up care in the form of an intervention.

The second mission, which should have taken place in October 2014, was cancelled due to Istichari Hospital’s board’s decision to substantially increase the cost of interventions. Since, La Chaîne de l’Espoir has made an agreement with Garden’s Hospital, also in Amman, to carry out a surgical mission in March 2015 at a more reasonable price. About 15 children will be operated on.

It should be noted that La Chaîne de l’Espoir’s project to assist refugee children in Jordan received the full support of Dr Ali Hyasat, Minister of Public Health; Dr Hashem Abu Hassan, President of the General Medical Council; as well as Her Excellency Madame Caroline Dumas, the French Ambassador.

**Lebanon**

It was in Beirut in January 2014, on a mission to transfer Iraqi children with heart disease to Hôtel-Dieu de France (a private university hospital), as part of the Healthcare for Children in France Programme, that La Chaîne de l’Espoir was confronted with the seriousness of the situation facing Syrian refugee children with heart disease who, for financial reasons, do not have access to the care they need. It was decided to take responsibility for their medical and surgical costs. An agreement to that effect was signed with Heartbeat – La Chaîne de l’Espoir Lebanon on January 30th, 2014.

This programme, which was launched in February 2014, provided 32 children suffering from congenital illnesses, some very complex, with surgical care.

Due to reduced funding in 2015, La Chaîne de l’Espoir will focus its efforts on organising a single surgical mission to Jordan and on funding children’s operations at Hôtel-Dieu de France in Beirut.

Funding for the Cardiac Surgery Programme in 2014:
The Total Foundation, Total E&P Syria, European Heart for Children.
Mali, the second largest West African country, is located in the Sahel. It is two-thirds desert and has a population of over 15 million. Malaria, the leading cause of death, is the cause of 36% of medical consultations, with 90% of the population living in high risk areas. In addition, the high rate of malnutrition results in a state of chronic emergency. Despite the efforts and progress made by public authorities, Mali has the second highest mortality rate of children under the age of 5 in the world with 178 deaths per 1,000 children (according to WHO 2012 World Health Statistics). The World Food Programme estimates that 1.9 million inhabitants face food insecurity during the lean season (the period of time between when the previous year's stored crops run out and the harvest), which provokes food shortages and speculation. The Koulikoro Region, in the south of Mali, is a particularly vulnerable area.

In 2014, La Chaîne de l’Espoir developed a project in partnership with fellow NGOs, ALIMA and Alliance Médicale Contre le Paludisme (The Medical Alliance against Malaria) to reduce malnutrition in the Koulikoro Region. This 12-month project, financed in its entirety by ECHO, had a budget of 2.3 million euros. It was designed to reduce child mortality and illnesses linked to malnutrition (dysentery, malaria, respiratory infections, etc.) and to reinforce the quality of medical and nutritional care.

These activities served 200,000 children, 98% under the age of 5, in 6 districts in the region, Kangaba, Kolokani, Ouélessébougou, Dioïla, Koulikoro and Fana.

2014 Activity

La Chaîne de l’Espoir lent its medical expertise to this programme by organising 2 training missions for medical personnel responsible for intensive care in healthcare centres in the Koulikoro Region.

The provision for quality medical and nutritional care for children under 5 years of age in 6 districts was based on active and passive screening for severe acute malnutrition and linked illnesses, treatment of complications as well as planning and oversight of medical and nutritional activities.

Outlook

ALIMA and Alliance Médicale Contre le Paludisme have begun the evaluation phase of the project in order to determine which centres are imperative to the continuation of the project. Following this evaluation, we will consider the importance of La Chaîne de l’Espoir’s further involvement in this project.
Humanitarian Medical Aid
The political and security situations in Afghanistan remain precarious. 2014 was marked by the organisation of nationwide presidential and provincial elections as well as negotiations and preparations for the withdrawal of NATO troops, which was achieved in December.

This political instability, which took hold pending the appointment of a new government despite the new president having been inaugurated at the end of September, was accompanied by waves of violence and unprecedented combat in the provinces as well as Kabul. 2014 has proved to be the most violent year since the beginning of the conflict with the number of victims up 22% from the previous year according to the UN (10,548 victims, 3,699 deaths including 714 children).

Since the beginning of the year, attacks targeting Western interests have increased in Kabul making it necessary for expatriates to limit their movement. The last quarter was marked by an increase in insurgent activity including an attack on the French Culture Institute; schools and healthcare providers supported by outsiders are no safer from violence (the attack on the Indian Apollo Hospital, the destruction of part of one of EMERGENCY’s hospital, etc.). All over the country dozens of humanitarian workers, and specifically healthcare workers, have been killed.

These factors have naturally had repercussions for La Chaîne de l’Espoir and our partners. Nevertheless, we have achieved our principal objectives: to send missions regardless of increased difficulty, to maintain the transport of children from the provinces, to advance construction of the Mother and Child Centre at the French Medical Institute for Children (FMIC), to open new medical units and to complete all studies and preparatory work for the construction of the New Afghan Children’s House, remaining undeterred by the inefficiency of local bureaucracy.

La Chaîne de l’Espoir at the FMIC, 2014

In 2014, all La Chaîne de l’Espoir’s medical, surgical and training projects at the French Medical Institute for Children aimed to establish a foundation of basic knowledge and reinforce the medical and paramedical teams’ skills. The objective was to prepare for a succession of leadership and, through the introduction of new technologies, to allow Afghans to practice modern medicine as well as to guarantee access to quality care to children from disadvantaged families living in Kabul and the provinces.

This programme, aimed at reinforcing capabilities, evolves each year and poses numerous challenges in the form of responding to new needs: specialised training, strengthening medical and paramedical techniques and opening new units to increase the treatments offered.

To this end, La Chaîne de l’Espoir organised 32 medical missions, including 27 volunteers, in 2014. The ongoing support and training for FMIC teams was overseen by 5 medical and paramedical expatriate staff members over the course of 16 long-term missions (between 3 and 12 months). 16 specialised missions were organised (anaesthesiology, cardiac surgery, ENT surgery, orthopaedic surgery, general surgery, neurosurgery, respiratory medicine), allowing 265 children to be operated on over the course of these missions.

2014 MEDICAL ACTIVITY

- 96,010 consultations
- 5,450 hospitalisations:
  - 2,568 medical
  - 2,882 surgical
- 296,640 laboratory tests
- 51,506 medical imaging examinations (MRI, body scans, ultrasounds, x-rays, etc.)
3 technical missions took place to perform maintenance related tasks and install new equipment.

Due to security concerns, certain missions were cancelled and video-conferences were organised in their stead.

Our strengths in 2014

• New Medical and Surgical Units

1. An Adult Cardiology Unit. Adult cardiac surgery is currently under-developed in Afghanistan which means millions of sick patients do not have access to the vital care they need. La Chaîne de l’Espoir and our partners, the FMIC and the Aga Khan Development Network (AKDN), decided to open a cardiac surgery unit for adults as well as an interventional cardiology space, which will also serve children. Thanks to La Chaîne de l’Espoir’s teams’ strong commitment, investment and hard work over the course of the year, this unit will be operational in 2015.

2. An Ophthalmology Unit. Open to children and adults, this unit provides diagnosis and treatment as well as administering drug therapy. It also fits patients with customised eyeglasses.

3. A Dental Practice. The dental practice provides check-ups and the necessary treatments to avoid complications which can arise before a child’s surgery.

If left untreated, dental infections can lead to the spread of bacteria through blood vessels sometimes resulting in the degradation of cardiac valves, a potentially life-threatening situation. This practice is also open to adults.

• Post Graduate Medical Education

The Post Graduate Medical Education Programme (PGME), which began in 2012, is a reflection of the FMIC and its partners’ desire to train the next generation of Afghan medical personnel in compliance with the Ministry of Public Health’s standards. La Chaîne de l’Espoir contributes to the development of this programme by offering theoretical training sessions on its missions or via video-conferencing.

35 residents in 7 specialities including, paediatrics, paediatric surgery, anaesthesiology, medical biology, cardiology, orthopaedics, and radiology are currently enrolled in PGME. The first graduates will receive their diplomas starting in 2016 after completing the 5-year programme.

• The FMIC’s 4th Paediatric Conference

The 4th International Paediatric Conference took place on October 23rd and 24th, 2014. Dr Sylvian Chauvaud, a La Chaîne de l’Espoir cardiac surgeon, was the keynote speaker.

Of the 50 presentations given on the topic of reinforcing healthcare sector education in countries in transition, over half were given by PGME residents.

• The Welfare Programme

Welfare is a solidarity programme to cover, in full or in part, fees linked to treatment of children whose families lack financial resources. This includes, consultation (medical, surgical and emergency), testing (scans, MRI, laboratory tests), hospitalisation, surgical intervention, medical treatment and post-operative follow-up.

In 2014, 84% of hospitalised children and 11% of out-patients were covered, in part or in full, by Welfare.
The FMIC’s Mother and Child Centre

The construction of a new building devoted to obstetrics, gynaecology and neonatology began in May 2013. This project, which includes construction and equipment as well as personnel recruiting and training, is supported by all the FMIC’s partners: AFD, La Chaîne de l’Espoir, Aga Khan Development Network and the French Embassy in Kabul’s development department.

**2014 Progress**

By the end of 2014, more than 80% of the main structure had been built and construction will continue in 2015. Unfortunately, work on the second structure is behind schedule and will postpone the Mother and Child Centre’s opening to the first quarter of 2016.

Simultaneously, a multidisciplinary medical team, made up of specialists in gynaecology, obstetrics and neonatology, is working on defining a complete medical project in accordance with national laws and Afghan culture. It is also recruiting and training personnel who will make up the future 200-person team at the new facility.

To this end, La Chaîne de l’Espoir organised multiple teleconferences in 2014 as well as 2 missions to develop a local professional network in contact with other healthcare facilities and treatment centres in Kabul (hospitals, maternity wards, blood banks, NGOs, etc.).

In 2015, the priorities will remain the same: medical training in Kabul (theoretical and practical hands-on) and in France (internships), a deepening partnership with the Kabul Medical University as well as forming partnership agreements with public and private Afghan medical establishments. La Chaîne de l’Espoir’s missions will continue with these objectives in mind until the opening of the Mother and Child Centre.

**SPECIALITY:** Paediatric Medicine - Specialised Paediatric Surgery (cardiac, general, ENT, orthopaedic, reconstructive, neuro) - Obstetrics and Gynaecology, Neonatology

**PROGRAMME DIRECTORS:** Dr Eric Cheysson (surgeon, France) - Dr Alexander Leis (paediatrician, Afghanistan)

**LOCATION:** Kabul - The French Medical Institute for Children (FMIC)

**FUNDING:** La Chaîne de l’Espoir/Agence Française de Développement (French Agency for Development - AFD)/French Embassy in Kabul/Private partners
The Afghan Children’s House was conceived of to respond to the needs of children from the Afghan provinces without the financial resources to access the treatments offered by the French Medical Institute for Children (FMIC). The children’s medical and surgical costs, as well as pre and post-operative accommodation during their stay in Kabul, are 100% covered. Parents who accompany their children are also accommodated. To date, close to 4,000 children have benefited from this facility which relies on a multidisciplinary team, a guest house, a network of public and private partners (Ministry of Health, International Committee of the Red Cross, NGOs, hospitals, etc.) and the FMIC’s experience.

To better comprehend how this facility functions, it is necessary to understand that each of these children will reside at the Children’s House on multiple occasions. The illnesses from which these children suffer require that they return repeatedly for consultations, tests, analysis, treatment and second, or even third, surgeries.

Statistics show that, on average, children return upwards of 6 times for check-ups and undergo a minimum of 2 surgeries. Each month, children who have been treated in previous months and years return for further treatment or follow-up. These children are joined by new arrivals, signed up for the first time by the team at the Children’s House, resulting in about 380 stays per month.

2014 Beneficiaries

In 2014, there were 4,700 stays at the Children’s House, 837 of which were new patients registered for the first time.

The Children’s House funded 6,296 consultations and 1,075 interventions and therapeutic procedures representing all the specialties (cardiac, ENT, orthopaedics, general, and neuro). Complex orthopaedic illnesses remain in the majority (76% of interventions).

The New Afghan Children’s House

With almost 5,000 stays per year, the Children’s House’s capacity to accommodate patients has been exceeded. The process of building a new house has been underway since 2011 progressing, in 2014, with the signature of an agreement between La Chaîne de l’Espoir and the Aga Khan Development Network to make the 1,800 square meter lot adjacent to the FMIC available for construction.

In addition to more children, the New Children’s House will also accommodate disadvantaged women, young mothers and their newborns in need of the treatments provided by the Mother and Child Centre.

The architectural plan was overseen by a La Chaîne de l’Espoir team in the period leading up to the call for tender documents, thus opening the bidding process in 2015 to construction companies who presented detailed plans of execution before beginning the construction process. Studies have taken into account Afghan construction norms as well as the materials in use in and around Kabul.

The first stone was laid on August 10th, 2014 by Dr Eric Cheysson, La Chaîne de l’Espoir’s President, in the presence of Her Excellency Madame Maurice Gourdault-Montagne, the French Ambassador; Madame Mawani, Aga Khan’s diplomatic representative and representatives from the Afghan Ministries of Health and Economy & Finance.

**Activity:** Healthcare for sick and underprivileged children from the provinces

**Programme Director:** Kate ROWLANDS (Afghanistan)

**Location:** Kabul - The Afghan Children’s House

**Funding:** La Chaîne de l’Espoir/Agence Française de Développement (French Agency for Development - AFD)/French Embassy in Kabul/Private partners
Afghanistan

EDUCATION AID

The education of girls is at the heart of all the Afghanistan – Back to School Programme’s activities. The instruction of young girls is an important issue not only for the individual but also for future generations; the education of mothers plays a key role in the education and health of their children.

