

ANNUAL REPORT 2022



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Editorial staff
Andrea Atzori
Andrea Borgato
Andrea Iannetti
Angela Bertocco
Anna Talami
Benedetta Roberto
Bettina Simoncini
Chiara Cavagna
Chiara Di Benedetto
Dante Carraro
Elsa Pasqual
Fabio Manenti
Francesca Papais
Giovanni Putoto
Laura Braga
Linda Previato
Mario Zangrando
Oscar Merante Boschin

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Editorial coordination
Francesca Papais
Anna Talami

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Angola
Médicos com África CUAMM
ONG – Escritório de
Coordenamento – Luanda
Rua Projectada A3
Casa No. 2 (Ende 96)
Morro Bento II, Talatona
C.P. 16624 Luanda (Angola)
t. 00244 923 351 224
angola@cuamm.org

Ethiopia
Doctors with Africa CUAMM
NGO Coordination Office
Addis Ababa
Bole Subcity, Woreda 3,
House No. 2434
P.O. Box 12777
Addis Ababa (Ethiopia)
t. 00251 (0) 116620360
t. 00251 (0) 116612712
f. 00251 (0) 116620847
ethiopia@cuamm.org

Mozambique
Médicos com África CUAMM
ONG – Escritório
de Coordenamento
Maputo Av. Mártires da
Machava
No. 859 R/C Maputo
(Moçambique)
t. 00258 21302660
t. 00258 823016204
f. 00258 21312924
mozambico@tvcabo.co.mz

Central African Republic
Médecins avec l'Afrique
CUAMM ONG Bureau
de Coordination
Bangui Rue 1068,
Moyenne Corniche Bangui
(République Centrafricaine)

Sierra Leone
Doctors with Africa CUAMM
NGO Coordination Office –
Freetown
22, Wilkinson Road
t. 00232 79764880
sierraleone@cuamm.org

South Sudan
Doctors with Africa CUAMM
NGO Coordination Office
Juba
c/o TM Lion Hotel Browker
Blvd. Juba (100 meters
from the US Embassy)
southsudan@cuamm.org

Tanzania
Doctors with Africa CUAMM
NGO Coordination Office
Dar es Salaam
New Bagamoyo Road, plot.
No. 14, Regent Estate
P.O. BOX 23447
Dar es Salaam (Tanzania)
t. 00255 (0) 222775227
f. 00255 (0) 222775928
tanzania@cuamm.org

Uganda
Doctors with Africa CUAMM
NGO Coordination
Office – Kampala
Gaba Road Kansanga
Plot No. 3297 – P.O. Box
7214 Kampala (Uganda)
t. 00256 414267585
t. 00256 414267508
f. 00256 414267543
uganda@cuamm.org

Ukraine
МЕДИЧНА КОМАНДА
Chernivtsi (Ukraine),
58029, Chernivtsi, pr-t
Nezalezhnosti, 106

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DONARE CON FIDUCIA

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01/ FOREWORD



AFRICA MUST BE SUPPORTED, NOT EXPLOITED

Father **Dante Carraro**
Director,
Doctors with Africa CUAMM

As another year draws to a close, some compelling reflections by Father Luigi Mazzucato – the late former director of Doctors with Africa CUAMM and an inspirational figure to all of us over the years – come to mind: *“I often think about how war not only foments hatred and violence, but also seems to make us all so much poorer: less open and welcoming, less willing to dialogue with and feel mutual respect for each other, less accepting of those who are different, less willing to work for – rather than turn against – one another (Pope Paul VI), more wary, and less willing to forgive, or to believe in the shared humanity of all of the world’s peoples.”*

These considerations remain all too relevant today. After starting out 2022 by resuming our commitment to COVID-19 vaccination campaigns in Africa, we watched as conflict reared its ugly head both at the doors of Europe, with the launch of the war in Ukraine, and in various parts of Africa, including the ongoing conflicts in Ethiopia’s Tigray Region and Mozambique’s Cabo Delgado Province. While not apparent to all, the cumulative impact of such phenomena on the most vulnerable is dire, with the combination of the rising cost of living, the fall in overseas development assistance and the increasing fragility of health systems making already grim situations still worse.

By January our COVID-19 vaccination campaign in Uganda was in full swing and we were working hard to replicate it in our other African partner-countries, but when the war broke out in Europe, we felt compelled to support those affected by the crisis in Ukraine and Moldova, as well. In the same period, we celebrated our tenth anniversary of work in Sierra Leone, renewing our commitment to invest both in local human resources and that country’s own COVID-19 vaccination campaign; and four years after beginning our work at the Central African Republic’s Bangui Children’s Hospital, we expanded our efforts to rural areas of the country as well, places of deep poverty and ongoing violent clashes and insecurity since 2013.

Among the positive events in 2022 was the consecration of Father Christian Carlassare, the world’s youngest bishop, who – following a brutal assault and subsequent rescue by CUAMM workers not long after Pope Francis named him bishop of Rumbek – was finally able to return to his important work in South Sudan. We also celebrated the graduation from our midwifery school in Lui of ten South Sudanese citizens, eight men and two women now armed with new tools to help move their fragile country forward. In May, our friendship with Professor Alberto Mantovani led to the development of a series of meetings around Italy entitled *CONdividere per CONoscere: A Dialogue on the Post-Pandemic Future of Africa and Europe*. We launched an ambulance transport service in Beira, Mozambique, in the same period, while in July Italian President Sergio Mattarella met with our Mozambique country representative, Giorgia Gelfi, in Maputo. After a flare-up of the conflict in Ethiopia’s Tigray Region, we provided medicine, health equipment and basic necessities to those in need, as well as salaries for health staff, and continued our work in Debre Birhan, in the Amhara Region, where thousands of internally displaced civilians have settled.

It was our honor and privilege to recount all of this and more to Pope Francis at our 2022 Annual Meeting, which took place at the Vatican on 19 November. The Pope’s words were as poignant and clear as always: “Africa must be supported, not exploited. Don’t be afraid to face the hard challenges ahead, to intervene in support of communities living in far-off, violence-filled places with no access to healthcare. Stay by their side!” Thus heartened, and holding in our hearts the many who have supported us and made our work possible over the years, we will do just that, readying ourselves to tackle the inevitable trials of the future.

02/ METHODOLOGICAL NOTES



OUR FUNDAMENTALS

For the past seventy years, Doctors with Africa CUAMM has worked tirelessly to promote and protect the health of people in low-income countries by helping to develop and improve local health systems. While our methods evolve over time to best meet changing local contexts, Doctors with Africa CUAMM's modus operandi has remained constant, featuring:

- the **on-the-ground presence** of health professionals working alongside local actors and institutions, both public and private, to tackle everyday challenges;
- **ongoing dialogue** with public/private local and international institutions to ensure that our interventions are in line with domestic and international health policies and standards;
- **continual training** for international and local staff, with a focus on monitoring and operational research as tools for the continuous improvement of health and healthcare.

PROJECTS

From the start, Doctors with Africa CUAMM has applied this combination of on-the-ground presence and dialogue within a **project framework**, as a driving force for the development of beneficiary settings – from analysis of the situations at hand and definition of the most pressing needs and goals, to the actions to be taken to achieve them. Our project **modus operandi** is thus the way we put CUAMM's mission into action and, together with the field presence of "CUAMM doctors", a guarantee that the most vulnerable can get the care they need. In parallel, we implement project-based activities aimed at improving healthcare systems and service delivery for the benefit of entire communities.

Guiding documents:

– **Strategic Plan 2008-2015:**

Strengthening African health systems: Doctors with Africa CUAMM's contribution to helping the poorest achieve their right to health per the Millennium Development Agenda;

– **Strategic Plan 2016-2030:**

Strengthening health systems to build resilient communities in Africa.

→ <https://www.mediciconlafrica.org/blog/chi-siamo/la-nostra-mission/piano-strategico-2016-2030/>

These strategy documents focus on the following aspects of health systems:

- **accessibility and equitable financing** in order to reduce inequalities;
- **public-private partnerships** in order to optimize, rather than duplicate, joint efforts;
- **continual training of local human resources** in order to build up sustainable institutional capacities;
- **monitoring and evaluation of the performance of interventions and health care systems** in order to optimize efficiency and effectiveness, including through operational research projects on different methodologies, strategies and clinical aspects.

Doctors with Africa CUAMM's priority areas for interventions and for the strengthening of health systems are based on the WHO's three system levels: hospitals, peripheral health centers, and communities.

→ **WHO, 2010: Monitoring the building blocks of health systems: A handbook of indicators and their measurement strategies, Geneva.**

In order to develop project proposals in keeping with these principles, and to achieve both maximum efficacy and project objectives, Doctors with Africa CUAMM follows the guidelines for the planning and analysis of health systems (at both the district and hospital levels) based on the WHO's six "building blocks" framework.

→ <https://sdgs.un.org/goals>

Methodological notes

The end goal was and remains first and foremost to guarantee primary health care, helping to achieve a number of the former Millennium Development Goals (MDGs) that have since been absorbed into the Sustainable Development Goals (SDGs), including reducing child and maternal mortality and combating major endemic diseases such as HIV/AIDS, tuberculosis and malaria.

More specifically, we focus on:

- **SDG 3 (good health and well-being)** which encompasses many of the targets for the reduction of preventable morbidity and mortality, starting with improved maternal and child health, a reduction in chronic diseases and the achievement of universal health coverage and access to healthcare;
 - **SDG 2 (zero hunger)** specifically, Target 2.2: to end all forms of malnutrition;
 - **SDG 5 (gender equality)** specifically, Target 5.6: to ensure universal access to sexual and reproductive health and rights;
 - **SDG 6 (clean water and sanitation)** as non-health-related determinants of people's health status; and further goals including better opportunities for education and employment and the reduction of inequalities.
- The same framework has been adopted by the international development agencies with which Doctors with Africa CUAMM collaborates and implements projects.

In its three-year (2019-2021) planning and policy document, the Italian Agency for Development Cooperation defined the SDG-based priorities underlying its development aid policies, which are aligned with those of the European Commission:

→ <https://www.esteri.it/wp-content/uploads/2022/07/Documento-triennale-programmazione-indirizzo-2021-2023.pdf>

→ https://ec.europa.eu/info/strategy/international-strategies/sustainable-development-goals_it

as well as those of the U.K.'s Foreign, Commonwealth & Development Office:

→ <https://www.gov.uk/international-development-funding/uk-aid-direct>

and of France's Agence Française de Développement:

→ <https://www.afd.fr/fr>

This policy alignment among development agencies and donors helps generate project proposals that align with and are responsive to the needs of beneficiary nations, with an integrated monitoring framework for measuring progress towards the goals and targets adopted by the U.N.'s 193 Member States in September 2015.

MONITORING

These agencies assess and monitor development cooperation projects and programs based on the framework devised by the Development Assistance Committee of the Organisation for Economic Co-operation and Development (OECD DAC), which features six recently revised evaluation criteria:

- 1 Relevance**
- 2 Coherence**
- 3 Effectiveness**
- 4 Efficiency**
- 5 Impact**
- 6 Sustainability**

→ <https://www.oecd.org/dac/evaluation/daccriteriaforevaluatingdevelopmentassistance.htm>

These parameters are used collectively to assess whether an intervention has achieved its set objectives, whether the latter were relevant and coherent vis-à-vis the local context and other interventions also underway, how efficiently resources were used, and to what degree the intervention's impact and outcomes will be sustainable over time.

Thus the process of monitoring, including ongoing dialogue with stakeholders (both funders and beneficiaries), also entails assessing how prudently and efficiently human and financial resources are being used, something that we at Doctors with Africa CUAMM have placed a central focus on from the start. It is made explicit our mission, with our commitment to working **with** local partners; and spending thriftily but judiciously, including in terms of technical aspects, is an operative choice as well.

To monitor and measure the effectiveness of our projects and their impact vis-à-vis the SDGs and local health systems, we believe that it is essential to use internationally recognized indicators and targets, to compare different systems at the district, hospital and country level, and to evaluate different organizational and clinical methodologies in order to unearth evidence of what works, what works better, and what does *not* work in limited-resource settings.

One of the main such tools used for monitoring hospital performance is the **standard unit of output (SUO)**:

→ **Andrea Mandelli, Daniele Giusti, Using HMIS for Monitoring and Planning: The Experience of Uganda Catholic Medical Bureau; Health Policy and Development, Vol. 3, No. 1, April 2005, pp. 68-76**

Developed by Daniele Giusti in the 1990s and still used by Uganda's Ministry of Health, the SUO is a composite index calculated based on the respective costs for five standard, consistently available hospital services: outpatient contacts, inpatient contacts, deliveries, pre- and postnatal visits, and immunizations.

For maternal health we use the system laid out in the WHO publication *Monitoring emergency obstetric care*, which defines indicators for the availability and coverage of obstetric and neonatal care as well as their quality.

→ **Monitoring emergency obstetric care: A handbook. World Health Organization (2009)**

We have used all of these results-assessment indicators for many years now, both to report annually on our project activities and to help guide the design of future projects, taking a dialectical approach to our interactions with local stakeholders and settings – health personnel first and foremost, but also local authorities, public and private international partners, and the health service beneficiaries themselves.

We strongly believe that in addition to providing numerous health services and activities year after year, we must also make sure to always correlate baseline data to the final results achieved and the targets set during the project planning phase, to ensure that CUAMM's interventions continue to improve and become increasingly effective over time.

This is why we not only use the **indicators from each country's information system** (which also set targets, either annual or aligned with the above-mentioned SDGs and major endemic diseases such as malaria, TB and HIV) but also, in order to standardize our performance indicators and measurement systems, recently started a collaboration with the Management and Healthcare Laboratory of the Sant'Anna School of Advanced Studies in Pisa, which has been working for around 15 years to develop a **performance evaluation system** for use by Italy's regional healthcare systems.

→ **Tavoschi L, Belardi P, Mazzilli S, Manenti F, Pellizzer G, Abebe D, Azzimonti G, Nsubuga JB, Dall'Oglio G, Vainieri M. An integrated hospital-district performance evaluation for communicable diseases in low-and middle-income countries: Evidence from a pilot in three sub-Saharan countries. PLoS One. 2022 Mar 31;17(3):e0266225. PMID: 35358254; PMCID: PMC8970489. <https://doi.org/10.1371/journal.pone.0266225>**

→ **Belardi P, Corazza I, Bonciani M, Manenti F, Vainieri M. Evaluating Healthcare Performance in Low- and Middle-Income Countries: A Pilot Study on Selected Settings in Ethiopia, Tanzania, and Uganda. Int J Environ Res Public Health. 2022 Dec 20;20(1):41. PMID: 36612364; PMCID: PMC9819807. <https://doi.org/10.3390/ijerph20010041>**

In 2019 this innovative system was used in three African countries and four different systems consisting of a non-profit hospital and peripheral government health facilities, leading to the publication of a report with 117 indicators, 48 of which were evaluated with respect to international benchmarks or standards and represented with 5 colored bands based on the statistical distribution of values, from 0 (red) to 5 (dark green).

→ https://www.mediciconlafrica.org/wp-content/uploads/2020/10/Report_CUAMM19_web.pdf *

Annual Report 2021 is available upon request



HUMAN RESOURCES

As already affirmed in Doctors with Africa CUAMM's 2000 Policy Document and subsequent 2008-2015 and 2016-2030 Strategic Plans, the **human resources** we depend on to implement CUAMM projects are our most precious capital. Accordingly, our personnel management system plays an increasingly key role, focusing on HR development in terms of both motivation and professionalism, and making recruitment, selection and training activities as central as those of monitoring and evaluation.

Personnel recruitment is carried out in keeping with **our Strategic Plan**, with job openings being publicized in order to reach the greatest possible number of potential candidates both internationally and in the African country where the job will be located. Those from CUAMM's own network are seen as capital to be retained and developed, which external candidates are seen as opportunities to expand our pool of professional talent. In keeping with WHO recommendations, our selection is based on the criteria of equal opportunity and non-discrimination, with candidates being considered regardless of ethnicity, gender, political orientation, sexual orientation, religion and/or personal opinions.

→ **Global Code of Practice on the International Recruitment of Health Personnel**

We seek out candidates who possess not only the requisite technical skills, but also the motivation and values that have always been the underlying spirit of Doctors with Africa CUAMM's interventions as well as "the qualifying, significantly distinctive aspect of the *modus operandi*" of all the individuals who work with CUAMM, as stated in *Charisma at the Service of Health* [Il carisma al servizio della salute], co-edited by N. A. De Carlo and G. Luzzato (2006, pp. 55-59).

A third, critically important area is that of training, which CUAMM has always seen as crucial to ensuring quality services for beneficiary communities. Each aid worker is given precise preparation and training for their specific mission, and continues to receive on-the-job training once in the field. The professional growth of both local and international personnel is thereby ensured per the training guidelines set out in the above-mentioned WHO Code of Practice.

Finally, Doctors with Africa CUAMM enters into written contracts with its personnel, drawn up in compliance with the laws of the country where the intervention is to take place and any existing collective bargaining agreements. By signing their contract, each aid worker makes a commitment to adhere to CUAMM's mission and the International Red Cross's Code of Conduct, to which CUAMM is a signatory.

→ **The Code of Conduct for the International Red Cross and Red Crescent Movement and Non Governmental Organisations (NGOs) in Disaster Relief, 1992**

More specifically, by signing on to the policies that CUAMM has drawn up in keeping with international standards and guidelines, each aid worker formally pledges to uphold gender equality, safeguard children, and protect both the latter and adults from sexual exploitation or abuse while doing their jobs:

→ <https://www.mediciconlafrica.org/blog/chi-siamo/struttura/>

→ **Convention on the Elimination of all forms of Discrimination Against Women (CEDAW): Basic principles from the UN Secretary-General's Bulletin on Special measures for protection from sexual exploitation and sexual abuse (ST/SGB/2003/13)**

Doctors with Africa CUAMM also takes responsibility for ensuring the psychological and physical safety of its workers, both local and international. To this end, we drew up a document covering CUAMM's general principles vis-à-vis the security of our personnel, with a specific security plan for each of the African countries where we are present:

→ **Guidelines for personnel security. Prevention of and response to road accidents and violence, Doctors with Africa CUAMM (2006)**

In a further attempt to safeguard the well-being of our personnel, CUAMM has adopted a system for monitoring and evaluating both the technical and general skills of everyone who works with CUAMM, with the aim of continuously improving the awareness and sense of responsibility of each individual and of our organization overall.

ECONOMIC, FINANCIAL AND ASSET ASPECTS

In order to achieve our organization's mission, Doctors with Africa CUAMM's economic, financial and asset management is centered around the efficient and effective use of the resources available to it.

In accordance with the relevant regulatory framework, our annual financial statements are audited by an independent auditing firm to ensure that they clearly and accurately represent our organization's financial position and economic results.

The accounting principles used comply with those recommended by the *Consigli Nazionali dei Dottori Commercialisti and Esperti Contabili* (representative bodies of the Italian accounting professions), duly interpreted and adjusted where necessary to reflect our organization's particular nature.

The valuation criteria used for drawing up the annual financial statements comply with the provisions set forth in Article 2426 of the Italian Civil Code.

Our organization's activities are also subject to oversight and monitoring by the Board of Auditors in accordance with the latter's standards of conduct and the provisions of Legislative Decree 117/2017 as recommended by the abovementioned *Consigli Nazionali* as well as the Supervisory Board appointed for this purpose in accordance with existing law.

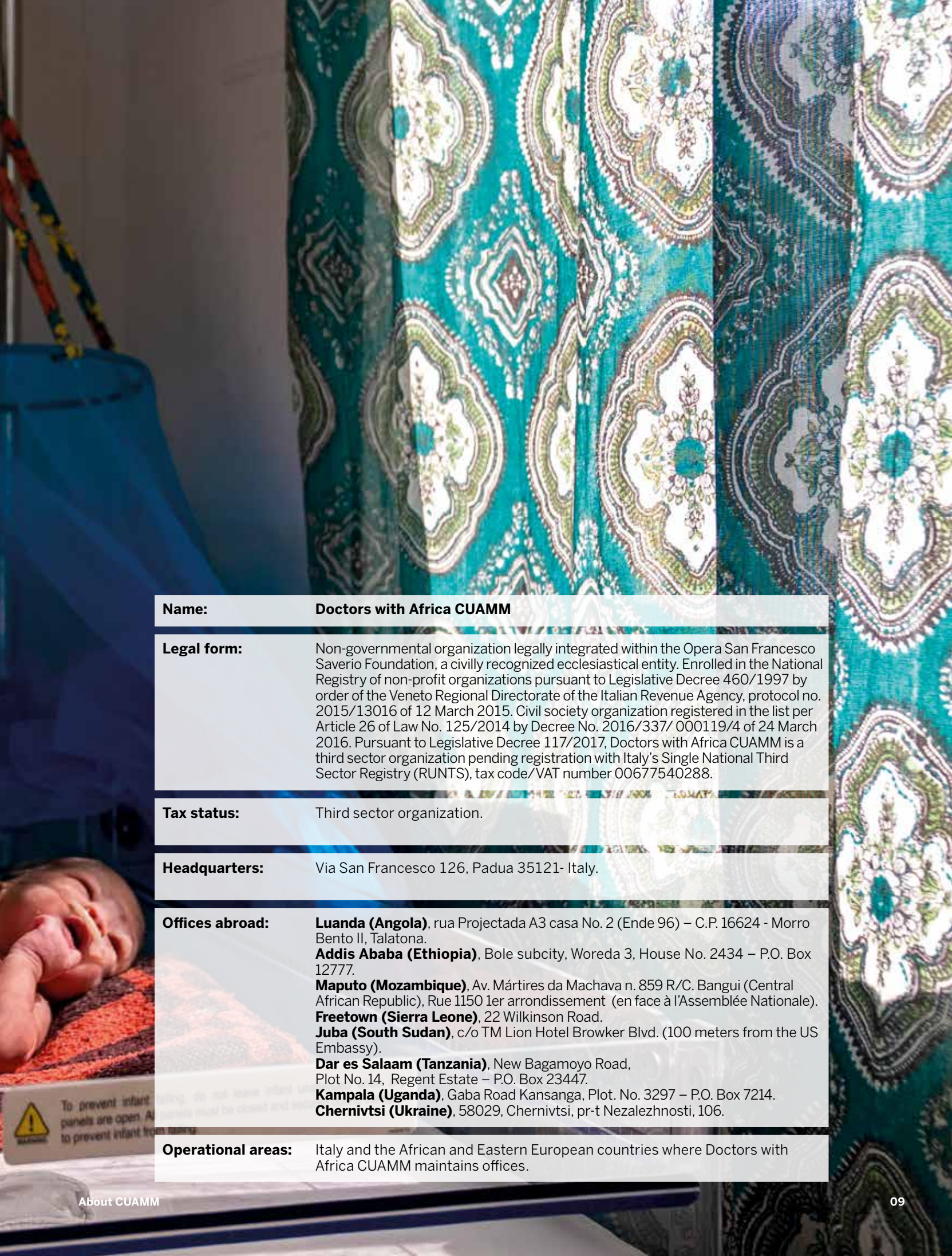
Reporting for individual institutional projects generally involves independent external audits in order to assure donors of the coherence and congruity of the expenditures incurred for activity implementation with the activities contractually stipulated with those donors.

The Foundation operates in compliance with all current national and/or regional regulations and laws concerning protection of the environment, workplace health and security, and privacy.

03/ ABOUT CUAMM



MEDICI
ON L'AFRICA
CUAMM
Doctors with Africa



Name:	Doctors with Africa CUAMM
Legal form:	Non-governmental organization legally integrated within the Opera San Francesco Saverio Foundation, a civilly recognized ecclesiastical entity. Enrolled in the National Registry of non-profit organizations pursuant to Legislative Decree 460/1997 by order of the Veneto Regional Directorate of the Italian Revenue Agency, protocol no. 2015/13016 of 12 March 2015. Civil society organization registered in the list per Article 26 of Law No. 125/2014 by Decree No. 2016/337/ 000119/4 of 24 March 2016. Pursuant to Legislative Decree 117/2017, Doctors with Africa CUAMM is a third sector organization pending registration with Italy's Single National Third Sector Registry (RUNTS), tax code/VAT number 00677540288.
Tax status:	Third sector organization.
Headquarters:	Via San Francesco 126, Padua 35121- Italy.
Offices abroad:	Luanda (Angola) , rua Projectada A3 casa No. 2 (Ende 96) – C.P. 16624 - Morro Bento II, Talatona. Addis Ababa (Ethiopia) , Bole subcity, Woreda 3, House No. 2434 – P.O. Box 12777. Maputo (Mozambique) , Av. Mártires da Machava n. 859 R/C. Bangui (Central African Republic), Rue 1150 1er arrondissement (en face à l'Assemblée Nationale). Freetown (Sierra Leone) , 22 Wilkinson Road. Juba (South Sudan) , c/o TM Lion Hotel Browker Blvd. (100 meters from the US Embassy). Dar es Salaam (Tanzania) , New Bagamoyo Road, Plot No. 14, Regent Estate – P.O. Box 23447. Kampala (Uganda) , Gaba Road Kansanga, Plot. No. 3297 – P.O. Box 7214. Chernivtsi (Ukraine) , 58029, Chernivtsi, pr-t Nezalezhnosti, 106.
Operational areas:	Italy and the African and Eastern European countries where Doctors with Africa CUAMM maintains offices.

WHERE WE WORK

DOCTORS WITH AFRICA CUAMM IN NUMBERS

72
years

8
countries

21
main hospitals

864
health facilities supported

124
districts

1
university

4
schools for nurses and midwives

3,459
human resources on the ground, including

256
Europeans of whom

247
Italians

SOUTH SUDAN

5
hospitals (Cueibet, Lui, Rumbek, Yirok and Maridi)

2
schools for midwives (Lui and Rumbek)

289
human resources

2,260
human resources under "special management"

CENTRAL AFRICAN REPUBLIC

2
hospitals (Bangui and Bocaranga)

100
human resources

MOZAMBIQUE

3
hospitals (Beira, Montepuez and Nhamatanda)

1
university (Beira)

239
human resources

ETHIOPIA

5
hospitals (Turmi, Wolisso, Gambella, Gambella RH and Jinka)

1
school for nurses and midwives (Wolisso)

179
human resources

SIERRA LEONE

2
hospitals (PCMH Freetown and Pujehun CMI)

86
human resources

UGANDA

2
hospitals (Aber and Matany)

1
school for nurses and midwives (Matany)

135
human resources

TANZANIA

1
hospital (Tosamaganga)

106
human resources

IN ONE YEAR

2,346,915
patients assisted

1,120,664
under-5 children
examined

410,277
prenatal visits
conducted

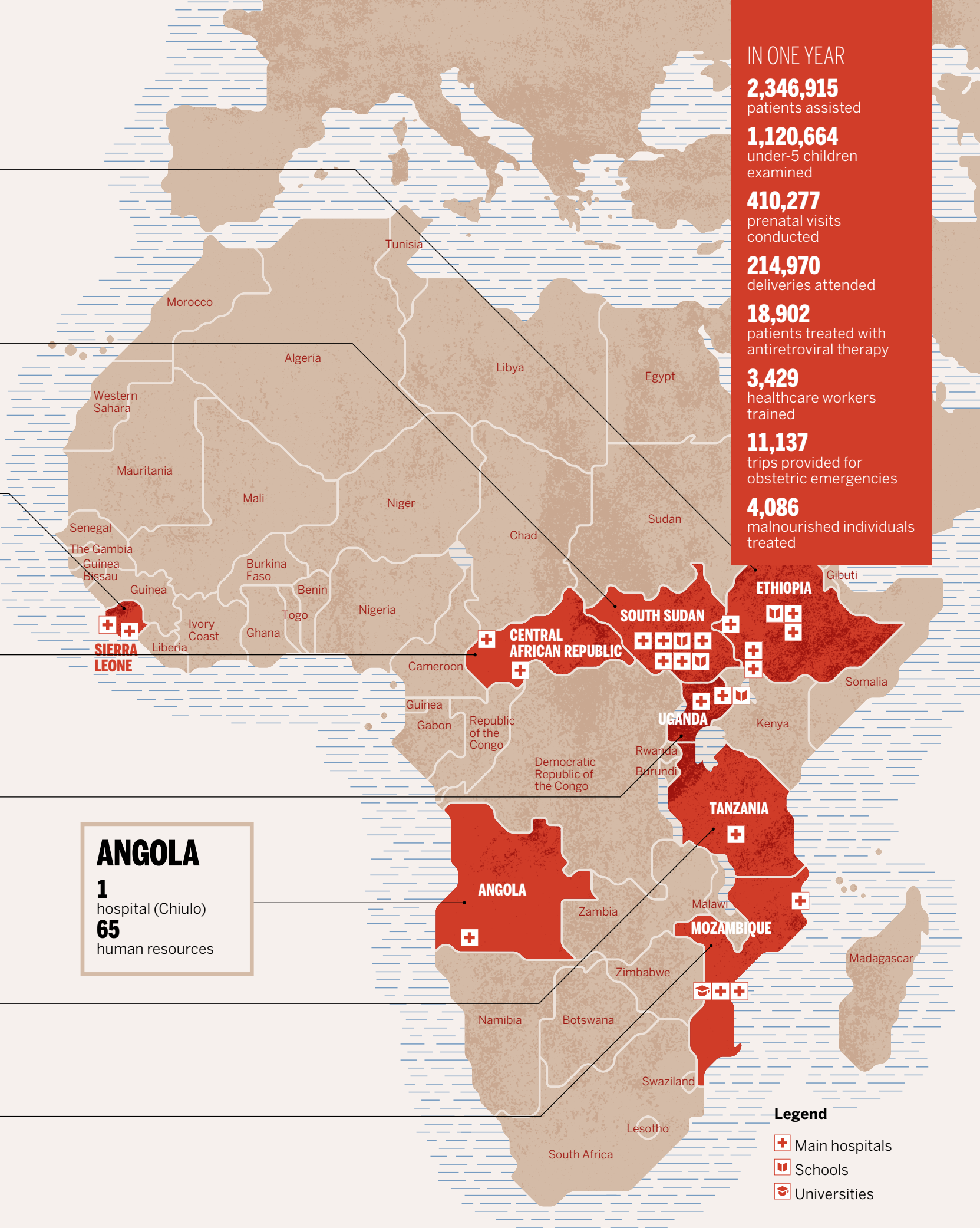
214,970
deliveries attended

18,902
patients treated with
antiretroviral therapy

3,429
healthcare workers
trained

11,137
trips provided for
obstetric emergencies

4,086
malnourished individuals
treated



ANGOLA
1
hospital (Chiulo)
65
human resources

- Legend**
- Main hospitals
 - Schools
 - Universities

SEVENTY YEARS OF HISTORY

3 December 1950
CUAMM is founded
in Padua



1958
CUAMM
begins
working
in Uganda

5 May 1955
Dr. Anacleto Dal Lago
leaves for Kenya

30 August 1955
Father Luigi Mazzucato
becomes CUAMM's
director



10–11 February 1968
Nyeri Conference

1968
CUAMM begins working
in Tanzania



22 June 1972
CUAMM becomes Italy's
first healthcare-focused
NGO



1978
CUAMM begins
working
in Mozambique

January 1975
CUAMM at the
forefront of
primary health
care (PHC):
Anacleto Dal Lago
presents CUAMM's
criteria for intervention
in developing
countries.
Three years later,
at the 1978 Alma
Ata conference,
the WHO would
present similar
recommendations
regarding the key
importance of PHC.

1980
CUAMM
begins working
in Ethiopia

15 December 1971
Italy enacts its first-ever law
on development aid



June 1982
Tanzanian President Julius Nyerere welcomes CUAMM volunteers working in the country to the presidential palace



25 July 1998
Dr. Francesco Canova, CUAMM's founding father, passes away



15 December 2013
Civil war breaks out in South Sudan

8 August 2014
Ebola breaks out in Western Africa

September 2014
Midwifery school set up in Lui



February 2008
A new director for CUAMM:
Father Luigi Mazzucato ends his term as Doctors with Africa CUAMM's director; Father Dante Carraro replaces him.

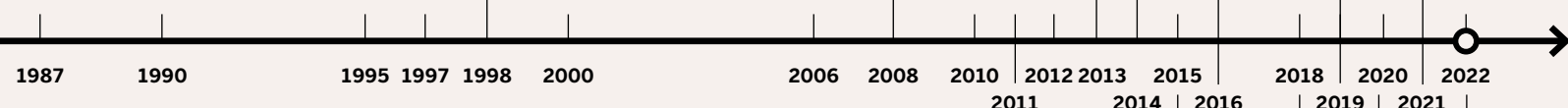


November 2016
The "Mothers and Children First: The First 1,000 Days" program is launched with a message from Italy's President

7 May 2016
Private audience with Pope Francis

March – April 2019
Tropical cyclones Idai and Kenneth hit Mozambique

May 2021
Publication of the book *What We Can Learn from Africa*, co-authored by Father Dante Carraro and Paolo di Paolo



1987–1990
Hospital buildings are constructed in Tanzania



1997
CUAMM begins working in Angola

2006
CUAMM begins working in South Sudan

23 September 2000
Inauguration of the St. Luke Catholic Hospital in Wolisso, Ethiopia



2012
CUAMM begins working in Sierra Leone

November 2011
"Mothers and Children First" program begun

23 March 2011
Publication of Paolo Rumiz's book *Il bene ostinato*

4 August 2018
CUAMM begins working in the Central African Republic

26 November 2015
Father Luigi Mazzucato passes away



19 November 2022
Annual meeting takes place at the Vatican

March 2020
The WHO declares a worldwide COVID-19 public health emergency

3 December 2020
Doctors with Africa CUAMM turns 70

OUR HISTORY WITH AFRICA

ANGOLA



1997

Intervention begun in Uíge Province to tackle the emergency brought by the civil war.

2004

Health system support provided in Luanda and in Uíge and Cunene Provinces during the transition from emergency response to development work.

2005

Program begun in support of the National Tuberculosis Control Program with funding from the Global Fund, and continued until 2016.

2012

"Mothers and Children First" program begun at the Chiulo Hospital in Cunene Province; its aim is to ensure access to safe deliveries and care for newborns in four African countries.

2014

Innovative intervention in Luanda to improve the diagnosis of tuberculosis, diabetes and hypertension.

2016

Launch of "Mothers and Children First. The First 1,000 Days" (the period from conception through a child's second birthday).

2018

DOT pilot program begun in six municipalities in five provinces. Thanks to a photovoltaic system, electricity is ensured for the hospital in Chiulo.

2019

Integrated program to tackle acute malnutrition (FRESAN) begun in Cunene Province.

2022

Launch of the third phase of the "Mothers and Children First" program: "People and Skills".

ETHIOPIA



1980

First doctor sent to the Gambio leprosy hospital.

1997

Agreement made with the Ethiopian Episcopal Conference for construction of the St. Luke Catholic Hospital in Wolisso with an attached school for midwives and nurses.

2012

"Mothers and Children First" program begun.

2014

Intervention started up in South Omo.

2016

"Mothers and Children First. The First 1,000 Days" begins.

2017

Intervention including support for South Sudanese refugees started up in Gambella Region.

2018

CUAMM's partnership with the Ethiopian Ministry of Health strengthened with launch of two technical assistance projects.

2019

Wolisso hospital recognized by Ethiopian Medical Society (through Ethiopian Health Minister Dr. Amir Aman) as best-performing hospital of the year.

2020

Project begun in Harawa District, Somali Region, with infrastructure improvement and personnel training activities.

2022

Launch of the third phase of the "Mothers and Children First" program: "People and Skills".

MOZAMBIQUE



1978

Launch of healthcare cooperation projects.

1992-97

Interventions for functional rehabilitation of Sofala Province health network.

1997-2001

Support provided to Provincial Health Directorates (Sofala, Zambezia and Maputo).

2002

Support provided to Beira Central Hospital.

2004

Partnership with the Catholic University of Mozambique in Beira.

2014

Intervention in Cabo Delgado Province.

2016

"Mothers and Children First. The First 1,000 Days" program begins.

2017

Intervention in Tete Province to combat HIV/AIDS among the adolescent population; in addition, launch of program to fight noncommunicable diseases.

2018

Relations begun with Mozambique's Ministry of Health to draw up national guidelines on the management and treatment of diabetes and hypertension.

2019

Program to combat noncommunicable diseases begun at primary healthcare level and 4th-level hospitals. Sofala and Cabo Delgado Provinces severely damaged by tropical cyclones Idai and Kenneth.

2022

Launch of the third phase of the "Mothers and Children First" program: "People and Skills".

CENTRAL AFRICAN REPUBLIC



July 2018

Intervention begun at the Bangui pediatric complex.

August 2018

Giovanni Putoto, CUAMM's Head of Planning, meets with Central African Republic's President Faustin-Archange Touadéra at launch of project to support Children's Hospital in Bangui, funded in part by European Commission's Békou Trust Fund.

April 2019

Project Head Stefano Vicentini presents project activities and data from Bangui Children's Hospital to Central African Republic's National Assembly.

November 2019

Visit by Pierre Somse, Central African Republic's Health Minister, and Stefano Manservigi, Director-General of DEVCO, to Bangui Children's Hospital.

December 2019

European Commission's Békou Trust Fund renews its confidence in CUAMM and *Action Contre la Faim* (ACF), making it possible to continue partnership and activities with Children's Hospital in Bangui for another year.

2021

In partnership with OCHA, Bangui health referral system's eight ambulances made continuously operational.

2022

Launch of the third phase of the "Mothers and Children First" program: "People and Skills".

SIERRA LEONE



2012
CUAMM begins working in Sierra Leone's Pujehun District.

2014
Sierra Leone is the country worst affected by the Ebola outbreak. CUAMM stays on in Pujehun, ensuring the presence of expatriate personnel and the continuity of essential services.

2015
Support started up for hospital in Lunsar after it was forced to close during the Ebola outbreak.

2016
"Mothers and Children First. The First 1,000 Days" program launched in Pujehun; support provided to PCMH, the country's largest maternity hospital, in Freetown.

2017
Support begun to regional hospitals in Makeni and Bo and to the district hospital in Bonthe. Inauguration of Sierra Leone's first maternal intensive care unit at PCMH.

2018
Launch of National Emergency Medical Service (NEMS).

2019
NEMS figures: 80 operational ambulances and 28,792 "missions" conducted.

2020
NEMS handed over to national health authorities. Three maternal intensive care units set up in Bo, Makeni and Pujehun.

2022
Launch of the third phase of the "Mothers and Children First" program: "People and Skills".

SOUTH SUDAN



2006-12
Intervention launched at Yiroi and Lui hospitals.

2013-15
Public health program in Yiroi West and Rumbek North. Cueibet health center given hospital status. Midwifery diploma course begun in Lui.

