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Foreword
Chairman
Éric Cheysson

Before focusing on 2018, I would like to pay tribute to two grand figures of French orthopaedic surgery who passed away this year—Professor Keyvan Mazda et Doctor Yves Desgrippes, founding members of La Chaîne de l’Espoir and colleagues, who gave so much to the children of Vietnam, Iran and Afghanistan, and whom we shall dearly miss.

With a backdrop of international social and societal crises, La Chaîne de l’Espoir has not buckled and indeed has stood up well. Buoyed by the number of lives and the renewed smiles of all the children taken in care and their families, the organisation has the support and unwavering help from the teams who work at head office, in the regional branches and local offices. This dedicated support from employees, volunteers, doctors, and host families is itself an eloquent expression of what La Chaîne de l’Espero means, and I wish to give my very sincere thanks to each and every one of them.

La Chaîne de l’Espoir, like many NGOs, is faced with a singular disquieting fact of contemporary life—safety and security. We work in unstable countries such as Afghanistan, Kurdistan, Iraq and certain African countries. Identified as a ‘reviled’ Western organisation, we are the prey of a scarcely visible enemy. Beyond the obvious risk of kidnapping, it is the threat of terrorist incursions into our hospital structures that we fear the most, as such events would render extremely problematical the presence of our teams in the field.

To maintain its place on the international stage, La Chaîne de l’Espoir raises questions about its future and its usefulness. In recent years, the size and increase in the number of children treated has meant that La Chaîne de l’Espoir has become a well-known and respected player in the health arena. It has become obvious why the heart of La Chaîne de l’Espoir beats—it’s for those sick children and other patients who, even today, have no access to quality medical care.

La Chaîne de l’Espoir affirms its top quality medical credentials, confirmed by the nomination of a medical director at Head Office and by carrying out large-scale hospital projects. The opening of the André Festoc Centre in Bamako, in September 2018, means that the local Mali population can now have open-heart surgery carried out by indigenous surgeons trained by top French heart surgeons in state-of-the-art paediatric heart surgery.

This knowledge transfer in a rapidly changing world is forcing La Chaîne de l’Espoir to adapt. Modern technology, with the ‘boom’ of the Internet and smartphones, opens up a whole new world. The ECHOES programme, for example, enables remote ultrasound consultations in real-time which, in turn, means more rapid and appropriate treatment for the children. This focus on its medical and surgical expertise will produce renewed attention to sick children and their well-being in hospital. The new programme of monitoring children in hospital, created by Médecins du Monde in 1988 and taken up by La Chaîne de l’Espoir in 2019, will ensure volunteer psycho-social support for children, who are alone in French hospitals because their parents lack the means to accompany them, during the whole time they are hospitalised.

As we celebrate our 25th birthday, we are not prepared to stop growing—we intend to care for more and more children in the years to come. Such an adventure will be impossible without you—donors, partners, institutions, ambassadors—so let’s continue together!

A really big thank-you to every one of you!
Our vision

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

Driven by the conviction that it is impossible to ignore their suffering and abandon them to their fate, Professor Alain Deloche decided to embark on a unique humanitarian adventure; an alliance made strong by generosity, skills and energy, which would bring together willing kind-hearted men and women ready to rise to life’s many challenges. La Chaîne de l’Espoir, founded in 1994 as a non-profit organisation (“loi 1901”), is currently chaired by Dr Eric Cheysson. As a major player in the medical field, we have created a network of medical and surgical expertise and excellence. We are actively engaged in long-term projects worldwide aiming to provide access to healthcare and education for the most destitute children and their families and wider communities.

Our missions

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

Our guarantees

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

Our approach

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

Our values

La Chaîne de l’Espoir values its donors’ trust and willingly gives full managerial transparency. We hold ourselves responsible and accountable to them and refuse to use any fundraising method which, through words or images, could harm the dignity of an individual or undermine respect for sacred beliefs. La Chaîne de l’Espoir chooses service providers based on unprejudiced management principles, respect of the bidding process and use of multiple suppliers.

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

Likewise, volunteers are bound by the organisation’s code of ethics and the ethical principles governing their profession. Lastly, La Chaîne de l’Espoir always tries to foster close relationships with the populations of the countries in which it works and ensures that its actions and methods are at all times consistent with its values.

La Chaîne de l’Espoir is a member of the Comité de la Charte du don en confiance, an institution certifying the ethical behaviour of social and humanitarian organisations launching public appeals.
La Chaîne de l’Espoir also received the IDEAS Label in 2012, which attests to the quality and transparency of an organisation in terms of governance, financial management and effectiveness of its actions.
Highlights for 2018

**Vietnam:** opening of the Pavillon des Enfants in July in Hô-Chi-Minh City (Saigon)

**Mali:** opening of the André Festoc Cardio-pediatric Centre in September, with the start of open-heart surgery

**Ivory Coast:** opening of the Dominique Ouattara Mother and Child Hospital in Bingerville - March

**Haiti:** in June, organisation by La Chaîne de l’Espoir and the Institut Necker de Pédiatrie in Haiti of the first Forum on health in schools in Port-au-Prince

**Logistics & procurement** 177 consignments organised for a total of 45 tonnes dispatched

**Total budget €21M**
**Madagascar:** in July, taking responsibility for a heart surgery programme, previously operated by Médecins Du Monde

**Afghanistan:** development of Echoes GYN-OBS. More than 251 remote ultrasound consultations carried out by French gynaecologists in 2018

**Treatment in France:** opening of the regional branch in La Réunion, where the first Madagascan child was treated in September

**The innovation centre:** EchoesCARDIO, 600 remote consultations carried out by our cardiac ultrasound experts, Mali joined the programme - December

**200,000 children treated**

**5,800 children operated**
Solidarity across borders

COUNTRIES INVOLVED
HOME COUNTRY OF THE CHILDREN TREATED IN FRANCE
HOSPITAL FACILITY CHILDREN’S PAVILION
MEMBER STATES OF LA CHAÎNE DE L’ESPOIR EUROPE
Decidedly international

La Chaîne de l’Espoir has a strong international orientation and was active in 30 countries in 2018 and in places affected by major humanitarian disasters.
Achievements 2018

Treatment of children in France
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The innovation centre
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Logistics, procurement and biomedical
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International missions
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Year after year, La Chaîne de l’Espoir pursues the activity it inaugurated in 1994 - bring to France those children who have no access to surgery at home so that they can be operated on by the finest medical and surgical teams in France.

Selection, welcome and treatment of the children:

- Diagnosis is carried out in the child’s home country thanks to our paediatric heart specialists and resident doctors in West Africa and Madagascar.

- These local volunteer support teams send us both a medical and a social dossier which are assessed by our experts at La Chaîne de l’Espoir’s head office.

- The dossiers are assessed on medical grounds and on the likelihood of a successful outcome of an operation in France. When all lights are green, La Chaîne de l’Espoir organises the child’s move to France in close cooperation with the local volunteer team - obtaining a passport and securing a visa, organising a plane ticket and accompaniment during the flight in partnership with Aviation Sans Frontière, choosing the host family and the hospital.

- Throughout the child’s stay in France, the child is accompanied by the volunteer host family. La Chaîne de l’Espoir keeps a close watch on the evolution of the child’s health through to the moment when the surgeon gives his approval for the child to return home.

- Once back home, the child is monitored by the local volunteer reference doctor, who keeps La Chaîne de l’Espoir regularly informed of the child’s state of health.
Thanks to this effort, 89 children have been saved in this way this year. Unfortunately, and we here pay tribute to their courage, 2 children passed away despite the treatment applied. With such dramas, La Chaîne de l’Espoir will continue to work so that the thousands of children waiting for new opportunities may be satisfied: in 2019, many African children will be transported for treatment into Senegal, Mali, Ivory Coast and other countries where La Chaîne de l’Espoir offers the capability of on-site treatment. This has enabled the first Madagascan child to have an operation in the Félix Guyon Teaching Hospital in La Réunion, an event that effectively marked the opening of the 19th regional branch in France - the first in a French Overseas Territory!
La Chaîne du Savoir, set up in 2015, has been reorganised in 2018 and renamed - it is now the Innovation Centre. The objective: drive to conclusion La Chaîne de l’Espoir’s desire to implement its digital transformation, with the accent on innovation and the use of new technologies to meet the health challenges confronting children in developing countries.

- **EchoesCARDIO**
  600 remote consultations involving cardiac ultrasound examinations were carried out in 2018. 10 experts in cardiac ultrasound techniques regularly connect to the ECHOES® platform.
  The André Festoc Centre in Mali joined the Echoes-CARDIO programme in December 2018. Our experts work closely with the local Mali paediatric heart specialists and French surgeons to prepare surgical interventions and to recommend the best approach in difficult surgical cases.

- **Commissioning of EchoesGYN-OBS in 2018**
  Since June 2018, the French Medical Institute for Mothers & Children in Kabul (FMIC, Afghanistan) and the Mother and Child Hospital in Bingerville (Ivory Coast) have been connecting regularly with French gynaecologists. 251 remote consultations alone have been carried out for the FMIC. The programme currently boasts 4 active experts in gynaecological and obstetrical ultrasound techniques.

In total, more than 30 doctors (experts and beneficiaries) opened an account on our ECHOES® platform in 2018.

- **Outlook for 2019**
  Thanks to new technologies, distance learning and regular training will be at the heart of our activities in 2019. A ‘Live Surgery’ project is currently being prepared between the Hôpital Necker-Enfants Malades, in Paris and the West African universities participating in the support programme for the in Postgraduate Specialisation Diploma in Paediatric Surgery.
  As a means of having a better follow-up system for children who have had surgical operations, La Chaîne de l’Espoir has initiated a study for implementing a patient monitoring software system.
The main activities of the “Logistics, Procurement and Biomedical” department are as follows: technical expertise support, purchase and shipment of consumables and medical & biomedical equipment to the countries where La Chaîne de l’Espoir is operating.

Structures rehabilitated or built by La Chaîne de l’Espoir are equipped with biomedical equipment and medical consumables shipped by the organisation, thus ensuring compliance with international quality standards. The activities of this department are essential to the success of the missions conducted by the medico-surgical teams as they enable them to operate on children locally, with all the equipment necessary for carrying out appropriate treatment.

In 2018, La Chaîne de l’Espoir released the depot which it managed in Malakoff (Hauts-de-Seine), France, in order to optimise both costs and the physical operation. Order receipt, goods handling, storage and preparation of shipments have been entrusted to Croix-Rouge Insertion Logistique. This service provider offers all the services of a professional logistics platform while at the same time offering employment for people in great difficulty with the hope or returning to active life as drivers, order clerks, machine handling operators, etc. In addition, at the Head Office of La Chaîne de l’Espoir, rue des Morillons in Paris, a biomedical workshop has been set up enabling checking and maintaining equipment sent into or used in the field. The Logistics, Procurement and Biomedical team have been able to join the organisation’s head office. It should be pointed out that these changes and removals were effected without any disruption to the department's mission. The opening and commissioning of the André Festoc Centre in Bamako (Mali) constituted high points in 2018, involving organising dozens of shipments - by sea and by air - to deliver more than 380 cubic metres (35 tonnes) of biomedical equipment, surgery consumables and medical furniture. These items are among the thousands which were originally identified by La Chaîne de l’Espero's experts in each specialty, followed by tough negotiations with suppliers, before being carefully transshipped via Senegal or the Ivory Coast and unloaded at their destination. No fewer than 15 biomedical investigations and 4 medical procurement and logistical expertise surveys were carried out before putting in place the processes, then monitoring and training personnel before, during and after the very first operations. In parallel, and throughout 2018, the demand for support and/or supplies from the French Medical Institute for Mothers & Children in Kabul and from other programmes and missions run by La Chaîne de l’Espoir remained at an elevated level, and covered an increasing number of specialties.

**Outlook for 2019**
The procurement needs and technical support requirements for the André Festoc Centre in Bamako remained high, given that the centre is in its infancy and the schedule of operations challenging. Consolidation of the Logistics, Procurement and Biomedical department and the organisational changes effected in 2018 will continue. The department will remain fully supportive of the surgical missions and the new hospital projects currently under way.
A critical humanitarian situation, aggravated by ongoing conflicts

2018 was marked by a very high level of insecurity both in the provinces and around the capital, Kabul. Opposition groups, such as the Taliban, are present in a large part of the country. The local branch of the Islamic State Organisation is well entrenched and mounts targeted attacks in the centre of the country, particularly focusing on the Hazaras ethnic minority, and in Kabul. The number of civilian victims increased by 11% compared with 2017. 2018 was also marked by political instability caused by the legislative elections in October which engendered protests and violence due largely to dysfunctions in the election process.

The low level of diplomatic representation at the International Conference on Afghanistan, organised in Geneva in November, demonstrated the limited ambition of the international community to continue its support for the country. Despite this environment, French players have been active. For example, a tract appeared in Le Monde signed by diplomats, artists and NGOs including La Chaîne de l’Espoir. “Don’t let Afghanistan down”, an appeal to the French government to rethink its policy towards Afghanistan and to reaffirm the ties of friendship and cooperation that link the two countries. Humanitarian needs continue at a high level and have considerably increased due to a very severe drought, insecurity and an influx of refugees returning from Pakistan and Iran. The United Nations estimates that some 6.3 million people will require humanitarian aid in 2019 (compared with 3.3 million in 2018).

Medico-surgical treatment for women and children

Aid concerns mainly food safety, physical security and medical emergencies. In this context, for 2019, La Chaîne de l’Espoir is more than ever determined to continue its support for the Afghan population, especially women and children, so that they may have access to high quality health care.

A year of important developments for the FMIC

2018 was a very active year for the French Medical Institute for Mothers & Children (FMIC) with improved care opportunities in the recently opened gynaecological-obstetric and neonatal units, thanks to the numerous medical missions from the volunteer members of La Chaîne de l’Espoir.

La Chaîne de l’Espoir also implemented “ECHOES GYN-OBS” in the hospital, a programme which offers ongoing training and an improvement in the capabilities of the local Afghan teams using obstetrical ultrasound techniques remotely via the remote ultrasound platform. The year also saw the opening of orthopaedic care and medical hospitalisation for adults. The development of care services for adults in the FMIC is a response to the increasingly large demand in the country and to help ensure the financial future of the hospital.

With the support of La Chaîne de l’Espoir, the FMIC acquired a latest generation MRI machine. This brings additional comfort for patients, better image quality and improved diagnostic precision. This acquisition was made possible thanks to the continued support from the hospital’s partners - the French and Afghan governments, the Aga Khan Development Network and La Chaîne de l’Espoir, and the unstinting help of all the Afghan teams in all departments.

The collective effort bore its fruit and confirmed the adage which says, “Alone, you can go quicker, but together you can go further”.

The support from La Chaîne de l’Espoir

The challenge for La Chaîne de l’Espoir has been the continued support for the medical teams, particularly in the new units dedicated to women and neonates, while at the same time continuing to support...
paediatric surgery and additional support for the new departments dedicated to adults. 67 missions with a combined duration of 1,352 man days, including 45 medical and paramedical missions, were carried out at the FMIC.

33 health professionals carried out one or more missions, either short-term or long-term:
- 20 long missions (14 days and over): adult and paediatric heart surgery (6), anaesthesia and post-operative recovery from heart surgery (3), anaesthesia in child-birth (3) medical coordination of the Mother and Child Centre (3) and cardiology (1)
- 28 short missions: paediatrics-neonatology, gynaecology and obstetrics, adult and paediatric interventional cardiology, hygiene, anaesthesia and post-operative recovery, laboratory, orthopaedic surgery of the upper limb, nursing care, biomedical engineering and pharmacy.

• The new gynaecology-obstetrics units
This 2nd year of operation of the maternity unit has enabled the teams to develop their skills thanks to the support of specialists from La Chaîne de l’Espoir. In total, 17 missions were carried out to strengthen the skills of gynaecologists, obstetricians, anaesthetists, and midwives. This does not include the remote obstetrical ultrasound sessions which enabled the Afghan teams to forge relationships with experts in France for a second opinion.

• Hygiene
In 2018, La Chaîne de l’Espoir carried out 2 missions to improve techniques in biocleaning in the hospital environment. This training focused on areas subject to a high level of infection risk, in particular the maternity unit, and helped to inculcate an awareness of hygiene needs and adherence to protocols and techniques.

Teaching such practices is one of the top priorities for La Chaîne de l’Espoir and will be extended to other areas of the FMIC in 2019.