Since 2008, La Chaîne de l’Espoir has been working actively to promote education for young girls in the Panjshir Province. In response to the poor state of schools and their insufficient number, a programme was developed to guarantee children access to an equitable learning environment.

This programme has, to date, renovated 4 schools and built a fifth in several different districts in the Panjshir Province. In these 5 schools, sustainable education assistance has also been put in place to benefit the disadvantaged young Afghan girls who are educated there.

2014 Activity

In 2014, a few more than 1,000 pupils received school bags, school supplies, shoes and uniforms. This material support is renewed each year and is essential to encouraging and perpetuating the education of these children who are made especially vulnerable by poverty.

Beginning in 2013 and ending in 2014, literacy classes for pupils’ mothers took place in 2 villages in the vicinity of one of the sponsored schools, benefitting around 100 women.

Clean water was made available in one of the schools to kick-off a healthcare assistance initiative.

In 2015, La Chaîne de l’Espoir intends to continue supporting education and reinforce its activity by increasing the quality of education in its schools.

ACTIVITY: Afghanistan – Back to School - Education Aid
PROGRAMME DIRECTORS: Sophie ROLLIN (France) - Kate ROWLANDS - Najibullah SAMADI (Afghanistan)
LOCATION: Panjshir Province
FUNDING: La Chaîne de l’Espoir
The Postdoctoral Diploma of Paediatric Surgery is intended to train competent paediatric surgeons to combat common and more complex illnesses in newborns, children and adolescents. In French West Africa, only 3 countries offer a diploma of this kind with the recognition of the African and Malagasy Council for Higher Education (CAMES), Ivory Coast (1992), Senegal (2010) and Togo (2012).

Since 2009, The West African Health Organisation (WAHO) has coordinated with CAMES to standardise these postdoctoral programmes, within the context of the Economic Community of West African States (ECOWAS), in order to improve their quality and content. The process’ objective is to increase specialists’ mobility and receive the WAHO’s accreditation.

At the request of Professor Hubert Tekou, chief of paediatric surgery at Sylvanus Olympio University Hospital in Lomé, La Chaîne de l’Espoir has been sharing its expertise with doctors in the Postdoctoral Diploma of Paediatric Surgery programmes at the universities of Lomé and Abidjan since 2014. Through theoretical and practical training missions for students at these 2 institutions, La Chaîne de l’Espoir has been able to intervene in areas with a lack of competent instructors.

2014 Activity

• **Togo**
  The first training mission to Lomé took place in June and gathered together all the medical students in postdoctoral diploma programmes at Sylvanus Olympio University Hospital as well as the 3 university hospitals in Abidjan. 22 students, representing 7 nationalities, took part in the theoretical and practical training sessions in orthopaedic and general surgery. Professor Philippe Wicard, of Necker Children’s Hospital, gave instruction on how to treat congenital talipes equinovarus (clubfoot) and Professor José Uroz, of the Mother and Child University Hospital in Las Palmas, provided training in the treatment of caustic oesophageal injuries.

• **Ivory Coast**
  The second training mission took place in Abidjan in December with 35 medical student participants. Professor Sabine Sarnacki, of Necker Children’s Hospital, with the assistance of Dr Eric Hervieux, offered theoretical and practical training in treating anorectal malformations and performed 3 operations. Professor Joël Lechevallier, from the University Hospital in Rouen, gave training in orthopaedic surgery on lower limb length inequality and other malformations. He performed 2 surgeries assisted by 3 students.

Outlook

In 2015, La Chaîne de l’Espoir will pursue this activity in collaboration with the diploma programme’s directors in the hopes of integrating students from the University of Dakar in Senegal into this programme.

3 weeks of training will be organised in Lomé and Abidjan under the auspices of La Chaîne de l’Espoir.

**SPECIALITY:** General Paediatric Surgery  
**PROGRAMME DIRECTOR:** Professor Yann Revillon (surgeon, France)  
**PROGRAMME COORDINATORS:** Pierre RAINGEARD - Jennifer NAVARRO  
**MISSIONS:** June and December 2014  
**LOCATION:** Togo - Lomé/Ivory Coast - Abidjan  
**FUNDING:** La Chaîne de l’Espoir
Friendship is an organisation, founded in 1998 by Runa Khan, which supports the most impoverished and marginalised communities living on the riverfront in Bangladesh. Its activity is based on knowledge of and experience in this area as well as the implementation of modern technology. The healthcare network which it has put in place in Bangladesh’s ephemeral island region, the Chars, in the Bengal Delta provides over 10 million people with access to healthcare using hospital ships, mobile clinics, medical communities, etc. Friendship also works in education, having opened 75 primary schools and 73 community adult literacy centres. Natural disaster prevention, emergency assistance and promoting economic self-sufficiency are also integral parts of their mission.

2014 Missions

As part of its development of the Femmes de l’Espoir (Women of Hope) Programme, which supports healthcare and education related projects led by women for women and children, La Chaîne de l’Espoir carried out an exploratory mission to the Chars. Friendship is well established in the Chars, which flood regularly, with a staff of 600 people, 500 working on-site.

The objective of this mission, which was carried out in April 2014, was to study the need for specialised surgical assistance (paediatric, general, orthopaedic, reconstructive, etc.) and to determine areas of possible collaboration between La Chaîne de l’Espoir and Friendship, specifically regarding the hospital ships which accommodate numerous patients daily.

A general paediatric surgery mission followed in October, led by Professor José Uroz, who was accompanied by an anaesthetist and an operating room nurse. La Chaîne de l’Espoir’s team worked on two hospital ships in satisfactory conditions and was able to assess medical and paramedical personnel training needs. 40 children were operated on during this mission (inguinal hernias, cleft lips, cleft palates, hypospadias, etc.)

Outlook

This programme will continue in 2015 with 2 reconstructive surgery missions, 1 general paediatric training centre by Professor José Uroz who found Friendship’s work, network of clinics and training centres for paramedical personnel and nurses to be remarkable.

A conference on clinical diagnosis in children was given at the Friendship training centre by Professor José Uroz who found Friendship’s work, network of clinics and training centres for paramedical personnel and nurses to be remarkable.

Outlook

This programme will continue in 2015 with 2 reconstructive surgery missions, 1 general paediatric training mission and 2 paramedical training missions. A mission to evaluate results is scheduled for the end of the year.

SPECIALITY: Paediatric Surgery
PROJECT DIRECTORS: Françoise Monard (General Secretary, France) - Runa KHAN (President of Friendship, France)
MISSIONS: April and October 2014
LOCATION: Dhaka
FUNDING: La Chaîne de l’Espoir/Partners
Benin

GENERAL PAEDIATRIC SURGERY

Professor José Uroz, chief of paediatric surgery at Mother and Child University Hospital in Las Palmas, Canary Islands, is one of La Chaîne de l’Espoir’s most active missionaries. Since 2012, he has developed a general paediatric surgery programme in Benin in collaboration with Professor Antoine Séraphin Gbenou, a surgeon at the Cotonou Mother and Child Hospital, and Professor Michel Armand Fiogbé, a surgeon at Cotonou University Hospital.

2014 Missions

In 2014, Professor Uroz went on 2 missions to the Cotonou Mother and Child Hospital where he operated on 50 children. These missions specifically targeted complex urogenital and gastrointestinal malformations. All medical costs were covered by La Chaîne de l’Espoir (anaesthesia, surgery, analysis and medications).

As on all missions since 2012, Professor José Uroz continued his instructional programme on laparoscopic surgery. The demand for complex general and urologic surgical treatment is high and La Chaîne de l’Espoir intends to organise 2 missions of this kind in 2015.

The December mission also served as an occasion to take stock and prepare, in collaboration with Professor Séraphin Gbenou, for the 2015 launch of an orthopaedic surgery programme.

An agreement formalising the cooperation between La Chaîne de l’Espoir and the Mother and Child Hospital is currently being drafted.

SPECIALITY: General Paediatric Surgery
PROGRAMME DIRECTORS: Professor José Uroz (surgeon, France) - Dr Antoine Séraphin Gbenou (surgeon, Benin)
PROGRAMME COORDINATORS: Pierre RAINGEARD
MISSIONS: March and December 2014
LOCATION: The Cotonou Mother and Child Hospital, Benin
FUNDING: La Chaîne de l’Espoir
La Chaîne de l’Espoir has been promoting education for needy Beninese children since 2011. We undertake these activities within the context of a programme conducted in partnership with Bien-Etre et Développement, a Beninese NGO which actively supports disadvantaged Beninese populations in multiple sectors. Their efforts in the education sector are concentrated in the Hévié region, to the west of Cotonou, where they intervene in 2 primary schools and 1 secondary school.

2014 Activity

Individually sponsored children received in-kind education assistance in 2014—the materials essential for their education: school supplies, textbooks, uniforms and food. In addition to this support, improvements are regularly made to these 3 schools in order to guarantee the best possible learning environment to the children. In 2014, La Chaîne de l’Espoir provided educational materials to one of the primary schools for its two nursery classes. This material, which plays a fundamental role in the first stages of learning, contributed to improving the quality of nursery level education. At the end of 2014, around 100 students received our support and 75% of them were individually sponsored.

In 2015, La Chaîne de l’Espoir hopes to continue providing education aid to these pupils and to strengthen its support in order to increase the quality of education and improve the learning environment in these schools.

**ACTIVITY:** Sponsorship – Education Aidn

**PROGRAMME DIRECTORS:** Sophie ROLLIN (France) - Bien-Etre et Développement (Wellbeing and Development), a Beninese NGO

**LOCATION:** Hévié

**FUNDING:** La Chaîne de l’Espoir/Sponsors
Since 2005, La Chaîne de l’Espoir has returned time and time again to carry out missions in Recife with two objectives: to operate on disadvantaged children suffering from complex upper extremity deformities and to train young surgeons in this speciality. We do this in partnership with la Fondation SOS MAO Crianças. In 2014, our missions focussed primarily on the treatment of sequelae of brachial plexus injuries and took place exclusively at l’Instituto Materno Infantil de Pernambuco (IMIP).

2014 Missions

In 2014, 4 missions were carried out by La Chaîne de l’Espoir under the direction of Dr Philippe Valenti (February and December), Dr Caroline Leclercq (April) and Dr Jean Kany (May) respectively. All interventions took place at the IMIP, a university hospital which made 3 consultation rooms and 4 operating rooms available to us for this mission.

These missions focussed on surgically treating children suffering from sequelae of brachial plexus injuries (damage sustained during birth to the nerves linking arms and shoulders to the spine) and on restoring use of shoulders and elbows through tendon grafts. Surgical treatment of this kind aims to restore function to children’s upper extremities. Other children with spastic cerebral palsy or quadriplegia benefited from neurotomy, arthroscopy and tendon lengthening or grafting procedures.

On the fourth mission, 222 children were seen in consultation and 82 children were operated on. 10 Brazilian surgeons in training participated in these interventions.

In regards to the training programme, specific attention was paid to local ultrasound-assisted anaesthesia. The advantage of such a technique is the ability to observe the spread and results of the anaesthetic, limiting the ever present risk of errors, especially for children. Local anaesthesia is preferable because it reduces post-operative pain and painkiller prescriptions. Recovery times are also reduced, which is not without importance as these surgeries are outpatient procedures. Around 30 IMIP anaesthetists attended this training session.

In addition, conferences on a variety of topics were organised on the principals of tendon grafts in cases of upper extremity paralysis, hand tumours, and toe transplant procedure and technique.

Outlook

La Chaîne de l’Espoir will continue its missions in 2015 and a shoulder tendon graft protocol is being developed for publication.

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**SPECIALITY:** Hand and Upper Extremity Surgery  
**PROGRAMME DIRECTORS:** Dr Philippe Valenti (surgeon, France) - Dr Mauri Cortez, Dr Rui Ferreira (surgeons, Brazil)  
**MISSIONS:** February, April, May and December 2014  
**LOCATION:** Recife - Instituto Materno Infantil de Pernambuco (Pernambuco Mother and Child Institute)  
**FUNDING:** La Chaîne de l’Espoir
La Chaîne de l’Espoir sent a mission to Ouagadougou in 2013 to evaluate access to reconstructive surgery, specifically for patients suffering from noma (gangrene of the face), and found it to be lacking. In response to this need a programme to treat patients and train doctors was developed by Professor Narcisse Zwetyenga, chief of maxillofacial plastic and reconstructive surgery at the Dijon Teaching Hospital. His ultimate objective is to establish an exemplary department dedicated to the treatment of noma not only in Burkina Faso but also in neighbouring countries like Mali and Niger, where there is a high incidence of this disease.

To ensure the success of this programme, La Chaîne de l’Espoir works in partnership with Sentinellles and La Maison de Fati, two local NGOs with extensive experience in caring for children with maxillofacial abnormalities and noma (recruiting patients from all over the country, organising consultations, pre-operative examinations, housing and post-operative care, nutrition, rehabilitation, prostheses, etc.).

Interventions and hospitalisations take place at the Ouagadougou International Polyclinic, a fully equipped modern facility.

2014 Missions

In 2014, 2 missions were carried out under the direction of Professor Narcisse Zwetyenga. To maximise efficiency, volunteer surgeons formed teams of 2, working in the 3 operating suits made available by the Ouagadougou International Polyclinic. 91 patients in need of complex surgeries (consequences of noma, mandible or maxilla tumours, cleft lip and cleft palate) were operated on.

Each mission also had a secondary objective of sharing knowledge and training Burkinabe surgeons in reconstructive surgery techniques (cleft lip repair, submental flap for noma, etc.).

