

ANNUAL REPORT 2024



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01/ FOREWORD



DOING GOOD AS AN ANSWER

by Father **Dante Carraro**
Director of Doctors
with Africa CUAMM

Looking back on 2024 is an exercise in care, gratitude and hope: at a time in which the world is sadly wounded by **wars** and marked by **violence**, we've humbly tried to be among those who are working hard for **peace**, humanity which chooses to open up and give themselves to others. Humanity which is committed to doing good because it believes that, at the end of the day, "giving" goodness in any situation, no matter how challenging, is the most powerful response there is.

As you'll see as you browse the following pages, we've done so in a concrete and (we hope) serious manner. It was moving to see our "seriousness" recognized by the Accademia dei Lincei, which awarded us the **Antonio Feltrinelli 2024 prize for exceptional work of high moral and humanitarian value**. At an event attended by Italian President Sergio Mattarella, this award, commonly referred to as the Italian Nobel Prize, was given to CUAMM "for the breadth and seriousness of the work it has carried out and continues to carry out in eight of the world's most fragile countries." From **South Sudan**, with **eight ambulances** that connect peripheral healthcare facilities to the three hospitals of Rumbek, Yirol and Cueibet; to **Mozambique**, with the work we do to **prevent and treat HIV** and the mental health services we provide, especially to the children and adolescents of Beira. From our commitment to **South Omo, Ethiopia**, where thousands of people faced serious hardships due to the flooding and overflowing of the Omo River and Lake Turkana, to the many people who became refugees or who were displaced due to environmental disasters or conflicts. From the new **NICU** (Neonatal Intensive Care Unit) at the hospital in **Matany, Uganda**, to the renovated, larger and more functional spaces **at Princess Christian Maternity Hospital** (PCMH) in Freetown, **Sierra Leone**.

With constancy and determination, we upheld our commitment to **work "with"**, without rushing towards easy and immediate results, opting instead for a long-term outlook, accepting the hard work inherent to development and the patience required when awaiting results. The act of working "with" is a stylistic signature that Doctors with Africa "proudly" bears in its name. It is a hallmark which has once again made it possible to count on **a closely-knit network which connects Italy, Africa and Europe**, uniting institutions and universities, research centers and different partners in the shared challenge of developing and strengthening health systems in Africa.

I'm especially touched each time I think of the opening of the **maternity ward in Adior, South Sudan**, a place where nothing was functional just three years prior, a place dotted by crumbling buildings and animals wandering between pavilions which were without water and energy. Together, we had decided to intervene and, that day, with the entire community present, we saw the results with our own eyes. It was an intense day full of hope for a population which craves **signs of peace and reconstruction**.

The same is true of Tigray, Ethiopia, where we offered support to the hospital and peripheral centers in Shire. Our goal was to soothe wounds and mend the scars of a region devastated by the atrocities of civil war: only together is it possible to reach certain goals.

At our Annual Meeting in Turin, we confirmed once again that the health of Africa must be at the center. It isn't, unfortunately, on a global scale; but it is, unwaveringly, at the heart of everything CUAMM does, as it has been for over 70 years. Thanks to **countless friends, witnesses, travel companions, and volunteers in the field**, we have turned a commitment to health, that of Africa in particular, into reality. It's the only way to lay the foundation upon which to build a more just future. And, significantly, it is where we launched our next **challenge: the construction of a new School for Paramedical Personnel in Bossangoa**, in the last mile deep in the Central African Republic. **For the future of all!**

02/ METHODOLOGICAL NOTES



OUR FUNDAMENTALS

For the past 74 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 changes and growth in 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 **dialog** with public and private, local and international bodies to ensure that what we do is in line with domestic and international health policies and standards;
- **ongoing scholastic training** for international and local staff, with a focus on monitoring and operational research as tools for continuously improved health.

PROJECTS

From the start, this combination of on-the-ground presence and dialog within the larger **project framework** has been the 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 Doctors with Africa 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 providing services which benefit the entire community.

Guiding documents:

- **Strategic Plan 2008-2015**
Strengthening health systems: Doctors with Africa CUAMM's contribution to helping the poor achieve their right to health per the Millennium Development Goals.
 - **Strategic Plan 2016-2030**
Strengthening health systems to build resilient communities in Africa.
- <https://doctorswithafrica.org/en/who-we-are/mission/strategic-plan-2016-2030/>

The above 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,
- **ongoing training of local human resources** in order to build up sustainable institutional capacities,
- **monitoring and evaluation of the performance** of interventions and health systems in order to optimize efficiency and effectiveness, including through operational research projects on different methodologies, strategies and clinical aspects.

We looked to the WHO when selecting the areas in which to intervene and strengthen health systems, operating on 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 maximum efficacy and to reach our stated 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>

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), such as reducing child and maternal mortality and combating major endemic diseases such as HIV/AIDS, tuberculosis and malaria, and more recently the Sustainable Development Goals (SDGs). In particular:

- **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 acute and chronic 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 education, 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.

- The three-year document on the planning and focus of the development cooperation policy for 2024-2026 can be downloaded here: https://documenti.camera.it/leg19/dossier/pdf/ES0252.pdf?_1739891071609

In its **Three-year Planning and Direction Document 2024-2026**, the Italian Agency for Development Cooperation defined the SDG-based priorities underlying its development aid policies.

They are also aligned with those of the European Commission:

- 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 aid policy alignment among development agencies and donors helps generate project proposals that align with and meet the needs of beneficiary nations, where the monitoring framework is already incorporated into 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 evaluation criteria:

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

- http://www.oecd.org/dac/evaluation/daccriteriaforevaluatingdevelopmentassistance.htm?source=post_page-2

These parameters are used collectively to assess whether a project has achieved its set objectives and whether the latter were relevant to and coherent with the local context and other concurrent interventions, aiming for the efficient use of resources and sustainable impacts and outcomes.

To that end, the monitoring process, including ongoing dialog with *stakeholders* (both funders and beneficiaries), also entails assessing how prudently and efficiently human and financial resources are being used, a matter that has always been of primary importance to Doctors with Africa CUAMM. It is made explicit in our mission and through our commitment to working with local partners. Moreover, spending thriftily but judiciously, including in terms of technical aspects, is an operational choice.

In the past 20 years, there has been a **shift from quantifying the degree to which activities and output comply with the plan** to a greater focus on **quantifying results, intentional or unintentional, expected or unexpected, positive or negative**. Called **Results Based Monitoring (RBM)**, this approach is a management strategy designed to measure and track program performance and to compare the expected results with actual outcomes. Data are collected systematically vis-à-vis key performance indicators that make it possible to see the progress of our actions towards their intended goals.

This approach arose from the need to increase the efficiency of aid and to improve its quality and its impact on development (harmonization, alignment and results), topics discussed in the Paris Declaration on Aid Effectiveness (2005), the Accra Agenda for Action (2008) and the Busan Partnership (2011).

To monitor and measure the effectiveness of our projects and their impact on the SDGs and local health systems, we believe that it is essential to **use internationally recognized indicators and targets**, to compare the systems implemented in different districts, hospitals and countries, and to evaluate different organizational and clinical methodologies in order to unearth evidence of what works, what doesn't work, and what works best 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 Journal, Vol. 3, N. 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 episodes, deliveries, pre- and postnatal visits, and immunizations.

For maternal health, CUAMM uses the system laid out in WHO's *Monitoring Emergency, Obstetric Care handbook*.

→ **Monitoring Emergency Obstetric Care: a Handbook.**
World Health Organization 2009

This WHO publication defines indicators for the availability, coverage and quality of obstetric and neonatal care.

We strongly believe that in addition to providing numerous health services and activities year after year, we must also be sure to correlate baseline data to the final results achieved and the targets set during the planning phase. In this way, we will ensure that our actions continue to improve and become increasingly effective over time. This is also why we use the **indicators from each country's information system** (which also sets targets, be they annual or aligned with the above-mentioned SDGs and major endemic diseases such as malaria, TB and HIV) and, in order to standardize our performance indicators and measurement systems, why we recently started to collaborate with the Management and Healthcare Lab of the Sant'Anna School of Advanced Studies in Pisa, which has developed a **performance evaluation system** for use by Italy's regional healthcare systems over the last 15 years.

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

→ Tivoschi 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>

*The 2022 Annual Report is available upon request



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 annual reports with 117 indicators, 48 of which were evaluated with respect to international benchmarks or standards and represented by 5 colored bands based on the statistical distribution of the values, from 0 (red) to 5 (dark green).

HUMAN RESOURCES

In alignment with 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 important 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, and external candidates are seen as opportunities to expand our pool of professional talent. In keeping with WHO recommendations, our selection process is based on the criteria of equal opportunity and nondiscrimination, 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**

During the selection process, 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 activities 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 on the ground. 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 to protect vulnerable children and adults from sexual abuse, adopting the related *policies* which the Organization has drafted in accordance with international guidelines:

→ <https://doctorswithafrica.org/en/who-we-are/organization/organization/>

→ **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 nationally and internationally. To this end, we drew up a document covering CUAMM's general principles vis-à-vis the security of our personnel, with a special security plan for each of the African countries where we're present:

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

To further safeguard the well-being of our personnel, CUAMM has adopted a system for monitoring and evaluating both the technical and general skills of its human resources, with the aim of continuously improving the awareness and sense of responsibility of each individual and of our organization overall.

FINANCES, FUNDING AND ASSETS

In terms of finances, funding and assets, the operational strategy of Doctors with Africa CUAMM is centered around the efficient and effective use of its resources as a path to achieving its *mission*. In accordance with the relevant regulatory framework, the annual financial statements of Doctors with Africa CUAMM are **audited** by an **independent auditing firm** to ensure that they clearly and accurately represent the organization's finances, assets and economic achievements.

The accounting principles used comply with those recommended by the Consigli Nazionali dei Dottori Commercialisti and Esperti Contabili (representative bodies of accounting professions in Italy), duly interpreted and adjusted where necessary to reflect the 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 aforementioned Consigli Nazionali as well as the Supervisory Board appointed for this purpose in accordance with applicable law. Reporting for individual institutional projects generally involves independent external audits in order to assure donors of the coherence and congruity of expenditures for the activities actually implemented compared to the activities covered by the contracts entered into with said donors. The Foundation operates in compliance with all current national and/or regional regulations and laws concerning the environment; occupational health; safety and hygiene; and *privacy*.

03/ ABOUT CUAMM

Name:	Doctors with Africa CUAMM
Legal form:	Non-governmental organization legally integrated within the Opera San Francesco Saverio Foundation, a civilly recognized religious entity. Enrolled in the National Registry of non-profit organizations, pursuant to Legislative Decree 460/1997 by order of the Veneto Regional Branch of the Italian Revenue Agency, protocol n. 2015/13016 of March 12, 2015. Civil society organization registered in the list per Article 26 of Law n. 125/2014 by Decree n. 2016/337/000119/4 of March 24, 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.
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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

74
years

9
countries

21
main hospitals

940
health facilities supported

1
university

4
schools

3,880
human resources on the ground, including

317
Europeans, of whom

305
are Italian

SOUTH SUDAN

3
main hospitals (Lui, Rumbek and Yirol)

2
schools for midwives (Lui and Rumbek)

293
human resources

2,361
human resources under special management

IVORY COAST

15
healthcare facilities

21
human resources

ETHIOPIA

3
main hospitals (Wolisso, Gambella and Gambella RH)

1
school for nurses and midwives (Wolisso)

369
human resources

SIERRA LEONE

2
main hospitals (PCMH Freetown and Pujehun CMI)

93
human resources

UGANDA

5
main hospitals (Aber, Matany, Kabong, Amudat, Moroto)

1
school for nurses and midwives (Matany)

124
human resources

MOZAMBIQUE

2
main hospitals (Beira and Montepuez)

1
University (Beira)

275
human resources

TANZANIA

2
main hospitals (Tosamaganga and Dodoma)

91
human resources

IN ONE YEAR

2,365,773

Patients assisted

1,124,577

Children under 5 visited

544,615

Prenatal visits

273,361

Deliveries attended

15,096

Patients treated with
antiretroviral therapy

12,872

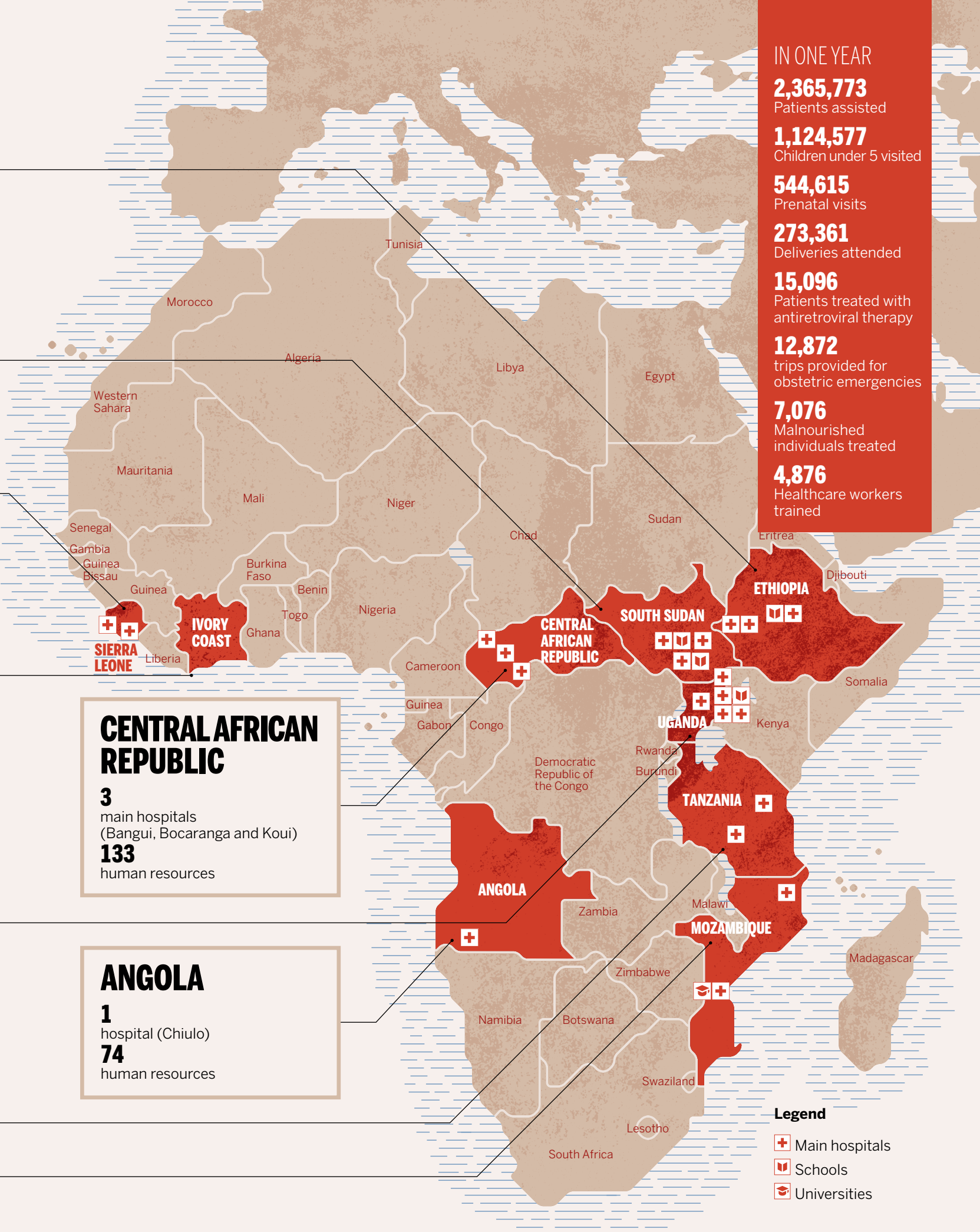
trips provided for
obstetric emergencies

7,076

Malnourished
individuals treated

4,876

Healthcare workers
trained



CENTRAL AFRICAN REPUBLIC

3

main hospitals
(Bangui, Bocaranga and Kouï)

133

human resources

ANGOLA

1

hospital (Chiulo)

74

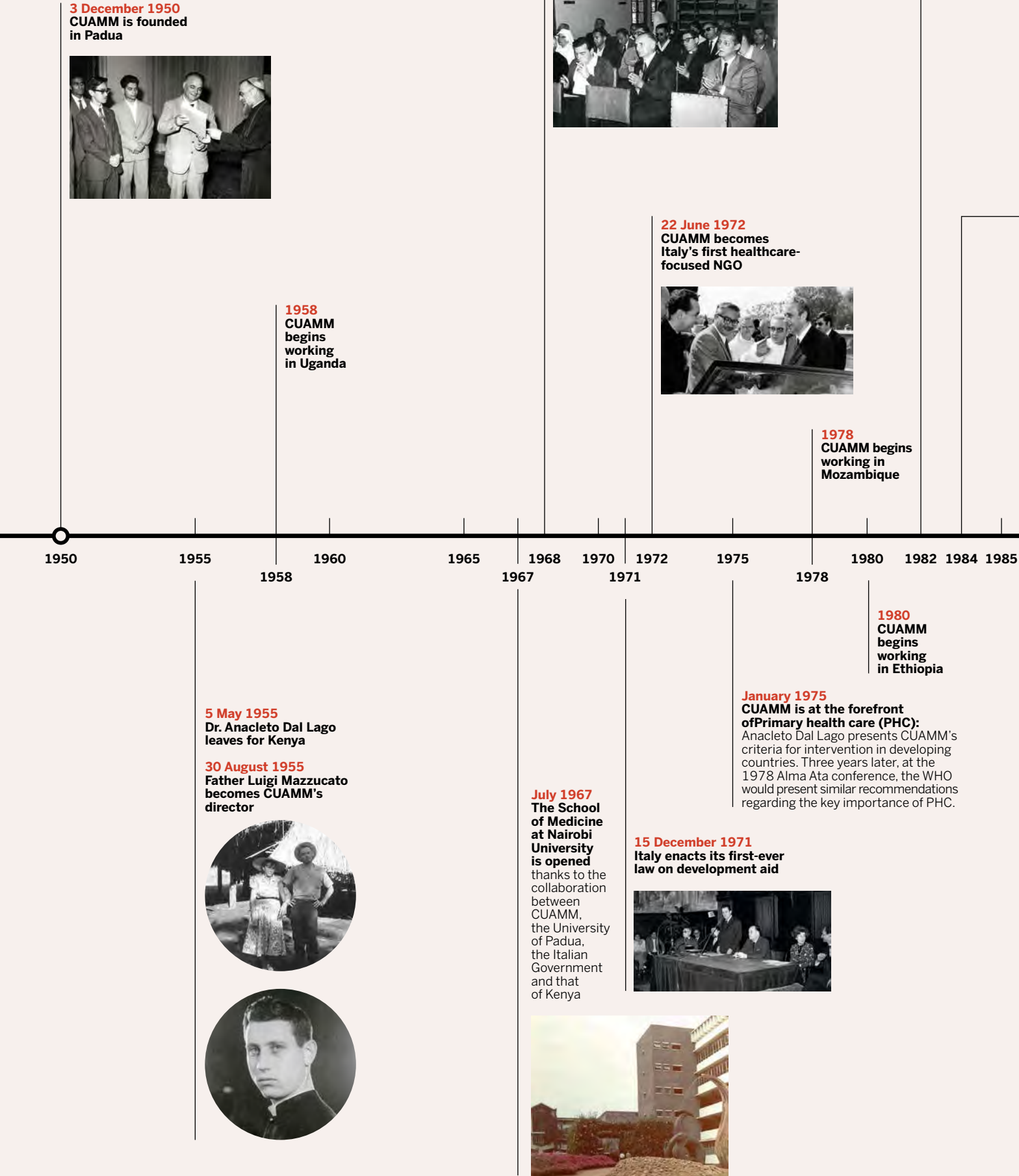
human resources

Legend

- Main hospitals
- Schools
- Universities

SEVENTY-FOUR YEARS OF HISTORY

<https://doctorswithafrica.org/en/70-years-long-journey>



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



October 1984
The Nursing and Midwifery School is opened at Matany Hospital



25 July 1998
Professor Francesco Canova, CUAMM'S founding father, passes away



25 August 2007
In Beira, the first group of 13 med school students graduates from Catholic University of Mozambique



15 December 2013
War in South Sudan

8 August 2014
Ebola breaks out in Western Africa
June 2014
Midwifery school established in Lui, South Sudan



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

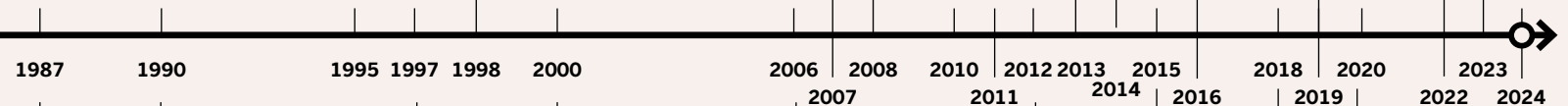


November 2016
The "Mothers and Children First: the First 1,000 Days" program is launched with a message from Italy's President
7 May 2016
Private audience with Pope Francis

March – April 2019
Tropical cyclones Idai and Kenneth hit Mozambique

19 November 2022
Annual meeting at the Vatican with Pope Francis

2023
work begins in Ivory Coast



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
The "Mothers and Children First" program begins

23 March 2011
Publication of Paolo Rumiz's book *Il Bene Ostinato*

March 2020
The WHO declares the worldwide COVID-19 public health emergency
3 December 2020
Doctors with Africa CUAMM turns 70

4 August 2018
CUAMM begins working in the Central African Republic

26 November 2015
Father Luigi Mazzucato passes away



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 exclusively with African communities, involving local people at various levels. We use the word “with” to underscore our conception of sharing, interchange, intense engagement, and mutual effort, highlighting not only local problems and needs, but also the values of the continent in order to foster long-term development;
- **experience**: Doctors with Africa CUAMM has more than 70 years of experience working in developing countries;
- **specific and 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 dialog, 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. To that end, we train 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.

ACTIVITIES

- Doctors with Africa CUAMM is active in the field of **international development and cooperation** in accordance with Law n. 125 of 11 August 2014 and later amendments (Art. 5.1.n of 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. 5.1.i of Leg. Decree 117/2017).
- Organization and management of **activities of social, cultural and religious interest** (Art. 5.1.k of Leg. Decree 117/2017).
- **University-level and post-graduate training** (art. 5.1.g of Leg. Decree 117/2017).
- **Scientific research** of particular social interest (art. 5.1.h of Leg. Decree 117/2017).

NETWORKS WITH OTHER VOLUNTEER ORGANIZATIONS

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

OTHER ASSOCIATIONS

Doctors with Africa CUAMM is:

- **a member of the Global Outbreak Alert and Response Network (GOARN), which is part of the World Health Organization**, headquartered in Geneva, c/o WHO.
- a partner of the **German Health Alliance**, headquartered in Berlin.
- **a partner in the Conference of Italian University Rectors (CRUI) with the protocol signed January 10, 2022**, headquartered at 48 Piazza Rondanini, Rome.
- **a member of the Italian Institute of Donation (IID)**, headquartered at 2 Via Pantano, Milan.
- registered with the **Register of Associations of the Municipality of Padua**, n. 427, under section n. 4: peace, human rights and international cooperation.
- **a member of the American Chamber of Commerce in Italy**, headquartered at 1 Via Cantù, Milan.



**ANNUAL MEETING
2024**

HEALTH FIRST

For a brighter future for all

ANNUAL MEETING

HEALTH FIRST, FOR A BRIGHTER FUTURE FOR ALL

The 2024 Annual Meeting was held in Turin, drawing more than **1,800 participants** to the auditorium of the Lingotto Convention Center. Organized every fall in a different city, this event is a **special opportunity for Doctors with Africa CUAMM to come together, promote its mission and engage institutions and public opinion**. Presided over by journalist **Paola Saluzzi**, the event was attended by numerous supporters, including **Neri Marcorè**, **Fabio Geda** and **Antonio Biasucci**, figures in the culture and art worlds who have been friends of the organization for some time now. Professors from the Accademia dei Lincei **Alberto Mantovani** and **Guido Forni** also took part. **Alberto Anfossi**, Secretary of the Fondazione Compagnia di San Paolo, and **Patrizia Sandretto Re Rebaudengo**, Chair of the same foundation, said a few words as representatives of non-profit organizations that support CUAMM projects in Africa each year. On its behalf, the University of Turin sent professor, Director of the Department of

Pediatrics and head of the JPO program for residents, **Franca Fagioli**. Governmental representation was robust, with the Italian Minister of Foreign Affairs and Deputy Prime Minister **Antonio Tajani**, the Ethiopian Minister of Health **Daguma Dereje**, President of the Region of Tigray **Getachew Reda**, President of the Region of Piedmont **Alberto Cirio**, Deputy Mayor of Turin **Michela Favaro**, Italian Ambassador to Ethiopia **Agostino Palese**, Italian Episcopal Conference representative **Don Gabriele Pipinato**, Advisor to the Ivory Coast Ministry of Health **Serge Boni**, and Chairman of the Foundation for Worldwide Cooperation **Romano Prodi** in attendance.

The event was broadcast on TV2000 and the closing ceremony featured an appeal from **Father Dante Carraro** to support CUAMM's latest challenge: **the construction of a training facility in Bossangoa**, Central African Republic in response to a request from the local ministry of health.

ANNUAL MEETING
2024

70
volunteers involved

10
buses
organized

1,800
attendees



"The last three years of war have destroyed infrastructure and so much more has been wiped out. We don't need to merely repair the hospitals: we need to rebuild the entire system. The arms have been laid down, but there are thousands of people who live in extremely precarious conditions, without services of any kind. That is where CUAMM comes in. Now more than ever, peace is paramount."

Agostino Palese,
Italian Ambassador to Ethiopia (left)
Getachew Reda,
President of the Tigray Region, Ethiopia (center)
Daguma Dereje,
State Minister, Health Services and Program Wing,
Ethiopia (right)



"Africa must be seen through an African lens. We need to enhance a rich continent, not neo-colonize it, by providing solutions. As Italians, due to our willingness to help and our flexibility, we're the best poised to ensure that the entire West does more in a relationship based on equity and friendship. I would like to thank you all, because your organization is an operational reference point within Italian development aid."

Antonio Tajani,
Deputy Prime Minister and Minister of Foreign
Affairs and International Cooperation



THE ANTONIO FELTRINELLI PRIZE FROM THE ACCADEMIA DEI LINCEI

On June 20th, **Doctors with Africa CUAMM** received the **Antonio Feltrinelli 2024 prize** from the **Accademia dei Lincei**. Attending the ceremony held at in Palazzo Corsini in Rome were the President of Italy **Sergio Mattarella**, Italian Minister of Culture **Gennario Sanguiliano**, and the **President of the Chamber of Deputies of Italy**, Lorenzo Fontana.

This award was given to CUAMM for its **exceptional work of high moral and humanitarian value**. Often called the **Italian Nobel Prize**, this award was established in 1942 through the bequest of the great entrepreneur Antonio Feltrinelli, creating "an inalienable and perpetual fund destined to reward work, research and intelligence – in short, the men who are most distinguished in "high" endeavors, in the arts and sciences, because they are the true benefactors of their country and humanity."

The President of CUAMM accepted the prize in the name of the **Bishop of Padua** and, representing all the doctors and aid workers in Africa, CUAMM Director **Father Dante Carraro** advocated for the poorest people in Africa and those who tend to their health.

"I am deeply grateful and honored by the prize which we have received today from such an authoritative institution, the Accademia dei Lincei," Don Dante said during the ceremony. "I would like to dedicate this prize **to those who work hard every day, and who have worked hard over the years, for the health of the most fragile**, especially mothers and children. To those who refuse to surrender when faced with 280,000 women around the world who die every year due to childbirth, the majority of which are found in sub-Saharan Africa. We cannot and we will not surrender."



"It's a virtuous triangle which gives us hope: assistance, last mile, children and mothers. It's a 'with' that means education and training for young people, but also research. We give, yes, but we return with hope."

Alberto Mantovani,
Scientific Director of Humanitas



1. Neri Marcorè during his speech
2. Paola Saluzzi moderating the event
3. The audience of the Annual Meeting
4. Guido Forni, immunologist at the Accademia dei Lincei
5. Director Don Dante Carraro, in the audience
6. Giuseppe Ferro, CUAMM Groups representative, Nicola Penzo, Head of Fundraising for Doctors with Africa CUAMM and Simona Sala, Director of Rai Radio2
7. Fabio Geda, author of *La Casa dell'Attesa*
8. Romano Prodi, Chairman of the Foundation for Worldwide Cooperation, and Andrea Malaguti, Director of *La Stampa*
9. The fair-trade gift item table
10. Volunteers at work in the foyer



04/ STRUCTURE, GOVERNANCE AND ADMINISTRATION



STRUCTURE, GOVERNANCE AND ADMINISTRATION

SIZE AND MAKE-UP OF THE MEMBERSHIP BASE

While Doctors with Africa CUAMM, as a non-profit activity which is part of the Opera San Francesco Saverio Foundation, does not have a formally constituted membership base, it does have an Italy-wide network of **over 5,400 volunteers** who work in support of its goals. Some are members of CUAMM groups, while others are not members of any specific association, linked instead to the organization based on shared values and their belief in CUAMM projects 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 *de jure* Chairman. The Board and its Chairperson are responsible for governing CUAMM through the functions of direction, control and promotion. For 2024-2027, the **Board of Directors** is composed as follows (appointment decree by the Bishop of Padua n. 1518/2024, dated July 1, 2024):

- **Chairperson:** Msgr. Claudio Cipolla
- **Members:** Pietro Badaloni, Massimo Carraro, Liviana Da Dalt, Diamante Ortensia D'Alessio, Carmelo Fanelli, Alberto Rigolli, Marina Salamon and Giuseppe Zaccaria.

Oversight of the organization is assigned to the **Board of Auditors** that reports to the Foundation. For 2024-2027, the Board of Auditors is composed as follows (appointment decree by the Bishop of Padua n. 1519/2024, dated 1 July 2024):

- **Chairperson:** Piersandro Peraro
- **Members:** Gina Dal Pozzolo, Marco Razzino.

The Board of Directors approved amendments to Doctors with Africa CUAMM's model of organization, management and control by a resolution dated 14 June 2024. On the same occasion, pursuant to Art. 6 paragraph 1.b) of Legislative Decree n. 231/2001, the Board appointed a **Supervisory Body** from 2024 to 2026, composed as follows:

- **Chairperson:** Atty. Regina Proietti
- **Members:** Matteo Capuzzo, Sergio Dalpiaz.

By resolution of June 11, 2021, in accordance with Art. 4 paragraph 3 of Legislative Decree n. 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. n. 11.401, Racc. n. 6186 deposited at the Padua branch of the National Revenue Agency on July 22, 2021 under n. 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 from 2024 to 2026 by a resolution dated September 20, 2024, through power of attorney of the Bishop of Padua, the Foundation's *de jure* President (Rep. n. 1801 - Racc. n. 1345 dated March 14, 2024, issued by Notary Nicolas Marcolina 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. n. 1799 - racc. 1344 dated March 14, 2024, issued by Notary Nicolas Marcolina of Padua). The functions of **Deputy Director** and the **management of finance and control** are also assigned to the Administrative Manager.

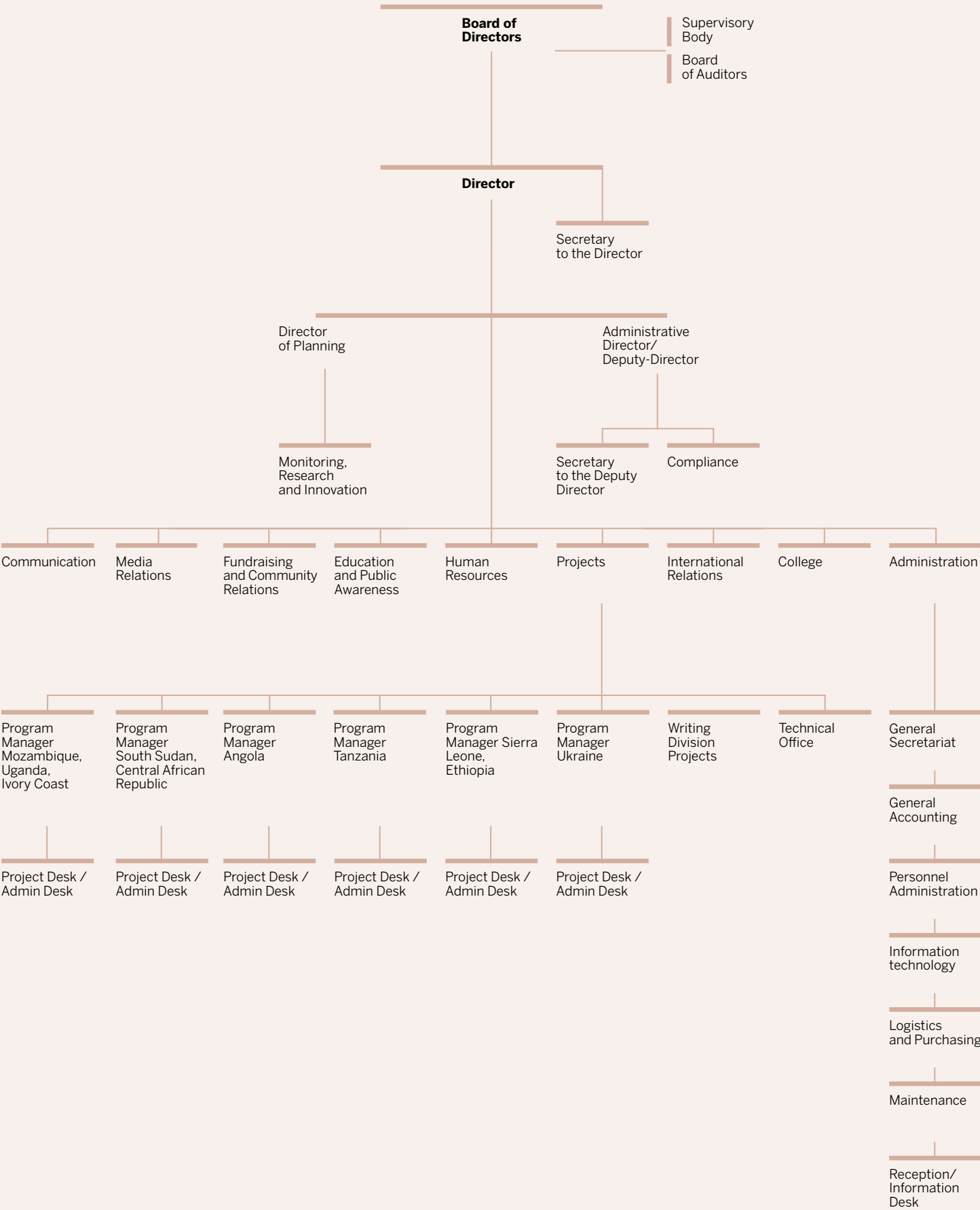
To help manage the organization's activities, CUAMM's Director relies on several managers whom he/she appoints to each of its divisions, as follows:

- **Planning, monitoring, research and innovation** Giovanni Putoto
- **Project management** Fabio Manenti
- **Human resources** Bettina Simoncini
- **Administration** Andrea Iannetti
- **International relations** Andrea Atzori
- **Communication** Anna Talamì
- **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.