45 medico-surgical missions
545 heart operations
Implementation of the ECHOES GYN-OBS programme

Activities:
Medical, paramedical and technical training
Medical specialties:
Specialised paediatric surgery (heart, orthopaedics, visceral, plastic, ophthalmology), paediatric and adult interventional cardiology, gynaecological and obstetrical surgery.
Programme coordination:
Sophie TRAN (France), Frédéric OBERSON (Afghanistan)
Medical advisers:
Agnès SIMON (coordinator for all maternity unit activities)
Location:
Kabul - French Medical Institute for Mothers and Children
Funding:
French Embassy / French Development Agency / Fondation Emirates

• Continuation of our support for interventional cardiology
The development of interventional paediatric and adult cardiology is another priority. In this area, a mission by a Franco-Afghan cardiologist lasting two and a half months was completed in December. This enabled considerable progress to be made and should be followed by further sessions. The cardiology and heart surgery unit is a true reference centre in Afghanistan with, in the past 2 years, more than 500 heart operations and cases of interventional cardiology.

• Reinforcing the capabilities of Afghan ophthalmologists
A single mission was carried out in 2018 due to a lack of doctors able to leave for Kabul. This nevertheless enabled reinforcing the development of retinal surgery. As a complement to this, video-conferences were organised by La Chaîne de l’Espoir with the help of French specialists and destined for ophthalmologists working at the FMIC and in other hospitals in the vicinity.

• Develop and keep qualified staff in hospitals
The Postgraduate Medical Education Programme (PGME) positions the FMIC as a regional and national

- **Access to health care for the poorest**
  In 2018, La Chaîne de l’Espoir maintained its contribution to the social welfare fund of FMIC, with the help of the French government, thus enabling indigent patients from the 34 provinces of Afghanistan to receive medical treatment. 4,200 patients hospitalised and 45,000 treated as day patients benefited from the solidarity programme.

- **ECHOES, remote cardiac and obstetric ultrasound**
  The ECHOES programme, which enables carrying out remote on-line ultrasound scans using a single platform, has been increasingly used at the FMIC, where some 251 such remote scans were performed and, for the first time, sending a technical coordination mission. 2019 will be the moment when the FMIC will place even more emphasis on using ECHOES-GYN with the aim of treating more women in the Afghan Women and Children’s Pavilion.

- **Outlook for 2019**
  Another year devoted to action serving the Afghan teams in the FMIC. The accent will be on mobilising the local La Chaîne de l’Espoir field teams, the volunteers and the French doctors in the following treatment areas: gynaecology, obstetrics, paediatrics, neonatology, paediatric and adult heart surgery, interventional cardiology, ophthalmology, etc. And finally, we shall be examining the possibility of extending the organisation’s actions with significant development of specialised medico-surgical treatment for adults, and improving training and research. 2019 will be a year of lively discussion and debate with our partners along these lines.

**HOSPITAL ACTIVITIES IN 2018**
- 8,442 admissions
- 2,318 surgical operations (excluding heart surgery)
- 545 heart operations
- More than 77,000 individual scans taken
- More than 160,000 consultations
- More than 400,000 laboratory analyses carried out

**RECOGNITION OF LA CHAÎNE DE L’ESPOIR’S ACTIONS BY THE AFGHAN GOVERNMENT**

On 10th March 2018, the Afghan President and First Lady awarded the Mir Masjedi Khan medal to Éric Cheysson, Chairman of La Chaîne de l’Espoir.

This medal is the highest civilian distinction available in the country.

“This medal recognises all La Chaîne de l'Espoir's teams and the numerous volunteers who have been working for so many years in Afghanistan. It is the fruit of a magnificent collective effort and the award encourages us to accomplish even more and this in a context that is frequently difficult.”

Éric Cheysson
Treatment of sick children

In Afghanistan, because there is a lack of funding and adequate and accessible health establishments, the poorest families in the regions remote from the capital are unable to provide their children with the necessary healthcare, especially surgical. This is why La Chaîne de l’Espoir created the Children’s Pavilion in 2008 in order to give the most vulnerable children and their families from the 34 Afghan provinces access to medical and surgical care at the French Medical Institute for Mothers & Children (FMIC). Thanks to a widened healthcare network, in 10 years, La Chaîne de l’Espoir has already managed to support some 8,784 Afghan children from those 34 provinces. This represents some 8,500 operations and 45,000 consultations.

In 2018, the Women and Children's Pavilion has widened its actions to treat vulnerable women awaiting gynaecological treatment. In the course of the year, a dozen or so Afghan women from remote provinces have thus been able to be treated under the aegis of the Pavilion and at the FMIC. To get the system going and start treatment of Afghan women at the Pavilion, La Chaîne de l’Espoir has strengthened its team with the appointment of a nurse and 2 social workers. Undergoing medical and surgical treatment in a Kabul that they do not know can be a difficult and disturbing experience for these families. Therefore La Chaîne de l’Espoir tries to cover the totality of their needs - transport to and from their homeland, shelter, meals, medical surveillance with a permanent nurse in the Women and Children’s Pavilion, etc.

Activities:
Medical and social care of impoverished children from the provinces

Programme coordination:
Sophie TRAN (France), Frédéric OBERSON (Afghanistan)

Location:
Kabul - Th Afghan Women and Children’s Pavilion

Funding:

The Pavilion medical team also provides a personalised accompaniment for each case to ensure that the various administrative and medical hurdles are overcome without difficulty. At the same time, it takes the opportunity of ensuring awareness of the need for prevention and for hygiene. The number of beneficiaries continues to increase, and has doubled during the year to reach some 50 people per week. Children and their relatives may also receive psychosocial support, should they need any. In order to be able to reach the maximum number of families, especially those who, because of distance or war, have no access to treatment, La Chaîne de l’Espoir is working with 15 partners who have a presence throughout the whole of Afghanistan.

Outlook for 2019
La Chaîne de l’Espoir will continue to defend free access to quality specialised care for children and will extend that access to the most vulnerable Afghan women, in order to give them access to surgical gynaecological care at the FMIC.

To fulfil this mission, La Chaîne de l’Espoir will continue to mobilise its local partners on patient referrals and on the development of financial partnerships and innovative funding methods to be able to maintain or increase the number of patients.
Since 2014, La Chaîne de l’Espoir has been supporting the teaching programme for the Postgraduate Specialisation Diploma in Paediatric Surgery (PSD-PS) in West Africa. This programme is run in collaboration with the Universities of Abidjan (Ivory Coast), Lomé (Togo), Cotonou (Benin), Dakar (Senegal), Ouagadougou (Burkina Faso) and Conakry (Guinea Conakry) with which partnering agreements have been signed.

In 2018, La Chaîne de l’Espoir wished to increase its legitimacy and the visibility of this programme by strengthening its relationships with the African and Madagascar Council for Further Education (CAMES), which agrees these diplomas, and the West African Health Organisation (OOAS) which harmonises the training curricula in paediatric surgery. Memoranda of understanding are being drafted with both these institutions.

In 2018, the 9th and 10th seminars concerning theoretical and practical teaching were held in Dakar, at the Albert Royer National Children’s Hospital Centre (CHNE), and in Ouagadougou, at the Charles de Gaulle Paediatric Teaching Hospital. The French and Belgian ‘Chaînes de l’Espoir’ were partners in the organisation and funding of these 2 seminars which were, incidentally, organised under the aegis of La Chaîne de l’Espoir Europe as a means of promoting mutual development with other European associations. On average each seminar had some 50 participants, 3rd and 4th year PSD-PS students and their teachers. The sessions covered included visceral and orthopaedic traumatology, club foot and caustic stenosis of the oesophagus. In total 18 theoretical sessions were given by Prof. Yann Révillon and Prof. Naziha Khen-Dunlop, from the Hôpital Necker-Enfants Malades (France), Prof. Greta Dereymaeker, from the Catholic University of Louvain (Belgium), Prof. Jérôme Viala, from the Hôpital Robert Debré (France) and Dr. Damien Desmette, from the Ambroise Paré teaching hospital (Belgium).

In very close cooperation with the local medical team, they carried out surgical operations in the operating theatre, re-transmitted with commentary into the lecture room, and also treated around twenty children.
La Chaîne de l’Espoir has established an agreement with the Hôpital Necker-Enfants Malades which will set up, from 2019, regular surgical sessions with direct re-transmission (‘live surgery’) from the operating theatre in the Hôpital Necker-Enfants Malades into the lecture room of the Mother and Child Hospital (MCH) in Bingerville where Ivory Coast students studying for the PSD-PS will be able to interact directly and to put questions to the operating team in Paris.

This past year, 3 PSD-PS medical students from Togo and Ivory Coast received grants to help them continue their training in the best possible conditions.

- **Outlook for 2019**

In June, La Chaîne de l’Espoir will be organising the 1st teaching seminar on heptobiliary pathologies, axis deviation in the lower limb and medical reporting, at the Albert Royer CHNE in Dakar. A 2nd teaching seminar on minimally invasive surgery techniques and the consequences of brachial plexus injuries will be organised in November at the Sylvanus Olympio Teaching Hospital in Lomé.

‘Live surgery’ sessions will be implemented during the 1st quarter of the year between the Hôpital Necker-Enfants Malades and the MCH in Bingerville.

During the year, these ‘live surgery’ sessions will reach a wider audience by including programme partners from other countries using satellite re-transmission. The content of these seminars and the videos from ‘live surgery’ will be preserved in a reference library for the future use of PSD-PS students.
Caustic œsophageal stenosis is a genuine scourge, a significant public health issue and a severely-underestimated cause of infantile mortality. Caustic soda is a substance widely used in West Africa for dyeing fabrics, hairdressing, and the preparation of certain foods (alimentary potash). Such activities are generally carried out in the home and typically in the homes of the poorest families. Its form, (odorless, colourless crystals or liquid) means that it is frequently mistaken for food items by young children and swallowed by accident.

Ingestion of caustic soda (ISC) causes corrosive, irreversible and extremely painful lesions which prevent the children from feeding themselves other than through a catheter directly into the stomach, which entails surgical intervention which is both complex and not available everywhere.

Medical treatment may only be carried out in specialised health centres. This generally long (several months for œsophageal dilatations, sometimes several years to wait for a replacement œsophagus) and complex because it requires a multi-disciplinary joint effort involving at least, a paediatrician, a digestive endoscopy specialist, and anaesthetist, a radiologist, a psychologist and a surgeon.

An initial mission for training and treatment was organised in 2017, enabling laying the foundation with our partners in the sub-region of a more ambitious programme aimed at creating reference centres for œsophageal surgery in West Africa and the development of a pilot programme of prevention for ISC cases.

In 2018, La Chaîne de l’Espoir, in partnership with the Fondation Terre des Hommes from Lausanne for Mali and the Red Cross for Ivory Coast, carried out 2 wide-ranging surveys among some 1,200 people representing users, caustic soda sellers, medical personnel and representatives of the local authorities from the 2 countries.

These surveys highlighted the importance of action to create awareness at all levels, of prevention to reduce the risk of accidents, of medical and surgical training to have readily available references, and of the need for appropriate treatment for patients.

The findings from these surveys were presented to workshops with professional representatives from the target sectors, the health, social and sanitary authorities, the professional bodies, and doctors and surgeons in order to get their buy-in and support for developing the programme.

In 2019, La Chaîne de l’Espoir wishes to continue to organise training and treatment, notably in Mali, at the Mali Hospital, and in Ivory Coast, at the Mother and Child Hospital in Bingerville.

The partnerships with the Fondation Terre des Hommes Lausanne and the Red Cross will be strengthened by drafting a joint programme of prevention, training and treatment.
La Chaîne de l’Espoir has been involved in Bangladesh, in partnership with the NGO Friendship since 2014. The latter had created hospital boats which meant that those living on the 350 islets, one of the poorest parts of Bangladesh, could have access to healthcare in a region where the necessary structures simply did not exist. The boats enabled patients to consult medical teams and to undergo very light surgery. In 2018, Friendship opened a hospital in Shyamnagar, in the south of Bangladesh. More difficult surgical operations than those that were possible on the boats can now be carried out.

En 2018, La Chaîne de l’Espoir carried out 4 surgical training missions in the Chars. A 1st orthopaedic surgery mission was carried out by Prof. Jean-François Mallet covering surgical and rehabilitation treatment for children suffering from cerebral motor infirmity (IMC). During a previous mission, the paramedical personnel were trained in diagnosis and the parents of the children were initiated into the primary rehabilitation/physiotherapy manipulations. This enabled checking that the rehabilitation methods had been clearly appropriated by the parents and were well supervised by the paramedical staff. 3 other missions were carried out covering plastic surgery, visceral surgery and consultations in cardiology and general medicine. In total, 464 people were received and 93 were able to have operations. In the south, 4 missions transferred medical and surgical expertise to help with the opening of the hospital in sectors as varied as maternity, gynaecology, sterilisation, pharmacy and general medical consultations. In total, more than 165 people were seen and the local medical team was trained in general and gynaecological consultation techniques.

In 2019, La Chaîne de l’Espoir will continue its missions for surgery and consultation technique in the Chars, sending 2 missions in visceral surgery, 2 missions in orthopaedic surgery and physiotherapy, 2 missions in heart consultation, one mission in pharmacy training, one mission in dental surgery and one mission in gynaecological consultation. In the south, one mission will be organised to assess the activities and requirements of the staff so that La Chaîne de l’Espoir can better organise future missions, including some in the area of cardiology.
Since 2012, La Chaîne de l’Espoir has implemented actions in Benin in partnership with the Lagune Mother & Child Teaching Hospital (CHU-MEL). In 2017, a new partnership was initiated with the Hubert Koutoukou Maga National Teaching Hospital Centre (CNHU-HKM). These working relationships aim to improve the level of equipment and strengthen the capabilities of the medical staff in treating the children’s various pathologies.

• **Reconstructive surgery programme**
Cases of severe burning are frequent in Benin, particularly as a result of handling poor quality petrol sold in the street or of accidents in the poorly protected family environment where there is severe exposure to risk. The programme started in 2017 and 2 missions were carried out in 2018 with the aim of strengthening the capabilities of the CNHU-HKM plastic surgery team in the treatment of facial malformations (hare lip) and the aftermath of severe burns.

In addition, La Chaîne de l’Espoir supports the development of the severe burns unit concerning equipment, nursing treatment and physiotherapy.

The initial mission in June, carried out by Drs. Julien Szwebel and Leslie-Ann See, volunteer plastic surgeons, meant that 14 children benefited from such operations. The 2nd mission took place in October. This latter mission, during which 12 children were treated, was the first carried out in close cooperation with the Solidarité Brûlés Nantes-Lomé Association, which has been performing such operations for a number of years now, and which was happy to pass on to us some of its expertise. It was run by the plastic surgeon, Dr. Dominique Hepner, and her team - nurse Ms Armelle Charlot, and physiotherapist Mr. Dominique Bidet.

• **Paediatric itinerant mission**
Following the excellent experience in Togo, La Chaîne de l’Espoir was very keen to repeat the paediatric surgery mobile missions in Benin. Thus, the 1st travelling mission in Benin, from 29 September to 6 October 2018, took place in the Ouémé-Plateau de Porto-Novo Departmental Teaching Hospital Centre, some one hour’s journey from Cotonou in the southwest of the country. This mission was conducted by Prof. Michel Fiogbé, paediatric surgery unit head of the Hospital Centre.
at the CNHU-HKM, and his team. He was assisted by Dr. Chantal Chazelet, volunteer anaesthetist from La Chaîne de l’Espoir. Just as in Togo, such missions allowed medical students studying for the Postgraduate Specialisation Diploma in Paediatric Surgery (DES-CP) in Cotonou to carry out surgical operations under the supervision of their teachers as part of their curriculum. In 5 days, the team was able to provide some 350 consultations and operate on 136 children. The main afflictions treated were hydrocele, hernia, the aftermath of bone fracture, bone diseases, splenomegaly, etc.

**ECHOES programme - Innovation centre**

The ECHOES programme was kicked off in Benin in 2017 under the guidance of Dr. Philippe Adjagba from the CNHU-HKM. Using live streaming, the system enabled improving the skills of the local medical teams in diagnosing congenital heart diseases in children. Benin’s doctors were connected to their French counterparts to carry out a cardiac ultrasound scan on a child and obtain a precise diagnosis.

This was a huge benefit for the Benin cardiologist, supported by experts in his speciality, but also for the treatment to be given to the child. The programme is a genuine success story and has enabled transferring a certain number of children to France for surgical treatment.