Our local partners are desirous of continuing and developing this relationship, which would increase the number of children we can treat. Ongoing training is also essential for the acquisition of the knowledge and skills to treat maxillofacial illnesses autonomously. To that end, La Chaîne de l’Espoir intends to organise 3 missions in 2015.
The Phnom Penh Cardiology Centre, opened by La Chaîne de l’Espoir in 2001, was renamed the Calmette Hospital Cardiology Department in May 2013. This was a decisive step towards the institutionalisation of this facility and La Chaîne de l’Espoir accompanied the transition through its missions and equipment donations. It is important to note that since, Calmette Hospital has been fully invested: renovating the premises, replacing equipment, repairing the air treatment system, etc. These substantial efforts on their part are a manifestation of our national partner’s commitment to the project. In addition, the reorganisation of the Children’s Pavilion, incorporated since 2011, improved available treatments for vulnerable young patients from all over the country and ensured better follow-up. In the coming years we will focus on the evolution of the Children’s Pavilion and the Paediatric Cardiology unit at the CHCD as well as reinforcing the medical teams’ capabilities. A committee, led by Professor Gérard Babastasi, Professor Antoine Lafont and their Cambodian counterparts, is charged with defining, executing and following-up on this strategy.

2014 Activity

- **The Calmette Hospital Cardiology Department (CHCD)**

In 2014, Calmette Hospital’s management decided to reorganise their cardiology department by sending multiple doctors, specifically intensive care specialists, for immersion training at the Heart Institute in Ho Chi Minh City, Vietnam. La Chaîne de l’Espoir’s participation in this project consisted of recruiting an expatriate nurse to act, not only in that capacity, but also as the training coordinator, organising the July treatment and training mission led by Professor Gérard Babastasi. The intensive care unit at CHCD also received a donation of a wide range of medical equipment.

In 2015, La Chaîne de l’Espoir will continue its commitment, increase its support of the CHCD through successive missions of volunteers working in partnership with their Cambodian counterparts and emphasise the importance of intensive care and anaesthesia through a significant donation of intensive care equipment. The objective is to carry out the entire 2015 surgery programme on behalf of the children at the Pavilion in the Calmette Hospital Cardiology Department.

- **The Children’s Pavilion**

In 2014, medical activity declined slightly from the previous year (down 7% from 2013) with 5,926 outside consultations, 511 hospitalisations and 192 therapeutic procedures, 90% of which were surgeries.

This moderate decrease is due to new players in the market such as the Kantha Bopha Foundation Jayavarman VII Hospital Cardiology Centre in Siem Reap. This is a trend that La Chaîne de l’Espoir supports fully because it increases opportunities for care on a national scale. La Chaîne de l’Espoir has organised 16 training and surgical missions since 2011 to benefit patients and medical teams at the Jayavarman VII Hospital.

The majority of the Pavilion’s activity concerns patients from southern provinces with 94% of consultations, 94% of procedures and 97% of patients receiving secondary preventative care for acute rheumatic fever (1,290 penicillin injections) coming from this region. In addition, 3,623 dental consultations were carried out to prevent endocarditis. We also implemented an informational campaign to complement our medical projects. This initiative consists of educating patients and their families about hospital stays, medical prescriptions, how to combat malnutrition and proper oral hygiene. A telephone hotline for information and advice is open 24 hours a day.

Keeping children active and engaged is also a priority. To this end, a teacher is now present 7 days a week and 3 recreation areas have been outfitted with books, stationery and games.

The year of 2015 will be devoted to continuing of these same measures and supporting the evolution of the Children’s Pavilion and the Paediatric Cardiology Unit at the CHCD.
Fifteen years ago, prompted by Professor François-Xavier Roux, La Chaîne de l’Espoir began a neurosurgery project which introduced this speciality to Cambodia (at the university level) and allowed us to train doctors in multiple Phnom Penh hospitals as well as establish specialised departments at Calmette Hospital (neurosurgery, neurointensive care, develop the existing functional rehabilitation unit).

The Centre for Neurosciences of Phnom Penh (CNPP)

Since 2012, La Chaîne de l’Espoir has been working in partnership with Calmette Hospital to establish the Centre for Neurosciences of Phnom Penh which units existing departments (neurology, neurosurgery, neurointensive care) and offers new services with its 4 operating suites and autoclave (sterilisation equipment). This new specialised care facility exists within the context of the national service industry and system of higher education.

The construction of this 5-story building was financed through a significant contribution from Calmette Hospital’s own budget as well as by the Cambodian authorities who granted a $4.5 million subsidy.

La Chaîne de l’Espoir contributed its expertise to defining this project’s medical objectives and acted as a medical and technical consultant while the actual construction was overseen by Calmette Hospital. In 2014, monthly missions took place to assist in the construction of the CNPP building. Additional missions to equip the facility were also organised.

La Chaîne de l’Espoir provided hospital and biomedical equipment as well as furniture purchased locally or in France and contributed to the development of maintenance procedures. Donations supplied 88 beds, including 6 recovery beds and 16 intensive care beds. Two of the 4 operating suites that make up this new department were entirely equipped along with the consultation area and various technical support units such as the sterilisation and disinfection unit.

The CNPP was inaugurated on October 7th, 2014 at a ceremony presided over by His Majesty King Norodom Sihamoni.

Between October 2014 and March 2015, La Chaîne de l’Espoir dispatched a resident team led by Professor François-Xavier Roux including a neuro anaesthetist, a treatment specialist and an operating suite specialist. The team's objectives were to help organise units, personnel management and to contribute to putting clinical procedures in place. Mentorship is a key component of this training programme which includes instruction at the patient's bedside and in the operating suite in addition to courses and seminars.

The team also helped to recruit patients and organise networks of consultants in partnership with provincial care facilities.

SPECIALITY: Neurosurgery
PROJECT DIRECTOR: Professor François-Xavier Roux (neurosurgeon)
MISSIONS: Year-round
LOCATION: Phnom Penh - Calmette Hospital
FUNDING: La Chaîne de l’Espoir/Partners/Private donors
Support for a vocational training centre for street youths in Phnom Penh

Since 2002, La Chaîne de l’Espoir has been working alongside Mith Samlanh, a Cambodian NGO, to reintegrate Phnom Penh’s street youths into society. This collaboration concerns primarily Mith Samlanh’s vocational training centre which accommodates young apprentices working in one of about a dozen workshops. The course places an emphasis on professional immersion.

2014 Activity

The centre stresses the importance of a return to active life through courses which prepare these young people for their professional lives and are an integral part of the training programme. The objective is to support students by helping them to define their professional trajectory and obtain gainful employment. Fieldtrips to various businesses are organised on a regular basis allowing these young people to discover different fields and begin to envisage their futures.

In 2014, close to 500 young people were provided with access to vocational training; many of them obtained diplomas. Each year, various events bring the young people at the centre together. For example, in 2014, Mith Samlanh’s 20-year anniversary was celebrated with an open house during which the participants presented, among other things, homemade food and drinks as well as demonstrations in cosmetology.

**ACTIVITY:** Vocational Training  
**PROGRAMME DIRECTORS:** Sophie ROLLIN (France) - Mith Samlanh/Friends, a Cambodian NGO  
**LOCATION:** Phnom Penh  
**FUNDING:** La Chaîne de l’Espoir
La Chaîne de l’Espoir has been active in Congo since 1994. An agreement with the Ministry of Health has, to date, permitted us to transfer close to 500 children to France. In response to a request made by the Congolese authorities, we have used our expertise to contribute to establishing the Brazzaville Heart Institute, a regional centre which will treat cardiovascular illnesses in children and adults. To make this project possible, La Chaîne de l’Espoir, the Congo Assistance Foundation and the Ministry of Health founded the Brazzaville Heart Institute Foundation.

Brazzaville Heart Institute

Congolese authorities would like the Brazzaville Heart Institute to be a “heart centre” of the highest quality, providing treatment for congenital heart defects and cardiovascular illnesses in the whole sub-region. The entire provisional budget is on the order of €15 million. The feasibility study was carried out and submitted to the President of the Republic in 2014.

2014 Missions

Within the context of training medical and surgical teams for the future Institute, La Chaîne de l’Espoir organised a mission in June 2014 with one principal objective – to evaluate and determine specific training and personnel needs.

This 10-person mission was led by Dr Daniel Roux of the Rangueil University Medical Centre of Toulouse. Eleven children with congenital cardiovascular disease were successfully operated on.

This programme remains dependent on funding for the Institute project from the Congolese authorities; given this constraint and the long waiting list, the transfer of children to France remains necessary and a viable option.

**SPECIALITY:** Cardiology and Cardiac Surgery
**PROGRAMME DIRECTORS:** Professor Alain Deloche (surgeon, France) - Dr Daniel Roux (surgeon, France) - Marc Wautier (hospital facility project director)
**MISSION:** June 2014
**LOCATION:** Brazzaville University Hospital
**FUNDING:** Congolese Authorities/Congo Assistance Foundation
In order to reduce maternal, neonatal, infant and child mortality rates, improve mother and child healthcare and facilitate research and training to promote quality care, the Foundation Children of Africa decided to build the Bingerville Mother-Child Hospital. The Foundation solicited La Chaîne de l’Espoir’s support and expertise for this project. Construction began in 2013 and should be completed, barring unforeseen circumstances, in the first half of 2015.

The Bingerville Mother-Child Hospital

This 110-bed private non-profit hospital, located in Bingerville, an inner suburb of Abidjan, has one objective— to serve the public.

It will provide a wide variety of services: consultations, family planning counselling, health education, mother-to-child HIV transmission prevention, medical and surgical emergency care, paediatric medicine and surgery, gynaecological and obstetric care.

La Chaîne de l’Espoir

La Chaîne de l’Espoir uses its expertise to provide the hospital with advice concerning legal status and the development of a medical project. We also contribute to the architectural project, infrastructure construction and equipping the hospital, including making recommendations for equipment placement. We are working on developing staff structuring as well as a recruitment and training plan to establish local medical and paramedical teams. Lastly, we oversee the recruitment process for an expatriate management team.

In 2015, La Chaîne de l’Espoir will continue its support of this project through missions to advise and mentor our partners.

SPECIALITY: Maternal and Child Health
PROGRAMME COORDINATORS: Jennifer NAVARRO
MISSIONS: March and September 2014
LOCATION: Abidjan - The Bingerville Mother-Child Hospital
FUNDING: Foundation Children of Africa
La Chaîne de l’Espoir has been active in Cuba since 2010, collaborating with doctors and Cuban healthcare providers within the context of a programme designed to developed paediatric surgery. In 2014, the collaboration, with a heavy emphasis on training, continued under the direction of Professor José Uroz, an honorary member of the Cuban Society of Paediatric Surgery, and Professor Rafael Manuel Trinchet Soler, president of the Cuban Society of Paediatric Surgery.

In 2014, an emphasis was placed on paediatric urology with the opening of the Paediatric Urology Centre at the Havana Paediatric Hospital, where Cuban paediatric urologists in training receive instruction. They work together with the nephrology and kidney transplant departments at the Havana Paediatric Hospital and the Santiago de Cuba Paediatric Hospital. This centre provides the Cuban Urological Association with a department dedicated to its specialty. In addition, La Chaîne de l’Espoir funded a renovation and equipped conference and class rooms at the Havana Paediatric Hospital and Villa Clara Paediatric Hospital.

2014 Activity

In April 2014, 26 surgeons, anaesthetists and directors of paediatric intensive care assisted in the organisation of a lecture series on “Advanced Paediatric Life Support – APLS” at the Havana Paediatric Hospital. This subject included making discussions about the treatment of children with multisystem trauma or in life threatening situations. More than 50 doctors from paediatric hospitals all over Cuba were trained in advanced emergency paediatric first aid and cardiopulmonary resuscitation. The majority of them will take on the role of instructor at their respective hospitals.

In June 2014, 3 important events took place over the course of 4 days in Holguin as a continuation of the 2013 Virtual Paediatric Surgery Symposium: the 5th National Congress of Paediatric Surgery, the 2nd Virtual Paediatric Surgery Symposium and the 2nd National Hospital Interns’ Paediatric Surgery Conference. These 3 events gathered in one place 100 specialists in paediatric surgery. All these events (scientific outreach, presentations and conferences) taking place simultaneously was a considerable advantage for interns in training all over the country who, thanks to the Virtual Symposium’s online project presentation platform, could take part.

The Paediatric Urology Centre at the Havana Paediatric Hospital organised its first training workshop with 18 paediatric urologists.

Practical training was also essential as numerous complex urological surgical interventions took place at the Havana Paediatric Hospital in collaboration with Cuban teams. Four short missions to partner hospitals in Villa Clara, Santiago de Cuba and Moron were organised to operate on children suffering from severe malformations and to train local doctors.

This programme will continue in 2015 with specific attention being paid to the Paediatric Urology Centre.
In Haiti, access to quality education remains limited, especially impacting children in rural areas. Since 2010, La Chaine de l’Espoir has been active in supporting education for children in need in Grand’Anse, an impoverished and isolated region in the southwest of the country. The Haiti – Back to School Programme is managed in partnership with the “Paradis des Indiens” Foundation which has built about a dozen primary schools in Abricots community, making education accessible to the children there. After beginning with a sense of urgency, as establishments attempted to integrate children displaced by the January 2012 earthquake, these activities ultimately developed to benefit all the children in the area.

2014 Activity

La Chaine de l’Espoir renewed its support of the primary school in Abricots village, which serves 350 children. An important part of this support is continuous teacher training, which is the key to guaranteeing high quality education.

The programme was reinforced by a new initiative to provide all pupils with a daily snack, involving local businesses, supporting the community’s economic development and combating extreme poverty in the area.

In addition, school supplies and textbooks were provided to 10 primary schools, supporting 2,500 pupils.

In 2015, La Chaine de l’Espoir would like to continue its support of these children and reinforce the healthcare component.
Since 2011, La Chaîne de l’Espoir has been actively engaged in providing disadvantaged children in Jaipur and its environs with access to education. This activity is carried out in partnership with TAABAR, an Indian NGO which advocates for child welfare by helping street youths to reintegrate into society and family life. TAABAR also runs, with the support of La Chaîne de l’Espoir, 5 centres for impoverished children who are vulnerable to the dangers of the street. In 2012, this programme was expanded by opening a school specifically for girls from lower castes.