2015-17
Public health program expanded throughout the former Lakes States. Intervention launched at hospital in Rumbek.

2017-18
Response to the famine in former Unity State with an emergency intervention in the swampy areas near the Nyal Port. Public health program launched in 4 counties of former Western Equatoria State. Intervention begun at Maridi Hospital.

2019
Operating room completed in Nyal. New cycle of midwifery diploma course begun at the Lui Health Sciences Institute. Community health program begun: 640 community health workers in 8 counties.

2020
New pediatric ward at hospital in Rumbek completed and inaugurated. Community health program expanded to all 11 counties. Epilepsy clinic started up at Lui and Maridi hospitals and Mundri health center. Support begun for Rumbek Health Sciences Institute.

2022
Launch of the third phase of the "Mothers and Children First" program: "People and Skills".

TANZANIA



1968
Health system strengthening begun in Iringa Region.

1990
Inauguration of hospital in Iringa.

2012
Launch of "Mothers and Children First" program to ensure access to safe deliveries and care for newborns in four African countries.

2014
Project for treatment of child malnutrition launched in Iringa and Njombe Regions.

2016
Launch of second phase of "Mothers and Children First. The First 1,000 Days" (the period from conception through a baby's 2nd birthday), with a focus on nutrition.

2017
The Prime Minister names CUAMM "best partner" in the field of nutrition.

2018
CUAMM active in Tanzania for 50 years.

2019
CUAMM becomes member of technical working groups on nutrition, maternal and child health, early development, chronic noncommunicable diseases and HIV.

2020-21
Test and Treat program for HIV prevention and treatment in Simiyu and Shinyanga Regions wrapped up; intervention focused on chronic diseases strengthened.

2022
Launch of the third phase of the "Mothers and Children First" program: "People and Skills".

UGANDA



1958
First doctor arrives to hospital in Angal.

1979
Bilateral health cooperation agreement between Italy and Uganda: CUAMM doctors begin working inside the country's health system.

1990s
Hospital in Arua rebuilt and hospitals in Maracha, Angal, Aber and Matany renovated.

2012
"Mothers and Children First" program begun.

2016
"Mothers and Children First. The First 1,000 Days" (the period from conception through a baby's 2nd birthday) program begun.

2017
CUAMM returns to West Nile to support response to South Sudanese refugee crisis.

2018
Intervention launched throughout Lango sub-region.

2019
Project begun in support of eye health in Arua District.

2022
Launch of the third phase of the "Mothers and Children First" program: "People and Skills".

MISSION AND VALUES

The core values underlying Doctors with Africa CUAMM's mission and activities are:

- **Christian inspiration and bonds with the Catholic Church**, with constant reference to Christian values and the Gospel;
- **“With Africa”**: our organization works with African communities, involving local people at various levels. We use the word “with” to underscore our conception of sharing, interchange, intense engagement, mutual effort, and the identification *together* not only of local problems and needs, but also values, in order to foster effective long-term development;
- **experience**: Doctors with Africa CUAMM has more than 70 years of experience working in developing countries;
- **specific, exclusive expertise** in the field of medicine and healthcare;
- **confidentiality**: our goal is to keep the focus on those in need of aid, not on those providing it.

Doctors with Africa CUAMM seeks to engage with everyone who believes in the values of dialogue, cooperation, volunteer work, cultural exchange, friendship between peoples, the defense of human rights, respect for life, the willingness to make personal sacrifices, prioritizing the poor, the spirit of service, and an understanding of CUAMM's criteria for intervention. We carry out long-term projects aimed at engendering development, training dedicated human resources in both Italy and Africa, conducting research and disseminating the findings, and affirming the basic and universal human right to health. We have two central goals:

- **to improve health conditions in Africa**, based on our conviction that health is a universal human right, not a commodity, and thus access to health services cannot be a privilege; and
- **to foster feelings of positivity and solidarity towards Africa**, i.e., a sense of responsibility to help increase institutional and public interest in, hope for, and commitment to improving the future of the continent.

POSTCARDS FROM 2022

ITALY

Doctors with Africa CUAMM's Annual Meeting with Pope Francis at the Vatican.



Photo: Vatican News

UGANDA

Doctors with Africa CUAMM was awarded best supporting and implementing partner for safe motherhood activities and service delivery in Uganda.



Photo: CUAMM Archive

UKRAINE

Launch of Doctors with Africa CUAMM's intervention for civilians affected by the conflict in Ukraine.



Photo: Nicola Berti

MOZAMBIQUE

Launch of an advanced-level master's degree program for young doctors in Mozambique, thanks to support by the Italian Ministry of Education, Universities and Research (MIUR) and the partnership between CUAMM, the University of Padua, and two Mozambican universities.



Photo: CUAMM Archive

ACTIVITIES

- Doctors with Africa CUAMM is active in the field of **international development cooperation** in accordance with Law No. 125 of 11 August 2014 and later amendments (Art. 5 comma 1 lett. n) Legislative Decree 117/2017).
- Organization and management of **cultural, artistic and/or recreational activities of social interest**, including publishing, to foster and spread the culture and practice of volunteer work and activities of general interest (Art. 5 comma 1 - lett. i – Legislative Decree 117/2017).
- Organization and management of **activities of social, cultural and religious interest** (Art. 5 comma 1 - lett. k – Legislative Decree 117/2017).
- **University-level and post-graduate training** (Art. 5 comma 1 - lett. g - Legislative Decree 117/2017).
- **Scientific research** of particular social interest (Art. 5 comma 1 - lett. h - Legislative Decree 117/2017).

NETWORKS WITH OTHER THIRD SECTOR ORGANIZATIONS

Doctors with Africa CUAMM is a **member of the Link 2007 network** based in Rome (Via Germanico 198). CUAMM is also a **member of the Italian Network for Global Health**, based in Rome on Via dei Giubbonari 30, which works to fight three pandemics – HIV/AIDS, tuberculosis (TB), and malaria – and to advance the universal right to healthcare.

OTHER ASSOCIATIONS

Doctors with Africa CUAMM is registered at the **Municipal Register of Associations of Padua** (no. 427) under subject area 4 – peace, human rights and international cooperation. CUAMM is also a member of the **American Chamber of Commerce** on Via Cantù 1 in Milan, Italy.

UNITED STATES

The Society of Illustrators (New York) awards its gold medal to artist Andrea Mongia for *Lecture d’Africa* (Africa Reads), his calendar project for Doctors with Africa CUAMM.



Photo: Andrea Mongia

TANZANIA

Doctors with Africa CUAMM implements an urban health project in a textile factory in Dar es Salaam – an investment in the well-being of the entire community.



Photo: CUAMM Archive

ETHIOPIA

Professor Alberto Mantovani visits the Wolisso Hospital.



Photo: Nicola Berti

MOZAMBIQUE

Italian President Sergio Mattarella meets with Giorgia Gelfi, CUAMM’s Mozambique country representative, in Maputo.



Photo: CUAMM Archive

04/ STRUCTURE, GOVERNANCE AND ADMINISTRATION



STRUCTURE, GOVERNANCE AND ADMINISTRATION

SIZE AND MAKE-UP OF SOCIAL/MEMBERSHIP BASE

While Doctors with Africa CUAMM, as a non-profit activity integrated into the Opera San Francesco Saverio Foundation, does not have a formally constituted membership base, it does have an Italy-wide network of over 5,200 volunteers who work in support of its goals. Some are members of CUAMM volunteer groups, while others support CUAMM based on shared values and their belief in the projects it implements in Italy and Africa.

SYSTEM OF GOVERNANCE AND CONTROL, STRUCTURE, RESPONSIBILITIES AND COMPOSITION

As a third sector organization (TSO) branch of the Opera San Francesco Saverio Foundation, Doctors with Africa CUAMM is governed by the Foundation's own Board of Directors, which consists of eight members and the Bishop of Padua, its President by right. The Board and its Chairperson are responsible for governing CUAMM through the functions of direction, control and promotion. For the three-year period running from 2021 to 2023, the **Board of Directors** is composed as follows (appointment decree by the Bishop of Padua No. 605/2021 dated 2 April 2021):

- **Chairperson:** Msgr. Claudio Cipolla
- **Members:** Pietro Badaloni, Massimo Carraro, Diamante Ortensia D'Alessio, Carmelo Fanelli, Mario Raviglione, Vincenzo Riboni, Alberto Rigolli and Giuseppe Zaccaria.

Oversight of the organization is assigned to the **Board of Auditors** that reports to the Foundation. For the three-year period running from 2021 to 2023, the Board of Auditors is composed as follows (appointment decree by the Bishop of Padua No. 606/2021 dated 2 April 2021):

- **Chairperson:** Piersandro Peraro
- **Members:** Marco Razzino and Rag. Ennio Peruzzi.

The Board of Directors approved amendments to Doctors with Africa CUAMM's model of organization, management and control by resolution of 11 June 2021. On the same occasion, pursuant to Art. 6 comma 1 lett. b) of Legislative Decree No. 231/2001, the Board appointed a **Supervisory Body** for the three-year period running from 2021 to 2023, composed as follows:

- **Chairperson:** Atty. Regina Proietti
- **Members:** Matteo Capuzzo and Rag. Ettore Boles.

By resolution of 11 June 2021, in accordance with Art. 4 comma 3 of Legislative Decree No. 117/2017, the **Board of Directors** also approved the Regulations of the Foundation's TSO branch as published by deed of Notary Daria Righetto of Padua (Rep. No. 11.401, Racc. No. 6186 deposited at the Padua branch of the National Revenue Agency on 22 July 2021 with No. 30869, series 1T).

The **legal representation** and **management of Doctors with Africa CUAMM** is vested in its Director, Msgr. Dante Carraro, whom the Board of Directors appointed for the three-year period running from 2021 to 2023 by resolution of 11 June 2021, through power of attorney of the Bishop of Padua, the Foundation's President by right (Rep. No. 77293 - Racc. 26685 of 14 June 2018, Notary Fulvio Vaudano of Padua). The Director has signatory powers for financial management as well.

To ensure optimal operational management and facilitate the carrying out of certain procedures and/or handling of certain documents, some of the powers assigned to the Director may also be performed by the **Administrative Manager** of Doctors with Africa CUAMM, Andrea Borgato, through power of attorney of the Bishop of Padua, the Foundation's President (Rep. No. 77294 - Racc. 26686 dated 14 June 2018 – Notary Fulvio Vaudano of Padua). The functions of **Deputy Director** and the **management of finance and control** may also be performed by the Administrative Manager.

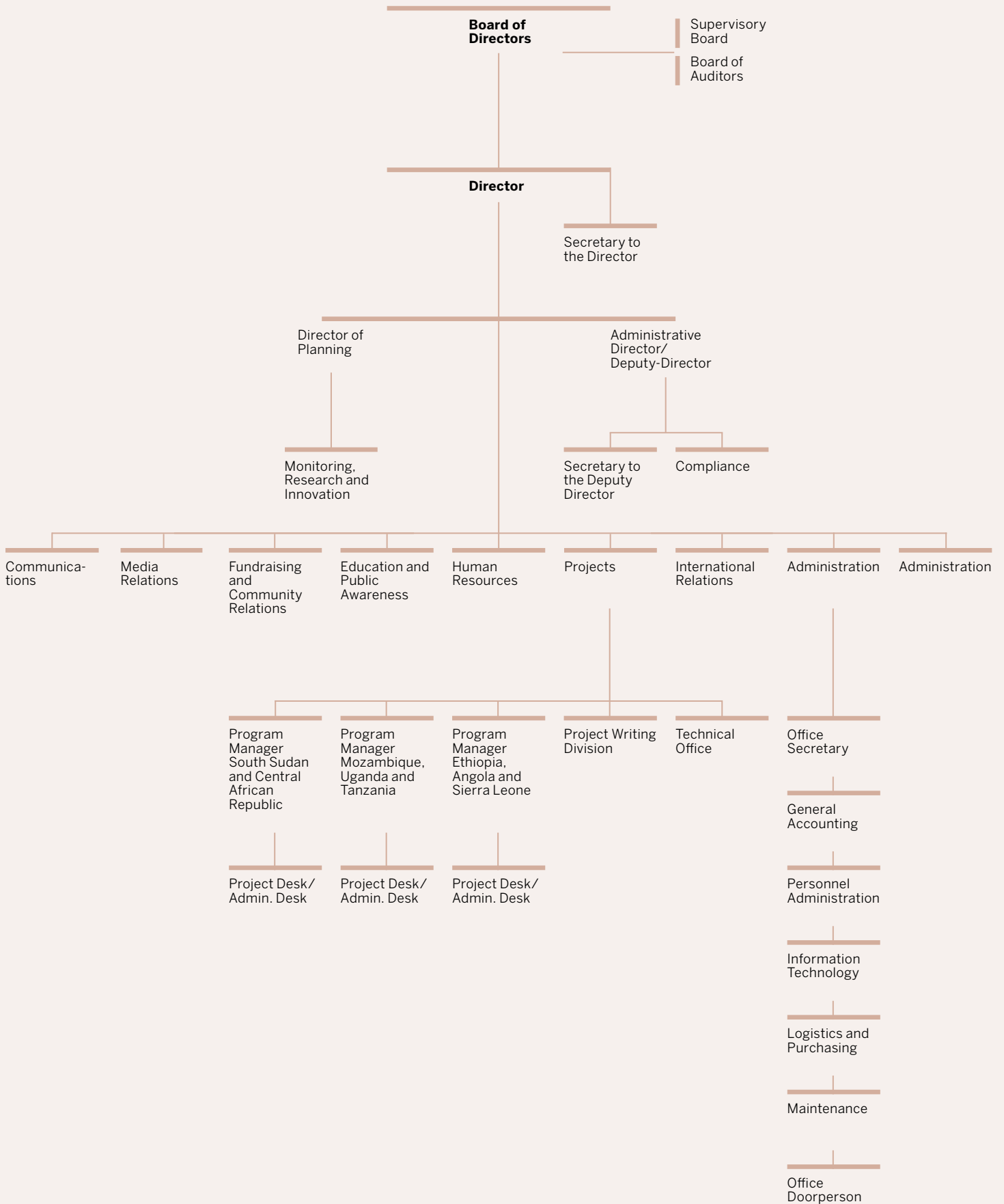
To help manage the organization's activities, CUAMM's Director relies on several managers whom he/she appoints to head up each of its separate divisions, as follows:

- **Planning, monitoring, research and innovation**
Giovanni Putoto
- **Project management** Fabio Manenti
- **Human resources** Bettina Simoncini
- **Administration** Andrea Iannetti
- **International relations** Andrea Atzori
- **Communication** Anna Talami
- **Media relations** Linda Previato
- **Education and public awareness**
Chiara Cavagna
- **Fundraising and community relations**
Oscar Merante Boschin.

INTERNAL DEMOCRATIC SYSTEM AND PARTICIPATION IN CUAMM'S ACTIVITIES BY ITS SUPPORTERS

As its legal form is that of the Opera San Francesco Saverio Foundation, Doctors with Africa CUAMM does not have a membership base. Its supporters participate in the activities of the organization in accordance with Art. 3 of Italy's TSO Regulations.

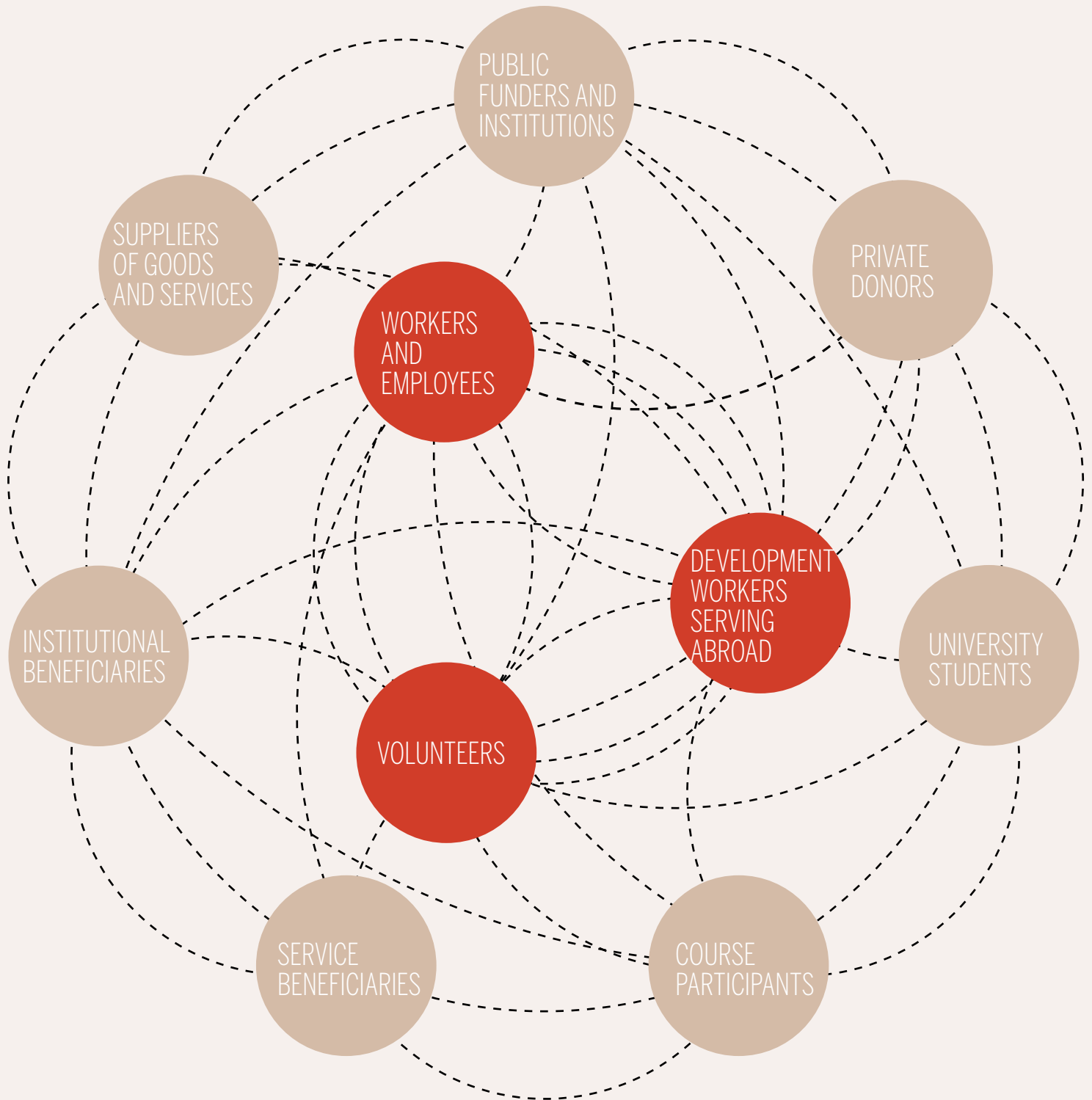
ORGANIZATIONAL CHART



MAP OF STAKEHOLDERS



CUAMM is **deeply committed to accountability**: it is crucial to us to know that our supporters consider us worthy of their trust. That's why **we've made our relationship with our stakeholders** – whether institutional or private, internal or external – **a top priority**.



	Stakeholder	Interests/expectations	How we engage them
Internal stakeholders	Workers and employees	<ul style="list-style-type: none"> - achievement of mission objectives, job motivation/recognition - stable employment relationship - organizational well-being, corporate atmosphere - job role autonomy - sense of belonging - remuneration and benefits - equal opportunities - training and acquisition of new skills/opportunities for professional growth - health and security for oneself and one's co-workers - work-life balance 	<ul style="list-style-type: none"> - dissemination of organizational Code of Ethics and policies - meetings with division heads - periodic meetings with the Director (general staff meetings) - periodic publications: <i>èAfrica and Health and Development</i> - CUAMM weekly newsletter - CUAMM monthly newsletter - occasional/thematic newsletter from the Director - circulation of Annual Report providing information on activities and financial statements - participation in events organized for external stakeholders, especially the Annual Meeting
	Staff serving abroad	<ul style="list-style-type: none"> - appropriate job remuneration - job motivation/recognition, achievement of mission objectives - job role autonomy - sense of belonging - sense of moral/social gratification - equal opportunities - training and acquisition of new skills/opportunities for professional growth - health and security for oneself and one's co-workers 	<ul style="list-style-type: none"> - dissemination of organizational Code of Ethics and policies - meetings in the field (in Africa) with the Director and division heads - periodic publications <i>èAfrica and Health and Development</i> - CUAMM weekly newsletter - CUAMM monthly newsletter - occasional/thematic newsletter from the Director - circulation of Annual Report providing information on activities and financial statements - participation in events organized for external stakeholders, especially the Annual Meeting
	Volunteers	<ul style="list-style-type: none"> - work atmosphere suitable to one's psychophysical characteristics - sense of belonging - sense of moral/social gratification - training and acquisition of new skills/opportunities for professional growth 	<ul style="list-style-type: none"> - dissemination of organizational Code of Ethics and policies - meetings with the Director and specific division heads - periodic publications: <i>èAfrica and Health and Development</i> - CUAMM weekly newsletter - CUAMM monthly newsletter - occasional/thematic newsletter from the Director - circulation of Annual Report providing information on activities and financial statements - participation in events organized for external stakeholders, especially the Annual Meeting
External stakeholders	Public funders and institutions	<ul style="list-style-type: none"> - rational allocation of resources - assessment of organizational/ intervention effectiveness - comparison with similar organizations - transparency vis-à-vis organizational data - transparency vis-à-vis supported initiatives 	<ul style="list-style-type: none"> - dissemination of organizational Code of Ethics and policies - meetings with the Director and/or division heads - periodic publications: <i>èAfrica and Health and Development</i> - audio/video productions - media coverage - circulation of Annual Report providing information on activities and financial statements - participation in events organized for external stakeholders, especially the Annual Meeting

External stakeholders	Private donors	<ul style="list-style-type: none"> - rational allocation of resources - assessment of organizational/ intervention effectiveness - comparison with similar organizations - transparency vis-à-vis organizational data - transparency vis-à-vis supported initiatives 	<ul style="list-style-type: none"> - dissemination of organizational Code of Ethics and policies - meetings with the Director and specific division heads - letters of thanks for every donation received - periodic publications: <i>èAfrica and Health and Development</i> - CUAMM weekly newsletter - CUAMM monthly newsletter - occasional/thematic newsletter from the Director - circulation of Annual Report providing information on activities and financial statements - participation in events organized for external stakeholders, especially the Annual Meeting
	Suppliers of goods and services	<ul style="list-style-type: none"> - ongoing working relationship - client solvency - respect for/meeting deadlines - enforcement of contractual provisions and compliance with ethical standards 	<ul style="list-style-type: none"> - dissemination of organizational Code of Ethics and policies - meetings with the Deputy Director and Head of Administration - circulation of Annual Report providing information on activities and financial statements - participation in events organized for external stakeholders, especially the Annual Meeting
	Institutional beneficiaries	<ul style="list-style-type: none"> - services delivered at a level of quality and professionalism that meets demands/expectations - transparency of information - control of services provided 	<ul style="list-style-type: none"> - institutional meetings and events (project launch and closure, inauguration of facilities, international days, etc.) - activity implementation monitoring workshops - help with the development of ministerial guidelines on specific health matters - availability of project reports - circulation of Annual Report providing information on activities and financial statements - dissemination of organizational Code of Ethics and policies
	Service beneficiaries	<ul style="list-style-type: none"> - universal, nondiscriminatory service delivery - high-quality and professional service delivery - transparency of information - service delivery continuity 	<ul style="list-style-type: none"> - people-oriented service delivery - information and awareness-raising activities on health/ social issues (community gatherings, coffee ceremonies, cooking demonstrations, radio campaigns, etc.) - distribution of informative materials and tools (brochures, kits for mothers, emergency kits, etc.)
	Course participants	<ul style="list-style-type: none"> - training and acquisition of new skills - opportunities for professional growth - job opportunities following traineeship - sense of belonging 	<ul style="list-style-type: none"> - dissemination of organizational Code of Ethics and policies - meetings with the Director and specific division heads - periodic publications: <i>èAfrica and Health and Development</i> - CUAMM weekly newsletter - CUAMM monthly newsletter - occasional/thematic newsletter from the Director - circulation of Annual Report providing information on activities and financial statements - participation in events organized for external stakeholders, especially the Annual Meeting
	University students	<ul style="list-style-type: none"> - sense of belonging - training and acquisition of new skills - opportunities for professional growth - sense of moral/social gratification 	<ul style="list-style-type: none"> - dissemination of organizational Code of Ethics and policies - meetings with the Director and specific division heads - periodic publications: <i>èAfrica and Health and Development</i> - CUAMM weekly newsletter - CUAMM monthly newsletter - occasional/thematic newsletter from the Director - circulation of Annual Report providing information on activities and financial statements - participation in events organized for external stakeholders, especially the Annual Meeting

FURTHER INFORMATION

Legal disputes

Doctors with Africa CUAMM has no ongoing disputes with any public bodies, other entities or private individuals.

Environmental safeguarding

With regard to environmental safeguarding, Doctors with Africa CUAMM has adopted the following policies for the implementation of its activities:

1. We purchase only EU Ecolabel-certified *MultiCopy Zero* paper for our offices in Padua. It has a reduced environmental impact: it is certified totally chlorine-free (TCF) and carries the Forest Stewardship Council (FSC) label, having been produced along a controlled supply chain from responsibly managed forests.
2. All employees and collaborators of Doctors with Africa CUAMM are asked to print documents only if strictly necessary, a recommendation that is also included at the bottom of every CUAMM-issued email.

Number of meetings held during the reporting period

The Board of Directors of the Opera San Francesco Saverio Foundation, which also administers Doctors with Africa CUAMM's activities, met three times in 2022: on 11 May, 8 June (to approve the figures provided in the Annual Report and Final Balance 2021) and 21 December 2022.

MONITORING BY THE BOARD OF AUDITORS

As the oversight body of the Opera San Francesco Saverio Foundation that also oversees Doctors with Africa CUAMM's activities, the **Board of Auditors** met four times during in 2022, on

- 3 March
- 3 June
- 1 September
- 1 December.

It monitored:

- a) the keeping of accounting and tax records (general journal, VAT registers and depreciable assets book) and company books (Board of Directors' book of meetings and resolutions and Board of Auditors' book of resolutions);
- b) the fulfilment of Doctors with Africa CUAMM's obligations vis-à-vis the payment of withholding taxes and contributions on income from employment and self-employment for its staff both in Italy and abroad, as well as its consultants;
- c) periodic VAT payments;
- d) online sending of mandatory tax documents;
- e) checking cash balances and verifying bank and postal accounts.

The Board of Auditors ascertained that Doctors with Africa CUAMM had operated within the scope of its mission and made no profit from the implementation of any of its activities. The Foundation earmarked the operating surpluses exclusively for the carrying out of its statutory activities, as noted by the Board of Auditors in its report to the financial statements ended on 31 December 2022 attached to the Minutes on the approval of the financial statements themselves dated 1 June 2023.

MEETINGS OF THE SUPERVISORY BODY

In 2021, the Supervisory Body met on 3 and 4 November; no meetings were held in 2022.



05/ PERSONNEL



PERSONNEL IN AFRICA

Over the years, Doctors with Africa CUAMM has carried out health development projects against a backdrop of constantly evolving and mounting complexity, including the respective sociopolitical settings of each of the African countries we work with.

The COVID-19 pandemic, and then the war in Ukraine, have made matters even worse, intensifying poverty and making access to health care even more difficult. That's why it is more important than ever for us to be able to rely upon well-qualified and highly motivated human resources, people who are not only ready to work in the most remote, difficult settings but also to develop – alongside their local counterparts – ever more finely-honed skills in the areas of analysis, research, knowledge of local settings, planning and organization.

We recruit and select human resources both from our internal pool – those who have already worked with CUAMM in the past, whom we regard as precious capital to be retained and further cultivated – and external professional candidates, as follows:

- **European “internationals”**;
- **African “internationals”**, i.e. from countries different from the one in which a given intervention is to be implemented;
- **African “nationals”**, i.e., local people from the country in which the intervention is to be implemented.

In 2022 Doctors with Africa CUAMM managed some **3,459 human resources**, 2,260 of whom under “special management” in South Sudan (see further details at right). Of the total HR pool, **1,199 individuals worked on projects**: 834 skilled professionals (not only from the medical/health field, but also administrators, logisticians and community experts) and 365 support staff.

SUPPORTING THE HEALTH SYSTEM IN SOUTH SUDAN

South Sudan remains extremely fragile, and is still unable to sustain health services on its own. That's why Doctors with Africa CUAMM has been appointed by local government as the organization responsible for supporting a number of local health systems.

Following a drop in donor funds for the country's health system, as 2022 drew to a close, CUAMM had managed to maintain its commitment to **12 counties** and related government offices, for a total of **103 peripheral health facilities** and **4 hospitals**.

CUAMM also supported the management and remuneration of local health staff, paying a supplemental salary to around **1,400 individuals**, and guaranteed a monthly incentive to a network of some **860 village health workers**.

We will continue to provide this “special management” support until the government has the ability and resources to manage the personnel working in its health facilities on its own.

PERSONNEL CHARACTERISTICS (AGE AND GENDER)

It is important to note that while 88% of CUAMM's doctors are international (90% European and 10% African), the same percentage (88%) of our non-medical health personnel are African nationals. This figure underscores the **priority Doctors with Africa CUAMM gives to investing in local staff** whenever available, as is generally the case with non-medical health personnel, **building their capacity** in order to foster the autonomy and development of national health systems. We only send international staff overseas, in fact, to fill positions for which our African partner-countries do not yet have local professionals at their disposal, as is often the case when it comes to medical doctors.

CUAMM's **European international personnel** included 134 women and 122 men. In terms of age, 48% were under 35, 26% were aged from 35 to 55, and 26% were over 55. Regarding our **African international personnel**, of the total 53 individuals working on projects in 2022, 32 were men and 21 women. Seventeen percent of them were under 35 years of age, 77% were aged from 35 to 55 and just 6% were over 55. Finally, the number of **African national (local) personnel** working with CUAMM was 890, 72% of whom were men and 28% women. Forty-two percent of them were under 35 years of age, 55% were aged from 35 to 55 and just 3% were over 55.

PERSONNEL SELECTION AND TRAINING

The human resources that CUAMM recruits to fill various positions within our organization's projects receive training before leaving for their African host countries, so that they will be optimally prepared to help reach project objectives both efficiently and effectively.

They are initially provided with general information and materials on the specific setting and job (project, job description, reports, data, etc.), and subsequently sent to CUAMM's headquarters in Padua, Italy (African internationals and locals do remote learning) to undergo specific training. Further in-depth study takes place at CUAMM's coordination offices in the capitals of our African partner-countries.

The training package underlines the fundamentals of Doctors with Africa CUAMM's activities and related strategies and operational modalities for strengthening African health systems. Essential components of health planning – in particular, certain aspects of project management and monitoring – are also provided, with a focus on the importance of their integration into the context of local health systems. A significant part of the training focuses on the management of (both international and national) human resources, who constitute the true “capital” behind CUAMM's activities, as they ensure the long-term presence in all the locations where projects are being implemented.

One hundred days of specific pre-departure readiness training were organized, including one week specifically for administrative figures and two weeks for young people from the **Universal Civil Service (UCS)**; they were then invited to CUAMM headquarters (European internationals in Italy and African international and local staff in Africa)

to complete their training. Once the training came to an end, **169 European international professionals** left to join those already active in the field.

YOUTH TRAINING (JPO, UCS AND MORE)

In 2022 CUAMM's **Junior Project Officer (JPO) initiative**, which offers young medical residents an opportunity to undertake theoretical and practical training in an African country under the mentorship of a CUAMM specialist doctor, celebrated its twentieth anniversary.

In the first two decades of the program, **327 residents** from universities all over Italy have taken up the opportunity, and demand continues to grow: 2022 alone saw 56 departures. Many of the residents have developed their specialist theses while abroad, making important contributions to CUAMM's ongoing operational research work.

Thanks to the UCS program, another 16 young people were placed alongside CUAMM staff in our African-partner countries.

Although the JPO and UCS programs are the best structured training opportunities in Africa for younger people interested in doing development work, they are not the only ones; in 2022, five health professionals – 3 doctors and 2 nurses – also left for Africa to join our personnel in the field.

To learn more about these opportunities, see the “Education and public awareness” section in this Annual Report and visit our website at www.doctorswithafrica.org.

PERSONNEL SERVING IN AFRICA IN 2022

3,459
human resources



1,199

human resources involved in CUAMM projects, including:

834

qualified professionals, of whom:

525

African nationals (locals)

53

African internationals (expats)

256

European internationals (expats), including

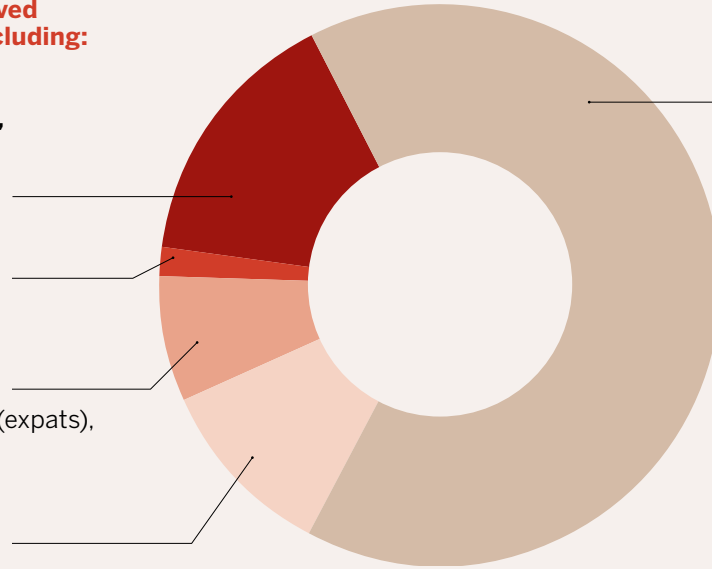
247 Italians

365

support staff

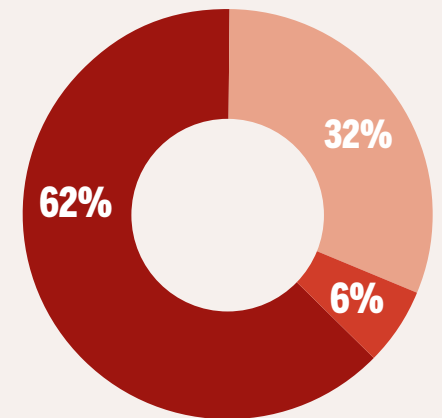
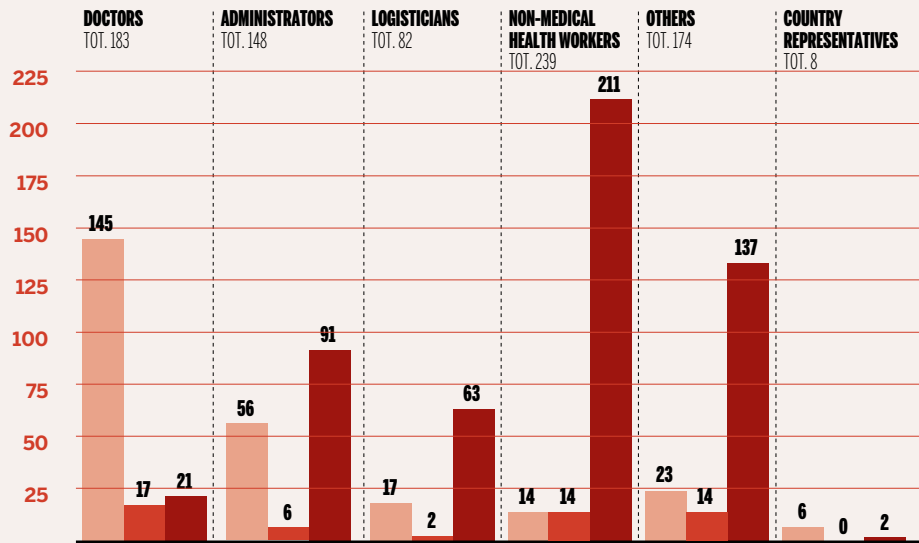
2,260

human resources under "special management" in South Sudan

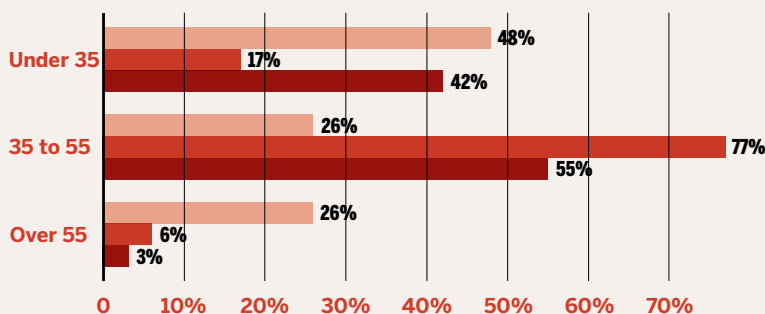


PROFESSIONAL CHARACTERISTICS/BACKGROUND OF QUALIFIED PERSONNEL

European international personnel (expats) African international personnel (expats) National personnel (locals)



AGE



GENDER



PERSONNEL IN ITALY



In 2022 Doctors with Africa CUAMM had **74 employees and 12 collaborators** in Italy, 73% (62) of whom were women and 27% (23) men. In terms of age, 14% were under 30, 18% were aged from 30 to 35, 18% from 36 to 40, 7% from 41 to 45, and 43% were 46 or older.

With regard to years of service with Doctors with Africa CUAMM, 43% of the personnel had been with us for less than 5 years, 20% from 5 to 10 years, 8% from 11 to 15 years, and 29% for over 15 years.

STUDENT COLLEGE

A total of **70 students** (36 women and 34 men) **attended Doctors with Africa CUAMM's Student College** in 2022, 47 in the area of biology/health, 8 in engineering, 4 in psychology, 9 in the humanities, 1 in economics and 1 in another field.

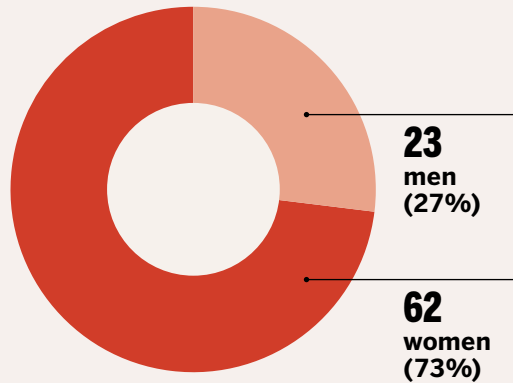
PEOPLE AT THE CENTER

"CUAMM has always put a special focus on *people*, staying in touch with, caring about and respecting those who work with us. **Seeking out, selecting, welcoming and accompanying individuals is the specific task of our Human Resources division.** As for those who go to the field with our organization, we ask that they handle themselves in a professional manner, share and work towards CUAMM's mission, be flexible and adaptable; but it's also about *how* they undertake the experience. You can open a door and let everything flow in."