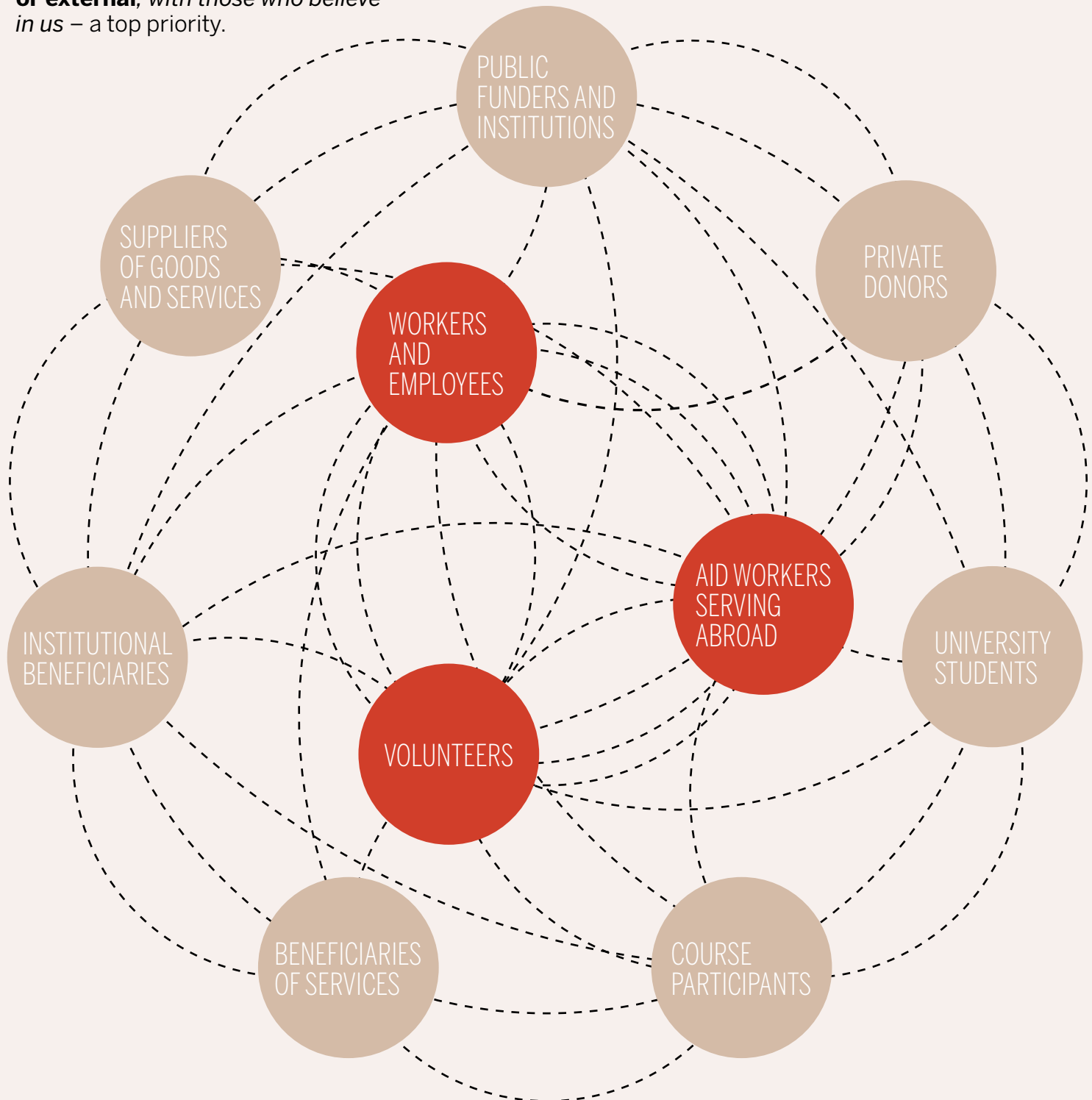
ORGANIZATIONAL CHART



STAKEHOLDER MAP



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, with those who believe in us – a top priority.**



	Stakeholders	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 – corporate well-being and “company culture” – professional autonomy in one’s role – sense of belonging – salary and benefits – equal opportunities – training and acquisition of new skills/opportunities for professional growth – health and security for the individual and his or her coworkers – work-life balance 	<ul style="list-style-type: none"> – dissemination of the organization’s Code of Ethics and its policies – meetings with division heads – periodic meetings with the Director (general staff meetings) – periodic publications: «Africa and Health and Development – CUAMM weekly newsletter – CUAMM monthly newsletter – occasional/thematic newsletter from the Director – circulation of the Annual Report providing information on activities, including financial statements – participation in events organized for external stakeholders, especially the Annual Meeting
	Aid workers serving abroad	<ul style="list-style-type: none"> – salary proportional to the services rendered – job motivation/recognition, achievement of mission objectives – professional autonomy in one’s role – sense of belonging – sense of moral/social gratification – equal opportunities – training and acquisition of new skills/opportunities for professional growth – health and security for the individual and his or her coworkers 	<ul style="list-style-type: none"> – dissemination of the organization’s Code of Ethics and its policies – meetings in the field (in Africa) with the Director and division heads – periodic publications: «Africa and Health and Development – CUAMM weekly newsletter – CUAMM monthly newsletter – occasional/thematic newsletter from the Director – circulation of the Annual Report providing information on activities, including financial statements – participation in events organized for external stakeholders
	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 the organization’s Code of Ethics and its policies – meetings with the Director and specific division heads – periodic publications: «Africa and Health and Development – CUAMM weekly newsletter – CUAMM monthly newsletter – occasional/thematic newsletter from the Director – circulation of the Annual Report providing information on activities, including 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 in relation to the organization’s data – transparency in regard to supported initiatives 	<ul style="list-style-type: none"> – dissemination of the organization’s Code of Ethics and its policies – meetings with the Director and/or the organization’s division heads – periodic publications: «Africa and Health and Development – audio/video productions – media coverage – circulation of the Annual Report providing information on activities, including 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 in relation to the organization's data – transparency in regard to supported initiatives 	<ul style="list-style-type: none"> – dissemination of the organization's Code of Ethics and its policies – meetings with the Director and specific division heads – letters of thanks for donations received – periodic publications: èAfrica and Health and Development – CUAMM weekly newsletter – CUAMM monthly newsletter – occasional/thematic newsletter from the Director – circulation of the Annual Report providing information on activities, including 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 the organization's Code of Ethics and its policies – meetings with the Deputy Director and Head of Administration – circulation of Annual Report providing information on activities, including 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 – transparency of information – verification 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 the Annual Report providing information on activities, including financial statements – dissemination of the organization's Code of Ethics and its policies
	Beneficiaries of services	<ul style="list-style-type: none"> – universal, nondiscriminatory service delivery – provision of high-quality, professional services – transparency of information – continuity in the provision of services 	<ul style="list-style-type: none"> – provision of people-oriented services – information and awareness-raising activities on health and 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 the organization's Code of Ethics and its policies – meetings with the Director and specific division heads – periodic publications: èAfrica and Health and Development – CUAMM weekly newsletter – CUAMM monthly newsletter – occasional/thematic newsletter from the Director – circulation of the Annual Report providing information on activities, including 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 and social gratification 	<ul style="list-style-type: none"> – dissemination of the organization's Code of Ethics and its policies – meetings with the Director and specific division heads – periodic publications: èAfrica and Health and Development – CUAMM weekly newsletter – CUAMM monthly newsletter – occasional/thematic newsletter from the Director – circulation of the Annual Report providing information on activities, including 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 precautions

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

- We purchase only EU Ecolabel-certified *Pioneer – get inspired* paper for our offices in Padua. It has a reduced environmental impact. Moreover, it's *Totally Chlorine Free (TCF)* certified and bears the *Forest Stewardship Council (FSC)* label, having been produced via a controlled supply chain starting from responsibly managed forests.
- All of our employees and collaborators 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 during the year: June 14, 2024 (session in which the Annual Report and the Final Balance 2023 were approved), September 20, 2024 and December 12, 2024.

Certifications

On December 23, 2024, CISE (the Center for Innovation and Economic Development – a Special Body of the Chamber of Commerce of Romagna, Forlì headquarters) certified the Organization pursuant to UNI/PdR125:2022 (Certification of Gender Equality) with validity until December 22, 2027).

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 in 2023, on

- February 7, 2024
- May 3, 2024
- August 2, 2024
- November 4, 2024

It monitored:

- a) the keeping of accounting and tax records (transactions book, VAT registers and depreciable assets book) and company books (the Board of Directors' assembly notes and resolutions and the Board of Auditors' book of resolutions);
- b) the fulfillment of Doctors with Africa CUAMM's obligations vis-à-vis the payment of withholding taxes and contributions for employees and contractors, for its staff both in Italy and abroad, as well as its consultants;
- c) regular, periodic VAT (sales tax) payments;
- d) online submission of mandatory tax documents;
- e) checking cash balances and verifying bank and Poste Italiane 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 on the financial statements for the year ending December 31, 2023, attached to the Minutes for the approval of the financial statements themselves dated June 14, 2024.

The same verification was carried out by the Board of Auditors on the financial statements for the TSO branch for the year ending December 31, 2023, ensuring compliance with applicable laws with its Minutes dated June 14, 2024.

On that same date, the Board of Auditors verified compliance with the social scopes described in articles 5, 6, 7 and 8 of Italian Third Sector Code and compliance with the Guidelines when drafting the 2023 Annual Report with its Minutes dated June 14, 2024.

ACTIVITIES COMPLETED BY THE SUPERVISORY BODY

The **Supervisory Body** met two times during the year:

- January 24-25, 2024
- July 31, 2024



05/ PERSONNEL



HUMAN RESOURCES IN AFRICA

Over the years, the global cooperation context and the socio-political contexts of individual African countries have created a backdrop of constantly evolving and mounting complexity. The COVID-19 pandemic, the war in Ukraine and, more recently, the conflict in the Middle East have further exacerbated the situation. These international events have significantly intensified poverty, in turn making access to healthcare even more difficult.

Faced with this increasingly worrying state of affairs, **it is absolutely essential for us to be able to count on highly motivated human resources, people who not only are willing to work in the most remote areas of Africa, but also well prepared and trained.** Finely-honed skills in the areas of analysis, research, knowledge of local settings, planning and organization are more necessary than ever to support the national staff which CUAMM works closely with in its everyday activities, with ongoing education and mutual growth as goals.

Doctors with Africa CUAMM recruits and selects human resources from an “internal” pool composed of people who have already worked with us, and which we see as precious human capital to invest in and develop, and “external,” turning to professionals who are:

- **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., those from the country in which the intervention is to be implemented.

In 2024, Doctors with Africa CUAMM managed 3,880 human resources, 2,361 of whom were under “special management” in South Sudan (see spotlight). Of the total HR pool, 1,519 human resources were dedicated to projects, 1,087 of which were qualified professionals (not just in healthcare, but also administrators, logisticians and community experts, etc.) and 432 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 the local health system. In the first quarter of 2024, this role was made concrete in **11 counties and related governmental offices**, for a total of **103 peripheral health facilities and 4 hospitals**.

As of **July**, our activities were downsized to **8 counties, 66 peripheral health facilities and 3 hospitals**. In the first six months of the year, CUAMM continued to participate in the management and remuneration of local health staff assigned to the supported facilities, paying a supplemental salary to around **3,461 people**.

This support in the form of “special management” was meant to make up for the inability of the government to fully compensate health professionals in its own structures. Subsequently, the government decided to delegate that task to its main funder, and CUAMM continued to fulfill that role only where it was necessary to supplement the minimum team required by the Ministry with additional health workers, for a total of **137 local staff members**. Moreover, Doctors with Africa CUAMM guaranteed a **monthly incentive to a network of some 924 village health workers**.

PERSONNEL CHARACTERISTICS (AGE AND GENDER)

It is important to note that while **92% of CUAMM's doctors are international** (of which, 93% European and 7% African), **a similar percentage (86%) of our non-medical health personnel are African nationals**. This figure underscores the desire of Doctors with Africa CUAMM to invest in local national staff whenever available, as is the case with non-medical health personnel. With those staff members, CUAMM collaborates in terms of capacity building in order **to foster the autonomy and development of national health systems**. We mainly send international staff overseas 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 doctors. In terms of **gender**, our **European international personnel** included 125 men and 192 women, for a total of 317 resources. In terms of age, 54% were under 35, 27% were between 35 and 55, while 19% were over 55. The data on the **gender of our African international professionals** indicate that, out of the 62 human resources added to projects, 44 were men and 18 were women. Age distribution was as follows: 4% were under 35, 89% were between 35-55, and just 7% were over 55. In terms of the **African national personnel**, out of 708 staff members, 72% were men. In terms of age, 52% were under 35, 44% were between 35 and 55, while 4% 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. The goal is to ensure that they are as best prepared as possible and ready to work on-site in Africa. The training course aims to encourage collaboration between the new recruits and those in the destination country, thereby ensuring efficiency and efficacy in reaching the project's goals.

Each aid worker is **provided with general information and materials on the specific setting and job** (project text, job description, reports, data, etc.). This allows for in-depth preliminary study before they begin their **specific training at the headquarters in Padua** (in person or online for African international staff). One further in-depth study takes place at **CUAMM's coordination offices in the capitals** of our African partner-countries.

Those training courses focus on the **core principles** of Doctors with Africa CUAMM's activities, **its strategies** and its **modus operandi** for strengthening African health systems. Moreover, essential components of health planning are provided, with special attention dedicated to project management and monitoring, underscoring the importance of their implementation within local health systems.

A large part of training is dedicated to the management of human resources, both international and national, considered the true capital of Doctors with Africa CUAMM's activities as they ensure a long-term presence in all project locations.

CUAMM organized about **70 pre-departure training days and two weeks of training specifically for young people from the Universal Civil Service (UCS)**.

Once the training sessions were completed, 209

European international professionals, 200 of them Italian, left to join the staff members already in the field.

YOUTH TRAINING PROGRAMS: JUNIOR PROJECT OFFICERS AND THE UNIVERSAL CIVIL SERVICE

The **Junior Project Officer (JPO)** initiative has been active for over 20 years. This project offers medical residents an opportunity to undertake theoretical and practical training in Africa, mentored by one of CUAMM's specialist doctors.

In two decades of this program, **457 residents** coming from universities from all over Italy have seized this opportunity. Demand for this experience continues to grow, as is demonstrated by the **72 departures which took place in 2024 alone**. Many of the young professionals involved worked on their graduate thesis while out in the field, significantly contributing to CUAMM's operational research.

Thanks to the **Universal Civil Service (UCS)** program, another 19 young people were placed in support of CUAMM staff in our African partner countries. To learn more about opportunities just for young people, please see the Education and Public Awareness chapter and visit www.doctorswithafrica.org. (also see page 102)

PERSONNEL SERVING IN AFRICA IN 2024

3,880

human resources



1,519

human resources involved
in CUAMM projects, including

1,087

qualified professionals, of whom:

708

African "nationals" (locals)

62

African "internationals"
(expats)

317

European "internationals"
(expats) including

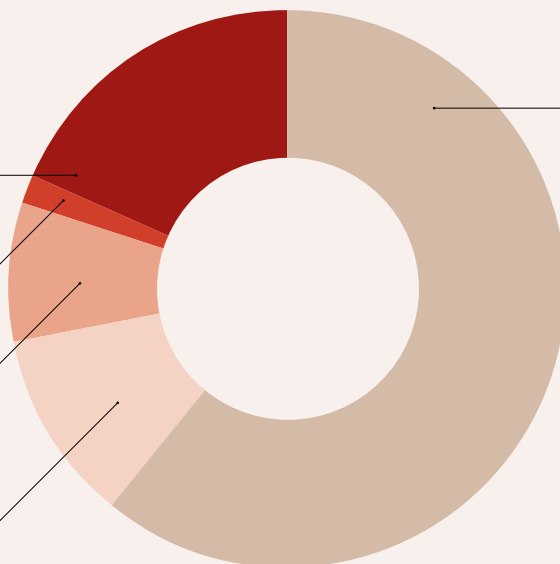
305 Italians

432

support staff

2,361

human resources
under special
management,
in South Sudan

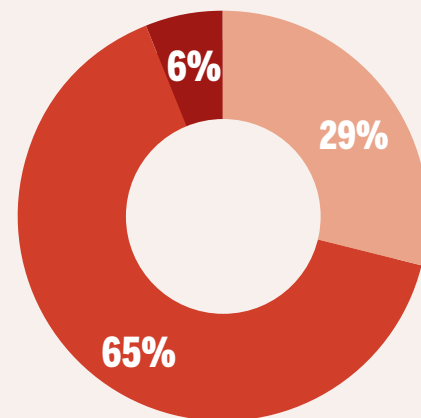
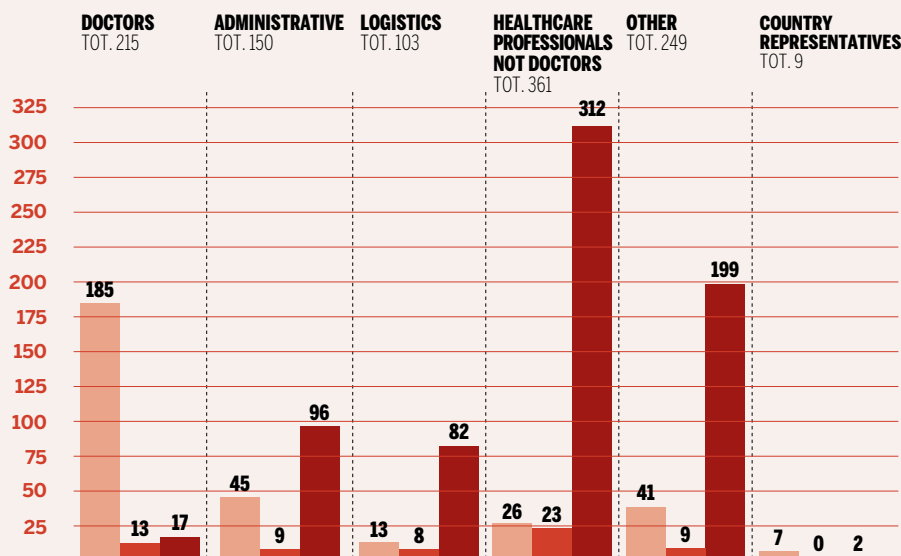


PROFESSIONAL CHARACTERISTICS/ BACKGROUND OF QUALIFIED PERSONNEL

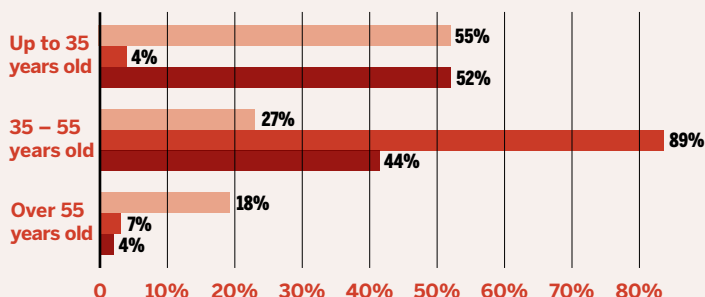
European
international
personnel
(expats)

African
international
personnel (expats)

National
personnel
(locals)



AGE



GENDER



39% 61%



72% 28%



72% 28%

IN ITALY

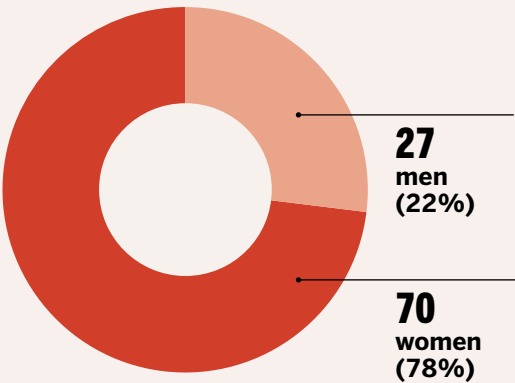
In 2024, Doctors with Africa CUAMM employed **97 people** in Italy, with **76 employees and 21 contractors**. 78% of our staff was made up of women (70) and 22% was made up of men (27). Of the male staff, 22 were employees and 5 were contractors; staff, 54 were employees and 16 were contractors. Those hired with a **full-time, open-ended contract** totaled **68 (21 men and 47 women)**. There were **8 employees with a fixed-term contract, 1 man and 7 women**. Out of the **21 contractors, 5 were men and 16 were women**. The full staff, including the 11 employees of the Student College, is composed of **108 people in all**. Excluding contractors, 14% were under 30, 16% were between 30 and 35, 17% were between 36 and 40, 9% were between 41 and 45, and 44% were 46 or older. In terms of years of service, 30% of the staff had been at the organization for under 5 years, 25% between 5 and 10 years, 13% between 11 and 15 years, and 32% over 15 years.

STUDENT COLLEGE

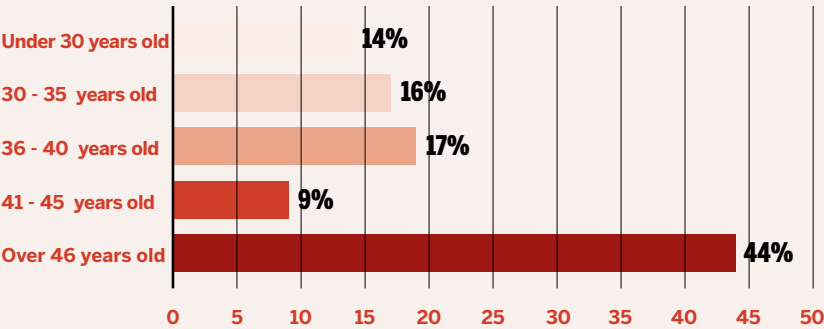
A total of 70 students (28 men and 42 women) attended the Doctors with Africa CUAMM College in 2023, 45 in the area of biology/health, 8 in engineering, 7 in humanities, 4 in physics, 3 in psychology, 2 in economics and 1 other.

PERSONNEL SERVING IN ITALY IN 2024

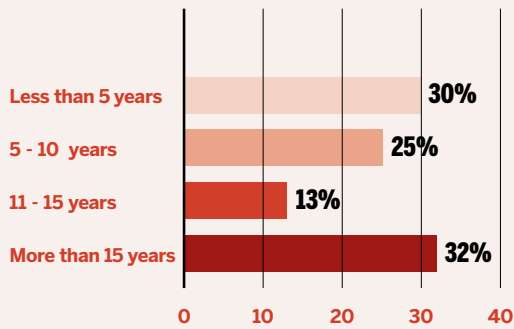
97
human
resources
including
76
employees
21
contractors



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 Employment Agreement. Some staff members work based on "continuous collaboration" (term) contracts.

In accordance with Art. 16 of Legislative Decree n. 117/2017, CUAMM complies with the ratio between the maximum and minimum gross annual compensation of its employees.

On December 15, 2022, CUAMM signed a Supplementary Company Agreement with the UIL FPL trade union of the Veneto Regional Third Sector Department.

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 April 9, 2018 with the FeLSA CISL, NidiL CGIL and UILTemp trade unions for the regulation of coordinated and continuous project collaborations. It was renewed on December 4, 2023.

VOLUNTEERS

CUAMM headquarters volunteers are reimbursed for expenses that they can document as having been incurred for on-the-job activities. In 2024, €450.90 worth of 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.

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.

SUPERVISORY BODY

We note that members of the Supervisory Body did not receive any compensation specifically related to said role.



06/ ACTIVITIES AND RESULTS





ANGOLA

IN 2024

In 2024, CUAMM saw growth in its interventions in southern Angola, launched in 2022. In particular, activities to **combat malnutrition** and those related to **hygiene and sanitization (Wash)** were strengthened in the towns of Ombadja and Cahama in Cunene Province. In addition, a project to **reduce the spread of TB and HIV** was launched in the same communities. CUAMM's efforts were strengthened in Namibe Province, also in southern Angola, where the same **public health activities** which proved successful in Cunene were implemented in the town of Virei. They included the use of *mobile brigades* (brigadas moveis, which encompass *screenings* for infant malnutrition, prenatal doctor's visits and the distribution of iron and folic acid to pregnant women), raising awareness about nutrition and hygiene, and cooking demonstrations. We continued to provide support to the Chiulo Hospital in Cunene Province for **maternal and child health**. The presence of CUAMM doctors in the field made it possible to ensure **on-the-job training for the hospital's medical staff**, both in the management of pediatric patients and that of obstetric emergencies. Moreover, constant

support for the pregnant women living at the **case de espera** was ensured so that they would have better access to the hospital in the days before their due date. 2024 marked CUAMM's return to Uige province in northern Angola, with the launch of a *clean cooking* project. This project involved **distributing improved cookstoves (ICS)** to **200,000 families** in 16 towns in Uige province. The consistent use of these cookstoves will help reduce exposure to smoke in the home, improving health conditions and saving time and money in the collection of fuel. In addition to encouraging cleaner cooking, the project includes a **health education** component with the goal of raising awareness about nutrition and basic hygiene.

2024 SNAPSHOT

120
human resources

25
health facilities supported

€2,984,387
invested in projects

COUNTRY PROFILE

Luanda
capital city

37,202,061
population

1,246,700 km²
land area

16.3 years
average age of the population

60.8/65.1 years
life expectancy at birth (m/f)

5.7
average n. of children per woman

150th
out of 191
countries
HDI ranking



222
out of every
100,000 live
births
maternal mortality



67
out of every
1,000
live births
under-5 child deaths



26
out of every
1,000
live births
newborn deaths



WHERE WE WORK



LUANDA PROVINCE

5 health centers

UIGE PROVINCE



Clean Cooking Project
Uige Province



CUNENE PROVINCE

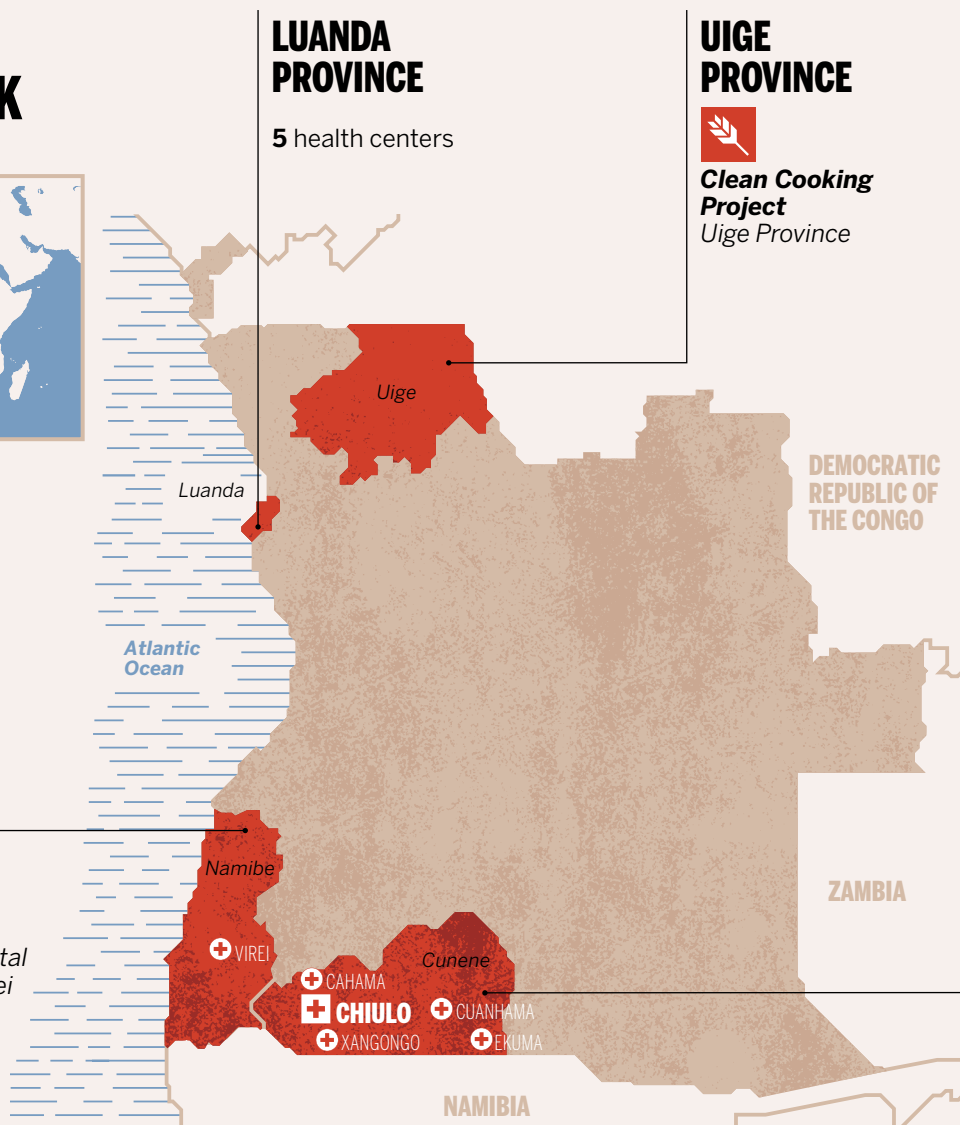
Municipality of Ombadja
2 hospitals *Hospital Municipal de Xangongo, o Hospital Missionário Católico de Chiulo*
17 health centers

Cahama Municipality
1 hospital *Hospital Municipal de Cahama*
6 health centers

Cuanhama Municipality
2 hospitals *Hospital Municipal de Cuanhama, Hospital do Ekuma*
3 health centers

NAMIBE PROVINCE

1 hospital *Hospital Municipal do Virei*
7 health centers



0 125 250 km

RESULTS

	MATERNAL AND CHILD HEALTH	41,242 prenatal doctor's visits	2,792 deliveries attended	14,961 under-5 children visited	37 trips provided for obstetric emergencies
	NUTRITION	309 children treated for severe acute malnutrition	2,682 children treated for acute malnutrition without complications		
	INFECTIOUS DISEASES	104 patients diagnosed with tuberculosis			
	CONTINUAL TRAINING	119 midwives trained	90 doctors	9 others	

IVORY COAST

IN 2024

CUAMM's ramped up its activities in Ivory Coast in 2024. The goal of our intervention is to improve and **promote access to high-quality health services** for the most vulnerable populations by **reinforcing the national network** of religious structures, **the U.R.S.S.C.I.** (Union des Religieux/euses qui travaillent dans la Santé et le Social en Côte d'Ivoire), which encompasses **71 centers managed by Catholic organizations** throughout the country. In 2024, CUAMM supported coordination between the U.R.S.S.C.I. network and local authorities, launching a formal partnership with the **Ministry of Health** and aligning with the strategies of the **National Health Plan**. These activities were carried out at **13 healthcare facilities**, selected according to specific needs. CUAMM's targeted activities included the improvement and renovation of infrastructure, the installation of renewable energy sources and the provision of ambulances to reinforce existing mechanisms. We also provided equipment for diagnostic and therapeutic services and created emergency reserves of essential drugs, materials and supplies. Special attention was given to **maternal, neonatal and children's health services**, malnutrition management and health emergency preparedness. CUAMM increased the skills of over **140 medical workers** through special courses

on the management of obstetrical emergencies, drug management, the prevention and treatment of malnutrition and the prevention and control of infections. One other important training area was healthcare management, with courses focused on enhancing skills for healthcare facility management, resource coordination, and disaster risk management. Supported by the distribution of educational materials and updated clinical guidelines, these courses helped grow the skill sets of the personnel involved, encouraging the adoption of clinical best practices in the network. CUAMM works in the **Abobo** suburb in the city of Abidjan in order to guarantee **access to high-quality neonatal treatments**, to reduce infant mortality through the development of staff skills, to improve equipment for neonatal stabilization and treatment with a special focus on **premature** babies, and to provide life-saving equipment for infants. Our efforts there involve three local healthcare facilities: the FSU-COM primary health center in **Anonkoua-Kouté**, the secondary hospital of **HGPC Saints Cœurs de Clouetcha** and the Regional Hospital of **Abobo**.