**Outlook for 2019**

To strengthen the capabilities of the local Benin teams in treating severe burns cases and in reconstructive surgery, La Chaîne de l’Espoir will organise 2 missions to the CNHU-HKM. In addition, 2 mobile missions and 2 paediatric urological surgery missions will be carried out with the teams from the CNHU-HKM and the CHUMEL.
La Chaîne de l’Espoir started its programme in favour of the school enrolment of disadvantaged children in Benin in 2011. This programme was set up jointly with the local NGO, Bien-Etre et Développement, which gets involved in several areas to help the most disadvantaged populations. This Association has been active for more than twenty years in schools, both primary and secondary, the latter in the Hévié region, as well as jointly with La Chaîne de l’Espoir in the elementary school built in Dossounou. These are the schools in which La Chaîne de l’Espoir is concentrating its efforts.

In 2018, to support disadvantaged families in obtaining schooling for their children, La Chaîne de l’Espoir supplied 94 children with school kits, comprising manuals and other school books suited to their ages, as well as school uniforms and sports clothing to provide a higher quality education.

In these schools, in addition to the material aid for their schooling, children benefited several times in the year from dietary help in the form of basic cereals, such as rice, maize, soya and sorghum.

Out of all the children receiving support, 6 were candidates for the Primary Studies Certificate and all them achieved the required level.

For the 12 who took the ‘Brevet d’Etude de Premier Cycle’, there was a 75% pass rate.

In 2019, La Chaîne de l’Espoir will continue its support for the schooling of children jointly with Bien-Etre et Développement until the start of the next school year.
In Burkina Faso, La Chaîne de l’Espoir and its fellow partners have come to the same conclusion - that noma and other facial pathologies and malformations are poorly understood both by the general population and the medical fraternity. The absence of any social protection leaves the most disadvantaged sufferers with no hope in a society where superstition and stigmatisation are still well entrenched. To such beliefs needs to be added the difficulty of access to care as well as the ignorance concerning the first signs, all of which means very late treatment or even a complete absence of treatment. The aesthetic consequences are considerable. Such malformations put the lives of the victims literally at risk (difficulty to feed oneself in cases of total constriction, breast feeding impossible if cracks appear, food frequently going down the wrong way, etc.), and also cause hearing, breathing, speaking difficulties and a brake on maxillo-dental growth, etc. Those who survive infancy but disfigured, just as others suffering from tumours, cracks or burns sequels are banned from society, frequently rejected by their families and refused entry to school. The whole family suffers from the inevitable psychological and socio-economical effects. To deal with such a situation, La Chaîne de l’Espoir launched a programme of reconstructive surgery of the face in 2014, combining care and training, with two surgical missions per year.

In 2018, in the specific case of maxillo-facial pathologies taken in hand, with numerous local beliefs hanging over those suffering from supposedly unknown afflictions, access to quality treatment is frequently impossible. This has incited La Chaîne de l’Espoir to increase its impact in the most affected regions, i.e. the poorest. In early 2018, thanks to
a co-financing effort from the French Development Agency, La Chaîne de l’Espoir, the two associations Sentinelles and Bilaadga, and the community radio station La Voix du Paysan launched an integrated project working on prevention and treatment among sufferers of noma and facial malformation pathologies. The idea is to combine all the respective skills of each player to ensure the populations are aware, to galvanise civil society, to treat detected cases both medically and surgically, to train local teams - all this in three targeted regions in Burkina Faso.

For the 1st year of operation, the Boucle du Mouhoun region was selected for awareness and training actions. First, Sentinelles carried out more than 130 training sessions by going into each Centre for Health and Social Promotion in the region. These sessions covered detection of noma and other facial malformations and pathologies, appropriate treatment and referrals of advanced cases to the reference medical centres.

Then the community radio network La Voix du Paysan ran workshops to improve the knowledge and skills of the radio show presenters and journalists from partner radios. From this, they created awareness micro-programmes widely broadcast over the air.

Creating awareness among the population was based around play-acting, street interviews, and radio games, carried out in the centre of the targeted villages. The programmes were then broadcast over local radio in order to target a wider audience.

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The awareness programme continues in the region thanks to community groups trained in the pathologies and malformations, the appropriate treatments and the procedures to follow to face up to the problems. Armed with their new skills they organise discussion groups in the villages.

During the 2 surgical missions organised by the volunteer teams from La Chaîne de l’Espoir, 301 patients were seen in consultation and 153 benefited from an operation. The main pathologies treated were cleft lip, cleft palate, maxilla and mandibular tumours, and the after-effects of noma and severe burns. All these actions were carried out with the accompaniment of the local teams. DES students in maxillo-facial surgery were able to attend theoretical courses as part of their curriculum.

All patients benefited from a pre- or post-operative stay in one of the partner hosting centres. This enabled our partner teams to carry out post-operative care and physiotherapy.

Au total, plus de 165 personnes ont été vues et l’équipe médicale locale été formée à la consultation générale et à la consultation de gynécologie.

In 2019, the project will be continued in the Centre North region for training and awareness.
Support for paediatric cardiology

The Phnom Penh Cardiology Centre, built by La Chaîne de l’Espoir in 2001, became, in May 2013, the Cardiology Unit of the Calmette Hospital (DCHC). In 2018, La Chaîne de l’Espoir continued to support its partner both technically and financially. Thus, 8 operations for children were financed each month, and financial support was organised for consultations for indigent children enabling access to treatment for the poorest children in the region.

In 2018, 4,382 paediatric consultations, 3,015 children and 1,367 young adults and adult sufferers from birth, took place in the unit, with 461 being new patients. It is the conclusion of a long-term successful partnership that has enabled the training of a competent medical and paramedical team and the development of a spirit of service inside the hospital. Cardiac consultations are carried out in two consultation rooms, with modern ultrasound equipment that is systematically used. Drugs are distributed free of charge to patients, owing to the financial support from La Chaîne de l’Espoir.

Surgical and telemedicine activity

In 2018, 79 patients benefited from therapeutic acts financed by La Chaîne de l’Espoir. Among these, 25 were treated by interventional cardiology avoiding many non-surgical acts, reaching the affected parts through the arteries. 54 patients received conventional surgery. It should be noted that, as previously, children in the programme may only be operated on after Prof. Daniel Sidi has given a second opinion from Paris via video conference.

Since 2015, we have been organising a telemedicine session every week with Prof. Daniel Sidi and the team of cardiologists from CDCH headed by Dr. Sok Phang.

Those sessions are a way to establish a dialogue between an expert and younger cardiologists, to train them and improve the ultrasound diagnosis. 202 remote consultations were carried out in 2018 via the ECHOES® platform.

The 2018 collaboration with the Kantha Bopha Foundation (Siem Reap)

The Siem Reap Centre, set up thanks to joint work between La Chaîne de l’Espoir and the Kantha Bopha Foundation in November 2011, carried out 456 operations in 2018 including 201 interventional catheterisations, thanks to Dr. Ponn Ladin, who was trained in paediatric cardiac surgery by La Chaîne de l’Espoir’s teams.

2 missions were carried out in May and in December with a team comprising a surgeon, a paediatric anaesthetist and a paediatric heart specialist.
**Cambodia**

**Paediatric neuro-surgery**

- **Strengthening neuro-surgery at the Kantha Bopha Foundation**

For several years now, La Chaîne de l’Espoir has been strengthening neuro-surgical skills in the Kantha Bopha Foundation’s medical teams. Training is on-going in this area. This has resulted in skill improvements for 2 paediatric neuro-surgeons and training for two resident hospital doctors.

In 2018, 2 missions were carried out, in May and December, by Dr. Didier Scavarda and Dr. Beaurain, neuro-surgeons, Dr. Isabelle Curt, anaesthetist, and Muriel Pedron, operating theatre nurse. Dr. Nathalie Chivoret, neuro-surgeon, also took part in the May mission. The children were selected for surgical treatment after a day of consultations: 20 had operations in May and 16 in December.

Training takes place in the 2 Foundation hospitals, one in Siem Reap and the other in Phnom Penh, where a new building destined exclusively for neuro-surgery and heart surgery is under construction. The new building will increase the number of dedicated operating theatres. A post-operative recovery room, similar to the one in Siem Reap, is also planned for the new building. Treatment for young patients by the local Cambodian neuro-surgeons has improved in leaps and bounds, but still requires support for patients with severe cerebral tumours, or complex vascular or other malformations.
March 2019 will see the consecration of many years of joint efforts involving the Children of Africa Foundation (the Foundation of Madame Dominique Ouattara, First Lady of Ivory Coast) and La Chaîne de l’Espoir to enable the Mother and Child Hospital in Bingerville (HME) to open its doors and welcome its first patients. Positioned at the outset as a reference establishment in the country, but also in the wider sub-region, the hospital has been eagerly awaited by the Ivory Coast population, as the country desperately lacked a hospital combining medical excellence and affordability of access. And that is precisely the role of this particular establishment - provide a varied range of very high quality treatment for all mothers and children, whilst guaranteeing free access for the poorest members of the population.

Its splendid façade, impressive both in size and design, is a perfect reflection of what is to be found inside - state-of-the-art equipment, a high quality infrastructure and, above all, top quality administrative and medical teams, trained in the most up-to-date techniques and benefiting from regular support and help from French experts.

In 2018, after accompanying the Foundation since 2014 on the medical side, monitoring site progress, helping with legal issues, financial management and human resources questions, La Chaîne de l’Esper has kicked off a vast training plan aimed at supporting continued development of the technical excellence of the nursing staff and the technical personnel. 14 doctors, paramedics or specialists in hospital administration carried out missions at the Bingerville HME in the most varied of areas - the workings of the hospital pharmacy, X-ray protection, equipment maintenance, gynaecology and obstetrics and learning how to carry out remote gynaecological ultrasound scans, improving imagery skills, operating theatre organisation, anaesthetics and post-operative recovery and, in partnership with the GFAOP (the Franco-African Paediatric Oncology Group), assistance in setting up the paediatric oncology unit.

As a member of the high quality partnership with the Hospital and Foundation teams, La Chaîne de l’Esper is also a member of the HME’s Board of Directors. As such, it is heavily involved in all those aspects in the life of the Hospital that touch on improving care quality and the totality of its daily activities.

La Chaîne de l’Esper also sent a consultant to work with the management team on improving the patient administration system, shortening waiting times and facilitating treatment for indigent patients.

In 2019, an ambitious training plan contains a very varied set of missions such as oesophageal surgery, coelio-surgery, vaginal surgery, neonatology, interventional X-ray techniques, chemotherapy, bronchial endoscopy and sterilisation techniques.

In addition, support will be provided for facilitating training sessions in France for doctors, and for kicking off the ‘maison de vie’ project.
2018 has provided plenty of satisfaction regarding our cooperation with our Cuban partners. As in previous years, La Chaîne de l’Espoir has helped set up several seminars and congresses where Cuban doctors were able to work together on subjects essential for paediatric surgery, but also where they could meet their counterparts from the wider region to improve their skill levels.

Thus, La Chaîne de l’Espoir partly financed the National Paediatric Conference at the beginning of the year and contributed with presentations on infections and antibiotic therapy, as well as infantile genital surgery. In May and in September, La Chaîne de l’Espoir funded meetings with fellow Chilean and American doctors in Cuba, during which they studied new treatments for several urological pathologies.

Prof. José Uroz, a surgeon with La Chaîne de l’Espoir, was present in Cuba throughout the year and was able to provide his expertise to the 2 paediatric surgery units, one in the Central Havana Hospital the other in the Hôpital du Cerro, which enabled treating in-house children with complex malformations.

As in the past 5 years, provincial doctors have been able to stay in the residence built and equipped with funds from La Chaîne de l’Espoir in Havana, where they were able to prepare for their diploma in paediatric urology at the Medical Faculty of the Calixto Garcia University. In 2018, 6 students were able to take advantage of this. Again this year, La Chaîne de l’Espoir continued to provide generous donations of training rooms and equipment essential for paediatric surgery, and this in several hospitals. The Centro Habana hospital in the capital has thus a training room available for 60 students, with all the necessary audio and video equipment required for the courses.

At the William Soler hospital, La Chaîne de l’Espoir funded a location for the Cuban Society of Paediatric Surgery, the chairman of which is Dr. Ramon Villamil, the head of the Cuban liver transplant and surgery unit. The computer system provided will enable the editing and distribution of the Cuban Paediatric Surgery Review.

In November 2018, a laboratory for laparoscopy simulations was donated to the paediatric surgery unit in the hospital in Ciego de Avila, a town in the centre of the country, amounting to a gift of some €8,000. Following this, laparoscopy training was available for medical students in the towns of Villa Clara, Cienfuegos, Sancti Spiritus and Ciego de Avila. These sessions were undertaken by Prof. José Uroz and his Cuban colleagues Drs. Gonzalez Sabin and Ramon Villamil.

And finally, thanks to the actions over the past few years, La Chaîne de l’Espoir has been able to train 2 senior specialists in paediatric urological surgery and has contributed to the establishment of a sustainable teaching course thanks to the gift of top quality appropriate equipment.
The aim of this programme, launched following the 2010 earthquake, is to encourage education and health care for children in vulnerable situations in the Commune des Abricots, an isolated rural area. This programme was implemented in partnership with the Paradis des Indiens Foundation, a local Haitian organisation. It aimed to provide schooling for some 2,500 children in 9 elementary and primary school establishments which also provide medical treatment thanks to a dedicated health centre.

In 2018, numerous demonstrations shook the country without, however, directly affecting the activities in the schools and health centres where we were working. Our local partner continued throughout the year the work to repair the damage caused by hurricane Matthew in 2016 and re-create the necessary conditions for studying correctly. 2 establishments, entirely rebuilt, opened their doors this year in the hamlets of Rochepierre and Bois Panyol. Pupils have again this year been able to benefit from teaching materials in the framework of support from La Chaîne de l’Espoir.

Strengthening the teaching capabilities of the teaching staff has been at the heart of the work here using training based on active pedagogy and the use of digital screens in the schools to increase the interaction with the pupils. Specific training has been given to elementary preschool teachers so that the latter can proceed with tests for the detection of problems that might later cause learning difficulties.

During these training sessions, teachers were alerted to the possible tell-tale signs that might require particular attention.

All teachers and parents associations have been implicated in the school health project by the La Chaîne de l’Espoir, particularly through the use of health awareness workshops. These actions are part of the health education section of the project, the aim of which is to improve the knowledge level in families concerning health and hygiene for a better chance of avoiding avoidable diseases, and to provide support for teachers in putting in place activities with the children that match these themes.

Medical treatment of children has been strengthened thanks to the provision of tools to ensure monitoring their health and prioritising the theme in term of prevention as well as the organisation of ophthalmology consultations for those suffering from visual disorders.

In June, La Chaîne de l’Espoir organised a workshop on the subject of health in schools in the capital, Port au Prince, as part of the annual congress of the Haitian Paediatrics Society. The aim of this was to advocate for the importance of detection and of prevention in the area of health in schools and to underline the benefits for the children.

In 2019, La Chaîne de l’Espoir wishes to pursue its actions in school health by extending its network of specialists to achieve better treatment for children covering problems in ophthalmology, dental care, hearing disabilities and psychological disorders.

Activities:
Education, prevention and care

Programme coordination:
Sophie ROLLIN, Vincent PERROTTE,
Dr. Laurence BOUTIN (France),
The Paradis des Indiens Foundation (Haiti)

Location:
Commune des Abricots - Grand Anse Region

Funding:
La Chaîne de l’Espoir / UNOSEL
With the aim of reducing infantile morbidity and mortality in Haiti and to strengthen the training of health care personnel in the treatment of children, the training diploma in paediatrics for nurses was organised for the 3rd year. As a reminder, in Haïtian training for nurses there is no specific course concerning paediatrics, such that once the nurses are trained and start working in hospital paediatric units or with children in towns, they have no specific knowledge of children’s health problems. And a child is not a small adult.

It is to plug this gap in this particular area that the programme covering these specific needs has been introduced. Nurses trained in the SIPHA programme will be able to take part in the offer of quality care treatment for Haitian children.

In 2018, it was decided to organise the training at the University Quisqueya-University of Medical Sciences in Port au Prince, in collaboration with, and under the supervision of, the INPHA and La Chaîne de l’Espoir.

The academic curriculum has been extended for 16 months to 18 to include a theoretical and a practical part to the hospital-based courses.

Each week’s course is followed by a period of total hospital immersion in the paediatric speciality taught during the week. Two monitors (SIPHA diploma holders) will have training in pedagogy and tutoring so that the students will be well looked after during the immersion sessions.

3 missions have been carried out to modify the curriculum with the local players, to enrich the medical/epidemiological specificities with up-to-date local knowledge and to adapt it with regard to assessments and observations from previous years’ students.

All the Haitian teachers (both doctors and nurses) have enthusiastically signed up to participate again.

40 new nurses will be trained and the French medical advisers will give the courses in close collaboration or combination with their Haitian colleagues.