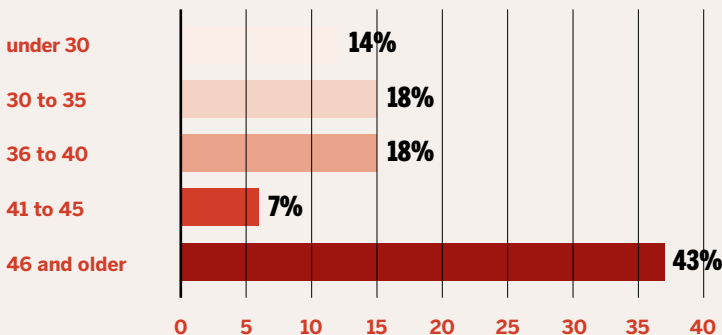
Alessandra Gatta,
Doctors with Africa CUAMM,
Human Resources

PERSONNEL SERVING IN ITALY IN 2022

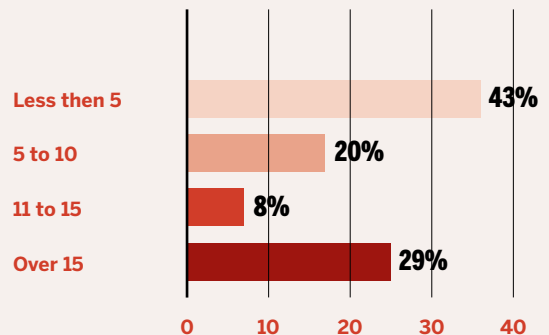
85
human
resources:
74
employees
11
collaborators



AGE RANGE



YEARS OF SERVICE



REMUNERATION SYSTEM

STAFF AT THE ITALIAN HEADQUARTERS

Staff relationships at Doctors with Africa CUAMM's headquarters are largely regulated by employment contracts in accordance with the Association of Managers of Institutions Dependent on the Ecclesiastical Authority (AGIDAE)'s **National Collective Agreement**; some staff members work based on "continuous collaboration" (term) contracts.

In accordance with Art. 16 of Legislative Decree No. 117/2017, CUAMM complies with the ratio between the maximum and minimum gross annual compensation of its employees.

STAFF SERVING ON PROJECTS IN AFRICA

Employment relationships with project staff in Africa are regulated by "continuous collaboration" (term) contracts in accordance with the national collective agreement agreed to on 9 April 2018 with the FeLSA CISL, NidiL CGIL and UILTemp trade unions vis-à-vis the regulation of coordinated and continuous project collaborations.

VOLUNTEERS

CUAMM headquarters volunteers are reimbursed for expenses that they can document as having been incurred for institutional activities. In 2022 no such reimbursements were made.

BOARD OF DIRECTORS

Pursuant to Art. 14 of Legislative Decree No. 117/2017, we note that no compensation was paid to the members of the Board of Directors in 2022.

BOARD OF AUDITORS

Pursuant to Art. 14 of Legislative Decree No. 117/2017, we note that no compensation was paid to the members of the Board of Auditors in 2022.

SUPERVISORY BOARD

We note that no compensation was paid to members of the Supervisory Board in 2022.



06/ ACTIVITIES AND RESULTS





WITH AFRICA: FACING CRISES TOGETHER



SIDE BY SIDE IN TIMES OF CRISIS

Conflict, drought, environmental and climate change-related disasters, hunger and famine: these are some of the dramatic situations that trigger the phenomenon of African migration, most of which (85%) occurs within the continent, with people fleeing to neighboring countries or to other regions within their own country, thereby becoming **refugees** or **internally displaced persons** (IDPs). This is why so many African nations find themselves juggling multiple crises on top of prior situations of fragility, whether institutional, political, economic, environmental and/or health-related. To best handle such emergencies, which bear down ever more frequently on the African countries with which we partner, we at Doctors with Africa CUAMM merge our approach to **development work**, which is generally implemented **over the long term** and under relatively peaceful conditions, into our response to any given crisis. This means working with local authorities to **help communities and systems build up** both their **preparedness** (the ability to anticipate risks and to be ready to respond quickly and efficiently to all types of disasters and emergencies) and their **resilience** (the capacity to adapt to and withstand shocks) in order **to mitigate the impact of crises**, especially during peak periods of shock.

When conflicts force entire communities to abandon their homes to seek shelter elsewhere, we implement **coordinated systems of health and humanitarian response interventions** to get them the aid they need. Thus CUAMM keeps a constant focus on **strengthening local health systems** and their resilience, both supporting hospitals and health centers and **providing emergency aid and support** to meet the needs of the residents of refugee and IDP camps, especially women and children.

PROVIDING ACCESS TO HEALTH SERVICES

We provide access to ordinary quality health services: outpatient visits, prenatal visits, maternal and child services, and vaccinations. At some camps, CUAMM sets up temporary advanced medical posts (TAMPs) and organizes mobile clinics.

MAKING AVAILABLE MEDICINES & MEDICAL SUPPLIES

CUAMM provides health facilities with drugs and medical supplies, and distributes emergency kits (containing soap, cloth, blankets, face masks, washbasins, and more) to refugees and displaced persons in camps.

TRAINING HEALTH WORKERS

We invest in training health workers, and helping to strengthen their capacities and skills. And to improve emergency responses, we offer dedicated training for the management of refugees and IDPs and the provision of context-appropriate health services.

CONDUCTING AWARENESS-RAISING ACTIVITIES

CUAMM conducts many awareness-raising and prevention campaigns, particularly vis-à-vis diseases caused by poor sanitary conditions and overcrowding. We promote community awareness about treatment adherence for chronic diseases, such as HIV/AIDS and diabetes, and wise practices, such as the use of mosquito nets.



FEELING SAFE

*In the refugee and IDP camps in the countries where CUAMM does its work, there are many women like **Christine**, 25, who is cradling her newborn. “She’s my fifth; they’re all girls. I gave birth to her at the health post inside the Terkidi camp. She’s the first one to be born there; I gave birth to the others at home, because there was no one to help us in South Sudan. The **community agents** that work there convinced me to go, and everything went well. If I get pregnant again, I’ll go back to the health post to deliver. They help you and take care of you. I felt safer”.*

Christine,
South Sudanese refugee in the Terkidi camp
in Gambella, Ethiopia



REFUGEES

85% OF AFRICAN MIGRATION IS INTERNAL



PEOPLE FLEE FROM:



CONFLICT



DROUGHT



ENVIRONMENTAL
DISASTERS



HUNGER/
FAMINE



THOSE FLEEING

are women, children and entire families and communities. They are known as **refugees** when they cross into a neighboring country, and **internally displaced persons (IDPs)** when they move within their own country. Both face situations of dire poverty, vulnerability and poor or no access to services.

● Internally displaced persons 🚶 Refugees

5.3 MILLION
INTERNALLY
DISPLACED
PERSONS
AND
941,000
REFUGEES
IN ETHIOPIA



2.2 MILLION
INTERNALLY
DISPLACED
PERSONS
AND
2.3 MILLION
REFUGEES
IN SOUTH
SUDAN



1,550,000
REFUGEES
IN UGANDA



745,000
INTERNALLY
DISPLACED
PERSONS IN MOZAMBIQUE



HOW DOES CUAMM INTERVENE?

CUAMM merges its approach to development work, which is implemented over the **long term**, into our response to emergencies, including unrest, epidemics and other crises. In the **most critical situations**, we work with local authorities to ensure a coordinated system of health and humanitarian interventions so that people will get the help they need.

WHAT WE DO IN REFUGEE/IDP CAMPS



PREVENTION
ACTIVITIES



ACCESS TO
HEALTH
SERVICES



SUPPLY
OF MEDICINES
AND MEDICAL
MATERIALS



TRAINING
OF HEALTH
WORKERS

CUAMM'S INTERVENTION IN EASTERN EUROPE

In 2022, at the start of the conflict in Ukraine, Doctors with Africa CUAMM began an emergency intervention in **Eastern Europe** in support of the civilian populations of **Moldova, Poland** and, of course, **Ukraine**. Funding for two projects by OCHA, another by AICS, a contribution from CARITAS and additional individual donations enabled us to conduct logistical health **support activities** in Ukraine **to help communities directly affected by the conflict**; they primarily entailed the **distribution of medicines, consumables, and equipment to some 42 hospital facilities** in 9 of the country's provinces (*oblasts*), from Lviv to Chernivtsi, and Kharkiv to Dnipro. We also provided support to **internally displaced people** in the urban areas of Chernivtsi, distributing food parcels, basic necessities, tents, winter clothing, and back-up and electric generators for the frequent electricity shortages. Finally, using mobile clinics and dedicated psychologists, we offered **individual psychological support** to the staff of local charities operating in the area, as well as to the local population.



NO MORE POINTS OF REFERENCE

"I lived in Kharkiv, and a month after the war began I'd almost gotten used to the sound of exploding bombs and rockets. After all, this was my home; I didn't want to leave," Svitlana, 65, explains. "When my daughter Ksesia asked me to leave Kharkiv together with my newborn grandson, I realized that it was time: I was going to have to leave my life, my home and my friends. When we arrived to Chernivtsi it wasn't easy. I felt safe, protected, but it also hurt; I had no more points of reference."

Svitlana,
beneficiary of CUAMM's psychological support services for IDPs and the local community in Chernivtsi, Ukraine.



ANGOLA

IN 2022

After the slowdown in CUAMM's activities in Angola in 2020 due to the COVID-19 pandemic, followed by the resumption of our work to combat malnutrition in 2021, 2022 proved to be a year of **fresh challenges** for Angola, and in particular for the Cunene Region. Our interventions expanded both in the municipality of Ombadja, thanks to new donors, and in the neighboring municipality of Cahama, both with **activities to combat malnutrition** and the introduction of **water, sanitation and hygiene (WASH) activities** in both municipalities. CUAMM's activities in Luanda to **fight and prevent infectious diseases** (HIV/AIDS) drew to a close with the publication of a book featuring life stories collected by the activists involved in the program; its aim was to combat stigma towards, and the marginalization of, HIV-positive Angolans.

In the meantime, our project in the capital to **improve diagnostic services for tuberculosis patients** and **digitize health records** in 3 hospitals and 5 health centers continued.

We also continued providing support to the Chiulo Hospital in Cunene Province in the area of **maternal and child health**. Doctors with Africa CUAMM's on-the-ground presence enabled us to provide **on-the-job training of hospital staff** on the management of both pediatric patients and obstetric emergencies.

In addition, thanks to the use of mobile brigades (*brigadas moveis*) we were able to proceed with our **public health activities**, providing vaccinations for children and distributing iron and folic acid supplements to pregnant women; we also continued to provide support to mothers-to-be staying at the **maternity waiting homes** (*casa de espera*), and to ensure the presence of traditional midwives and their ongoing **community outreach and awareness-raising activities** in the municipality of Ombadja.

2022 SNAPSHOT

65
human resources

51
health facilities supported

€ 1,565,833
invested in projects

COUNTRY PROFILE

Luanda
capital



241
maternal deaths
per 100,000 live births

35,981,281
population

1,246,700
sq. km.
land area



69
under-5 child deaths
per 1,000 live births

15.9
average age of population

62.5
life expectancy at birth (m/f)



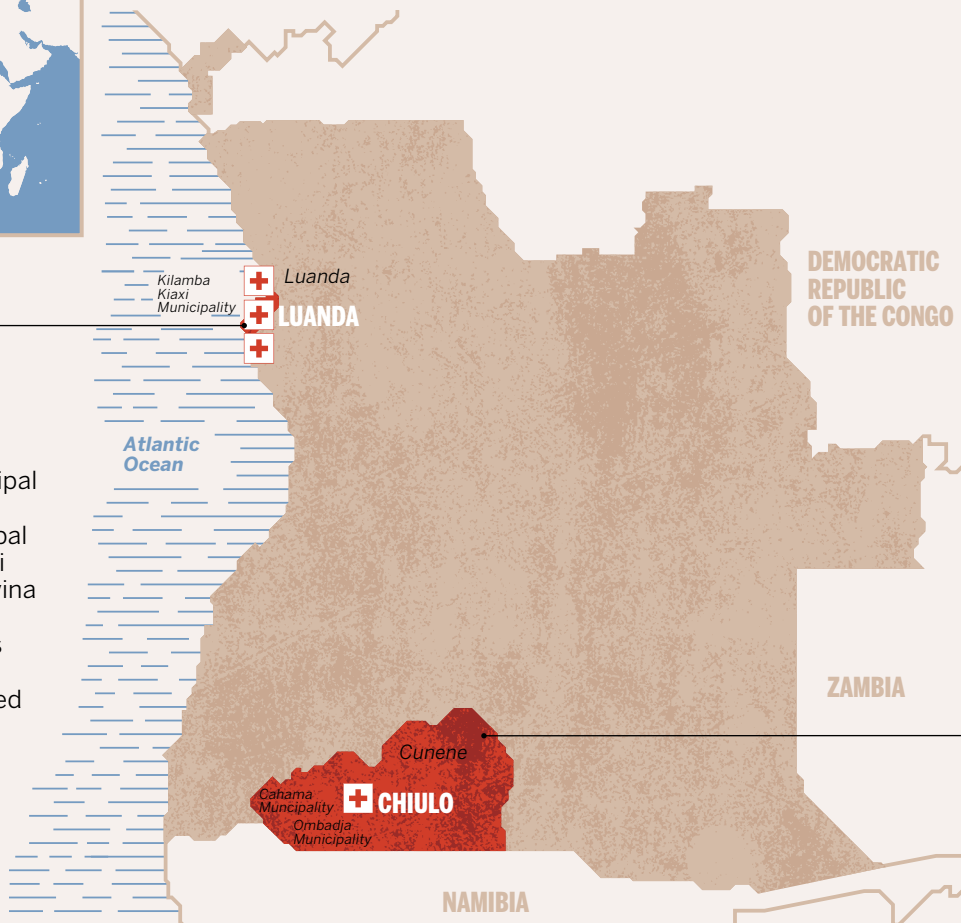
27
newborn deaths
per 1,000 live births

5.76
average no. of children per woman

148th
out of 191
countries
human development index ranking



WHERE WE WORK



LUANDA PROVINCE

3 hospitals
(Hospital Municipal de Talatona, Hospital Municipal de Kilamba Kiaxi and Hospital Divina Providencia)
5 health centers
3,781,294 population served







CUNENE PROVINCE

Ombadja Municipality
1 hospital (Chiulo)
36 health centers
323,957 population served

Cahama Municipality
6 health centers
85,622 population served

0 125 250 km

RESULTS ACHIEVED

 MATERNAL AND CHILD HEALTH	4,758	2,592	8,460	45
	prenatal visits conducted	deliveries attended	under-5 children examined	trips provided for obstetric emergencies
 NUTRITION	367			
	children treated for severe acute malnutrition			
 INFECTIOUS DISEASES	4,291			
	patients diagnosed with tuberculosis			
 CONTINUAL TRAINING	120	36	12	16
	midwives trained	nurses	doctors	community agents
				11
				others

ETHIOPIA

IN 2022

2022 was impacted by both the direct and indirect consequences of the **conflict in northern Ethiopia**, in the Tigray Region, as well as the ongoing global crisis and the consequences of drought, which caused severe damage and triggered internal migration flows. The country's economic situation worsened, with continued currency devaluation and high inflation.

Nevertheless, CUAMM's work continued and, indeed, expanded to new areas of Ethiopia. We carried out a project in **Addis Ababa** in partnership with the local health authorities of Kolfe Keranio sub-city to increase **vaccination coverage** and contain the spread of COVID-19. We also implemented activities in partnership with the Ethiopian Ministry of Health and the Ethiopian Diabetes Association to improve **diabetes services (DMT₁) in 34 hospitals nationwide**.

At the **St. Luke Catholic Hospital** in Wolisso, in the South West Shoa Zone, we ensured the presence of clinical staff to support key services such as internal medicine, pediatrics, and health management, but the difficult financial situation, high inflation, and resulting restrictions greatly reduced people's access to the services, adding heavily to costs.

In the **South Omo Zone**, our maternal and child health intervention with the **Jinka and Turmi Hospitals** came to an end, while we bolstered our **intervention in the Gambella Region in support of South Sudanese refugees** living in the **Nguenyiel, Tierkidi, Kulle and Jewi camps** with the aim of ensuring their access to basic health services by improving infrastructure and equipment and making available trained staff.

Our health intervention proceeded in the **Somali Region's** Harawa District, and we sent mobile clinics to the southern part of the region, to **Liben Zone**, to support **IDPs** who had fled their homes due to the drought.

In the **Tigray Region**, despite some interruptions due to a renewed **flareup of the conflict** in the summer of 2022, we were able to provide support to 3 health facilities and the ambulance referral system. On 12 November 2022, a peace pact was finally signed to end the bloody two-year conflict.

Last but not least, we launched a new project in support of IDPs in the **Ahmara Region** in **Debre Birhan** that involved mobile health and nutrition clinics.

2022 SNAPSHOT

179
human resources

54
health facilities supported

€ 4,736,939
invested in projects

COUNTRY PROFILE

Addis Ababa
capital



401
maternal deaths
per 100,000
live births

116,462,712
population

1,104,300
sq. km.
land area



47
under-5 child deaths
per 1,000
live births

19.8
average age
of population

66.4/70.8
life expectancy
at birth (m/f)



26
newborn deaths
per 1,000
live births

3.9
average no.
of children
per woman

175th
out of 191
countries
human
development
index ranking



WHERE WE WORK



AMHARA REGION

1 IDP camp (Debre Birhan)
1 district
300,000 population served

TIGRAY

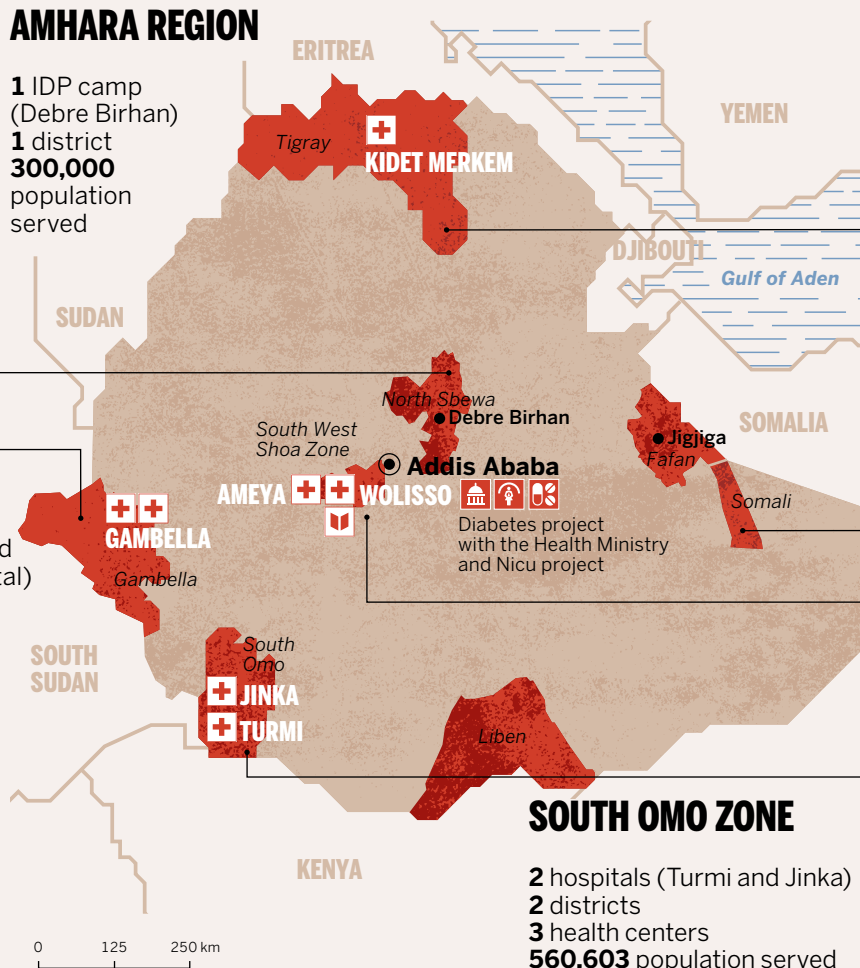
1 hospital (Kidet Merkem Hospital)
2 health centers
3 districts
112,797 population served

SOMALI

4 health centers
3 districts
120,746 refugees
688,680 population served

GAMBELLA

2 hospitals (Gambella and Gambella Primary Hospital)
16 districts
6 health centers
104,120 population served
4 refugee camps (Ngunyyiel, Tierkidi, Kulle and Jewi)
295,958 refugees










SOUTH OMO ZONE

2 hospitals (Turmi and Jinka)
2 districts
3 health centers
560,603 population served

SOUTH WEST SHOA ZONE

2 hospitals (St. Luke Catholic Hospital and Ameya)
1 school for nurses and midwives
5 districts
28 health centers
1,240,333 population served

RESULTS ACHIEVED

 MATERNAL AND CHILD HEALTH	54,196 prenatal visits conducted	32,540 deliveries attended	296,218 under-5 children examined	2,500 trips provided for obstetric emergencies	73,384 vaccinations administered
 NUTRITION	595 children treated for severe acute malnutrition				
 INFECTIOUS DISEASES	1,490 patients diagnosed with tuberculosis	202,597 patients treated for malaria	1,002 patients treated with antiretroviral therapy		
 CONTINUAL TRAINING	446 community agents	289 nurses and midwives	145 doctors	676 others	
 CHRONIC DISEASES	3,144 visits for diabetes	3,261 visits for hypertension	139 patients with diabetes	22 patients with cerebral ischemia	
 SURGICAL PROCEDURES	2,802 major surgical procedures, incl. 222 orthopedic ones		3,058 minor surgical procedures, incl. 334 orthopedic ones		972 physiotherapy sessions provided
 HUMANITARIAN RESPONSE	127,812 emergency room visits	134 obstetric and neonatal emergencies transferred	959 deliveries attended	1,569 prenatal visits conducted	173 health workers trained

MOZAMBIQUE

IN 2022

2022 marked the end of the state of emergency linked to the COVID-19 pandemic in Mozambique, but also the **persistence of insecurity in the Cabo Delgado Province**, the northernmost part of the country, where the number of internally displaced people soared to an alarming 1 million out of the 2.3 million who live in the province. In recent years Doctors with Africa CUAMM has helped to develop a **humanitarian response** that incorporates our already-ongoing development programs (with a special focus on **maternal and child health**) while simultaneously **addressing other key needs of the internally displaced population** as well. Basic medical assistance services continued to be provided to those settled in camps that did not provide such services, as well as to the communities hosting the camp dwellers.

We also conducted **community awareness-raising and educational activities** on the most **widespread endemic diseases**, including COVID-19, cholera, malaria, in 6 districts of Cabo Delgado, and solidified a vital project in support of **mental health** and **victims of gender violence**.

CUAMM continued to bolster its long-time efforts to combat **non-communicable chronic diseases** (diabetes, cervical cancer, hypertension, and more) in the Sofala, Zambézia and Maputo provinces, adding a specific component to support the services of **4 hospitals for children and adolescents affected by Type 1 diabetes mellitus** and launching a pilot project for a **decentralized outpatient clinic** to treat these diseases.

In addition, we continued our work in Sofala Province, providing support to the **neonatal and pediatric unit at Beira Central Hospital** as well as to ongoing programs aimed at **tackling HIV/AIDS**, especially in adolescents.

On the **maternal and child health** front, CUAMM proceeded with its **adolescent sexual and reproductive health** project in Tete Province, and devised a small **early childhood development** initiative in Zambezia.

By the end of the year, CUAMM brought to a close our work alongside local authorities on **COVID-19 vaccination campaigns** in Tete and Sofala Provinces.

2022 SNAPSHOT

239
human resources

54
health facilities supported

€ 6,896,262
invested in projects

COUNTRY PROFILE

Maputo
capital



289
maternal deaths
per 100,000 live births

32,513,805
population

799,380
sq. km.
land area



70
under-5 child deaths
per 1,000 live births

17
average age of population

56/59
life expectancy at birth (m/f)



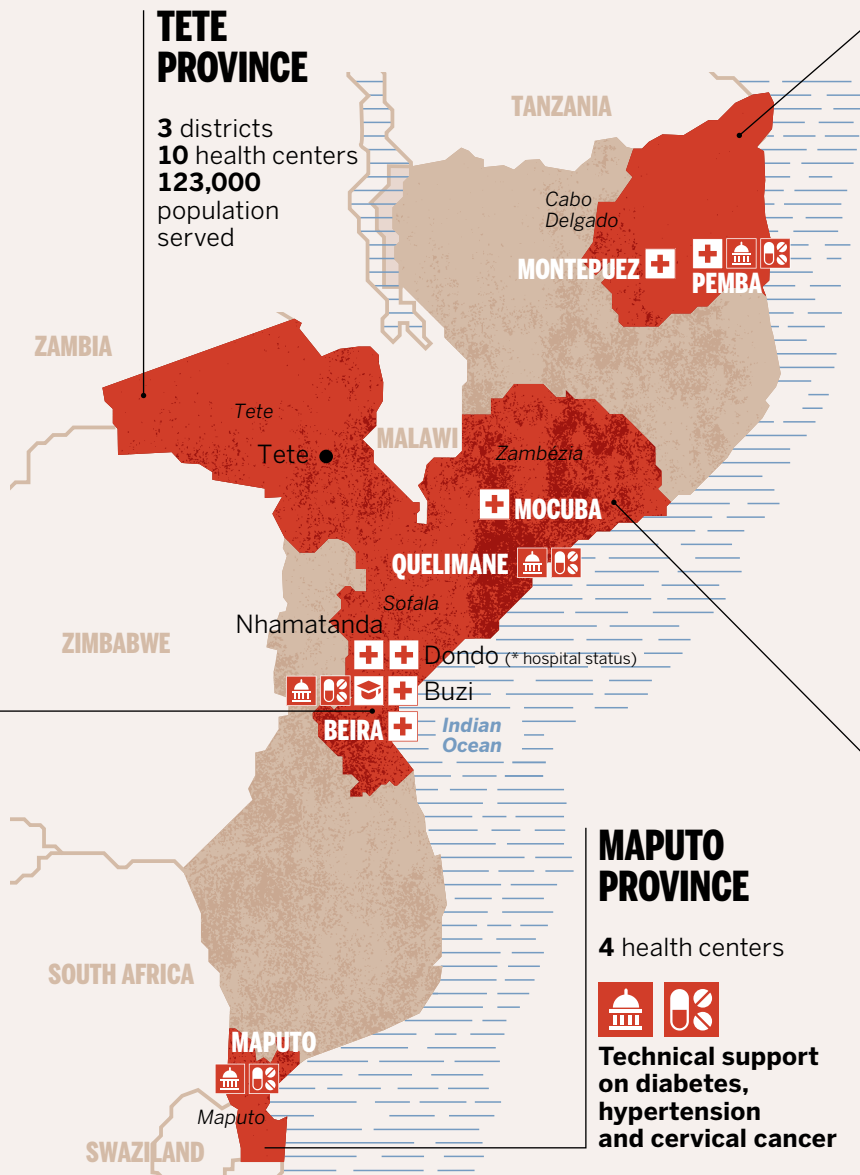
28
newborn deaths
per 1,000 live births

4.7
average no. of children per woman

181st
out of 191
countries
human development index ranking



WHERE WE WORK



TETE PROVINCE

3 districts
10 health centers
123,000 population served

CABO DELGADO PROVINCE

2 hospitals (Montepuez and Pemba)
18 health centers
9 districts
1,437,856 population served



SOFALA PROVINCE

4 hospitals (Beira Central Hospital, Nhamatanda Hospital, Buzi and the Dondo health center, which has hospital status)
1 university (Catholic University of Mozambique)
10 health centers
4 districts
1,250,665 population served

MAPUTO PROVINCE

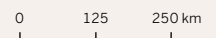
4 health centers



Technical support on diabetes, hypertension and cervical cancer

ZAMBEZIA PROVINCE

2 hospitals (Rural de Mocuba and Quelimane)
4 health centers
2 districts
880,546 population served



RESULTS ACHIEVED

	MATERNAL AND CHILD HEALTH	153,240 prenatal visits conducted	110,307 deliveries attended	69,695 under-5 children examined	4,070 trips provided for obstetric emergencies
	INFECTIOUS DISEASES	196,922 adolescents informed/educated about HIV/AIDS	143,162 adolescents tested for HIV	1,070 HIV-positive adolescents	
	CONTINUAL TRAINING	46 University of Beira graduates			
	CHRONIC DISEASES	3,714 visits for diabetes	25,114 visits for hypertension	389 patients with diabetes	

CENTRAL AFRICAN REPUBLIC

IN 2022

Despite the fact that our primary source of funding for the project – by the European Union through the Bêkou Fund – came to an end in June, CUAMM's support for the Central African Republic's **Children's Hospital in Bangui** in partnership with *Action Contre la Faim* (ACF) continued in 2022. By making some necessary adjustments, including with regard to the hospital's staff incentivization system, we were able to continue to ensure both treatment for children and the managerial and administrative capacities of the hospital, coordinating human resources and materials and collecting and processing health data in order to plan and evaluate the services provided.

We also continued to train hospital staff and purchase medicines and laboratory supplies. The overall operation of the hospital's hygiene services and logistic maintenance and the presence of CUAMM doctors were ensured in order to guarantee the availability of around-the-clock quality pediatric services. In July 2022, at a public event in the presence of the Minister of Health, the Italian ambassador, and other local authorities, we presented the results of the prior four years of activity.

In February 2022, in partnership with the Ministry of Health and Population, CUAMM also launched an intervention in support of the Bocaranga and Ngaoundaye Hospitals in the prefecture of Ouham-Pendé, located close to the border with Cameroon and Chad in the country's furthest northwestern area, which has been battered by multiple shocks in recent years, including the COVID-19 pandemic, a renewal of armed violence and conflict, fluctuations in the cost of food, and drought. CUAMM ensured the delivery of obstetric emergency and nutritional services by training staff and supplying medicines and consumables. In June 2022, CUAMM's technical assistance project (ATECH) to 6 of the country's 7 health regions, also funded by the program European Union's Bêkou Fund, drew to a close. The project was part of a broader program for the training of regional and district-level health management bodies, and supported the supervision and mentorship of the latter in order to ensure the appropriate planning and monitoring of health activities as well as the standardization of health facilities.

2022 SNAPSHOT

100
human resources

3
health facilities supported

€ 4,315,790
invested in projects

COUNTRY PROFILE

Bangui
capital



829
maternal deaths
per 100,000 live births

5,552,228
population

622,984
sq. km.
land area



100
under-5 child deaths
per 1,000 live births

20
average age of population

54.6/57.3
life expectancy at birth (m/f)



32
newborn deaths
per 1,000 live births

3.9
average no. of children per woman

188th
out of 191
countries
human development index ranking



WHERE WE WORK

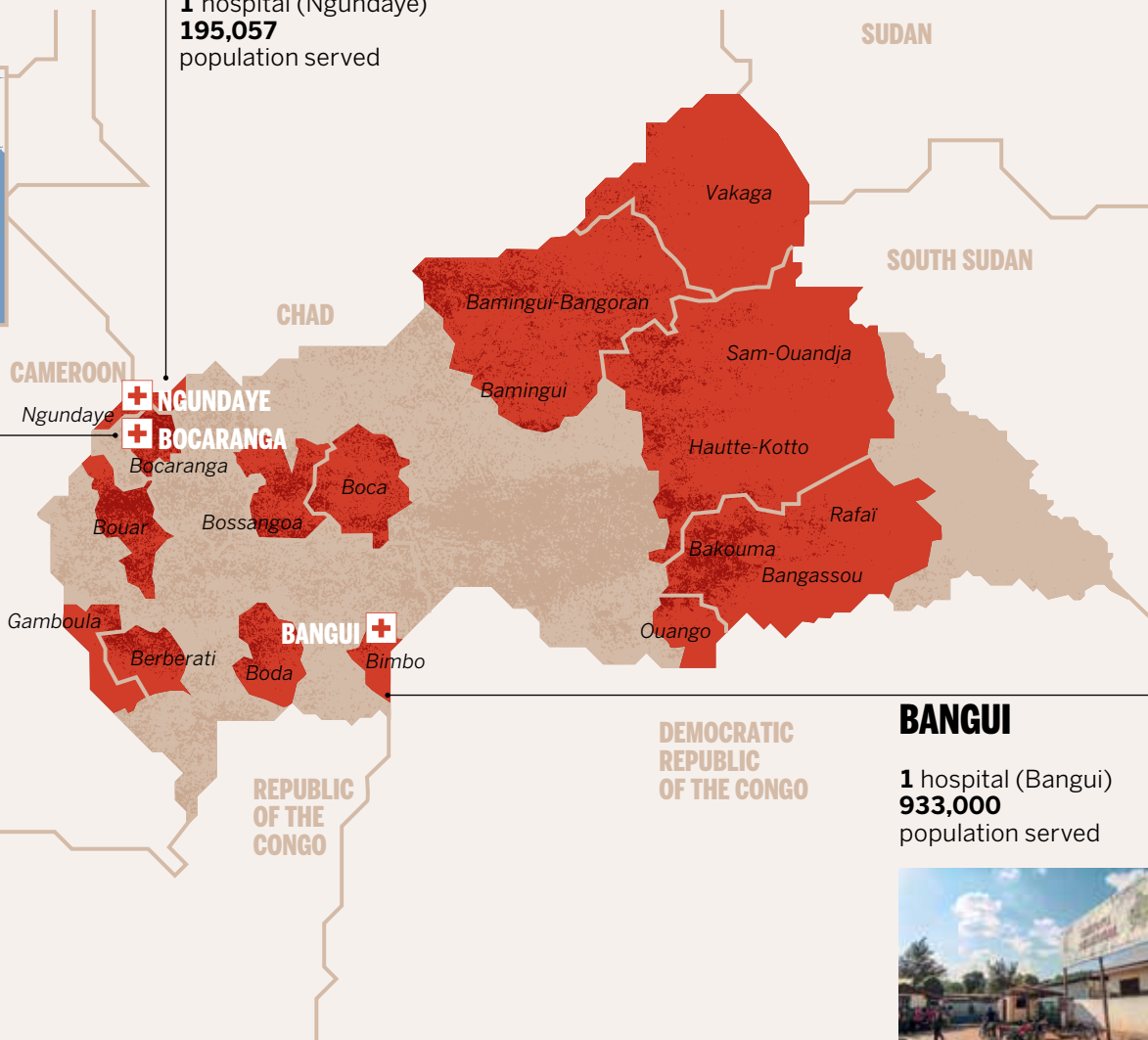


NGUNDAYE

1 hospital (Ngundaye)
195,057 population served

BOCARANGA

1 hospital (Bocaranga)
157,420 population served



BANGUI

1 hospital (Bangui)
933,000 population served



RESULTS ACHIEVED

 MATERNAL AND CHILD HEALTH	1,112 prenatal visits	1,134 deliveries attended	69,086 under-5 children examined	17,742 pediatric hospitalization	6,613 vaccinations administered
 INFECTIOUS DISEASES	14,405 cases of malaria diagnosed				
 CONTINUAL TRAINING	97 nurses	14 midwives	23 doctors	87 others	

SIERRA LEONE

IN 2022

In partnership with Sierra Leone's Ministry of Health, in 2022 Doctors with Africa CUAMM continued its work to strengthen the public health system in four districts. This included providing support to the country's only dedicated screening program for **gestational diabetes** in its urban (PCMH and Western Area Urban) and rural (Pujehun Maternity Hospital and Pujehun District) districts, to make more advanced health care available to any woman accessing the facilities. After implementing the National Emergency Medical Service (NEMS) to help strengthen emergency management capacity, CUAMM began **rehabilitating the emergency room at Connaught (referral) Hospital**. CUAMM's continued **support for Sierra Leone's largest maternity hospital**, in Freetown, including handling more than 7,800 deliveries and undertaking **quality improvement and high dependency unit (HDU)** activities to make it possible to ensure **intensive care for critically ill patients**, thereby also improving the level of care provided. In the Bombali District, our **support to Makeni's Holy Spirit Hospital** continued with the aim of increasing the number of patients accessing the facility. CUAMM also continued to lend its support to the Bonthe and Pujehun health districts, the country's most remote, providing **training and maternal and child**

health assistance. In Bonthe, we supported the district through **supervision and technical assistance**, and also continued our support for **boat transportation services for women** living in riverine areas who would otherwise be unable to reach the hospital to deliver their babies. In the Pujehun District our work and technical assistance to the hospital continued, as did our promotion of the referral back system, which entails the use of **vouchers to enable the most fragile pediatric patients to get back to their villages** once they are discharged, thereby facilitating their recovery. Also in Pujehun District, CUAMM began to implement the three-year **PEN Plus** program, which focuses on the country's rural areas and aims to provide integrated care services to those affected by chronic (noncommunicable) diseases. Finally, with a view to integrating key maternal and child nutrition activities into the continuum of care, CUAMM began a program in the Pujehun District to reduce the prevalence of every form of malnutrition through a multi-sectoral approach. During the pandemic, CUAMM also helped the district to implement its COVID-19 vaccination campaign, and in 2022 the Ministry of Health named Pujehun as the district with the best vaccination campaign implementation performance.