2024 SNAPSHOT

21
human resources

15
health facilities supported

€893,255
invested in projects

COUNTRY PROFILE

Yamoussoukro
capital city

29,981,758
population

322,462 km²
land area

21.2 years
average age of the population

60.9/65.4 years
life expectancy at birth (m/f)

3.4
average n. of children per woman

166th out of 193 countries
HDI ranking


480*
out of every 100,000 live births
maternal mortality

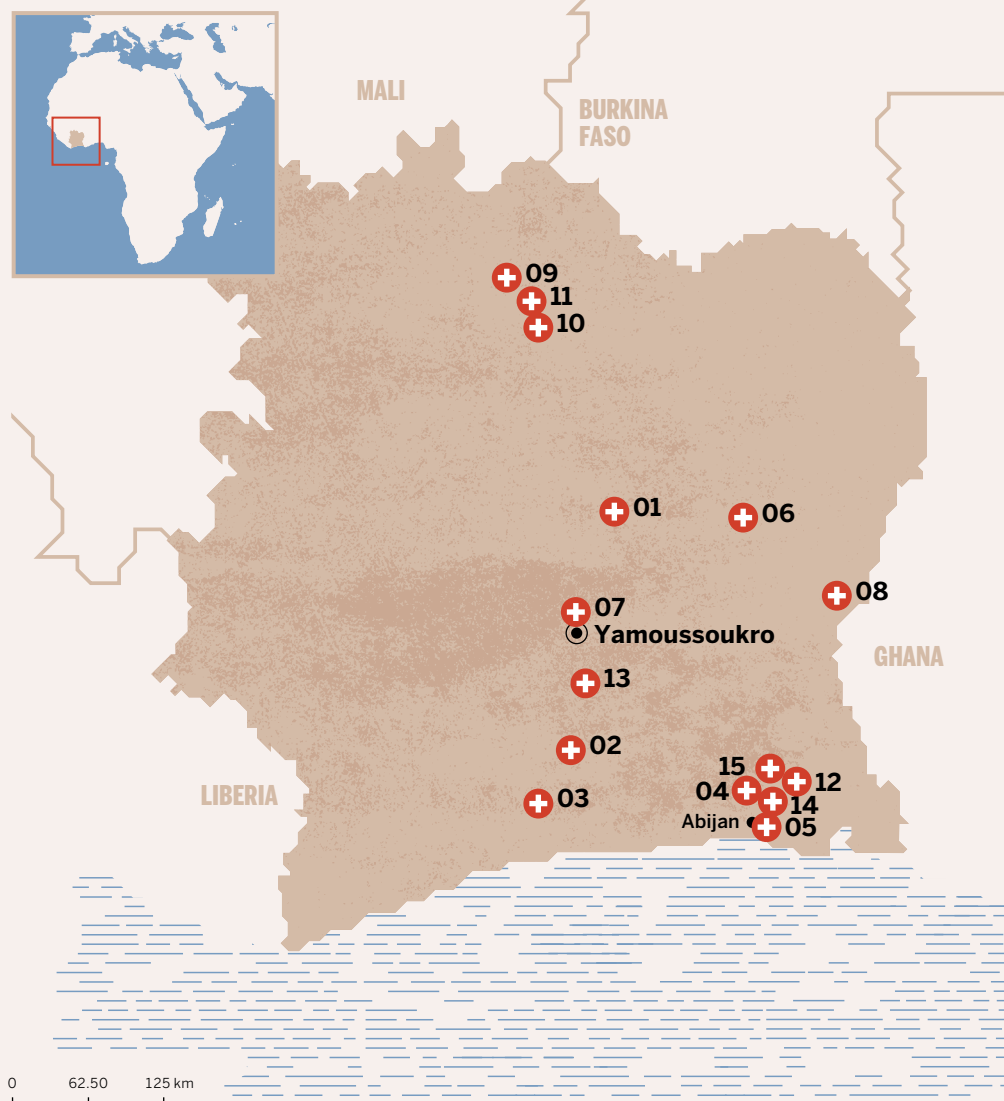

69.4
out of every 1,000 live births
under-5 child deaths


52.5*
out of every 1,000 live births
newborn deaths

**Data as of April 2025*





WHERE WE WORK



15 HEALTH CENTERS

01. Centre Médical Notre Dame des Apôtres de Bouaké
02. Centre de Sante Urbain Privé Confessionnel Notre Dame des Apotres
03. Centre Médical Privé Confessionnel Mère Franziska de GBAGBAM
04. Hôpital Général Don Orione d'Anyama
05. Fsu Communautaire De Anonkoua-Koute
06. Dispensaire Urbain Privée Confessionnel Mère Leonia
07. Hôpital Spécialisé Privé Confessionnel de Kongouanou
08. Centre de Kinésithérapie et de Réadaptation Fonctionnel Sainte Teresa Verzeri d'Agnibilekrou
09. CMS Brigida Postorino
10. Centre Jubilé
11. Centre des Handicapés Don Orione Entenne de Korhogo
12. Centre Médical Spécialisé Confessionnel des Soeurs Dorothee D'Alépé
13. Centre de Santé Urbain Privé Confessionnel Bienheureux Louis Tezza
14. l'Hôpital Général Privé Confessionnel Saints Coeurs de Clouetcha
15. Formation Sanitaire à Base Communautaire di Anonkoua-Kouté (FSU-COM)

RESULTS

 MATERNAL AND CHILD HEALTH	116,962 under-5 children examined	12,258 births	26,886 prenatal doctor's visits		
 CONTINUAL TRAINING	103 nurses and	77 midwives	20 doctors	2 pharmacists	252 others

ETHIOPIA

IN 2024

In 2024, the conflict in Ethiopia's Amhara region became chronic, reconstruction began post-conflict in Tigray, and the country saw a recession and inflation, culminating in the devaluation of the Ethiopian birr. Nevertheless, Doctors with Africa CUAMM has strengthened its activities in the country, **reinforcing the health system and providing a humanitarian assistance.** Support for **type 1 diabetes** services in 34 hospitals, conducted in partnership with the Ministry of Health and the Ethiopian Diabetes Association, was concluded, and a project to reinforce neonatology via an advanced training center at the **Black Lion Hospital in Addis Ababa**, in partnership with the **Ethiopian Pediatric Society** and the **Union of European Neonatal and Perinatal Societies** was launched. In **Tigray**, we began a program to restore life-saving health and nutrition services for displaced people and their host communities in **Shire Indasilasse** District, supporting **Suhul Hospital** in Shire and 5 healthcare facilities. At **St. Luke - Wolisso Hospital** in **South West Shoa Zone**, CUAMM guaranteed national and international specialized clinical personnel. The number of people treated increased, despite financial challenges and the opening of a new government hospital in the city. Projects

for the prevention, diagnosis and treatment of **tuberculosis** and **malnutrition** were completed. In the **South Omo Zone**, CUAMM's humanitarian work to support IDPs in the Dassenech district continued, following intense flooding. In the Hamer district, a multi-sector program for health, nutrition, education, Wash and protection for vulnerable groups was launched. In the **Gambella** region, CUAMM followed up on the activities for South Sudanese refugees in the Nguenyiel, Tierkidi and Jewi refugee camps, extending its support to *health centers*, improving infrastructure and guaranteeing trained clinical personnel. Two hospitals and seven *health centers* in the regional health system were bolstered, with special attention to disabilities and childbirth assistance (perinatal asphyxia and its consequences). In the **Somali Region**, we continued our health interventions in the Harawa district, providing mobile clinics for the local population and those who have been internally displaced due to the drought in the Liben Zone, and supporting **Filtu General Hospital**. Lastly, in the city of **Debre Berhan, North Shewa**, Amhara, CUAMM continued to assist displaced populations with mobile health and nutrition clinics.

2024 SNAPSHOT

369
human resources

69
health facilities supported

€6,951,286
invested in projects

COUNTRY PROFILE

Addis Ababa
capital city

116,462,712
population

1,104,300 km²
land area

20.2 years
average age of the population

64.9/69.4 years
life expectancy at birth (m/f)

3.9
average n. of children per woman

175th
out of 191
countries
HDI ranking



267
out of every
100,000 live
births
maternal mortality



47
out of every
1,000
live births
under-5 child deaths



26
out of every
1,000
live births
newborn deaths



WHERE WE WORK



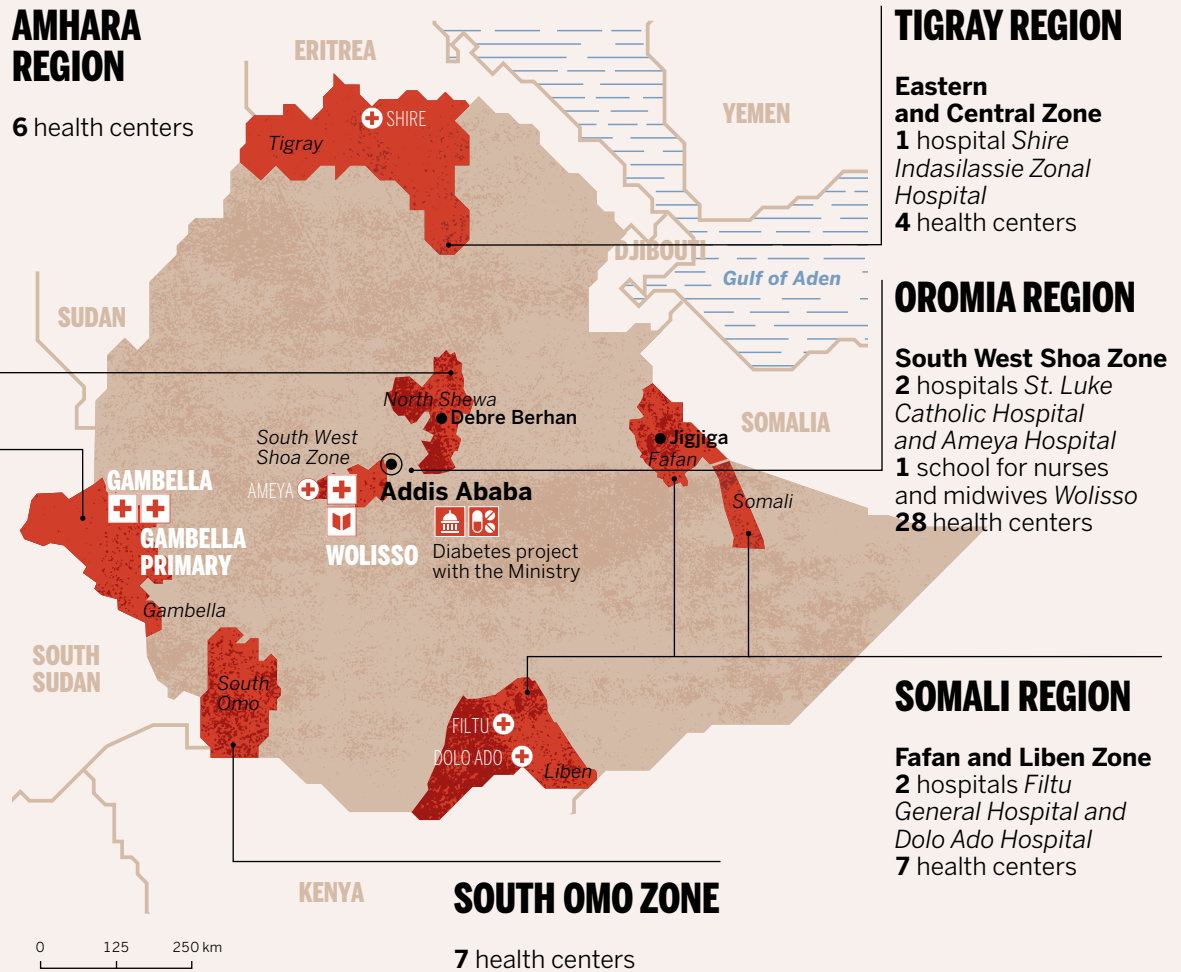
GAMBELLA REGION

2 hospitals Gambella General Hospital and Gambella Primary Hospital
5 healthcare stations in the refugee camps of Tierkidi, Nguenyiel and Jewi
11 health centers



AMHARA REGION

6 health centers



TIGRAY REGION

Eastern and Central Zone
1 hospital Shire Indasilassie Zonal Hospital
4 health centers

OROMIA REGION

South West Shoa Zone
2 hospitals St. Luke Catholic Hospital and Ameya Hospital
1 school for nurses and midwives Wolisso
28 health centers








SOMALI REGION

Fafan and Liben Zone
2 hospitals Filtu General Hospital and Dolo Ado Hospital
7 health centers

SOUTH OMO ZONE

7 health centers

RESULTS

 MATERNAL AND CHILD HEALTH	69,675 prenatal doctor's visits	33,924 deliveries attended	291,406 under-5 children visited	2,038 trips provided for obstetric emergencies	28,255 vaccinations administered
 NUTRITION	805 children treated for malnutrition				
 INFECTIOUS DISEASES	1,443 patients diagnosed with tuberculosis	341,149 patients treated for malaria	1,652 patients treated with antiretroviral therapy for HIV		
 CONTINUAL TRAINING	500 community agents	646 nurses and midwives	298 doctors	253 others	
 CHRONIC DISEASES	12,324 visits for diabetes	28,930 visits for hypertension	1,788 patients with diabetes	22 patients with cerebral ischemia	
 SURGICAL PROCEDURES	2,520 major surgical procedures, incl. 229 orthopedic ones		2,147 minor surgical procedures, incl. 193 orthopedic ones		
 HUMANITARIAN RESPONSE	109,127 emergency room visits	129 obstetric & neonatal emergencies transferred	804 deliveries attended	4,705 prenatal visits conducted	

MOZAMBIQUE

IN 2024

Doctors with Africa CUAMM continued its commitment in Mozambique in 2024, strengthening and expanding its activities in the provinces of Maputo, Sofala, Zambezia, Tete and Cabo Delgado. Our support for **Beira Central Hospital** was reinforced, with a special focus on neonatology and pediatrics. CUAMM's partnership with the **Catholic University of Beira** was intensified thanks to study grants, the sending of teachers and assistance in the creation of the maternity ward at the **São Lucas Health Center**. To improve access to services, the local **emergency network** was guaranteed 24 hours a day, with a free ambulance dispatched from a single number. Through this service, about 800 people per month were transported to Beira Central Hospital. 2024 also saw the continuation of the **sexual and reproductive health** program for adolescents in **Tete and Sofala** provinces. In Tete, we worked to fortify the Provincial Hospital and six healthcare facilities in the Angonia and Mutarara districts via staff training. In Sofala, the same program took shape via mobile clinics and primary prevention initiatives in schools and local communities. Our efforts to **manage non-transmissible chronic diseases** such

as type 1 and 2 diabetes, hypertension and cervical cancer was upheld and even expanded with programs for prevention, early diagnosis and therapeutic management. Floods damaged infrastructure and homes, furthering the spread of cholera. Doctors with Africa CUAMM took action to contain and manage the epidemic in the provinces of **Cabo Delgado, Zambezia, Sofala and Tete**, uniting monitoring, treatment and awareness raising. In Cabo Delgado Province, we continued our humanitarian work for **mental health and assistance for victims of gender-based violence**, providing psychological support and services to over 40,000 people. In terms of nutrition, we reinforced mobile clinics with **screenings**, the identification and reference of critical cases, and awareness raising and training for the staff and community.

2024 SNAPSHOT

275
human resources

75
health facilities supported

€6,049,557
invested in projects

COUNTRY PROFILE

Maputo
capital city

33,350,954
population

799,380 km²
land area

17.3 years
average age of the population

57.1/59.6 years
life expectancy at birth (m/f)

5.2
average n. of children per woman

183rd
out of 191
countries
HDI ranking



127
out of every
100,000 live
births
maternal mortality



77
out of every
1,000
live births
under-5 child deaths



49
out of every
1,000
live births
newborn deaths



WHERE WE WORK



TETE PROVINCE

3 hospitals
Tete Provincial Hospital, Mutarara Rural Hospital, and Ulonge Rural Hospital
20 health centers

CABO DELGADO PROVINCE

2 hospitals (Montepuez Rural Hospital, Pemba Provincial Hospital)
10 health centers



ZAMBEZIA PROVINCE

3 hospitals
(Quelimane Central Hospital, Quelimane General Hospital, Mocuba Rural Hospital)
10 health centers

SOFALA PROVINCE

3 hospitals
Beira Central Hospital, Nhamatanda Rural Hospital, Hospital Rural Buzi
1 university
Catholic University of Mozambique
17 health centers





MAPUTO PROVINCE

1 hospital
(Mavalane General)
6 health centers

Maternal-infant health and pediatrics
Sofala, Maputo and Zambezia Provinces
Diabetes, hypertension and cervical cancer
Maputo and Sofala Provinces.

0 125 250 km

RESULTS

 MATERNAL AND CHILD HEALTH	34,281 prenatal doctor's visits	132,740 deliveries attended	39,412 under-5 children examined	3,215 trips provided for emergencies midwives
 INFECTIOUS DISEASES	141,150 adolescents informed/educated about HIV/AIDS	41,086 adolescents tested for HIV	228 HIV-positive adolescents	
 CONTINUAL TRAINING	25 community agents	193 nurses and midwives	9 doctors	45 graduates in medicine
 CHRONIC DISEASES	124,042 screenings for diabetes and hypertension	52,335 cervical cancer screenings	4,530 cases of diabetes and hypertension	7,028 cases of cervical cancer

CENTRAL AFRICAN REPUBLIC

IN 2024

CUAMM's work in the Central African Republic continued in 2024. Support was provided to **Bangui Pediatric Hospital**, contributing to operational costs, drugs, staff incentives, maintenance and hygiene. The objective was to improve clinical assistance, ensuring the presence of expert staff for training, and managerial capacities, and to reinforce human resources, materials and data collection. The hospital acts as a training center for the staff of other facilities, especially in neonatology. Moreover, CUAMM supported the **training of peripheral medical personnel** for the development of public-private non-profit services. To this end, we offered assistance to 11 healthcare centers managed by **religious congregations** in the form of a five-day training course on service management (including data collection and the use of the national information system) and the importance of providing health services that comply with qualitative standards on the prevention and control of infections. In addition, CUAMM carried out supervision visits to four of these structures to identify and resolve their main organizational issues. In one case, CUAMM directly intervened to improve the infrastructure of the center. Outside of the capital, our work at **Bossangoa Hospital** was focused on support for maternity and neonatology vis-a-vis the provision of staff, covering costs, renovating the unit and aiming to reduce

infant-maternal mortality through awareness raising in the local community, a referral system and free treatments. The result was a sharp increase in attended deliveries. CUAMM also supported the construction of the new local paramedical school to ensure the availability of qualified personnel over the long term. In the districts of Bossangoa, Bangassou and Ouango Gambo, CUAMM manages the **Performance-Based Financing** system (supported by the EU and the World Bank), supervising 59 healthcare facilities and providing financing according to the quantity and quality of services provided. The scope is to provide free care for the most vulnerable. **In the Bocaranga-Koui district**, our work focused on the prevention of acute malnutrition and basic and emergency healthcare (free and high quality) for marginalized people, supporting Kouï Hospital and 4 peripheral centers with staff, materials, funds, transportation management and awareness-raising in the community (including protection topics via local NGOs). Moreover, Doctors with Africa CUAMM collaborates with the *London School of Hygiene and Tropical Medicine* on **operational research on the quality of neonatal care** in 21 healthcare structures in three different regions in the country.

2024 SNAPSHOT

133
human resources

63
health facilities supported

€5,508,600
invested in projects

COUNTRY PROFILE

Bangui
capital city

5,552,228
population

622,984 km²
land area

20 years
average age of the population

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

3.9
average number of children per woman

188th
out of 191 countries
HDI ranking



835
out of every 100,000 live births
maternal mortality



100
out of every 1,000 live births
under-5 child deaths



32
out of every 1,000 live births
newborn deaths



WHERE WE WORK



BOCARANGA KOUI

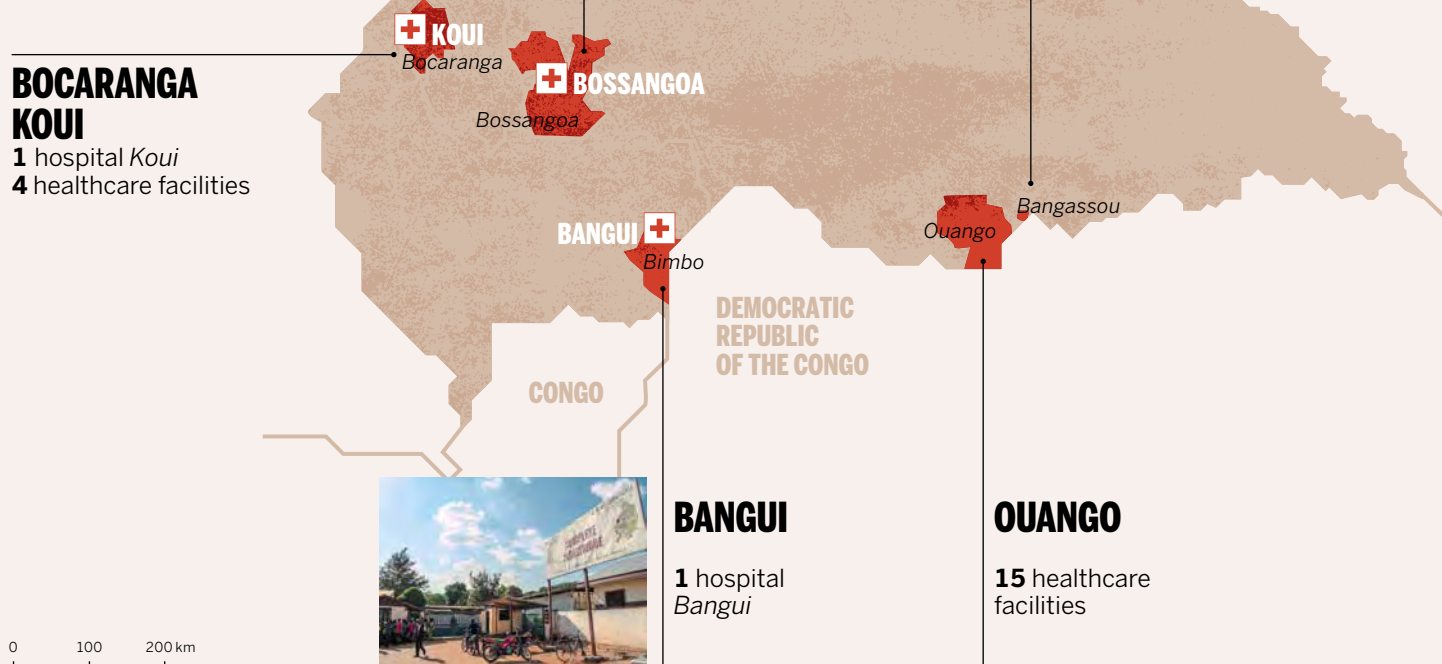
1 hospital Koui
4 healthcare facilities

BOSSANGOA

1 hospital Bossangoa
17 healthcare facilities

BANGASSOU

26 healthcare facilities







BANGUI

1 hospital Bangui

OUANGO

15 healthcare facilities

RESULTS

 MATERNAL AND CHILD HEALTH	40,445 under-5 children examined	13,681 pediatric hospitalizations	1,538 deliveries attended	1,392 prenatal doctor's visits	194 trips provided for obstetric emergencies
 NUTRITION	1,818 children treated for severe acute malnutrition				
 INFECTIOUS DISEASES	3,456 cases of malaria diagnosed				
 CONTINUAL TRAINING	65 nurses and	149 midwives	43 doctors	17 others	

SIERRA LEONE

IN 2024

Sierra Leone is one of the poorest countries in sub-Saharan Africa, where most people live below the poverty line. **Soaring prices, inflation and climate change** have further worsened the situation, making the national health system one of the most fragile in the world. The work done by CUAMM in Sierra Leone aims to guarantee **basic healthcare** to the most vulnerable groups of people, especially mothers, children and the elderly. We continued our support for **Princess Christian Maternity Hospital (PCMH) in Freetown**, the main reference point for maternity in the country, through assistance with childbirth, support for the work done in the *High Dependency Unit (HDU)* and a contribution to the **School of Obstetrics and Gynecology** at the University of Sierra Leone. We also continued to upgrade infrastructure to improve the **emergency system** at PCMH, which culminated with the opening of the **new emergency room** and the spaces for outpatients at the center, a national reference for maternity. We also continued our support for the High Density Units (HDUs) at the **hospitals of Makeni, Bo and Pujehun** through specialized courses for nursing staff and incentives for local personnel. These units are fundamental to ensuring intensive care for critical patients, thereby improving the overall level of treatment. At **Pujehun**, CUAMM supported the Maternal and Children's Hospital by

sending doctors and providing essential equipment and drugs, which often are not available through governmental channels. At the *Main Hospital*, we continued our activities to **prevent and treat chronic diseases** as part of the WHO's *PEN Plus initiative*. A project to combat **malnutrition** was also implemented in Pujehun. It included **training healthcare staff**, awareness-raising campaigns and the promotion of nutritional best practices. Moreover, the project encouraged the creation of groups of women to manage **microcredit activities** designed to promote the development of small agricultural businesses. The **emergency transportation** system was strengthened in the district, supporting the use of motorcycles and boats to transport patients from rural areas and helping pay for the operation of the national ambulance system that is managed by the Health Ministry. Lastly, 2024 saw the launch of a national program for the **prevention of obstetric fistula**, which includes the engagement of CUAMM staff in the training of medical personnel and in the structural renovation of nine level I and II healthcare facilities scattered throughout the country.

2024 SNAPSHOT

93
human resources

53
health facilities supported

€2,442,588
invested in projects

COUNTRY PROFILE

Freetown
capital city

8,908,040
population

71,740 km²
land area

19.2 years
average age of the population

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

3.7
average number of children per woman

184th
out of 191 countries
HDI ranking



443
out of every 100,000 live births
maternal mortality



105
out of every 1,000 live births
under-5 child deaths



31
out of every 1,000 live births
newborn deaths



WHERE WE WORK



WESTERN AREA

2 hospitals
Connaught Hospital
and Princess Christian
Maternity Hospital
5 health centers

WESTERN AREA RURAL

5 health centers

PORT LOKO

2 health centers

BOMBALI DISTRICT

2 hospitals
Holy Spirit and Makeni



BO DISTRICT

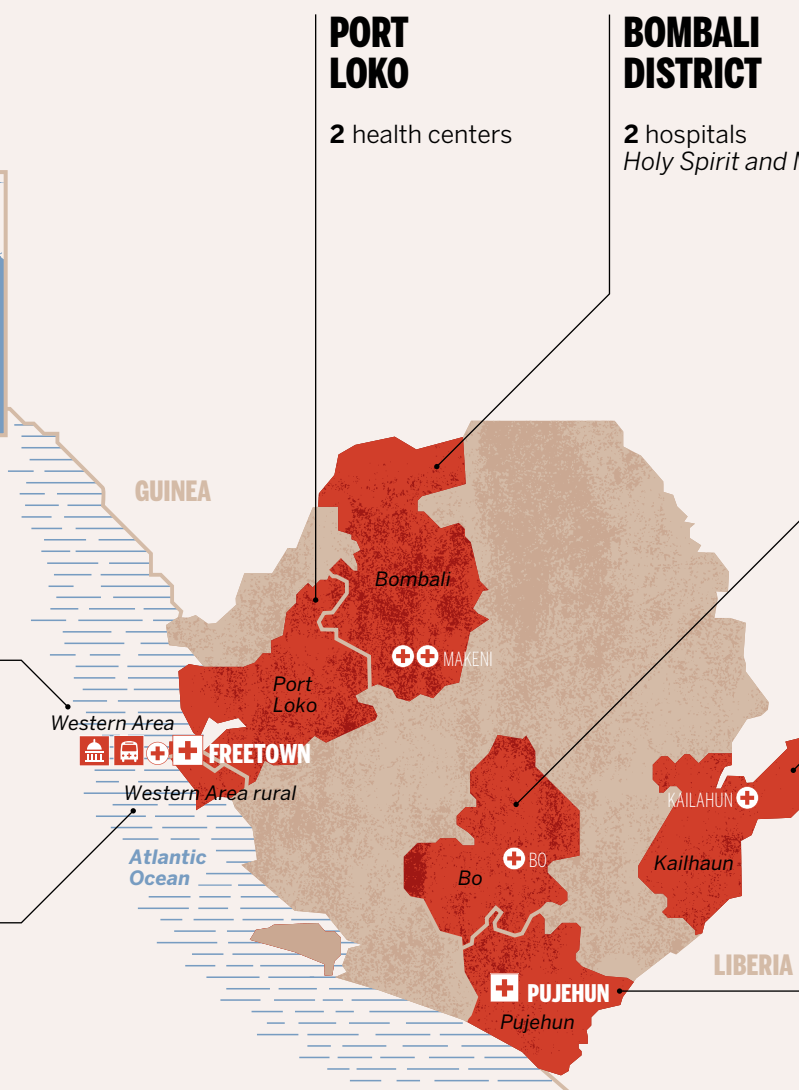
1 hospital Bo Hospital

KAILHAUN

1 hospital
Kailhaun Gov Hospital
4 health centers






PUJEHUN DISTRICT

1 hospital
Pujehun Hospital
30 health centers



0 40 80 km

RESULTS

	MATERNAL AND CHILD HEALTH	67,577 prenatal doctor's visits	24,722 deliveries attended	98,132 under-5 children examined	4,245 trips provided for obstetric emergencies
	NUTRITION	299 children treated for severe acute malnutrition			
	INFECTIOUS DISEASES	149,488 patients treated for malaria	16,820 under-5 children treated for acute respiratory infections		
	CONTINUAL TRAINING	21 nurses and	68 midwives	7 doctors	68 others
	CHRONIC DISEASES	660 visits for diabetes	1,715 visits for hypertension		

SOUTH SUDAN

IN 2024

Doctors with Africa CUAMM continued its approach to **integrated and complete healthcare** in South Sudan in 2024, with the goal of reinforcing the national health system and the resilience of local populations. In July, the adoption of a new health finance mechanism meant that CUAMM was confirmed as the main partner of the Health Ministry in Lakes State. In this area, we continued to **support eight county health offices, three hospitals, 66 peripheral health facilities and 672 community agents** who handle the treatment of malaria, diarrhea and pneumonia and who act as health educators in remote areas, where weekly immunization campaigns are held. Particular attention was given to **handling obstetrical emergencies** via staff trainings, targeted upgrades to infrastructure (such as the overhaul renovation of the **Adior Health Center**, which can now handle the most common emergencies), and the provision of materials and equipment to healthcare centers and hospitals. We also collaborated on the drafting of the **national protocol for maternal mortality monitoring** and to implement preventive measures. In support, a **permanent free ambulance service** was set up, made even more efficient by triage by telephone to meet the needs of mothers and children. The same attention paid to mothers and children was extended to other vulnerable groups, such as the visually impaired, with

the establishment of a level I **eye clinic** at **Rumbek State Hospital**. Community outreach engaged with members of local schools and the town prison, providing them with diagnoses and treatment, and surgery campaigns were held to treat cataract cases from all over the country. CUAMM confirmed its commitment to the **training of qualified local medical staff**, continuing to support the **Lui Health Sciences Institute** and reinforcing our support for the **Rumbek Health Sciences Institute** by sending CUAMM personnel to assist local teachers, providing educational materials and paying for major operational costs to ensure a suitable study setting. In addition to classroom lessons and hands-on demonstrations, the regular provision of clinical internships at the hospitals was ensured, under the supervision of CUAMM staff. The **22 obstetrics students** at the Lui Institute successfully completed their first year and will go on to their second year. At the Rumbek Institute, **128 students** completed their academic training. Of them, 21 midwives and 37 nurses graduated thanks to the three-year technical and financial support of CUAMM. The infrastructure upgrades at **Lui Hospital** should also be mentioned, improving hands-on learning spaces for students.

2024
SNAPSHOT

293

human resources

2,361

human resources
under special
management

110

health facilities
supported

€8,251,141

invested
in projects

COUNTRY PROFILE

Juba

capital city

12,118,379

population

644.329 km²

land area

18.7 years

average age of the
population

57.9/61.6 years

life expectancy
at birth (m/f)


5.2

average number
of children per
woman

191st

out of 191
countries


HDI ranking



1,223

out of every
100,000 live
births


maternal
mortality



99

out of every
1,000
live births

under-5
child deaths



40

out of every
1,000
live births

newborn
deaths



WHERE WE WORK



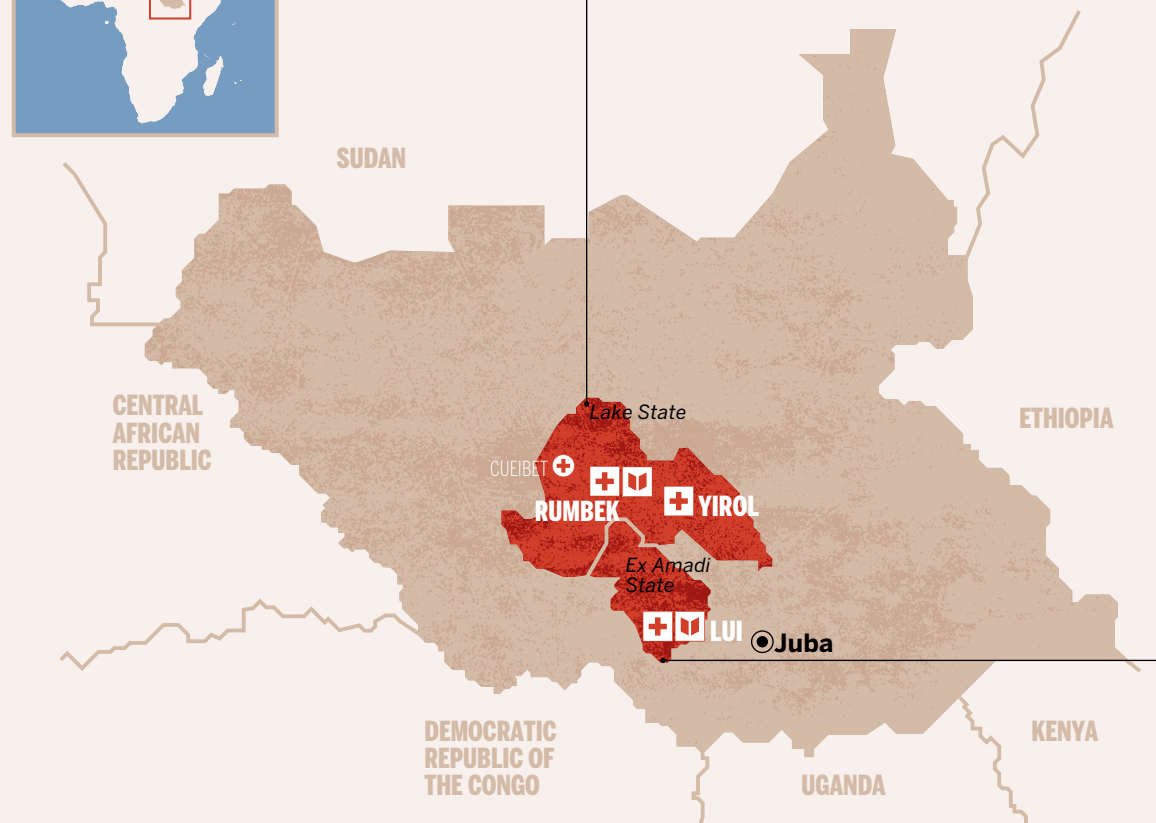
LAKE STATE

3 hospitals
Cueibet Hospital, Rumbek Hospital and Yirol Hospital
1 school for nurses and midwives *Rumbek*
66 health centers







WESTERN EQUATORIA

1 hospital *Lui Hospital*
1 school for midwives in *Lui*
38 health centers



RESULTS

 MATERNAL AND CHILD HEALTH	107,638 prenatal doctor's visits	15,924 deliveries attended	324,547 children's visits visited	2,298 trips provided for obstetric emergencies
 NUTRITION	600 children treated for severe acute malnutrition			
 INFECTIOUS DISEASES	384,648 patients treated for malaria	64,483 under-5 children treated for acute respiratory infections		
 CONTINUAL TRAINING	38 community agents	135 nurses and midwives	29 doctors	276 others

TANZANIA

IN 2024

In the Iringa DC district, CUAMM continued the integrated project for the prevention and treatment of **chronic diseases**, especially **diabetes mellitus** and **hypertension**. Tosamaganga Hospital covered the role of district hub, especially for the management of critical patients, while the development of peripheral healthcare facilities has encouraged the decentralization of treatments for more stable patients. This is essential to providing access to those who live in remote villages. **Trainings** were organized for medical personnel and the provision of drugs for poverty-stricken patients continued. Our commitment to **maternal and child health** was carried forth with continuity in the Iringa DC district and at Tosamaganga Hospital. Work was done to simplify access to health services and to optimize the **referral system for obstetric emergencies**, thereby guaranteeing greater coverage, equity and quality of the services provided. Significant support was provided to peripheral healthcare facilities thanks to health worker training and the distribution of drugs. In Zanzibar, CUAMM helped train the healthcare personnel that provides maternity care at **Kivunge Hospital** and in four health centers. In addition, the centers received equipment that was necessary to improve the quality of services. Doctors with Africa CUAMM operated in the **Dodoma, Iringa and Simiyu**

regions to combat **acute and chronic malnutrition**, supporting Tanzania's national program with educational activities to promote the exclusive breastfeeding of newborns for the first six months of life, weaning, and proper infant nutrition. 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 training for medical personnel, supervision and supplements critical for the treatment of malnourished individuals. To help foster children's physical, cognitive, social and emotional development, we complemented these activities with others aimed at promoting **early child development**. To improve the nutritional status of mothers and children, our activities were enriched by **water supply and agricultural components** in partnership with other entities. In the field of **HIV prevention and treatment**, an intervention focused on adolescents and young adults in line with the government's program was launched in the Shinyanga region. As part of it, **operational research** was conducted with the goal of identifying the barriers which make it hard for HIV-positive youths to access services.