2014 Activity

Support for running these 5 TAABAR centres continued in 2014. Established in areas of Jaipur identified as “at risk”, these are safe places where children can receive tutoring and participate in activities that promote self-expression and creativity after school. They are also taught about their rights and benefit from annual educational assistance in the form of school bags, school supplies, uniforms and shoes.

The project to support education for extremely vulnerable girls expanded through the integration of 15 new beneficiaries into the nursery and primary classes at the Sneh Girls School. This school, built in the disadvantage Luniyawas neighbourhood, on the periphery of Jaipur, provides 135 girls with access to free high-quality education. They also participate in extracurricular activities and tutoring as well as receiving annual educational assistance in the form of school bags, school supplies, uniforms and shoes.

The healthcare side of this programme consists of a daily meal served at centres and the Sneh School, access to healthcare via a mobile clinic and distribution of personal hygiene kits.

An education awareness campaign was also developed for 200 children from 3 isolated communities to promote their future integration into the education system.

At the end of 2014, slightly over 1,300 children had benefited from this programme, 330 of whom were individually sponsored.

In 2015, La Chaîne de l’Espoir would like to increase the number of children in schools and renew its support for education and access to healthcare in isolated communities.

**ACTIVITY:** Sponsorship – Education Aid

**PROGRAMME DIRECTORS:** Sophie ROLLIN (France) - TAABAR, an Indian NGO

**LOCATION:** Jaipur

**FUNDING:** La Chaîne de l’Espoir/Partners/Sponsors
This programme has been conducted by La Chaîne de l’Espoir in collaboration with Ibn Al Bitar Hospital in Bagdad since 2005. It contributes directly to the development of paediatric cardiac surgery in Iraq through surgeries on children, surgical missions, medical and paramedical personnel training, equipment donation, etc. Since 2011, the collaboration has expanded to Lebanon, where children are transferred for surgery and Iraqi medical and paramedical personnel receive training in partnership with Heartbeat - La Chaîne de l’Espoir Lebanon and Hôtel-Dieu de France (a private university hospital) in Beirut.

2014 Activity

In 2014, the security issues that persisted all year long in Iraq made it impossible to send the intensive care specialist, requested by Ibn Al Bitar Hospital in 2011, to Bagdad. Despite the difficulties and risk, initiatives providing surgery to children in need and supporting Iraqi paramedical teams continued.

1 • Transfer of Children for Surgical Treatment:
29 children, accompanied by their parents, were transferred to Hôtel-Dieu de France in Beirut in 2014. Since 2005, 214 children have benefited from this programme (132 in France, 82 in Lebanon).

2 • Paramedical Training for Iraqis in Lebanon:
Paramedical training for Ibn Al Bitar Hospital personnel at Hôtel-Dieu de France in Beirut took place year-round in 2014. 44 people took part in this programme which took the form of 15-day workshops. The majority of participants were perfusionists, nurses, operating room nurses, intensive care specialists, anaesthetists and sterilisation and radiology personnel.

Since the programme’s beginning in 2011, 133 people have been trained.

Outlook

The number of children transferred in 2015 will drop slightly as Iraqi personnel at Ibn Al Bitar Hospital are now sufficiently trained to take over operations. La Chaîne de l’Espoir plans to transfer around 20 children.

The number of workshop participants will remain similar to 2014 as the hospital management’s need remains strong. Around 40 people will take part in this training programme.

SPECIALITY: Cardiac Surgery
PROGRAMME DIRECTORS: Professor Alain Deloche (surgeon, France) - Dr Hussein Al Hilli (Ibn Al Bitar Hospital director, Iraq)
PROGRAMME COORDINATORS: Gonzague DESFORGES
LOCATION: Bagdad - Ibn Al Bitar Hospital - Beirut - Hôtel-Dieu de France
FUNDING: La Chaîne de l’Espoir/Total E&P Iraq
Since 2007, Zanjireh Omid Charity Institute (La Chaîne de l’Espoir Iran) has cared for over 5,000 children, 1,500 of whom were operated on for illnesses requiring orthopaedic, cardiac or reconstructive surgery. We work in partnership with the Medical Centre for Children, Imam Khomeini Hospital, Noor Afshar Hospital, Shahid Rajaie Hospital, Sina Hospital and Valiasr Hospital, all in Tehran. Since 2008, La Chaîne de l’Espeoir France has sent regular surgical missions to Iran and welcomes Iranian surgeons in France for training.

2014 Missions

In 2014, 8 surgical missions were carried out by La Chaîne de l’Espeoir France; furthermore, with the help of the French Embassy in Teheran, 11 Iranian doctors were welcomed by hospitals and clinics in Paris to complete advanced training courses (Beaujon Hospital, Necker Children’s Hospital, Robert Debré Hospital, Ambroise Paré Clinic, the Hand Institute and the Mutualiste Montsouris Institute).

- **Reconstructive Surgery**
  During a mission led by Professor Bernard Pavy in February, 40 children with congenital deformities, burn sequelae and skin neoplasms were examined and 14 received surgical care. He operated in multiple partner hospitals with Dr Hamid Fathi, a doctor who came to France for training in 2012.

- **Hand and Upper Extremity Surgery**
  Dr Philippe Valenti and his team examined 55 children, 25 of whom had received surgical care on a previous mission, over the course of 2 missions in April and October 2014. 28 children were operated on at the Medical Centre for Children, a well-respected Iranian paediatric university hospital.

- **Orthopaedic and Spine Surgery**
  Professor Keyvan Mazda, director of the orthopaedic and spinal surgery programme at Robert Debré Hospital, went on 4 missions in 2014. 2, of 3 to 4 days, were dedicated to consultations in preparation for the surgical missions when operations and other therapeutic strategies (traction, pre-operative preparation, testing for secondary illnesses) took place. In this way, 160 children were seen in consultation.

  The two 7-day surgical missions took place in August and December at Noor Afshar Hospital which was selected for its high quality technical services and personnel. These missions have a very precise procedure: one day of consultation to confirm conditions, the remaining days are devoted to intervention. Only the most complex cases are treated by La Chaîne de l’Espeoir France’s team of 2 senior surgeons, a spinal expert and a neurologist.

  On these 2 missions, 72 children were seen in consultation and 38 children suffering from serious malformations of the spine were operated on. In addition, Iranian staff, including 4 senior anaesthetists, 5 junior anaesthetists and 5 emergency care specialists, received training. Over the course of these orthopaedic surgery missions, 12-hour work days indicated the dedication and willingness of Iranian medical and paramedical teams.

- **Paediatric Cardiac Surgery**
  The cardiac surgery mission, which took place in September, was led by Professor Dominique Metras of the Marseille University Hospital. La Chaîne de l’Espeoir France’s team worked in direct collaboration with the Medical Centre for Children’s Cardiology Unit’s team, which is remarkably well equipped for surgery, anaesthesia and intensive care. On future missions improvements will be made to neonatal surgery, as well as diagnostics, by obtaining better ultrasound equipment. Only 6 complex cases were selected for this mission (tetralogy of Fallot, pulmonary insufficiency, etc.).

  This programme will continue similarly in 2015.

**SPECIALITY:** Specialised Paediatric Surgery  
**PROGRAMME DIRECTORS:** Maryam Marashi (La Chaîne de l’Espeoir Iran, president) - Françoise Monard (General Secretary, France)  
**MISSIONS:** Year-round  
**LOCATION:** Teheran - Zanjireh Omid Charity Institute (La Chaîne de l’Espeoir Iran)  
**FUNDING:** La Chaîne de l’Espeoir/Embassy from France to Teheran
In 2014, La Chaîne de l’Espoir focussed on 2 very specific issues in Iraqi Kurdistan: firstly, evaluating needs and establishing short, mid and long-term medical assistance programmes and secondly, providing emergency assistance following the increase in displaced people during the month of August 2014. Over the course of 6 missions, 2 injured children were transferred to France for surgical care and 40 consultations in paediatric cardiology took place in preparation for future on-site surgical missions. In addition, 3 nurses spent almost 3 weeks at Raparine Paediatric Hospital in Erbil to perform an audit and assess need for future training missions.

The Medical Assistance Programme

A mission to evaluate need took place in April 2014 and indicated that there is demand for intensive care training for doctors and nurses (Advanced Paediatric Life Support) and training in more complex operations in cardiology, urology and general surgery.

La Chaîne de l’Espoir selected 2 hospital facilities to host its missions in Erbil:

1. Raparine Paediatric Hospital for intensive care training. An audit was carried out in preparation for this 2015 programme.

2. The Cardiac Center for cardiac surgery missions. A mission in December 2014 was organised to have consultations in preparation for 2015 surgical missions.

The location of potential general and urological surgeries remains undecided.

Emergency Assistance for Displaced Persons

On the August 2014 mission to evaluate the situation, the principal need was for medications. There was no follow-up on this project as conditions of supply remained unclear and no concrete idea of possibilities immerged. In December, 3 nurses went on a mission in response to a request for assistance from nurses at Raparine Paediatric Hospital. Working conditions had developed since August and the necessity to lighten nurse’s workloads had become obsolete and eventually led to the audit which ultimately revealed the need for further training.

Outlook

La Chaîne de l’Espoir intends to organise 2 missions in paediatric cardiac surgery to the Cardiac Center in Erbil. Around 15 children will benefit from interventions on the mission scheduled for March 2015. The Kurdistan Regional Government will take full responsibility for this mission’s costs (surgical expenses, equipment and single-use surgical instruments).

In regards to intensive care training missions at Raparine Paediatric Hospital, they will be organised once funding has been obtained. A mission of this kind is necessary to improve the programme.

SPECIALITY: Cardiac Surgery, Intensive Care Training
PROGRAMME DIRECTOR: Dr Sylvain Chauvaud (surgeon, France)
PROGRAMME COORDINATORS: Gonzague DESFORGES
LOCATION: Erbil – Raparine Paediatric Hospital/Cardiac Center
FUNDING: La Chaîne de l’Espoir/The Kurdistan Regional Government
Laos

GENERAL PAEDIATRIC SURGERY

With 58 deaths per 1,000 births, Laos has the highest child mortality rate in Southeast Asia and is ranked 35th worldwide. Although the economic boom in this country is substantial, the healthcare system remains inadequate. Franco-Laotian cooperation in the field of surgery goes back to the 70's but only concerns adults. Paediatric surgery has been almost inexistent and most children are operated on using technics for adults, which are not appropriate and very risky. Families with means take their children to Vietnam or Thailand for treatment.

In 2011, authorities in Vientiane made a request that the development of paediatric surgery in Laos be encourage, there by initiating a collaboration between La Chaîne de l’Espoir, Amitié-Coopération France Laos and Soigner les Enfants du Monde (French NGOs). Currently, teaching in this field is limited as there are very few paediatric surgery units. More and more only so called “simple surgeries” are performed since there are so few effective paediatric intensive care units. From 2011 to 2013, 6 training and treatment missions took place at the Thakhek Provincial Hospital, in the south of the country, and 123 children were operated on. In 2014, following these excellent results, it was decided to relocate the activity to Vientiane where it could have an even greater impact.

Programme Objectives

This programme’s objective is to participate in developing a healthcare system in Laos through training local personnel in general paediatric surgery and funding surgeries for disadvantaged children.

At the request of the Medical School, a specific module was introduced into the adult general surgery programme consisting of theoretical and practical courses given throughout La Chaîne de l’Espoir missions. The ultimate objective is for local practitioners to take over training in this programme. To this end, 2 surgeons have already been identified as future instructors.

2014 Missions

Professor Pierre Hélardot led 2 missions in January and September 2014 to Mahosot Hospital in Vientiane. 33 children received surgical care (splenectomies, hernias, various malformations, etc.). La Chaîne de l’Espoir’s team also provided close to 40 hours of theoretical and practical training.

Outlook

To ensure the staying power of this programme, La Chaîne de l’Espoir initiated the process to officially register in Laos with the Lao Ministry of Foreign Affairs and the Lao Embassy in Paris.

The number of missions will increase starting in 2015. A donation of equipment and materials was made to local university hospitals. In addition, in order to integrate Lao paediatric surgery into Asia, La Chaîne de l’Espoir will participate in the organisation of the Annual Congress of Paediatric Surgery for countries belonging to the Association of Southeast Asian Nations, which will take place in Vientiane in 2015.

SPECIALITY: General Paediatric Surgery
PROGRAMME DIRECTOR: Professor Pierre Helardot (surgeon, France)
PROGRAMME COORDINATORS: Jennifer NAVARRO
MISSIONS: January and September 2014
LOCATION: Vientiane - Mahosot Hospital
FUNDING: La Chaîne de l’Espoir/Soigner les Enfants du Monde, a French NGO
The Maputo Heart Institute, founded in 2001, is a private non-profit organisation known for its high quality care, instruction and research programmes in acute rheumatic fever and endomyocardic fibrosis. They offer a wide array of treatments for adults and children (general surgery, urology, ophthalmology, orthopaedics, medical imaging, laboratory testing, a pharmacy, etc.), which allow them to have financial autonomy. Their humanitarian activity is focussed on funding treatment for in-need children suffering from heart disease (150 children are operated on each year). Within this context, La Chaîne de l’Espoir continues its support through training cardiology and cardiac surgery teams at the Maputo Heart Institute.

La Chaîne de l’Espoir at the Maputo Heart Institute

Professor Daniel Sidi, a paediatric heart specialist at Necker Children’s Hospital in France, travels to Maputo Heart Institute once a quarter to teach, monitor the medical teams’ progress, oversee activity at the Institute and follow up with research projects. He also examines children and selects, with the help of local doctors, patients who could be operated on either by the Institute’s team or by specialists on missions with European NGOs like La Chaîne de l’Espoir. Over the course of these 4 annual missions, around 500 patients are examined and 200 are selected for surgery.

These missions are often paired with interventional or diagnostic cardiac catheterisation missions along with conferences for university students.