2022 SNAPSHOT

86
human resources

1,289
health facilities supported

€ 2,587,118
invested in projects

COUNTRY PROFILE

Freetown
capital



1,120
maternal deaths
per 100,000 live births

8,908,040
population

71,740
sq. km.
land area



105
under-5 child deaths
per 1,000 live births

19.1
average age of population

57.5/60.7
life expectancy at birth (m/f)



31
newborn deaths
per 1,000 live births

3.7
average no. of children per woman

181st
out of 191
countries
human development index ranking



WHERE WE WORK



FREETOWN WESTERN AREA

2 hospitals
(Princess Christian Maternity Hospital in Freetown and Connaught Hospital)
10 health centers
80,000
population served

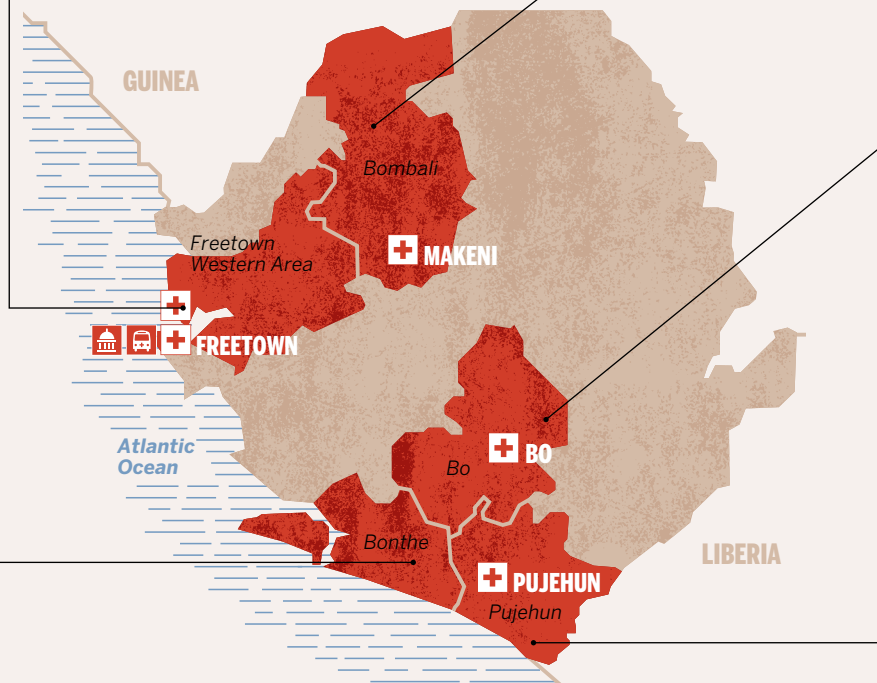
BOMBALI DISTRICT

1 hospital
(Holy Spirit)
1 district
100,000
population served



BONTHE DISTRICT

4 health centers
1 district
223,046
population served



BO DISTRICT






1 hospital (Bo)
5 health centers
603,716
population served

PUJEHUN DISTRICT

1 hospital (Pujehun CMI)
1 district
97 health posts
7 health centers
426,679
population served



RESULTS ACHIEVED

 MATERNAL AND CHILD HEALTH	57,702 prenatal visits conducted	27,379 deliveries attended	132,269 under-5 children examined	4,522 trips provided for obstetric emergencies
 NUTRITION	246 children treated for severe acute malnutrition			
 INFECTIOUS DISEASES	322,234 patients treated for malaria	35,543 under-5 children treated for acute respiratory infections		
 CONTINUAL TRAINING	77 community agents	106 nurses and midwives	11 doctors	251 others
 CHRONIC DISEASES	63 visits for diabetes	144 visits for hypertension	6,219 tests for gestational diabetes	334 cases of gestational diabetes diagnosed

SOUTH SUDAN

IN 2022

In 2022 CUAMM maintained its customary approach in South Sudan, providing **integrated and comprehensive support** to help strengthen the national system and build up the resiliency of local communities. Overall, our organization supported **11 county health offices, 4 hospitals** (as well as a fifth one for a period of nine months) and **103 peripheral health facilities**. We coordinated and **trained approximately 903 community agents** so that they could ensure treatment for individuals affected by malaria, diarrhea and pneumonia and conduct health education activities in the country's most remote regions, and helped volunteers to implement vaccination drives. Supplementing these activities was a **free ambulance service** to enable a prompt response to the needs of both the resident community and those displaced by conflicts and floods. Doctors with Africa CUAMM also resumed its efforts to halt the spread of **COVID-19**, taking the lead in the implementation of the country's **vaccination campaign**, first at the hospital level and subsequently also through outreach activities, helping to get shots into the arms of 113,292 individuals. We also took steps to ensure proper working conditions at health facilities through training, the supply of protective equipment, improved hygiene, the reorganization

of spaces, and implementation of new entry screening procedures. Help was provided with **outreach and awareness-raising initiatives** to teach communities about the pandemic and ways to **prevent and manage COVID-19 infection**.

Finally, CUAMM renewed its commitment to the training of qualified local health staff through our continued support of the **Health Sciences Institute in Lui** and the strengthening of our intervention at its **counterpart in Rumbek**.

2022 SNAPSHOT

289
human
resources

2,260
human
resources
under special
management

110
health facilities
supported

€ 11,595,885
invested
in projects

COUNTRY PROFILE

Juba
capital

12,118,379
population

644,329
sq. km.
land area

18.6
average age
of population

57.9/61.6
life expectancy
at birth (m/f)

5.2
average no.
of children
per woman

191st
out of 191
countries
human
development
index ranking



1,150
maternal
deaths
per 100,000
live births



99
under-5
child deaths
per 1,000
live births



40
newborn
deaths
per 1,000
live births



WHERE WE WORK

0 100 200 km



FORMER WESTERN LAKES STATE

1 hospital (Rumbek)
1 school for nurses and midwives (Rumbek)
4 counties
33 health centers
541,787 population served

FORMER EASTERN LAKES STATE

1 hospital (Yirol)
3 counties
24 health centers
305,611 population served



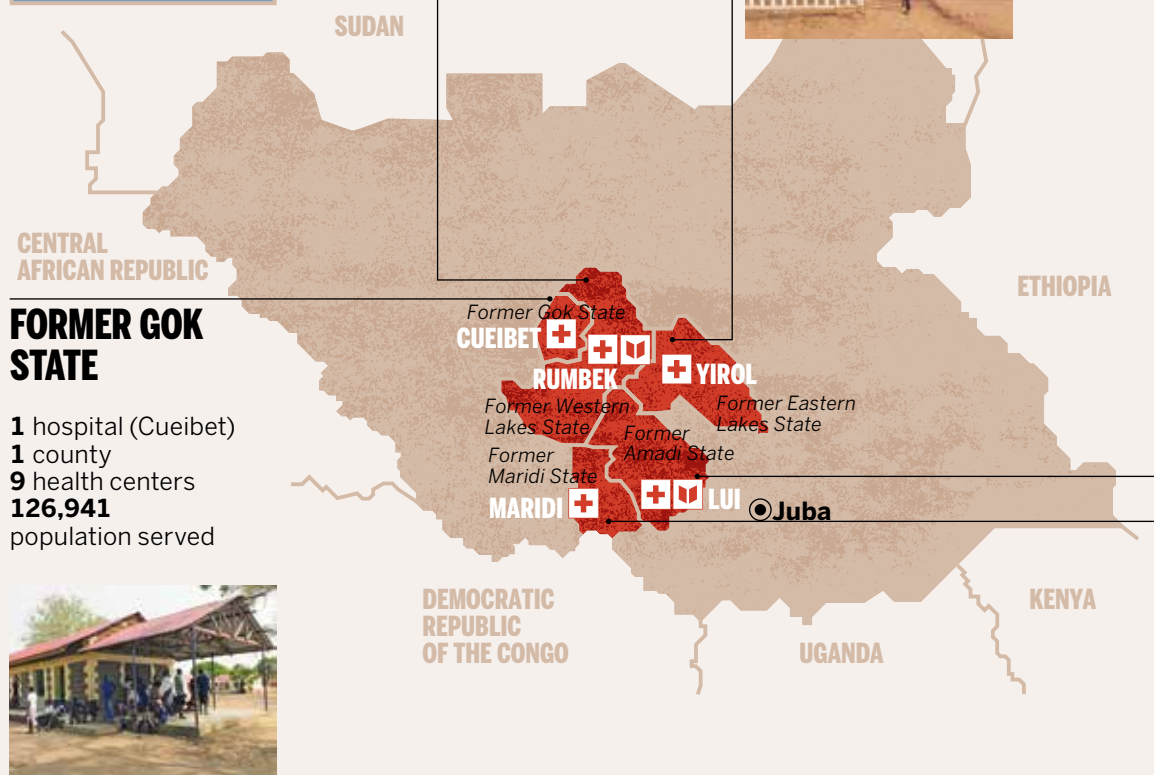
FORMER AMADI DISTRICT

1 hospital (Lui)
1 school for nurses and midwives (Lui)
3 counties
6 schools
37 health centers
183,513 population served



FORMER MARIDI DISTRICT

1 hospital (Maridi)
1 county
115,719 population served



FORMER GOK STATE

1 hospital (Cueibet)
1 county
9 health centers
126,941 population served



RESULTS ACHIEVED

MATERNAL AND CHILD HEALTH	67,332 prenatal visits conducted	19,990 deliveries attended	412,346 under-5 children examined
NUTRITION	126 children treated for severe acute malnutrition		
INFECTIOUS DISEASES	385,562 patients treated for malaria	140,111 under-5 children treated for acute respiratory infections	
CONTINUAL TRAINING	26 community agents	16 nurses and midwives	7 doctors 212 others

TANZANIA

IN 2022

In 2022 Doctors with Africa CUAMM's activities in Tanzania continued to be impacted by the **COVID-19** crisis, which the country's already weak health facilities were unprepared to handle. Doctors with Africa CUAMM supported the health system by providing **medical supplies, drugs and personal protective equipment** and making its personnel available to treat the sick. Our organization lent support to the 5 regions where we are active – Iringa, Njombe, Simiyu, Shinyanga and Dodoma – with their **COVID-19 vaccination campaigns**, assisting with **logistics, vaccine distribution and immunization** in villages and helping to raise community awareness about the virus. We also continued our intervention in the area of **maternal and child health**, facilitating access to health services, including obstetric emergency services, to those in need to ensure greater service coverage, equity and quality. Support was provided to peripheral health facilities through the training of health workers, supervision and the supply of drugs. In addition, CUAMM worked to combat **acute and chronic malnutrition**, supporting Tanzania's national program with educational activities to promote the **exclusive breastfeeding** of newborns for the first 6 months of life, **weaning** and **proper infant feeding**. Integrated with water and agriculture-related initiatives conducted in partnership with other NGOs to help improve the nutritional conditions of both mothers and children,

the interventions sought to improve the quality of the services delivered by nutritional units by providing **health personnel training, supervision and nutritional supplements** critical for the treatment of malnourished individuals. To help foster children's **physical, cognitive, social and emotional development**, CUAMM integrated these activities with others aimed at promoting **early child development**. Our **HIV prevention and treatment efforts** in Tanzania continued in 2022. The program that implemented the **test-and-treat strategy** in the Shinyanga and Simiyu Regions with the aim of expanding the number of individuals tested for the virus, reducing HIV-related stigma, and launching a model of decentralized treatment (CLUBs) for stable HIV-positive individuals drew to an end, but our HIV work continued in the Shinyanga Region, with a special focus on adolescents and young adults. A key goal for CUAMM is to bolster **efforts to prevent and treat chronic diseases** at the national level. Our integrated project for the **prevention and treatment of diabetes and hypertension** in the Iringa DC District and at the Tosamaganga Hospital proceeded in 2022, with the hospital acting as the district's referral facility for the diagnosis and care of chronic patients and peripheral facilities supporting treatment and follow-up.

2022 SNAPSHOT

106
human resources

42
health facilities supported

€ 1,647,180
invested in projects

COUNTRY PROFILE

Dodoma
capital



524
maternal deaths
per 100,000 live births

65,642,682
population

947,300
sq. km.
land area



47
under-5 child deaths
per 1,000 live births

18.2
average age of population

68.7/72.3
life expectancy at birth (m/f)



20
newborn deaths
per 1,000 live births

4.3
average no. of children per woman

160th
out of 191
countries
human development index ranking



WHERE WE WORK

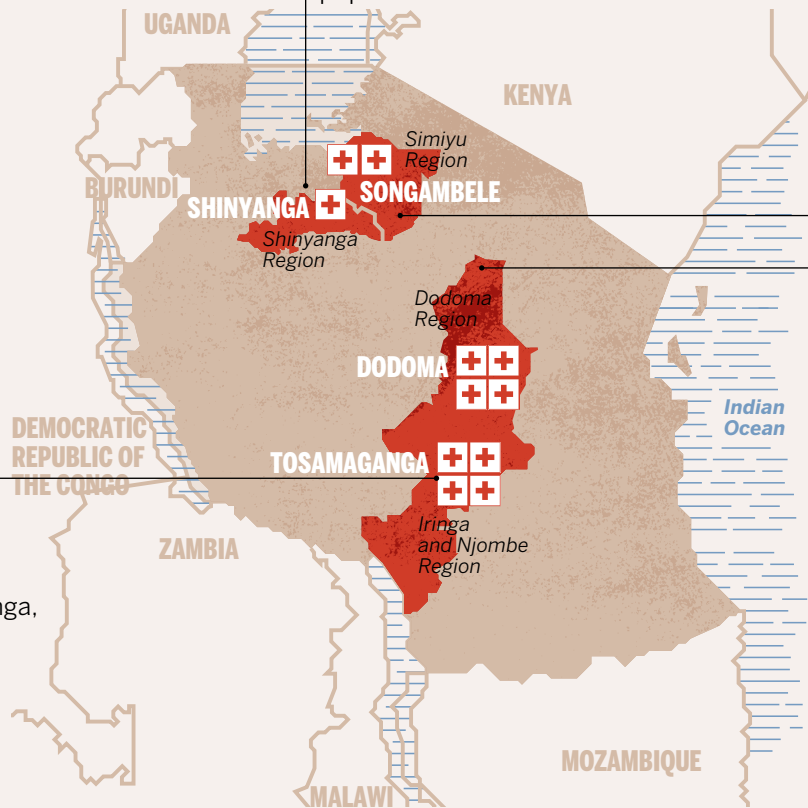


IRINGA AND NJOMBE REGION

4 hospitals (Tosamaganga, Kilolo District Hospital, Mafinga Town Council Hospital and Kibena)
15 health centers
2 districts
398,168 population served

SHINYANGA REGION

1 regional hospital (Shinyanga)
2 health centers
2 districts
684,561 population served



SIMIYU REGION

2 hospitals (Songambele and Bariadi)
3 health centers
3 districts
606,058 population served








DODOMA REGION

4 hospitals (Dodoma Regional Referral Hospital and Chamwino, Kongwa and Bahi District Hospitals)
11 health centers
3 districts
346,507 population served

0 150 300 km

RESULTS ACHIEVED

 MATERNAL AND CHILD HEALTH	38,268 prenatal visits conducted	11,621 deliveries attended	66,295 under-5 children examined	18,711 vaccination administered
 NUTRITION	379 children treated for severe acute malnutrition			
 INFECTIOUS DISEASES	2,610 patients treated for malaria	822 patients treated for tuberculosis	10,545 patients treated with antiretroviral therapy	
 CHRONIC DISEASES	1,474 visits for diabetes	2,992 visits for hypertension	102 patients with cardiomyopathies	31 patients with cerebral ischemia
 CONTINUAL TRAINING	31 nurses	24 midwives	52 doctors	97 others

UGANDA

IN 2022

In 2022, Doctors with Africa CUAMM continued its activities to **help mitigate the impact of the COVID-19 pandemic** with support aimed at keeping routine services accessible and ensuring their quality (most importantly, maternal and child services, but also others), and to **support the country's vaccination campaign** by assisting with logistics, transport, the supply of fuel, the cold chain, staff support, date registration and collection and community awareness-raising campaigns. Our **mentorship program aimed at developing the skills of health workers in the area of maternal and neonatal health** (obstetric and neonatal emergencies, triage, early child development, adolescent health, infection prevention and control) continued on into 2022 and then wound down. Given the vital importance of these activities, we continued to support the **training of health workers**, including through a new project in Lango and Karamoja. Doctors with Africa CUAMM continues to prioritize **maternal and child health**, and in 2022 was honored at the 2nd National Safe Motherhood Conference with an award for the best supporting and implementing partner for safe motherhood activities and service delivery in Uganda. In Karamoja, our interventions for tuberculosis and malaria control and our support to the Matany Hospital

continued. We bolstered our integrated **reproductive health** and community approach interventions thanks to an integrated community system. Of particular importance was our support for the opening of a **blood bank** in Moroto.

As part of the "Mothers and Children First" program, we proceeded with our **support of Aber Hospital and the surrounding health network in Oyam District**. The adolescent health component, featuring services and activities at the health, school and community levels, continued to grow in terms of the numbers of services offered and young women reached. In 2022 CUAMM also launched an **intervention to fight malaria** in Kole and Oyam Districts focused primarily on mothers, pregnant women and children under the age of 5; it entailed activities at the hospital and in schools, communities, and health centers. A **pilot digitization project** was also begun at Aber Hospital with the aim of achieving more effective and efficient patient management. 2022 also saw much activity in terms of both the **Junior Project Officer (JPO)** program and research, the latter in Karamoja on nutrition and tuberculosis and in Oyam and Kole on malaria, especially during pregnancy. Finally, our **mobile clinic program (surgical camps)** to provide eye surgery to the local population, South Sudanese refugees, and others settled in the **West Nile region** entered its third and final year.

2022 SNAPSHOT

135
human resources

422
health facilities supported

€ 4,781,468
invested in projects

COUNTRY PROFILE

Kampala
capital

47,729,952
population

241,038
sq. km.
land area

15.7
average age
of population

67.0/71.6
life expectancy
at birth (m/f)

5.3
average no.
of children
per woman

166th
out of 191
countries
human
development
index ranking



375
maternal
deaths
per 100,000
live births



42
under-5
child deaths
per 1,000
live births

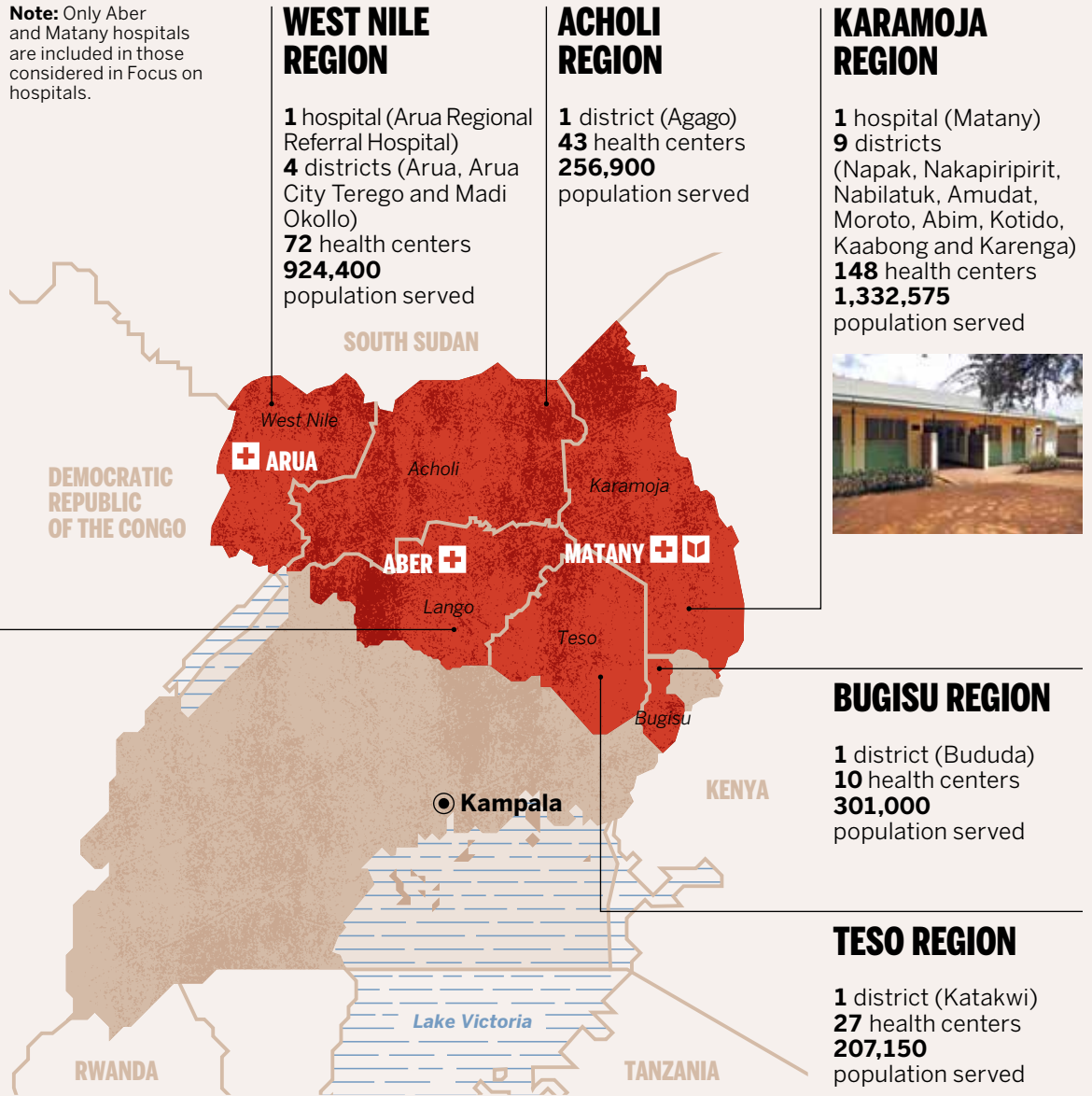


19
newborn
deaths
per 1,000
live births



WHERE WE WORK

Note: Only Aber and Matany hospitals are included in those considered in Focus on hospitals.



WEST NILE REGION

1 hospital (Arua Regional Referral Hospital)
4 districts (Arua, Arua City Terego and Madi Okollo)
72 health centers
924,400 population served

ACHOLI REGION

1 district (Agago)
43 health centers
256,900 population served

KARAMOJA REGION

1 hospital (Matany)
9 districts (Napak, Nakapiripirit, Nabilatuk, Amudat, Moroto, Abim, Kotido, Kaabong and Karenga)
148 health centers
1,332,575 population served



LANGO REGION

1 hospitals (Aber)
10 districts (Oyam, Apac, Kwana, Kole, Lira, Lira City, Otuke, Alebtong, Dokolo and Amolatar)
119 health centers
2,614,850 population served

0 60 120 km





BUGISU REGION

1 district (Bududa)
10 health centers
301,000 population served

TESO REGION

1 district (Katakwi)
27 health centers
207,150 population served

RESULTS ACHIEVED

 MATERNAL AND CHILD HEALTH	33,669 prenatal visits conducted	9,407 deliveries attended	66,295 under-5 children examined	18,711 vaccinations administered
 NUTRITION	605 children treated for severe acute malnutrition			
 INFECTIOUS DISEASES	688,439 patients treated for malaria	1,633 patients treated for tuberculosis	7,355 patients in antiretroviral therapy	
 CONTINUAL TRAINING	162 nurses	107 midwives	45 doctors	9 others

SUPPORTING RELIGIOUS CONGREGATIONS

ASSISTANCE TO CONGREGATIONS HELPING TO “BUILD” HEALTH IN AFRICA

Religious congregations have been active in Africa for decades, working alongside and serving the most disadvantaged communities and seeking to meet their most pressing needs. But the continent’s health care systems are evolving rapidly, bringing the risk that their hard work has but a limited impact. Doctors with Africa CUAMM has decided to support the congregations in this delicate transitional phase, helping them to bolster their role within the communities with whom they work through a joint commitment to dialogue, assistance and training. Launched in 2019, the project supports the work of some **25 religious organizations** and the staff of the health facilities they manage in **25 African countries**.

Our primary activities are:

- developing and delivery **training packages** for health personnel;
- planning opportunities for health personnel and facilities to receive both onsite and remote **technical assistance**;
- The dissemination of **best practices** vis-à-vis dialogue with local health authorities and international partners.

In 2022, Doctors with Africa CUAMM organized an online English-language training course on the management of health facilities and conducted technical assistance “missions” in Ivory Coast and Ghana, with visits to 17 health facilities. Additional such activities are planned in 2023 as well.

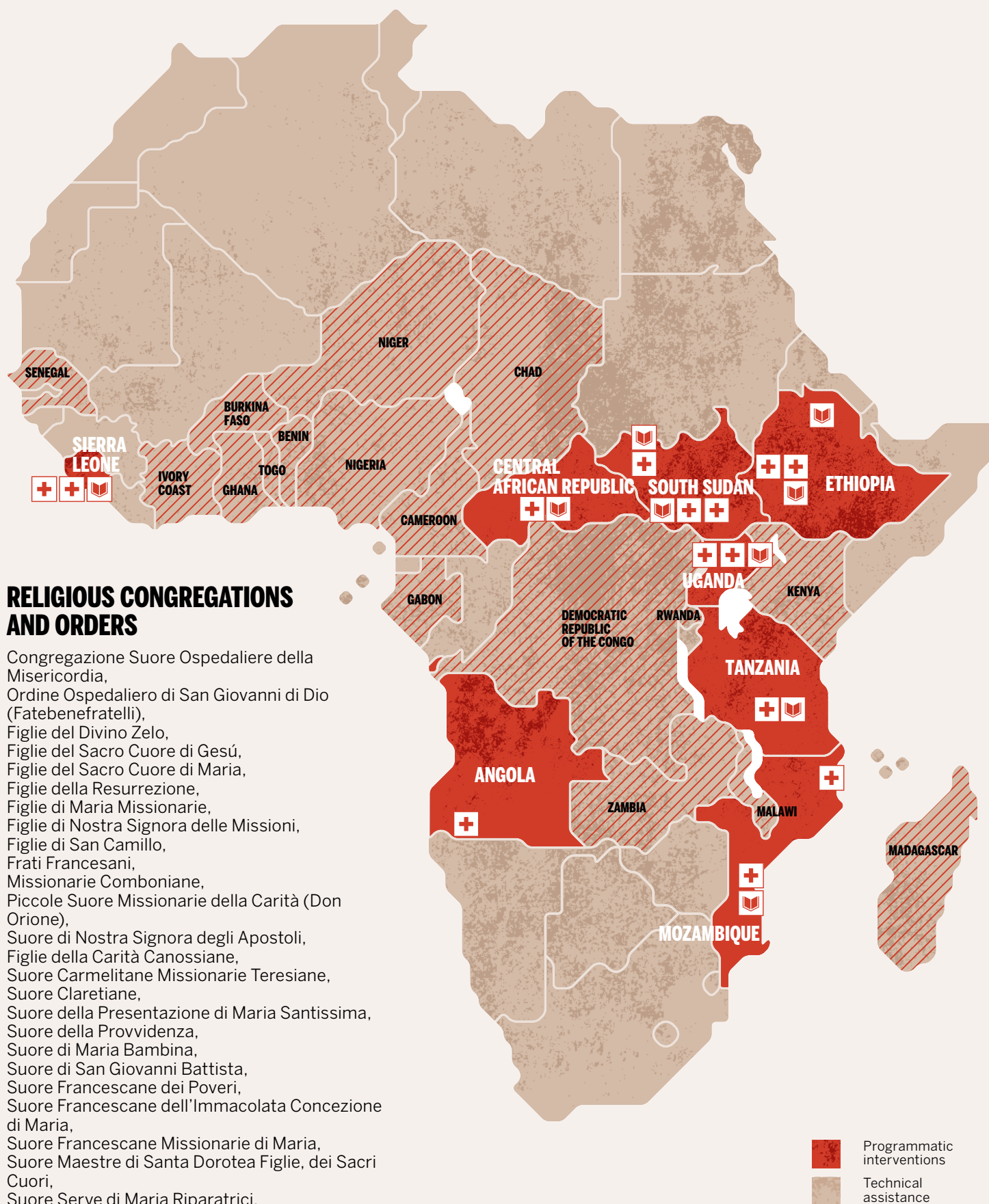


Visits to provide technical assistance to the:

1. Kongouanou dispensary, Suore delle Provvidenza, (Sisters of Providence), in Yamoussoukro, Ivory Coast
2. Bouake dispensary, Suore di Nostra Signora degli Apostoli (Sisters of Our Lady of the Apostles), in Ivory Coast
3. Tegeta dispensary, Suore Canossiane (Canossian Sisters), in Tanzania



WHERE WE WORK



AREAS OF INTERVENTION: MATERNAL AND CHILD HEALTH, NUTRITION, INFECTIOUS DISEASES AND CHRONIC DISEASES



MATERNAL AND CHILD HEALTH

Maternal, newborn, child and adolescent healthcare continue to be pressing needs in sub-Saharan African countries, and are among the primary goals outlined in the 2030 Agenda for Sustainable Development.

For Doctors with Africa CUAMM, women's access – or lack thereof – to reproductive health and obstetric emergency services is one of the most important indicators of the social inequality between the world's richer and poorer countries, as well as between the rich and poor populations within individual countries. Access to an attended delivery is an indirect indicator (or proxy) of the overall functioning of a health system, since it implies the round-the-clock presence of quality obstetric services, both basic and advanced, and hence the continuous availability of skilled human resources, medicines and equipment (including the possibility to receive blood transfusions), as

well as transportation and communications to link households and communities with the peripheral health network and hospital, as per the continuum of care approach. That is why **Doctors with Africa CUAMM**, with our **Mothers and Children First: The First 1,000 Days program**, has worked hard over the past 10 years to implement a comprehensive reproductive health intervention on a district and regional basis, with a special focus on ensuring pregnant women's access to skilled birth attendants and to basic and comprehensive emergency obstetric care (BEmOC and CEmOC) in order to reduce stillbirths and neonatal and maternal (including adolescent) morbidities and mortality ("triple returns").

CUAMM also supports **14 hospitals and their respective districts** in this area, involving communities, peripheral networks, hospitals and local stakeholders.



52,218
deliveries attended
in hospitals
(120,200 in 2021)

162,752
deliveries attended
at district health
centers
(53,005 in 2021)

13,391
major direct
obstetric
complications
(MDOCs) treated
(14,644 in 2021)



A PATH TO GROWTH

"Here's my experience in a nutshell: I started working as a medical doctor in Bonthe, focused primarily on maternal and child health. Later I moved to Pujehun and Freetown and held a more advanced role with greater responsibilities. I'd like to thank CUAMM, which has always believed in me and invested in my training; I've grown and learned so much.

I became a consultant for emergency obstetric and neonatal care and trained 37 clinical mentors around the country; they in turn are now coordinating 292 health workers in Sierra Leone's 16 districts on the "signal functions", the set of seven key obstetric services identified by the World Health Organization as critical to basic emergency obstetric and neonatal care. *My journey has helped me develop and sharpen my skills, and I feel proud about that."*

Steven Ngoma,
Congolese doctor serving
with Doctors with Africa CUAMM
for the past 4 years, Sierra Leone



MOTHERS AND CHILDREN FIRST: PEOPLE AND SKILLS

Maternal and child health is at the top of the list of Doctors with Africa CUAMM's intervention priorities. **Too many mothers in sub-Saharan Africa continue to die of treatable diseases**, in fact, with the lives of the most fragile and vulnerable put at risk by long distances to hospitals, insufficient health facilities and personnel, and a lack of information.

Following the implementation of our **5-year Mothers and Children First program** in four districts in four African countries, we carried out a second 5-year program in seven countries, expanding activities to focus on **nutrition** during pregnancy and the care of newborns up through age 2. Then, at the end of 2021, we launched the program's **third phase**, which not only strengthened and expanded ongoing program activities to all of the African countries where CUAMM is active, including to 14 hospitals and their respective districts, but also shifted the focus to the vital importance of **skilled health personnel**, both from a management and a technical point of view.

The focus of the most recent program phase, in addition to the interventions that were already part of the earlier phases, is **training new managerial figures, supporting both national and international trainees**, and **fostering operational research**.

The **14 hospitals** now involved in the program are:

- Chiulo (Angola)
- Wolisso and Gambella Regional (Ethiopia)
- Montepuez and Beira (Mozambique)
- Tosamaganga (Tanzania)
- Matany and Aber (Uganda)
- Bangui Children's Hospital (Central African Republic)
- Pujehun and PCHM (Sierra Leone)
- Rumbek, Yirol and Lui (South Sudan)

Also involved are the health centers associated with these 14 hospitals, which **provided 93,014 attended deliveries in 2022**.

OTHER CHALLENGING SETTINGS

CUAMM's interventions in 2022 were not limited to these 14 hospitals and districts; they also involved another 6 districts in the eight African countries where we are active.

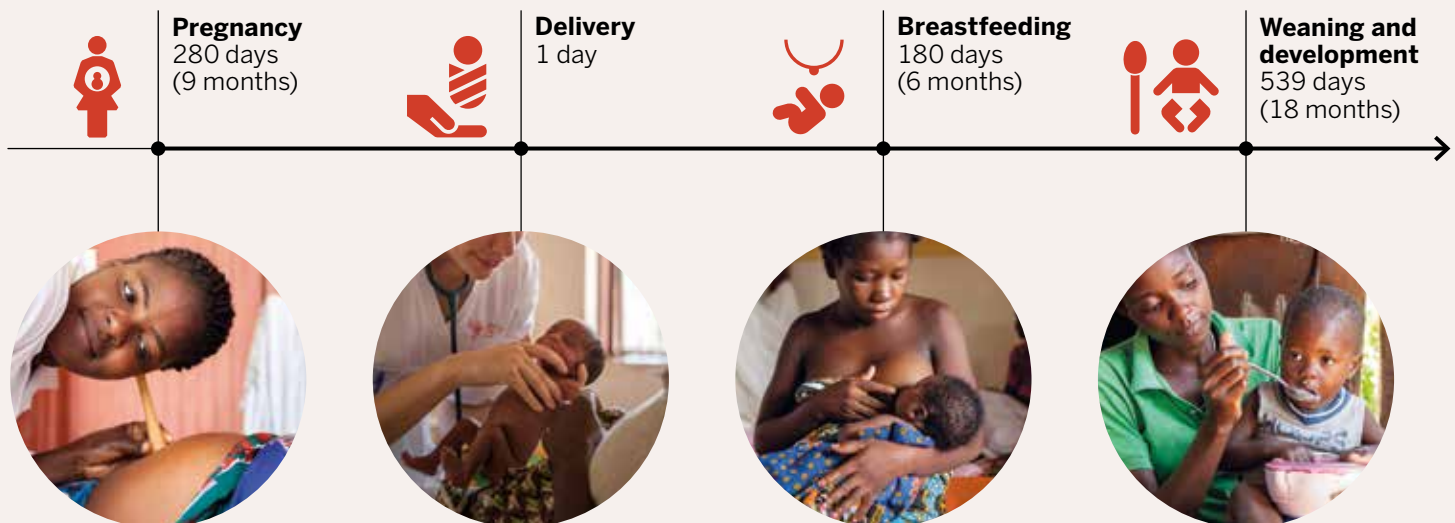
While our maternal health activities at the Jinka and Turmi hospitals in **Ethiopia** wrapped up at the end of the year, we continued to provide support to the Gambella Hospital, with particular focus on ambulances for the emergency and referral systems, a blood bank, and improvement of the quality of hospital services.

And despite the challenges of working in **South Sudan**, including the progressive drop in funds available to support its hospitals, and ongoing guerilla warfare and general insecurity that make it difficult to get around the country, we continued our activities in support of the Yirol, Lui, Cueibet and Rumbek Hospitals, while Maridi Hospital was handed over to the local authorities in September.

The table on p. 58 shows major direct obstetric complications (MDOCs) treated at CUAMM's main sites of intervention. AAs can be seen, in none of the contexts was a 50% treatment rate of MDOCs achieved. Compared to those from 2021, the 2022 figures remained stable except in Matany, Uganda, which recorded a substantial drop, from 54% to 45%.

In 2022, Doctors with Africa CUAMM ensured 214,970 assisted deliveries in the eight countries where we are active, 52,218 of which in the 20 hospitals where assisted deliveries are available (all but 1 of the 21 in which we operate).

A 1,000-DAY JOURNEY: 9 MONTHS OF PREGNANCY + THE FIRST 2 YEARS OF LIFE



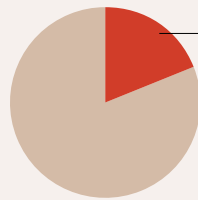
RESULTS FROM THE FIRST YEAR

ATTENDED DELIVERIES
500,000
5-year goal

93,014
in the first year

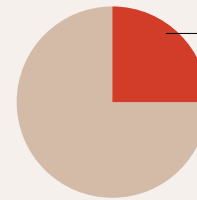
MALNOURISHED CHILDREN TREATED
16,000
5-year goal

3,997
in the first year



19%
of the total reached in the first year

The number of deliveries aligns with those anticipated: in the settings in which we work, the importance of hospital access for childbirth is clear. This is underscored by the fact that even during the COVID-19 pandemic, hospital access did not fall sharply.



25%
of the total reached in the first year

We treated more malnourished children than expected, a clear sign of the food crisis now underway due to climate change, famine, the rising cost of food, conflict and the global economic crisis.

TRAINING OF HEALTH MANAGERS
1,500
5-year goal

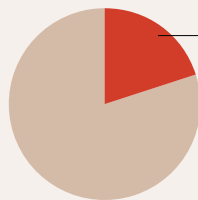
305
in the first year*

ITALIAN AND AFRICAN MEDICAL RESIDENTS
500
5-year goal

111
in the first year

OPERATIONAL RESEARCH
100
5-year goal

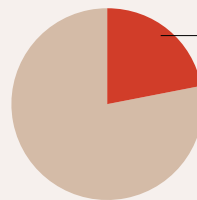
22
in the first year



20%
result achieved in the first year

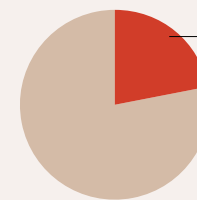
Qualified human resources at every level - not only health professionals, but also capable administrators able to lead African hospitals - are vital for CUAMM's health activities as well as for Africa's future.

*See data on page 68



22%
result achieved in the first year

These are the young medical residents, both women and men, from 39 universities across Italy who have opted to spend 6 months in Africa to help care for patients and undertake training and research activities.



22%
result achieved in the first year

When it comes to operational research in the field, it is vital to understand what is most important vis-à-vis public health, seeking to understand people's most significant needs, to assess the effectiveness of clinical and public health interventions, and to prioritize "frugal" innovations.

DOCTORS WITH AFRICA CUAMM WORKS AT THREE LEVELS: COMMUNITIES AND VILLAGES, PERIPHERAL HEALTH CENTERS AND HOSPITALS TO FACILITATE THE CONTINUITY OF CARE.