2024 SNAPSHOT

91
human resources

39
health facilities supported

€1,239,408
invested in projects

COUNTRY PROFILE

Dodoma
capital city

65,642,682
population

947,300 km²
land area

19.1 years
average age of the population

69.0/72.6 years
life expectancy at birth (m/f)

4.3
average number of children per woman

167th
out of 191
countries
HDI ranking



238
out of every
100,000 live
births
maternal mortality



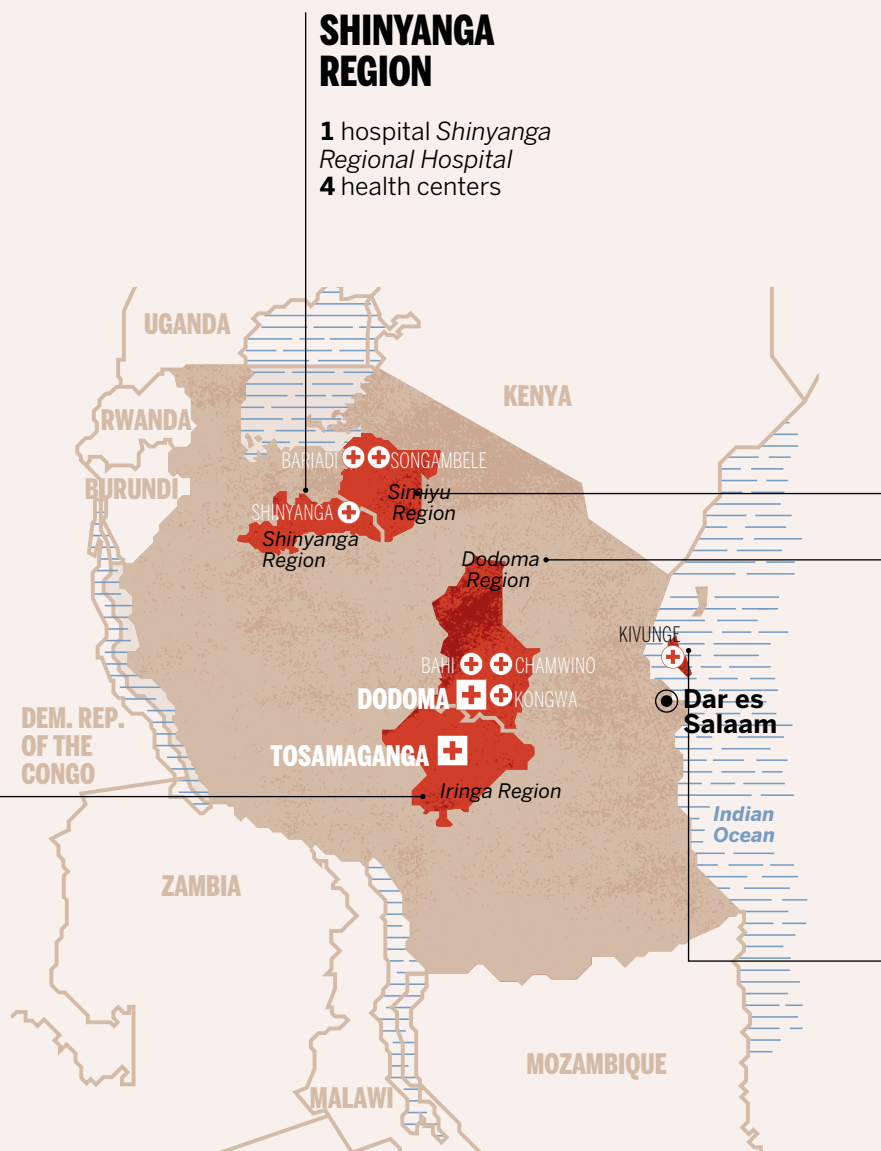
40.5
out of every
1,000
live births
under-5 child deaths



29.6
out of every
1,000
live births
newborn deaths



WHERE WE WORK



SIMIYU REGION

2 hospitals
Songambele Hospital and Bariadi Hospital
1 health centers



DODOMA REGION

4 hospitals Dodoma Regional Referral Hospital, Chamwino District Hospital, Kongwa District Hospital and Bahi District Hospital
11 health centers

ZANZIBAR REGION

1 hospital
Kivunge Hospital
5 health centers

IRINGA REGION

1 hospital
Tosamaganga Hospital
9 health centers

RESULTS

MATERNAL AND CHILD HEALTH	57,866 prenatal doctor's visits	15,919 deliveries attended	34,112 under-5 children visited	10,361 vaccinations administered
NUTRITION	129 children treated for severe acute malnutrition			
INFECTIOUS DISEASES	1,353 patients treated for malaria	1,104 patients treated for tuberculosis	8,012 patients treated with antiretroviral therapy	
INFECTIOUS DISEASES	1,872 visits for diabetes	4,138 visits for hypertension	100 patients with cardiomyopathies	60 patients with cerebral ischemia
CONTINUAL TRAINING	159 nurses and midwives	106 community agents	14 doctors	28 others

UGANDA

IN 2024

CUAMM's work in Uganda remained constant and firmly anchored on its pillars. The **training of health workers** remained at the forefront, with the continuation of our project in **Lango and Karamoja** to improve the availability, distribution, knowledge and skills of healthcare workers with the goal of improving the provision of high-quality health services. As in previous years, **maternal and child health** remained a priority in all the regions we work in, with different projects to support hospitals and peripheral structures and the transportation of patients to health facilities, emphasizing the importance of assisted deliveries. In Karamoja, our interventions to control **tuberculosis and malaria** and our **support to Matany Hospital** continued. More specifically, 2024 marked an important milestone for this facility, with the launch of **neonatal intensive care**. Moreover, a hostel to host doctors-in-training was built. We bolstered our integrated **reproductive health and community approach** activities thanks to an integrated system for patient management. Our support for the **blood bank in Moroto** remained as important as ever. CUAMM also continued its integrated interventions in the hygiene-sanitation and zootechinic-veterinary fields to combat potential epidemic-level diseases, operating with a One Health approach within the national program.

This included an important **infection monitoring and prevention** aspect that not only involved the CUAMM team but also local authorities and the management of **Matany and Moroto Hospitals**. 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. Our adolescent health activities continued and expanded in terms of the services offered (on health, school and community levels) and the number of young women reached. In 2024, CUAMM concluded its work to fight malaria in **Kole and Oyam Districts**, focused primarily on mothers, pregnant women and children under the age of five, entailing activities at the hospital and in schools, communities, and health centers. 2024 also saw much activity in terms of the **operational research** program, in Karamoja on nutrition, tuberculosis, blood transfusions and neonatal health; meanwhile, the program in Oyam and Kole on malaria, especially during pregnancy, was concluded. Lastly, in the West Nile region, the emergency project which focused on **refugees** in the Imvepi camp and nearby host communities continued. This inclusive initiative is aimed at reinforcing health services and hygiene in refugee and host communities.

2024 SNAPSHOT

124
human resources

740
health facilities supported

€4,220,894
invested in projects

COUNTRY PROFILE

Kampala
capital city

47,729,952
population

241,038 km²
land area

16.1 years
average age of the population

67.1/71.6 years
life expectancy at birth (m/f)

5.26
average number of children per woman

166th
out of 191
countries
HDI ranking



284
out of every
100,000 live
births
maternal mortality



42
out of every
1,000
live births
under-5 child deaths



19
out of every
1,000
live births
newborn deaths



WHERE WE WORK



SOUTH
SUDAN

DEM. REP.
OF THE CONGO

WEST NILE REGION

12 health centers

ACHOLI REGION

1 hospital
*Dr. Ambrosoli Memorial
Hospital Kalo*
114 health centers

KARAMOJA REGION

6 hospitals
*Abim Hospital,
Amudat Hospital,
Kaabong Hospital, St
Kizito Hospital Matany,
Kotido General Hospital
and Moroto Regional
Referral Hospital*
152 health centers

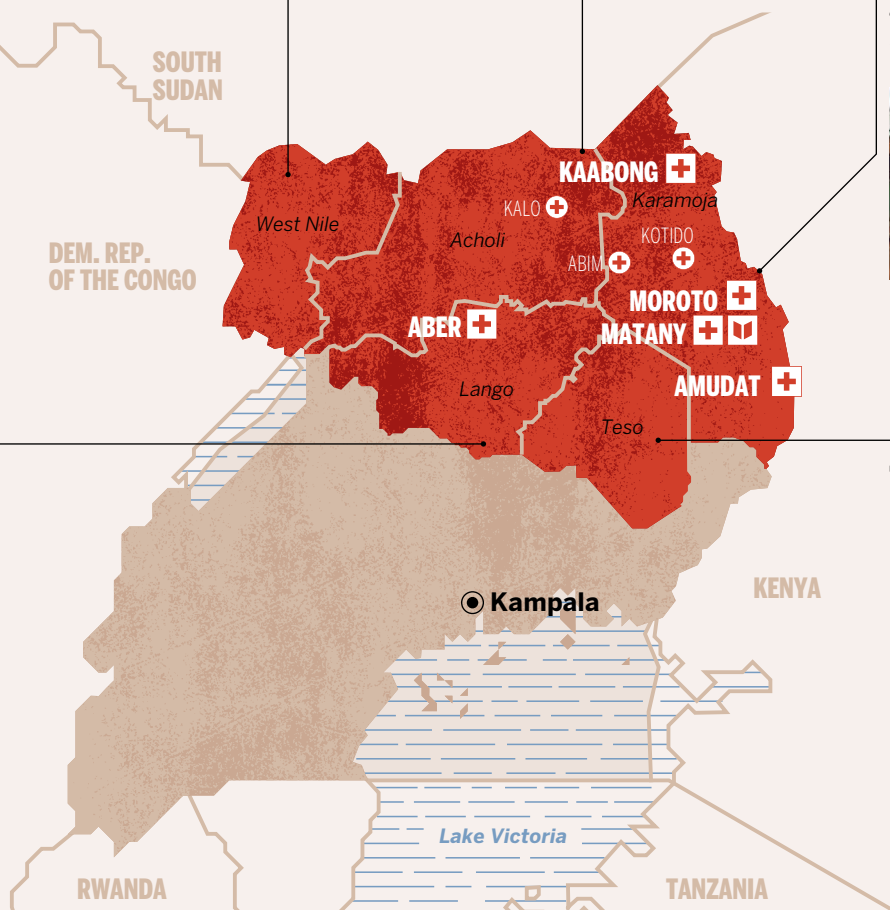


LANGO REGION

1 hospital *St John XXIII
Hospital-Aber*
114 health centers

TESO

71 health centers



0 60 120 km

RESULTS

MATERNAL AND CHILD HEALTH	138,058 prenatal doctor's visits	32,740 deliveries attended	164,600 under-5 children visited	63,232 vaccinations administered	716 trips provided for obstetric emergencies
NUTRITION	434 children treated for severe acute malnutrition				
INFECTIOUS DISEASES	973,039 patients treated for malaria	4,045 patients treated for tuberculosis	5,432 patients treated with antiretroviral therapy		
CONTINUAL TRAINING	236 nurses	273 midwives	144 doctors	36 others	

“WITH” REFUGEES



FACING CRISES TOGETHER

Conflict, drought, environmental 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, 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 crises, instability, conflict and epidemics. **Our ordinary response therefore is complemented by resiliency**, partnering with local authorities in our support for systems and communities, especially during peak periods of shock. With that vision in mind, Doctors with Africa CUAMM tackles the critical emergencies which bear down ever more frequently on the African countries with which we partner. When conflicts force entire communities to abandon their homes and seek shelter elsewhere, whether within the same country or in its neighboring nations, 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 health systems** and their resilience, the capacity to adapt to and overcome shock, 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. To cope with the instability and emergencies that continue to be seen on the African continent, CUAMM **offers long-term development projects**, increasingly investing in **preparedness** and in actions aimed at staying ahead of risks and increasing readiness. The end goal, of course, is to facilitate quick, effective responses to emergencies, thereby mitigating their impact.

ACCESS TO HEALTH SERVICES

We provide access to quality ordinary 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.

PROVIDING MEDICINES AND MEDICAL SUPPLIES

CUAMM provides health facilities with medicines 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 help to strengthen their capacities and skills. To improve emergency responses, we offer dedicated training for the management of refugees and IDPs and the provision of context-appropriate health services.

RAISING AWARENESS

CUAMM conducts many awareness-raising and prevention campaigns, particularly in relation to 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.

→ To learn more about the emergency in Ethiopia: <https://doctorswithafrica.org/en/whats-new/news/idps-in-ethiopia-conflict-and-climate-change-compound-the-crisis/>



“Nyachiew Koaku, a young South Sudanese mother, reached the Zone A Health Point with her youngest child, a two-and-a-half year-old boy with pneumonia. The nurse managed the infection and got the fever to drop. Having escaped the war in South Sudan in 2017, she sought refuge in the Nguenyyiel camp. Today, she has five children and her resilience has made it possible to overcome numerous challenges.”

Gelaye Megersa,
Senior Health Officer, CUAMM, Ethiopia.



UGANDA

In West Nile, to the north-west of the country, the inclusive emergency initiative to **strengthen health services and hygiene in the refugee and host community in the Imvepi camp** and in the community of the **Terego** district continued throughout 2024. The camp is mainly home to refugees coming from **South Sudan** and **the Democratic Republic of the Congo**. Uganda hosts 1.8 million refugees, making it fifth in the world and first in Africa. The direct beneficiaries of this program include more than 1,200 patients who received orthopedic therapies, over 15,000 people who were reached by outreach in their communities, and more than 5,000 who were visited at their homes as part of awareness raising efforts on hygiene.

ETHIOPIA

Given recent emergencies, Ethiopia has faced different **overlapping crises**: conflicts, drought and instability. They have combined to worsen an already precarious humanitarian situation. In response, CUAMM ramped up its efforts in 2024, providing greater support to the most exposed populations, such as **refugees and IDPs**, through the direct management or support for **hospitals, health centers and health posts in the Gambella region**; the provision of mobile clinics in the **regions of South Omo, Amhara and Somali**; and support for the renovation of damaged hospitals in **Tigray**, helping the local health system bounce back post-conflict.

MOZAMBIQUE

The humanitarian crisis in **Cabo Delgado province**, Mozambique remains extremely critical due to the ongoing **armed conflict**. The violence perpetrated by armed groups has caused **massive movements of people** and serious **human rights violations**. Given this, CUAMM ensures a structured, multi-sector approach to **gender-based violence** (GBV) through an integrated, community-based approach which places the survivor at the center. Our activities involved the management of GBV cases, psychological and social support for individuals and groups, the distribution of dignity kits and access to legal council. This project also includes literacy classes and a bolstering of skills for women and girls, with the goal of **promoting individual empowerment and knowledge of one's rights**. The intended outcome is the prevention and mitigation of the risks associated with gender-based violence.

SOUTH SUDAN

South Sudan has **2 million internally displaced persons due to internal conflict, flooding and food insecurity**. OCHA estimates that there will be **1,241,000 refugees and returnees fleeing the war in Sudan in 2025**. Most displaced persons and returnees moving across the border find hospitality with residents. **In support of the healthcare system**, Cuamm ensures the provision of treatments in order to meet the rising demand in the areas most involved in these migrations, even reaching remote villages with community health agents, vaccinations and a well-developed referral system.



EASTERN EUROPE

Since the outbreak of the conflict in Ukraine in February 2022, approximately **12.7 million people**, a third of the population, were forced to request **humanitarian aid**. Currently, Ukraine has **four million IDPs**, while **6.8 million people are living as refugees outside its borders**.

UKRAINE

Since March 2022, Doctors with Africa CUAMM has been working **Ukraine** to provide healthcare to the most vulnerable. At the time of writing, our efforts encompass six regions (Oblasts) supported with **the purchase and distribution of drugs, consumables, and biomedical devices and with the distribution of foodstuffs and basic necessities**, such as personal hygiene kits.

Moreover, **psychological and social support is provided to displaced people, as is training** for medical and paramedical personnel. Special attention is paid to risk mitigation and to **first aid** for war injuries, though **gender-based violence** and **mental health** remain of primary importance as well. This is possible thanks to collaborations with local partners vis-a-vis a multidisciplinary team.

Activities are carried out in a **permanent medical center in Drohobych** (Lviv) and through a **mobile unit** used to reach vulnerable beneficiaries at home or in temporary accommodation centers. With every visit, the team also works to promote health and provides psychological counseling. Overall, **6,624 medical visits** were held. In coordination with the Rapid Response Mechanism (RRM), Doctors with Africa CUAMM organized **11 deliveries of emergency equipment and kits just 72 hours from the requests made by the hardest-hit hospitals on the front line, in the areas of Dnipro, Zaporizhzhia, Vasylikiv and Sumy**. The materials distributed included trauma emergency kits, emergency room doctor's bags, airway management kits and specialized surgery kits. Throughout 2024, CUAMM also ensured drugs and medical supplies to **11 facilities in the Donetsk and Dnipropetrovsk areas, reaching 26,500 people**.

MENTAL HEALTH IN TIMES OF WAR

Mental health plays an important role in humanitarian emergencies because psychological and social support can help lessen the negative effects of trauma and promote the resilience of impacted communities.

In 2024, Doctors with Africa CUAMM organized **psychological and social support events for IDPs which were led by local psychologists and social workers. 2,961 people were given care, both children and adults**. Children and adolescents were given special attention via a program of structured activities aimed at reinforcing emotional intelligence and social skills through play, art and expressive therapy. Their parents also took part in support sessions to ensure that support for the children continued at home.

Training, strengthening of local capacities and the direct engagement of local players providing humanitarian support makes it possible to build more resilient health systems which will better adapt to future emergencies. CUAMM invested in mental health and psychological-social support training for local healthcare operators, social workers and local volunteers, including stress management, post-traumatic stress disorder, communication in times of crisis and support for GBV on the curriculum.

MOLDOVA

The repercussions of the war in Ukraine have been felt in nearby countries, including **Moldova**. At the outbreak of the conflict, this country welcomed circa **one million refugees**, which put **intense pressure on its healthcare system**. Doctors with Africa CUAMM supported Moldova's **Level-1 Mother and Child Institute in Chisinau**, where in the first year alone, **1,060 outpatient visits** were provided to refugees and host communities, **11 events** to provide psycho-social support were held, and circa **3,000 kits with essential goods** were given to vulnerable people.

Our intervention in Moldova also included a focus on **training for neonatal healthcare**, with the end goal of empowering local medical personnel around the country. Carried out in partnership with **Moldova's National Pediatric Society**, CUAMM's activities engaged a total of **100 health professionals**.

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 decided to support the congregations in this delicate transitional phase, helping them to once again become a reference point for the communities with whom they work through a joint commitment to dialog, assistance and training.

Launched in 2019, the project supports the work of some 93 religious organizations and the staff of the health facilities they manage in 26 African countries.

Our primary activities are:

- developing and delivering **training packages** (on site and online) for healthcare personnel;
- providing on-site **technical assistance** for healthcare personnel and facilities;
- promoting **best practices** and lessons learned through our experience managing healthcare facilities, via dialog with local and national health authorities and international partners.

In 2024, Doctors with Africa CUAMM organized multiple online and in-person **training courses** in English, French and Italian on leadership and networking, emergency management, resource mobilization and healthcare facility management, with a special focus on the use of the health information system.

Technical assistance assistance missions were carried out in Kenya, Cameroon, Ethiopia, Angola and the Central African Republic, visiting a total of 21 healthcare facilities.



1. Technical assistance visit to the Rainha Santa Diocese Maternal and Children's Hospital, Sisters of Mercy of Verona, in Angola
2. Technical assistance visit to the health center of Oloomalaika, Sisters of the Blessed Virgin Mary of Nairobi, Kenya
3. Technical assistance visit to the St Mary health center, Sisters of Saint Anne, in Ethiopia

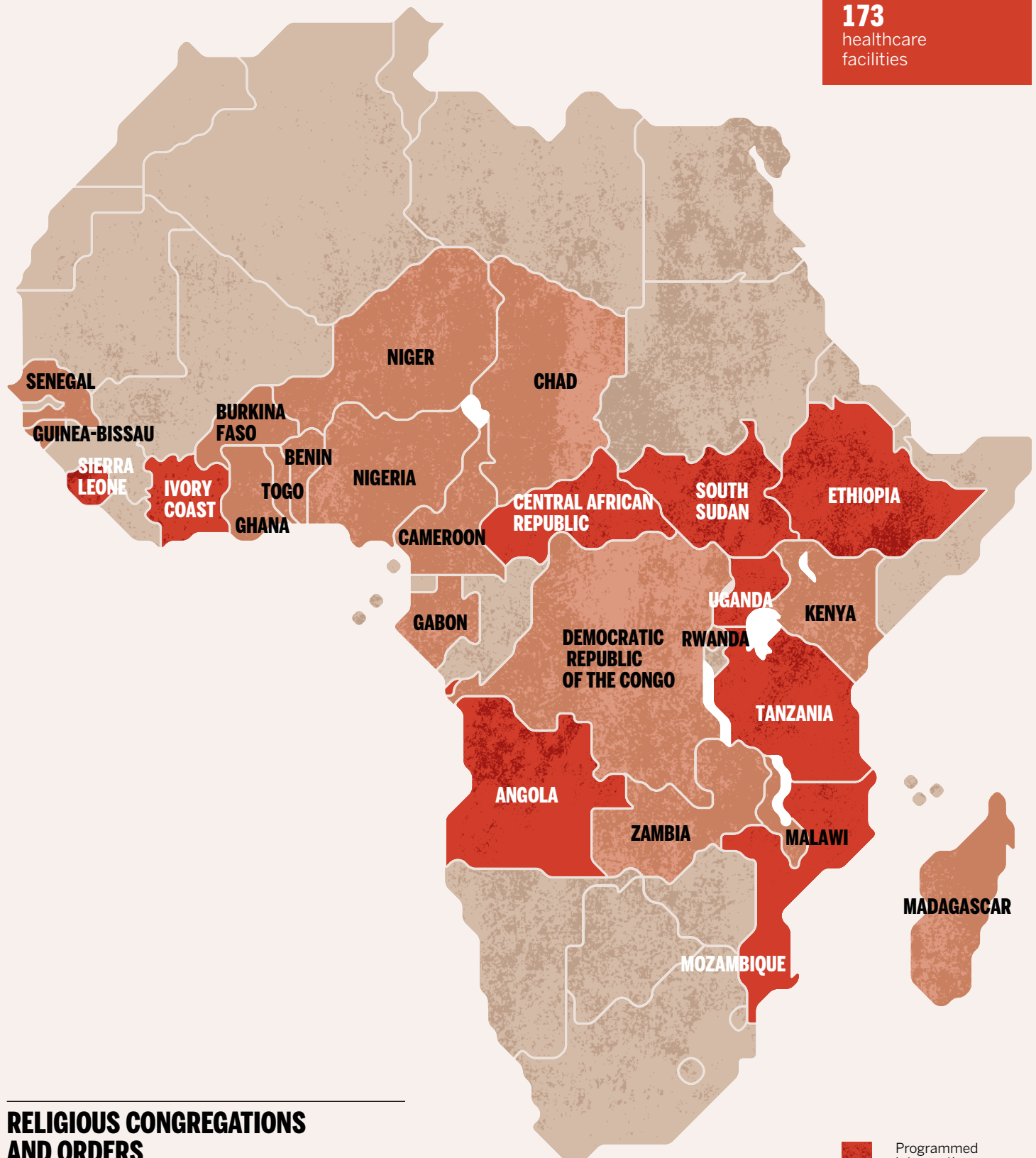
WHERE WE WORK

NUMBERS

26
countries

150
congregations

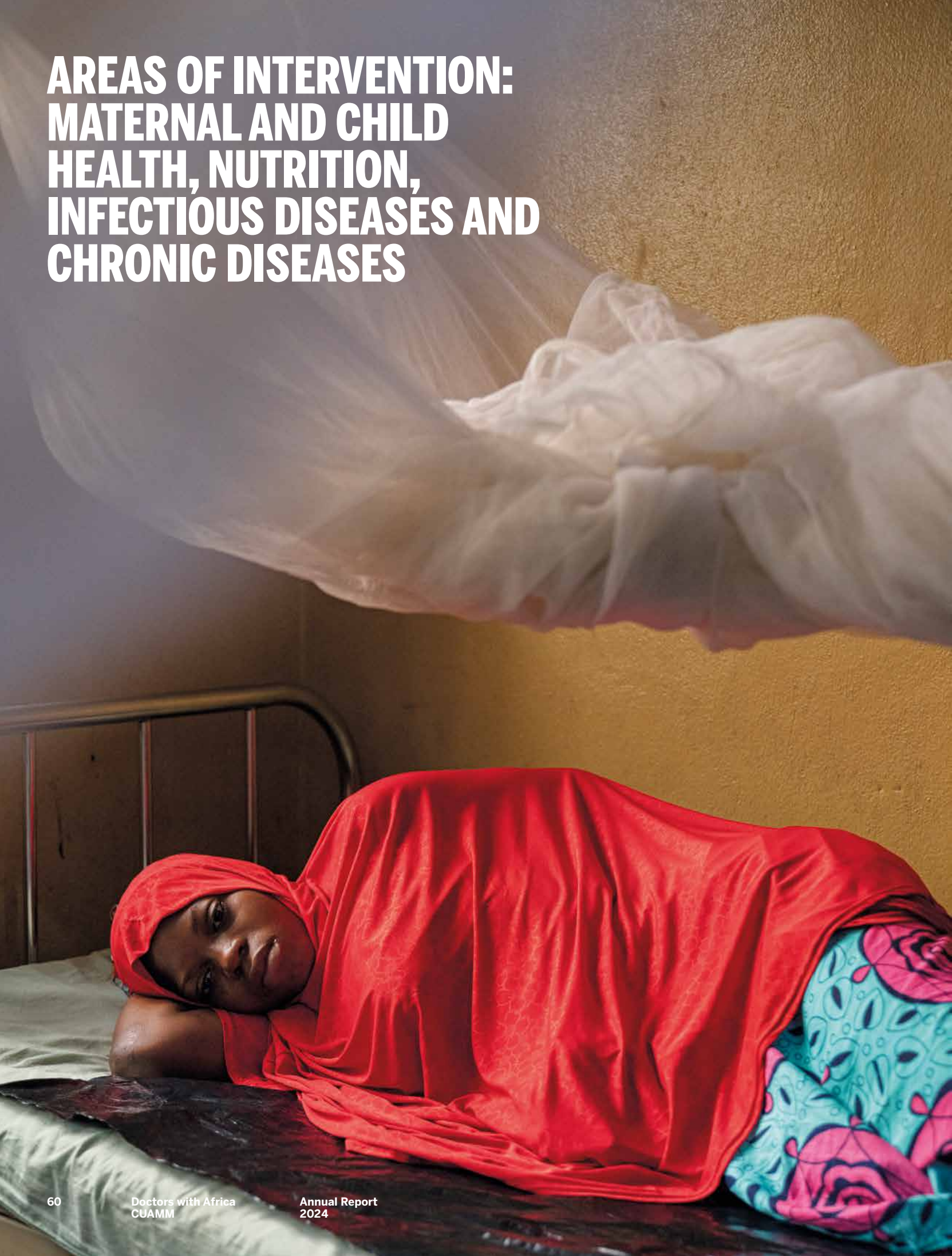
173
healthcare
facilities



RELIGIOUS CONGREGATIONS AND ORDERS

A complete list can be found here: <https://doctorswithafrica.org/en/where-we-work/in-africa/congregations>

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, access to reproductive healthcare and obstetric emergency services is **one of the most important indicators of the social inequality between developed and developing 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 hospitals, as per the **continuum of care approach**.

For this reason, Doctors with Africa CUAMM's **Mothers and Children First** program was founded over 10 years ago to 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 related districts**, always engaging communities, peripheral networks, hospitals and local stakeholders.



46,968

deliveries attended in hospitals

226,393

deliveries attended at district health centers

8,755

major direct obstetric complications (MDOCs) treated



"Félicité gave birth in the hospital of Bossangoa, in the Central African Republic. She came alone, from her village, so that her child's birth would be safe. Félicité had to have a C-section and her baby girl was underweight: she came into this world with a very rare tumor that grows on the base of the coccyx while in the womb. The mother was saved with a C-section and the baby was stabilized. But Bossangoa isn't set up for surgery, however, and Félicité and her daughter were urgently transferred to the capital via a humanitarian flight. The operation was complex but successful, and the mass was removed. Subsequent visits and an abdominal x-ray and ultrasound made it possible for the doctors to exclude any complications, but they continued to monitor her, day and night, for over 20 days.

From the doctors to the nurses, even to Félicité's "roommates" in the hospital, general apprehension became hope and strength. The little girl was finally out of danger."

Leonie,
nurse in Bangui, Central African Republic



MOTHERS AND CHILDREN FIRST: PEOPLE AND SKILLS

Maternal and child health remains a priority for Doctors with Africa CUAMM. Still today in sub-Saharan Africa, **too many mothers die of curable diseases**: the vulnerable put at risk by long distances to hospitals, infrastructure, a lack of or unprepared personnel, and a lack of information.

After the **first five-year cycle** of the “**Mothers and Children First**” program in four districts of four African countries, and the conclusion of the second five-year cycle, which placed the focus on **maternal nutrition during pregnancy and the caring for infants up to two years old** in seven countries, a third phase has been launched.

In addition to strengthening and amplifying the previous programs, this new phase shifts the focus to the need for **qualified human resources** and components from a **management** and **technical** point of view. To that end, the program has been expanded to 14 hospitals and their districts. The key actions, in addition to the interventions that were already part of the earlier phases, include **training new managerial resources**, supporting both **national and international medical residents**, and the promotion of operational research.

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

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

The program also involved the health centers associated with these hospitals, which ensured 101,132 deliveries in 2024.

OTHER CHALLENGING SETTINGS

The work done by Doctors with Africa CUAMM goes beyond these **14 districts** and hospitals, engaging others in the nine countries in which we operate.

In **Ethiopia**, CUAMM continued to support the hospitals of **Gambella** and we began working in neonatology with Black Lion Hospital in **Addis Ababa** and Sahul Hospital in the **Tigray** region. Moreover, CUAMM began working the the hospitals of Debre Berhan in the **Amhara** region and that of Filtu in **Somali**, providing support and healthcare for “internal refugees.”

In the **Central African Republic**, we ramped up our support for the maternity ward in **Bossangoa**, where construction has begun on the new building and delivery room. Moreover, we launched support for the **Kuoi** hospital, which provides urgent obstetric care.

And despite the challenges of working in **South Sudan**, including the progressive drop in funds available to support its hospitals, our activities to support **Cueibet, Yirol and Rumbek** hospitals continued. In **Lui**, on the other hand, the local protestant diocese began managing the hospital as of July with the support of a local NGO, though we continued our support for the **Midwifery School**. All in spite of the ongoing guerrilla warfare and insecurity, which pose challenges to local activities and travel.

The chart shown here highlights the percentage of **major obstetric complications treated** and the percentages of **C-sections over assisted births** in CUAMM's main operational sites. According to the World Health Organization (WHO), approximately 15% of all attended births in a given population involve serious conditions and, ideally, should all be managed to effectively reduce maternal mortality and limit lifelong health consequences. The WHO also states that, again to control maternal morbidity and mortality, the minimum percent of C-sections is 5% of attended deliveries.

As can be seen **in 2024, it didn't so much as reach 50% of the complications managed anywhere**, while in some sites, the percent of C-sections over the total of attended deliveries exceeded the WHO's 5% “minimum” target.

In Tosamaganga, for example, the C-section rate would be 9.6% (a data point that we know is influenced by the high number of C-sections due to previous interventions) **while in Oyam it's 5.8% and in Napack it's 5.4%**. These percentages demonstrate **good access** and thus good management of complex cases, results that are probably underestimated due to data potentially not being recorded for major obstetric complications managed.

In 2024, **Doctors with Africa CUAMM** ensured 271,019 attended deliveries in 2024, 46,968 of which took place in the 19 hospitals (out of the 21 in which we operate) which offer attended deliveries.

RESULTS FROM THE THIRD YEAR

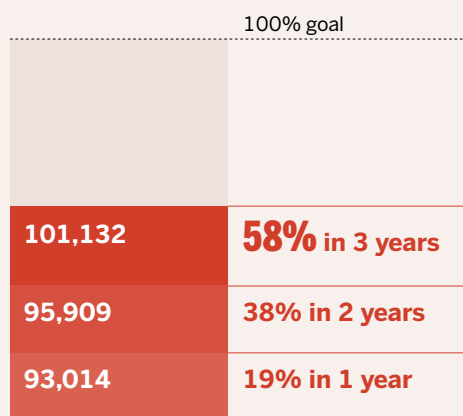
ATTENDED DELIVERIES

500,000

5-year goal

290,056

in three years



The **deliveries** are in line with the expected results, actually exceeding them. It is thus likely that the final goal will be achieved.

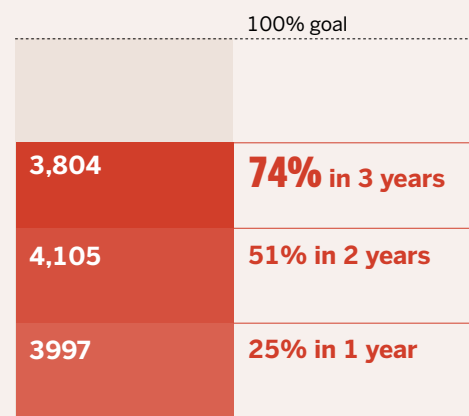
MALNOURISHED CHILDREN TREATED

16,000

5-year goal

11,906

in three years



In terms of **malnourished children treated**, we're above target, even if there is a slight drop in the overall number in this third year. It's hard to say if that's a good sign, given the global context, but we hope it is.

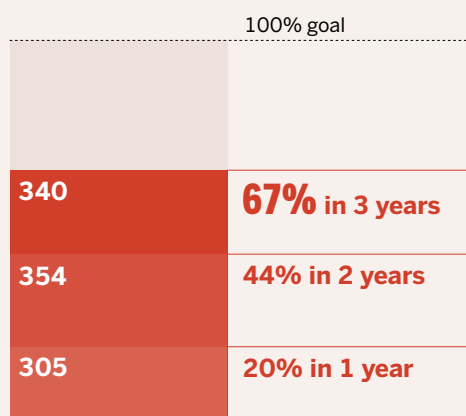
TRAINING OF HEALTH MANAGERS

1,500

5-year goal

999

in three years



We're above target for the **training of health managers**. This essential work to improve planning skills, which should be based on evidence and the analysis of data, continues in all areas.

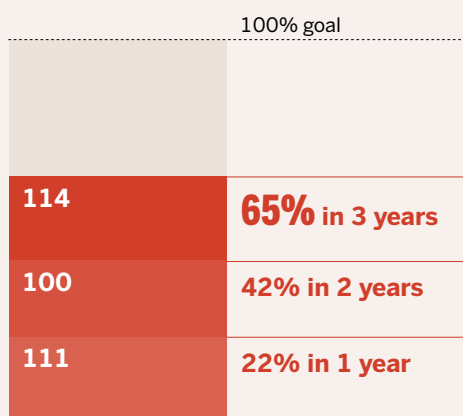
ITALIAN AND AFRICAN MEDICAL RESIDENTS

500

5-year goal

325

in three years



We're in-line **with our goals for the training of residents**: 114 Italian and African residents received support in their training as future medical professionals, with direct exposure to everyday clinical problems in contexts where scarce resources encourage and teach them to make more cost-effective choices.