Professor Pascal Vouhé, a paediatric cardiac surgeon at Necker Children’s Hospital, leads La Chaîne de l’Espoir’s yearly mission. It usually takes place in July and has 2 objectives; first, to operate on children with complex cardiac illnesses and second, to observe the Institute’s teams in practical situations as they treat common illnesses allowing for the correction of any mistakes.

Among the successes of 2014, we would like to emphasis the creation of a foundation to which Professor Daniel Sidi was appointed as La Chaîne de l’Espoir’s representative and the signing of a protocol agreement to train anaesthetists and nurse-anaesthetists between the Institute, the University of Cape Town in South Africa and La Chaîne de l’Espoir.

Outlook

La Chaîne de l’Espoir intends to continue this programme without any major changes. We also put a training programme in place for new cardiologists, intensive care specialists and nurses. The French Embassy funds through scholarships training at Necker and Bichat Hospitals for a select group.

SPECIALITY: Cardiology and Cardiac Surgery
PROGRAMME DIRECTORS: Professor Daniel Sidi (paediatric heart specialist, France) - Dr Beatriz Ferreira (cardiologist, Mozambique)
MISSIONS: 4 cardiology missions per year, 1 surgical mission per year
LOCATION: The Maputo Heart Institute
FUNDING: La Chaîne de l’Espoir/Private donors
Since 2012, La Chaîne de l'Espoir has been supporting an orphanage in Beira, Mozambique in partnership with O Infantário Provincial “Os Continuadores”.

2014 Activity

La Chaîne de l’Espoir continued its support for the orphanage through participating in its management. This assistance is essential in caring for the young children (0 to 5 years old) in extremely vulnerable circumstances accommodated by this institution.

Their temporary or long-term presence at this institution is a result of very difficult family situations. Orphaned, abandoned and abused, or witnesses to abuse, these children will now grow up in a stable and secure environment with a team of childminders. A strategy to reintegrate children into family life is in place if and when it becomes conceivable.

**ACTIVITY:** Orphanage Support
**PROGRAMME DIRECTORS:** Sophie Rollin (France) - Infantário Provincial “Os Continuadores” - Projecto Infantil (Mozambique), a centre for orphans
**LOCATION:** Beira
**FUNDING:** La Chaîne de l’Espoir/Partners
La Chaîne de l’Espoir has been working to support education for vulnerable street children in Nepal since 2011. Prevention through education is at the heart of this programme, which is carried out in partnership with Children Protection Centers and Services. This organisation works to assist and rehabilitate street children; to this end, they have also developed a network of day centres dedicated to welcoming needy school children. Our collaboration with them focuses on these facilities located in various regions of the country.

2014 Activity

In 2014, La Chaîne de l’Espoir renewed its support for around 30 day centres which protect vulnerable children and advocate for their education. These facilities were opened strategically in the vicinity of disadvantaged neighbourhoods in Kathmandu Valley, as well as other regions of the country with large populations of street children.

The school children benefit from academic and social counselling as well as psychological support. Furthermore, in addition to school and examination fees, in-kind education assistance is granted to them in the form of uniforms, books and school supplies. The campaign to heighten families’s awareness is also a fundamental aspect of this programme.

In 2014, around 12 centres located in schools in Kathmandu Valley benefited from a project to enrich the learning process through outfitting libraries. Hundreds of books on a wide variety of topics and educational games were supplied to each centre.

The programme also contributed to a rehabilitation centre for children who have left the streets of Kathmandu.

At the end of 2014, a thousand children had benefited from this programme; 400 of them were individually sponsored.
In 2011, La Chaîne de l’Espoir launched a programme in support of education for disadvantaged Peruvian children. This activity is carried out in Nazca in partnership with Enfants des Andes, a children’s aid organisation, which has been active in this country for over 20 years. Together, we cooperate on this programme to give children living in slums access to education and to provide accommodation for particularly vulnerable children.

2014 Activity

Children who benefit from our support receive school supplies and uniforms. This in-kind assistance, provided since 2012, is crucial for these impoverished communities and will continue. In 2014, a reading project was launched in Nueva Villa, a disadvantaged neighbourhood where a large number of our individually sponsored pupils live. This project to involve children and their community was intended to give them a taste for reading and foster a positive attitude towards education.

Our administrative support for the Children’s Village, which accommodates around 15 children in precarious circumstances in 3 activity houses, continued this year, specifically through the renovation of these homes.

At the end of 2014, around 100 children, the majority of them individually sponsored, benefited from this support.
La Chaîne de l’Espoir has been working in direct collaboration for 10 years with the surgical and medical teams at the Cardiovascular and Thoracic Surgery Centre at Fann National Teaching Hospital in order to develop cardiac surgery and, since 2014, interventional cardiology in Senegal. Because child heart disease is a major health issue in West Africa, a project to build a heart institute began in 2012. Thanks to the Cuomo Foundation, which has given its financial support to the construction and equipping of the Cuomo Paediatric Heart Institute of Dakar, this project has now become a reality. While directing the project, La Chaîne de l’Espoir also pursues its objective of training a full and operational team for the Institute’s opening, scheduled for the beginning of 2017.

2014 Activity

- **Interventional Cardiology Missions (cardiac catheterisation)**
  The first 2 interventional cardiology missions, which La Chaîne de l’Espoir organised in 2013, attested to Professor Bara Diop’s team’s excellence in performing coronary catheterisation. Continuous practice (100 procedure a year, mostly outside of missions) has helped them not only to solidify their knowledge but also to make enormous progress towards mastering the necessary technical skills. The team’s training continued in 2014 with the organisation of 3 themed 7-day missions in April, June and November.

  The first mission, led by Dr Emmanuel Boiffard of La Roche sur Yon Regional Hospital, was intended to train Professor Bara Diop’s team in performing coronary angioplasties. On the agenda: review previous patient’s files, patient selection, therapeutic indications, practical training, daily use of equipment and 1 postdoctoral training session in the presence of hospital and private practice cardiologists, thoracic surgeons and paramedical personnel. 17 procedures (12 angioplasties, 5 diagnostic tests) were carried out.

  The second mission was led by Professor Patrick Guérin of Nantes Teaching Hospital. The objective was to begin paediatric cardiac catheterisation after a year devoted to adult catheterisation. The focus was on congenital heart defect diagnosis (exploration, overview, etc.) and treatment (Atrial septal defects and patent ductus arteriosus occlusion). 14 procedures (7 diagnostic tests, 7 therapeutic procedures) were carried out.

  The third mission was conducted by Professor Gilles Grollier of Côté de Nacre Teaching Hospital. This training session focused on coronary angioplasty and mitral valvuloplasty and included daily staff meetings to discuss therapeutic indications and results of interventions. 9 procedures (complex angioplasties, mitral valve surgeries) were carried out.

  The outcome of these missions is very satisfactory: an operational, motivated and serious team that has acquired the necessary skills and become autonomous, that is invested in the project and that has the desire to progress in order to attain its objectives. Training will continue in 2015 with 4 missions scheduled.

- **Surgical Missions**
  2 missions took place in April and November 2014, led by Professor Mohamed Ly of the Centre Chirurgical Marie Lannelongue in Plessis-Robinson and Dr Daniel Roux of the University Medical Centre of Toulouse respectively.

  The training that was provided over the course of these 2 missions was, for the most part, practical and focused on congenital deformities (tetralogy of Fallot, ventricular septal defect) and acquired illnesses (mitral insufficiency). 15 young patients benefited from interventions.

The Cuomo Paediatric Heart Institute of Dakar

In 2014, the project’s finalised feasibility study made it possible to develop a specialised programme in the sub-region (Senegal, Mali, Burkina Faso, Togo, etc.) with 2 main goals: the construction of a facility dedicated to paediatric cardiology and the training of specialised medical teams.

- **The Programme**
  The Institute is the result of a collaboration between the Cuomo Foundation (financed construction and equipment), La Chaîne de l’Espoir (management), Fann National
Teaching Hospital and the Ministry of Health and Social Affairs (local partners). The Italian organisation Bambini Cardiopatici Nel Mondo and the NGO, Terre des Hommes Suisse, are also essential contributors to this project.

The Institute will be fitted with 10 hospital beds, 10 intensive care beds and modern technical services including 2 operating suites and a consultation department. Through being integrated into the Fann Cardiovascular and Thoracic Surgery Centre, this facility will benefit from access to its logistics facilities and will foster communication between the departments (medical imaging, laboratory, etc.). As a centre for medical and surgical care as well as training, the Institute will meet all international construction regulations and specifications linked to the hospital environment.

In addition, a Children’s House, conceived of to accommodate pre and post-operative patients and their families, will be built to house children free of charge providing the best possible conditions and optimal comfort during their convalescence.

The facility is in its final phase of conception as well as the building and its equipment. The objective is to open the Institute at the beginning of 2017, with the first stone having been laid in June of 2015.

The entirety of this programme represents an investment of €6 million (€5 million for construction and equipment). A foundation created by the partners will support the Institute for a period of minimum 5 years in order to guarantee sustainability.

**Medical Team Training**

With the prospect of the Institute’s opening at the beginning of 2017, a complete and operational team is required in advance in order to ensure quality medical and surgical care from the very beginning.

The training programme’s course focusses specifically on the treatment of child heart disease through 3 disciplines: cardiology, cardiac surgery, and interventional and diagnostic cardiac catheterisation. It is based, on one hand, on the organisation of medical and surgical missions at the Fann Cardiovascular and Thoracic Surgery Centre with teams from La Chaîne de l’Espoir, Bambini Cardiopatici Nel Mondo and Terre des Hommes Suisse and, on the other hand, on internships at partner European hospital facilities like San Donato Hospital in Milan, University Hospital of Lausanne, Necker Children’s Hospital in Paris, etc.

7 doctors (surgeons, anaesthetists and cardiologists) and 24 paramedical staff members (certified registered nurses and biomedical technicians) were selected to participate in a training programme and become, when the time comes, the first team at the Institute.

**Outlook**

The programme includes 8 training missions per year until the opening of the Institute in 2017. 4 interventional cardiology missions are already scheduled for 2015 and a surgical mission took place in February.

**Speciality:** Cardiac Surgery and Interventional Cardiology

**Programme Director:** Dr Dominique Tournay (anaesthetist, France) - Professor Mouhamadou Ndiaye (surgeon, Senegal) - Professor Bara Diop (cardiologist, Senegal)

**Missions:** February, April, June and November 2014

**Location:** Dakar - the Cardiovascular and Thoracic Surgery Centre at Fann National Teaching Hospital

**Funding:** La Chaîne de l’Espoir/Cuomo Foundation/Private partners
The Education Aid Programme in Thailand is established in Buriram Province, a poor rural region in the northeast of the country. Activities to support education for needy children in this area depend heavily on the local team and a reliable network of teachers who are engaged in promoting the progress of these pupils. La Chaîne de l’Espoir’s objective is keeping children in school, which is often difficult because of the poverty they face. For the most part we intervene in primary, secondary and technical schools.

2014 Activity

Individual sponsorship allows children to benefit from scholarships, which cover the costs of education (school supplies, uniforms, meals), and give them access to healthcare.

The programme also develops short and long-term projects to reinforce the assistance provided for individually sponsored children and to reach children in particularly precarious situations. Ongoing activities include the House of Hope, a facility which opened in 2010, where around forty orphaned, abandoned or abused children are cared for. Renovations, which began in 2014 and continue in 2015, will improve accommodations. The team that cares for the children has taken part in multiple training programmes to enrich and improve the quality of that care.

Dental check-ups and, since 2014, ophthalmologic examinations are also part of ongoing activities put in place to improve the healthcare provided by sponsorship to 2,500 pupils in 2014.

At the end of 2014, a little over 3,100 children had benefited from individual sponsorship.

In 2015, La Chaîne de l’Espoir hopes to increase collective action in order to better respond to the needs of the children and increase the number of children who benefit from this programme.

**ACTIVITY:** Sponsorship – Education Aid  
**PROGRAMME DIRECTORS:** Sophie Rollin (France) - Philippe Theard (Thailand)  
**LOCATION:** Buriram Province - Ayutthaya Province  
**FUNDING:** La Chaîne de l’Espoir/Sponsors/Private partners
Togo

GENERAL PAEDIATRIC SURGERY

La Chaîne de l’Espoir has been developing a general paediatric surgery programme in Togo since 2012. The year 2014 represented a meaningful transition for general paediatric surgery missions as well as for neurosurgery missions. In short, due to the ever changing complexities and logistics, La Chaîne de l’Espoir rescheduled all its missions for 2015.

2014 Mission

For logistical reasons, only a single paediatric surgery mission was carried out in Togo in July 2014 by Professor Hubert Tekou, chief of paediatric surgery at Sylvanus Olympio University Hospital in Lomé, with the assistance of Professor Grégoire Akakpo.

This mission took place at the Public Hospital Centre in Kpalimé (120 km northeast of Lomé) under the auspices of La Chaîne de l’Espoir, represented by Dr Charlotte Sgro, an anaesthetist at Bordeaux Teaching Hospital.

On this 10-day mission more than 250 children were seen in consultation and 123 interventions took place on 89 patients with illnesses requiring general surgery (inguinal herniae, hydrocele testis etc.) as well as maxillofacial reconstructive surgery (cleft lip and palate).

In 2015, La Chaîne de l’Espoir will renew its support for missions carried out by teams led by Professor Hubert Tekou and Professor Grégoire Akakpo in Togo’s provincial hospitals.

SPECIALITY: General Paediatric Surgery
PROGRAMME COORDINATOR: Pierre RAINGEARD
MISSION: July 2014
LOCATION: Kpalimé – Public Hospital Centre
FUNDING: La Chaîne de l’Espoir
Since 2002, La Chaîne de l’Espoir has supported an education aid programme giving needy children the opportunity to continue their education. This programme is carried out in partnership with La Chaîne de l’Espoir Togo and various activity centres in primary and secondary schools in Tokoin, one of Lomé’s disadvantaged neighbourhoods.