The Haitian Health Ministry is supporting this initiative of providing comprehensive training, taught mostly by local Haitian teachers and unique in the country.

**Outlook for 2019**

The programme will continue with the preparation and implementation of curricula for the 4th group involving 3 further sub-specialities, namely neonatology, post-operative recovery and health in the school environment.

The INPHA and La Chaîne de l’Espoir will take part in the preparation of specific and intensive accompaniment for the paediatric nursing staff for the new university hospital in Port au Prince from its inauguration in 2020.
This programme, focusing on the education, protection and health of vulnerable children in Jaipur, has been run since 2011 in partnership with the local NGO, Taabar. It is designed to bolster the personal development and schooling of children exposed to the risk of the street using day centres, and has a specific focus on the situation of girls for whom a dedicated educational establishment is provided. In the areas of intervention, the children and their entourage have access to free basic healthcare and psycho-social consultations. Finally, training in remunerated activities are organised for women with the aim of helping them to be more self-reliant.

In 2018, the day centres and the girls’ school continued their activities for the benefit of more than 1,700 children and these structures were very heavily supported by the people concerned, with an average attendance of 95%. The children were able to receive instruction there, support for Hindi, English and mathematics, and participated in activities which encourage confidence and self-reliance, such as dance, theatre, manual activities or even the children’s parliament. Feast days or events such as Diwali, Holi or the Anniversary of India’s independence or Children’s day are now celebrated, offering the opportunity to widen the children’s perspective and provide them with a better understanding of certain socio-cultural questions. The teams have continued to make the local community aware of health, security and education questions using parades and street theatre. Around a hundred meetings with parents have been organised during the year to be sure of their participation and buy-in to the programme.

Material support for children’s education and health has continued with distribution of school necessities, uniforms and shoes, hygiene kits and the distribution of drinking water in marginalised communities. Meals have been distributed every day. In addition, training workshops are organised for some 150 women each quarter, in sewing, aesthetics, craftsmanship, and are an opportunity for those who have been trained before to practise their skills. And finally, the mobile clinic has been in intensive use in 2018, with some 400 sessions in the intervention areas, carrying out some 26,000 consultations for basic treatment and more than 7,000 consultations for psycho-social support for children and their immediate community.

In 2019, La Chaîne de l’Espoir intends to strengthen its actions for better health and well-being of the children in Jaipur who find themselves in vulnerable situations.
La Chaîne de l’Espoir established a permanent team in northern Iraq in 2016 to respond to the surgical needs of the populations affected by the fighting. From 2016 to the end of 2017, La Chaîne de l’Espoir helped in the rehabilitation of operating theatres in the towns of Rabbia and Sinoni. In 2018, it became involved in the Dohuk governorate thanks to the support of the Crisis and Support Centre (CDCS) and the Health Department (DoH), to reinforce the medico-surgical treatment in the operating theatre in the Bardarash district, then in Semmel, which were reopened operationally while ensuring the continuation of their management by the Health Ministry.

- **Humanitarian context and requirements**
  Although military operations ceased in the autumn of 2017, the humanitarian situation remained extremely disquieting throughout 2018. At the end of the year, there were more than 2 million displaced persons and a third of them were in the Kurdish part of Iraq notably in the Dohuk governorate. The consequences of the September 2017 referendum increased the pressure on the Kurdish governorates and in particular on the health systems.

The re-taking of territories contested by Baghdad meant a reduction in the human and financial resources available to keep the medical and surgical departments operational. It is in this context that La Chaîne de l’Espoir intervenes to strengthen the capability for medico-surgical treatment in the governmental health structures and thus participate in the stabilisation effort in the north of Iraq.

- **Support for medico and surgical treatment in the districts of Semmel and Bardarash**
  In 2018, the action of La Chaîne de l’Espoir consisted of three key focus items - maintaining surgical activity in Bardarash, reopening the operating theatre in Semmel and reinforcing management practices in the hospital environment through training.

In total, La Chaîne de l’Espoir has carried out more than 4,700 medico-surgical consultations and close to 900 general surgical operations. The aim of these projects was to decentralise the offer of surgical treatment in order to reduce the pressure exercised on the Dohuk hospital, the main governorate reference centre.
In parallel, training missions in asepsis techniques and in the management of operating theatre benefited some 110 medical and paramedical staff. Thanks to the support of the CDCS, La Chaîne de l’Espoir has been able to extend its activities in 2019.

**Outlook for 2019**
Thanks to its involvement in the north of Iraq where it was able to demonstrate its expertise in rehabilitation of hospital structures and in the training of operating personnel, in 2019 La Chaîne de l’Espoir is committing to a project in the Sinjar, in association with the Crisis and Support Centre and Nadia’s Initiative, a foundation created by Nadia Mourad, who was awarded the Nobel Price for Peace in 2018.

The project will allow rehabilitating the town dispensary’s operating theatre, whilst in parallel also ensuring the construction of a new hospital, the aim being to encourage the return of the displaced populations.

A presence will also be maintained in the Dohuk governorate to continue to support the efforts in medico-surgical treatment for vulnerable populations, notably the internally displaced Yezidi people who have been well represented among those receiving treatment in Semmel.
Since 2007, La Chaîne de l’Espoir collaborates with the Zanjireh Omid Institute (La Chaîne de l’Espoir Iran) by sending specialised paediatric surgical missions to Iran. This helps operating children with malformations or suffering from complex pathologies and to reinforce the skills of the Iranian surgeons. Every year, between 4 and 8 missions are carried out by French surgeons who bring their expertise and know-how. As of today, 7,000 children have been treated in the six partner hospitals - the Child Medical Centre, the Imam Khomeini Hospital, the Noor Afshar Hospital, the Shahid Rajayi Hospital, the Sina Hospital and the Vali-e-As Hospital. At the same time, Iranian surgeons regularly come for training to major French hospitals to acquire in-depth knowledge in their speciality.

First of all, we would like to pay our respects to Prof. Keyvan Mazda, department head of orthopaedic surgery at the Robert Debré hospital, who left us suddenly on 3 October 2018 aged just 59. His commitment and his efforts for the success of this programme will remain in our memories for ever.

In 2018, 4 orthopaedic surgery missions were sent into Iran during which some 225 children were examined. Among these, 81 were operated for the brachial plexus and the rachis. 6 Iranian surgeons came to France and attended an in-depth course in heart surgery and orthopaedic surgery.

**Orthopaedic surgery missions**

2 missions based around brachial plexus injuries were conducted by Dr. Philippe Valenti, an upper limb surgeon.

195 children were seen in consultation, among whom 51 received operations. Two spine surgery missions were carried out by Prof. Keyvan Mazda, an orthopaedic surgeon at the Robert Debré Hospital. In total 30 patients were examined and 20 children with serious pathologies were operated on.

**Doctor training**

3 Iranian surgeons were accepted for training by Prof. Pascal Vouhé in the Hôpital Necker-Enfants Malades. 2 surgeons were taken under the wing of Dr. Philippe Valenti at the Bizet Clinic, and Dr. Nabian benefited from spending a year being guided by Prof. Keyvan Mazda, at the Robert Debré hospital.

**Outlook for 2019**

The Zanjireh Omid Institute is building a 550-bed children's hospital on land donated by the Iranian Health Ministry and the Tehran Medical University. Whilst waiting for this to open, La Chaîne de l’Espero has committed to send missions to operate on children and to train the new hospital's future surgeons. In 2019, La Chaîne de l’Espero plans to effect 6 orthopaedic surgery missions, 2 plastic surgery and 2 neonatal heart surgery missions. It is hoped that training can be organised for 7 Iranian doctors between the following Parisian hospitals - Robert Debré, Necker-Enfants Malades, Georges Pompidou European plus the Bizet Clinic.

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**Medical speciality:** Specialised paediatric surgery

**Programme manager:** Maryam MARASHI (President of the Zanjireh Omid Institute, Iran)

**Programme coordination:** Françoise MONARD (General Secretary of La Chaîne de l’Espoir, France)

**Missions:**

- Year-round
- Location: Tehran

**Funding:**

- La Chaîne de l’Espoir / French Embassy in Tehran / Private partners
Access to healthcare has continued to decline for the 671,000 Syrian refugees, the hundreds of thousands of Palestinian refugees and refugees from other countries, as well as for the most disadvantaged Jordanian citizens. The cancelling, in January 2018, of the public subsidy system for Syrian refugees meant that medical treatment costs in public health centres tripled overnight. The consequences were catastrophic. According to a survey carried out by the Consortium Protection in September 2018, 69% of Syrian households had to reduce the number of consultations, with the risk of creating complications. Heart malformations and orthopaedic complications, affecting around 3% of the population and which represent one of the main reasons behind disability cases, rarely get treated.

In 2018, La Chaîne de l’Espoir benefited from new funding from the European Union – Civil Protection and Humanitarian Aid (ECHO) which has enabled it to ensure access to quality medico-surgical treatment for children and young adults with orthopaedic complications or heart malformations.

Thus 11 missions were organised - 3 in heart surgery and 8 in orthopaedic surgery. Close to 750 children and young adults were examined and more than 220 received surgery.

An external assessment, carried out in March 2018, highlighted the added value provided by La Chaîne de l’Espoir among all the players in the health arena, as well as the need for psycho-social support for children who had undergone surgery.

Since September 2018, this support for patients and their parents has considerably improved the quality of treatment.

In 2019, La Chaîne de l’Espoir will continue to strengthen the referral system, provide orthopaedic and heart surgery for the most vulnerable children and young adults, and provide psycho-social support for children who have had operations and their families.

After several pilot campaigns in 2017 and 2018, La Chaîne de l’Espoir will extend its action by encouraging early detection, at birth or in the first few months, of the most frequently encountered congenital orthopaedic or heart malformations.

Early detection and easier access to treatment as early as possible enable avoiding costly treatment, complications and the onset of permanent disability.
The vast majority of the population in Laos lives below the poverty line. This has serious implications on children’s access to fundamental rights, and in particular the right to health. There are many factors contributing to the inaccessibility of health care needed by children - lack of infrastructure, lack of financial means and poor skills in paediatric surgery. Since 2011, at the request of the appropriate Vientiane authorities, La Chaîne de l’Espoir has had in place a support programme for paediatric surgery.

In 2018, La Chaîne de l’Espoir continued its support at the Vientiane Children’s Hospital. One surgical mission was carried out. This enabled operating 25 children with complex pathologies and continuing the training of the local surgical and medical teams. The seriousness with which patients receive post-operative care form the hospital teams enabled La Chaîne de l’Espoir’s team to carry out normal follow-up consultations with the children. The dedication of all the hospital teams is excellent. During the missions, the local teams take responsibility for treating numerous pathologies in the realm of paediatric visceral surgery.

And thus the paediatric surgeons operate under their own responsibility along with the anaesthetists and paramedical staff without waiting for the next mission. Only the more complex cases are presented for consultation during the missions, for operations carried out jointly with La Chaîne de l’Espoir.

As a result of the considerable progress made in 2018, the accent has been shifted to support for abdominal surgery. For this, one paediatric surgeon received a grant to be trained in minimally invasive surgery at the National Vietnamese Children’s Hospital in Hanoi. Minimally invasive surgery is a surgical technique that minimises the operational trauma. It enables the surgeon to reach the target using incisions of around one centimetre using instruments linked to a video-imaging system.

Additionally, La Chaîne de l’Espoir contributed to the training for a specialist in paediatric endoscopy, a specialisation which does not exist in Laos. The paediatrician concerned received a grant enabling following a course of specialisation in Thailand lasting two years.

• Outlook for 2019
In 2019, missions will be carried out to launch abdominal surgery in the Children’s Hospital.
The Syrian crisis has forced some 5.6 million people to leave and seek refuge in other countries. In Lebanon, the refugee population is of the order of 1.5 million people (i.e. 30% of the country's total population); to which needs to be added another 1.5 million citizens considered as ‘vulnerable’ by the Lebanese government. The country lacks the necessary resources to respond to the population’s needs for medical treatment. Orthopaedic problems are particularly neglected - bad diagnosis and poor treatment mean that disability is highly likely which can be very difficult for the children and a significant burden for their families and communities.

In 2018, thanks to a 2nd funding tranche from the Crisis and Support Centre, La Chaîne de l’Espoir was able to continue with its programme, initiated in December 2016, facilitating access to medico-surgical treatment for vulnerable children living with a malformation or an orthopaedic pathology. In partnership with the Union of Relief and Development Associations (URDA) and the Sacré-Cœur Hospital of Beirut and the Shtoura Hospital in the Bekaa valley, this project has enabled more than 270 children to be seen in diagnostic consultation and for 130 of them to undergo an operation.

For a better targeting of the more vulnerable children (Syrian or Palestinian refugees, but also local indigent Lebanese children), La Chaîne de l’Espoir and URDA have implemented a referral system with the health centres, NGOs and international organisations.

The children benefit from diagnosis, surgery, post-operative treatment, follow-up medical treatment, appropriate medical devices for rehabilitation and physiotherapy.

In 2019, La Chaîne de l’Espoir will continue with medical and surgical treatment of orthopaedic afflictions and will launch a branch for early detection of the more frequent orthopaedic malformations (e.g. club foot, congenital dislocation of the hip), enabling detection at birth and access to the most appropriate treatment for avoiding permanent disability.

This will be achieved through training and having the healthcare professionals networked.
For the past 25 years Liberia has lurched from one crisis to another - political, economic or sanitary. This includes the Ebola epidemic between 2014 and 2016 which claimed some 4,800 lives including close to 500 members of the medical profession. The infant mortality rate in Liberia is today 152.8 per 1,000 (IRIS 2018). Mr. George Weah, elected President of Liberia in December 2017, has committed to address the challenges facing the country, and notably to strengthen the country’s precarious health system.

La Chaîne de l’Espoir aims to rehabilitate the paediatric surgery and medical departments, and to install appropriate equipment for carrying out complex medical and surgical activities. La Chaîne de l’Espoir has confirmed its commitment to this project with the President of the Republic, the medical team and the management of the JFK Memorial Hospital.

In June 2018, a medical team from the JFK Memorial Hospital, accompanied by its Director General, Dr. Jerry Brown, came to Paris to plan the medical project with our teams. In parallel, 3 missions from La Chaîne de l’Espoir were deployed in Monrovia between April and December 2018, including the visit by Dr. Éric Cheysson, Chairman of La Chaîne de l’Espoir.

This joint medical project proposes rehabilitating some 3,000 sq. metres within this level 3 reference hospital to include a paediatric surgical technical plateau, an intensive care unit and hospital wing for medical and surgical treatment for children. A training programme for the local teams is integrated into the project for treatment of medico-surgical pathologies, paediatric surgery being considered as an absolute and indivisible priority to face up to the challenges of public health in Liberia. With this project La Chaîne de l’Espoir will strengthen the national medical response, reduce infantile mortality and ensure skill transfer to improve the health of both mother and child.

**Outlook for 2019**
An architectural sketch, completing the communication documentation and the project promotion, will be presented to the technical, financial, institutional and private partners. Agreements to be signed with the competent authorities, within the framework of a Liberian legal structure for La Chaîne de l’Espoir in Liberia, will be drafted in 2019 so as to start shipping equipment and personnel and to start the rehabilitation work.
Madagascar, the 5th largest island in the world, has suffered chronic political instability since gaining independence in 1960. This has engendered social and economic deliquescence which, in turn, has aggravated the phenomenon of poverty and vulnerability. The indicators for the country are cause for alarm. The country is classified 161st out of 189 with an HDI of 0.519. Infant mortality is at 42.4 deaths per 1,000 births (compared with less than 4 deaths per 1,000 births in a country like France). In a country which lacks almost everything, the question of access to heart surgery is not high on the authorities’ priority list. An estimate of the number of congenital heart pathologies in Madagascar gives around 3,600 annually for 720,000 births - i.e.5 for every thousand births.

Since July 2018, La Chaîne de l’Espoir has taken over a heart surgery project in Madagascar originally set up by Médecins du Monde in 1994. This project exists thanks to the partnership with the Soavinandriana Hospital Centre (CENHOSOA) in Tananarive, and the Félix Guyon Teaching Hospital in Saint Denis (la Réunion) to provide medical services to Malagasy children suffering from cardiac pathologies.

Medical skills are provided for this project by a team from the paediatric cardiology unit in the Félix Guyon Teaching Hospital, comprising, cardiologists, heart surgeons and anaesthetists. One medico-surgical mission (paediatric cardiology consultations and closed-heart surgery) was carried out between 30 August and 15 September 2018 in the CENHOSOA.