Consciousness of risk/seeking out assistance



Community/village

Transportation to access assistance



Emergency transportation

Adequate assistance



Peripheral health center

Transportation to access assistance



Emergency transportation

Adequate assistance



Hospital

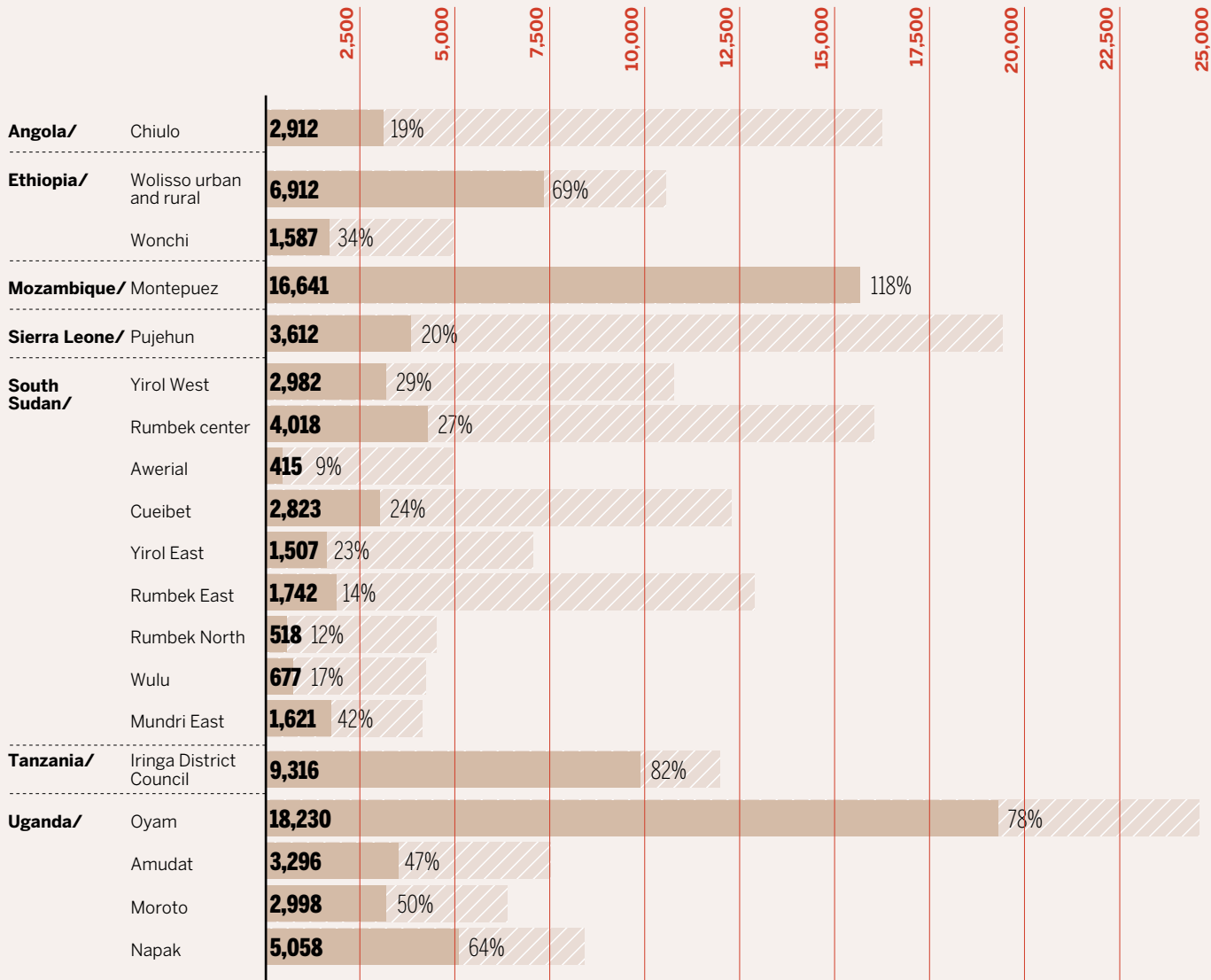
ATTENDED DELIVERY COVERAGE IN INTERVENTION DISTRICTS (HOSPITAL AND HEALTH CENTERS)*

Deliveries attended at hospitals/in health centers *

Non-attended deliveries **

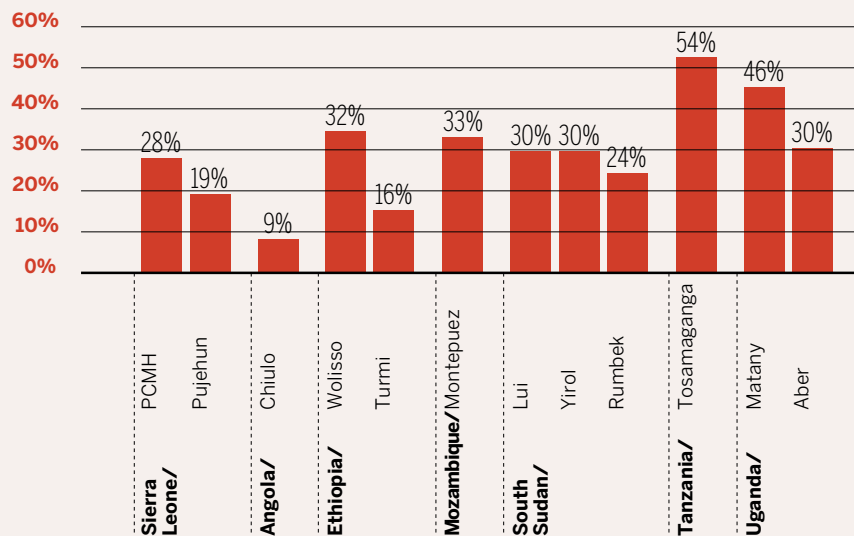
* Number of hospital deliveries is shown in Focus on hospitals

** Non-attended deliveries are calculated as the difference between expected deliveries and attended deliveries



OBSTETRIC COMPLICATIONS AS A PROPORTION OF THOSE EXPECTED IN THE REFERENCE AREA

% MDOCs out of those expected





ENSURING GOOD NUTRITION

Ensuring good nutrition, especially during pregnancy and early childhood, has been increasingly acknowledged as **a priority** since the 2030 Agenda for Sustainable Development was signed by the 193 Member States of the United Nations.

Doctors with Africa CUAMM focuses on nutrition by working in support of **national policies and programs, helping educate pregnant women** about nutrition at the community, dispensary and health center levels, **teaching mothers** about the **advantages of exclusive breastfeeding for the first 6 months** after birth and **monitoring their baby's growth** in the first few years of its life. CUAMM also works to tackle and treat **acute and chronic malnutrition**, both of which are still widespread in Africa, especially during periods of drought and subsequent famine. Worldwide, 45% of under-5 child mortality is attributable to malnutrition (*The Lancet*, 2013) because it is **a factor that exacerbates and complicates every other disease**. That is why every health intervention, whether at hospitals or in health centers, must include management of this dire problem.

TACKLING ACUTE MALNUTRITION

Acute malnutrition is due to **rapid weight loss or the inability to gain weight**, and usually occurs when an individual lacks access to a sufficient quantity of food due to famine, financial difficulties and/or other reasons. **Acute malnutrition can be either moderate or severe**; in the latter case, it puts children at risk of death. **Doctors with Africa CUAMM helps the nutritional units** of the hospitals in the countries where we are active to provide **intensive care for patients with severe or complicated acute malnutrition**, while **in some regions**, such as Karamoja in Uganda and Iringa and Njombe in Tanzania, we implement **activities to combat both severe and moderate acute malnutrition** (see the table on the next page for 2022 data on these hospital treatments).

TACKLING CHRONIC MALNUTRITION

Chronic malnutrition leads to **stunting**, i.e. low height-for-age. It is caused by a chronic lack of food or the limited use of potential resources, and thus begins in the first days after conception. It holds children back from reaching their full physical and cognitive potential, thereby **adversely affecting them for the rest of their lives**. Although there is unfortunately no real treatment for the condition, Doctors with Africa CUAMM implements specific programs to **educate mothers about the issue** and **provide nutritional supplements** to pregnant women and children that can **help mitigate some of the adverse impacts of stunting**.

Key interventions include the treatment of anemia in pregnant women, administration of folic acid and other micronutrients such as iodine, prevention of malaria during pregnancy, improvement of the nutritional health of mothers, promotion of exclusive breastfeeding, and treatment for intestinal parasitic infections in children.

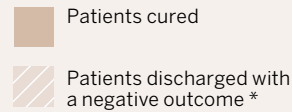
4,086
patients treated
(**2,197** in 2021)

1,798
patients cured
(**1,384** in 2021)

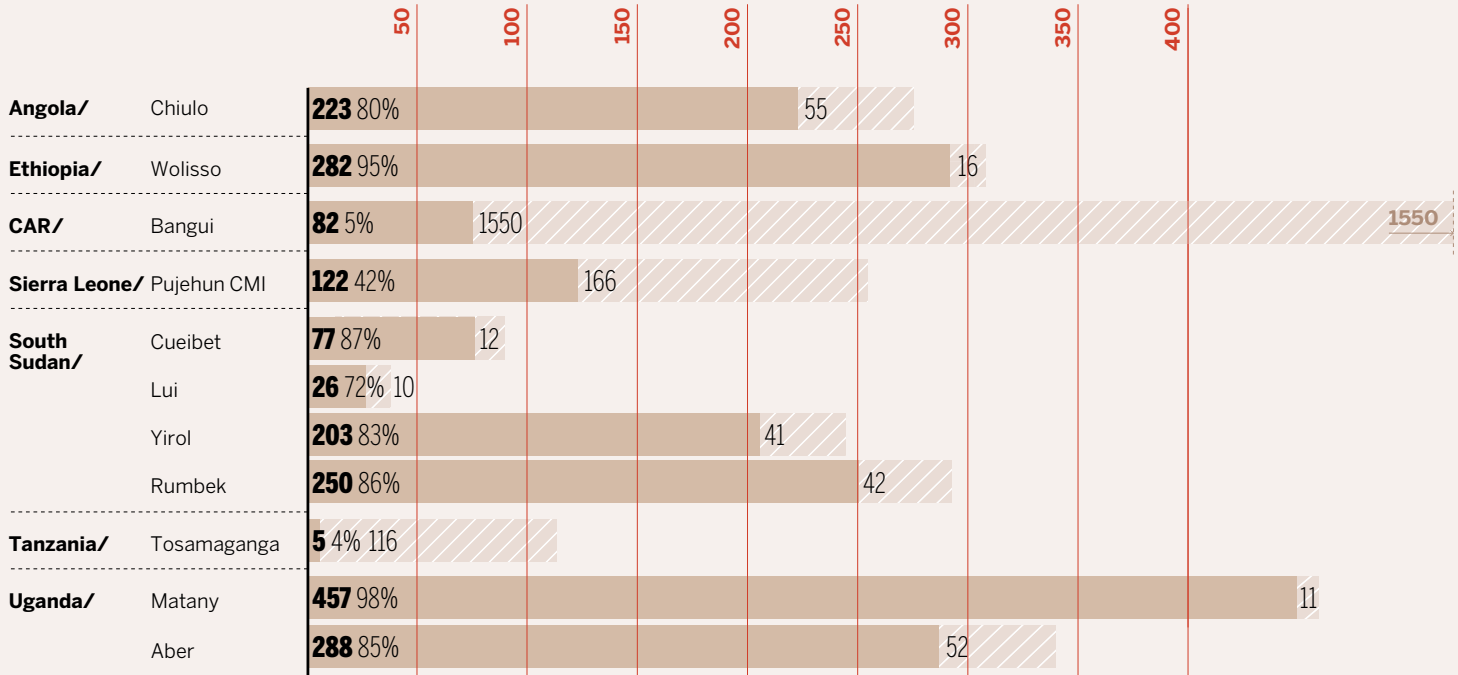
44%
average cure rate
(**63%** in 2021)

9.5%
average mortality rate
(**9%** in 2021)

TREATMENT FOR ACUTE MALNUTRITION AT THE HOSPITALS



* Those who died, abandoned treatment, or were transferred to another facility.



THE IMPORTANCE OF EXCLUSIVE BREASTFEEDING

“During the recent conflict in the towns near Jinka, in South Omo, we saw children who survived the crisis thanks to breastfeeding alone,” recounts Eleni, an Ethiopian pediatrician who works with CUAMM. *“When mothers travel to the hospital with their babies, sometimes they can’t find enough food during their journey and then their hospital stay. **More often than not, the only source of survival for these children is breast milk.*** We’ve also admitted some infants to the hospital after they were given food solids and herbal remedies that caused gastroenteritis, dehydration, gastrointestinal hemorrhage and sepsis. Such cultural practices are very widespread and deeply rooted, so we try to teach all the mothers who are inpatients with us what exclusive breastfeeding is and how important it is for their own health and that of their babies.”

Eleni,
local pediatrician working with CUAMM
in Jinka, Ethiopia.



INFECTIOUS DISEASES



INSIDIOUS ADVERSARIES

In recent years, thanks to the efforts of those engaged in international health development cooperation, there have been **important advances** in the fight against **major infectious diseases** such as malaria, tuberculosis and HIV/AIDS.

In Africa today, fewer individuals are getting infected by or dying from such diseases and growing numbers of those who are infected are receiving treatment. Even so, a large swath of the African population continues to **suffer disproportionately** in comparison to people from other continents from **preventable early mortality and disabilities** caused primarily by these major epidemics. The COVID-19 pandemic made matters worse, triggering **a rising incidence of tuberculosis and TB-related mortality** in 2022 after years of decline. This was especially the case in many areas of sub-Saharan Africa, where the pandemic disrupted health services for the prevention, diagnosis and treatment of diseases and triggered a diversion of resources across multiple health system levels (*International Journal of Infectious Diseases, 2022*).

These diseases primarily affect individuals or groups of individuals who are at risk of poverty, or already impoverished, especially pregnant women, children, adolescents and adults living in disadvantaged social circumstances that make it difficult to access and use prevention and treatment services.

FIGHTING MALARIA

Every day in every hospital, dozens and dozens of malaria patients, especially under-5 children, arrive and receive treatment. As of 2018 **the number of cases diagnosed and treated has been recorded more accurately** at the hospitals and health centers that CUAMM supports, as shown country by country in the following table.

FIGHTING TUBERCULOSIS

In 2022, CUAMM saw **a 52% rise in tuberculosis infections at the four hospital sites we monitor**, especially in Tosamaganga (Tanzania) and Moroto (Uganda), even as the number of multidrug resistant cases of tuberculosis (MDR-TB) remained stable.

In the other two settings, Wolisso Hospital in Ethiopia and St. Kizito Hospital in Matany (Uganda), the number of TB cases remained stable, but, given the decline in the number of GeneXpert tests performed, this may have been due to a drop in access to diagnostic service. New technologies such as GeneXpert make it possible to identify the presence of tuberculosis as well as possible resistance to rifampicin and hence possible cases of MDR-TB (see data shown in the table on page 62).

Malaria, TB and HIV

1,666,785
malaria diagnoses
(**1,166,809** in 2021)

2,853
tuberculosis diagnoses
(**1,874** in 2021)

182,497
individuals tested for HIV
(**116,452** in 2021)

665
new HIV+ patients placed in treatment
(**1,002** in 2021)

Pneumonia and diarrhea

281,525
pneumonia diagnoses
(**217,805** in 2021)

329,323
diarrhea diagnoses
(**229,726** in 2021)

FIGHTING HIV/AIDS

In 2022 CUAMM continued its **efforts to reduce HIV/AIDS with our Test and Treat program.**

Until recently, in fact, patients who tested positive were placed in treatment only if their T4 lymphocyte (the white blood cells responsible for developing and strengthening cellular immunity) count dropped below a certain number, or if they were pregnant women. But with the Test and Treat program, **every patient found to be positive is placed in treatment, regardless of their T4 lymphocyte count**, in an attempt to reduce the transmission capacity of each individual and diminish the spread of infection. The table on p. 65 shows the results of the activities of the antiretroviral clinics assisted directly by CUAMM.



CHANGING PEOPLE'S OUTLOOKS

*"I remember one meaningful episode that showed how **dialogue and knowledge can really help change people's outlooks**. Before going to the school, I met up with one of the teachers to talk together about how we were going to run our public awareness and screening day, and to find out how many young people might sign up. Out of the hundreds of potential candidates, only 16 ended up agreeing to be tested for HIV; the others all felt too anxious. Based on that number, we went to the school with just one tent and one nurse; but after doing our awareness event, we were able to screen 117 individuals and ended up staying at the school until 7 in the evening!"*

Chiara Didonè,
project leader, Doctors with Africa CUAMM
in the area of Shinyanga, Tanzania



MALARIA

	No. of malaria diagnoses	No. of laboratory-confirmed malaria diagnoses (% confirmed)	No. of malaria diagnoses in under-5 children
Ethiopia	202,597	95,964 (47%)	33,952
Central African Republic	20,241	19,466 (96%)	10,495
Sierra Leone	322,432	185,084 (57%)	206,515
South Sudan	430,466	288,634 (67%)	252,152
Tanzania	2,610	2,586 (99%)	350
Uganda	688,439	667,948 (97%)	240,718
TOTAL	1,666,785	1,259,682 (76%)	744,182

TUBERCULOSIS

	Hospital	Patients diagnosed with tuberculosis	No. GeneXpert tests conducted for MDR tuberculosis	Patients who tested rifampicin-resistant (% resistance)	No. GeneXpert Mycobacterium (MTB)-positive tests (% positive)
Ethiopia	St. Luke Catholic Hospital	396	1,178 (16%)	187 (16%)	6 (3.21%)
Tanzania	Tosamaganga Hospital	822	739 (11%)	83 (11%)	3 (3.61%)
Uganda	Moroto Regional Referral Hospital	1,012	919 (13%)	121(13%)	3 (2.48%)
	St. Kizito Hospital (Moroto)	623	4,475 (9%)	393 (9%)	8 (2.04%)
	TOTAL	2,853	7,311 (11%)	784 (11%)	20 (2.55%)

HIV

	Hospital	Tested for HIV*	HIV positive (% positive)	Total no. of patients in antiretroviral therapy (new patients in 2022)
Ethiopia	St. Luke Catholic Hospital	10,979	66 (1%)	1,628 (59)
Tanzania	Bugisi HC	5,149	187 (4%)	3,109 (197)
	Ngokolo HC	4,723	52 (1%)	730 (55)
	Tosamaganga Hospital	571	76 (13%)	6,706 (113)
Uganda	Aber Hospital (Pope John XXIII)	6,591	216 (3%)	5,277 (180)
	S. Kizito Hospital (Matany)	8,345	71 (1%)	450 (61)
	TOTAL	36,358	668 (2%)	17,900 (665)

		No. adolescents tested for HIV	HIV-positive (% positive)	HIV-positive adolescents in antiretroviral therapy
Mozambique	Beria	66,958	597 (0.9%)	17,317
	Tete	76,204	473 (0.6%)	1,837
Tanzania	Shinyanga	2,977	38 (1.3%)	3,258

ACUTE RESPIRATORY INFECTIONS

Along with malaria and diarrhea, acute respiratory infections are the top causes of death in under-5 children. The table below shows cases of these diseases treated at the hospitals and in the districts where Doctors with Africa CUAMM works.

DIARRHEAL DISEASES

Diarrheal diseases – especially the most common form, bloodless diarrhea – are among the leading causes of death due to severe dehydration. This is all the more true in the case of children, who are at risk if not given continuous rehydration support (including oral rehydration if conditions allow). The table below shows the cases treated in the areas where Doctors with Africa CUAMM is active and where specific data is reported.

ACUTE RESPIRATORY INFECTIONS

	No. of pneumonia diagnoses	No. of deaths due to pneumonia (% mortality)	No. of pneumonia diagnoses in under-5 children	No. of deaths due to pneumonia in under-5 children (% mortality)
Ethiopia	29,388	4 (0.01%)	25,157	n/a
Central African Republic	2,873	18 (0.63%)	2,573	16 (0.62%)
Sierra Leone	41,586	70 (0.17%)	35,543	77 (0.22%)
South Sudan	181,355	103 (0.06%)	140,111	56 (0.04%)
Tanzania	10,309	10 (0.10%)	6,065	8 (0.13%)
Uganda	16,014	237 (1.48%)	12,457	118 (0.95%)
TOTAL	281,525	442 (0.16%)	221,906	275 (0.12%)

DIARRHEAL DISEASES

	No. of diarrhea diagnoses	No. of deaths due to diarrhea (% mortality)	No. of deaths due to diarrhea in under-5 children (% mortality)	No. of deaths due to diarrhea in under-5 children (% mortality)
Ethiopia	2,3420	13 (0.06%)	15,405	2 (0.01%)
Central African Republic	1,995	18 (0.9%)	1,724	14 (0.81%)
Sierra Leone	24,623	34 (0.14%)	19,425	46 (0.24%)
South Sudan	127,839	23 (0.02%)	105,668	11 (0.01%)
Tanzania	10,821	9 (0.08%)	7,394	9 (0.12%)
Uganda	146,277	58 (0.04%)	88,362	27 (0.03%)
TOTAL	334,975	155 (0.05%)	237,838	109 (0.05%)

CHRONIC DISEASES

According to World Health Organization data (WHO, 2021), every year more than 15 million people die prematurely from **noncommunicable diseases** (NCDs), with 85% of the deaths occurring in middle- or low-income countries. It has been estimated that chronic diseases will cause more deaths than communicable diseases by 2030, including in Africa. This is why the prevention and treatment of this group of emerging diseases, including in low-income countries, is a key focus as well as one of the targets of the sustainable development goals (SDGs).

CERVICAL CANCER

Cervical cancer is **the second most common cancer affecting African women**, but it can be prevented with the human papillomavirus vaccine and screening and early diagnostic methods. CUAMM has **been implementing projects to improve community awareness about the issue and offering cervical cancer screening** for several years, based on the **“see-and-treat”** approach, which entails acetic acid staining of the cervix followed by inspection of the latter (VIA) for potentially malignant lesions and immediate treatment with cryotherapy if any are found. Evaluation and treatment are done by trained nursing staff, based on a **goal of evaluating 20% of at-risk women every year**. By doing this, and treating any small lesions found, including inflammatory ones, we hope to prevent their becoming malignant. Our approach is therefore one of secondary prevention rather than treatment. More advanced forms of cervical cancer are treated surgically at the hospital, although with limited effectiveness, given the fact that most patients arrive at the facility only after their tumors have reached an advanced stage and/or become inoperable. The table on the next page shows data on our activities in 2022, when the level of support we provided rose significantly following the pandemic-induced drop in access to treatment. Tosamaganga was the only site where activities fell significantly. In any case, these activities continue to be integrated only infrequently into the routine services of hospitals and health centers. This is why it is so critical that support be made available to help increase awareness of and demand for the service by women as well as health personnel.

DIABETES, HYPERTENSION AND HEART DISEASE

Patients affected by these diseases have been diagnosed and treated from the very start in the hospitals where Doctors with Africa CUAMM is present, yet because there have been so many of them, the cases have been poorly documented. For some time now, however, outpatient clinics dedicated to chronically ill patients have been set up in some of these areas, bringing an added benefit: the opportunity to integrate AIDS patients into this broader umbrella group, thereby reducing the stigma attached to their specific disease.



Chronic diseases

51,345
examinations
(51,269 in 2021)

1,710
hospitalizations
(8,383 in 2021)

Cervical cancer

16,537
women screened
(5,374 in 2021)

1,160
VIA-positive
individuals
(393 in 2021)

1,044
% of VIA-positive
individuals treated
with cryotherapy
(352 in 2021)

THE IMPORTANCE OF SCREENING

“I was browsing through the stalls of Feima, Maputo’s traditional craft fair, when a voice on a loudspeaker invited all of us visitors to come get a free screening. That’s how I discovered CUAMM, busy with a prevention campaign to measure people’s blood sugar and blood pressure levels. I had already discovered at the city’s Central Hospital that I didn’t have diabetes, but to be able to do so in that setting was fantastic!”

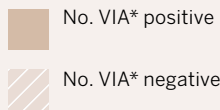
Salvador,
CUAMM screening service beneficiary,
Mozambique



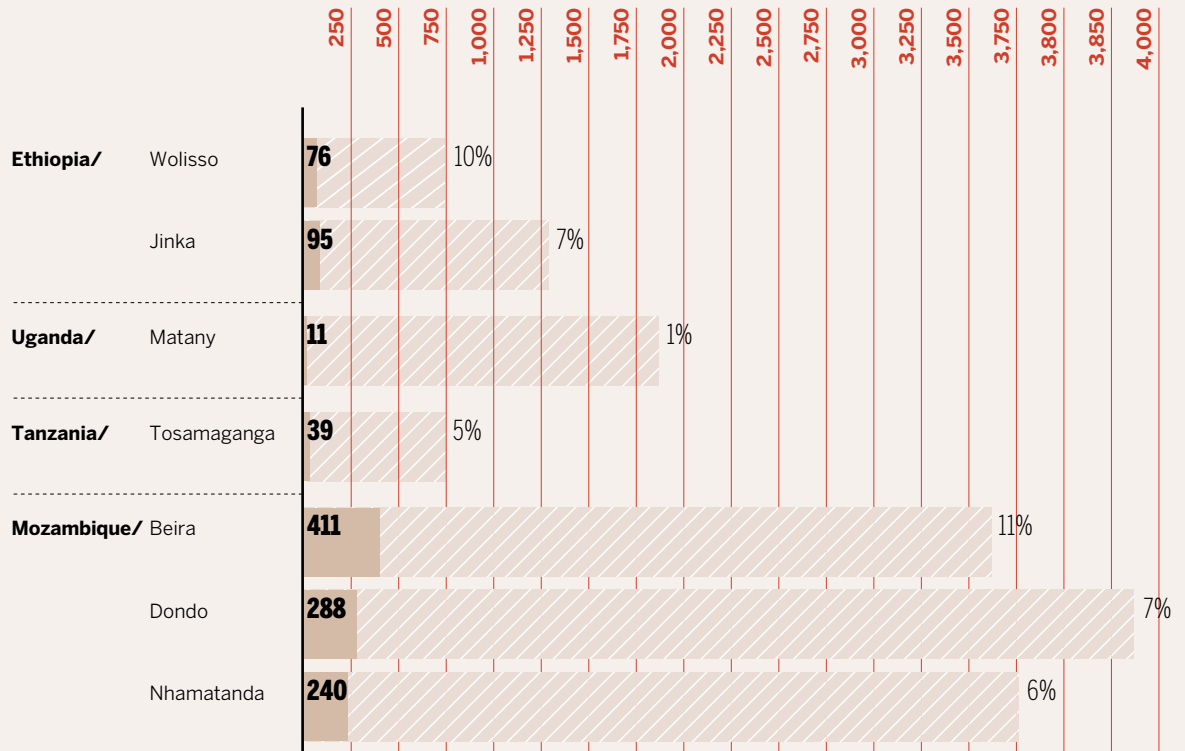
DIABETES, HYPERTENSION AND HEART DISEASE

		Outpatient visits			Hospitalizations		
	Hospital	Diabetes	Hypertension	Heart disease	Diabetes	Heart disease	Stroke
Ethiopia	Wolisso	2,043	2,172	756	128	106	22
	Other hospitals	4,812	4,847	782	148	107	32
Tanzania	Tosamaganga	1,474	2,992	351	93	102	31
Mozambique	Zambezia	2,051	9,981	n/a	237	n/a	n/a
	Sofala	1,663	15,133	0	152	0	0
Uganda	Matany	572	728	36	151	126	34
	Aber	347	450	155	82	88	71
TOTAL		12,962	36,303	2,080	991	529	190

CERVICAL CANCER ACTIVITIES



* Visual inspection with acetic acid (VIA) is a preventive test. Those who test positive are treated with cryotherapy.



DECIPHERING THE DATA

Although with variability from setting to setting compared to the previous year, the number of examinations for diabetes and hypertension rose overall. The data are still not very comparable, and do not provide a true measure of the scale of the problem.

TRAINING AND RESEARCH





3,233
individuals
trained through
short courses or
residencies
(**2,915** in 2021)

173
health professional
graduates
(**92** in 2021)

THE CRUCIAL ROLE PLAYED BY TRAINING

Training health personnel is crucial for **improving and strengthening both the quality of care and health service delivery capacity.**

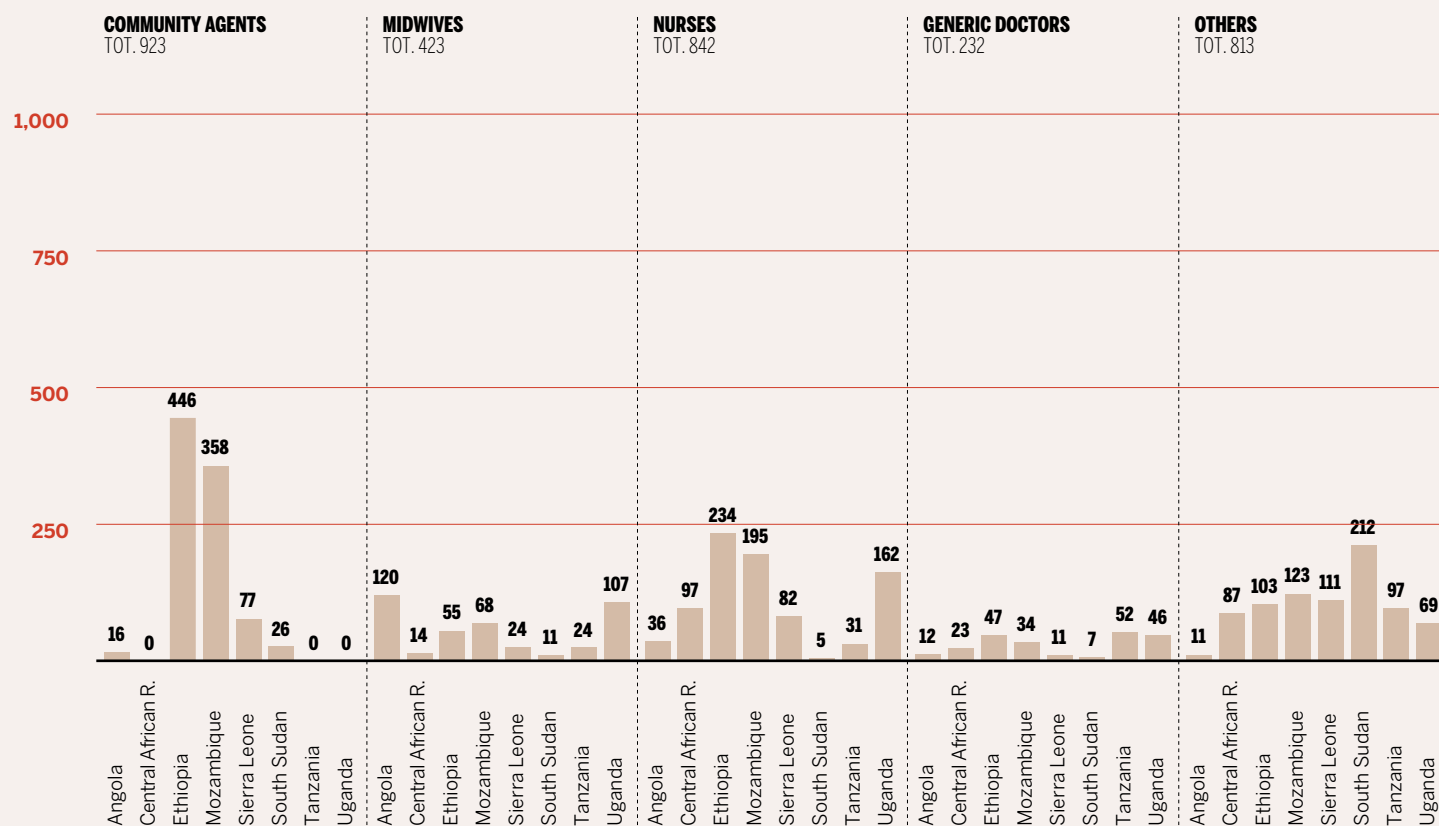
In addition to the training of personnel that Doctors with Africa CUAMM provides every day while **working alongside local health workers and authorities**, we also held numerous **refresher courses** in 2022, with the participation of some **3,233 individuals including community agents, nurses, midwives, doctors and health managers.**

These training activities led to diplomas for **173 health professionals**, including 46 doctors who graduated from the Faculty of Medicine at the Catholic University of Mozambique in Beira.

MOTHERS AND CHILDREN FIRST: PEOPLE AND SKILLS CONTINUAL MEDICAL TRAINING OF HEALTH MANAGERS

	Hospital and district	Training objectives	Trained in the first year
Angola	Chiulo Hospital / Ombadja District	10	11
Ethiopia	Wolisso Hospital / Wolisso, Goro and Wonchi Districts	100	52
	Gambella Regional Hospital / Gambella District		
Central African Republic	Bangui Pediatric University Hospital Complex	20	25
Sierra Leone	Pujehun Hospital	50	40
	Princess Christian Maternity Hospital (Freetown)		28
South Sudan	Yirol Hospital and Yirol West District	50	13
	Rumbek Hospital / Rumbek East, Center and North Districts		28
	Lui Hospital / Mundri East District		13
Tanzania	Tosamaganga Hospital / Iringa Rural District	30	26
Uganda	Aber Hospital and Oyam District	40	54
	Matany Hospital and Napack District		15
TOTAL IN THE 1st YEAR		300	305

TRAINING THROUGH SHORT COURSES OR RESIDENCIES



PROFESSIONAL AND UNIVERSITY-LEVEL TRAINING

	Facility	Graduates
Ethiopia	School for nurses and midwives (Wolisso)	18 midwives and 20 nurses
Mozambique	University of Beira - Dept. of Medicine	46 doctors
South Sudan	School for nurses and midwives (Rumbek)	27 midwives and 20 nurses
Uganda	School for nurses and midwives (Matany)	22 midwives and 20 nurses
TOTAL		173 HEALTH PROFESSIONALS

MONITORING, EVALUATION AND RESEARCH



PROJECT MONITORING AND SYSTEMS MEASUREMENT

In 2022 Doctors with Africa CUAMM continued to conduct and strengthen activities for the monitoring and evaluation of our health programs, systems and individual interventions, heedful of the vital importance of measuring and assessing the overall effectiveness and impact of our work. We developed and implemented the District Health Information System 2 (DHIS2) both to help collect and monitor data in a systematic and continuous manner at the hospital and health center level in the facilities where we are active and to monitor the key indicators that reflect the impact of each intervention. DHIS2 facilitates data entry and analysis by using a single interface IT platform shared at every level of an organization. In addition, we used other tools to conduct specific quantitative and qualitative evaluations of our program components, analyzing results, pinpointing and promoting the strategies proven most effective, and assessing where strategic changes were called for. We focused particular attention on the monitoring of patients with chronic conditions in the outpatient clinics supported by CUAMM, in order to improve follow-up and study patient adherence to it.

CUAMM also began a partnership with the London School of Hygiene and Tropical Medicine and other international institutions involved in the IMPULSE research project to assess the availability, quality and use of newborn data in 4 African countries. We continued our collaboration with the Management and Health Laboratory of the Sant'Anna School of Advanced Studies (Pisa) to evaluate the performance of hospitals and district health services as well as our partnership with Critical Care Asia Africa Network, an international project involving the use of online registries to assess the outcomes of critically ill patients; intensive care units in nine African countries, including four supported by CUAMM, took part in the project.

OPERATIONAL RESEARCH IN THE FIELD

2022 saw the publication of 31 Doctors with Africa CUAMM research papers. This figure is in line with our scientific output of recent years, and confirms our continued commitment to conduct research work alongside our activities on the ground in order to thoroughly assess the impact of our programs, test new tools and innovations, and improve the quality of the healthcare delivered in the countries with which we partner.

The number of research centers with which CUAMM partners continued to rise, increasing from 68 in 2021 to 76 in 2022 and underscoring the importance we give to developing scientific partnerships, producing quality research by connecting experts from around the world. As in the past, much of our research was published in prestigious international journals, including BMC, Nature Scientific Reports, Frontiers in Public Health, highlighting the recognition accorded to our scientific work. We also delivered oral presentations and presented posters at a number of international conferences.

Doctors with Africa CUAMM plans to continue to invest in research as a tool with which to better understand the settings we work in, identifying the most effective actions and good practices in order to improve our interventions at every level of the health system. Indeed, we believe that research is key to ensuring *quality* health interventions – the only kind that CUAMM is interested in implementing. Among the primary focuses of our research in 2022 were the quality of care for newborns and infectious and tropical diseases – HIV/AIDS, tuberculosis, malaria and cholera – with special attention to the most vulnerable patients, including pregnant women and refugees.

Every year CUAMM issues a volume containing its published articles and the abstracts and posters it has presented at international conferences during the year.

These volumes can be downloaded free of charge at

→ www.mediciconlafrica.org/ricercaoperativa/

THEMATIC AREAS



maternal and child health



infectious and tropical diseases



universal healthcare coverage and equity



nutrition



chronic diseases



RESULTS IN 2022

5
main thematic areas

31
studies published

234
authors (from Italy,
Africa and elsewhere)
who contributed to
CUAMM's research
efforts

76
partnerships with
public and private
research centers,
international
universities,
institutions and
hospitals, including

27
African partners

76
research partners
around the world

15
in Europe

30
in Italy

4
in other
countries

27
in Africa

FOCUS ON HOSPITALS

THE NUMBERS AT A GLANCE

21
hospitals managed
by Doctors with
Africa CUAMM

1
in Angola

5
in Ethiopia

3
in Mozambique

2
in Sierra Leone

5
in South Sudan

2
in the Central
African Republic

1
in Tanzania

2
in Uganda

In 2022 Doctors with Africa CUAMM helped manage **21 hospitals** in Africa: 1 in Angola, 5 in Ethiopia, 3 in Mozambique, 2 in Sierra Leone, 2 in the Central African Republic, 5 in South Sudan, 1 in Tanzania and 2 in Uganda. In these countries, as in the rest of the continent, hospitals are the main providers of health services, especially the most complex ones, such as surgery. That's why **assessing hospital performance is a priority** for Doctors with Africa CUAMM, based on our belief that access to healthcare is a **basic right of every human being, especially the poorest members of society**. One tool for measuring the volume of health services provided by a hospital is the standard unit per output (SUO), a composite index that uses outpatient contacts (op) as its unit of measurement and provides relative weights in terms of the cost of four other standard services provided by hospitals: inpatient contacts, deliveries, immunizations, and pre-and postnatal visits (see methodological notes on p. 6). Using this index enables hospital managers and boards of directors to plan activities in a reasoned manner, making

evidence-based decisions in alignment with the institution's mission, and to better understand which decisions have resulted in successful outcomes and which have not.

This measurement system is used to derive four indicators:

- **PRODUCTIVITY**
i.e., measurement of the total volume of a hospital's activities;
- **EQUITY**
i.e., verification that the services provided are accessible to everyone, especially the most vulnerable members of society;
- **STAFF EFFICIENCY**
i.e., assessment of the degree of productivity of a hospital's staff;
- **MANAGEMENT EFFICIENCY**
i.e., assessment of how well a hospital uses the financial resources available to it.