2014 Activity

Individual sponsorship covers children’s needs 100%. They benefit from in-kind general education assistance including school supplies, uniforms, clothing and tuition as well as healthcare. The in-kind support for pupils also includes nutrition and preventative care in the form of meals distributed each day at school and personal hygiene kits. Their access to healthcare is organised through medical follow-up by a team of local doctors. The local community is included through the different services provided to children.

The Education Aid Programme also includes activities in the supported schools which aim to improve the learning environment for pupils. The canteen, which was installed in 2012 by La Chaîne de l’Espoir in the primary school in Adjallé, provides a daily meal to all 1,100 pupils.

The vocational training project, which began in 2012 and continues today, helps young people who do not attend school to learn a craft and find gainful employment. In 2014, 13 apprentices learned trades, such as cosmetology or seamstress, with artisans in Lomé. The support these young people receive consists of scholarships to cover fees, access to healthcare and help finding employment once their training is complete.

At the end of 2014, more than 800 children had benefited from individual support.

In 2015, La Chaîne de l’Espoir hopes to increase the number of collective projects in schools to improve the learning environment and increase the number of children who benefit from the programme.

**ACTIVITY:** Sponsorship – Education Aid  
**PROGRAMME DIRECTOR:** Sophie ROLLIN (France) - La Chaîne de l’Espoir (Togo)  
**LOCATION:** Lomé  
**FUNDING:** La Chaîne de l’Espoir/Sponsors/Private donors
Communication: 2014 Essentials
RADIO, PRINT AND TV

La Chaine de l’Espoir
La Revue Associations, La Chaine de l’Espoir an interview with Dr Eric Cheysson - October • La Croix, Le monde de la solidarité a changé - December • Le Point, La Chaine de l’Espoir fête ses 20 ans - December • Le Quotidien du Médecin, 20 ans d’espoir pour les enfants - December • RTL « On est fait pour s’entendre » - December • Canal + « Faites tourner », Dis quand reviendras-tu ? a documentary shot in Thailand by Sandrine Kiberlain - April • RTL « Le journal inattendu », Natalie Dessay, an ambassador for education programmes in India - December • Regional daily newspapers and France 3 Région, “Healthcare for Children in France”.

Afghanistan
France 24, story on the FMIC’s new Mother and Child Centre - February • France Info, Nous sommes bien décidés à rester en Afghanistan » with Dr Eric Cheysson - April • Midi Libre, Portrait de missionnaire à l’IMFE/ Bernard Ducassy - May • Femme Actuelle, Etre maman à Kaboul - August • Afghanistan Times, FMIC expands services, health programs - August • Ouest-France, Les afghanes prennent leur santé en main - November • Le Figaro, La semaine de l’Afghanistan – November

The Middle East
Syrian Child Refugees: France 2 « Envoyé Spécial » - January • La Croix « Autrement Dit » Opérer les enfants syriens réfugiés en Jordanie - February • Marie-Claire, Comment aider les enfants syriens ? - March • Le Journal du Dimanche, SOS pour les enfants de Syrie - June • La Dépêche, Enfants syriens - December
Child Refugees in Iraqi Kurdistan: Le Parisien, Nassir et Nourhane enfin sauvés - October • Canal + « Le Grand Journal », Nassir et Nourhane sauvés de l’enfer - October • RTL « RTL Matin » - October and December • Europe 1 » Europe1 Week-end « - November
Also: M6 « 19/45 » - October; France3 « 19/20 » - October; BFM TV - October; RMC « Bourdin Direct » - October; Mon Quotidien, Nassir et Nourhane rapatriés en France - October

Congo-Brazzaville
France 24, Les petits cœurs de Brazzaville (26mn) - February • Les Dépêches de Brazzaville - Congo, les petits cœurs de Brazzaville - March • France Ô, La mission du cœur (52 mn) - November (also covered by Télérama and L’Obs) • La Croix, Aux couleurs de l’espoir - November

« La Glace à la vanille » by Alain Deloche edited by Le Cherche-Midi, April 2014
France Info « L’invité de 19h15 » • Europe 1 « C’est arrivé demain » • Arte « 28 minutes » • Radio Classique « L’invité du soir » • France 5 « C’est à Vous » • France 2 « C’est au programme » • France 2 « Thé ou Café » • France 5 « Les Maternelles » • RTL « Le journal inattendu », La Croix, Chirurgien de cœur (feature) • Le Monde, Chirurgien de cœur (feature) • Le Figaro (feature) • France 2 « Le Jour du Seigneur »

Conferences/Conventions/Exhibitions/Auctions/Galas
“Lundis à La Chaîne” (every first Monday of the month) • Grand Prix Photo Saint-Tropez - April/May • “Futurapolis” by Le Point - May • 100e Congrès des Notaires de France - June • ACSE Gala - June • “Cœurs de créateurs” auction - July • Charity Day - September • GLTSG Gala - November • The 1st International Organisation of La Francophonie Economic Forum in Dakar - December • the National French College of Gynaecology and Obstetrics - December • “Opération Noël Magique” in La Baule - December

Sports Events
The “Bon’ Eure” tennis tournament - April • “Bouger pour des enfants” - April • “Trail du Josas” - April • “La Compète de Paris” - May • “La Course des Héros” - June • 5th Saint-Nom-La-Bretèche Golf Open - June • Auray-Vannes Half Marathon - September • Paris 20km - October

Print Advertisements (free of charge or at preferential rates)
Notre Temps - January • Parents and Infos Bébés - March • Elle - April and September • Le Nouvel Economiste - November • La Vie - December • Le Medef “C’est à vous” - December • Parenthèse - December
Organisation and management

Principals: Funding and Activity

Governance

Human Capital
The organisation has 4 principal sources of funding:

- **The general public** represents La Chaîne de l’Espoir’s principal source of revenue. Individual donors support the organisation’s activities either through one-off donations to fund paediatric operations, or through regular donations which fund mid to long-term projects, principally the organisation of local healthcare and training missions. For the most part, our education programmes are funded through individual sponsorship, a type of regular donation which fosters a personal relationship with a child abroad. 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.

- **The companies and foundations** which fund, in full or in part, La Chaîne de l’Espoir’s large projects do so through long-lasting partnerships, especially when it comes to hospital projects, healthcare, personnel training programmes and medical equipment projects. They also contribute to the Healthcare for 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 (athletic events, auctions, etc.) to encourage employees to rally around a common cause.

- **Public and private corporate partners** support La Chaîne de l’Espoir’s larger projects involving construction, renovation or projects to equip hospital facilities as well as training programmes for local doctors and surgeons.

- **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.) Our activities are promoted to donors and partners through excellent media coverage (TV broadcasts, radio, free TV advertising, press articles) and communications campaigns.

- See Acknowledgements/List of Principal Contributors
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 (Healthcare for Children in France, healthcare missions abroad, education programmes, 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, elementary education, medical equipment or hospital projects.

• See Programmes, by country/Funding

Volunteers and In-Kind Donations

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

• Medical Volunteers: In 2014, 133 missionaries volunteered for a total of 2,049 days for La Chaîne de l’Espoir, which represents a value of over €546K. These surgeons, doctors, nurses and medical technicians ensure the success and professionalism of La Chaîne de l’Espoir’s medical and paramedical missions abroad.

• Host Families: In 2014, 89 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 5,340 days as well as the invaluable gift of serving as ambassadors for our organisation and witnesses to our work.

• Head Office Volunteers: Around 40 volunteers working in our head office contributed a total of 1,649 days of their time. They actively participate in administrative tasks, fundraising and the organisation of missions abroad.

• Regional Branches: 16 branches with about 100 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’s visibility and raising funds. The monetary value of these activities is estimated at €890K.

• In-Kind Donations Medical materials and equipment also represent an important contribution valued at €1,134,763. Professional contractors also provide a variety of goods and services free of charge: communications, studies and facilities.

• Skills-Based Sponsorship: Lastly, skills-based sponsorship, qualified people who make their skills available to us, is 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.

Principal Aspects of Relationships/Agreements with French and Foreign Organisations Operating on Behalf of La Chaîne de l’Espoir

La Chaîne de l’Espoir’s collaboration with other organisations is generally 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 2014: ALIMA, Bien-Etre et Développement (Benin), The French Medical Institute for Children (Afghanistan), Terre D’Azur (Burkina Faso), Assohuma (Burkina Faso), SOS MAO Crianças (Brazil), SIFPAR (Cambodia), Mith Samlanh/Friends (Cambodia), Congo Assistance (Congo Brazzaville), La Fondation Chenn Espwa (Haiti), the “Paradis des Indiens” Foundation (Haiti), TAABAR (India), The Maputo Heart Institute (Mozambique), Children Protection Centers and Services (Nepal), Enfants des Andes (Peru), Children of Africa (Ivory Coast).

La Chaîne de l’Espoir also collaborates with La Chaîne de l’Espoir branches located in other countries (Germany, Belgium, Cameroon, Iran, Lebanon, and Togo).

New Projects

In 2014, La Chaîne de l’Espoir began a certain number of new projects and completed others:

• At the Head Office

La Chaîne de l’Espoir/Chain of Hope – Europe was officially established by 5 leading European NGOs, La Chaîne de l’Espoir (France), La Chaîne de l’Espoir (Belgium)/Keten van Hoop België, Bambini Cardiopatici Nel Mondo (Italy), Cadeia da Esperança (La Chaîne de l’Espoir Portugal) and the Robin Aid Foundation (Germany). By sharing resources and expertise, these member organisations will become more effective and have greater name recognition. The objective is to reduce individual activities and replace them with larger collaborative projects.

On November 25th, 2014, Carlo d’Asaro Biondo (President of Google for Southern and Eastern Europe, the Middle East and Africa), Dr Eric Cheysson and Professor Alain Deloche met at Google’s Paris office to announce the founding of La Chaîne du Savoir, an endowment...
for funding La Chaîne de l’Espoir’s projects that take advantage of new technologies to make surgery and healthcare accessible to the greatest number of people in disadvantaged countries.

• **In Afghanistan**, La Chaîne de l’Espoir pursued its activities supporting women and children. On August 10th, 2014, Dr Eric Cheysson travelled to Kabul to lay the foundation stone of the New Afghan Children’s House which will accommodate a greater number of pre and post-operative patients being treated at The French Medical Institute for Children. The current Children’s House, opened in 2008, is over capacity. In addition, construction continued on a new building that will house a gynaecology and obstetrics unit at the FMIC.

• **In Cambodia**, the Centre for Neurosciences of Phnom Penh was inaugurated in October 2014. It has a 135-bed capacity and is in compliance with international norms. The centre aspires to provide treatment and follow-up services, operating on up to 1,500 patients a year, over half of whom will be children and young adults. La Chaîne de l’Espoir ensures the quality of technical expertise, equipment and a training programme for medical and paramedical personnel.

• **In Congo-Brazzaville**, in response to a request from Congolese authorities, La Chaîne de l’Espoir is contributing its expertise to the Brazzaville Heart Institute project, a regional training and treatment centre for cardiovascular disease in adults and children.

• **In Iraqi Kurdistan**, La Chaîne de l’Espoir mobilised to come to the aid of displaced populations fleeing persecution in other parts of Iraq in great numbers. La Chaîne de l’Espoir transferred seriously injured children to France and intervened to improve treatment for children in intensive care at The Erbil Paediatric Hospital.

• **In Senegal**, where the child mortality rate linked to heart disease is high due to a lack of specialised care, the project to build the Cuomo Paediatric Heart Institute in Dakar was approved. Construction began in the spring of 2015 for the Institute’s opening in 2017. It benefits from financial support from the Monegasque Elena Cuomo Foundation and collaboration with member organisations of Chaîne de l’Espoir/Chain of Hope – Europe.

La Chaîne de l'Espoir’s Legal Structure

La Chaîne de l’Espoir, established in accordance with the July 5th, 1901 French law governing non-profit organisations, was registered (#99/4993) on December 12th, 1994 at the Paris Prefecture.

The Scope of La Chaîne de l’Espoir’s Annual Report


La Chaîne de l’Espoir’s Members

La Chaîne de l’Espoir has 172 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 number the Executive Committee consisting of a president, two vice presidents, a general secretary, a deputy general secretary and a treasurer.

Operational management is overseen by a chief executive director, a chief administrative and financial director, a director of development and a director of programmes.

La Chaîne de l’Espoir’s Board of Directors, 2014

**The Executive Committee:**
President:
Dr Eric CHEYSSON
Chief of Vascular Surgery at René Dubos Hospital, Pontoise (France)
End of term: June 2017

Vice Presidents:
Dr Philippe VALENTI
Hand surgeon at Jouvenet Clinic, Paris (France)
End of term: June 2017

Dr Daniel ROUX
Cardiac surgeon at University Medical Centre of Toulouse (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
Vice Director General
End of term: June 2017

Members:
Professor Gérard BABATASI
Chief of Cardiac Surgery at Côté de Nacre Teaching Hospital, Caen (France)
End of term: June 2020

Valérie BERNIS
GDF SUEZ
Assistant General Director
End of term: June 2020

Dr Michel CYMES
ENT doctor, Paris (France)
End of term: June 2017

Jean-François DELEVAL
Engineer
End of term: June 2017

Gonzague DESFORGES
Engineer
End of term: June 2020

Philippe DUMAS
Inspector General of Finances
End of term: June 2017

Denis DUVERNE
AXA Group
Non-executive Director
End of term: June 2020

Jean-Claude LAFEUILLADE
Engineer
End of term: June 2017

Professor 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 2018

Dr Xavier RAINGEVAL
Anaesthetist, Paris (France)
End of term: June 2018

Professor YANN REVILLON
Former Chief of Paediatric Surgery at Necker Children’s Hospital, Paris (France)
End of term: June 2019

Professor François-Xavier ROUX
Former Chief of Neurosurgery at Saint Anne Hospital, Paris (France)
End of term: June 2019

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 2015
La Chaîne de l’Espoir’s 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’s missions and activities are carried out properly.