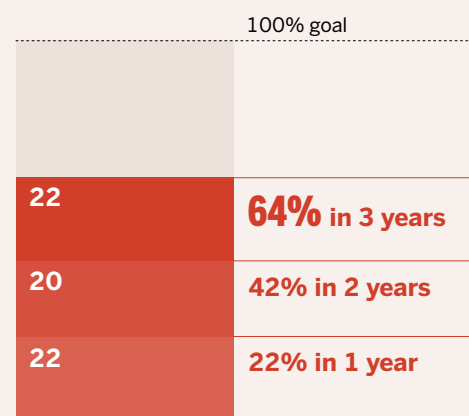
OPERATIONAL RESEARCH

100

5-year goal

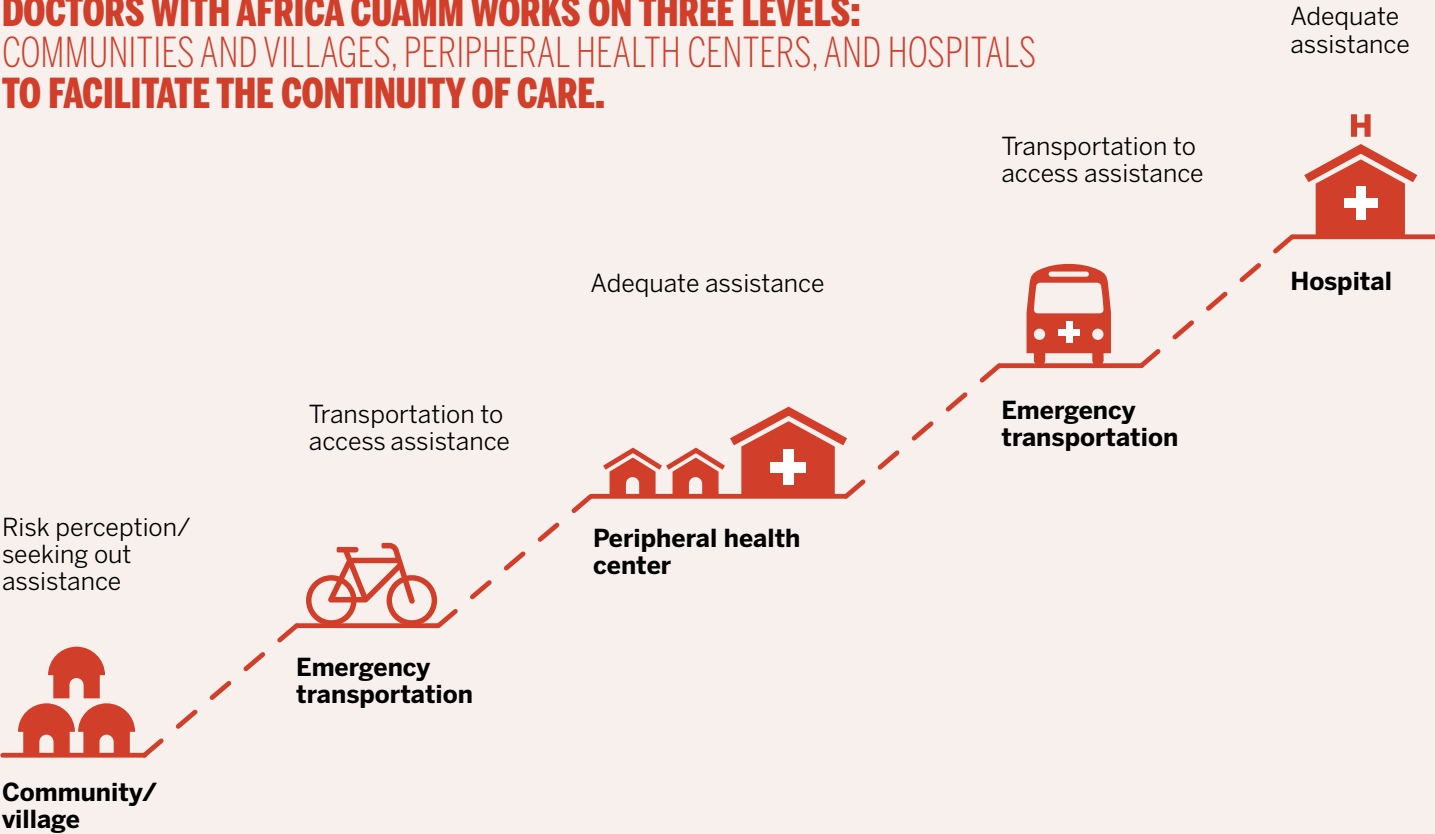
64

in three years

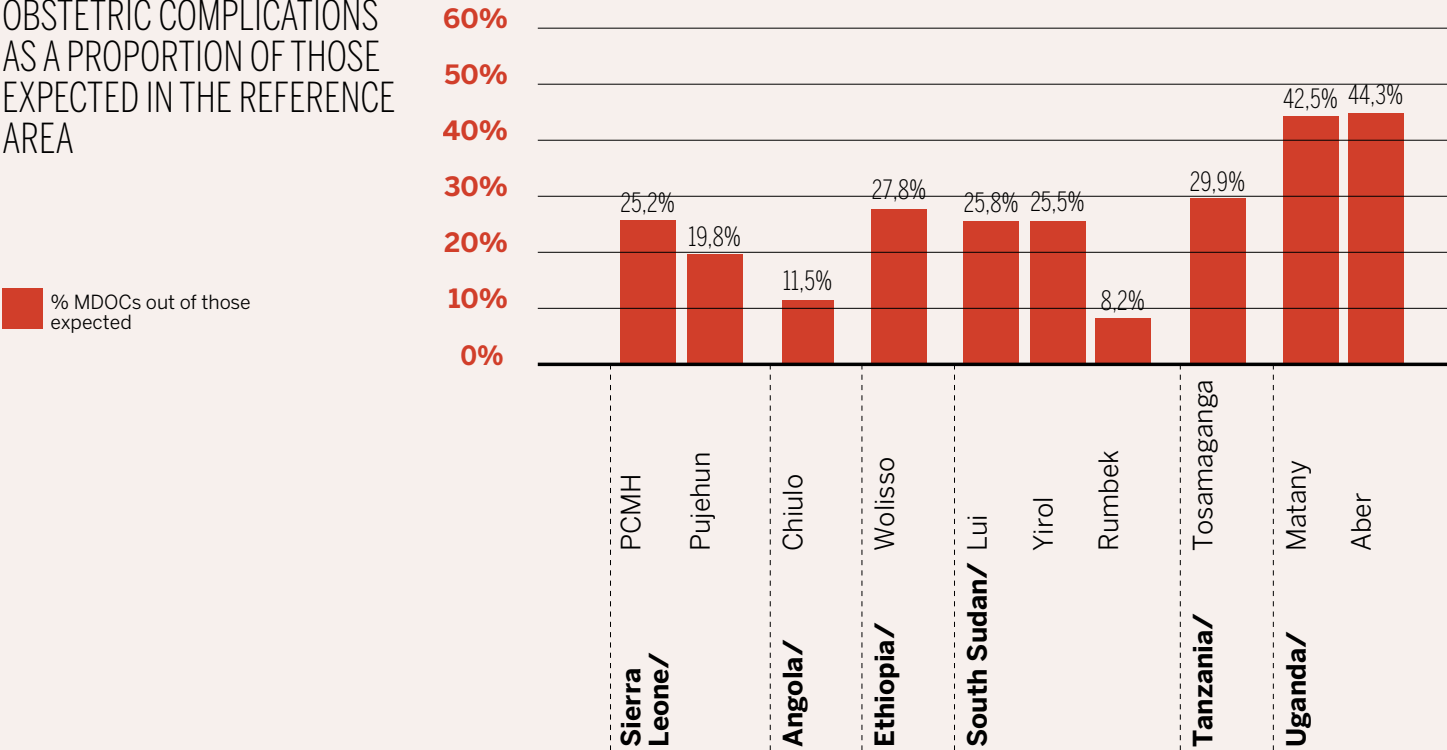


In collaboration with Italian and local universities, we continue to assess what works and what doesn't thanks to **operational research** to improve strategies and future clinical and organizational decisions.

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



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





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 via the community, dispensaries and health centers, raising awareness among mothers about the benefits **of breastfeeding exclusive up to six months and monitoring their children's growth** during the first few years of its life. CUAMM also manages **acute and chronic malnutrition cases**, both of which are still widespread in Africa, especially during periods of drought and subsequent famine. Globally, **malnutrition contributes to 45% of infant deaths under five** (Unicef, 2024), as a factor which worsens and complicates every illness. 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, in addition to *screening* and identifying cases of acute malnutrition locally and in peripheral health centers.

The chart on the following page illustrates the data relative to hospital treatments in 2024.

TACKLING CHRONIC MALNUTRITION

Chronic malnutrition leads to **stunted growth**, i.e., a 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 stops children from ever 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 special 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 breastfeeding only (instead of formula), and treatment for intestinal parasitic infections in children.

3,804

patients treated

3,233

patients cured

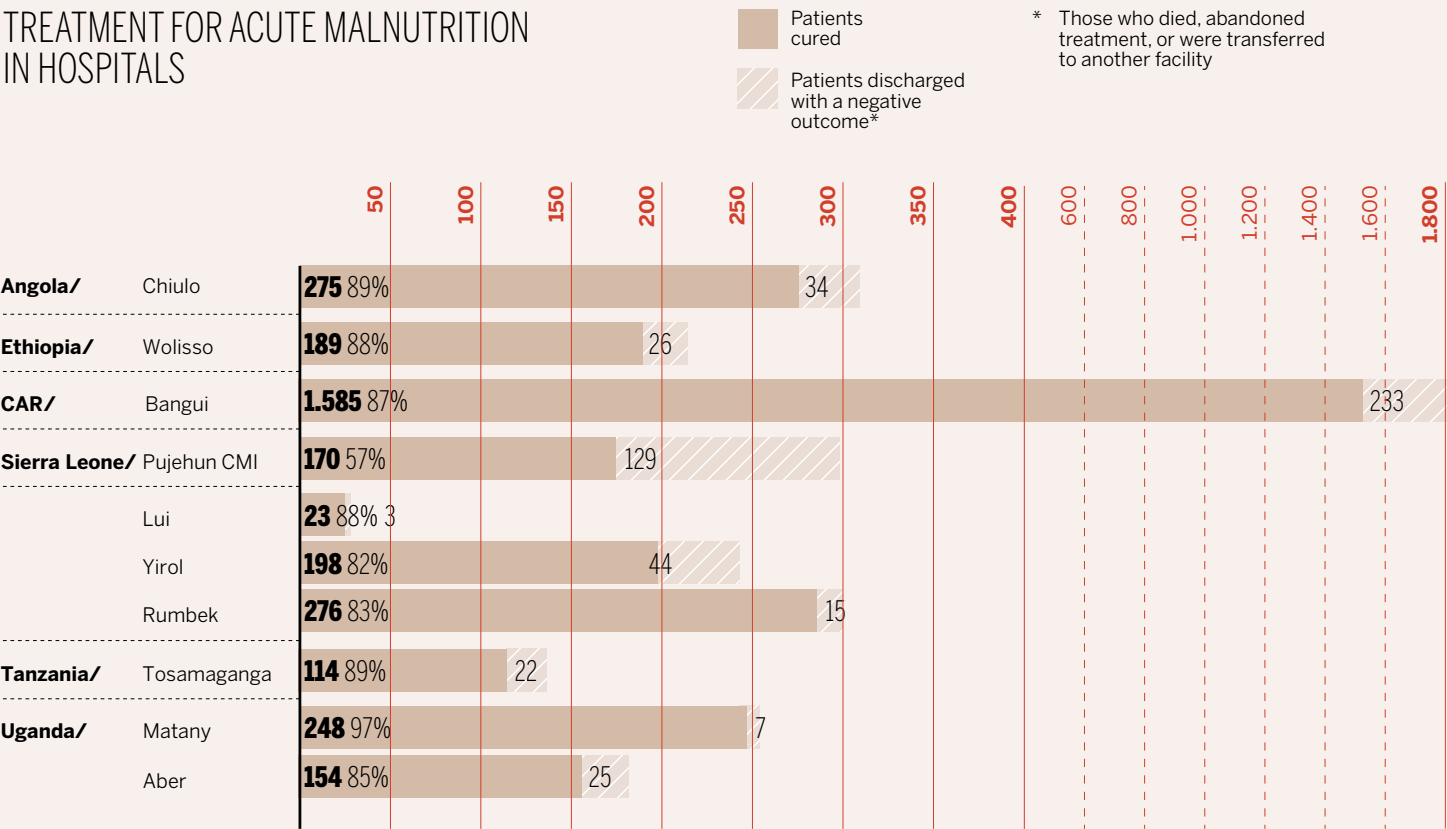
85%

average cure rate

7.9%

average mortality rate

TREATMENT FOR ACUTE MALNUTRITION IN HOSPITALS



“In Tanzania, 30.6% of children under five suffer from chronic malnutrition, while 3.3% suffer from acute malnutrition. One of those children is Patricia, who was admitted to Dodoma Hospital. She’s two and a half years old and comes from the village of Chiwondo. Her aunt brought her to the hospital because her mother has another small child to care for. After a few weeks in the hospital, Patricia was discharged. Once back home, she should have been given Plumpynut, a therapeutic food used for nutritional rehabilitation, which the family could have collected from the Dabalo health center. But Patricia never received it. Luckily, one of Patricia’s other aunts, Brighita, realized that the little girl wasn’t well. So she took her to the health center, where she was diagnosed with severe acute malnutrition. Brighita knew that assistance from medical staff was necessary to save Patricia’s life.”

Gilda,
nurse at Dodoma Hospital





INSIDIOUS ADVERSARIES

In recent years, thanks to international cooperation, **there have been important advances in the fight against major infectious diseases** such as malaria, tuberculosis and HIV/AIDS. Today in Africa, **fewer individuals are getting infected by or dying from such diseases**, and **growing numbers of infected patients are receiving treatment**.

However, in comparison to people from other continents, a large portion of the African population continues to suffer disproportionately from preventable early mortality and disabilities caused primarily by major epidemics. The COVID-19 pandemic also triggered a rising incidence of tuberculosis and TB-related mortality in 2022, after many 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, coupled with a diversion of resources across multiple health system levels (*International Journal of Infectious Diseases*, 2022).

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

In 2024, the overall **number of patients diagnosed** in hospitals where CUAMM used *GenXpert* **diagnostic services fell by 15%**. **Moreover, there was general stability among patients resistant to rifampicin and those with multidrug-resistant tuberculosis (Mdr-Tb)**. That drop doesn't necessarily indicate a reduction of the rate of tuberculosis in the area. Instead, it likely indicates reduced access to services due to a lack of safety or an increase in the diagnostic services offered in nearby centers.

FIGHTING MALARIA

Dozens and dozens of malaria patients are treated in every hospital, every day, especially children under five years old. **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

The number of tuberculosis cases dropped 18% compared to 2023 in three of the four sites monitored by CUAMM, the exception being Wolisso, where an increase was seen. *GenXpert* positivity rates were generally stable, as were the number of MDR-TB cases diagnosed, while the number of tests carried out increased 10%.

New technologies such as *GenXpert* make it possible to identify the presence of tuberculosis as well as possible resistance to rifampicin and hence potential cases of *MDR-TB*. The chart on the following page reports the relevant data.

Malaria, TB, HIV

1,873,033

Malaria diagnoses

1,960

Tuberculosis diagnoses

231,187

Individuals tested for HIV

343

New HIV+ patients placed in treatment

Pneumonia and diarrhea

398,541

Pneumonia diagnoses

182,928

Diarrhea diagnoses

FIGHTING HIV/AIDS

In 2023, CUAMM continued its strategy to reduce HIV and AIDS with the *Test and Treat* program, **in which patients who test positive are immediately placed in treatment.** This strategy differs from the previous approach in which, except for HIV/AIDS positive pregnant women, treatment began only if the CD4+ cells (the cells in the body's immune system responsible for fighting infections) were below a specific level. The goal of this strategy is to reduce the transmission of the virus by each and every HIV/AIDS patient and, as a result, stem the spread of infection. The following chart shows the activities of the antiretroviral clinics assisted directly by CUAMM.



"I lived with HIV for 11 years," recounted Edita. "In 2019, I went to the Health Center for HIV treatment in Ngokolo, Tanzania, where I received information about CLUBs, founded with the Test&Treat project. Things have changed since then. I learned the value of CLUBs: a group of people trained to support the facilities that provide antiretroviral drugs to the community, in villages where people live. Participating in CLUBs helped improve my health because, before, it took a long time to get to the health center to get the drugs needed for treatment. The introduction of these services helped me financially, and now I have a small business and earn money selling fruit and vegetables. My life has really improved."

Edita,
patient at the Ngokolo Health Center



MALARIA

	N. of malaria diagnoses	N. of laboratory-confirmed malaria diagnoses (% confirmed)	N. of malaria diagnoses <5 years
Ethiopia	341,149	152,339 (45%)	40,634
Central African Republic	23,356	- (-%)	21,145
Sierra Leone	149,488	80,695 (54%)	44,394
South Sudan	384,648	290,241 (75%)	80,885
Tanzania	1,353	1,334 (99%)	215
Uganda	973,039	947,592 (97%)	258,251
TOTAL	1,873,033	1,472,201 (79%)	445,524

TUBERCULOSIS

	Hospital	Patients diagnosed with tuberculosis	N. GenXpert tests conducted for MDR TB	N. TB_Xpert positive tests for MTB (% pos.)	Patients who tested rifampicin-resistant (% resistance)
Ethiopia	St. Luke Catholic Hospital	244	1,563	207 (13%)	4 (1.9%)
Tanzania	Tosamaganga Hospital	1,104	998	102 (10%)	3 (2.9%)
Uganda	Moroto Regional Referral Hospital	268	1008	61 (6%)	2 (3.3%)
	St. Kizito Hospital –Matany	344	3,427	154 (4%)	1 (0.6%)
TOTAL		1,960	6,996	524 (7.5%)	20 (3.8%)

HIV

	Hospital	Tested for HIV*	HIV positive (% positive)	Total n. of patients receiving antiretrovirals (new patients in 2023-2024)
Ethiopia	St. Luke Catholic Hospital	10,607	57 (1%)	1,652 (55)
Tanzania	Bugisi HC	2,052	92 (4%)	800 (92)
	Ngokolo HC	1,425	20 (1%)	193 (20)
	Tosamaganga Hospital	2,052	92 (4%)	7,019 (92)
Uganda	Aber hospital – Pope John XXIII	13,712	215 (2%)	5,007 (38)
	St. Kizito Hospital – Matany	12,546	54 (0%)	425 (46)
TOTAL		42,392	530 (1%)	15,096 (343)

		N. adolescents tested for HIV	HIV positive (% positive)	Adolescents with HIV receiving antiretrovirals
Mozambique	Beira	45,214	166 (0.4%)	n./a.
	Tete	138,186	611 (0.4%)	n./a.
Tanzania	Shinyanaga	5,393	42 (0.8%)	n./a.

ACUTE RESPIRATORY INFECTIONS

Acute respiratory infections are one of top **three causes of death in children under five**, a title shared with malaria and diarrhea. The table below shows cases of these diseases treated in the hospitals and districts where Doctors with Africa CUAMM operates.

DIARRHEAL DISEASES

Diarrheal diseases, especially in their most common form, bloodless diarrhea, are among the leading causes of death due to severe dehydration. This is especially true for children, whose lives are put in danger if they don't receive adequate, continuous rehydration, including oral rehydration when possible. 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

	N. of pneumonia diagnoses	N. of deaths due to pneumonia (% mortality)	N. of pneumonia diagnoses in under-5 children	N. of pneumonia deaths in under-5 children (% mortality)
Ethiopia	66,437	28 (0.04%)	28,996	15 (0.05%)
Central African Republic	4,905	65 (1.33%)	4,480	63 (1.41%)
Sierra Leone	16,820	67 (0.40%)	15,176	37 (0.24%)
South Sudan	228,859	42 (0.02%)	64,483	35 (0.05%)
Tanzania	64,820	25 (0.04%)	35,840	21 (0.06%)
Uganda	16,673	259 (1.55%)	13,095	137 (1.05%)
TOTAL	398,541	483 (0.12%)	162,225	304 (0.19%)

DIARRHEAL DISEASES

	N. of diarrhea diagnoses	N. of deaths due to diarrhea (% mortality)	N. of diarrhea diagnoses in under-5 children	N. of diarrhea deaths in under-5 children (% mortality)
Ethiopia	41,010	8 (0.02%)	19,736	4 (0.02%)
Central African Republic	3,256	20 (0.61%)	3,090	20 (0.65%)
Sierra Leone	12,143	34 (0.28%)	10,356	19 (0.18%)
South Sudan	105,699	15 (0.01%)	51,994	12 (0.02%)
Tanzania	10,239	13 (0.13%)	7,480	12 (0.16%)
Uganda	10,581	62 (0.59%)	8,893	42 (0.47%)
TOTAL	182,928	152 (0.08%)	101,549	109 (0.11%)

CHRONIC DISEASES

According to data from the World Health Organization (WHO, 2021), over 15 million people die prematurely every year due to **noncommunicable diseases** (NCDs) and 85% of those deaths occur in low to middle-income countries. It is estimated that chronic diseases will surpass transmissible diseases as a cause of death in Africa in 2030. Preventing and treating this group of emerging pathologies, including in low-income countries, has thus become a focus and goal of the **Sustainable Development Goals** (SDGs).

CERVICAL CANCER

Cervical cancer is the **second-most common cancer affecting women in Africa**, but it can be prevented with the human papillomavirus (HPV) vaccine, regular screenings and early diagnosis. CUAMM has been enacting projects to improve community awareness about the issue for several years, with the goal of offering cervical cancer screenings.

Our strategy is based on the “see-and-treat” approach, which entails acetic acid staining of the cervix followed by visual inspection (VIA) to identify potentially malignant lesions and immediately treat them with cryotherapy. In **Matany**, Uganda, HPV DNA testing has been introduced for all women who result positive after VIA screening, subsequently providing cryotherapy treatments only those who are HPV positive. As a result, fewer women undergo this treatment. Evaluation and treatment are done by trained nursing staff, based on a goal of evaluating 20% of at-risk women annually. In so doing, and by treating any small lesions found, including inflammatory ones, we hope to prevent them from becoming malignant. Our approach is therefore one of secondary prevention rather than curative care. More advanced forms of cervical cancer are treated surgically at the hospital, although with limited effectiveness because most patients come to the facility only after their tumors have reached an advanced stage and/or become inoperable. The following chart shows the 2024 data relative to activities conducted in the three hospitals receiving the most support. Overall, there was a decline over 2023 in the number of women treated after lesions were found during VIA. This is due to the number of women treated in Matany, which is now based on HPV-positive women instead of lesions found during VIA.

In general, however, such activities are still infrequent in the routine services offered by hospitals and health centers. For this reason, there is an even greater urgency for support, in order to ensure knowledge of and requests for services on the part of women and also on the part of medical staff.

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 their sheer quantity has meant poor case documentation. For some time now, however, **outpatient clinics** dedicated to chronically ill patients have been set up in some of these areas, making it possible to integrate AIDS patients into this broader category, thereby reducing the stigma attached to their specific disease. The chart that follows contains data from hospitals which have dedicated outpatient clinics and where hospitalizations are starting to be documented. It should be noted that, in **Sierra Leone and Mozambique**, a dedicated outpatient clinic has been operating since 2023 within the **WHO PEN-PLUS** framework. Moreover, in **Ethiopia and Mozambique**, a **program is underway to provide care for patients with Type 1 diabetes**.



“Knowledge is key, but it's also what most people lack. Many don't know how to read or write, and they don't know their rights. That's exactly why they receive healthcare only once it's too late. We want to improve that.”

Agnes Marah,
community activist for NCDs



Chronic diseases

27,264

Total visits

997

Hospitalizations

Cervical cancer

1,865

Women screened

122

VIA-positive individuals

120

% of VIA-positive individuals treated with cryotherapy

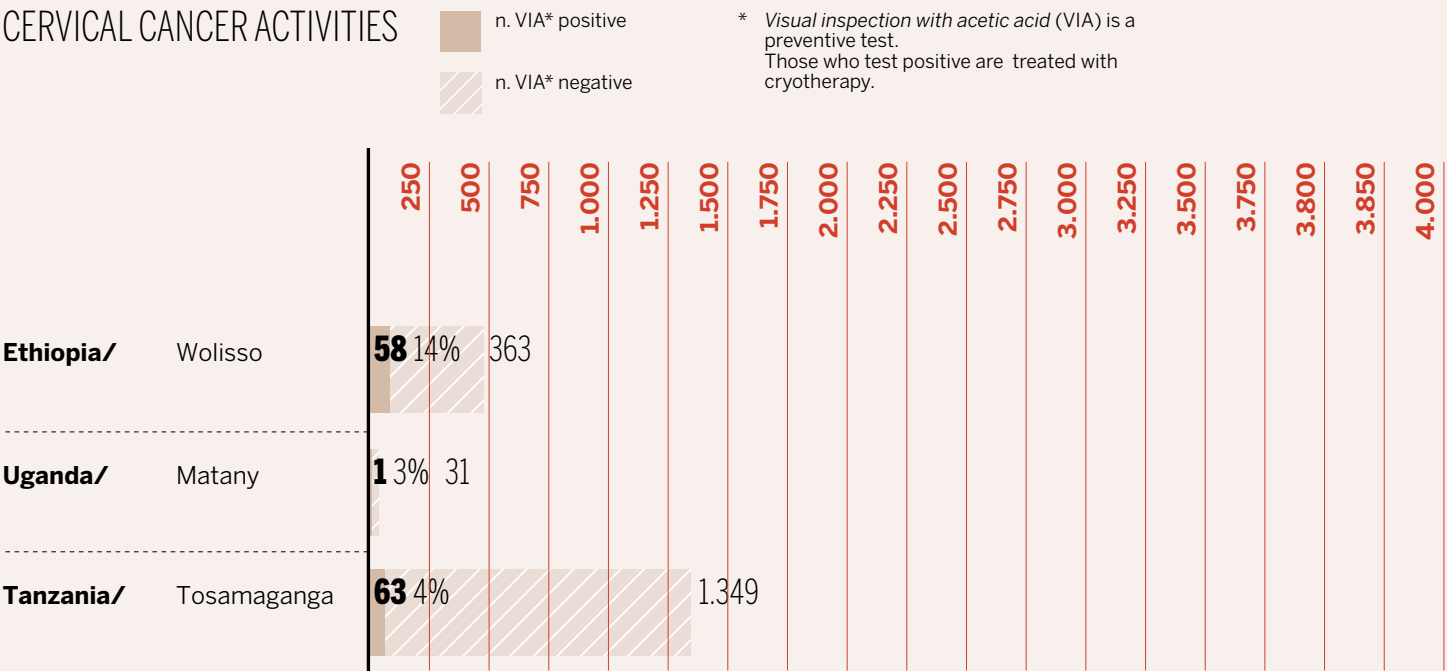


DIABETES, HYPERTENSION
AND HEART DISEASE

		Outpatient visits			Hospitalizations		
	Hospital	Diabetes	Hypertension	Heart disease	Diabetes	Heart disease	Stroke
Ethiopia	Wolisso	1,440	2,058	793	97	115	18
	other hospitals	3,028	6,073	96	29	0	4
Tanzania	Tosamaganga	1,872	4138	306	116	180	60
Uganda	Matany	427	1,667		107	6	9
	Aber	289	1,140	24	102	17	86
Sierra Leone	Pujehun	735	2,446	190	n/a	n/a	n/a
TOTAL		8,333	17,522	1,409	502	318	177

		Diabetes and hypertension	
	Hospital	Screening	New cases (% of total tested)
Mozambique	Zambezia	25,404	1,852 (7%)
	Maputo	68,324	1,125 (2%)
	Sofala	30,314	1,553 (5%)

CERVICAL CANCER ACTIVITIES



In all the different provinces of **Mozambique**, a total of **52,335 screenings** were carried out, **7,025 of which (13%) were VIA-positive**.

INTERPRETING THE DATA

The data for 2024 were largely stable, though there was a bit of variation in the contexts compared to 2023, and an increase in the total deriving from the addition of the NCD Clinic in Pujehun. Despite their relative stability, the data available remain difficult to compare and don't provide a full picture of the scale of the problem.

TRAINING AND RESEARCH



THE CRUCIAL ROLE OF TRAINING

Training health personnel is **crucial** for **improving and strengthening both the quality of care and the ability to provide health services**. In addition to the staff training that Doctors with Africa CUAMM provides every day while working alongside local health workers and authorities, we also held numerous **refresher courses** throughout the year, with the participation of some **4,876 individuals**, including community agents, nurses, midwives, doctors and healthcare managers. In 2024, these training activities led to diplomas for **206 health professionals**, including **44 doctors** who graduated from the School of Medicine at the University of Mozambique in Beira.

“Training allowed me to be updated on best practices and new protocols to follow, like newborn examinations or looking for signs of danger in mothers. These opportunities are also a chance for exchange of ideas and dialog.”

Welekoi Pierre
nurse
Central African Republic



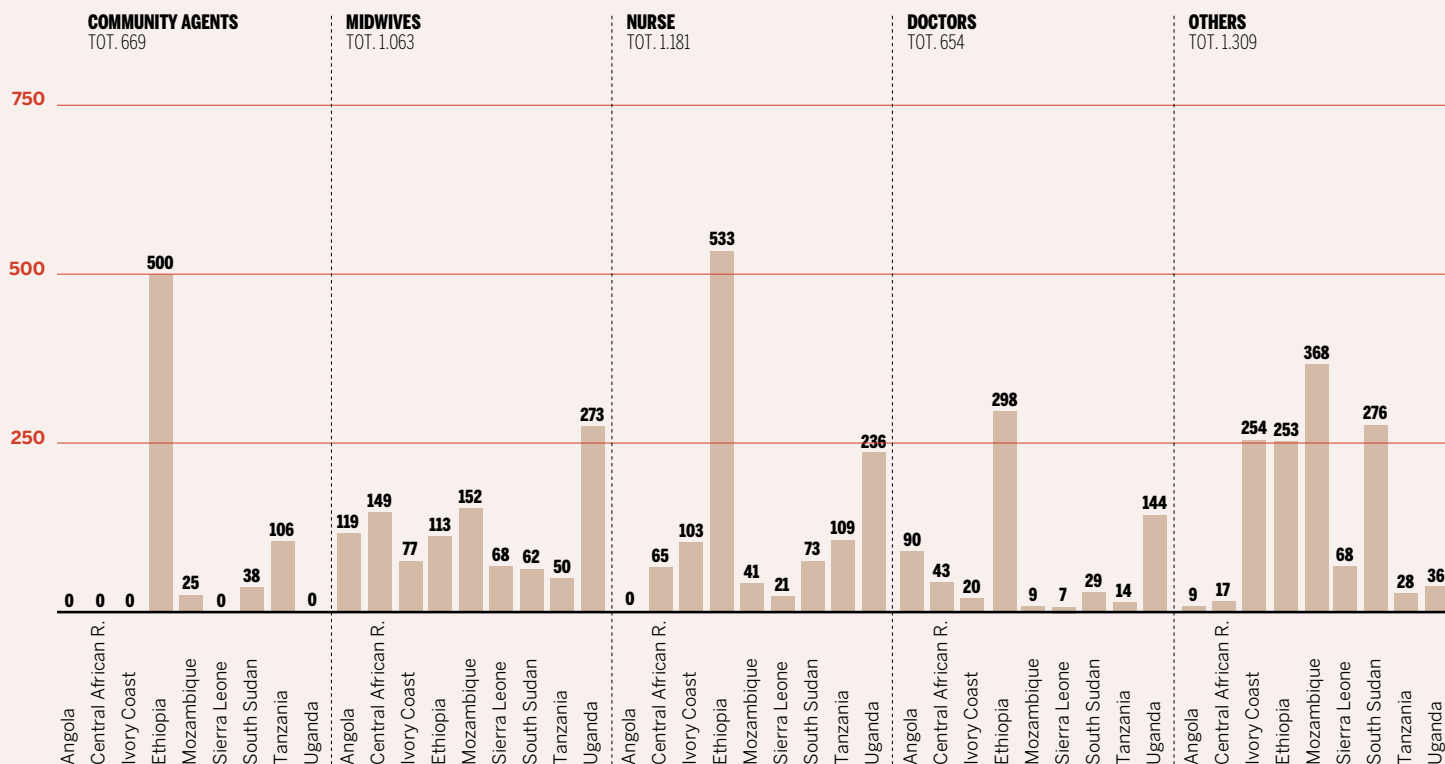
4,876
total individuals
trained

206
health professional
graduates

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

	Hospital and district	Training objectives	Trained in the second year
Angola	Chiulo Hospital / Ombadja District	10	9
Ethiopia	Wolisso Hospital / Wolisso, Goro and Wonchi Districts	100	106
	Gambella Regional Hospital / Gambella District		
Central African Republic	Bangui Pediatric University Hospital Complex	20	17
Sierra Leone	Pujehun Hospital	50	68
	Princess Christian Maternity Hospital, Freetown		
South Sudan	Yirol Hospital and Yirol West District	50	80
	Rumbek Hospital / Rumbek East, Center and North Districts		
	Lui Hospital / Mundri East District		
Tanzania	Tosamaganga Hospital / Iringa Rural District	30	24
Uganda	Aber Hospital and Oyam District	40	36
	Matany Hospital and Napack District		
TOTAL SECOND YEAR		300	340

TRAINING THROUGH SHORT COURSES OR RESIDENCIES



PROFESSIONAL AND UNIVERSITY- LEVEL TRAINING

	Facility	Graduates
Ethiopia	School for nurses and midwives (Wolisso)	37 midwives and 30 nurses
Mozambique	University of Brera - School of Medicine	44 doctors
South Sudan	School for nurses and midwives (Rumbek)	20 midwives and 30 nurses
Uganda	School for nurses and midwives (Matany)	20 midwives and 25 nurses
TOTAL		206 HEALTH PROFESSIONALS

MONITORING, EVALUATION AND RESEARCH

Year after year, the “toolkit” of Doctors with Africa CUAMM to uphold its commitment to the rigorous and continuous quantification of its activities and the results of its on-the-ground projects is enriched. The **use of the District Health Information System 2 (DHIS2)** is well-established by now, making it possible to collect the project's monitoring data immediately, intuitively and regularly, and to share them with the personnel involved. This tool offers real-time monitoring of data, improved abilities to use the information shared for program goals, and standardized management of data coming from all partner countries.

The system currently includes 26 datasets, covering CUAMM's main areas of intervention. The DHIS2 is also used as an **effective tool with which to monitor the project's KPIs**. Currently, **11 projects regularly use this platform**, with the goal of extending its use also to other medium to long-term projects. Efforts have been made to expand the patient-level data collection system in order to monitor patients with chronic diseases, using the **Epilinfo platform in Tanzania and Sierra Leone**.