This was handled by 3 doctors from the Félix Guyon Teaching Hospital along with a medical team from the CENHOSOA and closed-heart operations were performed on 11 children. 388 children, including 86 new cases, were seen in consultation,135 were treated in post-operative care and 167 were monitored. 66 of these 86 new cases displayed heart conditions, with 16 requiring open-heart surgery and 6 requiring a closed-heart operation. Moreover, between August and December 2018, the 16 open-heart surgery candidates were evacuated to France for their operation by La Chaîne de l’Espoir and the 2 partner organisations Ribambelle and Mécénat Chirurgie Cardiaque.

In 2019, La Chaîne de l’Espoir intends to continue with its existing package of activities (identification of heart disease cases, on-site treatment of cases handled by closed-heart surgery, evacuation of those cases requiring open-heart surgery) and, once the CENHOSOA paediatric heart surgery unit has been rehabilitated and equipped, start open-heart operations.

Starting open-heart surgery will require prior internships in foreign hospitals for the Malagasy staff in the CENHOSOA paediatric heart surgery unit.
According to the WHO, cardiovascular diseases account for 11% of deaths in Mali, the largest country in West Africa. Every year, some 800 to 1,000 new paediatric cases are reported for which the lack of dedicated medical and human resources means there is little or no treatment. In 2016, faced with the growing need for paediatric heart expertise in Mali and to provide a technical alternative to evacuation, La Chaîne de l’Espoir decided to kick off a project to build and equip a technical centre, along with a sister project of appropriate training and skills transfer for the local teams. The investment phase of the paediatric surgery project was made possible by a generous donation from Mrs. Thi Sanh Festoc, in honour of her deceased husband, Mr. André Festoc, whose name now adorns the new unit.

• Continuation and completion of the building and equipment project

The construction of the technical platform, started in April 2017 continued through to June 2018 followed by the installation of the equipment, commissioning the systems, and the start of the maintenance phase. This technical platform, of some 500 sq. metres, comprises two operating theatres, a 6-bed recovery unit, a blood bank, a sterilisation unit and the necessary services to support heart surgery, and now forms part of the cardiology unit at “Le Luxembourg” Mother and Child Hospital where consultations and hospitalisations are carried out.

Construction and equipping the platform were carried out by local companies SERTEM Mali, RICA and NOVAIR. The site was under the aegis of La Chaîne de l’Espoir as delegated main contractor, and monthly progress reviews were held.

• Opening the centre and starting surgical activity

As initially planned, and thanks to the commitment of all the necessary trades involved, the 1st open-heart operation, carried out by a joint Franco-Malian team, took place in the André Festoc Centre on 10 September 2018.

• Training activities

Building and running such a unit requires all the necessary hospital skills - medical, paramedical, technical, biomedical and administrative. Training is a sine qua non for the sustainable operation of such a programme. La Chaîne de l’Espoir organised several missions to ensure skills transfer to the various local teams, to certify the quality and reliability of the technical installations in the Festoc Centre and to ensure that the local teams became familiar with all the new equipment.

Training took place before and during construction, a period when Malian teams were identified and sent to training centres in Tunisia (the Ibn El Bitar hospital) and in Senegal (the Cuomo Paediatric Cardiology Centre in Dakar).

Successive teams of volunteer expatriates arrived a few weeks before the Centre opened and throughout the last quarter of 2018 to accompany the local André Festoc teams in this new adventure and to ensure the start of operations. The training consisted of a combination of specialised theoretical courses and practical experience in all the multiple aspects of this particular type of heart surgery.

In total, more than 90 volunteers from La Chaîne de l’Espoir took part in these missions from 22 August to 8 December 2018, either to operate or to train the local teams. Some 30 Malian people followed the theoretical and practical training during this period.

• Financial support for patients

La Chaîne de l’Espoir and its partners have committed to bear the costs of treating children operated in 2018.
following the opening of the André Festoc Centre. A total of 58 children were successfully operated on during the mission. Given the real costs incurred in open-heart surgery for children, fixed charges for such operations have been established and will be applied in 2019.

- **Outlook for 2019**
In 2019, La Chaîne de l’Espoir will continue supporting medically, administratively and financially the activity in the André Festoc Centre. The first few weeks of activity in the Centre enabled the medical and technical teams to define the support requirements for 2019.

Such needs will be re-assessed with every subsequent mission taking account of the activity level, the difficulties encountered and the successes recorded. In line with the desire to ensure treatment for the poorest sections of the community, La Chaîne de l’Espoir has committed to fund 20 operations for children in the year.

La Chaîne de l’Espoir will support the André Festoc Centre in establishing a system of cost recovery with a view to achieving a financial balance, counting on the capacity of certain families to pay for their children’s operations but, above all, in galvanising the Mali government plus private, national and international financial sponsors.
Since January 2018, La Chaîne de l’Espoir has been running a support programme for the development of a reconstructive surgery unit at the “Le Luxembourg” Mother and Child hospital (HMEL) in Bamako. The main aim of the programme is to set up a referral centre capable of treating children suffering from pathologies affecting the face or the aftermath of severe burns. Treating such cases is a significant challenge in the sub-Saharan regions, those which are the most affected.

In Mali, despite the presence in the field of several NGOs, there is no medical structure capable of carrying out comprehensive treatment for such cases. In addition, these are also the regions where noma (a disease that destroys facial skin as well as the surrounding muscles and bones) cleft palate (congenital malformations of the lips and/or the palate) are considered as a curse and people suffering from them are frequently stigmatised and excluded from normal society.

Plus, ‘western medicine’ is frequently considered as suspect, and not accepted by the indigenous population, who prefer to use traditional medicines. In this context, La Chaîne de l’Espoir wished to provide an integrated response to the problem by organising training missions and medico-surgical treatment at the HMEL, cooperating with the Malian association ‘New Face’, which supports the programme for preparing the patients for post-operative follow-up.

This association organises training sessions for the members of the Fédération des Tradipraticiens et Herboristes du Mali (FTHM) for identifying cases, referral of patients and making the various communities aware of the issue.

In 2018, 3 training and treatment missions were organised. They have been able to strengthen the capabilities of some fifteen doctors, surgeons and anaesthetists, and to treat more than 150 children - roughly 50 per mission.

In parallel, around 350 traditional medicine practitioners have been trained in 2 missions conducted in the Sikasso region. The 3rd mission, organised in December, was followed by journalists from the French daily newspaper Le Parisien and became the source of an article entitled “Mission Sourire” (The smile mission), pointing up the challenges faced by the programme. The article was published in Le Parisien Dimanche on 30 December 2018.

**Outlook for 2019**
La Chaîne de l’Espoir plans to organise at least 2 further training and medico-surgical missions with the HMEL. Collaborations with ‘New Face’ and the FTHM will also be continued.
The Maputo Heart Institute (ICOR), created in 2001, is a non-profit private hospital which provides quality treatment for both adult and child heart sufferers. For children, La Chaîne de l’Espoir has been running a vast training programme for the teams, which has clearly achieved its aim since the local Mozambique teams are overall capable of carrying out excellent diagnoses and of performing interventional catheterisation and the majority of surgical interventions.

For some years now, La Chaîne de l’Espoir’s actions consist in sending 2 missions per year, with a team comprising a majority of practitioners from the Hôpital Necker-Enfants Malades in Paris, in order to carry out operations in the most complex cases (either because of the pathology or because the patient is extremely light in weight). Such missions also carry out training sessions with the aim of soon achieving a sufficient level of excellence in the local team for them to become self-sufficient in 100% of cases. A typical one-week mission, like those carried out in March and October 2018, comprised a team of 6 (cardiologists, anaesthetists, surgeon and senior reanimator, and consists in working with the local team – always very enthusiastic and attentive - designed to raise the skill level locally. Each time, roughly 25 children are treated, either with surgery or with interventional cardiology. It should be noted that, without the on-site assistance from missions, the ICOR carries out around 3 operations on children each week, with a mortality rate comparable with that in French hospitals – i.e. an exceptional performance for a hospital in a country with chronic economic and social difficulties.

The ICOR continues to improve its service offerings and makes every effort to increase its income which is immediately reinvested in providing free treatment for indigent children. Thus, a new pharmacy has recently been installed at the entrance to the establishment. This is open to the general public and, just like the laboratory, makes a profit meaning that the investments have been worthwhile for the hospital and help it to become progressively independent from La Chaîne de l’Espoir and financially stable.

Another form of essential support for the ICOR from La Chaîne de l’Espoir is the purchase of drugs and consumables some of which are either impossible to find in the region or are available at prices greatly superior to those in the European market. La Chaîne de l’Espoir, thanks to its procurement and logistics department, has continued to supply all the specific products required for heart surgery and to organise delivery by air or sea.

Finally, La Chaîne de l’Espoir continues to support the running of the Children’s Pavilion, by funding half the rent. This establishment, designed for the poorest children in the region, had an occupancy rate of 105% in 2018!

In 2019, La Chaîne de l’Espoir plans to maintain minimum support for the ICOR, which is now largely self-reliant in the medical area and just needs a mission occasionally for one or two of the more complex cases. The ICOR will also be supported with supplies for running the Children’s Pavilion.
The programme in Nepal aims to encourage the education and health of children living on the streets and therefore at risk. It has been running since 2011, in partnership with the NGO Child Protection Centers and Services, which has been involved for many years in the protection of such children. The activities concerned reach around 1,000 children and the communities in the districts of Kathmandu, Dolakha, Sindhuli and Morang.

In 2018, the accent has been on strengthening the links between the various communities in the area with the opening, in the second quarter, of Family Care centres. These family centres are open 6 days a week, with a capacity of around a hundred children.

They are run by teams comprising medical and educational monitors as well as social workers the aim of whom is to concentrate and extend the services provided for the children and their families.

The centres are situated at the heart of the local community and provide schooling support, sports and play activities as well as medical treatment and monitoring. Children are transferred to local medical centres if necessary. There are also shower facilities and the possibility of washing clothes.

Families can obtain advice concerning health, hygiene, risk prevention or parental guidance during weekly discussion groups, as well as support for overcoming everyday problems. During the year, the children in the various centres spread across the 4 districts received material support for their schooling - distribution of school necessities and uniforms plus funding of the associated school fees.

Close to 248,000 snacks have been served and some 640 medical treatment or awareness sessions organised for the children. Finally, 23 children enrolled in the programme obtained their school-leaving certificate in 2018.

In 2019, La Chaîne de l’Espoir will be developing its support for the health of children in schools, particularly in rural areas where access to treatment is difficult.
In 2018, 185 operations have been carried out in the CCPC of which 160 were open-heart operations (92%), and around 2,000 consultations were recorded. The 2nd operating theatre has been equipped with a CEC console with heat exchanger to enable carrying out valvular and congenital surgical operations. Thanks to this improvement, one additional operation per day can be performed, particularly for adults, as the CCPC teams are fully trained to handle medical and surgical treatment for adults. It is worth noting that the 2 operating theatres in the CCPC are of a size to handle up to 4 operations a day with optimal scheduling. This year, the CCPC received 5 international surgical missions from Canada, Switzerland and France. These teams comprised surgeons, cardiologists and paramedics and their aim was to encourage skill transfer to the CCPC teams to render the local teams capable of carrying out the most complex operations (on children weighing less than 5 kg for example). Specialist training in foreign hospital environments is an additional way in which the skill capacity of the CCPC is being enhanced. Thus, in 2018, one anaesthetist rejoined the team after spending 12 months working as a cardiac anaesthetist in the Saint-Luc clinic in Brussels (Belgium) and another similar specialist started a 6 month assignment (intensive heart treatment) at the Lausanne Teaching Hospital (Switzerland). One surgeon started a 2 year specialist heart surgery internship in the Clermont-Ferrand Teaching Hospital (France).

On the other hand, thanks to its unique place in the West African hospital environment, the CCPC is frequently solicited to help train foreign staff. For example, in 2018, the CCPC hosted 2 anaesthetists, 2 theatre nurses, 1 senior anaesthesia technician, 1 perfusion specialist - all from Mali, as well as a cardiologist from Ivory Coast. In addition, 10 children and their carers stayed in the Maison des Enfants, opened in 2017, on average for 3 weeks whilst receiving treatment at the CCPC; These children came from Mali (3), Guinea Bissau (4) and Liberia (3).

In 2019, the main challenge will be to reinvigorate the activity in the CCPC in order to treat an even greater number of children from Senegal, but also from neighbouring countries. For that to be possible, it will be necessary to improve material and human resources.
18.6 million human beings die each year in the world through a lack of simple surgical treatment required for a relatively standard operation - caesarean section, laparotomy or an open fracture.

**The essential surgery project**

In an attempt to counter the lack of access to surgical treatment, La Chaîne de l’Espoir would like to develop a support programme for essential surgery training for doctors working in isolated or remote parts of Chad and who are not surgeons.

Essential surgery involves handling frequently encountered surgical requirements that put the patient at risk, capable of being treated by simple surgical techniques which are easy to teach and implement, not very expensive, and which can be achieved with a high success rate and low morbidity levels.

**In 2018,** La Chaîne de l’Espoir carried out an exploratory mission to assess the feasibility of the project for the academic year 2019-2020. As the conclusions were positive, the detailed worked has started to get the project off the ground.

The training will generate a recognised qualification. Spread over an academic year it will comprise theoretical and practical modules in the capital, with internships in other pre-identified health establishments.

La Chaîne de l’Espoir will support this by helping to organise the curriculum (help in designing and coordination of the courses), help with the teaching (sending volunteer La Chaîne de l’Espoir specialists depending on the subject), and also funding assistance.

**Outlook for 2019**

To align with the start of the university term in Chad, an initial 2-week module of theoretical and practical subjects will be organised in October 2019 supported by 2 volunteer surgeons from La Chaîne de l’Espoir depending on the subjects chosen.

**Tchad**

**Essential surgery**

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**Medical speciality:** Essential surgery

**Programme coordination:** Julie SMEYERS (France)

**Medical advisers:** Dr. Aurélie ARRibAT, Dr. François PONS (France)

**Location:** N’Djamena - Faculty of Sciences and Health

**Funding:** La Chaîne de l’Espoir
According to a survey run by the National Statistical Office and UNICEF in 2012, 21% of Thai children do not live with their parents and are left in the care of others (generally grandparents) for reasons related to migrations associated with finding work. The phenomenon affects some 30% of children in the north-east of the country, particularly hit by the rural exodus. A more recent survey conducted by the Mahidol University and UNICEF in 2018 throws more light on the impact on the children’s well-being. Thus, 25% of children who do not live with their parents exhibit general development delay, particularly in the area of language acquisition. When this is coupled with the inadequacies of the education system, dropping out from school is perfectly understandable. The associated psychosocial difficulties have been particularly observed among many of the children in the Buriram district.

In 2018, La Chaîne de l’Espoir increased its activities to identify and accompany vulnerable children. Pursuing this personalised support, La Chaîne de l’Espoir was able to help some 2,860 children by providing psycho-social support, material assistance, access to medical treatment and the supply of ‘hygiene kits’.

In addition, numerous volunteers from the local population support this approach and get really involved by helping to renovate dilapidated and insalubrious housing in which the poorest children live. Finally, la Maison de l’Espoir strengthened its mission of social and familial reinsertion for 35 children.

As for the socio-educative aspect, the activities of the mobile libraries, science teaching through games and the phonetic teaching of English have helped some 8,500 schoolchildren and are now fully independent.

100 teachers have been trained in innovative teaching methods which place the child at the centre of the educative process, methods which have so far benefited around 1,750 pupils.

Around 3,000 primary schoolchildren took part in sessions concerning oral hygiene and nearly 1,500 received treatment.

More than 3,300 secondary schoolchildren took part in awareness and training sessions on sex and reproduction.

In 2019, La Chaîne de l’Espoir will continue its work to improve the health, well-being and protection of the most vulnerable children.

The most important will be to support the training and actions of the groups dedicated to children’s welfare and protection in the Buriram province in order to improve the detection of children at risk and to come up with solutions.
La Chaîne de l’Espoir has been supporting the development of paediatric surgery in Togo since 2012, in partnership with the paediatric surgery unit at the Sylvanus Olympio Teaching Hospital (CHUSO) in Lomé. This programme focuses on the training of healthcare professionals by organising specific missions to impart technical expertise accompanied by joint operations on children.

In 2018, the CHUSO team requested that we mount a project of capacity building for treating the results of brachial plexus stretching at birth.

This project was validated by La Chaîne de l’Espoir’s orthopaedic surgery reference and resulted in an initial mission led by the surgeon Dr. Didier Moukoko.