Chiulo
Angola



Wolisso
Ethiopia



Turmi
Ethiopia



Gambella RH
Ethiopia



Gambella Primary Hospital
Ethiopia



Jinka
Ethiopia



Montepuez
Mozambique



Beira
Mozambique



Nhamatanda
Mozambique



Bangui Pediatric Hospital Complex
Central African Republic



Bocaranga
Central African Republic



Pujehun CMI
Sierra Leone



PCMH
Sierra Leone



Lui
South Sudan



Yirol
South Sudan



Cueibet
South Sudan



Maridi
South Sudan



Rumbek
South Sudan



Tosamaganga
Tanzania



Matany
Uganda



Aber
Uganda

SUO (op)

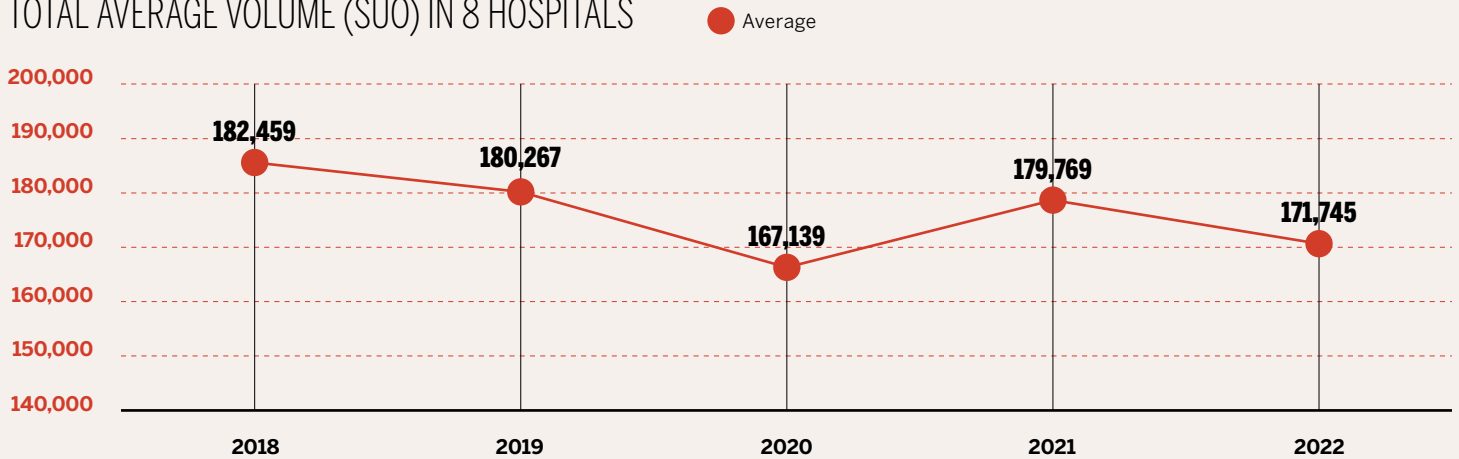
The formula used to calculate the SUO (op) reflects the relative weights of various hospital services:
 $SUO (op) = (15 \times \text{inpatient contacts}) + (1 \times \text{outpatient contacts}) + (5 \times \text{deliveries}) + (0.2 \times \text{immunizations}) + (0.5 \times \text{pre-/postnatal visits})$

PRODUCTIVITY

Overall hospital performance is assessed by **averaging the results of the 8 hospitals, those for which data have been continuously available for the last 5 years** (and the same that were considered in our 2021 Annual Report). 2022 saw a fall in productivity compared to 2021 (-4.4%), associated with the fall that occurred in a few of the hospitals (Matany, Wolisso and Yiro) which was only partially offset by the others.

The data is therefore difficult to interpret and, given the positive recovery in 2021 following the effects of the COVID-19 pandemic, likely related to specific dynamics on the ground.

TOTAL AVERAGE VOLUME (SUO) IN 8 HOSPITALS

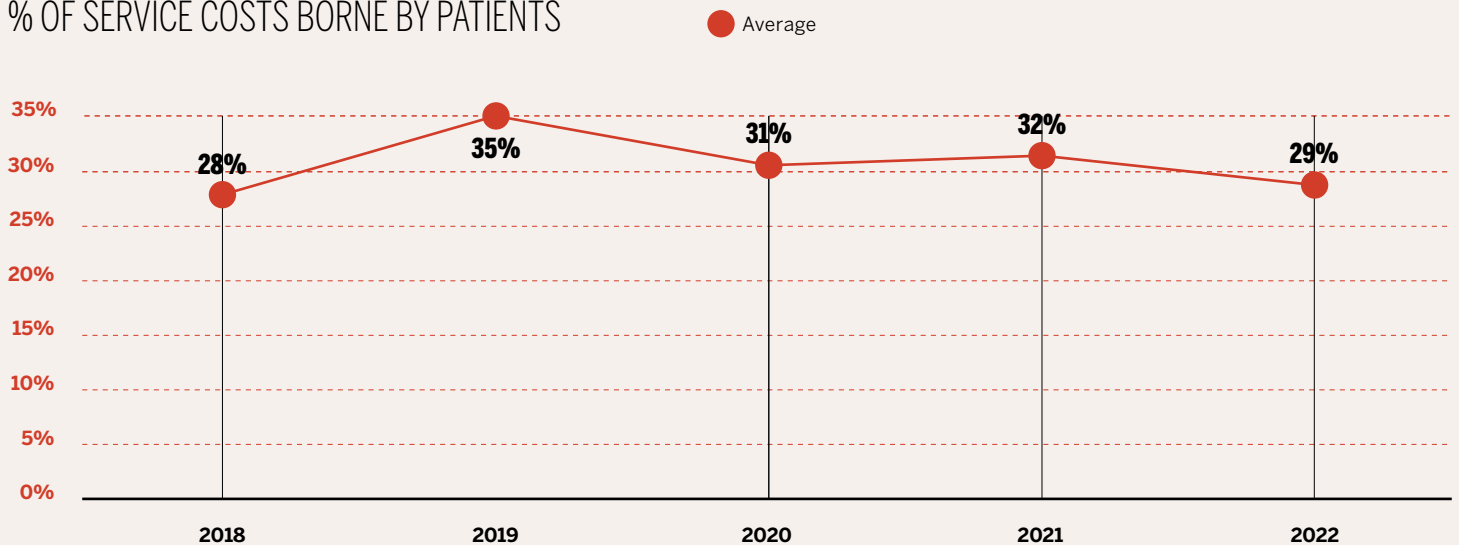


EQUITY

The cost of services borne by patients is calculated as the ratio of user revenues to total costs.

Last year the average patient-borne cost fell slightly from the prior year, dropping from 32% to 29%, primarily due to the combination of a fall in activity volumes (lower average SUO) and a rise in costs (from 5.7 to 6.1 Euros/SUO). The latter was related to the continual rise in costs overall, especially for medicines and energy.

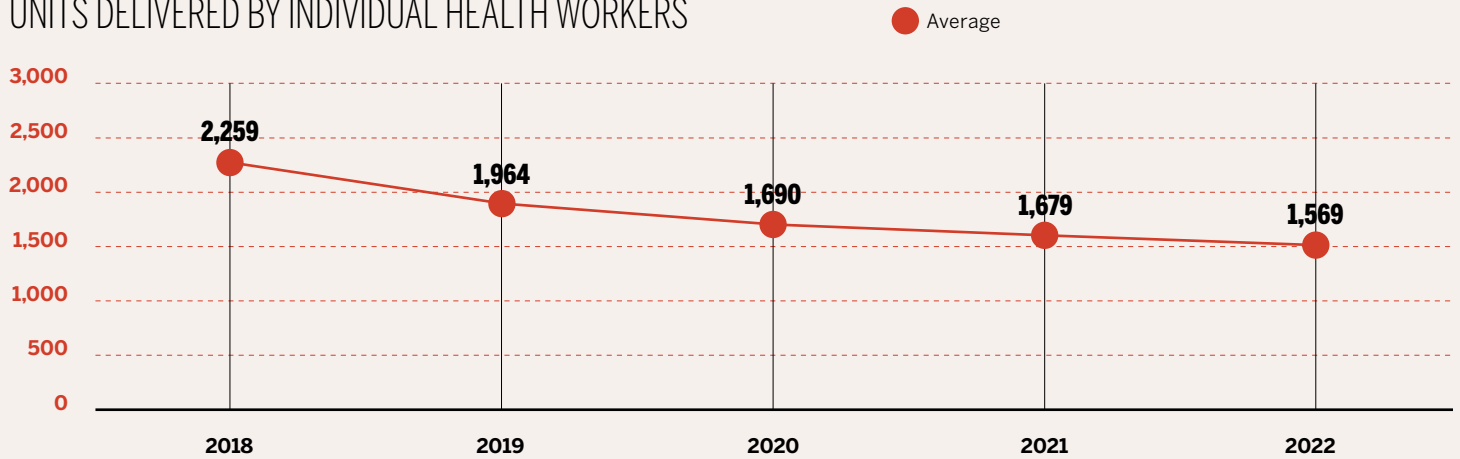
% OF SERVICE COSTS BORNE BY PATIENTS



STAFF EFFICIENCY

The level of staff efficiency, i.e. the ratio of total SUO to the number of qualified staff, fell slightly compared to the previous year (-6%). This was essentially due to the decrease in overall volumes (lower average SUO).

UNITS DELIVERED BY INDIVIDUAL HEALTH WORKERS



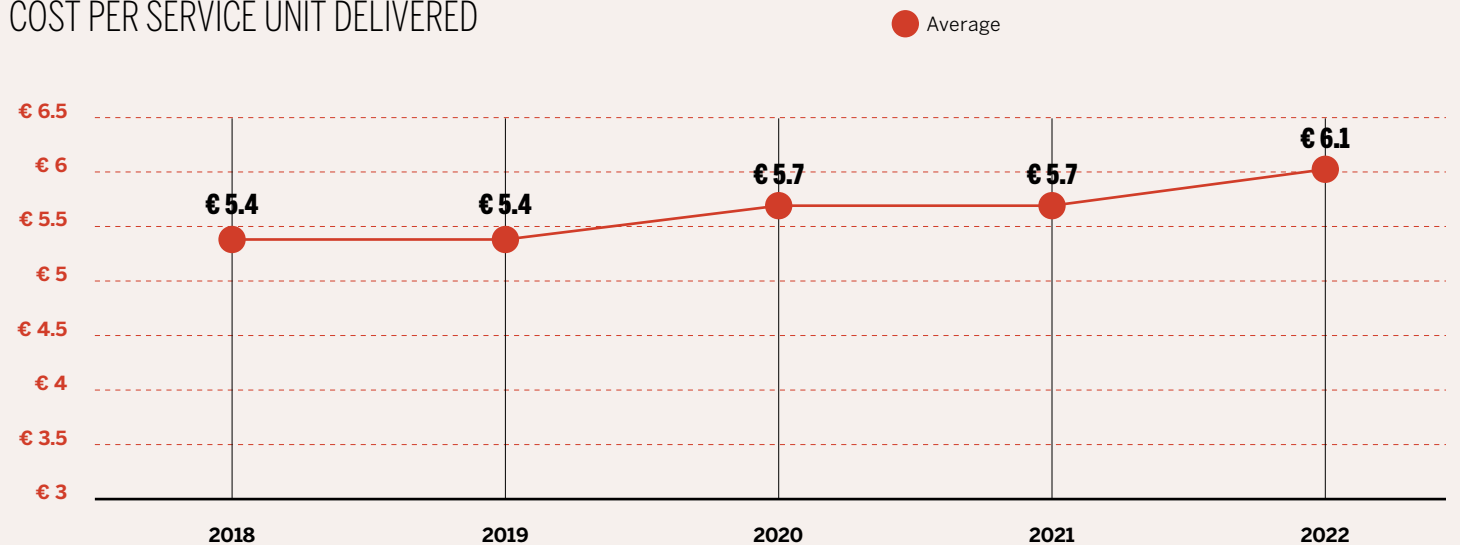
MANAGEMENT EFFICIENCY

With regard to the cost of services per SUO, i.e. the ratio of total costs to total SUO, we saw a slight increase (from 5.7 to 6.1 Euros/SUO, i.e. 7%). This was due to higher production costs, which was due in turn primarily to the higher cost of medicines and energy.

In conclusion, **2022 saw a slight drop in activity volumes as well as a rise in production costs** due to the overall rise in prices and the worldwide economic crisis.

Covering these higher production costs will continue to be a challenge, especially given the lower levels of development aid being provided to the countries in need of it. If these higher production costs continue, they will result in continually higher costs for patients.

COST PER SERVICE UNIT DELIVERED



THE QUALITY OF HOSPITAL SERVICES

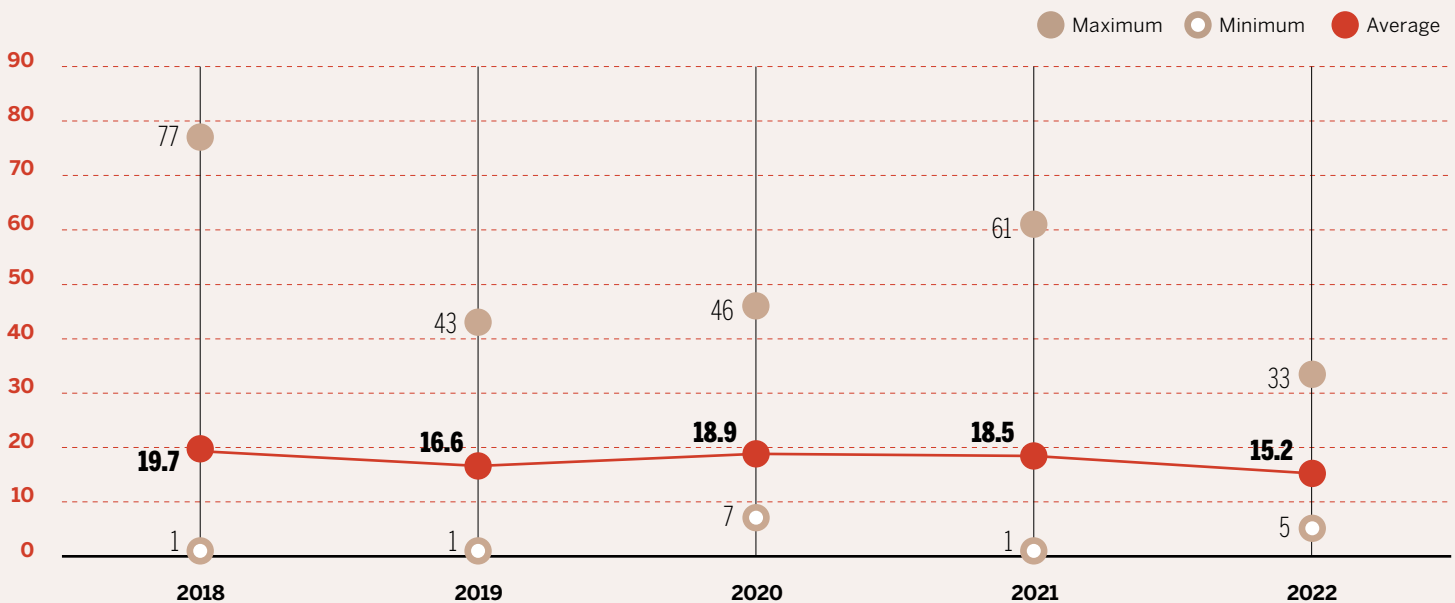
In low-resource settings such as those found in the sub-Saharan African countries where Doctors with Africa CUAMM is active, it is essential to monitor not only how hospitals perform in terms of accessibility, equity and efficiency, but also to assess the quality of the services they deliver to the population. Low-cost services, in fact, are only of value if they are also *quality* services. Although it is not easy to measure the overall performance of a hospital, and even more challenging to measure the quality of the services it provides, since 2012 we have been using the following indicators to facilitate assessment of the quality of obstetric assistance provided:

- STILLBIRTH RATE PER 1,000 LIVE BIRTHS;
- CESAREAN SECTION RATE AS A PERCENTAGE OF TOTAL BIRTHS;
- MATERNAL MORTALITY RATIO DUE TO MAJOR OBSTETRIC COMPLICATIONS AS A PERCENTAGE OF TOTAL MAJOR OBSTETRIC COMPLICATIONS.

STILLBIRTH RATE PER 1,000 LIVE BIRTHS

This indicator refers to how childbirth is handled during the labor and expulsion phases, and thus assesses how correct and timely the interventions were. The figure does not include cases of stillbirth already understood to be certain prior to labor.

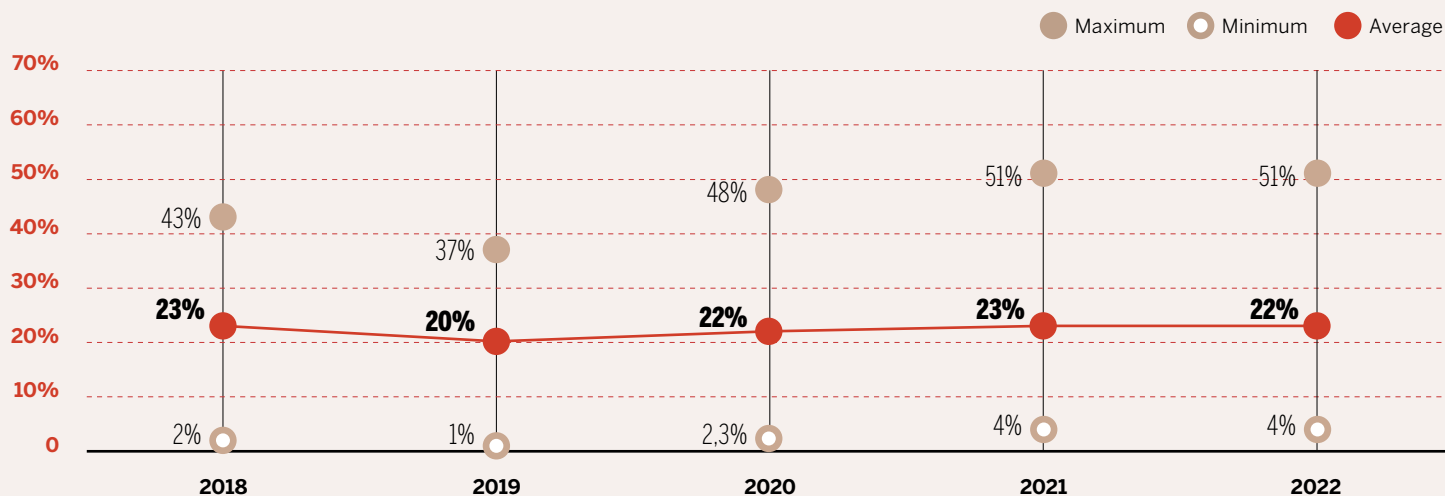
The 2022 figure was similar to that calculated in recent years, although with slight variations within some of the hospitals. This was likely due to local factors such as greater delays in access or discontinuity in the ability to deliver quality services.



CESAREAN SECTION RATE AS A PERCENTAGE OF TOTAL BIRTHS

Cesarean section rates can vary greatly from one hospital to the next, depending on a variety of factors. For example, the physical build of women is different from country to country, which may necessitate C-sections either more or less frequently. If a hospital is the only facility available for patients with complications, it usually must handle a large number of complicated deliveries, and hence also a larger number of C-sections, based on the degree of efficiency of the referral system. Surgeons and gynecologists in various

settings may also have different propensities vis-à-vis the performance of C-sections. In 2022 the average C-section rate fell slightly compared to 2021, due to CUAMM's no longer being active at the Bo, Bonte and Songambe Hospitals, which were therefore left out of the calculation, and whose C-section rates had been well above the average. In all the other hospitals the C-section rate remained stable.



MATERNAL MORTALITY RATIO DUE TO MAJOR OBSTETRIC COMPLICATIONS AS A PERCENTAGE OF TOTAL MAJOR OBSTETRIC COMPLICATIONS

The WHO recommends a maternal mortality ratio lower than 1% as a benchmark for the treatment of major obstetric complications. The figures shown for the hospitals listed at the right, however, do not necessarily represent poor quality of care; it is instead very likely that they were overestimated due to **inadequate information systems** unable to accurately track all of the major obstetric complications treated. The frequent changes in recording criteria may be related to doctor turnover, with a consequent failure to apply diagnostic criteria in a continuous and standardized manner. Despite these limitations, the figures in 2022 remained **essentially stable**, with values of approximately 1%, in **almost all of the settings** except Pujehun, in Sierra Leone, where the ratio rose from 1.3% in 2021 to 2.4% in 2022. This was likely due to greater delays in access due in turn to the near total paralysis of the national ambulance system, which we are struggling to restore at the district level.

	2018	2019	2020	2021	2022
Aber	0.7%	1.0%	1.1%	0.9%	0.7%
Matany	0.5%	0.5%	0.7%	0.6%	0.3%
Tosamaganga	0.2%	0.46%	0.6%	0.2%	0.6%
Wolisso	0.4%	0.6%	1.0%	0.1%	0.3%
Turmi	0.0%	14.3%	4.3%	1.5%	n/a
Gambella Regional	3.7%	2.0%	1.0%	1.2%	n/a
Gambella Primary Hospital				0.8%	n/a
Jinka				0.5%	n/a
Chiulo	4.2%	n/a	n/a	2.3%	2.0%
Pujehun	1.0%	4.0%	3.3%	1.3%	2.4%
Yirol	0.5%	2.4%	1.4%	0.0%	0.9%
Lui	1.0%	0.9%	1.3%	0.6%	1.7%
Cueibet	2.8%	n/a	0.7%	0.0%	n/a
Rumbek	3.4%	2.3%	1.0%	0.9%	1.4%
Maridi	1.0%	0.5%	0.4%	1.0%	n/a
PCMH	1.2%	1.3%	1.6%	1.0%	1.3%
Beira	n/a	n/a	n/a	1.4%	n/a
Montepuez	1.3%	1.1%	0.7%	1.7%	1.0%
Nhamatanda				0.80%	n/a

2022 HOSPITAL DATA *

Country	Hospital name	No. of beds	No. of outpatient visits	No. of admissions	Prenatal visits	Total no. of deliveries	Cesarean sections
UGANDA	Matany	250	35,666	11,716	5,375	1,363	404
	Aber	178	42,339	11,716	6,192	3,317	1,048
TANZANIA	Tosamaganga	165	32,077	9,041	4,564	3,503	1,364
ETHIOPIA	Wolisso	200	61,982	10,458	3,402	3,576	699
	Turmi	22	32,653	n/a	824	421	70
	Gambella RH*	124	79,414	5,437	1,768	3,416	350
	Gambella Primary Hospital	50	35,941	1,855	3,872	1,231	3
	Jinka	130	82,510	5,484	2,170	2,972	681
ANGOLA	Chiulo	234	28,503	3,714	4,758	1,517	135
SOUTH SUDAN	Lui	102	23,745	5,162	2,002	642	117
	Yirol	105	48,006	9,129	9,436	1,448	57
	Cueibet	98	59,878	5,546	3,311	1,336	55
	Maridi	70	6,999	3,308	2,764	502	61
	Rumbek	76	83,801	23,342	7,602	3,019	127
SIERRA LEONE	Pujehun CMI	59	5,531	3,961	654	1,151	530
	PCMH*	125	21,088	8,833	28,653	7,581	3,355
MOZAMBIQUE	Montepuez	134	n/a	11,648	n/a	5,104	830
	Beira	823	172,868	35,747	n/a	5,649	3,045
	Nhamatanda	120	170,785	6,091	n/a	3,335	196
C.A.R.	Bangui Pediatric Hospital Complex	257	63,739	16,180	n/a	n/a	n/a
	Bocaranga	92	11,872	4,016	2,407	1,135	106
TOTAL		3,414	1,099,397	192,384	89,754	52,218	13,233

* Hospitals where CUAMM handles maternity-related services only.

No. of vaccinations	User Fee Revenues	Total revenues for recurrent costs	Recurrent costs	Total staff	Qualified staff
19,906	157,567	1,134,057	1,132,568	236	201
27,327	498,959	1,507,213	1,300,915	206	153
11,555	376,983	1,146,434	1,055,705	195	141
11,412	547,183	2,119,181	1,929,330	413	252
3,147				45	33
6,001				432	202
6,168				263	134
8,654				484	484
15,847				181	127
6,730			878,312	129	50
16,047			612,532	139	48
				82	51
4,325				65	50
6,964				71	43
558			320,000	186	151
8,635				459	379
n/a				232	107
n/a				1660	898
n/a				169	101
2,027				418	246
2,394				62	5
157,697	1,580,693	5,906,886	7,229,361	6,127	3,856

FUNDRAISING IN ITALY AND ABROAD





FUNDRAISING AND COMMUNITY RELATIONS IN ITALY

CUAMM's Fundraising and Community Relations division works throughout Italy to network, launch new partnerships and collaborations, and enthuse new volunteers and supporters about our work in Africa. These activities are made possible thanks to the invaluable support of 39 support groups across Italy whose members help organize events and special projects, distribute gift and other CUAMM-branded items in support of our work, and cultivate and engage private donors and other supporters including organizations, groups and associations, foundations, institutions, businesses and restaurateurs.

In 2022, we set up both a new community relations and fundraising space at Bicocca University's Asclepio Building on Via Cadore 48 in Monza, and a warehouse at the Women and Mothers Association on Via Cardinale Ascanio 75 in Milan.

SUPPORT GROUPS AND TRAINING IN ITALY

CUAMM support groups are made up of volunteers, many of whom are development workers who have returned from missions in the countries where CUAMM is active and decided to channel their enthusiasm and energies to help make Africa's voice heard in every corner of Italy. These volunteers also do vital work to promote and support events, outreach initiatives, and special projects providing health prevention activities and support to some of the neediest communities in Italian society.

In 2022, CUAMM's support group network expanded with the launch of a new Doctors with Africa CUAMM Pordenone group in the Friuli Venezia Giulia region, and 5,246 individuals took part in a broad range of group-conceived initiatives all over Italy. As in the past, CUAMM organized two meetings for volunteers across the country to keep them abreast of the programs underway in Africa and together plan new outreach and fundraising activities in Italy. The first meeting was held in Bari from 2 to 6 June, where volunteers were given the opportunity to visit Casa Sankara, a guesthouse for African agricultural workers in San Severo that serves as an alternative to the ghettos where they often reside; CUAMM Bari group volunteers provide free healthcare there. The second meeting was held in Padua on 17 September, where the focus was on the organization of CUAMM's upcoming Annual Meeting with Pope Francis.

2022 SNAPSHOT

39
support groups

15
regions involved

2
national group meetings

5,246
volunteers

Top:
2- 6 JUNE COMMITTEE BARI SUPPORT GROUPS
Group volunteers with some of the residents at Casa Sankara in San Severo.

Below:
17 SEPTEMBER COMMITTEE PADUA SUPPORT GROUPS
Father Dante talks to volunteers about CUAMM projects underway in Africa.



2022 CUAMM SUPPORT GROUPS

LIGURIA

Doctors with Africa CUAMM Liguria
 gruppo.liguria@cuamm.org
 Contact person: Cecilia Barnini

PIEDMONT

Mama Teresa with Africa
 gruppo.mamateresa@cuamm.org
 Contact person: Beatrice Crosa Lenz

Doctors with Africa CUAMM Piedmont

gruppo.piemonte@cuamm.org
 Contact person: Giuseppe Ferro

TRENTINO ALTO ADIGE

Doctors with Africa CUAMM Trentino Alto Adige
 gruppo.trentino@cuamm.org
 Contact person: Carmelo Fanelli

VENETO

Padua Volunteer Group
 gruppo.volontari Padova@cuamm.org
 Contact person: Patrizia Giaron

Doctors with Africa CUAMM Padua Colli Group

gruppo.padovacoli@cuamm.org
 Contact person: Loris Barbiero

Doctors with Africa CUAMM Asiago-Bassano Del Grappa Sara per L'Africa

gruppo.bassano@cuamm.org
 gruppo.asiago@cuamm.org
 Contact person: Carlo Girardi

Doctors with Africa CUAMM Campagna Lupia

gruppo.campagnalupia@cuamm.org
 Contact person: Lina Castegnaro

Doctors with Africa CUAMM Conegliano

gruppo.conegliano@cuamm.org
 Contact person: Clara Corsini

Doctors with Africa CUAMM Mellaredo Group

gruppo.mellaredo@cuamm.org
 Contact person: Michela Carraro

Doctors with Africa CUAMM Verona

gruppo.verona@cuamm.org
 Contact person: Daniela Brunelli

Doctors with Africa CUAMM Vicenza

gruppo.vicenza@cuamm.org
 Contact person: Giampietro Pellizzer

FRIULI VENEZIA GIULIA

Doctors with Africa CUAMM Friuli-Venezia Giulia

gruppo.fvg@cuamm.org
 Contact person: Ada Murkovic

Doctors with Africa CUAMM Pordenone

gruppo.pordenone@cuamm.org
 Contact person: Cesare Mazzaro

EMILIA ROMAGNA

Doctors with Africa CUAMM Bologna
 gruppo.bologna@cuamm.org
 Contact person: Alberto Battistini

Doctors with Africa CUAMM Ferrara

gruppo.ferrara@cuamm.org
 Contact person: Mariarita Stendardo

Doctors with Africa CUAMM Modena-Reggio Emilia
 mediciconlafrica_more@yahoo.it
 Contact person: Andrea Foracchia

Doctors with Africa CUAMM Romagna

gruppo.romagna@cuamm.org
 Contact person: Francesco Landi

TUSCANY

Doctors with Africa CUAMM Florence

gruppo.firenze@cuamm.org
 Contact person: Federica Dantes

Doctors with Africa CUAMM Pisa

gruppo.pisa@cuamm.org
 Contact person: Linda Graziadei

Doctors with Africa CUAMM Siena Jenga Insieme

postmaster@jenga-insieme.org
 Contact person: Paolo Rossi

NATIONAL GROUPS

Motorcyclists with Africa
 info@inmotoconlafrica.org
 Contact person: Michele Orlando

Railway Workers with Africa
 assferr.conlafrica@libero.it
 Contact person: Nicola Samà

MARCHE

Doctors with Africa CUAMM Marche

gruppo.marche@cuamm.org
 Contact person: Carlo Niccoli

LOMBARDY

Doctors with Africa CUAMM Bergamo

gruppo.bergamo@cuamm.org
 Contact person: Alessandra Ometto

Doctors with Africa CUAMM Cremona

gruppo.cremona@cuamm.org
 Contact person: Giacomo Ferrari

Doctors with Africa CUAMM Lecco

gruppo.lecco@cuamm.org
 Contact person: Patrizia Spreafico

Doctors with Africa CUAMM Milan

gruppo.milano@cuamm.org
 Contact person: Daniela Talarico

Doctors with Africa CUAMM Monza-Brianza

gruppo.monzabrianza@cuamm.org
 Contact person: Simone Scarabelli

Doctors with Africa CUAMM Rho

gruppo.rho@cuamm.org
 Contact person: Cristina Verna

Doctors with Africa CUAMM Varese

mediciconlafricavarese@gmail.com
 Contact person: Luisa Chiappa

Doctors with Africa CUAMM Sondrio

gruppo.sondrio@cuamm.org
 Contact person: Elisa Raschetti

LAZIO

Doctors with Africa CUAMM Rome

gruppo.roma@cuamm.org
 ponto focal Simone Pavone

ABRUZZO

Doctors with Africa CUAMM Abruzzo

gruppo.abruzzo@cuamm.org
 ponto focal Carmela Ravanelli

SARDINIA

Doctors with Africa CUAMM Sardinia

gruppo.sardegna@cuamm.org
 ponto focal Mauro Fattorini

SICILY

Doctors with Africa CUAMM Sicily

gruppo.sicilia@cuamm.org
 Contact person: Marta Rizzo

BASILICATA

Doctors with Africa CUAMM Basilicata

gruppo.basilicata@cuamm.org
 Contact person: Veronica Muscio

APULIA

Doctors with Africa CUAMM Bari

gruppo.bari@cuamm.org
 Contact person: Renato Laforgia

Doctors with Africa CUAMM Salento

gruppo.salento@cuamm.org
 Contact person: Susanna Coccioli

JOIN US!

Get in touch with the CUAMM group closest to you, or set up a new one yourself! To learn more, call +39 049 7991899 or email e.pasqual@cuamm.org.

EVENTS

CUAMM events provide valuable opportunities for our Community Relations and Fundraising division to familiarize people with CUAMM's work in Africa, engage new audiences and strengthen ties between our organization and other entities and organizations, both institutional and non-institutional.

Most of these events are organized by members of CUAMM's many support groups and/or other supporters – associations, foundations, businesses and others – and take a wide range of forms, from a pre-dinner aperitif to a university conference, a book presentation to a sports competition, a first-hand account at a parish by a CUAMM worker to a corporate event. One example from 2022 is the series of six meetings held in Padua, Verona, Milan, Turin and Bologna,

“CONdividere per CONoscere: A Dialogue on the Post-pandemic Future of Africa and Europe”, an event featuring prominent figures, both Italian and international, from the fields of scientific research, politics and journalism who came to recount their experiences while visiting, doing research, and observing and documenting reality in some of CUAMM's African partner-countries. In a nutshell, six more opportunities for sharing, familiarizing people with and spreading the values that have inspired Doctors with Africa CUAMM for more than 70 years.

CONDIVIDERE PER CONOSCERE, MILAN

11 May in Milan
Condividere per conoscere: A Dialogue on the Post-pandemic Future of Africa and Europe: journalist Beppe Severgnini interviews Father Dante Carraro and Alberto Mantovani, scientific director of Humanitas.



CONDIVIDERE PER CONOSCERE, BOLOGNA

17 June in Bologna
Condividere per conoscere: A Dialogue on the Post-pandemic Future of Africa and Europe: Michele Brambilla, Director of QN Quotidiano Nazionale moderates a dialogue between Father Dante and Alberto Mantovani, scientific director of Humanitas.



THE TRAIN OF HEALTH

22 October in Vicenza-Schio
To wrap up the 2022 edition of the Train of Health project in style, CUAMM's Railway Workers with Africa support group organized a special journey by steam train for students, institutions and local associations.



ANNUAL MEETING "I POLLI(CI)NI"

19 November, in Vatican City
Padua's youth orchestra "I Polli(c)ni" performs at CUAMM's 2022 Annual Meeting with Pope Francis.



IN 2022

	Events organized	Groups involved
Northeast Italy Friuli Venezia Giulia, Veneto and Trentino Regions	212	11
Northwest Italy Lombardy, Piedmont, Valle D'Aosta and Liguria Regions	100	11
Central Italy Emilia Romagna and Tuscany Regions	75	8
Central-Southern Italy From the Marche Region to Sardinia and Sicily	25	7
TOTAL	412	37

70 YEARS WITH AFRICA

9 April in Schio
70 Years with Africa, a concert in memory of Francesco Canova organized by CUAMM's Vicenza support group in partnership with local businesses and other supporters.



PADUA MARATHON

24 April in Padua
Padua Marathon: Run with Africa - Volunteers from our Padua support group take part with a group of friends from Coldiretti in a run in support of CUAMM's vaccination campaign in South Sudan.



MOTOAFICIONADOS

3 April in Bressio Treponti, Padua CUAMM support group Motorcyclists with Africa took part in the 10th Annual edition of *Motoaficionados*, organized by the parish of Bressio Treponti, to showcase the importance of the motorcycles used by CUAMM to reach the most remote African villages.



IN HEALTH AND (IN)JUSTICE

16 September in Modena
In Health and (In)Justice: The Voice of Africa, a performance event featuring renowned stage and film actor Roberto Citran and Father Dante Carraro took place during the Philosophy Festival.



ANNUAL MEETING WITH POPE FRANCIS

Doctors with Africa CUAMM's Annual Meeting is the most important event of the year. It enables us to **report** on everything that we have been able to accomplish thanks to the support of our donors, and to **engage** institutions at a variety of levels in an attempt to **put Africa at the center of the political agenda and public opinion**. Held on Saturday, 19 November, the 2022 edition of the Annual Meeting was truly special, with Pope Francis himself present to welcome **some 4,500** supporters and volunteers to the Vatican.

The main protagonist, however, was Africa and its growing vulnerability in the aftermath of the COVID-19 pandemic, the outbreak of war in Ukraine, and energy and financial speculation. The event also provided us with the opportunity to present the results of the first year of our **"Mothers and Children First: People and Skills"** program, which focuses on developing local human capital as a key to improving health systems.

2022
ANNUAL MEETING

4,500
participants

120
volunteers
involved

30
buses
organized



1. Students from CUAMM's Student College
2. Midwives group



“Your presence here today brings my heart even closer to countries that are especially dear to me, such as the Central African Republic, which I visited in 2015 to open the Holy Door in Bangui, and South Sudan which, God willing, I will visit early next year. **Don't be afraid to face the hard challenges ahead, to intervene in support of communities living in far-off, violence-filled place with no access to healthcare. Stay by their side!**

Even if it takes years of toil, numerous disappointments and failures to achieve results, do not be discouraged. Persevere with steadfast service and open dialogue with everybody as tools for fostering peace and overcoming conflict. Africa is going backwards, and its poverty continues to deepen. I want to thank you for being a messenger who brings news of what

Africa is going through, for bringing to the surface the soundless, hidden suffering of the poor whom you meet every day as you carry out your work. And I urge you to continue to be a voice for Africa, to find a space in which it can express itself, for Africa has a voice, but it is not being heard. You must find ways for it to be heard, **continuing to speak out about what people do not see** – Africa's struggles and hopes – to stir consciences in a world that is often too focused on itself and little else. Finally, I ask you to focus special attention on young people, to do everything possible as you work to help local youth find employment, for they are eager to be the protagonists of their own futures, and to do so especially in their own countries”.

Pope Francis



MEDICI
CON L'A
CUAMM

SPECIAL PROJECTS IN ITALY

TACKLING COVID-19 IN ITALY: TRAINING, SCREENING AND PROVIDING PERSONAL PROTECTIVE EQUIPMENT

In 2022 Doctors with Africa CUAMM launched a **partnership with the Esselunga supermarket chain** to support Italian **health workers** at multiple levels as well as the **most vulnerable segments of the population**. We offered **training** on stress management during ordinary and emergency situations to nurses and social and health workers in facilities in the Lombardy, Piedmont, Emilia Romagna and Tuscany Regions, and provided support for the **FIT4CARE course**, "Taking care of your own well-being"; as well as **personal protective equipment** to the facilities where the trainees worked.