A pilot project is underway to test the use of the DHIS2 *Tracker* in **Mozambique** as part of a larger project focused on diabetes, hypertension and cervical cancer.

The collection of data in **Neonatal Intensive Care Units (NICUs)** through the *Critical Care Registry* in partnership with the *Critical Care Asia Africa Network* was launched in **Uganda** and continued in **Ethiopia, Tanzania and Mozambique** in 2024.

This registry makes it possible to continuously collect and monitor the condition of hospitalized newborns, with the goal of improving services and care for critical patients.

OPERATIONAL RESEARCH IN THE FIELD

In 2024, CUAMM published **31 studies in international magazines** with elevated scientific impact, the tangible outcome of multidisciplinary research that engages the countries in which CUAMM operates. This joint, synergistic effort, the result of important international collaboration, focused on maternal and child health in 2024, with studies on safe and accessible childbirth and on neonatology.

The spectrum of research published in 2024 also expanded **to the analysis of chronic diseases and new models** for their management. In-depth looks at **infectious diseases**, such as malaria and tuberculosis, and **health systems** in a broad sense have enriched CUAMM's scientific output this year, also considering new health determinants, such as those arising from **climate change** or those of a **social-cultural nature**.

The magazines which have published the work of Doctors with Africa CUAMM, including *BMJ* and *Frontiers in Public Health*, confirm its authority on the matter. Moreover, our research projects have been presented to industry experts and professionals during oral presentations and poster sessions at conferences in Italy and abroad, such as the *Eastern Africa ECD Conference* and the *European Congress of Clinical Microbiology and Infectious Diseases*.

2024 offered the chance to try out a **new way to get people involved**, namely “Research for Quality Healthcare Cooperation: Experience, Evidence and Perspectives from Africa,” a public event on operational research which brought experts and young researchers from Italy and Africa to Padua while shining a spotlight on new topics.

This event demonstrates that **research is an implementation tool and a strategic lever to increasingly incorporate** into in-the-field activities, nationally and internationally, for high-quality healthcare development cooperation.

Our research can be downloaded for free on:
→ <https://doctorswithafrica.org/en/fieldresearch/>



THEMATIC AREAS



**maternal
and child
health**



**infectious
and
tropical
diseases**



**universal
coverage
and
equity**



nutrition



**chronic
diseases**



RESULTS IN 2024

5
main thematic areas

31
studies published

274
authors (from Italy,
Africa and int'l) who
contributed to
CUAMM's research

118
partnerships with
public and private
research centers,
international
universities,
institutions and
hospitals, including:

63
African partners

118
research
partners

18
in other
countries

3
in Europe

34
in Italy

63
in Africa

279
total studies
published
since 2010
including
31
in 2024

FOCUS ON HOSPITALS

AT A GLANCE

21

Hospitals analyzed
by Doctors with Africa
CUAMM

1

Angola

3

Ethiopia

2

Mozambique

2

Sierra Leone

3

South Sudan

3

Central African
Republic

2

Tanzania

5

Uganda

In 2024, Doctors with Africa CUAMM helped manage **21 hospitals** in Africa:
1 in Angola, 3 in Ethiopia, 2 in Mozambique, 2 in Sierra Leone, 3 in the Central African Republic, 3 in South Sudan, 1 in Tanzania, and 5 in Uganda.

That same year, CUAMM was also present in **36 other hospitals**, providing a smaller contribution, though more sharply focused on a single type of service. In these countries, and the whole continent in general, **hospitals are the main structures** to provide health services, especially more complex services such as surgery. **Evaluating their work** is therefore important for Doctors with Africa CUAMM, as we believe that access to treatment is a fundamental human right, especially for the more vulnerable segments of the population.

The **volume of health services** provided by a hospital can be measured through via a **Standard Unit of Output (SUO)**.

This composite index uses **outpatient contacts (OP)** as its unit of measurement and **assigns relative weights in terms of the cost** of the other standard services provided by hospitals: hospitalizations, deliveries, immunizations, and pre-and postnatal visits.

For more information, see the methodological notes on page 7. Using this index makes it possible for hospital managers and boards of directors to plan activities in a reasoned manner, to make 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 gives rise to four indicators:

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



Chiulo
Angola



Wolisso
Ethiopia



Gambella RH
Ethiopia



Gambella Primary Hospital
Ethiopia



Beira
Mozambique



Montepuez
Mozambique



Bossangoa
Central African Republic



Bangui
Central African Republic



Kouli
Central African Republic



Pujehun CMI
Sierra Leone



PCMH
Sierra Leone



Lui
South Sudan



Yirol
South Sudan



Rumbek
South Sudan



Dodoma
Tanzania



Tosamaganga
Tanzania



Aber
Uganda



Amudat
Uganda



Matany
Uganda



Moroto
Uganda



Kaabong
Uganda

SUO

The formula to calculate the SUO (OP) reflects the relative weights of various hospital services:

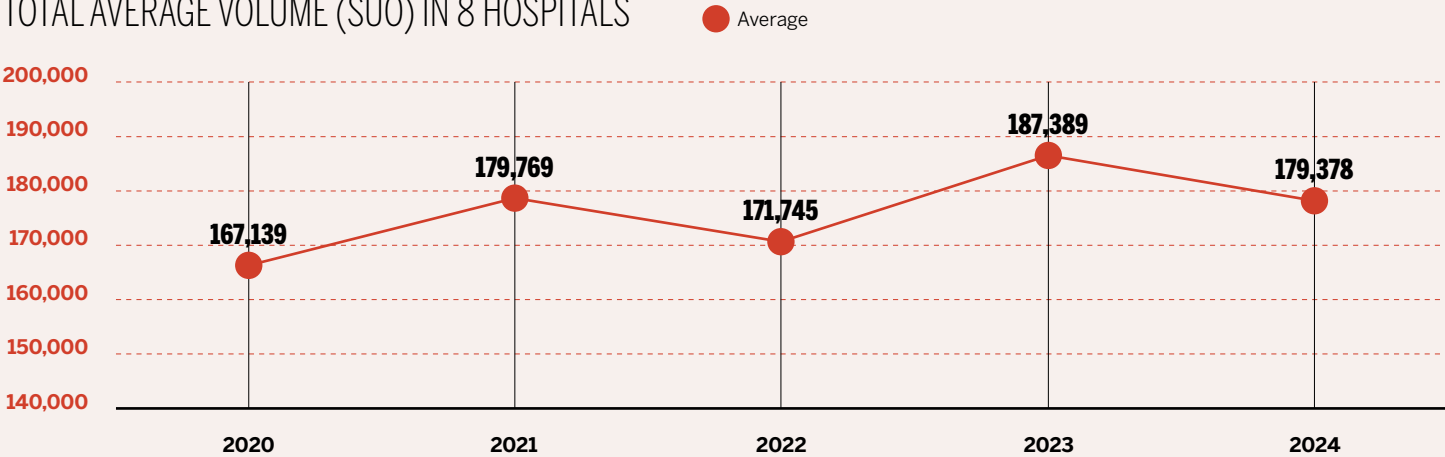
$$\text{SUO-OP} = (15 \times \text{hospitalizations}) + (1 \times \text{outpatient contacts}) + (5 \times \text{deliveries}) + (0.2 \times \text{immunizations}) + (0.5 \times \text{pre and post-natal visits})$$

PRODUCTIVITY

Overall hospital *performance* is assessed by **averaging the results of the eight hospitals** for which **data has been consistently available over the last five years**. They are the same hospitals examined in the 2023 annual report. In 2024 there was an **overall drop of 1.7% compared to 2023**, mainly attributable to the **decrease in activities at Aber Hospital in Uganda** and, to a lesser degree, in **South Sudan and at Pujehun in Sierra Leone**. It is hard to pinpoint

the cause of the drop in activity at Aber Hospital, which, upon closer inspection, returned to values that are more in line with years prior to 2023. Perhaps it is due to the improvement in the distribution of antimalarial drugs, which were lacking the year prior and which ostensibly led to an increase in the number of people treated for serious cases due to a lack of treatment in the outskirts.

TOTAL AVERAGE VOLUME (SUO) IN 8 HOSPITALS

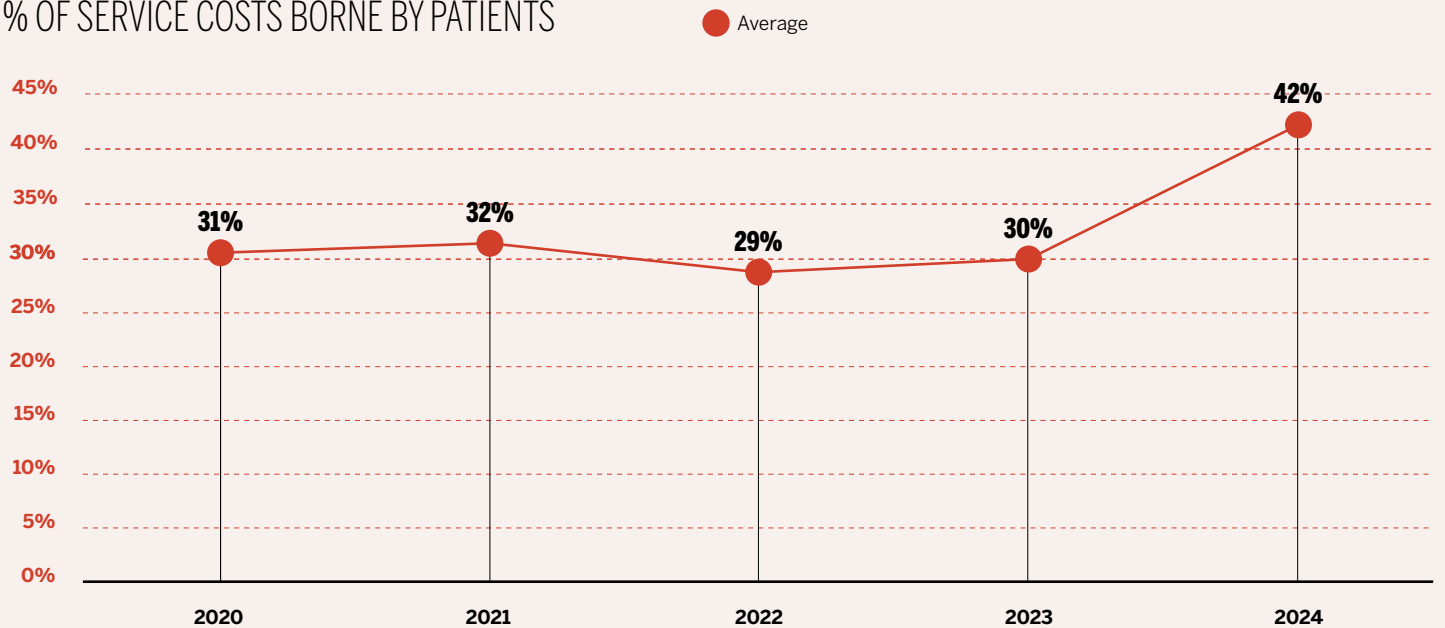


EQUITY

The *cost of the service borne by the patient* is the **ratio of user-derived revenue to total costs**. In the past year, **the average cost borne by patients increased** considerably, going **from 30.4% to 41.6%** year over year. In **Tosamaganga** and **Aber**, that increase was notable, 24% and 16% respectively: a factor that, at least for Aber, could have a negative knock-on effect on overall volumes, as indicated in the section on productivity.

A **6% increase was seen in Wolisso**. The increase in costs borne by patients will be monitored for the potential impact on the number of people treated and activity volumes, as in the case of Wolisso, where the depreciation of the local currency has been felt in terms of costs (as indicated below) – albeit to a limited degree for now.

% OF SERVICE COSTS BORNE BY PATIENTS

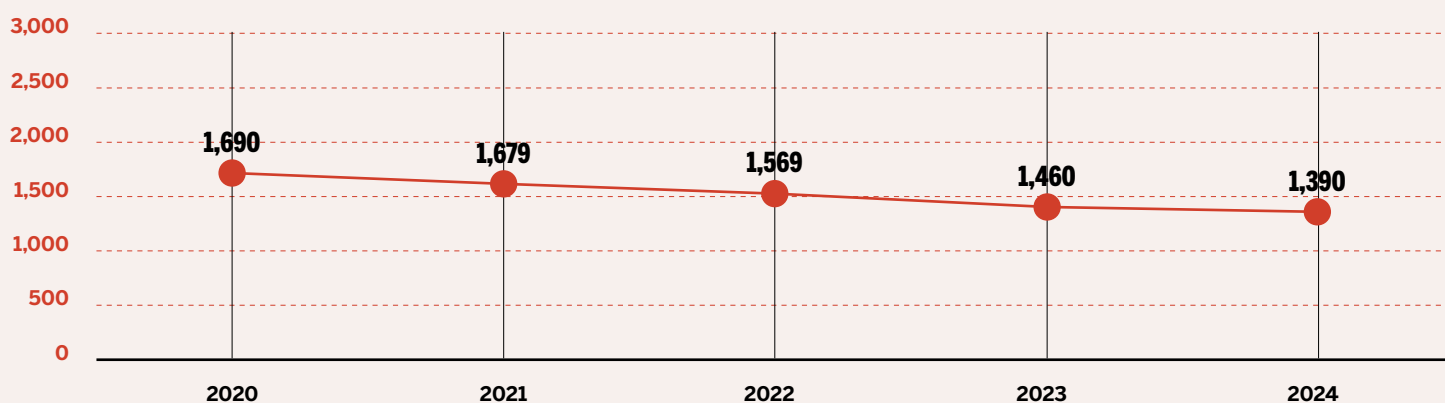


STAFF EFFICIENCY

In terms of *staff efficiency*, calculated as the ratio between total SUO and the number of qualified staff members, there was a **small decline of -2.6%**. This is correlated to **the increase of qualified staff**, compared to **a slight drop in** overall activity volume. This confirms the continuous increase in staff size and thus the possible **improvement of the quality** of services, at least

depending on the availability of a greater number of qualified professionals, an element which in part justifies the overall increase in costs.

UNITS DELIVERED BY INDIVIDUAL HEALTH WORKERS



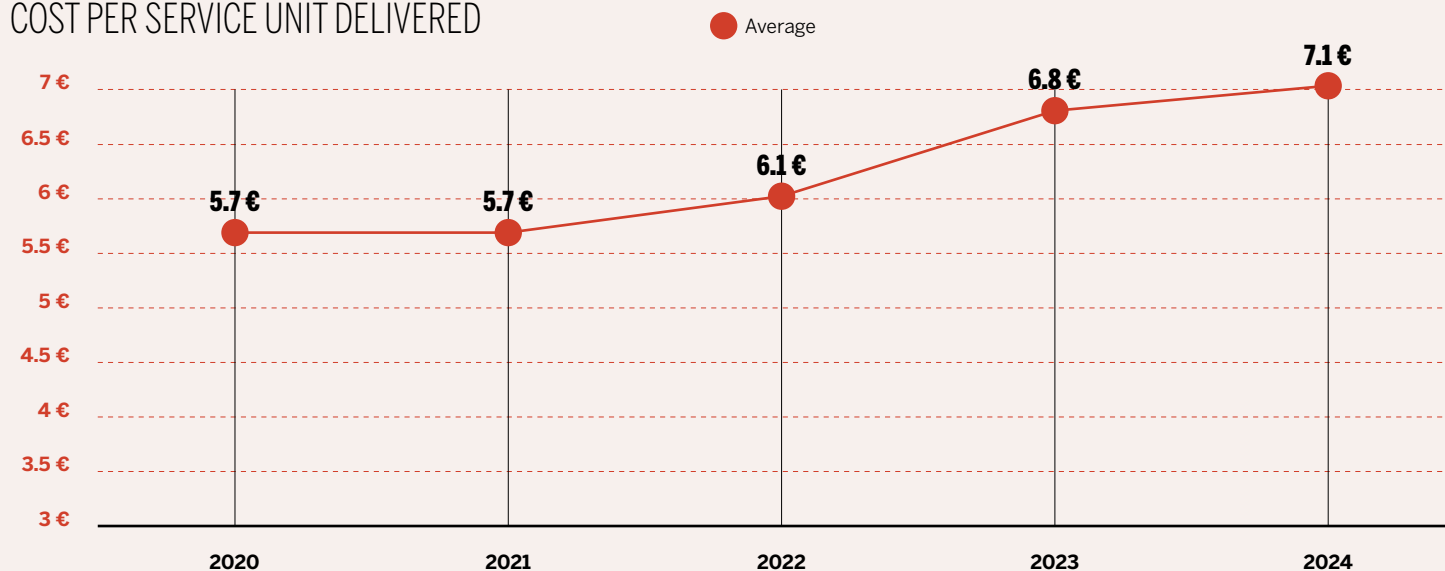
MANAGEMENT EFFICIENCY

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 6.90 to 7.10 euros/SUO**. This **3.1% increase** can be explained by constantly **rising production costs**, due both to **higher drug and energy prices** and the greater number of **qualified personnel**, as mentioned above. That increase is still moderate due to the significant reduction seen in Wolisso, linked to the sudden devaluation of the local currency (100% starting in August). As a result, at least for almost half of the year, this led to a drop in the absolute values in euros: salary expenses

remained unchanged until January 2025 and the price increases for goods and drugs was limited.

In conclusion, **2024 saw a further increase in production costs**, linked to continuously rising prices and the international economic crisis. Covering these higher production costs will continue to be a challenge, especially given the lower levels of outside development aid being provided to the countries in need of it. For now, we are starting to see modest increases in costs paid by patients.

COST PER SERVICE UNIT DELIVERED



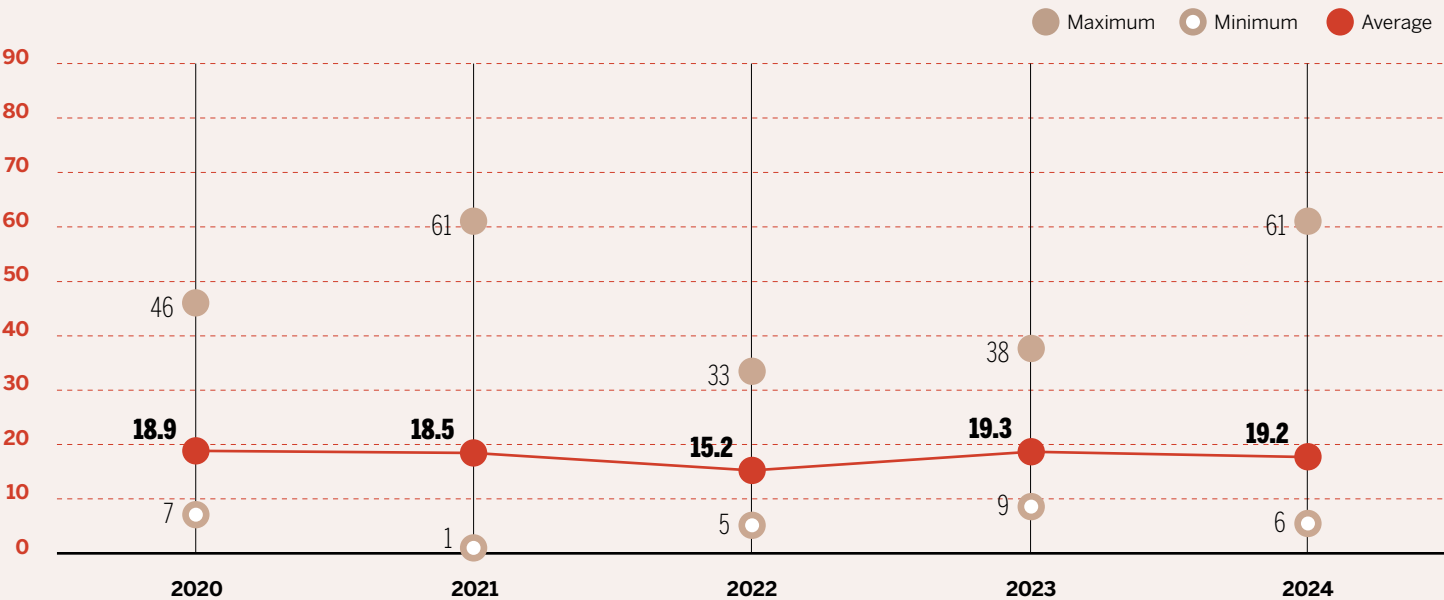
THE QUALITY OF HOSPITAL SERVICES

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**. Indeed, it isn't enough to guarantee low-cost services if they're inadequate. Although it isn't easy to measure the overall performance of a hospital, and even more challenging to measure the quality of the services it provides, we have used the following indicators to assess the **quality of obstetric care** since 2012:

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

STILLBIRTH RATE PER 1,000 LIVE BIRTHS

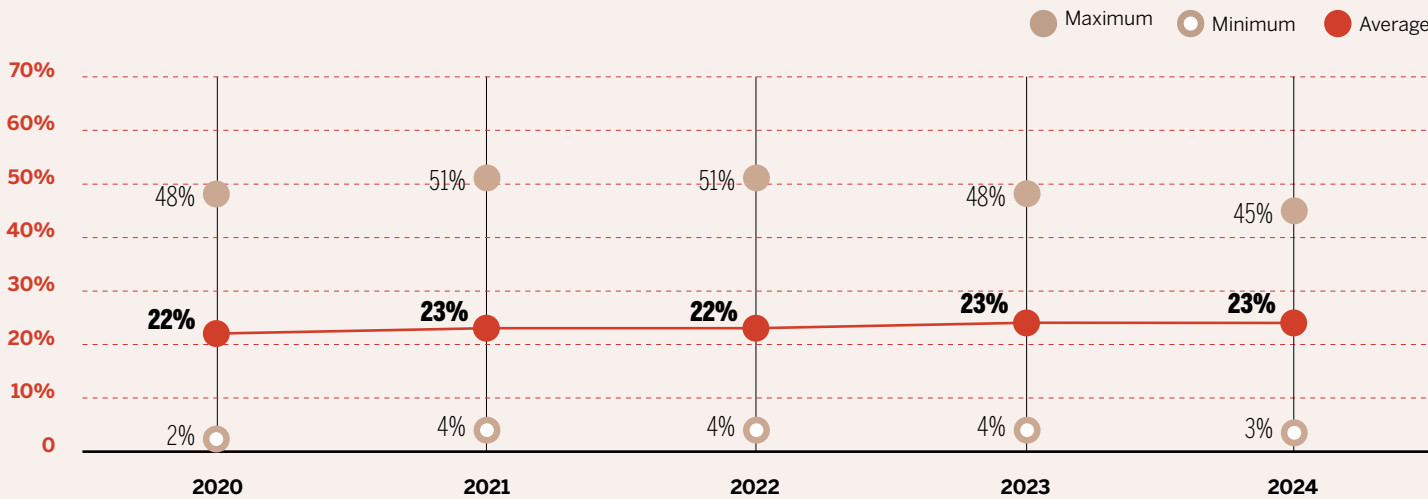
This indicator refers specifically **to how childbirth is handled during the labor and expulsion phases**. The data thus are necessary to assess how suitable and timely the intervention was, and do not include cases of stillbirth already ascertained prior to labor. **In 2024, the rate essentially remained stable, going from 19.3 per 1,000 to 19.2 per 1,000.**



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, in different countries, women may have different physical traits and thus require a Cesarean section with greater or lesser frequency. In addition, if a hospital is the only facility available for patients with complications, it usually must handle a larger concentration of complicated

deliveries, and hence also a greater number of Cesarean sections, based on the degree of efficiency of the referral system. Lastly, surgeons and gynecologists in various settings may also have different “practices” relative to the performance of C-sections. In 2024, **the average Cesarean section rate was unchanged**, with small variations or stability within every single hospital.



MATERNAL MORTALITY RATE 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 goal in the proper management of major obstetric complications. However, the figures shown for the hospitals listed here do not necessarily reflect poor quality of care; it is instead very likely that they were overestimated due to inadequate health information systems that are unable to accurately track all of the major obstetric complications treated. The frequent changes in recording criteria may be related to doctor turnover, which fails to guarantee the continuity and uniform application of diagnostic criteria. Yet even with these limits, the 2024 data highlight **substantial stability in almost all contexts, with values around 1%**. The only exceptions are Aber in Uganda, which rose from **1% to 1.6%**, and **Yirol**, where there was a notable drop from **2.3% to 0.2%**. However, the difficulty outlined above in gathering consistent, comparable data over time should be mentioned.

	2020	2021	2022	2023	2024
Aber	1.1%	0.9%	0.7%	1%	1.6%
Matany	0.7%	0.6%	0.3%	0.4%	0.5%
Tosamaganga	0.6%	0.2%	0.6%	1%	0.7%
Wolisso	1.0%	0.1%	0.3%	0.3%	0.4%
Gambella Regional	1.0%	1.2%	n/a	0.9%	0.3%
Gambella Primary Hospital		0.8%	n/a	2.8%	1.0%
Chiulo	n/a	2.3%	2.0%	1%	1.4%
Pujehun	3.3%	1.3%	2.4%	1.6%	1.7%
Yirol	1.4%	0.0%	0.9%	2.3%	0.2%
Lui	1.3%	0.6%	1.7%	n/a	n/a
Cueibet	0.7%	0.0%	n/a	0.2%	0.6%
Rumbek	1.0%	0.9%	1.4%	2.8%	3.0%
PCMH	1.6%	1.0%	1.3%	1.4%	1.3%
Beira	n/a	1.4%	n/a	3.1%	3.2%
Montepuez	0.7%	1.7%	1.0%	n/a	n/a

2024 HOSPITAL DATA

*Hospitals where CUAMM handles maternity-related services only

Country	Hospital Name	Beds	Outpatient visits	Hospital admissions	Prenatal visits	Total n. of deliveries	C-sections	N. of vaccinations
UGANDA	Matany	250	37,973	14,636	7,958	1,790	460	35,982
	Aber	178	33,154	11,901	5,623	3,473	1,450	27,250
	Kaabong	136	44,187	8,987	2,992	937	201	12,780
	Amudat	112	12,538	3,941	1,747	601	207	12,822
	Moroto	245	78,188	13,654	3,961	1,216	521	11,091
TANZANIA	Tosamaganga	165	47,356	8,363	3,388	2,956	1,272	10,361
ETHIOPIA	Wolisso	163	72,270	10,397	8,875	3,453	689	13,463
	Gambella RH*	124	70,328	5,645	3,277	1,749	241	6,586
	Gambella Primary Hospital	50	69,152	3,779	3,709	1,531	138	6,221
ANGOLA	Chiulo	234	36,902	4,500	6,737	1,963	147	17,405
SOUTH SUDAN	Lui	102	24,670	4,854	1,153	576	84	2,635
	Yirol	105	28,321	9,350	9,786	1,592	78	13,473
	Rumbek	76	5,741	15,347	13,854	3,281	86	13,875
SIERRA LEONE	Pujehun CMI	59	4,207	3,885	1,464	1,214	446	969
	PCMH*	125	17,609	9,249	32,238	7,563	3,383	6,881
MOZAMBIQUE	Montepuez	134	13,255	8,105	n/a	5,442	n/a	n/a
	Beira	823	185,667	23,915	n/a	6,093	2,704	n/a
CENTRAL AFRICAN REPUBLIC	Bangui Pediatric Hospital	257	50,349	11,449	0	0	0	898
	Bossongoa	122	10,046	8,008	999	1,185	225	7,117
	Kuoi	30	3,314	1,022	599	353	24	1,422
TOTAL		3,490	845,227	180,987	108,360	46,968	12,356	201,231



FUNDRAISING IN ITALY AND ABROAD





FUNDRAISING AND COMMUNITY RELATIONS IN ITALY

Our Community Relations and Fundraising division plays a crucial role in collecting funds and strengthening the aid network for humanitarian activities in Africa. By building long-lasting alliances, the development of strategic collaborations and awareness raising among an increasingly large number of individuals and organizers, we aim to concretely support on-the-ground interventions.

Our support network extends across Italy thanks to the tireless dedication of **39 groups of volunteers around the country**. These groups are actively engaged in the organization of events, awareness-raising campaigns and special projects.

Along with private donors, organizations, associations, foundations, entities and businesses, they make a tangible difference in donations and increasing the visibility of the causes we support.

SUPPORT GROUPS AND TRAINING IN ITALY

Our support groups are an invaluable resource made up of an extraordinary network of **volunteers who dedicate their time, passion and skills to support the causes** of Doctors with Africa CUAMM in Italy. Many of them are operators who, bolstered by their experience on missions in Africa, chose to continue to actively make a difference, even in their homeland. They bring their personal experience and contagious enthusiasm with them, so that the voice of Africa can reverberate and to raise awareness about the lived reality of vulnerable populations.

These groups are a fundamental source of support to promote and sustain **events, initiatives and special projects in different parts of Italy, aimed at prevention and healthcare for the poorest** factions of society. Their commitment goes beyond awareness raising in their communities: it concretely contributes to fundraising, guaranteeing that resources reach those who need it most.

In 2024, **5,452 volunteers** got involved in different initiatives promoted by support groups, a significant number which attests to the dedication of the network. This year as in the past, we've organized **two important meetings**, one in Pisa and one in Padua, open to all our volunteers. At these events, attendees are updated on developments regarding our projects in Africa and together we plan future awareness-raising and fundraising activities in Italy. They are also precious **opportunities for collective growth**, a chance to share meaningful experiences and to reinforce connections between volunteers and missions in Africa.

The tireless work of our volunteers is essential not just for the success of local initiatives, but also for the continuous **strengthening of charitable networks and long-term support for our humanitarian aid efforts**. Thanks to their invaluable contributions, we can efficiently continue to raise awareness and funds, weaving a charitable network which extends well beyond the borders of Africa.

Top:
Group conference in Pisa,
May 18-19

Below:
Group conference in Padua,
September 14



SNAPSHOT
2024

39

support groups

14

regions involved

2

national group
meetings

5,452

volunteers

2024 CUAMM SUPPORT GROUPS

LIGURIA

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Contact person: Beatrice Crosa Lenz

Doctors with Africa CUAMM Piedmont

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Contact person: Giuseppe Ferro

TRENTINO ALTO ADIGE

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Contact person: Carmelo Fanelli

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Doctors with Africa CUAMM Padua Hills Branch

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Doctors with Africa CUAMM

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Contact person: Daniela Brunelli

Doctors with Africa CUAMM

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Contact person: Mauro Fattorini

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Contact person: Michele Orlando Padua

Railway Workers with Africa

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Contact person: Nicola Samà
Vicenza

APULIA

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Doctors with Africa CUAMM Salento

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Contact person: Susanna Coccioli

JOIN US!

Contact the CUAMM group closest to you or form a new one yourself.

For more information, call +39 049 7991899 or write to e.pasqual@cuamm.org

EVENTS

Events are a fundamental pillar for our Community Relations and Fundraising division. They provide precious **opportunities to spread the word about CUAMM's mission** and to engage an ever-larger public. These events are crucial not only to raise awareness in the community about our activities, but also to strengthen ties with the numerous entities in the region, whether public or private. Most of these events are made possible thanks to the enthusiasm and effort of the volunteers of CUAMM's **support groups**, which are the true backbone of many of our activities, or the invaluable collaboration of other supporting entities, such as associations, Rotary Clubs, foundations and companies. The variety of events is broad and encompasses different forms of participation: from charitable happy hours to book presentations, from university conventions to athletic competitions, from spokespersons at local parishes to corporate events. Every event is designed to **engage different audiences and to promote active participation**, creating spaces for the exchange of ideas and reflection on the projects underway. Thanks to the energy and the dedication of volunteers and our local partners, each event is transformed into a prime opportunity for the growth of Doctors with Africa CUAMM and all other entities involved.

IN 2024

	Events organized
Northeast Italy Friuli Venezia Giulia, Veneto and Trentino Regions	303
Northwest Italy Lombardy, Piedmont, Valle D'Aosta and Liguria	151
Central-Northern Italy Emilia Romagna and Tuscany	68
Central and Southern Italy From Marche to Sardinia and Sicily	20
TOTAL	542

**"UNTIL THE LAST MILE"
EXHIBIT**
MILAN, MAY 11, 2024

Opening event for the Until the Last Mile photography exhibit in Milan, a journey through images and text to discover CUAMM's activities in Africa. A journey into the last mile of care and of constant, persistent and tenacious dedication to the most vulnerable segments of the population: mothers and children.

**DEPARTMENT IN MEMORY
OF FRANCESCO CANOVA /
UPSIDE-DOWN
VIEWPOINTS EXHIBIT**
BASSANO DEL GRAPPA,
MAY 16, 2024

The Hospital of Bassano del Grappa has named the Department of Pulmonology after Francesco Canova. To mark the event, the exhibition Upside-down Viewpoints, a collection of photographs taken from the historical archive of Doctors with Africa CUAMM

**THE VIEW FROM HERE |
FROM TUSCANY
TO AFRICA, CUAMM'S
COMMITMENT**
PISA, MAY 18, 2024

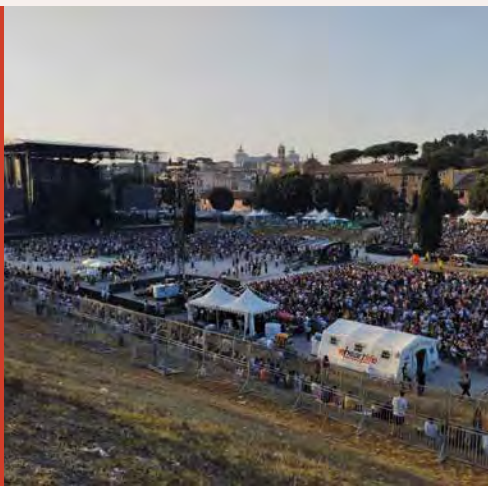
Doctors with Africa CUAMM and the Department of Clinical and Experimental Medicine at the University of Pisa have organized a local event to present the NGO's activities and those of its Tuscan supporters in its most fragile partner countries.

**RESEARCH FOR
QUALITY HEALTHCARE
DEVELOPMENT AID**
PADUA, JUNE 8, 2024

Discussions about operational research and the effort and professionalism which guides it, at Research for Quality Healthcare Development Aid: Experience, Evidence and Perspectives from Africa, the event held at the Aula Magna of the University of Padua.

CIRCUS MAXIMUS
ROME,
JULY 6, 2024

The return of Fabi, Silvestri and Gazzè with a joint concert in July of 2024 to celebrate ten years of *Il Padrone della Festa*, the album written and played together after their trip to South Sudan with CUAMM.



"DREAMING UNDER THE STARS" DINNER, 5TH EDITION
CAMPOSAMPIERO,
JULY 11, 2024

The 5th edition of the "Dreaming Under the Stars" dinner, a must-attend event for an evening of community and good food to support Doctors with Africa CUAMM's projects.



FESTIVAL FRANCESCO
BOLOGNA,
SEPTEMBER 29, 2024

The conversation between Father Dante Carraro, Doctors with Africa CUAMM, and Alberto Mantovani, immunologist and Scientific Director at Humanitas, on the connections and interdependencies between humanitarian missions and scientific research, two essential aspects when providing healthcare to the most fragile populations.