This gave rise to seeing 42 children in consultation, and operations on 9 of them for partial paralysis of an upper limb. This form of paralysis is often caused by an elongation of the brachial plexus at birth, resulting from an imperfect traction or accidental stretching which, in turn causes severe lesions in the nerves of the new-born baby.

Patient recruitment and medical record collection were carried out by the student doctors enrolled in the Lomé Postgraduate Specialisation Diploma in Paediatric Surgery (PSD-PS), under the supervision of their coordinator, Prof. Jean-Pierre Gnassingbé.

They have therefore directly benefited from the practical and theoretical teaching given during the mission.

This initial mission was also the occasion to offer the surgical instruments suited to this particular pathology.
• **Itinerant missions**

Since 2012, La Chaîne de l’Espoir has been organising itinerant paediatric missions, often called surgical fairs, in various provinces in the country. This enables operating numerous disadvantaged children who lack the means to get to the capital for their operations. Surgical operations are performed by members of the paediatric surgery unit in Lomé, with the support of a French volunteer anaesthetist from La Chaîne de l’Espoir. PSD-PS student doctors from Lomé actively participate in the operations under the supervision of their teachers. They are thus able to carry out numerous surgical acts and validate certain obligatory parts of the training curriculum.

**In 2018,** 2 itinerant missions were carried out. The first took place in Kara, in the north of the country, some 5 hours by road from Lomé. In 6 days, 250 children were seen in consultation and operations were carried out on 133 of them. The second took place in Dapaong, in the far north of the country. Dr. Chantal Chazelet, a volunteer anaesthetist, was able to support the local team and take part in the operations. The team was able to provide some 150 consultations and operate on 84 children. A journalist accompanied the team to produce a report broadcast in the ‘Priorité Santé’ programme on RF1. The main pathologies treated during these missions included hydrocele, ectopia, hernia, the results of severe burns and bone diseases.

To date, after five years of such events, 908 Togolese children have received operations thanks to the 9 itinerant missions carried out.

• **Outlook for 2019**

La Chaîne de l’Espoir plans to relaunch its neuro-surgical programme in the CHUSO. A mission concerning training and treatment of brachial plexus injuries, will be coupled with a seminar for West African PSD-PS students. In addition, 2 itinerant missions will be scheduled, one in Tsévié and the other in Bassar.
In Togo, since 2002, La Chaîne de l’Espoir has been carrying out missions in education and health in schools in order to improve the conditions in which children are taught. Added-value actions have a real impact on the well-being and development of the child.

In 2018, in various partner educational establishments in Lomé, La Chaîne de l’Espoir has provided the basic needs (quality school supplies, hygiene kits, school fees, meals and comprehensive medical treatment) for quality education for more than 800 children in difficult circumstances. In addition, the programme to help children who have dropped out of school has enabled supporting 10 in pursuing an apprenticeship project in which 4 have successfully obtained a professional qualification.

La Chaîne de l’Espoir has continued with the “Canteen for all” project in the Adjallé primary school. 1,141 children have been able to have healthy, balanced meals, cooked by chefs who have been recruited and trained in hygiene and health standards in the school environment. This programme is a great help in reducing absenteeism and drop-outs and also helps to increase the academic success rate. The “Nyagbé” project has been continued in 6 establishments for the benefit of some 1,012 pupils. The project increases the students’ powers of concentration, their listening and their involvement. Equally important, the verbal and written expression workshops and theatre clubs greatly improve the children’s self confidence.

Since the beginning of the school year 2016-2017, this pilot project has been able to raise significantly the levels of awareness of some 4,711 children concerning hygiene and health in schools. La Chaîne de l’Espoir has provided 4 schools with hygiene and sanitation material and equipment, facilities for washing hands, and posters on a wide variety of hygiene-related topics.

**Outlook for 2019**

The school health project entitled ‘My health, my school, a collective challenge for Togo’, co-funded with the French Development Agency (AFD), will start in January 2019 in 8 schools, and will last for 3 years. This project, conceived in collaboration with 2 Togolese associations, aims to inculcate into the wider school community (pupils, teachers, parents, etc.) appropriate attitudes to violence, the rights for healthy relations between the sexes, information on human reproduction, and fuller awareness of the importance of water, hygiene and sanitation. It is animated by the pupils themselves who create their own clubs and they are then able to raise the awareness among their peers around the themes they have discussed.

It also involves the organisation of workshops led by the Nyagbé association, aimed at developing skills in oral and written expression in class.

In addition, children identified by La Chaîne de l’Espoir as being in particularly vulnerable circumstances will be receiving additional and individual support.
The Children’s Pavilion opened in the Go Vap district of Hô Chi Minh Ville in July 2018. The Pavilion is established within a house graciously made available by a private Buddhist donor. It has a capacity of 10 beds which are used to house indigent children arriving in Hô Chi Minh Ville for medical examinations or surgical operations. The establishment is managed by 3 Dominican Sisters: Sister Elisabeth, social worker, Sister Anna, nurse, and Sister Marie, pharmacist.

In 2018, the costs of running the establishment and the medico-surgical treatment has been completely covered by a donation of €25,000 from the Thierry and Annick Desmarest Foundation to La Chaîne de l’Espoir. Thanks to the extremely economical management by the Dominican Sisters and, naturally, thanks to their services being entirely voluntary, the running costs of the establishment were very low, amounting to €3,900 for the year. The difference of €21,100, has been used in its entirety to cover the cost of medical examinations and/or surgical operations for the children. In 2018, no less than 40 children have been hosted in the Pavilion for medical examinations. Among these, 7 had heart operations.

On 25 July 2018, Mac Tin became the first of the 7 Pavilion heart patients to undergo surgery. The operation was performed by Dr. Phuong at the Tam Duc Hospital. Dr. Phuong is a reference in Vietnam for her medical work, a long-standing friend of Prof. Alain Deloche, and an essential part of La Chaîne de l’Espoir’s programme in Vietnam.

Thanks to her untiring efforts, the Children’s Pavilion has acquired widespread fame among Vietnamese medical establishments. Partnership agreements have been established with the Hauts Plateaux dispensaries and the paediatric hospitals in Hô Chi Minh Ville, such that the former identify and refer the sick children and the latter take charge of them.

In 2019, given the surgical needs in the country, La Chaîne de l’Espoir has set itself an objective of 30 operations for such children.
Communication reflects the life of La Chaîne de l’Espoir, ensuring its successes and initiatives get the visibility they deserve. It needs to reflect its vision, its missions, the image it wishes to project and must respond to the genuine expectations of its audience.

It is essential because it informs the public of its actions, fuels the request for funds, and renders totally credible its raison d’être.

- Photographs and videos are more than ever at the heart of communication and no more so than in La Chaîne de l’Espoir’s digital communication. Pictures are dynamic, easily memorable, more attractive and they go viral. They strengthen the message and create a sense of proximity. They reassure and they inspire confidence, providing the ability to deliver quality messages that ring true - pictures increase the level of commitment and generate more interaction.

### Distribution type media 2018

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<thead>
<tr>
<th>Type of Media</th>
<th>Percentage</th>
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<tr>
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<td>Web 2</td>
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### Time distribution by type of media

- Presse
- Radio
- TV
- Web
- Réseaux Sociaux
**Legacies, Donations, Life Insurance campaign**

In 2018, La Chaîne de l’Espoir ran a publicity campaign on legacies and donations using radio advertising mainly through the National and Regional France Bleu network – 50 spots were broadcast between 19 and 25 March, completed by free broadcasts on other frequencies of the Europe1 Group, RFM, Virgin Radio… and a host of other local radio stations.

The campaign was backed up by announcements in selected titles of the printed press: Le Pèlerin, Notre Temps, Panorama and other revues specialising in donations and fundraising activities.

"Together – that means every one of us!"
- Evann 8 years old -

This year, the stories of 18 children were used by La Chaîne de l’Espoir, during the end-of-year fundraising campaign. Using video sequences, they appealed to the public’s sense of solidarity with sick children around the world. With their natural innocence and common sense, plus a complete lack of affectation, they reminded everyone of why their generosity was not only needed, but also so rewarding.

The on-line campaign was based around La Chaîne de l’Espoir’s website on which children benefiting from operations were highlighted with their stories and their treatment history, coupled with an intense communications campaign on social networks and advertising banners calling for donations on strategic sites. The off-line communications packages complemented the digital with free press announcements, radio and television spots – The whole campaign was punctuated with press articles, reports on radio and television, all of which accentuated the public’s awareness of La Chaîne de l’Espoir at a period of the year that is crucial in the search for donations.
La Chaîne de l’Espoir’s digital community has continued to grow in 2018, with far more visibility across the Internet.

Sharing photos, videos and information clips concerning La Chaîne de l’Espoir enables our community to appreciate the extent of our activities.

Digital: To be known and to unite

- 58K Followers in 2018 (+5%)
- 28,322 People reached/month
- 250 Publications
- 76.2K Views on videos

- 3.2K Followers in 2018 (+33%)
- 52 Publications
- 199 Likes/publication

- 6.1K Followers in 2018 (+3%)
- 250 Tweets
- 91.5K Impressions/month

- 1.6K Followers in 2018 (+80%)
- 70 Videos
- 1.1M Views in minutes
- 183.7K Viewings

- 1,024,741 emails in 2018
- 61,817 newsletters distributed
- 962,924 donation request emails sent
The 18 regional branches were set up from the beginning to support La Chaîne de l’Espoir’s actions throughout France. Today they are active in almost all French regions. In 2018, La Chaîne de l’Espoir has now added an overseas ‘département’ and region (DROM) - La Réunion - which, in 2019, will receive the first Malagasy children to be transferred for operations.

Regional branches

Events in 2018

- 18 February: Inauguration of the new branch in Tours
- 24 March: Breton Fest-noz in Pleurtuit
- 8 April: Country hike near Rambouillet
- April to September: 6 golf competitions in Normandy
- 29 June: Solidarity run by the Henri Sellier College in Suresnes
- 2 September: Open day by the Valence d’Albigeois emergency services
- 23-26 November: Exhibition & Sale by the Craftsmen and Merchants in Vianne
- Mid November to end December: Three paper gift transactions at Oxybul, Eveil and Games in Antony (92), Créteil (94) and Lyon (69)
Events

2018

February

**L’AVENTURE ROBINSON**
La Chaîne de l’Espoir was the beneficiary of the 1st edition of the new adventure game launched by Adventure Line Productions which was broadcast in prime time on the French TV channel TF1 – the stars of the show, Maitre Gims and Kendji Girac raised 48,000 euros for children’s operations.

March

**LA CHAÎNE DE L’ESPOIR’S TOUR EIFFEL GALA EVENING**
Christelle Cholet gathers a star-studded panel of comedians on the stage of her theatre for an exceptional evening’s entertainment.

April

**“DON’T FORGET YOUR LINES”**
Wendy Bouchard, a French television presenter plays for La Chaîne de l’Espoir in a special edition broadcast in prime time on French TV channel France2 and presented by Nagui – She raises more than 23,000 euros.

October

**THE PARIS 20 KM ROAD RACE**
For the 10th year running of our partnership, there were no fewer than 130 entrants in the well-known ‘20 km de Paris’ sporting the colours of La Chaîne de l’Espoir thanks to the active involvement of our corporate sponsors.

December

**CHARITY DINNER**
At the Fondation Cartier pour l’art contemporain in the presence of Prof. Mamadou Bocary Diarra for the benefit of children with heart disease in Mali.

**AUCTION SALES**
Remarkable photographs from the Cornette de Saint Cyr auction rooms for the benefit of the “Enfants à cœur-Mireille Darc” for children with heart disease in Africa.
The Monday conferences run by La Chaîne, a series of meetings on the first Monday of the month

Since the launch of La Chaîne’s Monday meetings in 2011, open to all, they have become ‘must do’ events for friends of La Chaîne de l’Espoir. The meetings are an occasion to hear eminent speakers on a wide range of subjects (economic, geopolitical, scientific, societal, etc.) and to enter into discussion. The quality and variety of the subjects treated enable people to have a better understanding of what’s going on in the world and helps them to be more attentive and perhaps more involved in the key issues. To view the 2018 conferences, consult our website: www.chainedelespoir.org/lundis-de-la-cde

La Chaîne de l’Espoir’s Tour Eiffel Gala Evening

Laughter and generosity were the order of the day at La Chaîne de l’Espoir’s 1st Gala evening. In March, Christelle Chollet, singer and long-standing committed comedienne with La Chaîne de l’Espoir gathered a company of exceptional artists in the Théâtre de la Tour Eiffel in Paris: Artus, Anne Roumanoff, Jeanfi Janssens, Michel Boujenah, Michel Leeb, Michel Drucker, Raphaël Mezrahi, Julien Courbet, the Opus Jam group, etc. who gave their services free to regale the crowds and raise funds for sick and disadvantaged children. A very big Thank You to all concerned for this show of generosity and particularly to Wendy Bouchard who accepted to host so graciously this exceptional evening.

L’Aventure Robinson

Kendji Girac and Maître Gims were the first two Robinsons in the new television adventure game launched by TF1 in March. They chose to dedicate their 5 day adventure on a desert island to La Chaîne de l’Espoir. The objective: accept a series of challenges as they are plunged into the jungle and, for each challenge successfully negotiated, collect the metallic chest symbolising a sum of money. Effort and solidarity duly recompensed since the two candidates managed to collect 48,000 euros to go towards the cost of operations for children.

Charity dinner at the Fondation Cartier pour l’art contemporain

On 4 December, thanks to the generosity of the Cartiers, La Chaîne de l’Espoir was able to use the Fondation Cartier pour l’art contemporain for a charity dinner for some hundred of its key sponsors. Private donors and corporate partners responded to the invitation for this evening. Professor Mamadou Bocary Diarra spoke about the particular issues concerning children in Mali suffering from heart disease. The assembled guests were particularly moved and showed themselves in a generous mood, with significant donations from the Pharmacie association and the Engie Foundation.
Organisation & management

Funding principles and activity  PAGE 66

Governance  PAGE 70

Human resources  PAGE 73
Funding principles and activity

Resources
The organisation has four main sources of funding:

1. The general public represents the principle source of income for La Chaîne de l’Espoir. Its contributors support the actions of the organisation, either through one-off donations to help finance child operations, or through regular donations funding mid to long-term actions, such as the organisation of local care and training missions and the equipment of hospitals. Education programmes are funded primarily through child or programme sponsorship. The general public is contacted either by mail, email or telephone. Regular donations by direct debit or online donations are our two main areas of development.

2. Companies and foundations finance some major projects for La Chaîne de l’Espoir as part of multi-year partnerships, particularly for hospital projects, care or training programmes or medical equipment programmes. They may also contribute to the Treatment of Children in France programme, education assistance programmes or, less often, to the operations for one or more children. Events or rallies are also organised jointly by companies and La Chaîne de l’Espoir in order to bring together employees around a common cause (sporting events, auctions, etc.).

3. Our institutional partners support La Chaîne de l’Espoir’s major projects, those which are there for the long haul and which, with an integrated approach, are designed to bring a multi-dimensional and long-lasting response to the needs of disadvantaged populations.

4. La Chaîne de l’Espoir seeks to arouse the interest of contributors and the general public in legacies with the use of a newsletter, publications and the website in order to encourage information exchange and requests. A specific and regular relationship later develops with the donor (legacy booklet, information, etc.).

Excellent media coverage (TV shows, radio airplay, TV spots offered, press articles) together with communication activities support the promotion of our actions with donors and partners.

See Acknowledgements / List of principal financial partners

Use of the various sources of funding by activity
The funds collected from the general public, the legacies and a part of private corporate funds globally finance all the activities of La Chaîne de l’Espoir (treatment of children in France, treatment abroad, education, training, equipment, etc.). When they are intended for a specific project, the funds from corporate and institutional partners are called “dedicated funds”. They finance programmes agreed with the partner and including objectives, budgets and activities meeting precise specifications. These might be specific care programmes, medical training, child education, medical equipment or hospital project programmes.

See Individual country sheets / Funding

Voluntary in-kind contributions
To fund its actions, La Chaîne de l’Espoir also relies on donations in kind.

1. Volunteers greatly contribute to the activity of the organisation and its image.
   - Medical volunteers: each year, several hundred surgeons, doctors, nurses and technicians guarantee the professionalism and the success of the medical and paramedical missions which La Chaîne de l’Espoir sends abroad.
   - Host families: children transferred to France for operations are cared for by our volunteer host families. The average length of a child’s stay in France is around 2 months, during which time the host families donate their time to the organisation.
   - Head office volunteers: volunteers based at the head office actively participate in clerical work, fundraising activities and the organisation of missions abroad.
- The branches: our dynamic volunteer force spread across Metropolitan France arrange the hosting of children who will have operations in the regions as well as organising events and shows designed to increase public awareness of La Chaîne de l’Espoir and to collect much-needed funds.