- **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.

- **The Risk and Internal Oversight Committee**
  The Risk and Internal Oversight Committee is an internal supervisory organ which actively promotes risk prevention and the observance of the rules of governance. It analyses risks faced by the organisation (risk mapping) and ensures that the organisation and its procedures take these risks into account. It also guarantees that the organisation is in compliance with laws and rules of good governance, that formalised procedures with adequate management controls are in place and that the production and external audit of company accounts are carried out according to regulations.

**Conflicts of Interest**
La Chaîne de l’Espoir has established a procedure designed to avoid conflicts of interest with its partners and suppliers.

**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.

**Evaluating Impact and Efficacy**
Direct contact with healthcare authorities in countries involved in La Chaîne de l’Espoir’s programmes allows us to monitor their utility and efficacy with accuracy.

Before putting a programme into place, multiple missions take place in order to evaluate context, determine needs, the number of beneficiaries, objectives, activities, desired results, human and material capital as well as the viability and sustainability of the proposed programme. A provisional budget is established once these elements have been defined.

Programmes are monitored and evaluated based on these criteria. Indicators are established to analyse results, which determine whether programmes are continued, expanded or terminated.

If necessary, programme evaluations can be carried out by specialised external structures.
La Chaîne de l’Espoir relies on a team of salaried employees and a substantial network of volunteers including administrators, host families, doctors, paramedical personnel and technicians in France, as well as volunteer doctors, paramedical personnel and technicians for international missions.

**Number of Employees, 2014**

At the end of 2014, La Chaîne de l’Espoir employed 38 full-time equivalent workers. This is an increase from previous years and indicates La Chaîne de l’Espoir’s continuing evolution.

Directly dependent local structures also employ numerous local and expatriate workers:

- **The Afghan Children’s House, Afghanistan:** 20 employees
- **The Children’s Pavilion in Phnom Penh, Cambodia:** 22 employees
- **Sponsorship Programme, Thailand:** 8 employees

When it comes to skills-based sponsorship, two 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 medical technicians taking part in long or short-term medical missions.

Furthermore, over 150 volunteers in Paris and other French cities contribute their logistical, technical, administrative and financial expertise on a regular basis. They also organise fundraising events.

**Remuneration 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 worked hard to implement a consistent pay scale and carries out regular assessment interviews with each employee.

Combined, the 5 highest earner’s yearly salaries come to €376,573.
Human Capital
2014 Financial Rapport

Treasurer's Report


2015 Budget
Dear Members of the Board and Friends,

I have the pleasure of presenting you with the 2014 Treasurer's Report.

In 2014, La Chaîne de l'Espoir's total resources, including extraordinary items and financial income, came to €19,167K. The AFD contributed an investment subsidy of €2,890K in 2014 which will not appear on the income statement until the completion of the Mother and Child Centre at the French Medical Institute for Children in Kabul, like the subsidy of €5,000K received in 2013. The actual amount of funds received this year amounts to €22,057K.

Total expenditures, including financial and exceptional expenses, came to €19,019K.

This translates to a balance of €147K.

The 2014 numbers are sourced from the standard document of reference, the Resources and Expenditures Statement.

RESOURCES: €19,167K (€22,057K including AFD subsidy)

Overall in 2014, the resources appearing on the Resources and Expenditures Statement came to €19,167K 32.4% more €4,487K than in 2013.

I. State Subsidies:
Besides AFD's investment subsidy, funds from this source are 7 times greater than in 2013 and increased from €608K to €4,198K in 2014. This increase is due to a subsidy from the European Union of €2,300K to fund the programme in Mali to reduce child mortality rate due to malnutrition and illnesses which interact with malnutrition. Other subsidies came from the French Embassy and the AFD to fund activities in Afghanistan.

II. Donations from the General Public:
Income originating from the general public (not including legacies) remains similar to 2013 (€10,374K) at €10,540K (+1.6%). This increase, though modest, is important to note as fundraising costs dropped by 10% (€227K). The net funds raised (donations from the general public minus collection costs) increased by 7.2%, from €7319K to €7762K, which represents a strong performance in these times of economic difficulty.

Donations from the general public remain the organisation's main source of funds (55% to 48% including the AFD subsidy).

III. Legacies and Contributions:
Legacies and contributions came to €915K in 2014, a 36% (€241K) increase from 2013. It should also be noted that legacies in the amount of €1,500K are still being processed, which indicates that this is an ever increasing source of funds.

IV. Private Partners:
Contributions from private partners came to €2,148K, a decrease of 19% (€511K) from the previous year. 2013 was an exceptional year as we received a contribution of the order of €500K to carry out a feasibility study for the Brazzaville Heart Institute. The project is still under consideration.

V. Financial Income:
Financial income amounts to €126K, reflecting a dynamic investment policy to compensate for the consistent decrease of savings interest rates.

La Chaîne de l'Espoir's growth is significant and indicates the diversification of funding sources. Donations from the general public account for slightly more than half of the organisation's revenues, while institutional funding also represents a high percentage, 22% not including subsidies, 32% including the AFD subsidy.

EXPENDITURES: €19,019K (€21,909K including AFD subsidy)

The increase in expenses in 2014 is in proportion to the increase in revenue.

I. Current Expenditure
It should be stressed that supporting services expenses represent only 2% of total expenditure and remain modest, as do development costs (fundraising, communication, donation management, tax receipts, and data collection) at €3,993K.
expenses have dropped 3% from €4,574K in 2013 to €4,443K in 2014 and represent 23% of all expenditures.

II. Social Aid Missions
All increases in revenue were spent on social aid missions abroad. Thus, programme expenditures increased greatly and represent €12,892K spent on-site and €1,185K in commitments planned for 2015.

In terms of percentages, we spent 68% of revenue on social aid missions not including subsidies or future commitments. If the €2,890K we received in 2014 for the construction of the Mother and Child Centre at the French Medical Institute for Children in Kabul (included on the balance sheet) and the €1,185K of committed funds are included, the percentage exceeds 77%.

III. Provisions
La Chaîne de l’Espoir, out of prudence, saw fit to initiate a provision for risk of €500K due to the potential cost overrun of phase II of the construction of the hospital in Kabul.

**NET INCOME ALLOCATION**

As seen above, the fiscal year shows a surplus of €147K which we propose to allocate as follows.

In addition, the balance includes spending for the already completed Centre for Neurosciences of Phnom Penh in Cambodia, which resulted in a project reserve of €300K.

The Board of Directors proposes to use this surplus to create a new project reserve of €200K for phase II of the Kabul project, thus confirming our 2013 engagement to co-finance this project with AFD.

**CONTRIBUTIONS AND IN-KIND DONATIONS**

In 2014, the organisation benefited 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 the 2014 fiscal year, they contributed about 2,049 business days, a value of €546K.

II. Volunteers at the Head Office and Regional Branches
There are 42 volunteers at the head office and 105 working at regional branches. During the 2014 fiscal year, the time contributed by volunteers working for the organisation is estimated to be 7,584 business days, a value of €1,211K.

III. Premises
Paris Hospitals and Public Assistance (Assistance Publique - Hôpitaux de Paris, AP-HP) provides La Chaîne de l’Espoir with 960m² of office space at a price far below market value. The savings this year came to about €345K.

IV. Disposable Goods and Medical Equipment
Up to €1,135K worth of medical equipment and disposable goods were donated by various hospital facilities and laboratories in 2014.

V. Advertising Space
Various advertisers and partners contributed €174K worth of advertising space and other forms of communication (press, radio, TV, documentaries) in 2014.

VI. Host Families
The crucial importance of the work carried out by host families who welcome children to France cannot go unrecognised. They welcome children into their homes (accommodations, food, activities) and accompany them when they travel (to the airport, hospital consultations, meetings to coordinate with the organisation, etc.). In 2014, it is estimated that the total value contributed by these volunteers, who welcomed 89 children, comes to €534K.

VII. Skills-Based Sponsorship
Our partners have made two employees available to us, constituting a skills-based donation of €148K.

The total monetary equivalent of all in-kind voluntary contributions is estimated at €4,094K.

All included, La Chaîne de l’Espoir now has some €26M at its disposal to carry out its projects.
The treasurer proposes a provisional budget of €18,180K, 4.4% less than in 2014.

The ECHO subsidy for the emergency programme in Mali cannot be renewed. The project was concluded in January 2015 as scheduled.

I. Income
Estimated income: €17,400K:
- From the General Public: €10,650K is expected, which represents an increase of 1%, reflecting continuing economic difficulty.
- Fundraising from Partners and Sponsors: €2,200K is expected, which represents a slight increase of 2% thanks to solid long-lasting partnerships with our sponsors.
- State Subsidies: The 2015 budget amounts to approximately €2,800K, bearing in mind AFD’s ongoing support as well as that of the France Embassy in Afghanistan. A subsidy of €1M is also included in the budget; however, we are already aware that we will not receive this subsidy. We are therefore considering other funding opportunities and substantial steps have been taken in that direction.

II. Expenses
All expenditures are estimated at €17,580K. They breakdown as follows:
- Healthcare for Children in France: Similar to the 2014 budget, about 100 children will receive care for around €1,500K. Children are brought to France from abroad to receive surgical care in Paris, Toulouse, Nantes, Caen, Lyon, Rennes or Nice.
- Healthcare for Children Abroad: An estimated €9,100K will go to the listed missions abroad in Afghanistan, Cambodia, Colombia, Mozambique, Togo, Senegal, Iraq, Jordan, etc.
- Head Office Operational Expenses: At €400K costs will remain stable. They were reduced as much as possible in 2013 and should not exceed 2% of total expenditure.
- Development: This sector concerns the following:
  - Direct Marketing: €3,000K
  - Private and Institutional Partnership: €500K
  - Communication: €750K

The treasurer’s report highlights the following key figures for 2014:

I. Supporting services expenses represent 2.7% of all spending in 2014 as compared with 4% in 2013, which reflects our efforts to reduce supporting services expenses.

II. Fundraising costs, as compared with funds contributed by the general public (excluding legacies and contributions), comes to 26% vs. 29% in 2013. There was also a slight increase in funds contributed, 7.2% more net.

III. If the €2.89M investment subsidy for the construction of the FMIC Mother and Child Centre in Kabul is included in these calculations, this percentage increases to a very satisfactory 77% in programme spending and only 20% on operation and development. This is an accurate picture of our activity in 2014.

When observing exclusively the values presented in the Use of Resources Statement, the percentages corresponding to programme spending, 68%, and non-project spending, 23%, conform to our general objectives, justify the success of our fundraising and indicate our efforts to keep general costs low.

La Chaîne de l’Espoir’s balance sheet total came to €19,464K, up 39% from the previous year. Net equity increased by 23% (available assets, €14,083K; contingent liabilities, €2,887K) to €11,196K and continues to indicate financial stability and a total absence of risk.

Equity capital increased by almost 45% thanks to the investment subsidy from AFD of €9M (€5M in 2013, €4.4M in 2014 and €1.5M outstanding).
2015 OUTLOOK

The figures established in the first few months of 2015 seem to confirm the projects and operational budget approved by the Board of Directors in March, not including institutional funding. Fundraising from the general public remains stable and comparable to 2014. State and private subsidies are in line with the projected budget.

CONCLUSION

In 2015, La Chaîne de l’Espoir will continue to pursue its established strategies:

- To increase regular donations by direct debit
- To increase legacies and contributions
- To develop sponsorship policies to increase partnerships and collaborative projects
- To develop hospital projects by advancing several projects being considered in 2015, specifically the Paediatric Heart Institute in Dakar
- To be prepared for emergency relief operations

Despite the strained economic climate, the organisation has successfully developed its activities, improved its management ratio and diversified its funding.

Lastly, I wish to emphasise the importance for the organisation of in-kind donations this year. They not only represent a contribution of more than €4M but also, and most of all, a driving force for the development of La Chaîne de l’Esper’s activities at once maintaining our spirit of partnership and advancing our domestic and international outreach.