CONCERT AT THE UNIVERSITY OF MILAN AULA MAGNA
MILAN,
OCTOBER 29, 2024

An orchestra concert at the University of Milan to benefit Doctors with Africa CUAMM.



CHRISTMAS ROOMS DINNER
CODOGNO,
NOVEMBER 12, 2024

Christmas Dinner in Codogno to benefit Doctors with Africa CUAMM. Coming together to celebrate the arrival of Christmas, with food, music and solidarity.



MARATOMBOLA
OSTIA,
DECEMBER 22, 2024

Annual event in Ostia for the marathon, which has become a recurrent pre-Christmas race for runners from central Italy.



OUR BOOKS

WITH AFRICA BOOK PRESENTATION
UDINE,
OCTOBER 17, 2024

Presentation of *With Africa. Stories and People who are Building the Future* by Giuseppe Ragogna. The event was attended by Father Dante Carraro and Margherita Baracetti, a pediatric intern in Wolisso, Ethiopia from December 2023 to May 2024.



AFRICA, THERE AND BACK BOOK PRESENTATION BUON VIVERE FESTIVAL
FORLÌ,
SEPTEMBER 21-
OCTOBER 1, 2024

15th edition of the Buon Vivere Festival - R(e)volution | CUAMM doctors and volunteers talk about their experiences to the local community through the presentation of *Africa, There And Back*.



SPECIAL PROJECTS IN ITALY

FIT4CARE CONSTANT DEDICATION TO THE WELLNESS OF HEALTH PROFESSIONALS

Launched by Doctors with Africa CUAMM during the COVID-19 pandemic, the Fit4Care program aims to help improve the **mental and physical wellbeing of health professionals**. Through targeted classes, participants in the program learn **physical preparedness, stretching, nutrition and breathing techniques** which are essential facing the daily challenges of work and life. The healthcare emergency caused by the pandemic has come to an end, but Doctors with Africa CUAMM continues to prioritize the mental and physical well-being of those who care for others. For this reason, we proceeded with Fit4Care lessons throughout 2024, both in person and online, for the volunteers of healthcare organizations, medical students and interns.

FROM 2021 TO 2024:

112 courses organized

14 regions involved

2,000+ health professionals trained (between 30 and 65)

SPECIAL PROJECTS IN 2024

3

special projects

14

regions involved



PINEROLO (TO): HELPING IMMIGRANT COMMUNITIES

The Piedmont support group continued its precious work to provide assistance to **immigrant communities** in and around Turin in 2024. Volunteers organized four educational meetings on crucial topics, such as **personal health, first aid, hygiene and prevention**. Moreover, the group provided support through a "medical mediation" desk, assisting 14 foreigners residing in or near Pinerolo, outside Turin, to receive the care they need.



VOLUNTEERING AT THE IMMIGRATION OFFICE OF PADUA

2024 also saw the collaboration of Doctors with Africa CUAMM and the **Immigration Office of Padua**, with the organization's volunteers providing essential support to the Immigration Office, which processes **350 to 450 people** per day, with peaks of **500** at times. More than 15 volunteers contributed more than 20,000 hours of their time in total to ensure a constant presence from Monday to Friday, broken down into shifts. Their efforts go beyond the management of the initial phase, aimed at facilitating the acceptance of paperwork and streamlining processes at the desks, to include over time support for the call center and back office activities. Since the collaboration between CUAMM and the Immigration Office of Padua was launched in March 2022 after the outbreak of war in Ukraine, **circa 400,000 people have been helped**, proof of the concrete dedication to immigration practices that are attentive and respectful at a time of elevated vulnerability.



WITH ITALY'S MOST VULNERABLE POPULATIONS: ACTIVITIES IN BARI AND THE SLUMS OF FOGGIA

In 2024, to bolster the **Su.Pr.Eme Italia** project which brought our *mobile clinics to the slums of Foggia*, Doctors with Africa CUAMM has held training classes on infectious diseases sexually transmitted infections for operators and communities in collaboration with the Infectious Diseases Unit at Bari Hospital and with the financial support of Gilead, distributed as part of **B.R.I.D.G.E. Build Right Information on Infectious Diseases Generating Education: Reducing the stigma and protecting health in Apulia's vulnerable populations.**

Despite efforts to break down inequality in healthcare in Europe and Italy, vulnerable populations (including economically disadvantaged groups, minorities, immigrants, the elderly, the unhoused and people with chronic diseases) continue to experience significant differences in the ability access to healthcare.

Doctors with Africa CUAMM and partner organizations in Apulia worked together to document the **elevated risk of infectious diseases, including hepatitis, among immigrants and the unhoused in Apulia, providing them with assistance.** Educating and raising awareness among these communities is essential if we are to reduce the spread of infectious diseases, working on the importance of eliminating the stigma surrounding them. These settlements are mainly in rural areas near vegetable fields, and access to basic services is very limited. Moreover, the 'homes' within them are mostly made of recycled and found materials such as plastic, wood and cardboard, clustered together to form shanty towns. **The people who live in these slums mostly come from the continent of Africa and are mostly men.**

The Italian province of Foggia, also known as "Capitanata," has the highest concentration of these seasonal workers. Often undocumented, they work in precarious conditions and are often exploited, and the living conditions that they are subjected to makes them exceptionally vulnerable and marginalized.

This high degree of complexity has practical consequences which impact the rights of laborers every day: there are no basic health or hygiene services such as clean water and trash pickup, and they live without electricity, safe food, dignified housing and work, social protections, education and health.

Likewise, the **unhoused vulnerable population in Bari** has limited access to a safe and stable place to stay, faces uncertainty in regards to meals and personal hygiene, in addition to exposure to extreme weather, especially in winter. The city offers reception centers and temporary housing, such as dormitories and shelters, but places can be limited, especially when temperatures drop.

Health workers and social workers provide **basic medical care and psychological support**, while local organizations and governmental agencies offer **social assistance, distribute meals and organize programs to assist with reintegration in society and the workforce.** Partnering with non-governmental organizations has proven to be crucial to facing this ever-evolving social challenge.



THE TRAIN OF HEALTH

Eleven cities in Italy's Veneto Region were visited by the **sixth edition of the Train of Health**, a traveling initiative for screening and prevention, which lasted 23 days, from September 23 to October 25, 2024. Created by Doctors with Africa CUAMM and the Railway Workers with Africa association, the project was carried out in partnership with Trenitalia and with the support of the Veneto Region as part of its Vivo Bene (Living Well) prevention campaign. The Train of Health was powered by **353 volunteers and provided 1,856 participants with free screenings relative to their health.** They also received

invaluable advice on how to adopt a healthy, balanced lifestyle based on proper nutrition, physical activity and prevention. Once "on board" the train, participants could have their blood sugar and blood pressure levels taken and have their cardiovascular risk measured via an electrocardiogram (ECG). An entire car of the train was dedicated to **oncological** prevention, offering informational materials on current campaigns, ways to learn more about screening processes, how to check what programs they've adhered to in the past and, if necessary, make an appointment. Lastly, thanks to our partnership with the Pediatric Dermatology Center at the University of Padua, specialized consultations on sun exposure in relation to one's phototype and atypical moles.

The initiative got younger generations involved too: **over 1,300 primary school students took part in fun, interactive educational workshops** aimed at helping them understand the importance of a healthy, nutritious diet and regular, personalized physical activity, in addition to learning about Doctors with Africa CUAMM's activities in Africa.

THE TRAIN OF HEALTH IN NUMBERS

23
days of activity

11
stations in the Veneto Region (two new stations - Monselice and Schio)

353
medical and non-medical volunteers

9
ULSS involved with **100** health workers

1,856
screening checkups

456
heart checkups with ECGs

456
heart checkups with ECGs

1,383
primary school students involved

"Father Dante has so much determination, will, conviction and energy that it's hard not to endorse his ideas. A 'thank you' goes out to the many doctors and volunteers working here, to the many who give their skills, professionalism and free time – not just young people, but also doctors on their days off and in retirement – to such a noble cause. In Africa, CUAMM grapples with grave situations, such as maternal mortality, and it has set the goal of saving women who die in childbirth. This train brings people closer to Africa, which can seem far away. And CUAMM, which was founded in 1950, is a well-known NGO not for its politics, but for the concrete actions which it brings to the table."

Luca Zaia,
President of the Region of Veneto



"We have reached the sixth edition. The Train is a means of transportation which aims to bring health and the values which CUAMM promotes to people. In the name of Railway Workers with Africa, we would like to thank everyone involved, especially the Region of Veneto and President Zaia, and council members De Berti and Lanzarin who have helped us in this important initiative."

Nicola Samà,
Chairman, Railway Workers with Africa





GIFTS OF SOLIDARITY AND THE INFOPOINT

The Infopoint at 103 Via San Francesco in Padua is **a reference point** for those who want to learn more about CUAMM's projects and support its cause by purchasing **charitable gift items**. These handcrafted items, produced thanks to the precious collaboration of social sewing cooperatives in Italy and Africa, also offer **work opportunities** to people coming from different countries on the continent.

Managed by 20 volunteers in 2024, this space supports other businesses too, such as the creation of charitable party favors and chocolate eggs and Easter cakes in their areas. Interest in charitable gifts is growing, with **a 23% increase at the Infopoint and 24% on the online shop**. Customers can access a constantly updated catalog on regalisolidali.cuamm.org and choose from different items, making a donation to support CUAMM's work. People are increasingly choosing charitable gifts during the holidays. At Christmas, over 1,400 individuals ordered charitable items from the web shop, while more than 50 volunteers gift wrapped 5,000 chocolate eggs and 2,000 Easter cakes with colorful African wax fabrics. Easter is a chance for the volunteer network to get involved, with **26 CUAMM groups busy in the preparation, promotion and distribution** of charitable chocolate eggs and cakes in their local jurisdictions.



IN 2024

20

infopoint volunteers

6,700

charitable chocolate
Easter eggs

3,000

charitable Easter
cakes

4,700

panettoni distributed
at Christmas

"T-essere, our sewing collective, is a vehicle for unique personal stories, such as that of Sami. Her passion for sewing began in her teenage years, when she started working in a tailor's shop in Pakistan. At just 16 years old, Sami left her homeland and moved to Türkiye, working in a men's clothing factory for a few months. Her journey continued and she moved to Trieste at 17, welcomed by a project for unaccompanied minors. Contact with Nuovi Vicini came about when she joined the cooperative's second integration project. Around 2020, she began a traineeship at the newly founded T-essere, which then became a work contract, marking a new phase in her professional life. Sami has seen the growth of T-essere first-hand, and her responsibilities go beyond cutting and sewing: she's also a teacher in the sewing workshops held in the area thanks to different social projects. The role of teacher is the one which Sami finds most satisfying: 'Sharing my skills, helping people who are having a hard time, is an inestimable value to me.' Thanks to Sami's dedication and mastery, T-essere has a positive impact on the community, helping to weave a strong, charitable social fabric and to create an inclusive and prosperous community through art and teaching people how to sew."

Antonio Poeta,

Manager of the T-Essere Sewing Cooperative



BUSINESSES “WITH” AFRICA

Businesses that stand *with* Africa are those that share the mission of Doctors with Africa CUAMM and actively support its work in Africa, contributing to better local health conditions in various ways:

- Through **monetary donations**. Many companies make donations, especially to mark special occasions such as Christmas. Over 70 companies and professionals chose CUAMM's charitable gifts to give to their employees and clients.
- Through **corporate volunteer days**. Many companies, such as CREDEM – Credito Emiliano, offer company volunteer days to their employees. Since 2021, the A Day for Others project has gathered 51 CREDEM employees in activities such as volunteering for the Train of Health, providing support at the Padua Immigration Office and activities at the Infopoint. Moreover, since 2023, CUAMM has been on WENABI, a volunteering platform which connects volunteers with the main volunteer groups in France and in other countries with 17 employees having already taken part.
- **Raising awareness**. Many companies choose to raise awareness among their employees and clients by organizing or supporting charitable events, encouraging people to give their 5x1000 tax donation to CUAMM, and handing out informational materials within their offices and other workplaces to actively engage their team members and clients.

These are just a few examples of the dedication of companies to CUAMM. They demonstrate how the corporate world can be a fundamental resource for charitable causes and in international development.

FIDEURAM AND MOTHERS AND CHILDREN FIRST

*One concrete example of how businesses can play an active, transformative role in charitable causes is surely **Fideuram**: on November 27, 2024, in its Milan headquarters, **the company spent time raising awareness about CUAMM's health and humanitarian projects. 100 consultants participated.** During the event, CUAMM's main interventions in its partner countries were presented, dedicating space to the direct testimonies of health personnel who had just returned from missions in Africa. The initiative included speeches by the CEO and the Chairman of Fideuram, who underscored **the ethical and strategic value of charitable commitments coming from the world of finance.***

*At the end of the evening, Fideuram decided to support the **Mothers and Children First. People and Skills program in honor of Women's Day 2025 with a special donation**, which helps make it possible to pay for the costs of the attended deliveries in the countries where CUAMM works, as a concrete gesture of proximity and social responsibility.*

Businesses' support for CUAMM demonstrates how the corporate world is becoming increasingly aware of its own social impact and is ready to get to work for global humanitarian causes, helping to build a future in which health isn't a privilege, but a right accessible to all.

Fideuram met Doctors with Africa CUAMM, examples of concrete activation and of direct, trusting relationships for families and people which is transformed into action on the ground.
Milan, November 27, 2024



INTERNATIONAL PARTNERSHIPS

In recent years our International Relations division has become a fundamental pillar for the strategy of Doctors with Africa CUAMM by promoting new relationships and creating solid ties with other actors in international development. In this context, private foundations are increasingly emerging, some linked to individuals and others to companies 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 invest in development programs alongside, and sometimes in partnerships with, our more traditional development donors. These partnerships are created and rendered concrete through projects which support our strategy in different countries. These results were enhanced thanks to meetings which engaged institutions, foundations, universities, professional groups and private citizens on the challenge entailed in the first strategic magazine by CUAMM, amplifying its resonance around the globe. In 2024 CUAMM's International Relations team worked on different strategic areas:

- **the dissemination of best practices in the field of global health:** this organization promoted an event at the Italian Embassy to the Holy See titled “Support for religious congregations in the provision of health services in Africa” to highlight their role and present the outcome of the project. Moreover, a fundraising event was organized in Tuscany for the hospital in Beira, Mozambique thanks to the support of

Irina Behar, a member of the advisory board of Doctors with Africa CUAMM UK.

In September, CUAMM took part in the *Clinton Global Initiative* conference in New York to discuss solutions to global challenges in international development aid. In terms of expansion of our relationships in the US, a lunch was held in Washington DC with a select, high-level group from the private and public sectors.

In Luanda, Angola, a launch event was held for the *Clean Cooking* program, which includes the distribution of improved cookstoves to over 200,000 families in the north of the country. In Tanzania, CUAMM participated in the *First International Conference on the PEN-Plus Regional Strategy to Address Severe NCDs in Africa (ICPPA)*.

Also in Luanda, we organized a seminar titled *Just in Time, Low-Resource Settings*, aimed at health workers and managers of the preparation for and response to emergencies.

Lastly, in Dar es Salaam, Tanzania, CUAMM took part in a conference on the topic of early child development (ECD).

- **In response to humanitarian emergencies,** Doctors with Africa CUAMM officially joined the official *Global Outbreak Alert and Response Network (GOARN)*, the WHO network of over 350 bodies which coordinates and responds to global health emergencies. In fact, CUAMM is the only Italian NGO to belong to it, contributing by providing qualified experts for emergency missions in sub-Saharan countries. In 2024, one candidate was successfully selected, allowing for an expert to



be sent to Nairobi for eight weeks and supporting the WHO in the management of the food emergency on the Horn of Africa. CUAMM Continues to respond to requests for assistance, selecting and nominating experts according to the intervention needs.

To further reinforce our contribution, we are drafting a roster of medical specialists ready to depart in cases of emergency, with special attention paid to the African contexts which we have worked in for years. This collaboration strengthens the role of Doctors with Africa CUAMM in the international response to health crises, bolstering its dedication to protecting health in the more vulnerable areas of Africa.

In addition, CUAMM participates and takes part in coordination meetings with OCHA and, where present, in industry clusters with special attention to that of health, nutrition, wash, and protection according to the programs implemented and the expertise matured.

Having a seat at these tables allows for the planning and monitoring of emergency responses, the *technical assistance* given to local governments and the integration with other the operators involved, in addition to an *advocacy* platform outside emergency areas and, last but not least, also *fundraising*.

- **International fundraising**, our commitment to financing programs in terms of development and humanitarian crisis management in Africa. Donations come from the private sector and from institutions in various geographical regions (e.g., the UK, US, UAE and Europe).

CHARITIES

The network which involves these partnerships extends from Europe (Switzerland, Denmark, Spain and the United Kingdom) to the United States and Canada, which is why we have created **Doctors with Africa CUAMM UK**, a charity based in London, and **Doctors with Africa CUAMM USA**, which is a registered 501(c)(3), headquartered in New York. CUAMM UK and CUAMM USA make it possible to facilitate and encourage networking with local figures and organizations, helping to inspire their commitment to supporting projects in the poorest countries of Sub-Saharan Africa.



3

1 Meeting of the *Clinton Global Initiative 2024* in New York City

2 Supporting faith-based organizations on the frontline of healthcare service delivery an event held at the Italian Embassy to the Holy See in Rome

3 A fundraising event in Forte Dei Marmi, Tuscany, to benefit Doctors with Africa CUAMM UK

4 Presentation of Doctors with Africa CUAMM USA in Washington, D.C. at the Capitol Hill Club

5 *Just in Time* training in Luanda, Angola, for the Italian Navy

6 Investing in Early Childhood, Building Human Capital along the Life Course conference, Dar es Salaam, Tanzania



EDUCATION AND PUBLIC AWARENESS



HEALTH IS GLOBAL

Doctors with Africa CUAMM continues to pursue people's right to health, including through educational and awareness-raising initiatives. We believe wholeheartedly **that helping familiarize young people, doctors and health professionals with development aid issues can lead to both a more just world and more responsible medical practices.**

This is why we offered **three editions of our residential training course** for young health professionals in 2024. Two of them were exclusively designed for **medical residents** who want to prepare for a six-month internship in Africa and a third is meant for **health professionals** coming from all over Italy who want to explore the topics surrounding international medical development aid in depth. 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 topics that are crucial to healthcare-specific development aid and global health.

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

January 2024 marked the start of the third year of the Quality Medicine for Africa: "Frugal" Research, Youths, and Innovation, funded by the Cariparo Foundation. This project offers significant opportunities for professional growth to students and young doctors, providing them with **training, raising awareness and allowing them to actively participate in an international scientific community.** In this context, the collaboration between CUAMM and European, African and other international academies, institutions and research center continues to expand. Our decades-long partnerships with the most prominent Italian organizations working in the fields of health and youth are **a key element in the training activities** featured in the program. In 2024 alone, this project gave rise to **17 training courses** in collaboration with medical students, adopting a peer-to-peer education model. In these activities, young doctors and interns helped university students reflect on concrete case studies and analyze real-world situations.

SNAPSHOT 2024

457

medical residents have left for Africa since 2002

502

SISM students have left for Africa since 2006

60

midwives have left for Africa since 2016



MIND THE GAP: ACTIVE LEARNING: INEQUALITY IN GLOBAL HEALTH.

In addition to these training courses, on October 10, 2024 we held **Mind the Gap**, an active learning event and workshop on **inequality as a barrier to health**. It was designed for young people who want to expand their view of the world, its dynamics and the processes of global health, both in Italy and in countries with more limited resources.

These events were created with **members of SISM's** local Turin branch with the goal of provoking thought on a new paradigm in medicine and healthcare that is more attentive to individuals and their complexities.

NEONATAL CARE IN LOW-RESOURCE COUNTRIES

In March, CUAMM held the third edition of its in-person course on **neonatal care in low-resource countries**. The main goal of this initiative is to provide a working methodology and practical information to those preparing for a development aid experience in neonatology in a *Low-and-Middle Income Country* (LaMIC). The course was a notable success thanks both to the exceptional skill and empathy of the lecturers and to their extremely practical and interactive approach, culminating in a full day dedicated to hands-on exercises. CUAMM would like to highlight the invaluable collaboration of the Italian Society of Neonatology's *Neonatal Care in Low-Income Countries* Study Group, thanks to which we are already planning the 2025 edition.

IMPLEMENTATION RESEARCH IN RESOURCE-LIMITED COUNTRIES

Now in its fourth year, CUAMM's course on operational research is an annual event within our training program. Held in-person in April, the 2024 edition was made possible thanks to the patronage of the University of Bari. A varied group of attendees took part, including clinicians, nurses, physical therapists and project consultants whose different views and backgrounds deepened and enhanced discussions. There was **broad interest in the research topics**, especially **operational research** conducted in limited-resource countries. In these locations, various improvements, often generated by truly **frugal** resources, can improve **access to and the quantity of local healthcare services**. We believe that greater knowledge and training on research projects can only be a good thing, even for research and medical professionals who work in Italy or other Western countries.

GLOBAL HEALTH AND INTERNATIONAL AID

CUAMM's fruitful collaboration with the NGO **Volontariato Internazionale per lo Sviluppo (VIS)** led to the fourth edition of our Global Health online course.

It is designed for aid workers, international volunteers, planners, decentralized cooperation officials and students – professionals keen to gain expertise in the area of international development focused on the right to health, the provision of health services, emergency responses and the strengthening of health systems in low-income countries. This year's edition was attended by **more than 50 participants, who logged on from several countries around the world, including Italy**.



THE WOLISSO PROJECT: FIELD TRAINING IN AFRICA

For years, we have offered medical students and residents training opportunities in Africa. Thanks to our partnership with SISM, every month **CUAMM offers four medical students a practical internship opportunity in Ethiopia or Tanzania** as a concrete way to get acquainted with the world of international health development aid. In the summer, students also leave for Angola (Chiulo). In 2025, Sierra Leone (Pujehun) will be added as well.

SCHOLARSHIPS FOR MIDWIVES

Since 2016, scholarships and study grants have been made available to students and recent graduates of midwife degree courses to enable them to undertake a period of training in one of the African hospitals with which we partner. These opportunities are made possible by the generous support of private donors, CUAMM's partnerships with Italian universities and institutional bodies representing the midwifery profession.

The scholarship programs offered in 2024 were:

- **Two 3-month scholarships for University of Padua students** funded 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 Obstetrics Diploma program (active from 2016 to 2025).
- **One 2-month study grant** 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 **wisdom, generosity and humanity**. Active since 2018, this **grant** is organized in partnership with the University of Padua's **Alumni Association**.
- **One 1-month study grant** for a third-year student at the **University of Siena**, founded by family members and friends **in honor of Federica Canneti**, a midwifery student who died at just 22 years old in a car accident in October 2022. Her dream was to spend time working in healthcare in Africa (the project is programmed from 2023 to 2030).



“Coming to understand their concept of motherhood first-hand has enriched me professionally, but most importantly, as a person. I was able to see, talk about and engage with what it means to be a woman and mother there, an experience which inspired deep emotions in me as well as insight: in the delivery room of St. John XIII Hospital, I discovered true sisterhood, sincere and reciprocal support among mothers, which I had hardly ever seen before and which I still hold in my heart today. It was a stimulating and all-encompassing experience, one which was also characterized by feelings of confusion and powerlessness due to some of the situations I observed, but which allowed me to reach the conclusion that the most important aid is the kind that’s needed, not the kind you necessarily want to provide.”

Chiara Maria Nicolin,
recipient of the study grant
in memory of Irma Battistuzzi.



UNIVERSITIES INVOLVED
IN CUAMM'S PROGRAMS

39
Italian universities



MIDWIVES

60
midwives have
left for Africa
since 2016
including:
47
students
13
recent graduates

SISM

502
students have left
for Africa
since 2006
including:
320
for Wolisso,
Ethiopia
174
for Tosamaganga,
Tanzania
6
for Chiulo, Angola
2
for Pujehun,
Sierra Leone

MEDICAL
RESIDENTS
WITH CUAMM

457
total medical
residents have
left for Africa
since 2002
72
JPOs left for
Africa in 2024
from the
following focus
areas:
23
in pediatrics
14
in gynecology
and obstetrics
12
in internal
medicine
8
in public health
7
infectious diseases
6
in surgery
2
in orthopedics

Medical students
offices of the Italian
Medical Students'
Association (SISM)
from which they leave
with CUAMM for Africa

Medical residents
universities from which
they leave with CUAMM
for Africa

Midwives Project
universities from which
they leave with CUAMM
for Africa



COMMUNICATION AND MEDIA RELATIONS

PRESS, TV AND RADIO IN NUMBERS

2,316

print and online
pieces about CUAMM

182,852

viewers of CUAMM's
Annual Meeting on
Tv2000

83

appearances
on national and
local TV and radio



COMMUNICATION

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

Our **publications** encompass awareness raising and informational campaigns through the coordination and drafting of **èAfrica**, a bi-monthly **magazine** which serves as an observatory on current events on the continent and on CUAMM's projects, with spotlights and editorials written by aid workers, journalists and authors. With a print run of over 50,000 copies, it's distributed at various events in Italy and sent to friends and donors. "The many roads to the cure," "Health First" "A new start 'with Ivory Coast," "The system that cures," "Peace is a concrete answer," and "The last mile of training," are all first-hand accounts which have accompanied CUAMM's work in the field, placing the focus on the need for health of an entire continent. This concept is further reinforced by the **graphic created for the Annual Meeting 2024**, "Health First", which expresses connection and unity in growth and aid between Europe and Africa.

The public awareness and research offices work to publish **Salute & Sviluppo** (Health and Development), a **scientific magazine** in Italian and English, dedicated to current issues being debated in the field of international cooperation and health policy, linking the discussion to best practices in the field.

In order to **account for and draw attention to the needs and requirements** of supporting on-the-ground activities, CUAMM publishes and distributes engaging materials such as mailings, brochures and presentations aimed at friends of the

organization and possible donors to promote projects and special initiatives. Similarly, communication was coordinated for the **Train of Health**, an awareness-raising project which promoted health in Italy's Veneto region.

CUAMM's commitment to documentation and information culminated in the drafting of the **Annual Report**, which summarizes all the organization's activities that year. Since 2023, it has complied with applicable legislation for third-sector organizations, and thus addressed issues that aren't merely financial, becoming the main tool for accountability to and strengthening relations with all *stakeholders*. The transformation into an annual report addressing governance and sustainability arose from the understanding that this network is an integral part of the outcomes and results obtained by CUAMM, not only in economic terms, but also in regards to its impact on people and communities.

In terms of press coverage, 2024 saw the preparation for and participation in various meetings with aid workers and two missions in Angola, between March and June, with author **Fabio Geda**, who collected experiences and testimonies for the creation of a new publication in collaboration with the Laterza publishing house (published in spring 2025). In addition, the publisher **Giuseppe Laterza** himself and his wife **Karina Guarin** took part in the first mission. (see image below) Similarly, author **Niccolò Ammaniti** joined the November mission to Tanzania so that he learn about the field work of Doctors with Africa CUAMM, with a special focus on activities benefiting children and mothers. To continue to promote a narrative that values stories and testimonials, we've supported collections of stories and accounts from doctors with extensive real-world experience.



With the goal of presenting a broad, positive and engaging narrative around Africa and its potential, 2024 also saw the launch of the **Dressing Africa** project, Doctors with Africa CUAMM's 2025 calendar on African habits and customs with images by Kenyan illustrator **Phoebe Ouma** and conceptual development in collaboration with anthropologist **Marco Aime**.

The division has placed a special focus on storytelling and promoting **on-the-ground projects**, engaging human resources in the countries where we work and always considering the visibility needs of donors and partners. Published in multiple languages, these materials describe ongoing activities, specific needs, and future prospects in a given context or across multiple countries, thus becoming **tools for reporting results and also for strengthening and developing relationships with institutions and potential donors**.

They include country profiles, fact sheets and capacity statements, i.e., a document that describes and highlights the skills and experience of CUAMM in a given field, highlighting the added value of our approach and strategy. Support was also provided for the drafting of **community awareness-raising materials**, again in partnership with local operators.

The illustrated posters to increase knowledge about HIV/AIDS and about mental health, for adolescents and youths in Shinyanga, Tanzania, are such examples.

The department also took part in the planning of communication and visibility activities **during the project writing phase**, seeking to promote new ways to account for and raise awareness about topics and events. One part of the work done on visibility is linked to the *brand identity* of the coordination and project offices, which includes the creation of plaques, *banners*, *roll-ups*, etc.

Tying together the thread of experiences, tales, and stories on Sunday, September 15th, we brought a taste of what it means to live and work "with" Africa to the Modena **Philosophy Festival** in Carpi and Reggio, the theme of which was "psyche" and included a multi-person theatrical dialog titled *Ubuntu*: I am because you are. Letting the human in each of us emerge. This journey with a well-known African griot and an anthropologist documents everyday life in African communities, teasing out how health and illness entail a strong sense of community that also draws on the invisible, an aspect that is particularly prevalent in African cultures. Participating in the event were the actor, writer, theatrical performer, activist, educator and musician **Mohamed Ba**, born in Senegal but a resident of Brianza for over two decades and **Edoardo Occa**, a CUAMM anthropologist with extensive experience in the field in different countries, thanks to the support of the CUAMM group of Modena and Reggio Emilia.



"We are one world; there is circularity. There is no my world or his. The major dichotomies of Western thinking, such as mind and body, have led the approach to seeing and understanding other worlds astray. But there's a more vivacious tradition of thought which leads us to consider the psyche for what it is: the unity of humankind. The dichotomy between nature and culture, increasingly less concrete, dissipates in the awareness of the complexity of phenomena."

Mohamed Ba,
Philosophy Festival 2024.



1.
Cover of *èAfrica* magazine
2.
Cover of *Dressing Africa*. Stories, Culture and Styles of African Clothing
- 3/4.
Two promotional materials: the Intervention Perspectives: South Sudan fact sheet and the Capacity Statement on NCDs.

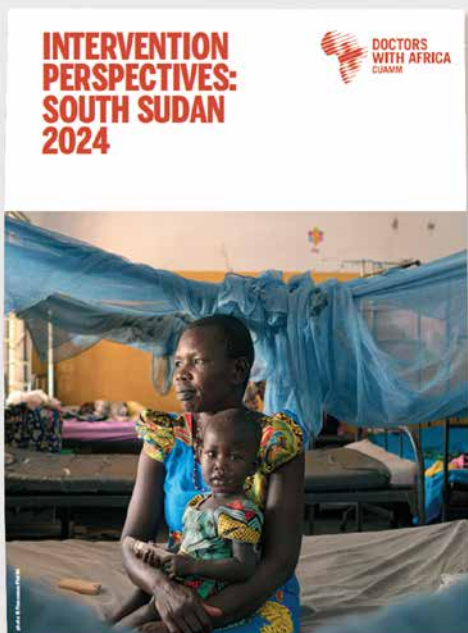
1.



2.



3.



4.



MEDIA RELATIONS

2024 was a year full of initiatives, events and more with ever-new storytelling methods tailored to the **traditional media**, the **web** and **social media** connected to **events** in Italy and thanks to **the involvement of our many friends and spokespeople**.

Until the Last Mile, a photography exhibit which was held at the San Fedele multipurpose space in Milan in May 2024, recounted the work of CUAMM. It portrayed the faces and the stories of those who care for others and those who are cared for, tracing an emotional journey through eight countries in sub-Saharan Africa. Inaugurating the show was a talk among special friends: **Alberto Mantovani** and **Guido Forni**, singer-songwriter **Niccolò Fabi**, the exhibit's curator **Gigliola Foschi** and CUAMM Director **Father Dante Carraro**, moderated by **Chiara Bidoli**, of *Corriere della Sera*.

The digital fable created for **Mother's Day** featured the dreams of children as its theme. Originally created for lead generation and later transformed into a small illustrated comic book, **Da Grande** (When I Grow Up) features text by **Guia Risari** and illustrations by **Anna Godeassi**.

To recount the scientific aspects of our field work, an event on operational research was held at the Aula Magna of the University of Padua, which included the participation of many experts and was hosted by **Federico Taddia**.

In June, an important moment brought a boost of media visibility to CUAMM: the awarding of the **Antonio Feltrinelli Prize by the Accademia dei Lincei**. At an event attended by the Italian President **Sergio Mattarella**, this award, often called the Italian Nobel Prize, was given to CUAMM "for the breadth and seriousness of the work it has carried out and continues to carry out in eight of the world's most fragile countries."

In the fall, the well-established **Train of Health** event was widely covered in the local press of the Veneto Region. October saw the publication of **With Africa. Stories of the People who are Building the Future**, a book by journalist and CUAMM friend **Giuseppe Ragogna**, published by **Ediciclo**, plus an Italian book tour. This new viewpoint recounts the work of CUAMM doctors, shining the spotlight on elements and aspects which hadn't been seen before. The preface by **Piero Badaloni** and the afterword by **Father Dante Carraro** enrich the book.

The fall fundraising campaign, titled "Every Mum Matters," accentuated the central theme of CUAMM's efforts: the health of mothers, addressing it with a sensitive and respectful tone of those who suffer most, mothers who risk their lives in childbirth. CUAMM's most important event of the year, the **2025 Annual Meeting** was held in Turin and hosted by **Paola Saluzzi**, the famous face of TV2000. **Neri Marcorè** was also engaged and **Federico Taddia** provided support. The guests on stage ranged from the Italian Minister of Foreign Affairs **Antonio Tajani** to the Ethiopian Minister of Health **Daguma Dereje**; from the President of the Region of Tigray **Getachew Reda** to professor **Romano Prodi**; from professor **Alberto Mantovani** to photographer **Antonio Biasiucci**, from the Director of Rai Radio 2 **Simona Sala** to the Chairwoman of the namesake foundation **Patrizia Sandretto Re Rebaudengo**, and of course CUAMM doctors and aid workers. The entire event was enriched with testimonies and engaging videos. The event was **live streamed on play2000.it** and later broadcast on **Tv2000**.

In addition to the constant updating of CUAMM's **Italian, English and Portuguese-language websites**, new landing pages helped spread specific messages and raise funds. Every week, our newsletter, social media pages and press releases were a means to reach different audiences. A few noteworthy press clippings include Father Dante Carraro's words to mark the Italia-Africa summit in Rome, featured on the homepage of **corriere.it**; **Avvenire**'s coverage of CUAMM's work throughout the entire year, in addition to that of **Osservatore Romano** and its related periodical **Donne, Chiesa e Mondo**. For the **Festival della Salute** (Health Festival), **Repubblica Salute** printed an in-depth interview with Father Dante Carraro. Our dedication to mothers and children was also recounted in **Io e il Mio Bambino** (My Child and I), a publication linked to **Corriere della Sera**. Last but not least, our activities in Tanzania were seen on the pages of **Vanity Fair Italy** with a piece by Niccolò Ammaniti. We were also among the guests of TV and radio programs: **Rai 1**/Uno Mattina in Famiglia; **Rai 2**/Elisir; **Rai 3**/Geo; **Rai Radio 1**/Spoiler; Wannabe; Gr1; **Rai Radio 3**/Tutta la città ne parla; Fahrenheit; **Radio24**/Uno nessuno cento Milan; Europa, Europa; **TV2000**/Di buon mattino; L'ora solare; **Radio Vaticana**; and **Radio InBlu**.