2. Material gifts and donations in kind greatly contribute to our actions. We receive donations of medical equipment and various services from professionals.

3. Skills-based sponsorship consists in a company seconding qualified personnel to La Chaîne de l’Espoir for periods ranging from a few days to several years. It is a valuable support for La Chaîne de l’Espoir and a source of personal fulfilment for the employees made available.

- The principal aspects of the relationships/agreements with French and international organisations acting on behalf of La Chaîne de l’Espoir

The collaboration between La Chaîne de l’Espoir and other organisations is generally governed by specific agreements stating the target beneficiaries, objective, proposed transactions, responsibilities of each organisation involved, monitoring of operations and reporting, external communication, duration of the agreement, its termination, as well as the settlement of disputes.

THE PRINCIPAL TYPES OF RESOURCE AND THEIR UTILISATION IN 2018

**Resources €21,19M**

- Donateurs individuels: 16,5%
- Legs: 1,7%
- Partenaires fonds privés: 13,5%
- Subventions publiques: 5,7%
- Autres produits: 7,5%
- Produits des exercices antérieurs*: 55%

*Report des ressources affectées non utilisées des exercices antérieurs et reprise de provisions

**Jobs €21,15M**

- Dépenses opérationnelles**: 21,7%
- Développement: 75,3%
- Frais de fonctionnement: 2,9%

**Dépenses 2018 : 71,2% + engagements : 4,1%
NEW PROJECTS

2018 has been an exciting year with new actions undertaken in several countries. La Chaîne de l’Espoir has a justifiable reputation since its founding for operating in France on children suffering from complex pathologies which could not be handled in the children’s home countries, and also for its success in training local surgical teams. But now the organisation is becoming equally well-known in other areas - building hospital structures dedicated to the treatment of children, and using innovative technology for the benefit of health care in the countries in which it operates. In all these areas, and on all the continents where the organisation is active, such projects are proliferating.

For example in Haiti, where the organisation is active since 2010 in the areas of healthcare and education, the twin themes come together with actions concerning health in the school environment. Our new programme has been deployed in the 10 schools in which we operate with the Fondation Paradis des Indiens. It consists in preventing disease, informing children and their parents about basic hygiene, and training teachers to be able to detect certain tell-tale signs at an early stage. In June 2018, Dr. Laurence Boutin, the paediatrician in charge of our action in schools, launched a seminar on health in the school environment in Port-Au-Prince. The event attracted a host of doctors, teachers and Ministry representatives. There is great leverage with this programme in a country where children have little opportunity to see a doctor and where the teachers can play a vital role in getting the message across, in surveillance and in elementary care. This is also the reason why a Department of School Health has been created in Haiti’s Ministry of Education and Professional Training to bring all such actions together and to provide the necessary means to all the players involved.

As for the African continent, in September, La Chaîne de l’Espoir commissioned the Festoc Centre, in the Le Luxembourg Mother and Child Hospital in Bamako, in Mali. This structure has enabled strengthening the treatment for children with heart disease which the organisation is continuing to roll out in West Africa (the Sahel and the Gulf of Guinea region). Initially the centre will be able to provide a solution for the 2,500 children with heart disease on the waiting list for treatment, but it will also be able to operate on adults and, in time, will be able to offer treatment for vascular problems, which are widespread in Africa. La Chaîne de l’Espoir has a wide network of partners dedicated to paediatric surgery in West Africa. With this, the organisation encourages exchanges between doctors, finances training of junior doctors by more experienced brethren from the same region (doctors from Mali, for example, have been trained in Dakar), and enable more and more South-South cooperation with regionally-based training.

In the same spirit, the organisation has contributed to setting up the Mother and Child hospital in Bingerville in Ivory Coast, where the organisation is represented on the Board of Directors, with the objective of making it a referral centre for patients in the sub-region, but also of becoming a West-African training centre for several heavy pathologies. The hospital was inaugurated in 2018 by its founder, First Lady Madame Ouattara and is supported by our organisation for training medical teams, strengthening its management and developing the healthcare possibilities. We are hoping that it will become a referral centre for oesophageal replacement for children who suffer from caustic oesophageal stenosis (caused by swallowing caustic soda) and the hospital has signed an agreement with the GFAOP (Groupe Franco-Africain d’Oncologie Pédiatrique - the Franco-African Paediatric Cancer Group) so that the hospital can treat tumours in children.

Remaining in Africa, but some distance to the southeast, La Chaîne de l’Espoir has chosen Madagascar as its new development area. For some 20 years, Médecins du Monde has been running a heart surgery programme and has trained certain teams, but has limited its activity to closed-heart surgery. As their programme was coming to its close, MDM asked the organisation whether it was prepared to take over the activity there. This happened at the beginning of 2018. This has involved re-integrating the local Malagasy team into ours, the signing of a new agreement with the CENHOSOA hospital, and the development of new training modules for the local team, who are all
very keen to move on to open-heart surgery. This new adventure has offered the opportunity of forging strong links with the Félix Guyon Teaching hospital in la Réunion, where there has been a long-standing involvement in training and treatment for the region, and of creating there a local regional branch which will soon be in a position to host children for operations. In 2019, depending on our resources, we shall also be hoping to build a new heart surgery unit in Madagascar, which will be larger and better equipped than the present facility, and to send several missions from la Réunion or France. It is not without a certain pride and pleasure for our organisation to be opening up the Indian Ocean, a region with strong historical links with France.

Finally in Asia, La Chaîne de l’Espoir has renewed its relationship with the Franciscan and Dominican sisters in Vietnam, faithful friends of Prof. Alain Deloche in their efforts to protect local children and help the most destitute. It is thanks to a combination of their determination, their enthusiasm and their local network ensuring a full understanding of the situation of the poorest section of the community, plus the technical and financial help from La Chaîne de l’Espoir and its donors, that the Children's Pavilion opened its doors in Hô Chi Minh Ville in July 2018. Designed to house the poorest children before and after surgery, the centre is managed by three Dominican sisters, in a true charitable spirit and, already in 2018, has hosted some 40 children coming from the provinces. Our organisation funds the day-to-day running of the centre and pays for the children's operations. These are carried out by local Vietnamese surgeons, long-time friends of the organisation, using the most up-to-date techniques in some of the most renowned hospitals in the region.

The health of pregnant women, treating sick children, state-of-the-art heart surgery - all this is the result of very close cooperation over many years between the network of French medical teams associated with our organisation and the local doctors and hospitals, with whom we are in constant touch. But beyond the strength of our network, it is also the development of innovative techniques which enables us to continue our work and to reach even more needy children.

Thanks to our innovation centre, our organisation is extremely active in rolling out new tools that enable providing better, more precise and more widespread care - without the time-consuming need to travel! Echoes Gyn-Obs and Echoes Cardio have seen additional functions rolled out this year, enrolling new French medical staff in the project (cardiologists, gynaecologists, obstetricians, surgeons) but also, and above all, new establishments overseas, connected by modern magical methods and all with the same desire - the treatment of children in need!
Governance

The legal structure of La Chaîne de l’Espoir
La Chaîne de l’Espoir is an organisation established under the French law of 1 July 1901 and registered at the Préfecture de Paris on 12 December 1994 under No. 94/4993.

The scope of the annual report of La Chaîne de l’Espoir
The scope of the annual report of La Chaîne de l’Espoir covers the totality of its activities: treatment of children transferred to France, emergency relief, care and training missions, building, equipment, sponsorship and education programmes.

The members of La Chaîne de l’Espoir
There are 218 current active members of La Chaîne de l’Espoir, all of whom may vote.

Management structure
La Chaîne de l’Espoir has a Board of Directors, which selects, among its members, a Committee comprising a Chairman, a Vice-Chairman, a General Secretary, a Deputy General Secretary and a Treasurer.

A Director General, a Deputy Director General, a Director of Finance and Administration, a Director of Development and a Programme Manager are responsible for day-to-day operations.

The Board of Directors of La Chaîne de l’Espoir in 2018
The Committee
Chairman:
- Dr. Eric CHEYSSON
  Head of the vascular surgery department
  at the René Dubos Hospital, Pontoise, France
  Term of office expires: June 2021

Vice-Chairman:
- Dr. Philippe VALENTI
  Specialist hand surgeon at the
  Jouvenet Clinic, Paris
  Term of office expires: June 2021

General secretaries:
- Dr. Sylvain CHAUVAUD
  Cardiovascular surgeon, Paris
  Term of office expires: June 2021
- Françoise MONARD
  Senior consultant
  Term of office expires: June 2021

Treasurer:
- Emile DINET
  Deputy Director General
  of the SENY group
  Term of office expires: June 2021

Members
- Dr. Catherine Amrein
  Anaesthetist
  End of elected term: June 2023
- Prof. Gérard Babatasi
  Head of the cardiac surgery department at the Caen Teaching Hospital, France
  End of elected term: June 2020
- Valérie Bernis
  Assistant Director General of ENGIE
  End of elected term: June 2020
- Dr. Michel Cymès
  ENT doctor at the Georges Pompidou European Hospital, Paris
  Journalist
  End of elected term: June 2023
- Gonzague Desforges  
  Engineer  
  End of elected term: June 2020

- Philippe Dumas  
  Inspector General of Public Finances  
  End of elected term: June 2023

- Denis Duverne  
  Deputy Director General of Axa  
  End of elected term: June 2020

- Jean-Claude Lafeuillade  
  Engineer  
  End of elected term: June 2023

- Prof. Antoine Lafont  
  Interventional cardiologist  
  at the Georges Pompidou European Hospital, Paris  
  End of elected term: June 2020

- Jacques Maillot  
  Founding President of Nouvelles Frontières  
  End of elected term: June 2020

- Sébastien Prat  
  Lawyer, Paris  
  End of elected term: June 2020

- Dr. Xavier Raingeval  
  Anaesthetist  
  at the Jouvenet Clinic, Paris  
  End of elected term: June 2018

- Prof. Yann Révillon  
  Former head of the paediatric surgery department – Hôpital Necker-Enfants Malades, Paris  
  End of elected term: June 2019

- Dr. Dominique Tournay  
  Anaesthetist  
  End of elected term: June 2023

- AP/HP  
  (represented by Mme. Florence VEBER, Director of International Affairs at the Assistance Publique - Hôpitaux de Paris)  
  End of elected term: June 2021

- La Chaîne de l'Espoir's specialist committees

  **The Executive committee**
  The role of the executive committee is to ensure the implementation of the decisions of the Board of Directors and the proper implementation of the activities and missions of La Chaîne de l’Espoir.

  It comprises the members of the Committee and the operational directors. It meets at least once a month.

  **The Finance committee**
  The role of the Finance committee is to advise the Board of Directors on decisions regarding financial and strategic aspects, such as equity policy or investment decisions.

  **The risk and internal audit committee**
  The risk and internal audit committee is an internal control body ensuring active monitoring of risk prevention and compliance with governance rules.

  This body comprises qualified Board members and external personalities.

  It works in close cooperation with the Manager of Audit and Internal Control (MAiC) who reports to the committee.

  Its role is to analyse all risks to which the organisation is exposed (risk mapping) and to ensure that the organisation and its procedures take into account risk prevention.

  It also ensures that the organisation is managed in accordance with the laws and rules of good governance, that there are formalised processes with appropriate controls on management processes and that the preparation and external audit of the accounts comply with the regulations in force.
• **The principal measures taken by the organisation to ensure effective internal control**

The Manager of Audit and Internal Control (MAIC) is responsible for creating and implementing the internal control measures. The MAIC advises and relies on the various departments to develop the organisation’s management and internal control procedures, and regularly verifies that they are being correctly used. The MAIC either organises or carries out directly internal audits both at head office and in the field. In order to be truly independent, the MAIC reports directly to General Management who may also request that it carries out internal investigations.

La Chaîne de l’Espoir also regularly calls on external professional help to audit its procedures and its strategy.

La Chaîne de l’Espoir is also accountable to various external bodies, responsible for auditing the sound management of the organisation and its governance policies:

• The Charter Committee, a monitoring agency, brings together French organisations and foundations all abiding by a series of ethical principles relating to budgetary rigour, accounts transparency and governance.
• Deloitte, an independent statutory auditor, attests each year to the discipline of our management.
• Major international institutional donors (ECHO, AFD, OCHA, etc.) verify our operations, our accounts and our management and governance methods, at the head office as well as in the field.
• La Chaîne de l’Espoir may be audited by the Cour des Comptes at any time.

Since 2012, La Chaîne de l’Espoir is in possession of the IDEAS label attesting to the quality of its governance practices, its excellent financial management and the effectiveness of its actions.

• **The principal measures taken by the organisation to prevent any fraudulent practices, to avoid conflicts of interest and to promote ethical behaviour**

In order to prevent any illegal, fraudulent or immoral practices it might come across when carrying out its activities, La Chaîne de l’Espoir applies a zero-tolerance approach and implements several measures to safeguard its position.

The contractual relationships between La Chaîne de l’Espoir and its suppliers and partners are enshrined in clauses of best practice which comprise its ethical commitments and dispositions for verification and, if appropriate, for sanctions.

La Chaîne de l’Espoir has in place policies for prevention of fraud, corruption and ethical violations, which rely notably on respecting the principles of separation of tasks and functions, and specific internal control measures. In addition, all La Chaîne de l’Espoir’s employees are required to respect (and to ensure that others respect) a code of ethics and behaviour which defines and helps promulgate the organisation’s values. All the employees have demonstrated their commitment to the humanitarian and ethical principles of La Chaîne de l’Espoir by signing the Code of Ethics.

• **Assessment of the impact and efficacy of La Chaîne de l’Espoir’s actions**

Close contact with the health authorities of the countries concerned by the programmes of La Chaîne de l’Espoir facilitate the assessment of the programmes’ usefulness and efficacy. Before a project is authorised, one or more assessments are usually carried out to determine the context, the needs, the main objectives, the expected results, the actions to be undertaken as well as the human and material resources required. The viability and sustainability of the project is also considered.

A provisional budget is then drafted. Assessment of the programmes is ensured based on implementation and impact indicators which are pre-defined and monitored regularly using operational progress reports and charts. Budgetary control is exercised using monthly updates reflecting fund usage, both actual and forecast.

For certain projects, surveys are carried out at the start, during and at the conclusion to be able to understand ongoing progress and the impact of the project. Satisfaction surveys conducted among the main beneficiaries of the project may equally be carried at the conclusion of the project. If needed, programmes may be assessed by specialised external organisations.
La Chaîne de l’Espoir relies on a permanent paid staff but also on an important network of volunteers (clerical positions, host families, medical and paramedical staff, technicians) in France and for international missions in the field.

• The number of employees at the end of 2018
As of 31 December 2018, La Chaîne de l’Espoir included 50 full-time equivalent employees at its head office in France. This represents an increase compared with previous year. It reflects La Chaîne de l’Espoir’s strategy to have the highest level of in-house expertise in key functions such as financial management, internal control, programme management and medical advice.

La Chaîne de l’Espoir also has a number of salaried employees, either expatriates or indigenous, in foreign structures where the organisation is working:
- Afghanistan .............................................. 26 employees
- Iraq .......................................................... 11 employees
- Thailand .................................................. 10 employees
- Togo ......................................................... 7 employees
- Jordan ...................................................... 5 employees
- Cambodia ................................................ 2 employees
1 employee was seconded to La Chaîne de l’Espoir in 2018 as part of skills-based sponsorship for a 10 week residency.

• The number of volunteers in 2018
La Chaîne de l’Espoir had the support of 720 volunteers covering the totality of the organisation’s activities:

- Medical volunteers .................................. 239
- Host families .......................................... 300
- Head office volunteers ......................... 51
- Branch-based volunteers ...................... 130

• Compensation policy within the organisation
The compensation policy of La Chaîne de l’Espoir is based on the career path, skills and responsibilities of each employee inside the organisation.

La Chaîne de l’Espoir has worked to put in place a coherent salary scale and to conduct regular assessment interviews with each employee.

The combined annual remuneration for the three most highly paid managers in the organisation amounted to €166,432.
Members of La Chaîne de l’Espoir,

Dear Friends,

I have the pleasure of presenting the Treasurer’s Report for 2018.

In 2018, La Chaîne de l’Espoir has returned to the level of activity in line with the trends in recent years. Total resources for the year amounted to €21,190 K. The 2017 accounts included a series of exceptional non-recurring events (transfer of ownership of three buildings - in Afghanistan and in Senegal), which had the effect of temporarily increasing income (+ €20,112 K) and the expenses (+ €20,787 K).