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 on Annual Accounts

FISCAL YEAR ENDING DECEMBER 31ST, 2014
### ASSETS (€)

<table>
<thead>
<tr>
<th>Description</th>
<th>31/12/14</th>
<th></th>
<th>31/12/13</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fixed assets</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Concessions, patents, similar rights</td>
<td>134,455</td>
<td>126,607</td>
<td>7,849</td>
<td>13,081</td>
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</tr>
<tr>
<td>Other tangible fixed assets</td>
<td>856,547</td>
<td>750,671</td>
<td>105,875</td>
<td>115,022</td>
<td></td>
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<tr>
<td>Tangible assets in progress</td>
<td>5,242,960</td>
<td>-</td>
<td>5,242,960</td>
<td>2,277,218</td>
<td></td>
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<tr>
<td>Other financial assets</td>
<td>24,042</td>
<td>-</td>
<td>24,042</td>
<td>23,441</td>
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<td><strong>Total Fixed Assets</strong></td>
<td>6,258,004</td>
<td>877,278</td>
<td>5,380,726</td>
<td>2,428,762</td>
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<td><strong>Current assets</strong></td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Advances and prepayments on orders</td>
<td>2,419</td>
<td>-</td>
<td>2,419</td>
<td>3,548</td>
<td></td>
</tr>
<tr>
<td>Other claims</td>
<td>2,457,882</td>
<td>-</td>
<td>2,457,882</td>
<td>676,181</td>
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<tr>
<td>Investment securities</td>
<td>4,142,934</td>
<td>-</td>
<td>4,142,934</td>
<td>338,247</td>
<td></td>
</tr>
<tr>
<td>Liquid assets</td>
<td>7,153,265</td>
<td>-</td>
<td>7,153,265</td>
<td>10,507,010</td>
<td></td>
</tr>
<tr>
<td>Prepaid charges</td>
<td>127,064</td>
<td>-</td>
<td>127,064</td>
<td>72,858</td>
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</tr>
<tr>
<td><strong>Total Current Assets</strong></td>
<td>13,883,565</td>
<td>-</td>
<td>13,883,565</td>
<td>11,597,845</td>
<td></td>
</tr>
<tr>
<td>Foreign exchange gains</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
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</tr>
<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td>20,141,569</td>
<td>877,278</td>
<td>19,264,291</td>
<td>14,026,607</td>
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</tr>
<tr>
<td><strong>PLEDGES</strong></td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Legacies to be processed</td>
<td>-</td>
<td>-</td>
<td>2,491,747</td>
<td>2,424,936</td>
<td></td>
</tr>
</tbody>
</table>

### LIABILITIES (€)

<table>
<thead>
<tr>
<th>Description</th>
<th>31/12/14</th>
<th></th>
<th>31/12/13</th>
<th></th>
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</tr>
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<tbody>
<tr>
<td><strong>Non-profit association funds</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Non-profit association funds</td>
<td>5,372,320</td>
<td>-</td>
<td>5,372,320</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Reserve for various projects</td>
<td>900,000</td>
<td>-</td>
<td>1,057,000</td>
<td>-</td>
<td></td>
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<tr>
<td>Balance carried forward</td>
<td>(848,265)</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td><strong>Fiscal year outcome</strong></td>
<td>147,474</td>
<td>-</td>
<td>(1,005,265)</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Investment subsidies</td>
<td>9,400,000</td>
<td>-</td>
<td>5,000,000</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td><strong>Total Non-profit association funds</strong></td>
<td>14,971,529</td>
<td>-</td>
<td>10,424,055</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td><strong>Provisions and dedicated funds</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PROV. for liabilities and charges</td>
<td>540,000</td>
<td>-</td>
<td>40,000</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Dedicated funds</td>
<td>1,064,950</td>
<td>-</td>
<td>996,684</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td><strong>Total PROV. &amp; dedicated funds</strong></td>
<td>1,604,950</td>
<td>-</td>
<td>1,036,684</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td><strong>Debts</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts payable</td>
<td>1,149,350</td>
<td>-</td>
<td>1,625,558</td>
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<tr>
<td>Tax and social liabilities</td>
<td>480,931</td>
<td>-</td>
<td>448,905</td>
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</tr>
<tr>
<td>Other</td>
<td>1,057,530</td>
<td>-</td>
<td>399,291</td>
<td>-</td>
<td></td>
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<tr>
<td>Deferred income</td>
<td>-</td>
<td>-</td>
<td>92,115</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td><strong>Total Debts</strong></td>
<td>2,687,812</td>
<td>-</td>
<td>2,565,868</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL LIABILITIES</strong></td>
<td>19,264,291</td>
<td>-</td>
<td>14,026,607</td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>

The balance sheet, the income/loss account and the annexe to the accounts form a single whole.
<table>
<thead>
<tr>
<th>(€)</th>
<th>31/12/14</th>
<th>31/12/13</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Operating income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fundraising</td>
<td>11,842,334</td>
<td>11,751,504</td>
</tr>
<tr>
<td>Sponsorship income</td>
<td>1,760,730</td>
<td>1,955,904</td>
</tr>
<tr>
<td>Other income</td>
<td>94,231</td>
<td>27,666</td>
</tr>
<tr>
<td>Operating subsidies</td>
<td>4,198,292</td>
<td>608,444</td>
</tr>
<tr>
<td><strong>Total (I)</strong></td>
<td>17,895,586</td>
<td>14,343,518</td>
</tr>
<tr>
<td><strong>Operating expenses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other purchases and external expenses</td>
<td>10,888,847</td>
<td>10,514,366</td>
</tr>
<tr>
<td>Taxes</td>
<td>192,010</td>
<td>222,556</td>
</tr>
<tr>
<td>Salaries and payroll</td>
<td>1,656,694</td>
<td>1,710,539</td>
</tr>
<tr>
<td>Payroll taxes</td>
<td>750,602</td>
<td>768,802</td>
</tr>
<tr>
<td>Depreciation and amortisation</td>
<td>100,250</td>
<td>105,757</td>
</tr>
<tr>
<td>Provisions for risk</td>
<td>500,000</td>
<td>-</td>
</tr>
<tr>
<td>Other charges</td>
<td>3,646,438</td>
<td>1,453,487</td>
</tr>
<tr>
<td><strong>Total (II)</strong></td>
<td>17,734,840</td>
<td>14,775,506</td>
</tr>
<tr>
<td><strong>Operating income/loss (I) – (II) = (III)</strong></td>
<td>160,746</td>
<td>(431,988)</td>
</tr>
<tr>
<td><strong>Financial income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other interest and similar income</td>
<td>94,396</td>
<td>63,332</td>
</tr>
<tr>
<td>Recovery on reserve depreciation</td>
<td>-</td>
<td>28,710</td>
</tr>
<tr>
<td>Positive differences in cost</td>
<td>28,140</td>
<td>6,237</td>
</tr>
<tr>
<td>Net income on disposal of investments and loans</td>
<td>3,466</td>
<td>1,221</td>
</tr>
<tr>
<td><strong>Total (IV)</strong></td>
<td>126,002</td>
<td>99,500</td>
</tr>
<tr>
<td><strong>Financial expenses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interest payable and similar income</td>
<td>6,611</td>
<td>-</td>
</tr>
<tr>
<td>Negative differences in cost</td>
<td>1,946</td>
<td>15,162</td>
</tr>
<tr>
<td>Net expenses on disposal of securities investment</td>
<td>4,345</td>
<td>26,293</td>
</tr>
<tr>
<td><strong>Total (V)</strong></td>
<td>12,902</td>
<td>41,455</td>
</tr>
<tr>
<td><strong>Financial income/loss (IV) – (V) = (VI)</strong></td>
<td>113,100</td>
<td>58,045</td>
</tr>
<tr>
<td><strong>Current income/loss (III) + (VI) = (VII)</strong></td>
<td>273,846</td>
<td>(373,943)</td>
</tr>
<tr>
<td><strong>Extraordinary income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>On management operations</td>
<td>28,695</td>
<td>13,757</td>
</tr>
<tr>
<td><strong>Total (VIII)</strong></td>
<td>28,695</td>
<td>13,757</td>
</tr>
<tr>
<td><strong>Extraordinary expenses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>On management operations</td>
<td>71,723</td>
<td>67,346</td>
</tr>
<tr>
<td>On capital transactions</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Depreciation, amortization and provisions</td>
<td>-</td>
<td>40,000</td>
</tr>
<tr>
<td><strong>Total (IX)</strong></td>
<td>71,723</td>
<td>107,346</td>
</tr>
<tr>
<td><strong>Exceptional income/loss (VIII) – (IX)= (X)</strong></td>
<td>(43,028)</td>
<td>(93,589)</td>
</tr>
</tbody>
</table>
### Auditor's Report on Annual Accounts

The balance sheet, the income/loss account and the annexe to the accounts form a single whole.

<table>
<thead>
<tr>
<th>(€)</th>
<th>31/12/14</th>
<th>31/12/13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carryover of unused funds from previous years</td>
<td>1,116,290</td>
<td>222,766</td>
</tr>
<tr>
<td>Projected use of allocated funds</td>
<td>(1,184,556)</td>
<td>(742,902)</td>
</tr>
<tr>
<td>Income taxes</td>
<td>15,078</td>
<td>17,597</td>
</tr>
<tr>
<td><strong>TOTAL INCOME</strong></td>
<td>19,166,574</td>
<td>14,679,542</td>
</tr>
<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td>19,019,100</td>
<td>15,684,807</td>
</tr>
<tr>
<td><strong>INCOME/LOSS</strong></td>
<td>147,474</td>
<td>(1,005,265)</td>
</tr>
</tbody>
</table>

### VOLUNTARY CONTRIBUTIONS IN KIND

#### Income

<table>
<thead>
<tr>
<th></th>
<th>31/12/14</th>
<th>31/12/13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Volunteers (medical teams)</td>
<td>174,120</td>
<td>1,067,400</td>
</tr>
<tr>
<td>Other volunteers</td>
<td>2,440,160</td>
<td>2,483,685</td>
</tr>
<tr>
<td>In-kind donations (goods and services)</td>
<td>1,480,113</td>
<td>750,319</td>
</tr>
<tr>
<td><strong>Total voluntary contributions in kind</strong></td>
<td>4,094,393</td>
<td>4,301,404</td>
</tr>
</tbody>
</table>

#### Expenses

<table>
<thead>
<tr>
<th></th>
<th>31/12/14</th>
<th>31/12/13</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-kind assistance</td>
<td>174,120</td>
<td>1,067,400</td>
</tr>
<tr>
<td>Volunteer personnel</td>
<td>2,440,160</td>
<td>2,483,685</td>
</tr>
<tr>
<td>Goods and services free of charge</td>
<td>1,480,113</td>
<td>750,319</td>
</tr>
<tr>
<td><strong>Total voluntary contributions in kind</strong></td>
<td>4,094,393</td>
<td>4,301,404</td>
</tr>
</tbody>
</table>
## 2015 Budget

### EXPENSES (€) 2015

<table>
<thead>
<tr>
<th>1. PROGRAMME EXPENSES</th>
<th>12,430</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Healthcare for Children in France</td>
<td>1,500</td>
</tr>
<tr>
<td>- Healthcare Missions Abroad</td>
<td>9,100</td>
</tr>
<tr>
<td>- Education</td>
<td>1,830</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1.2 CURRENT EXPENSES</th>
<th>4,650</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Supporting Services Expenses</td>
<td>400</td>
</tr>
<tr>
<td>- Development</td>
<td>4,250</td>
</tr>
<tr>
<td>- Direct Marketing</td>
<td>3,000</td>
</tr>
<tr>
<td>Services Provided</td>
<td>2,500</td>
</tr>
<tr>
<td>General Expenses</td>
<td>500</td>
</tr>
<tr>
<td>- Communication</td>
<td>750</td>
</tr>
<tr>
<td>Services Provided</td>
<td>410</td>
</tr>
<tr>
<td>General Expenses</td>
<td>340</td>
</tr>
<tr>
<td>- Partnership</td>
<td>500</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1.3 PROVISIONS FOR RISK</th>
<th>500</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Healthcare</td>
<td>-</td>
</tr>
<tr>
<td>- Sponsorship</td>
<td>-</td>
</tr>
<tr>
<td>- Risk</td>
<td>-</td>
</tr>
</tbody>
</table>

**TOTAL EXPENSES** 17,580

### INCOME (€) 2015

<table>
<thead>
<tr>
<th>1. CURRENT INCOME</th>
<th>17,680</th>
</tr>
</thead>
<tbody>
<tr>
<td>- General Public Fundraising</td>
<td>10,650</td>
</tr>
<tr>
<td>- Direct Marketing</td>
<td>8,600</td>
</tr>
<tr>
<td>One-off Donations</td>
<td>4,000</td>
</tr>
<tr>
<td>Regular Donations (automatic debit)</td>
<td>4,100</td>
</tr>
<tr>
<td>Online Donations</td>
<td>500</td>
</tr>
<tr>
<td>- Sponsors &amp; Regular Donations (ed.)</td>
<td>1,750</td>
</tr>
<tr>
<td>- Other Donations (events, etc.)</td>
<td>300</td>
</tr>
<tr>
<td>- Private Partners</td>
<td>2,200</td>
</tr>
<tr>
<td>- Legacies and Contributions</td>
<td>2,000</td>
</tr>
<tr>
<td>- State Subsidies</td>
<td>2,800</td>
</tr>
<tr>
<td>- Other Income</td>
<td>30</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1.2 RECOVERY OF PROVISIONS &amp; TRANSFER OF EXPENSES</th>
<th>500</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Recovery of Healthcare Provisions</td>
<td>-</td>
</tr>
<tr>
<td>- Recovery of Sponsor Provisions</td>
<td>-</td>
</tr>
<tr>
<td>- Recovery of Provisions for Risk</td>
<td>-</td>
</tr>
<tr>
<td>- Financial Recovery</td>
<td>-</td>
</tr>
<tr>
<td>- Transfer of Expenses</td>
<td>-</td>
</tr>
</tbody>
</table>

**TOTAL OPERATING INCOME** 18,180

Operating income/loss 600
Private Partners

Foundations

Institutions

Local/Regional Authorities
Rhône General Council, Cabourg City Hall, Caen City Hall, Créteil City Hall, Deuil la Barre City Hall, Issy les Moulineaux City Hall, La Baule City Hall, Paris City Hall, Saint-Gervais City Hall, Thiais City Hall, Toulouse City Hall, Vénissieux-le-Buisson City Hall.

Hospitals
Paris Hospitals and Public Assistance (Assistance Publique - Hôpitaux de Paris, AP-HP), Monaco Cardio-Thoracic Center, Centre Médical du Château des Côtes Les Loges en Josas, Dijon Blood Transfusion Centre, Sainte Anne Hospital, Caen University Hospital, Dijon Teaching Hospital, Lausanne Teaching Hospital, Nantes Teaching Hospital, Rennes Teaching Hospital, Vannes Teaching Hospital, Boulogne-Billancourt Surgical Clinic, Clinique du Parc Lyon, Jovenet Clinic Paris, Louis Pasteur Clinic Toulouse, Médiopôle Garonne Clinic, Paul d’Egines Clinic Champigny-sur-Marne, Georges Pompidou European Hospital Paris, Hôpital Haut l’Evêque Pessac, Necker Children’s Hospital Paris, Saint-Joseph Hospital Paris, University Medical Centre of Toulouse, Hôpital de la Timone Marseille, Hospices Civils de Lyon, Hôtel-Dieu Paris, Institut Montsouris.

Organisations

Schools and institutions of higher education
Individual donors and sponsors
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Our medical and paramedical teams, our host families, our volunteers, our journalists, our photographers, etc.

Our sponsor
Mireille Darc

Our ambassadors
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La Chaîne de l’Espoir.

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