SOCIAL MEDIA AND WEBSITES



518,924
total sessions including:

349,567
on the Italian, English and Portuguese websites

169,357
on e-shops and landing pages



58,773
subscribers to our Voices from Africa newsletter
up 2,035 since 2023



52,473
followers on Doctors with Africa CUAMM
up 2,187 since 2023

5,326

followers on Doctors with Africa CUAMM
up 723 since 2023



22,871
new followers
up 3,400 since 2023



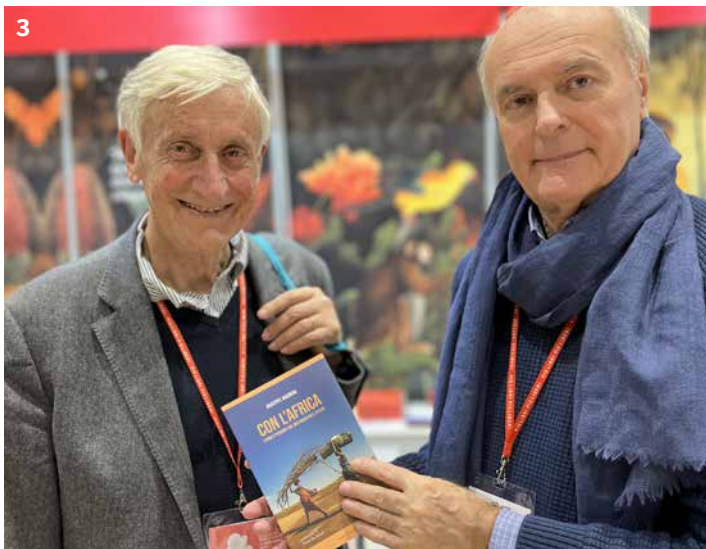
12,101
new followers
up 3,186 since 2023



3,480
subscribers to our YouTube channel
up 292 since 2023

115,486
views

86
new videos on YouTube



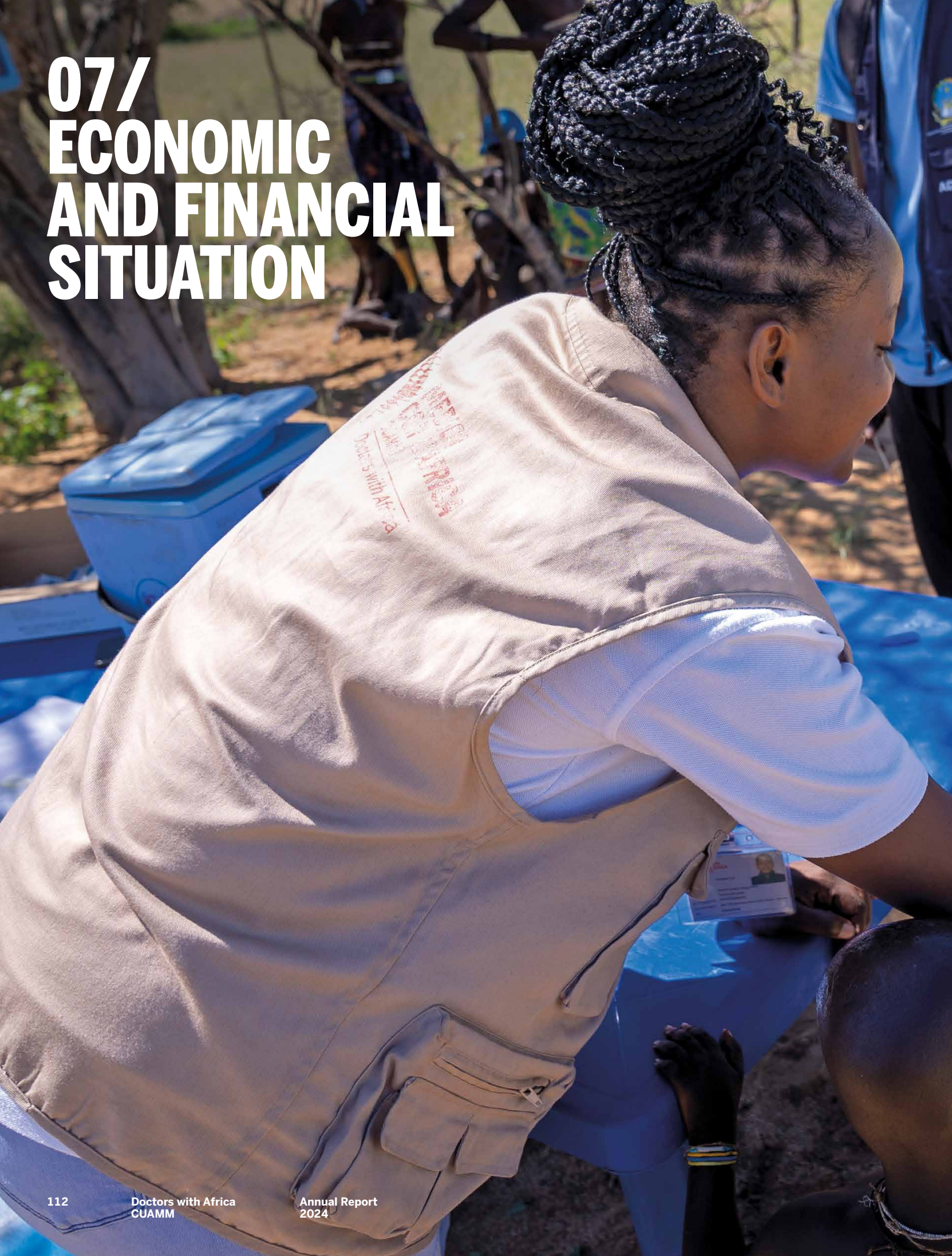
1. From the pages of *Vanity Fair Italy*, Niccolò Ammaniti recounts the work of CUAMM.

2. Milan, San Fedele Cultural Center, opening event for the *Until the Last Mile* exhibit.

3. Giuseppe Ragogna and Piero Badaloni present "With Africa" at the Small and Medium Publisher's Fair in Rome.

4. *Da Grande* (When I Grow Up), the digital fable which became an illustrated children's book.

5. Father Dante Carraro as a guest of Geo, hosted by Sveva Sagamola on RAI 3.



07/ ECONOMIC AND FINANCIAL SITUATION



2024 BUDGET AT A GLANCE

Doctors with Africa CUAMM is incorporated by law within the Opera San Francesco Saverio 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 College.

General information on the entity

Identification Data

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 Statements as at 31/12/2024

Balance sheet

	31/12/2024	31/12/2023
Assets		
B) Fixed assets		
I - Intangible fixed assets	-	-
4) concessions, licenses, trademarks and similar rights	478	717
7) others	-	-
Total intangible fixed assets	478	717
II - Tangible fixed assets	-	-
1) land and buildings	960.272	204.841
3) equipment	965	988
4) other assets	60.268	57.046
5) fixed assets in progress or advances	-	2.005
Total tangible fixed assets	1.021.505	264.880
III - Financial fixed assets	-	-
1) equity investments in	-	-
a) subsidiaries	5.814	5.814
Total equity investments	5.814	5.814
3) other bonds	263.333	61.309
Total financial fixed assets	269.147	67.123
Total fixed assets (B)	1.291.130	332.721
C) Current assets		

	31/12/2024	31/12/2023
II - Receivables		
1) due from users and customers	12.200	443.724
<i>due within the following financial year</i>	12.200	443.724
<i>due beyond the following financial year</i>	-	-
2) due from members and founders	534.566	267.014
<i>due within the following financial year</i>	534.566	267.014
<i>due beyond the following financial year</i>	-	-
9) tax credits	1.806	9.968
<i>due within the following financial year</i>	1.806	9.968
<i>due beyond the following financial year</i>	-	-
12) other receivables	53.050.534	29.666.210
<i>due within the following financial year</i>	34.364.789	19.565.774
<i>due beyond the following financial year</i>	18.685.745	10.100.436
<i>Total receivables</i>	<i>53.599.106</i>	<i>30.386.916</i>
IV - Liquid funds		
1) bank and postal deposits	23.506.943	17.314.115
3) cash and equivalents on hand	337.145	225.027
<i>Total liquid funds</i>	<i>23.844.088</i>	<i>17.539.143</i>
<i>Total current assets (C)</i>	<i>77.443.194</i>	<i>47.926.059</i>
D) Accrued income and prepaid expenses	7.494.272	6.360.853
<i>Total assets</i>	<i>86.228.597</i>	<i>54.619.633</i>
Liabilities		
A) Net assets		
III - Free assets		
1) profit reserves or operating surpluses	2.281.044	1.472.490
2) other reserves	1.174.564	904.341
<i>Total free assets</i>	<i>3.455.607</i>	<i>2.376.831</i>
IV - Surplus/deficit for the year	392.358	267.395
<i>Total net assets</i>	<i>3.847.965</i>	<i>2.644.226</i>
B) Provisions for risks and charges		
3) others	886.330	1.589.963
<i>Total provisions for risks and charges</i>	<i>886.330</i>	<i>1.589.963</i>
C) Employee severance indemnities	1.771.393	1.593.772
D) Payables		

	31/12/2024	31/12/2023
1) payables to banks	47.163	446.107
<i>due within the following financial year</i>	47.163	446.107
<i>due beyond the following financial year</i>	-	-
2) payables to other lenders	100.000	100.000
<i>due within the following financial year</i>	-	-
<i>due beyond the following financial year</i>	100.000	100.000
3) payables to members and founders for fundings	1.544.944	1.554.020
<i>due within the following financial year</i>	1.544.944	1.554.020
<i>due beyond the following financial year</i>	-	-
7) trade payables	430.353	535.322
<i>due within the following financial year</i>	430.353	535.322
<i>due beyond the following financial year</i>	-	-
9) payables to tax authorities	148.951	146.654
<i>due within the following financial year</i>	148.951	146.654
<i>due beyond the following financial year</i>	-	-
10) payables to social security and welfare institutions	361.392	372.514
<i>due within the following financial year</i>	361.392	372.514
<i>due beyond the following financial year</i>	-	-
12) other payables	5.602.425	5.883.652
<i>due within the following financial year</i>	4.435.199	3.256.511
<i>due beyond the following financial year</i>	1.167.226	2.627.141
<i>Total payables</i>	8.235.228	9.038.269
E) Accrued expenses and deferred income	71.487.680	39.753.403
<i>Total liabilities</i>	86.228.597	54.619.633

Management statement

Charges and costs	31/12/2024	31/12/2023	Income and Revenues	31/12/2024	31/12/2023
A) COSTS AND CHARGES FROM GENERAL INTEREST ACTIVITIES	45.625.270	46.158.516	A) REVENUES, ANNUITIES AND INCOME FROM GENERAL INTEREST ACTIVITIES	40.290.527	42.558.576
1) Costs for raw, ancillary and consumable materials and goods from activities of general interest	5.117.615	4.543.140	1) Proceeds from membership fees and founders' contributions	836.055	871.843
2) Costs for services from activities of general interest	22.637.162	25.294.793	5) Proceeds of 5 per thousand	625.677	615.279
3) Costs for the use of third-party assets from activities of general interest	2.698	-	6) Contributions from private subjects from activities of general interest	12.013.217	10.489.274
4) Costs for personnel from general interest activities	15.166.554	14.023.506	8) Contributions from public bodies from general interest activities	18.398	-
7) Other management charges from activities of general interest	2.701.240	2.297.077	9) Proceeds from contracts with public bodies from general interest activities	26.500.340	30.326.920
Total costs and charges from activities of general interest	45.625.270	46.158.516	10) Other revenues, annuities and income from general interest activities	269.840	255.260
-	-	-	Total revenues, annuities and income from general interest activities	40.290.527	42.558.576
-	-	-	Surplus/deficit of general interest activities (+/-)	(5.334.743)	(3.599.940)
-	-	-	Surplus/deficit from various activities(+/-)	-	-
C) COSTS AND CHARGES FROM FUND-RAISING ACTIVITIES	1.222.428	1.135.847	C) REVENUES, ANNUITIES AND INCOME FROM FUND RAISING ACTIVITIES	8.500.398	6.364.664
1) Charges for regular fundraising	1.222.428	1.135.847	1) Income from regular fundraising	8.500.398	6.364.664
Total costs and charges from fundraising activities	1.222.428	1.135.847	Total revenues, annuities and income from fundraising activities	8.500.398	6.364.664
-	-	-	Surplus/deficit of fundraising activities (+/-)	7.277.970	5.228.817
D) COSTS AND CHARGES FROM FINANCIAL AND EQUITY ACTIVITIES	2.343	10.724	D) REVENUES, ANNUITIES AND INCOME FROM FINANCIAL AND EQUITY ACTIVITIES	32.061	20.610
6) Other charges	2.343	10.724	1) Income from banking relationships	28.579	10.469
-	-	-	2) Income on loans	1.129	303
-	-	-	5) Other income from financial and equity assets	2.354	9.838
Total costs and charges from financial and equity activities	2.343	10.724	Total revenues, annuities and income from financial and equity activities	32.061	20.610
-	-	-	Surplus/deficit from financial and equity activities (+/-)	29.718	9.886
E) COSTS AND CHARGES OF GENERAL SUPPORT	1.492.127	1.356.289	E) INCOME FROM GENERAL SUPPORT	36.586	109.606
1) Costs for raw, ancillary and consumable materials and goods from general support	33.604	115.257	1) Income from secondment of personnel	-	1.537

Balance sheet of the ETS branch

4

Charges and costs	31/12/2024	31/12/2023	Income and Revenues	31/12/2024	31/12/2023
2) Costs for general support services	789.777	620.160	2) Other income from general support	36.586	108.069
3) Costs for the use of third party assets of general support	-	-		-	-
4) Costs for general support personnel	-	-		-	-
5) Depreciation of general support	38.263	26.585		-	-
7) Other general support charges	630.483	594.287		-	-
Total costs and charges from general support	1.492.127	1.356.289	Total income from general support	36.586	109.606
TOTAL CHARGES AND COSTS	48.342.169	48.661.376	TOTAL INCOME AND REVENUE	48.859.572	49.053.456
	-	-	- Surplus/deficit for the year before taxes (+/-)	517.403	392.080
	-	-	- Taxes	(125.045)	(124.685)
	-	-	Surplus/deficit for the year (+/-)	392.358	267.395





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www.bdo.it

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35131 Padova

Report on the audit of financial statements
pursuant to art. 14 of Legislative Decree n. 39 of 27 January 2010

To the board members of Medici con l'Africa CUAMM (ex Onlus)

Independent Auditor's Report

Opinion

We have audited the financial statements of the organization Medici con l'Africa CUAMM (ex Onlus) (henceforth also "the Organization"), composed of the balance sheet as of December 31, 2024, the 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 provide a true and accurate view of the financial position of Medici con l'Africa CUAMM (ex Onlus) as of December 31, 2024 and of the result of its operations for the year then ended in accordance with the Italian regulations governing the drafting of financial statements.

Basis of opinion

We conducted our audit in accordance with the International Standards on Auditing (ISA Italia). Our responsibilities under those standards are further described in the Auditor's "Responsibilities for the Audit of Financial Statements" section of this report. We are independent of Medici con l'Africa CUAMM (ex Onlus) in accordance with the ethical requirements and standards of Italian regulations regarding the audit of financial statements. We believe we have acquired sufficient and appropriate probative elements on which to base our opinion.

Emphasis of matter

As indicated by the Board of Directors in the mission report, Medici con Africa CUAMM (ex Onlus) meets the requirements contained in current legislation to be listed in the Registro Unico del Terzo Settore – RUNTS (Italy's Third Sector Registry).

Responsibilities of the Board of Directors and the Monitoring Body of Medici con l'Africa CUAMM (ex Onlus) for the financial statements

The Board of Directors is responsible for the preparation of financial statements, which are to be a true and accurate representation in accordance with the Italian regulations governing financial statements and, within the limits of the law, for the internal controls that management deems necessary to enable the drafting 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 Organization's ability to continue as a going concern, for the appropriateness of the use of the going concern assumption, as well as for adequate disclosure of it. The Board of Directors uses the assumption of going concern in the drafting of the financial statements unless it either intends to dissolve and liquidate the Organization or to cease operations, or has no realistic alternative but to do so.

Bari, Bologna, Brescia, Cagliari, Florence, Genoa, Milan, Naples, Padua, Palermo, Rome, Turin, Verona

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Registered with the Register of Auditors at n. 167911 with Ministerial Decree dated 15/03/2013 Official Gazette n. 26 of 02/04/2013
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The Monitoring Body has the responsibility, in compliance with applicable legislation, to supervise the process of preparation of the Organization's financial statements

Auditor's Responsibilities for the Audit of 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 it 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 or unintentional events, and they 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 carried out in accordance with the International Standards on Auditing (ISA Italia), we exercised professional judgment and maintained professional skepticism throughout the audit. We also:

- Identified and assessed the risk of material misstatement of the financial statements, whether due to fraud or error or unintentional events; defined and performed audit procedures in response to those risks; and obtained audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than one resulting from error due to unintentional behaviors or events, as fraud may involve collusion, forgery, intentional omissions, misrepresentations or the override of internal controls;
- Obtained an understanding of the internal controls 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 Organization's internal controls;
- Evaluated the appropriateness of accounting principles used and the reasonableness of accounting estimates and related disclosures made by the Board of Directors;
- Came to a conclusion on the appropriateness of the use of the Board of Director's use of going concern and, based on the audit evidence obtained, whether material uncertainty exists related to events or conditions that may cast significant doubt on the Organization's ability to continue as a going concern. In cases where we find that material uncertainty exists, we are required to draw attention in our auditor's report to the related financial disclosures, or, if such disclosures are inadequate, to reflect that circumstance in 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 Organization to cease to continue as a going concern;
- Evaluated the overall presentation, structure and content of the financial statements, including any disclosures, and whether the financial statements represent the underlying transactions in a manner that achieves fair presentation.

We notified those charged with governance, identified at the appropriate level as required by ISA Italia, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal controls identified (if any) during our audit.



Report on any other legal and regulatory requirements

Opinion pursuant to art. 14, paragraph 2, letter e), e-bis) and e-ter) of Legislative Decree n. 39/10

The Board of Directors of Medici con l'Africa CUAMM (ex Onlus) is responsible for the preparation of the section titled "Explanation of the Economic and Financial Performance of the Organization and the Way in Which it Pursues its Statutory Aims" included in the mission statement of Medici con l'Africa CUAMM (ex Onlus) as of December 31, 2024, including its consistency with the financial statements and compliance with applicable laws and regulations.

We have performed the procedures required under audit standard (SA Italia) n. 720B in order to:

- Express an opinion on the consistency of the section titled "Explanation of the Economic and Financial Performance of the Organization and the Way in Which it Pursues its Statutory Aims" included in the mission statement with the financial statements of Medici con l'Africa CUAMM (ex Onlus) as of December 31, 2024;
- Express an opinion on the compliance of the section titled "Explanation of the Economic and Financial Performance of the Organization and the Way in Which it Pursues its Statutory Aims" included in the mission statement with the financial statements of Medici con l'Africa CUAMM (ex Onlus) as of December 31, 2024 with applicable laws and regulations;
- Issue a statement on the existence of material misstatements in the section titled "Explanation of the Economic and Financial Performance of the Organization and the Way in Which it Pursues its Statutory Aims" included in the mission statement with the financial statements of Medici con l'Africa CUAMM (ex Onlus) as of December 31, 2024.

In our opinion, the "Explanation of the Economic and Financial Performance of the Organization and the Way in Which it Pursues its Statutory Aims" section included in the mission statement is in line with the financial statements of Medici con l'Africa CUAMM (ex Onlus) as of December 31, 2024 and is drafted in compliance with applicable laws and regulations.

With reference to the assessment pursuant to art. 14, paragraph 2, letter e-ter), of Legislative Decree n. 39/10, based on our knowledge and understanding of the Organization and its environment as obtained through our audit, we have nothing to report.

Padua, June 26, 2025

BDO Italia S.p.A.
[Signature]
Francesco Ballarin
Partner

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



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ጥራሕ

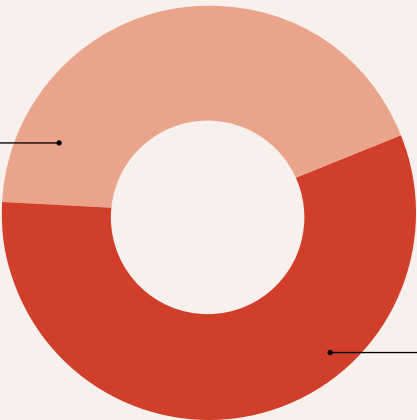
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HOW WE RAISED FUNDS IN 2024

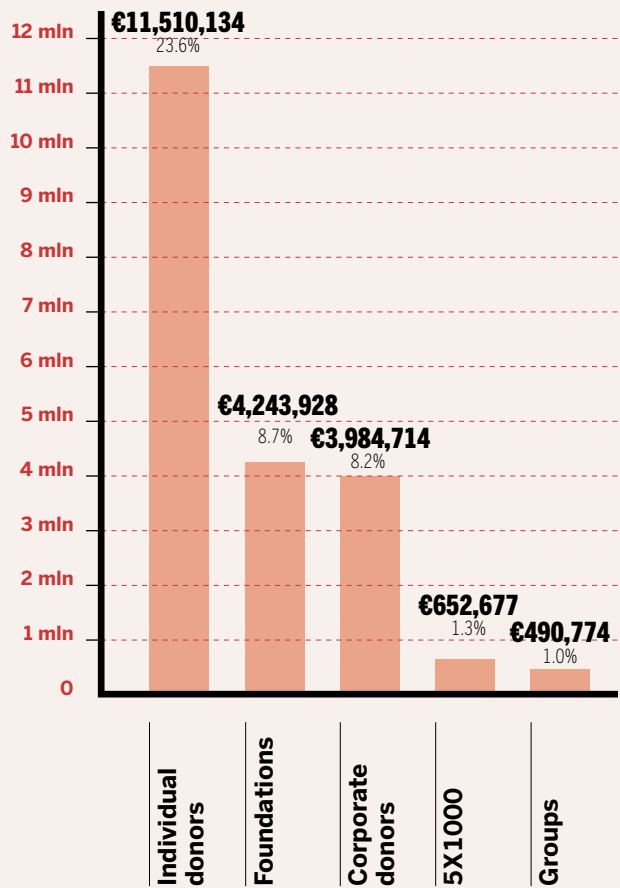
TOTAL REVENUE
€48,859,571
100%

FUNDS FROM INDIVIDUALS
€20,882,227
42.7%

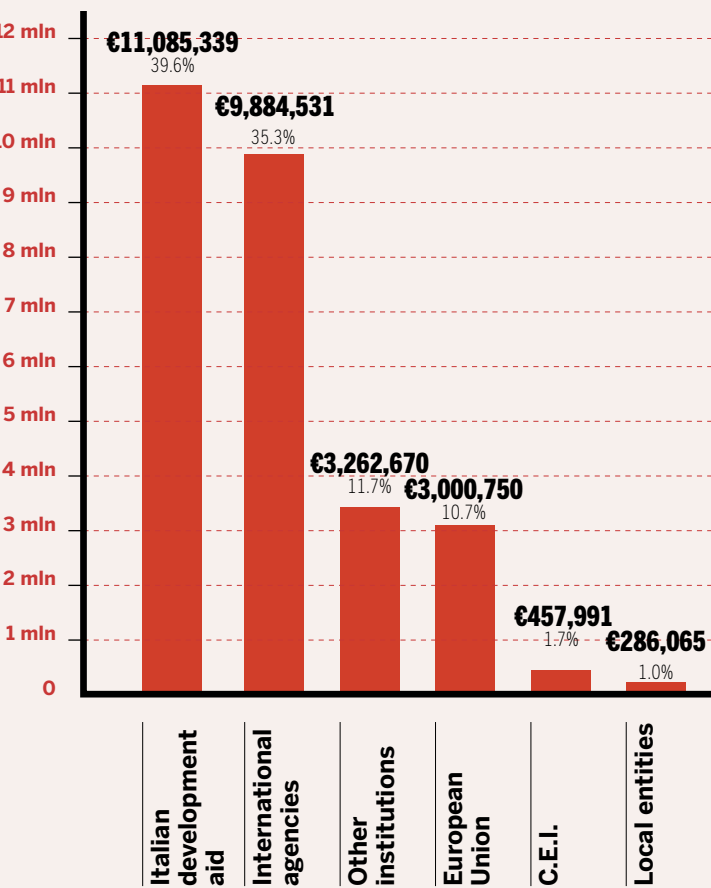


FUNDS FROM INSTITUTIONS
€27,977,344
57.3%

FUNDS FROM INDIVIDUALS



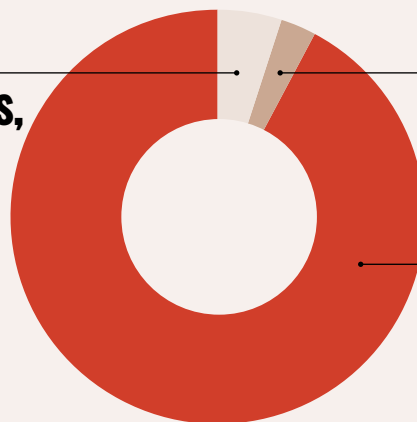
FUNDS FROM INSTITUTIONS



HOW WE SPENT THE FUNDS RAISED

TOTAL COSTS
€48,467,214
100%

**PUBLIC AWARENESS,
COMMUNICATIONS
AND FUNDRAISING**
€2,718,431
5.6%



**OPERATING
COSTS**
€1,787,946
3.7%

**TREATMENT,
PREVENTION
AND TRAINING**
€43,960,836
90.7%

Treatment, prevention and training projects: Expenses for on-site project implementation, project services, other project-related expenses, and costs for project personnel.

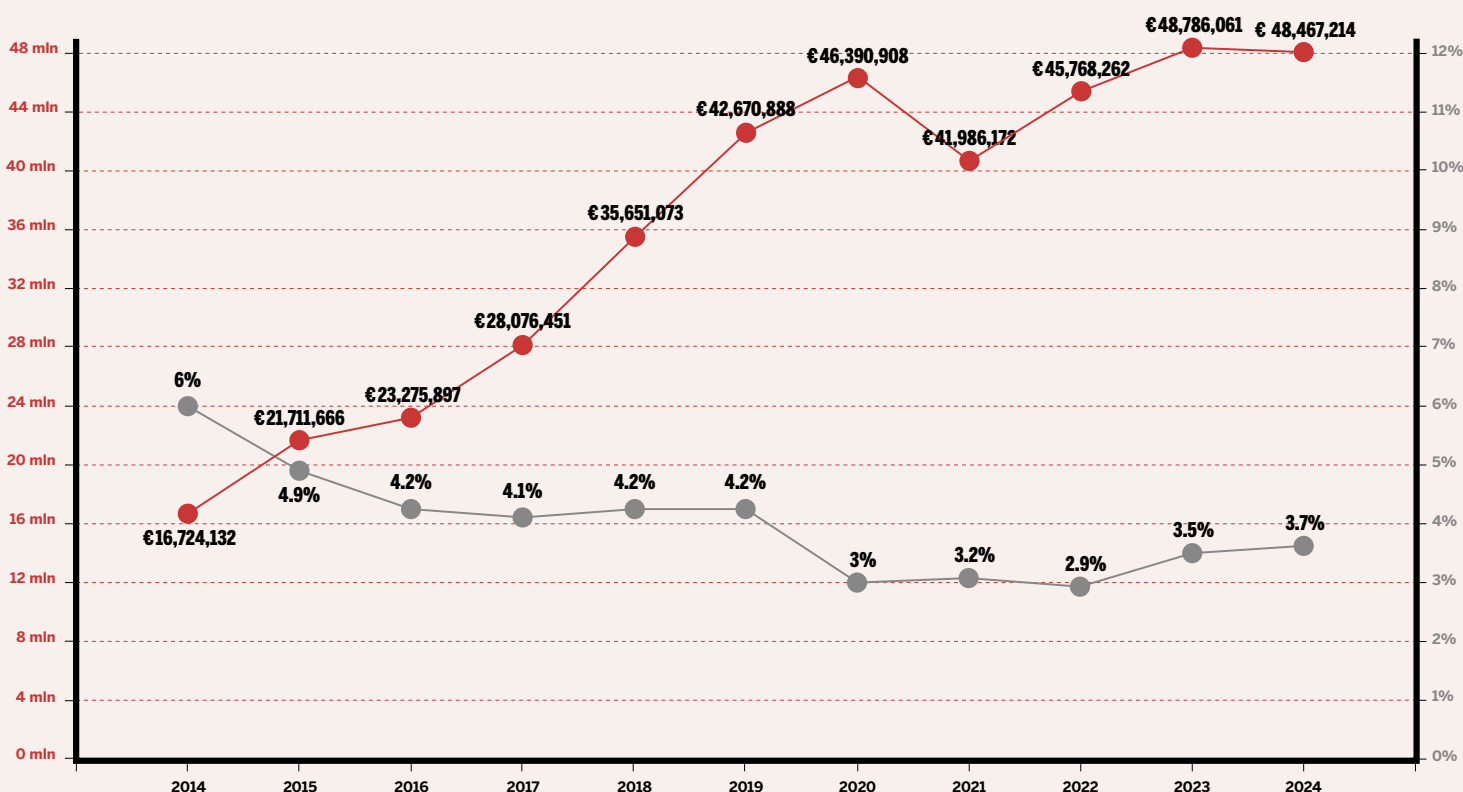
Operating costs: Costs for personnel, general facility management, raw materials, facility management services, depreciations, miscellaneous facility management expenses, financial expenses, and taxes and fees.

Public awareness, communications and fundraising: Costs for Communications, Community Relations and Fundraising division services and staff, publications, media relations, event management and publicity, public awareness about development, loyalty campaigns, new campaigns, community outreach and fundraising activities. Costs and expenses from fundraising activities amount to €1,456,042.

IMPACT OF OPERATING COSTS ON THE BUDGET

The charts below show the trend in total expenditures and the impact of operating costs from 2014 to 2024.

● Total expenditures (in euros)
● Operating costs impact ratio (as a percentage)



THANK YOU FOR JOINING US ON THIS INCREDIBLE JOURNEY WITH AFRICA

ORGANIZATIONS, GROUPS AND ASSOCIATIONS

Accademia Nazionale
Dei Lincei,
Associazione Culturale
Talentree,
Associazione Musicale
Summertime,
Associazione Operazione
Mato Grosso,
Associazione Tenda,
Associazione Volontariato
e Solidarietà,
Confartigianato Imprese
Padova,
Coordinamento Solidarietà
Onlus,
Federazione Provinciale
Coldiretti Padova,
Gruppo Appoggio Ospedale
Di Matany Onlus,
Il Graticolato Società
Cooperativa,
Insieme Per L'Africa Onlus,
Manos Unidas,
Polish Medical Mission
(Pmm),
Rotary Club Fabriano,
Rotary Club Forlì,
Soroptimist International
D'Italia Club Di Padova,
Taso (The Aids Support
Organization),
Tempus Novos Onlus,
Tre Emme Trust Onlus,
Voices Of Heaven Gospel
Choir.

COMPANIES

A.F. Energia Srl,
Adige S.P.A.,
Alchimia S.P.A.,
Ali S.P.A.,
Alstom Ferroviaria S.P.A.,
Autech Srl,
Axa Im,
Azienda Agricola Mea S.S.
Società Agricola,
Azule Energy Angola Spa,
Best Company Logistic Srl,
Beta S.R.L.,
Bimecc Engineering S.P.A.,
Bonelli Erede Lombardi,
Pappalardo Studio Legale,
Canale Italia Srl,
Cesare Regnoli E Figlio
S.R.L.,
Chiara S.R.L.,
Chiesi S.P.A.,
Dainese S.P.A.,
Delab,
Eni Natural Energies Spa,
Ersel Sim S.P.A.,
Eurizon Capital Sgr,
Exxonmobile,
F.Lli Campagnolo S.P.A.,
Fm S.P.A.,
G.M.T. Spa,
Goriziane Group Spa,
Grafica Veneta S.P.A.,
Idea Cinquanta Srl,
Immobiliare Seral S.R.L.,
Iveco Group N.V. Torino,
Kolver Srl,
La Scala Società Tra
Avvocati,
Laboratorio Chimico
Farmaceutico A. Sella S.R.L.,
Leoncini S.R.L.,
Macifin Srl,
Mafin S.R.L.,
Marsilli S.P.A.,
Media Support Srl,
Medival S.R.L.,
Mita Cooling Technologies
S.R.L.,
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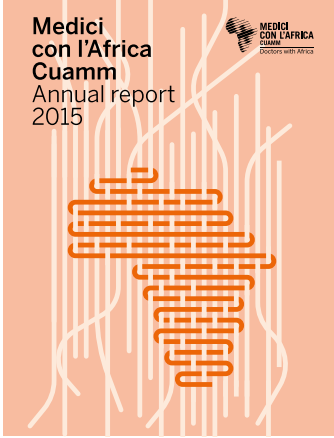
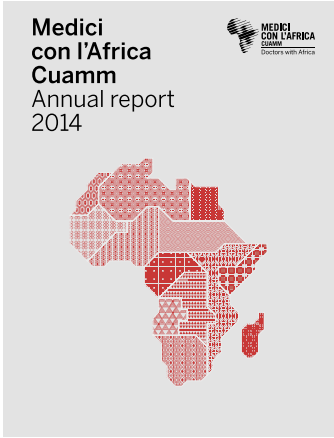
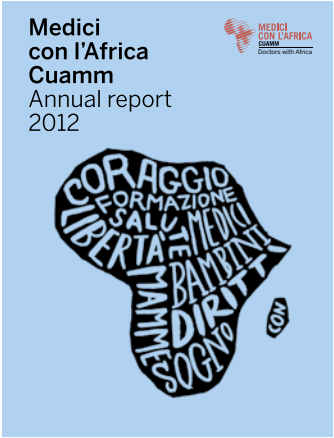
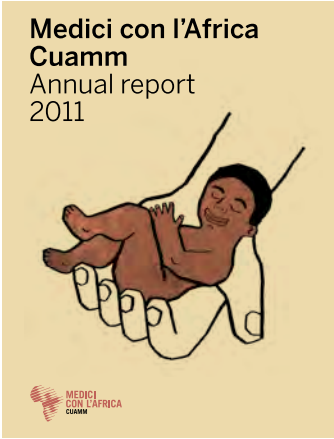
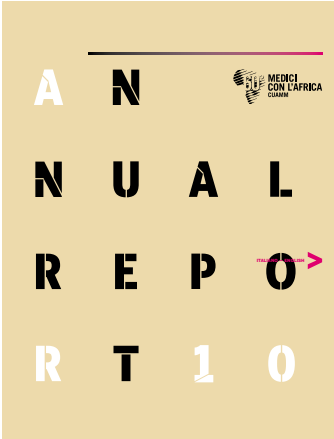
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2,365,773

Patients assisted

1,124,577

Children under
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544,615

Prenatal visits

273,361

Deliveries attended

15,096

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