March-December:
28 courses organized
4 regions involved
499 health professionals
(from 30 to 65 years old)
trained



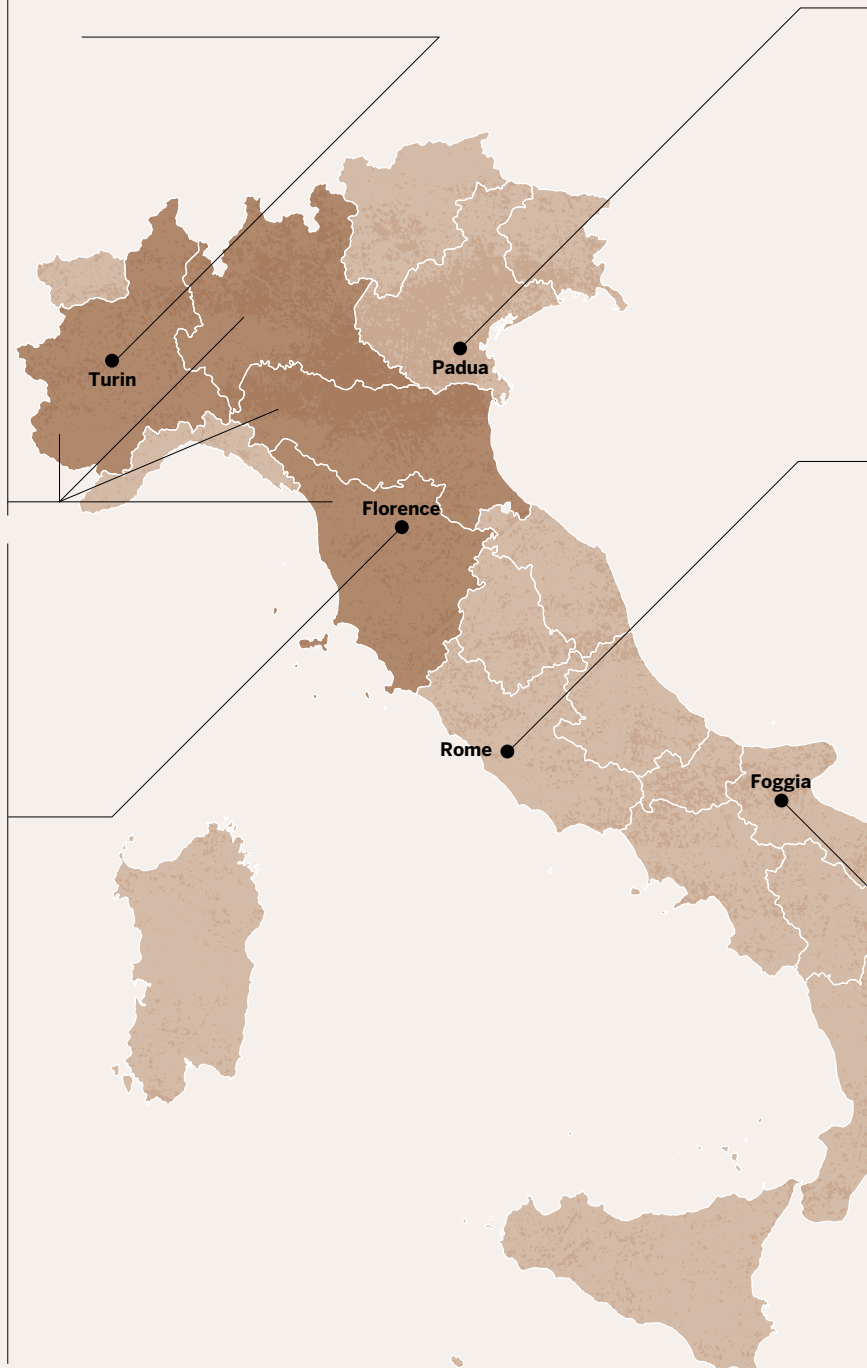
SCREENING

We also organized **screening activities** for Florence's most marginalized and vulnerable groups. With the support of Esselunga, and in partnership with the **Solidarietà Caritas Foundation**, the **Progetto Arcobaleno Association** and **Coop. C.A.T.**, and the sponsorship of the **City of Florence** and the **Central Tuscany USL**, Doctors with Africa CUAMM put together a team of volunteer doctors to administer HIV, hepatitis B and C and syphilis tests in various areas of the city, including at the Caritas soup kitchen on Via Corelli, the San Paolino Welcome Center, the *Giardino dei Ciliegi* and the Open Doors (Porte Aperte) help desk on Via del Romito. Anonymous, free and professional, the service was aimed at migrants, the homeless, sex workers and low-income individuals who rarely get checkups. A total of 71 individuals were tested, four of whom were found to be positive and taken to a nearby infectious diseases facility where they were able to start treatment.



THE "BECOMING PART OF YOUR NEW COMMUNITY" PROJECT

First launched in 2021 thanks to financial support from USAID and the Piedmont Region and the collaboration of a range of local groups, the "Becoming Part of Your New Community" project carried on in 2022 as well, with volunteers from CUAMM's Piedmont support group continuing to provide **medical mediation** and **health education services** to migrants living in the province of Turin, assisting 13 individuals of various nationalities and teaching 61 individuals about basic health topics.



FIT4CARE – TAKING CARE OF YOUR OWN WELL-BEING

With the outbreak of the Covid-19 pandemic, Doctors with Africa Cuamm designed a **digital training course** on physical preparedness, stretching, nutrition and breathing techniques **to improve the mental and physical well-being of health professionals**. Following the pandemic emergency, the course was offered both in digital and in-person versions and enrollment was opened up to anyone working as a volunteer for health or paramedical groups, such as the Italian Civil Defense, Red Cross and local associations.

46 courses organized

11 regions involved

730 professionals trained (from 30 to 65 years old)

VOLUNTEER SERVICE AT THE IMMIGRATION OFFICE

Doctors with Africa CUAMM signed an **agreement with the Questura of Padua to allow CUAMM volunteers to support police work at the Immigration Office**. Some 20 individuals volunteered **more than 6,800 hours of their free time**, working two shifts per day from Monday through Friday. After initially helping to manage the reception phase to facilitate the receipt of paperwork and streamline counter procedures, over time the volunteers' activities broadened to include **telephone support and back office services**. This was in part due to the growing numbers of displaced people arriving from Ukraine following the outbreak of war there; in fact, up to **350 to 400 individuals were processed daily** between March and April.



MOBILE CLINICAL SERVICES IN PIAZZA SAN PIETRO

On occasion of World Day of the Poor (13 November), Doctors with Africa CUAMM set up **2 mobile clinics** in Piazza San Pietro during the week of 7-13 November, Monday through Sunday, to **provide aid and care to homeless and other fragile individuals**. Eighteen volunteers from the Veneto, Lazio and Puglia Regions – CUAMM doctors, medical residents and nurses - offered medical services including blood pressure and blood sugar measurement, basic checkups, COVID-19 tests and HIV tests. One of the campers used for the initiative is the **same mobile clinic** that the CUAMM Bari support group uses **for their visits to the slum areas around Foggia**. The initiative was sponsored by the Dicastery for Evangelization in partnership with Petrone Group, Gilead Sciences and Gruppo Bourelly.



MOBILE CLINIC SERVICE IN SLUM AREAS

In 2022, in support of the Su.Pr.Eme Italia project "Mobile clinic service in the ghettos of the Foggia area", CUAMM began a partnership with UNHCR to develop an activity focused especially on **gender-based violence towards women**. The mobile clinic service was made available not only on weekends, but also during the week in new slum settlements around the Cerignola agricultural region, and activities were implemented in partnership with the infectious diseases division of the Bari Polyclinic thanks to the financial support of Anlaids, which financed **blood chemistry screening** activities.

160 mobile clinic trips
1,800 checkups



THE TRAIN OF HEALTH

After coming to a standstill during the COVID-19 pandemic, CUAMM's Train of Health got back on the tracks from 29 September to 22 October 2022. First launched in 2017 by the **Railway Workers with Africa** association, the initiative is carried out in partnership with **Doctors with Africa CUAMM** thanks to the support of the **Veneto Region** and the precious collaboration of Trenitalia's Veneto Region Transport and the Veneto Region's **Prevention, Food Safety and Veterinary Department and local health and social units** (ULSSs).

The Train of Health made stops at **10 Veneto Region train stations**: Venice Santa Lucia, Belluno, Bassano del Grappa, Padua, Rovigo, Conegliano, Treviso, Portogruaro, Verona and Vicenza, **offering free screening and counseling services to local communities**, for a total of **1,656 individuals served**.

169 health professional volunteers took part in the initiative, including cardiologists, midwives, members of the Padua branch of the **Italian Medical Students' Association** (SISM), nursing students, including from Portogruaro's School of Nursing, and volunteers from **Amici del Cuore** (Friends of the Heart) and **Medici in Strada** (Street Doctors) for outpatient activities. There were also 93 non-medical volunteers from **CUAMM support groups** and other local organizations, including Rovigo's **Bandiera Gialla** (Yellow Flag) Association and **CREDEM Bank** workers at the **"A Day for Others"** event.

The volunteers worked from 5 clinics aboard the train, offering **basic screening** and tests to

ascertain blood pressure, blood sugar, cholesterol, body mass index (BMI) and abdominal circumference.

In the 3 weeks of activities, **62 local ULSS workers** offered personalized counseling sessions on healthy lifestyles, providing information on locally available health services as well as advice on nutrition, physical activity, vaccinations, smoking and other addictions. The Train of Health initiative wrapped up with a special journey aboard a historic steam train along the Vicenza-Schio route. While aimed at raising awareness, the journey was also a festive occasion; not only were several local institutions and associations aboard, but also **350 students from Vicenza-area primary schools** who enjoyed themselves while learning about global health and solidarity.

THE TRAIN OF HEALTH VISITS ITALIAN SCHOOLS

In partnership with the Veneto Region's School Office and **Alberto Giannone, the popular YouTube science educator**, the most recent edition of Train of Health taught secondary school students and their teachers about the initiative's core topics - global health, infectious diseases and vaccination - but also war, food crises and climate change.

THE TRAIN OF HEALTH IN NUMBERS

23
days of activity

10
Veneto Region train stations

262
volunteers

9
ULSS participants

1,553
screening checkups

800
hours of direct health assistance provided

740
heart checkups with ECGs

500
secondary school students

350
primary school students met

47
teachers trained

"Our project was launched by us railway workers, but the Veneto Region, local health and social units, municipalities, provinces and CUAMM all put their hearts (and heads and legs!) into it as well. We'd like to thank everyone for their partnership, including our colleagues, who work hard every day to provide public transport, yet still find time for solidarity."

Nicola Samà,
President,
Railway Workers
with Africa



"We launched the Railway Workers with Africa group in 2014, the year of the terrible Ebola outbreak in Africa. A group of coworkers and I were trying to think of something we could do - in our own small way - to help fight the epidemic, and we came up with the idea of doing a fundraiser in support of Doctors with Africa CUAMM. But that turned out to be just the beginning. We then formed an association, chose Nicola Samà as our president, and proposed the idea of using a train to promote health in the Veneto Region and elsewhere in Italy."

Gino Mina,
cofounder,
Railway Workers with Africa





GIFTS OF SOLIDARITY AND INFOPOINT



It's been four years since Doctors with Africa CUAMM set up its Infopoint, an **open space** on via San Francesco 103 in Padua where people can learn about CUAMM's projects abroad and purchase gift items in support of our activities. The items are produced thanks to the precious collaboration of various social sewing cooperatives employing men and women from different African nations, while the Infopoint is volunteer-managed: in 2022, **15 volunteers devoted their time** to keep it up and running, many also helping to put together products such as our *bomboniere*, gift items for commemorating special occasions (weddings, christenings, graduations and more) while at the same time offering solidarity to those most in need.

IN 2022

15
Infopoint
volunteers

4,000
Easter eggss

1,500
Easter breads
(colombe)



CELEBRATING A NEW LIFE WITH A GESTURE OF CARE

*"(...) We knew right away which favors we wanted to give our guests at the christening of our son, **Ermes Linas**: CUAMM's baptism sachets made of beautiful African cloth, simple yet colorful, and **Anna Godeassi's** little scrolls, which CUAMM had printed in Italian and Lithuanian to celebrate the dual nationalities of all those who care about our child. CUAMM's Pisa support group offered to get the favors ready for the event, which gave us the opportunity to spend a special evening "with Africa". At our son's christening, guests really loved the favors basket. And it was very meaningful for us, as well: our gesture of hope towards African mothers and children, a small but concrete gesture of care."*

Alessandra Palomba,
volunteer with Doctors with Africa
CUAMM's Pisa support group



Our volunteers also provided precious support during the holidays, Easter in particular, by preparing special CUAMM traditional **Easter eggs and breads** (colombe) for purchase in support of our health projects. In 2022, we launched a new partnership with **Walcor**, a leading chocolate company, which kindly **donated 4,000 Easter eggs to our organization. Volunteers from more than 30 CUAMM support groups** throughout Italy then wrapped them up in colorful African textiles for distribution (together with **more than 1,500 colombe**) in their respective areas, and consumers had an opportunity to support CUAMM's work in support of the most vulnerable by purchasing one. In addition, supermarket chains in northern Italy offered 25,000 specially-branded **Walcor Easter eggs for Doctors with Africa CUAMM** (with a small surprise inside) for **sale in support of CUAMM's "Mothers and Children First" program.**

Thanks in part to the dedicated website we launched in 2021 (**regalisolidali.cuamm.org**), purchases of CUAMM's solidarity gift items soared in the Christmas period, with **more than 1,100 individuals and 60 companies and professional firms** choosing them for their employees and professional partners, thus further expanding the CUAMM support network known as "Business with Africa", companies that support CUAMM's mission and work in Africa with monetary or in-kind donations and corporate volunteering initiatives



WALCOR

"Walcor has believed from the start in our partnership with CUAMM, an NGO that offers support to mothers and their children. We're pleased to offer our solidarity and support to help some of the world's most vulnerable individuals, and to give our customers an opportunity to play a part as well, through a purchase of one of our Easter eggs, so that they too can make a small contribution to and feel part of this project."

Attilio Capuano,
General Manager, Walcor



FUNDRAISING ABROAD

INTERNATIONAL PARTNERSHIPS

In recent years our International Relations division has become a strategic keystone for Doctors with Africa CUAMM by fostering the **development of new relationships and associations with other actors engaged in international development**. The latter group includes a growing number of private foundations, some of which with ties to private entities and others to corporations with social responsibility objectives. Doctors with Africa CUAMM now has many projects and initiatives underway with international partners in each of the countries where we are active; they support our work alongside, and sometimes in partnerships with, our more traditional development cooperation donors, and help advance our organization's overall strategy. These partnerships and associated projects are cultivated further through meetings with institutions, foundations, universities, professional groups and private citizens on the challenge entailed by CUAMM's strategic plan, which, in turn, help put a more global spotlight on our activities.

In 2022 CUAMM's International Relations division worked on:

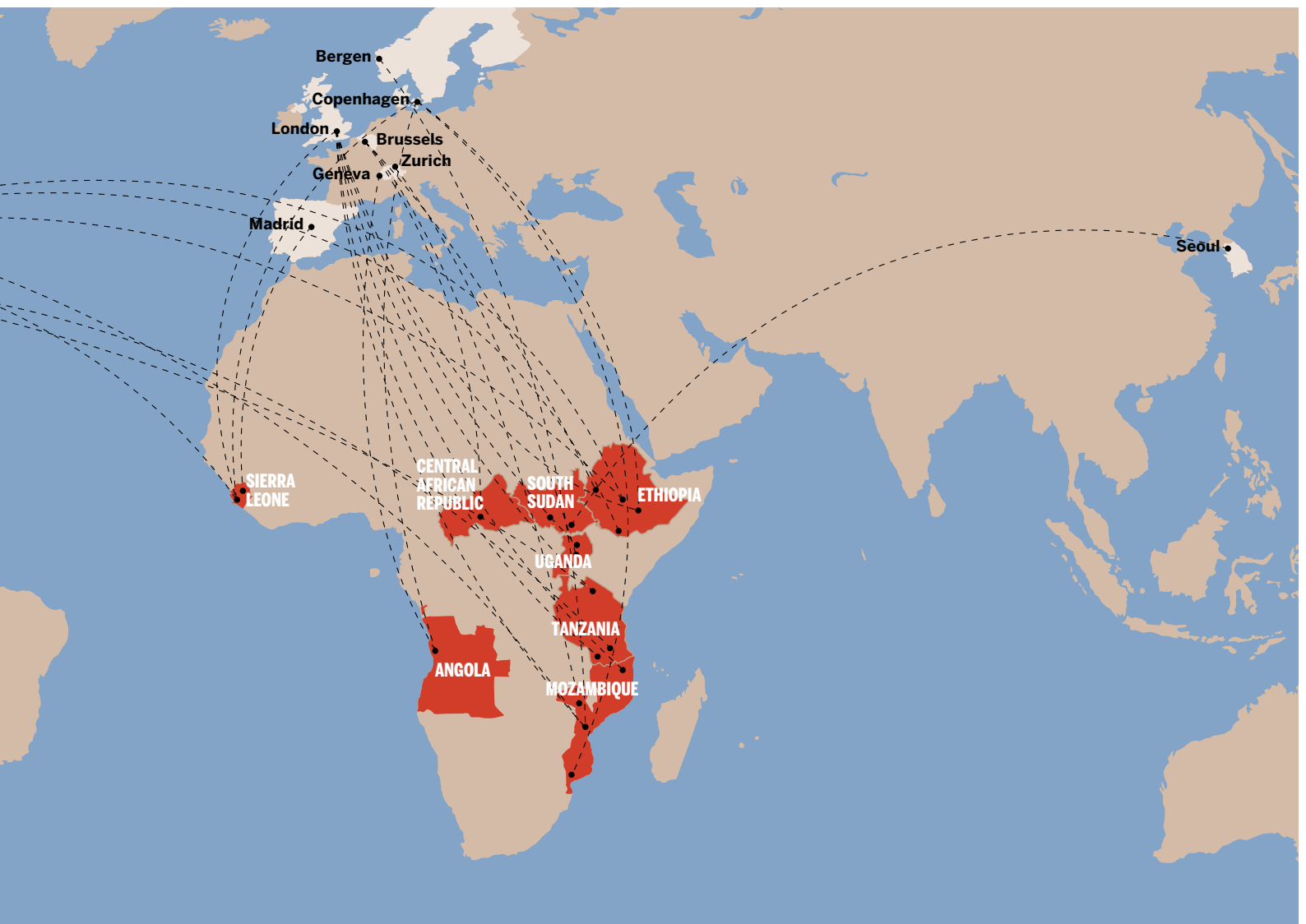
- **the dissemination of best practices in the field of global health**, in partnership with the London International Development Center, the Trialect Traineeship Program, the German Health Alliance, the Bournemouth University Disaster Management Centre (BUDMC), University College London's Warning Research Centre (WRC), the Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO), the Lancet Migration Hub, Together for Girls and the American Chamber of Commerce in Italy (AmCham);
- **emergency response activities** thanks to our partnership with, and support by, the Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO) in response to vulnerable people's urgent needs in Ethiopia, Mozambique, Angola and in support of communities affected by the conflict in Ukraine;
- **international fundraising** in support of our many programs in Africa, thanks to partnerships with numerous companies and private foundations.



CUAMM OVERSEAS

The network encompassing these partnerships extends from Europe (Switzerland, Denmark, Spain and the United Kingdom) all the way to the United States and Canada. That's why we established **Doctors with Africa CUAMM UK**, a charity headquartered in London, and **Doctors with Africa CUAMM USA**, which is registered as a 501(c)(3) organization and headquartered in New York. CUAMM UK and CUAMM USA facilitate networking with local actors, helping inspire their commitment to support projects in the poorest sub-Saharan African countries.

1. Inauguration of innovative tools and techniques for safe hospital access and triage at the Fondazione G. Pascale National Cancer Institute IRCCS in Naples, thanks to the support of USAID.
2. A visit to the Police Headquarters Immigration Office in Padua by U.S. ambassador to the Holy See, Joe Donnelly, and CUAMM volunteers involved in managing the emergency in Ukraine.
3. A fundraising event held in Montecarlo on 9 June 2022 in support of CUAMM's humanitarian aid programs in Africa.



EDUCATION AND PUBLIC AWARENESS



HEALTH IS GLOBAL

Doctors with Africa CUAMM is committed to advancing people's right to health in a range of ways, including through educational and awareness-raising initiatives. We believe wholeheartedly that **helping familiarize young people, doctors and health professionals with development cooperation issues can lead to both a more just world and more responsible medical practices.**

HEALTH COOPERATION IN AFRICA

That's why we organize **residential training** courses twice a year at CUAMM's Padua headquarters, with 230 hours of lectures for medical residents and doctors from across Italy who are interested in learning more about health issues in developing nations – from public health to infectious diseases, gynecology to pediatrics, and more. Many take part in order to prepare for a possible overseas mission.

In 2022 we were able to resume our in-person training courses, but also retained the remote learning option to enable greater numbers of students to take part in the classes. Thanks to the use of case studies, work groups and interactive discussion, every participant had the opportunity to interact directly with lecturers and classmates, whether in person or remotely.

For decades CUAMM has also collaborated with the **Italian Medical Students' Association** (SISM), FederSpecializzandi, the Italian Association of Young Medical Doctors (SIGM), the National Federation of Physicians, Surgeons and Dentists (FNOMCeO) and the Italian Network for the Teaching of Global health (RIISG) to offer seminars, courses and conferences on the topics of health cooperation and global health.

QUALITY MEDICINE FOR AFRICA: "FRUGAL" RESEARCH, YOUTH AND INNOVATION

In January 2022, **thanks to funding by the Cariparo Foundation, we launched a new three-year program** offering exciting opportunities for professional growth to young doctors and students through **training and other possibilities for learning** alongside their international peers. CUAMM partners ever more frequently with **institutions and research centers in Europe, Africa and elsewhere around the world**, and our decades-long partnerships with the **most prominent Italian organizations** working in the fields of health and youth are also key to the success of the training activities featured in the program.

2022

55
midwives who have left for Africa since 2016

44
students

11
recent graduates



Here are some of the most important of the project's many innovative aspects:

1. It brings the **lessons learned during the recent pandemic** to the attention of young people, and proposes a **preventive approach** to such **public health emergencies**, keeping a key focus on **tomorrow's doctors and civil society**;
2. It propagates the **value** of the **operational research** that CUAMM conducts, i.e., research that delves deeply into local contexts to pinpoint the most critical issues and seek out scientific, **evidence-based** solutions to them;
3. It fosters the **active participation of an international community of young researchers and development aid workers** with a new online version of CUAMM's scientific journal, *Health and Development*, to encourage networking and the sharing of good practices and **to spur a culture of scientific research**.

In 2022 alone, we held **18 training initiatives** under the umbrella of the project, in a peer-to-peer educational setting that saw junior doctors and residents working closely with university-level medical students to explore case studies and analyze real-life situations.

In addition, we organized and held **a national event on global health determinants in Florence** on October 28; while open to the general public, it featured a high proportion of youth and university student participants from different Italian regions. "On the Road to Global Health" sought to launch a vision of a new kind of **healthcare built in the name of social justice**, one that underscores the connections between its economic, social and climate-related aspects. Our aim was to focus people's attention on the values that are truly worth investing in: human rights, including the right to health and the right to a life of dignity, both of which will necessitate investments in health, economic, social and labor policies – a vision of global health that will require everybody's fullest commitment.

NEONATAL CARE IN LOW-RESOURCE COUNTRIES

In March CUAMM organized an in-person course on neonatal care in low-resource countries aimed at providing a working methodology and practical information for those preparing to undertake such work. The course was greatly appreciated, thanks both to the exceptional skill and empathy of the lecturers and to their practical and interactive approach, including a full day dedicated to hands-on exercises. Given the success of this collaboration with the **Italian Society of Neonatology's Neonatal Care in Low-Income Countries Study Group**, we plan to offer the course again in 2023.

IMPLEMENTATION RESEARCH IN RESOURCE-LIMITED COUNTRIES

Now in its third year, **CUAMM's course on operational research has become an annual event** among our various training offerings. Held in person in May, the course was well attended by doctors undergoing specialist training and junior specialists interested in learning more about research methodology in resource-limited settings. This year we made an effort to broaden our participant audience to ensure greater interdisciplinarity and mutual enrichment during the training sessions: in addition to clinicians there were also nurses, physical therapists and project consultants whose diverse views and experiences deepened and enhanced group discussions.



GLOBAL HEALTH AND INTERNATIONAL HEALTH COOPERATION

In 2022, an exciting **collaboration with the NGO Volontariato Internazionale per lo Sviluppo (VIS)** led to the second edition of our course on Global Health and International Health Cooperation, aimed at international development workers and volunteers, planners, decentralized cooperation officials and students – professionals keen to gain expertise in the area of international cooperation that focuses on the right to health, health service delivery, emergency response and the strengthening of health systems in resource-limited countries. Held online, the course was attended by thirty participants from several other countries around the world, including Italy.

POETRY FOR THE PLANET

2022 also saw “Poetry for the Planet”, an event featuring six young artists “challenging” each other with poems dedicated to the theme of climate change, the environment and responsibility for the planet we inhabit. The novelty of the event was its “poetry slam”, based on a half-writing, half-science-oriented residency: in Spring 2022, the six artists spent three days at the Museum of the Sciences in Trento alongside the event’s creators and environmental sustainability experts, **producing original poetry focused on the theme of climate change.** The performance was later replicated in Padua and Bergamo, bringing its innovative approach to this most pressing issue for younger generations.

WOLISSO PROGRAM

For years, Doctors with Africa CUAMM has offered medical students the possibility to undertake a period of training in Africa. Thanks to our partnership with SISM, every month CUAMM provides 4 medical students with the opportunity to do **a practical internship in Ethiopia or Tanzania** to begin to get acquainted with the world of international health cooperation. In 2022, 41 students left for Africa, 24 heading to Tosamaganga, Tanzania, and 17 to Wolisso, Ethiopia.

JPO PROGRAM

Launched in 2002, our **Junior Project Officer (JPO) program** is instead aimed at medical residents. In agreement with the Conference of Italian University Rectors (CRUI), the program offers a 6-month period of field training that is recognized by the student’s university as part of her or his formal education. Although like our other training opportunities, both of these important real-world field-training programs had to be delayed or suspended for a time due to the pandemic, we are pleased to report that 327 medical residents from 35 universities across Italy have taken part in them from the time they were instituted through the end of 2022.



SCHOLARSHIP AWARDS FOR MIDWIVES

Thanks to CUAMM's partnerships with various **institutional bodies representing the midwifery profession**, as well as the generous support of **private donors**, since 2016 **scholarship and degree awards** have also been made available to students and recent graduates of midwifery degree courses to enable them to undertake a period of training in one of the African hospitals with which we partner.

The award programs offered in 2022:

- **Two 3-month scholarship awards for University of Padua students** offered by Carolina Mega Cacciavillani in memory of her father **Michele Mega**, Associate Professor in Clinical Obstetrics and Gynecology at the University of Padua and the first president of the university's Midwifery Diploma program. Launched in 2016, this scholarship award program will remain active through 2025.
- **One 2-month degree award** for a recent **University of Padua graduate** funded by the Benedetti family in memory of **Irma Battistuzzi**, a midwife who graduated from the university's Midwifery School on 15 June 1940 and who was known for her **great wisdom, generosity and humanity**. Active since 2018, this award program is organized in partnership with the University of Padua's Alumni Association.
- **Two 1-month degree awards for recent University of Salerno graduates**, thanks to the support of the **Rachelina Ambrosini Foundation**. This program has also been active since 2018.



LIMITED-RESOURCE LEARNING

"I'd wanted to have a new kind of human and professional experience in Africa for quite a while. I went there well aware that two months is far too little time to get to know an entire world, so I just tried to take in everything possible, and also to give back as much as possible. In the first week I felt a bit disoriented by the pace, which was pretty different from the one I was used to, and the limited availability of resources and large number of women in labor to help attend to. But it was easy to quickly adapt to all of it. I spent hours in the delivery room, trying to understand the reason for some of the local practices. There is always a reason for everything, linked to the specific setting."

Silvia Baldissera,
winner of the Irma Battistuzzi
Memorial Degree Award



UNIVERSITIES INVOLVED
IN CUAMM'S PROGRAMS

38
Italian universities



MIDWIVES

55
midwives have
left for Africa
since 2016,
including:

41
students

11
recent graduates

SISM

402
medical students
have left for
Africa since
2006,
including:

267
for Tosamaganga,
Tanzania

135
for Wolisso,
Ethiopia

MEDICAL
RESIDENTS
WITH CUAMM

327
medical
residents have
left for Africa
since 2002,
including:

111
in pediatrics

65
in internal
medicine

50
in public health

38
in gynecology

33
in surgery

18
in infectious
diseases

6
in anesthesiology

3
in orthopedics

2
in child
neuropsychiatry

1
in neurology

Estudantes de Medicina
as sedes do SISM
(Segretariato Italiano
Studenti di Medicina)
das quais saem com a
CUAMM para a África

Médicos pós-graduados
as sedes das
universidades das quais
saem com a CUAMM
para a África

Projecto Partearas
as sedes das
universidades das quais
saem com a CUAMM
para a África

COMMUNICATIONS AND MEDIA RELATIONS

PRESS, TV
AND RADIO
IN NUMBERS

2,253

print and online
pieces of CUAMM

272,089

viewers of CUAMM's
Annual Meeting on
Tv2000

61

appearances
on national and
local TV and radio



COMMUNICATIONS

Doctors with Africa CUAMM translates its experiences and activities into a range of content and media for various audiences that describe both Africa's needs and its beauty, and help to strengthen CUAMM's visibility in Italy, Africa and elsewhere around the world.

Our publications encompass fundraising materials such as mailings, brochures and special materials for donors. In compliance with the regulations for third sector organizations, we also produce an **Annual Report**, one of our primary tools for reporting to and strengthening our bonds with our stakeholders, who deserve to know not only about the financial aspects of CUAMM's programs and activities but also their broader impact.

2022 also saw the publication of **Africa Reads**, a wall and desk calendar on Africa literature created for CUAMM by Andrea Mongia; the calendar won both the New York-based Society of Illustrators' gold medal in the Institutional category and the Award of Excellence in Communication Arts' Annual Illustration Competition.

CUAMM also publishes **èAfrica**, a bimonthly informational magazine with a print run of around 40,000 copies which is sent to our donor network and distributed at events, and **Health and Development**, another magazine focused on international health development and policy that is issued three times a year in both Italian and English.

CUAMM's **digital and social communications** play an ever more important role for our organization, as they enable us to keep our stakeholders and other interested members of the public constantly abreast of our development programs in Africa and awareness-raising initiatives in Italy. We send out **more than 60 newsletters**, and every month sees **increased engagement and growing numbers of followers** on our **social media platforms**.

CUAMM's Communications division also works hard to increase the **visibility of our programs and activities** in the field, **developing materials in cooperation with local staff** that detail the work underway in each country and highlight the **contributions of our donors and partners**; these include country profiles and factsheets in a range of languages.

To strengthen CUAMM's **brand identity** in the field, materials including posters, plaques, banners and roll-up displays are also created for use by local offices and program activity coordinators. The division also creates awareness-raising materials for use in our partner countries.

Last but not least, in 2022 "**Seeds for the future – an integrated intervention to combat malnutrition**", a program implemented by Doctors with Africa CUAMM in **Ethiopia**, engendered "**Seed with Seed**", a memory game based on playing cards illustrated by Andrea Rivola that was produced thanks to the support of the historic card company Dal Negro. The cards recount the lives and daily struggles of two Ethiopian children, Mira and Kabir, to grow and prepare food, eat healthily, play, interact, protect and care for one another.



The abundance of stories and first-hand accounts from the field generated special projects and collaborations in 2022 powered, as always, by CUAMM's network of supporters and volunteers throughout Italy. One especially meaningful occasion for our organization was the **Biblical Festival**, which featured a dialogue on 9 May in Bassano del Grappa between the author and journalist **Paolo Rumiz** and Father Dante Carraro on the topic of "**Europe and Africa: Between Apocalypse and new skies**". A second dialogue between **Dieudonné Nzapalainga**, Central African Republic's **Cardinal of Bangui**, and Father Dante Carraro, moderated by journalist Anna Pozzi, took place on 27 May in Vicenza.

CUAMM also took part in the **Modena Philosophy Festival** in Modena, Carpi and Reggio Emilia where on 16 September in Modena our friend, the actor **Roberto Citran**, performed in a reading entitled "In Health and (In)Justice", followed by a dialogue between Father Carraro and Lucia Palmieri on access to health care.

Finally, on 30 September Father Dante Carraro participated in the **Mission Festival**'s conference "Making Life Bloom: The Magdalene Mission", a dialogue with Cardinal Matteo Zuppi and theologians Emilce Cuda and Serena Noceti moderated by Luca Bressan.





DAL NEGRO

EMISSARIES OF A MESSAGE

“Illustrating CUAMM’s 2023 calendar, ‘Letture d’Africa’ [Africa Reads] was quite a challenge, and it helped me grow as an artist. It wasn’t easy, in fact, to take a dozen different, complex books by as many African authors and transform them into images that weren’t only relevant to the text but also appealing to viewers. But the minute Francesca and Anna proposed the idea, I felt keen to undertake the challenge, because I realized that I could actually help make a difference – help people in a concrete way – through my work. This dual aspect became my driving force, and turned the project into a wonderful, and fruitful, adventure. New friendships developed, connections between different types of people and worlds; and images, which are innately universal, became emissaries of messages about issues that are vital to people everywhere.”

Andrea Mongia,
illustrator



PLAY FOR A BETTER FUTURE

“Games play an important role in helping kids to learn and grow. Dal Negro and Doctors with Africa CUAMM believe that every child, no matter their circumstances, has the right to a comprehensive and inclusive education. That’s why we decided to join forces to create a game that is both fun and that teaches and inspires. The partnership is centered around a real-life project to tackle malnutrition in Ethiopia. The game not only involves children in an exciting adventure; it also introduces them to important topics like healthy eating, sustainable agriculture, and caring for others. Playing with the 20 pairs of playing cards illustrated by Andrea Rivola enables kids to explore, experience and really grasp the world they live in, helping them mature in a more conscious and responsible way. We’re proud to donate part of the proceeds from our sales of “Seed with Seed” to CUAMM’s health projects in Africa; it’s a commitment that will enable us to help build a better future for the children and communities who most need it.”

Francesco Dal Negro,
President, Teodomiro Dal Negro Srl



MEDIA RELATIONS

We inaugurated 2022 with an event series entitled “**Conoscere per Condividere**: A Dialogue on the Post-Pandemic Future of Africa and Europe,” with participants Alberto Mantovani, Romano Prodi and Ferdinando Pagnoncelli. Six mini-videos featuring Prof. Mantovani discussing the topic of vaccines were created as part of the series.

When the war broke out in Ukraine and CUAMM wanted to express solidarity in support of communities affected by the conflict, we started the **blog “Diary from Ukraine and Moldova”** to keep a daily focus on their unfolding daily plight.

For Mother’s Day we created “**Momo’s Journey**” a digital fairy tale written by **Kim and Niccolò Fabi** and illustrated by **Shirin Amini**, to help expand our audience; the project was later transformed into a real picture book for young children.

Pope Francis’ long-awaited visit to South Sudan, scheduled for July but then postponed, made it possible for us to tell the public about the difficult situation there through the voice of Francesca Sabatinelli, on **Vatican News** and **Vatican Radio**, in several languages and with dedicated video pieces.

In Summer 2022 we conducted an **awareness campaign** on the importance of vaccination in Africa in partnership with the Vatican’s Dicastery for Communication and the support of the Global Solidarity Fund; the project involved the creation of radio pieces in the Central African Republic and Ivory Coast as well as a series of community and local media outreach activities. In October, we worked with **Alberto Giannone**, a popular science educator and YouTuber on the **Train of Health**, and produced **three videos** for high school students on topics including climate change, the world’s “forgotten” wars and vaccines.

2022 also saw numerous **web marketing and fundraising initiatives**, including web and social media projects with some of CUAMM’s corporate partners: Walcor, Segafredo, Esselunga and Intesa San Paolo. In addition to the new content constantly added to or updated on our **Italian- and English-language sites**, four new landing pages helped us spread specific messages and fundraising appeals. In Fall 2022 we launched an **institutional campaign, “What You Can’t See”**, to turn a spotlight on the “forgotten” crises faced by the most vulnerable in Africa. [OK per “questa crisi”?] We were fortunate to have three exceptional individuals - Neri Marcorè, Sveva Sagramola and Niccolò Fabi – to help promote the appeal. The ad was featured on **Corriere della Sera’s Buone Notizie** with a cover photograph and an extensive piece by Michele Farina, and broadcast on **Tv2000** and **La7**.

But perhaps the most meaningful moment of many in 2022 was CUAMM’s Annual Meeting and special audience with Pope Francis, which put Africa on the front page of **L’Osservatore Romano** on 19 November with the headline “*With Africa, to stop its exploitation*”, and involved key media partners including **Rai Radio 1, TV2000, Vatican News, Avvenire** and **Africa Rivista**.

Overall, 2022 saw a total of **2,253 print or online media pieces and more than 61 features or guest appearances** on national and local TV and radio. Some of the most important included **Rai Radio’s Che giorno è** and **Gr1, Rai 1’s A sua immagine, Rai 3’s Telegiornale, Radio24’s Uno, Nessuno, 100Milan, TV2000’s Diario di Papa Francesco, L’ora solare, and Di buon mattino, Radio Vaticana** and **Radio InBlu**. Finally, numerous local newspapers throughout Italy did features on CUAMM, many showcasing the stories of Italians who had chosen to go to work with CUAMM in Africa. Finally, we enhanced our “storytelling” to help reach new audiences with the **production of 56 new videos**

SOCIAL MEDIA AND WEBSITES



252,630

total sessions, including

144,751

on the Italian website

36,789

on the English website

4,245

on the Portuguese website

21,209

on the landing page

45,636

on the e-shop



40,156

subscribers to our
Voci dall’Africa newsletter
- 4,487 since 2021

42

newsletters, weekly
and monthly publications,
sent throughout 2022



48,757

followers
+ 2,510 since 2021



7,157

followers
+ 1,989 since 2021



4,995

followers
+ 195 desde 2021



16,050

followers
+ 2,741 since 2021

28

linked Instagram pages



2,860

subscribers to our
YouTube channel
+ 374 since 2021

356,039

views
+ 392,772 since 2021

56

new videos
on our YouTube
channel



“Aside from whatever small role I can play as an individual, I’m truly pleased to become part of the CUAMM family. It was easy to say yes to taking part in CUAMM’s new institutional ad, given the importance and force of its message. The fact is that Africa teaches us about taking a different approach to life, giving a different value to the ‘little’ things, the ones that actually matter.”

Neri Marcorè,
actor



“What we don’t see is still hugely important; it concerns all of us even if it’s invisible to us. The only solution for the future of our planet, in fact, is to embrace each other as brothers and sisters; only by really seeing each other will we be able to find new reasons to live, new actions to take.”

Sveva Sagramola,
television presenter



“There was no way I’d skip the opportunity to help CUAMM with its appeal. “What we don’t see” is precisely what I have seen, in fact, during the many trips I’ve taken with CUAMM to various African countries: the constant, tireless, silent commitment of its doctors and health workers, which is so crucial if we want to respond to the massive unmet needs of an Africa whose progress is now being undermined.”

Niccolò Fabi,
singer/songwriter





MOMO'S JOURNEY

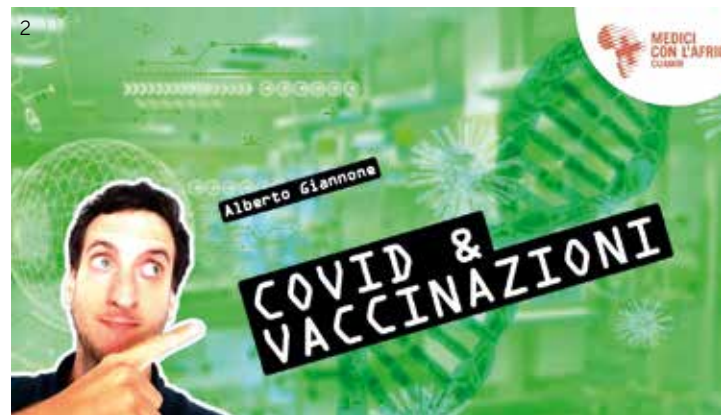
«CUAMM is surprising. This became clear to me right away during my very first trip with the organization. That was a long time ago, and I can't remember what I used to think about Africa, but today there's no doubt: CUAMM is Africa. It was a place that forced me to try to make sense of what felt senseless, to accept what felt unacceptable.»

Shirin Amini,
illustrator



1. The cover of *Momo's Journey*, the online fable by Kim and Niccolò Fabi, with illustrations by Shirin Amini.

2. Three videos for students produced by CUAMM with the participation of Alberto Giannone, the popular YouTube science educator (you can watch them on Doctors with Africa CUAMM's YouTube channel).



L'OSSERVATORE ROMANO

GIORNALE QUOTIDIANO POLITICO RELIGIOSO

Unicuique suam Non praevalent

Anno CLXXII n. 485 (43-44)

Città del Vaticano

sabato 19 novembre 2022

L'incoraggiamento di Francesco alla comunità missionaria di Medici con l'Africa - CUAMM

Con l'Africa perché non sia sfruttata

Essere in Africa, prima ancora di essere per l'Africa. E questo è proprio l'atteggiamento giusto, perché c'è nell'immaginario, nell'incoscio collettivo, quell'atteggiamento brutto: l'Africa va sfruttata. È contro questo c'è il vostro non essere in Africa. Così, essere in Africa è essere per l'Africa. Lo ha detto Papa Francesco alla comunità missionaria di Medici con l'Africa - CUAMM, ricevuta in udienza, nella mattina di sabato 19 novembre, in Aula Paolo VI. «La vostra opera - ha detto - è un modo concreto di mettere in pratica una cosa che chiamiamo ogni giorno nel "Padre nostro". Noi domandiamo al Padre celeste: "Dacci oggi il nostro pane quotidiano". E questo "pane" è an-

che la salute. La salute è un bene primario, come il pane, come l'acqua, come la casa, come il lavoro. Voi vi impegnate perché non manchi il pane quotidiano a tanti fratelli e sorelle che oggi, nel

XXI secolo, non hanno accesso a un'assistenza sanitaria normale, di base». E, ha aggiunto a braccio, «è vergognoso: l'umanità non è capace di risolvere questo problema, ma è capace di portare avanti l'industria delle armi che distruggono tutto». Il Pontefice ha esortato «a continuare a dare voce all'Africa, a darle spazio perché possa esprimersi: aprite possibilità perché si senta la voce dell'Africa, continuate a dare voce a quello che non si vede, alle sue fatiche e alle sue speranze, per rinnovare la coscienza di un mondo a volte concentrato troppo su sé stesso e poco sull'altro».

Chiamato con il Cardinal Parolin alla Casa santa dell'Osse
Una data comune per la Pasqua
PAGINA 11



Per una visita privata ai familiari

Il Papa ad Asti

Domani la messa in cattedrale

Papa Francesco è a Portofino, vicino ad Asti, per una visita privata ai suoi familiari, in occasione del novantesimo compleanno della cugina Carla Rabeczana. Nella mattina di sabato 19 novembre, subito dopo l'udienza alla comunità missionaria di Medici con l'Africa-Cuamm in Aula Paolo VI, il Pontefice è partito in elicottero dall'eliposio vaticano, atterrando nel campo sportivo di Portofino stazione.

Francesco, accolto festosamente e con la delicata discrezione della gente del Piemonte, ha compiuto una breve visita nella chiesa parrocchiale della Beata Vergine degli Angeli. Un luogo che gli è particolarmente caro perché lì crescevano i suoi familiari, in particolare nella cappellina con una piccola statua della Madre di Dio. Ad accompagnarlo il parroco, don Luigino Trinchese. In particolare, Francesco ha salutato con affetto Luigina Gallo, una donna di cento anni.



In auto il Papa ha percorso circa quattro chilometri per raggiungere Portofino e recarsi per il pranzo nell'abitazione della cugina Carla Rabeczana, in via Stefano Degiani 40. La donna, che lo ha accolto al portone di casa, ha compiuto novant'anni lo scorso 8 novembre. Nel pomeriggio il Papa avrà incontri privati con i familiari e permanerà nell'Episcopio di Asti.

Per abbracciare la comunità diocesana dalla quale è partita la sua famiglia per emigrare in Argentina, domani, domenica 20 novembre, solennità di Cristo Re, alle 10.30 Francesco presiederà l'Eucaristia nella cattedrale di Asti. Durante la celebrazione, conferirà il ministero dell'accogliuto a Stefano Accornero.

Particolarmente significativa sarà la partecipazione di giovani della diocesi, in occasione della Giornata mondiale della gioventù.

Alla preghiera dei fedeli saranno ricordati, in particolare, «i popoli che soffrono a causa della guerra», assicurando che «staccano le armi e si spingono in tutto il mondo odio e sete di vendetta». E si pregherà anche perché «trovino conforto e sostegno tutti coloro che soffrono a causa della situazione economica attuale e per chi ha perso il lavoro». Al termine della messa, Francesco guiderà la preghiera dell'Angelus.

Dopo il pranzo in Episcopio, il Papa farà ritorno in elicottero (il decollo è in programma alle 16) nello stadio comunale Censis Bona, dove lo saluteranno oltre mille tra bambini e ragazzi della zona) in Vaticano. L'arrivo è previsto alle 17.45.



La vita degli sfollati congolesi tra dramma e speranza per gli imminenti colloqui di pace

In fuga dalla violenza

Grappi di bambini in attesa di lavarsi le mani con delle bacinelle d'acqua, nella speranza di ricevere un pasto caldo preparato dai volontari. E la scena che arriva dalla scuola primaria Kayembe di Mungu, dove è stato allestito un enorme campo profughi per accogliere gli sfollati interni delle violenze nell'est della Repubblica Democratica del Congo.

Siamo nella provincia del Nord Kivu, vicino alla città di Goma, dove da mesi è in corso un'offensiva dei ribelli del Movimento 23 marzo (M23).

I volontari nel campo preparano il cibo per i tanti bambini, costretti a lasciare le proprie abitazioni in questi mesi di violenze, utilizzando grandi pentoloni nei quali viene cucinato del porridge.

Non solamente le scuole sono state riconvertite in luoghi di accoglienza per gli sfollati, ma anche ospedali, chiese e altre strutture improvvisate servono oggi a questa funzione: divenuta sparso mai urgente.

«Gli aiuti umanitari stimano che circa 580.000 persone siano sfollate dagli scontri di marzo, di cui più di 128.000 nel territorio di Nyiragongo», si legge in una dichiarazione congiunta diffusa nei giorni scorsi dal governo congolese e dal coordinatore umanitario delle Nazioni Unite nel Paese africano, Bruno Lemarquis.

Quest'ultimo ha evidenziato che gli aiuti umanitari «hanno bisogno di un accesso senza ostacoli per raggiungere le popolazioni colpite». «La vita quotidiana

Milioni di ucraini in emergenza

KYIV, 19. A quasi 9 mesi dall'inizio dell'invasione russa in Ucraina, con l'arrivo dell'inverno rischiano di diventare ancora più critiche le condizioni di oltre 6,2 milioni di sfollati interni a causa della carenza di alloggi e di beni di prima necessità come cibo, acqua ed elettricità.

Le organizzazioni umanitarie stimano, inoltre, che altri 13 milioni di persone siano bloccate in aree in cui sono state distrutte infrastrutture chiave come ospedali e scuole, oltre che impianti idrici ed energetici. Enormi restano anche le difficoltà di oltre 13 milioni di rifugiati che tutt'ora si trovano in Polonia, Romania e Moldavia. Paesi che si stanno facendo carico di gran parte dell'accoglienza di chi ha lasciato l'Ucraina.

Da Kyiv, le ultime dichiarazioni del consigliere presidenziale, Mykhailo Podolyak, hanno però riaperto un barlume di speranza per la fine al conflitto. In un briefing con i giornalisti, Podolyak ha affermato che la guerra potrebbe finire prima che l'Ucraina liberi tutti i territori con mezzi militari. Il consigliere di Zelensky ha commentato così la recente di-

TRACCE DI UN PAESE PERDUTO
Libano un paese allo stremo in cerca di un futuro
CORRISPONDENTE ANSALDO WALTON E LUCA PIRATTI NELLE PAGINE 8 E 9

Stato di guerra in Libano, un paese allo stremo in cerca di un futuro. Il conflitto in Libano è un paese allo stremo in cerca di un futuro. Il conflitto in Libano è un paese allo stremo in cerca di un futuro.



Particolarmente significativa sarà la partecipazione di giovani della diocesi, in occasione della Giornata mondiale della gioventù.

The speech delivered by the Holy Father at the Annual Meeting and Audience on 19 November 2022 was featured on the front page of the Osservatore Romano.



07/ ECONOMIC AND FINANCIAL SITUATION



2022 BUDGET AT A GLANCE

A estrutura da Médicos com África Cuamm está legalmente iDoctors with Africa CUAMM is incorporated by law within the Opera San Francesco Xavier Foundation. Although there is just one set of annual financial statements for the Foundation, they comprise the results of three different activities: those of the Foundation, the non-profit NGO Doctors with Africa CUAMM and the Student College.

General information on the entity

Name and ID code
 Name: MEDICI CON L'AFRICA CUAMM (former NPO)
 Head office: VIA SAN FRANCESCO 126 PADUA PD
 VAT Number: 00677540288
 Tax Code: 00677540288
 Legal form: Recognised ecclesiastical entity
 RUNTS registration number: ===
 RUNTS registration section: ===
 Letter of the activity of general interest carried out: letters n) – g) – h) – i) – k)
 Various secondary activities: no

Financial Statement as at 31/12/2022

Balance sheet

	31/12/2022	31/12/2021
Assets		
B) Fixed assets		
I - Intangible fixed assets	-	-
4) concessions, licenses, trademarks and similar rights	1.919	1.925
7) others	-	5.734
<i>Total intangible fixed assets</i>	<i>1.919</i>	<i>7.659</i>
II - Tangible fixed assets	-	-
1) land and buildings	44.660	44.660
3) equipment	1.427	1.880
4) other assets	68.774	44.049
<i>Total tangible fixed assets</i>	<i>114.862</i>	<i>90.589</i>
III - Financial fixed assets	-	-
1) equity investments in	-	-
a) subsidiaries	5.814	5.814
<i>Total equity investments</i>	<i>5.814</i>	<i>5.814</i>
3) other bonds	51.592	21.622
<i>Total financial fixed assets</i>	<i>57.406</i>	<i>27.436</i>
<i>Total fixed assets (B)</i>	<i>174.187</i>	<i>125.684</i>
C) Current assets		
II - Receivables	-	-
1) due from users and customers	181.390	17.080

Bilancio ramo ETS

1

	31/12/2022	31/12/2021
2) due from members and founders	-	702.386
12) other receivables	26.143.796	23.376.472
<i>Total receivables</i>	<i>26.325.186</i>	<i>24.095.938</i>
IV - Liquid funds	-	-
1) bank and postal deposits	19.781.824	19.834.846
3) cash and equivalents on hand	333.646	225.981
<i>Total liquid funds</i>	<i>20.115.469</i>	<i>20.060.827</i>
<i>Total current assets (C)</i>	<i>46.440.655</i>	<i>44.156.765</i>
D) Accrued income and prepaid expenses	2.944.593	1.803.075
<i>Total assets</i>	<i>49.559.435</i>	<i>46.085.524</i>
Liabilities		
A) Net assets		
III - Free assets	-	-
1) profit reserves or operating surpluses	1.472.490	1.472.490
2) other reserves	511.841	1
<i>Total free assets</i>	<i>1.984.331</i>	<i>1.472.491</i>
IV - Surplus/deficit for the year	392.503	511.837
<i>Total net assets</i>	<i>2.376.834</i>	<i>1.984.328</i>
B) Provisions for risks and charges		
3) others	1.693.705	2.079.547
<i>Total provisions for risks and charges</i>	<i>1.693.705</i>	<i>2.079.547</i>
C) Employee severance indemnities	1.457.730	1.309.648
D) Payables		
1) payables to banks	203.130	86.769
2) payables to other lenders	100.000	100.000
3) payables to members and founders for fundings	1.561.779	2.269.693
7) trade payables	611.982	527.453
9) payables to tax authorities	141.962	134.092
10) payables to social security and welfare institutions	320.709	304.746
12) other payables	2.610.607	3.500.808
<i>Total payables</i>	<i>5.550.170</i>	<i>6.923.560</i>
E) Accrued expenses and deferred income	38.480.996	33.788.441
<i>Total liabilities</i>	<i>49.559.435</i>	<i>46.085.524</i>

Management statement

Charges and costs	31/12/2022	31/12/2021	Income and Revenues	31/12/2022	31/12/2021
A) COSTS AND CHARGES FROM GENERAL INTEREST ACTIVITIES	43.346.148	40.005.899	A) REVENUES, ANNUITIES AND INCOME FROM GENERAL INTEREST ACTIVITIES	38.635.196	35.866.174
1) Costs for raw, ancillary and consumable materials and goods from activities of general interest	5.030.654	5.909.727	5) Proceeds of 5 per thousand	645.621	1.239.929
2) Costs for services from activities of general interest	22.842.102	19.204.508	6) Contributions from private subjects from activities of general interest	8.492.633	8.169.046
4) Costs for personnel from general interest activities	13.387.555	13.361.118	8) Contributions from public bodies from activities of general interest	25.791	10.119
7) Other management charges from activities of general interest	2.085.837	1.530.546	9) Proceeds from contracts with public bodies from general interest activities	28.674.108	25.060.914
	-	-	10) Other revenues, annuities and income from general interest activities	797.042	1.386.166
Total costs and charges from activities of general interest	43.346.148	40.005.899	Total revenues, annuities and income from general interest activities	38.635.196	35.866.174
	-	-	Surplus/deficit of general interest activities (+/-)	(4.710.952)	(4.139.725)
	-	-	Surplus/deficit from various activities (+/-)	-	-
C) COSTS AND CHARGES FROM FUND-RAISING ACTIVITIES	1.079.082	748.432	C) REVENUES, ANNUITIES AND INCOME FROM FUND RAISING ACTIVITIES	7.370.016	6.546.487
1) Charges for regular fundraising	1.079.082	748.432	1) Income from regular fundraising	7.370.016	6.546.487
Total costs and charges from fundraising activities	1.079.082	748.432	Total revenues, annuities and income from fundraising activities	7.370.016	6.546.487
	-	-	Surplus/deficit of fundraising activities (+/-)	6.290.933	5.798.055
D) COSTS AND CHARGES FROM FINANCIAL AND EQUITY ACTIVITIES	4.854	-	D) REVENUES, ANNUITIES AND INCOME FROM FINANCIAL AND EQUITY ACTIVITIES	18.701	1.693
6) Other charges	4.854	-	1) Income from banking relationships	1.510	449
	-	-	2) Income on loans	373	-
	-	-	5) Other income from financial and equity assets	16.817	1.244
Total costs and charges from financial and equity activities	4.854	-	Total revenues, annuities and income from financial and equity activities	18.701	1.693
	-	-	Surplus/deficit from financial and equity activities (+/-)	13.847	1.693
E) COSTS AND CHARGES OF GENERAL SUPPORT	1.234.646	1.134.813	E) INCOME FROM GENERAL SUPPORT	136.853	83.653
1) Costs for raw, ancillary and	44.923	69.158	1) Income from secondment of personnel	43.881	6.540

Balance sheet of the ETS branch

3

Charges and costs	31/12/2022	31/12/2021	Income and Revenues	31/12/2022	31/12/2021
consumable materials and goods from general support					
2) Costs for general support services	458.059	371.255	2) Other income from general support	92.971	77.113
3) Costs for the use of third party assets of general support	9.742	10.333		-	-
4) Costs for general support personnel	627.663	584.281		-	-
5) Depreciation of general support	27.069	32.453		-	-
7) Other general support charges	67.190	67.333		-	
Total costs and charges from general support	1.234.646	1.134.813	Total income from general support	136.853	83.653
TOTAL CHARGES AND COSTS	45.664.730	41.889.144	TOTAL INCOME AND REVENUE	46.160.765	42.498.009
	-		- Surplus/deficit for the year before taxes (+/-)	496.035	608.865
	-		- Taxes	(103.532)	(97.028)
	-		Surplus/deficit for the year (+/-)	392.503	511.837

Mission report

Introduction

This mission report is an integral part of the financial statements as at 31/12/2022.

The financial statements comply with the provisions of art. 13 of Legislative Decree 117/2017 and with the provisions of the decree of the Ministry of Labor and Social Policies of 5 March 2020 and is drawn up in compliance with the national



Tel: +39 049 78.00.999
www.bdo.it

Piazza G. Zanellato, 5
35131 Padova

Report on the audit of the financial statements

pursuant to article 14 of Legislative Decree no. 39

To the Chairman of the Board of ETS Branch "Medici con l'Africa CUAMM"
of the organisation Opera San Francesco Saverio

Independent Auditor's report

Opinion

We have audited the financial statements of Medici con l'Africa CUAMM (the Organisation), which comprise the balance sheet as December 31, 2022, the "rendiconto gestionale" (management report) for the year then ended and the "General Part" and "Explanation of Financial Statement Items" sections included in the mission report.

In our opinion, the financial statements give a true and fair view of the financial position of Medici con l'Africa CUAMM as at December 31, 2022, and of the result of its operations and its cash flows for the year then ended in accordance with the Italian regulations and accounting principles governing financial statements.

Basis of opinion

We conducted our audit in accordance with International Standards on Auditing (ISA Italia). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the audit of the Financial Statements section of this report. We are independent of the Foundation in accordance with ethical requirements and standards applicable in Italy that are relevant to the audit of financial statements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Emphasis of Matter

As indicated by the Directors in the "Section on the Single National Register of the Third Sector and the tax regime applied", the organisation meets the requirements laid down by law for the purposes of its registration with RUNTS, which will be carried out within the terms of the law.

Responsibilities of Board of Directors and the controlling Board of Medici con l'Africa CUAMM for the financial statements

The Board of Directors is responsible for the preparation of financial statements that give a true and fair view in accordance with the Italian regulations and accounting principles governing financial statements and, within the limits of the law, for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

The controlling Board has the responsibility, in compliance with the applicable legislation, for the supervision of the monitoring financial reporting process of the Foundation.

Bari, Bologna, Brescia, Cagliari, Firenze, Genova, Milano, Napoli, Padova, Palermo, Roma, Torino, Verona

BDO Italia S.p.A. - Sede Legale: Viale Abruzzi, 94 - 20131 Milano - Capitale Sociale Euro 1.000.000 i.v.
Codice Fiscale, Partita IVA e Registro Imprese di Milano n. 07722780967 - R.E.A. Milano 1977842

Iscritta al Registro dei Revisori Legali al n. 167911 con D.M. del 15/03/2013 G.U. n. 26 del 02/04/2013

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Pag. 1 di 3



Auditor's Responsibilities for the Audit of the Financial Statements

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

As part of the audit in accordance with International Standards on Auditing (ISA Italia), we exercise professional judgment and maintain professional scepticism throughout the audit. We also:

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

We communicate with those charged with governance, identified at the appropriate level as required by the ISA Italia, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.



Report on other legal and regulatory requirements

Opinion pursuant to article 14, paragraph 2, letter e), of Legislative Decree no. 39/10.

The Board of Directors of Medici con l’Africa CUAMM are responsible for the preparation of the section “illustration of the economic and financial performance of the organisation and the way in which it pursues its statutory aims” included in the mission report of Medici con l’Africa CUAMM as at 31 December 2022, including its consistency with the financial statements and the compliance with the applicable laws and regulations.

We have performed the procedures required under audit standard (SA Italia) no. 720B in order to express an opinion on the consistency of the section “illustration of the economic and financial performance of the organisation and the way in which it pursues its statutory aims” included in the mission report of Medici con l’Africa CUAMM as at 31 December 2022 and on its compliance with the applicable laws and regulations, and in order to assess whether its contain material misstatements.

In our opinion, the section “illustration of the economic and financial performance of the organisation and the way in which it pursues its statutory aims” included in the mission report is compliant with applicable laws and regulations.

With reference to the assessment pursuant to article 14, paragraph. 2, letter e), of Legislative Decree no. 39/10 based on our knowledge and understanding of the entity and its environment obtained through our audit, we have nothing to report.

Padova, June 1, 2023

BDO Italia S.p.A.

Stefano Bianchi
Partner

This report has been translated into English from the original, which was prepared in Italian and represents the only authentic copy, solely for the convenience of international readers.



In 2022, the expenditures of the non-profit NGO Doctors with Africa CUAMM totaled €46,160,765. Of this figure, 91.7% (€41,977,056) was invested in CUAMM prevention, treatment and training projects in the countries where we are active. Operating costs accounted for 2.9% of the total, and included the overall management of CUAMM's facilities, staff, depreciations, financial

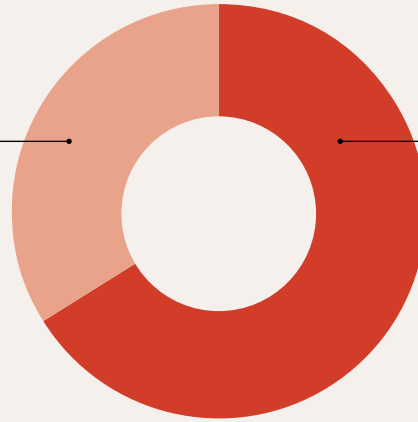
charges, and taxes and fees. Communications, public awareness/outreach and fundraising expenses accounted for 5.4% of the total and included the organization of events in Italy, publications, media relation, public awareness and development education, loyalty marketing, new campaigns, and the staff of the Communications, Community Relations and Fundraising divisions.

HOW WE RAISED FUNDS IN 2022

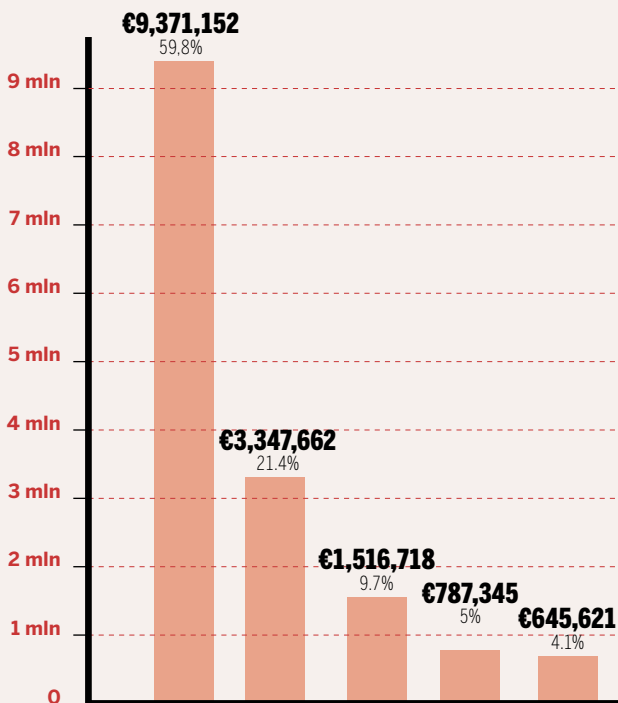
TOTAL REVENUE
€46,160,765
100%

FUNDS FROM INDIVIDUALS
€15,668,499
33.9%

FUNDS FROM INSTITUTIONS
€30,492,266
66.1%

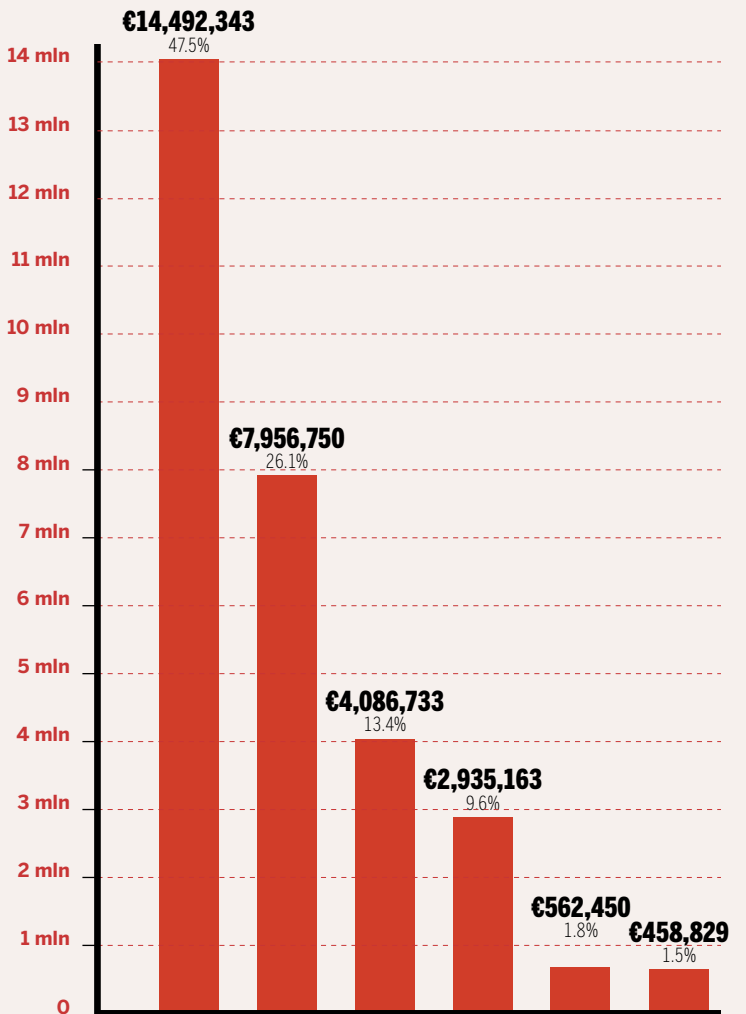


FUNDS FROM INDIVIDUALS



Individual donors
Foundations
Corporate donors
Groups
5 x 1000

FUNDS FROM INSTITUTIONS

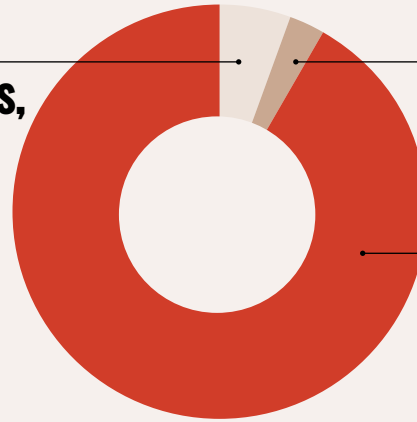


International agencies
Italian development aid
Other institutions
European Union
Local bodies
C.E.I.

HOW WE SPENT THE FUNDS RAISED

TOTAL COSTS
€45,768,262
 100%

PUBLIC AWARENESS, COMMUNICATIONS AND FUNDRAISING
€2,453,028
 5.4%



OPERATING COSTS
€1,338,178
 2.9%

TREATMENT, PREVENTION AND TRAINING PROJECTS
€41,977,056
 91.7%

Treatment, prevention and training projects:

Expenses for on-site project implementation, project services, other project-related expenses, and costs for project personnel.

Operating costs:

Costs for personnel, general facility management, raw materials, facility management services, depreciations, miscellaneous facility management expenses, financial expenses, and taxes and fees.

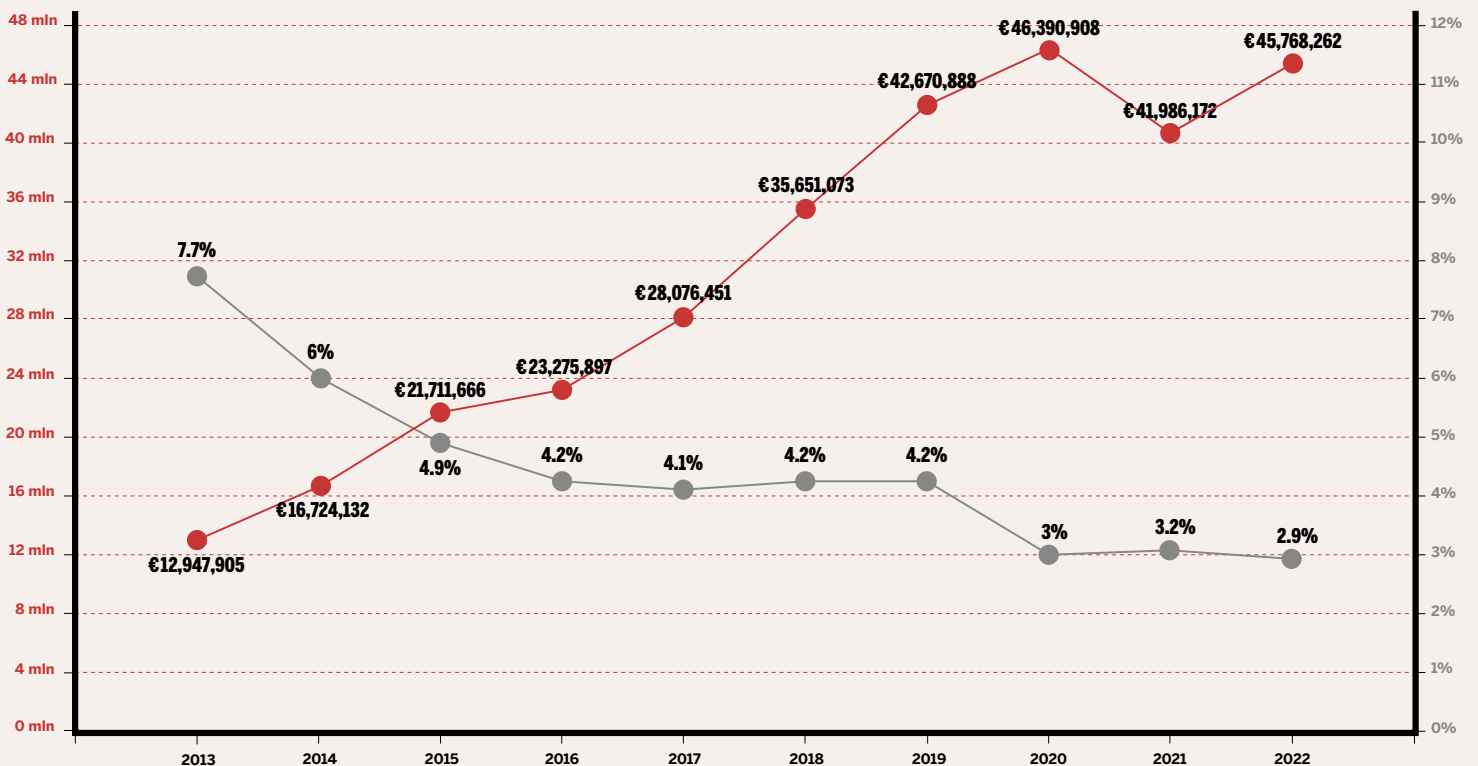
Public awareness, communications and fundraising:

Costs for Communications, Community Relations and Fundraising division services and staff, publications, media relations, events management and publicity, public awareness and development education, loyalty marketing, new campaigns and fundraising activities. Costs and expenses from fundraising activities amount to €1,079,082.

IMPACT OF OPERATING COSTS ON THE BUDGET

The charts below show the trend in total expenditures and the impact of operating costs from 2013 to 2022.

- Total expenditures (in Euros)
- Operating costs impact ratio (expressed as a percentage)



THANK YOU FOR JOINING US ON THIS INCREDIBLE JOURNEY WITH AFRICA

ASSOCIATIONS, GROUPS AND ORGANIZATIONS

A Disposizione dell'Amore
A.D.Amo. Odv
ACLI
Amici di Leguigno
Associazione La Scala
Associazione Aiutality
Associazione Amici dei
Bambini Contagiati da HIV/
AIDS Onlus
Associazione
Completamente
Associazione Donna e
Madre Onlus
Associazione il Buongustaio
Associazione Occhi Dolci
Associazione On Off
Associazione Operazione
Associazione Progetto
Arcobaleno
Associazione Volontariato e
Solidarietà,
Azione Cattolica Diocesana
di Padova
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Centro Missionario di Carpi
Comitato "Premio al
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Cooperativa Sociale Anima
Cooperativa Sociale C.A.T.
Croce Verde Castelleone El
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Le Stanze di Natale Lunds
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Tecla Onlus
Trekking Italia
Women and Children First

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3v Green Eagle
Ace International Trust All
S.p.a.
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Annalisa Trust
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Soccorso
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Terme Antoniano S.r.l.
Terratrends
Trenitalia Gruppo Ferrovie
dello Stato
Veneta Pali S.r.l.
ViiV Healthcare

FOUNDATIONS

Bristol Myers Squibb
Foundation
Chiesi Foundation
Elma Foundation
Fondation Assistance
Internationale (FAI)
Fondazione Axa
Fondazione Cariparo
Fondazione Cariplo
Fondazione Cariverona
Fondazione Cassa di
Risparmio di Firenze Crf
Fondazione Cassa
Risparmio Lucca
Fondazione Cav. Lav. Carlo
Pesenti
Fondazione Compagnia di
San Paolo
Fondazione del Monte di
Bologna e Ravenna
Fondazione del Sud
Fondazione di Modena
Fondazione Elena
Trevisanato Onlus
Fondazione Friuli
Fondazione Gino Lunelli
Fondazione Happy Child
Fondazione Intesa San
Paolo
Fondazione Maria Grazia
Cutuli
Fondazione Mons. Camillo
Faresin Onlus
Fondazione Prima Spes
Onlus
Fondazione Prosolidar
Fondazione Rizzato
Cerino-Canova
Fondazione Sardegna
Fondazione Un Raggio di
Luce
Fondazione Zanetti Onlus
Fondo Beneficenza Intesa
San Paolo
MERCK for Mothers
Msd Italia
Parole di Lulù
Raskob Foundation
Robert F. Kennedy
Foundation
Symphasis
Symphasis Charitable
Foundation
Tre Emme Trust Onlus
Vitol Foundation
World Diabetes Foundation
(WDF)

INSTITUTIONS

AICS Agenzia Italiana per la Cooperazione allo Sviluppo
Arcidiocesi di Torino
ARESS Agenzia Regionale per la Salute ed il Sociale Puglia
ASST Melegnano Azienda Zero
Caritas Diocesana Asti
Caritas Italiana
Caritas Provitae
Comune di Dueville
Comune di Modena
Comune di Padova
Conferenza Episcopale Italiana
Diocesi di Padova
ECHO
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WHO

WE WOULD ALSO LIKE TO THANK:

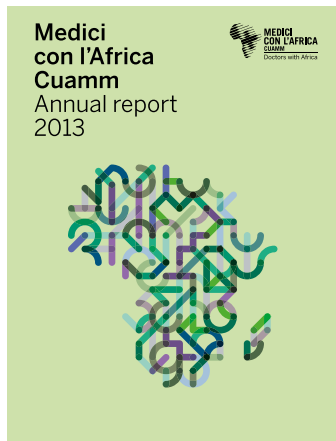
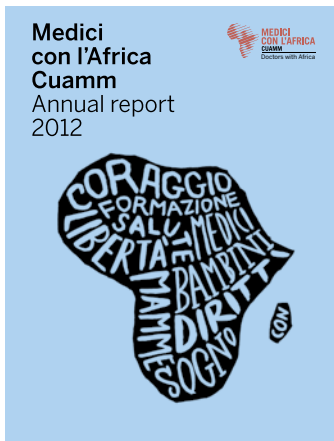
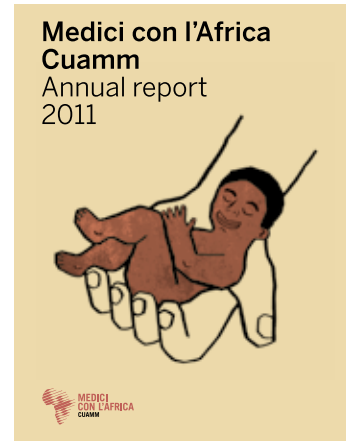
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Amici Del Cuore
Altovicentino Anteus Veneto Asd
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Associazione "I Polli(Ci)Ni"
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Associazione Culturale Franco Bertoldi
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Asst Sette Laghi Atelier Du Chocolat Auser Veneto Aps
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Azienda agricola "Le passioni" di Repele Lucia
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Comune di Pisogne
Comune di Ponte San Nicolò
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Parrocchia dei Santi Angeli Custodi Torino
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Università Bocconi
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We would like to thank the many parishes and associations that, along with more than 5,246 volunteers who are part of the CUAMM Groups, advocate for Africa and our mission. Special thanks are also due to Rotary Districts and individual Rotary Clubs, Lions Clubs, Soroptimist International and Inner Wheel for their support of our outreach and communication activities.

COMMITTED TO ACCOUNTABILITY, YEAR AFTER YEAR.





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WITH AFRICA**
CUAMM

WHAT GOES UNSEEN

It is said that butterflies can cause a hurricane miles away simply by flipping their wings. In the same manner, the war in Ukraine is reverberating across world's regions, disproportionately affecting Africa where rising food prices are harshly impacting poor people pushing them into extreme unsecure living conditions. These are the consequences of a daily struggle that no one can see and that no one talks about.

Help us ensure that African mothers and children are not left alone.

DONATE NOW:
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*“Africa must be supported,
not exploited. Don’t be afraid
to face the hard challenges
ahead, to intervene in support
of communities living in far-off,
violence-filled places
with no access to healthcare.
Stay by their side.”*

Pope Francis

2,346,915
patients assisted

1,120,664
under-5 children
examined

410,277
prenatal visits
provided

214,970
deliveries attended

18,902
patients treated with
antiretroviral therapy

3,429
health workers
trained

11,137
trips provided for
obstetric
emergencies

4,086
malnourished
individuals treated

Doctors with Africa CUAMM

via San Francesco, 126
35121 Padua - Italy
tel. +39 049 8751279
cuamm@cuamm.org
mediciconlafrica.org
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