In 2018, La Chaîne de l’Espoir transferred to its local partner in Mali the Foundation for Children in Mali, the André Festoc Paediatric Cardiology Unit, construction of which started in April 2017 for a total cost of €2,137 K.

La Chaîne de l’Espoir’s total income, including extraordinary items and financial income, amounted to €21,190 K.

Total expenditure, including financial charges and exceptional items, amounted to €21,153 K.

Thus the current year exercise produced a surplus of €37 K.

The numbers commented below are taken from the Income Statement, which is a reference document for associations.

I. Income received from the general public:

Despite the difficult fiscal and social context, donations from the general public (excluding legacies) increased, contrary to the general trends in the sector, thanks to the loyalty of our donors. Donations represent 55% of 2018 income for a total amount of €11,661 K, a slight increase of 2% compared with 2017. A one-time investment was authorised to promote such collections and increase the awareness of the Association’s actions. Thus, costs of appealing to the public’s generosity (excluding legacies) amounted to €3,295 K, an increase of 8% compared with 2017.

The net funds raised (donations from the general public less collection costs) were roughly stable at -1%, from €8,406 K to €8,343 K.

Direct debit regular donations contribute to the sustainability of our activities and show the trust of our donors. They have increased by 8% at €5,535 K.

II. Legacies and donations:

Legacies and donations amounted to €1,583 K, compared with €3,135 K in 2017, which included a one-time exceptional legacy of €1,381 K. The extended delay in cashing legacies comprising share holdings weighed heavily on the 2018 accounts. The total amount of legacies remaining to be received amounted to €1,688 K (compared with €774 K the previous year).

III. Private partners

Donations from private partners amounted to €1,208 K for the full year 2018. In 2017, by special dispensation, the financing received from the
Aga Khan Foundation since 2011 (€5,302 K) for the phase 2 construction of the FMIC in Kabul was included fully in that year’s accounts. In addition, a change in multi-annual accounting presentation to include as revenue only that part relating to the year in question postpones €637 K of income into future years. Excluding these two non-recurring items, private partner donations remained roughly stable at -3% compared with 2017.

IV. State subsidies:
State subsidies amounted to €2,868 K in 2018, mainly from the French Development Agency, the French Ministry of Foreign Affairs and ECHO for our projects in Iraq, Afghanistan, Jordan, Lebanon and Burkina Faso. They increased by 5% compared with 2017.

V. Other income:
In 2018, other income amounted to €364 K. This includes:
- financial income (€120 K), an increase of €54 K compared with 2017, following the changes in the methodology for managing foreign exchange rate fluctuations;
- exceptional items (€107 K), composed mainly of the investment subsidy granted by the Ile de France Regional Council for financing the Festoc Centre in Mali (€100 K);
- miscellaneous management income (€137 K).

In 2017, the investment subsidies from the French Development Agency and the French Ministry of Foreign Affairs (€9,453 K) for the construction of the FMIC’s phase 2 in Kabul have been recognised in operating income following the ownership transfer in December 2017, creating an exceptional hike in this item.

VI. Reversal of reserves
A reserve of €80 K taken against a labour relations risk, in the event unfounded, has been reintegrated in 2018.

VII. Recovery of dedicated funds:
Dedicated funds, unused at year-end are carried forward in the income statements of the following years, according to the rate of achievement of the commitments. In 2018, dedicated fund recovery amounted to €3,425 K; the main recovery, for an amount of €2,022 K, resulted from the ownership transfer for the construction of the Festoc Centre in Mali.

- Expenditure
  I. Social aid missions
  Programme achievement expenditure amounted to €15,066 K spent in 2018 and €871 K of programmed commitments, i.e. 75% of total expenditure. In 2017, expenditure related to social aid missions represented 87% of the total, with the non-recurring effects of expenditure concerning the three ownership transfers included. Adjusted for these effects, the share of social aid missions was 74% of the total expense in 2017.

  II. Current expenditure
  Operating expenses amounted to €5,216 K, a slight increase compared with 2017 (+ 4%). This represents 25% of the Association’s expenditure for the year. Running costs, essential for carrying out missions and for proper management of resources, were contained (€620 K in 2018 vs. €628 K in 2017). The increase in development costs, at €4,595 K (fundraising, communication, managing donations, fiscal receipts and donor relations) is caused by responding to the difficult context nationally in 2018.
**Earnings appropriation**
As seen above, the fiscal year showed a surplus of €37 K validated by the Board of Directors, and which I propose that you accept today.

The Board of Directors recommends that this excess of €37 K be added to association funds.

<table>
<thead>
<tr>
<th></th>
<th>At 31/12/2018 (before 2018 earnings appropriation)</th>
<th>2018 earnings appropriation</th>
<th>At 31/12/2018 (after 2018 earnings appropriation)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Association funds</td>
<td>7,751,360.47</td>
<td>36,941.64</td>
<td>7,788,302.11</td>
</tr>
<tr>
<td>Africa projects reserve</td>
<td>300,000.00</td>
<td></td>
<td>300,000.00</td>
</tr>
<tr>
<td>Earnings 2018:</td>
<td>36,941.64</td>
<td>36,941.64</td>
<td>8,088,302.11</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>8,088,302.11</strong></td>
<td><strong>36,941.64</strong></td>
<td><strong>8,088,302.11</strong></td>
</tr>
</tbody>
</table>

Available reserves represent 5.4 months of the organisation’s activities as at 31 December 2018. This sum is necessary to ensure our actions in the field are not interrupted, to fund any unforeseen emergencies or a sudden decrease in resources, and to finance investment and their renewal.

**In 2018, the organisation benefited from the following non-monetary contributions:**

I. Volunteers
Numerous surgeons, doctors, nurses, anaesthetists and other technical medical personnel, go unpaid into the field on specific missions and contribute immensely to the success of such missions, at the same time enhancing the reputation and spirit of La Chaîne de l'Espoir.

The crucial importance of the work carried out by host families who welcome children to France cannot go unrecognised. They take children into their homes (accommodation, food, activities) and accompany them when they travel (to the airport, hospital consultations, meetings to coordinate with the organisation, etc.). Their action enabled 86 children to have operations in 2018.

Other volunteers have been equally effective in other areas of the organisation’s activities - at head office and in the regional branches.

An accurate measurement of the activity of all volunteers, in the field, at head office in Paris or in the regional branches and by the host families provides a view, by type, of the number of volunteer days devoted to the organisation, and to calculate the resulting contribution. Thus, in 2018, some 16,500 man-days of committed voluntary work was delivered to La Chaîne de l’Espoir, giving a value of €2,522 K.

II. Consumables and medical supplies
An estimated €188 K worth of medical equipment and disposable goods were donated by various hospital facilities and laboratories in 2018.

III. Communication
Putting a value on the advertising and communication slots (press, radio, TV, reports) offered free of charge to La Chaîne de l’Espoir by the various partners and media companies, gives a figure of €441 K for the full year 2018.

IV. Skills-based sponsorship
The secondment of an employee from one of our partners for a few weeks during the year, constitutes a donation in kind evaluated at €12 K.

Thus the total of gifts in kind amounts to €3,163 K.

**Balance sheet**
The total on La Chaîne de l’Espoir’s balance sheet at 31/12/2018 amounts to €24,312 K, an increase of €588 K compared with the previous year. This variance is largely due to the combined effect of:

- the removal of ongoing depreciated assets as construction of the Festoc Centre progressed (€2,137 K)
- recording as debt the outstanding part of the funding from the French Development Agency for the Afghanistan project (the 2018-2021 convention, for a total amount of €7,000 K)

Net fixed assets declined compared with 2017 at €8,250 K, and current assets increased terminating at €16,061 K in 2018.

Association funds increase in line with the surplus recognised over the year: At 31/12/2018 this amounted to €8,088 K.

The investment subsidy from the Île de France region, recorded in the 2017 balance sheet for an amount of €100 K, is removed from the liabilities, following the transfer of the Festoc Centre asset to the Fondation pour l’Enfance in Mali.

Accrued income, recorded for multi-annual funding agreements, for that part of the funding that concerns future years, amounted to €7,170 K compared with €708 K in 2017.

Debts and borrowings, excepting accrued income, amounted to €7,210 K in 2018, stable compared with the end of year situation in 2017, demonstrating the Association’s healthy financial situation.
**Budget for 2019**
The budget for 2019 was approved by the Board of Directors on 18 February 2019. The budget forecasts income at €20,403 K with expenses estimated at €19,927 K, providing a provisional surplus of €477 K, thus ensuring the solvency and financial autonomy of the organisation.

This breaks down as follows:

### Income

<table>
<thead>
<tr>
<th>Description</th>
<th>€K</th>
</tr>
</thead>
<tbody>
<tr>
<td>General public donations</td>
<td>11,475</td>
</tr>
<tr>
<td>Private partners</td>
<td>2,196</td>
</tr>
<tr>
<td>Legacies and donations</td>
<td>2,500</td>
</tr>
<tr>
<td>State subsidies</td>
<td>3,004</td>
</tr>
<tr>
<td>Other operating income</td>
<td>60</td>
</tr>
<tr>
<td><strong>Total operating income</strong></td>
<td><strong>19,236</strong></td>
</tr>
<tr>
<td>Recovery of dedicated funds</td>
<td>1,108</td>
</tr>
<tr>
<td>Financial income</td>
<td>60</td>
</tr>
<tr>
<td><strong>Total income</strong></td>
<td><strong>20,403</strong></td>
</tr>
</tbody>
</table>

### Expenses

<table>
<thead>
<tr>
<th>Description</th>
<th>€K</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programmes</td>
<td>14,497</td>
</tr>
<tr>
<td>Health in France</td>
<td>1,579</td>
</tr>
<tr>
<td>Health abroad</td>
<td>10,954</td>
</tr>
<tr>
<td>Education</td>
<td>1,964</td>
</tr>
<tr>
<td>Development</td>
<td>4,730</td>
</tr>
<tr>
<td>Running costs</td>
<td>570</td>
</tr>
<tr>
<td><strong>Total operating Expense</strong></td>
<td><strong>19,797</strong></td>
</tr>
<tr>
<td>Financial expenses</td>
<td>130</td>
</tr>
<tr>
<td><strong>Total expenditure</strong></td>
<td><strong>19,927</strong></td>
</tr>
</tbody>
</table>

**Surplus** 477

**Challenges and outlook for 2019**
Budgetary tracking for the first four months of 2019 is fully in line with the provisions. Our donors have remained faithful despite fiscal reform and a context of social unrest. Thus 2019 is adhering to the budget projections and thus the financial stability of the organisation would appear to be under control.

In 2019, La Chaîne de l’Espoir will continue to pursue its established strategies:
- Continued growth of direct debit regular donations representing 60% percent of Marketing collection and more than xx% of receipts from the general public.
- A surge in Internet and cross channel donations plus an enhanced influence of the social networks.
- Continued and regular growth in legacies and donations.
- Diversification of income sources with international growth from the USA and Spain.
- Joint development of transverse projects with our private and institutional partners involving South-South collaboration in training and accompaniment.
- A move in our education programmes towards health in schools and a pooling of donations with a move away from sponsoring.
- Integration of a new accompaniment programme for children hospitalised in France.

- New projects under study in Madagascar, Liberia, and Iraq.
- Development of a pilot programme for essential surgery in Chad.
- Integrating e-health activities into our programmes.
- Systematisation in the approach to risk management at all levels and in all areas of the organisation - strategic, operational, personnel, financial, safety and security, legal, IT.
- Strengthening the financial management of the organisation and its activities.
- Strengthening the HR function.

**Conclusion**
The economic model of La Chaîne de l’Espoir needs to adapt to the trends taking place in the solidarity economy. The model of mutual cooperation is being modified by the significant emergence of NGOs and the actions of civil society in the countries where the organisation is involved.

In this scenario, La Chaîne de l’Espoir has a singular and essential role to play - champion the access to surgery for children of the poorest families, provide such children, who have nothing, the treatment they need that requires the highest level of medical expertise.

This is what motivates our network of volunteers - doctors, surgeons, paramedical staff and all the others - who organise coordinate and give their utmost for the benefit of these children. They are the body and soul of our organisation and the guarantors of a certain state of mind. That is what must be maintained.

La Chaîne de l’Espoir is no longer a little association of volunteers and its management practices must be professional and rigorous. However, we must not allow procedures, GDPR, accounting standards, etc., to forget our solid humanitarian and medical roots, those of independent-minded French doctors who, with their expertise and impertinence, have often moved mountains.

Emile DINET
Treasurer
Auditor's report

For the year ended 31 December, 2018
To the members of the Association La Chaîne de l’Espoir,

• Opinion
In compliance with the mission entrusted to us by your annual general meeting, we have audited the accompanying financial statements of the Association La Chaîne de l’Espoir for the year ended 31 December, 2018, as presented in the attachments to this report.

In our opinion, the financial statements give a true and fair view of the assets and liabilities and of the financial position of the Association as at 31 December 31, 2018 and of the results of its operations for the year then ended.

• Basis of the opinion
Audit references
We conducted our audit in accordance with the professional standards applicable in France. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion. Our responsibilities in the light of these standards are given in the section “Statutory Auditor’s responsibilities for the Audit of the Financial statements” in this report.

Independence
We conducted our audit mission in compliance with independence rules applicable to us, for the period from 1 January, 2018 to the date of our report and specifically we did not provide any prohibited non-audit services referred to in the French Code of ethics (code de déontologie) for statutory auditors.

• Justification of Assessments
In accordance with the requirements of Articles L. 823-9 and R. 823-7 of the French Commercial Code (code de commerce) relating to the justification of our assessments, we inform you that the assessments which, in our professional judgment, were of most significance in our audit of the financial statements addressed the appropriateness of the accounting principles used and the overall presentation of the financial statements.

These matters were addressed in the context of our audit of the financial statements as a whole, and in forming our opinion thereon, and we do not provide a separate opinion on specific items of the financial statements.

• Specific controls
Equally, we have carried out specific checks defined in the legal and regulatory texts, in accordance with the standards laid down for professional audit activity in France.

We have no matters to report as to the fair presentation and the consistency with the financial statements of the information given in the Treasurer’s financial report and in the other documents provided to members with respect to the financial position and the financial statements.

• Responsibilities of management and those charged with the organisation’s governance concerning the annual accounts
Management is responsible for the preparation and fair presentation of the financial statements in accordance with French accounting principles, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error. In preparing the financial statements, management is responsible for assessing the Association’s ability to continue as a going concern, disclosing in the accounts, as applicable, matters related to continuing as a going concern and using the going concern basis of accounting, unless it is expected to liquidate the Association or to cease operations. The financial statements were approved by the Board of Directors.

• Statutory Auditor’s responsibilities for the Audit of the Financial statements
Our role is to issue a report on the financial statements. Our objective is to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with professional standards will always detect a material misstatement when it exists.

Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.
As specified in Article L. 823-10-1 of the French Commercial Code (code de commerce), our statutory audit does not include assurance on the viability of the Association or the quality of management of the affairs of the Association. As part of an audit conducted in accordance with professional standards applicable in France, the statutory auditor exercises professional judgment throughout the audit and furthermore:

- identifies and assesses the risks of material misstatement of the financial statements, whether due to fraud or error, designs and performs audit procedures responsive to those risks, and obtains audit evidence considered to be sufficient and appropriate to provide a basis for his opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the overriding of internal controls;

- obtains an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the internal control;

- evaluates the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management in the financial statements.

- assesses the appropriateness of management’s use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Association’s ability to continue as a going concern. This assessment is based on the audit evidence obtained up to the date of his audit report. However, future events or conditions may cause the Association to cease to continue as a going concern. If the statutory auditor concludes that a material uncertainty exists, there is a requirement to draw attention in the audit report to the related disclosures in the financial statements or, if such disclosures are not provided or inadequate, to reserve the opinion expressed therein or refuse to provide an opinion;

- evaluates the overall presentation of the financial statements and assesses whether these statements represent the underlying transactions and events in a manner that achieves fair presentation.

Paris-La Défense, 5 June 2019
Auditor
Deloitte & Associés

Jean-Pierre VERCAMER
## Notes to the financial statements

### ASSETS (EUROS)

<table>
<thead>
<tr>
<th></th>
<th>31/12/2018</th>
<th>31/12/2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fixed assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intangible assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Software</td>
<td>45,217</td>
<td>9,840</td>
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<tr>
<td>Brands</td>
<td>19,602</td>
<td>19,602</td>
</tr>
<tr>
<td>Intangible assets in progress</td>
<td>83,430</td>
<td>83,430</td>
</tr>
<tr>
<td><strong>Tangible assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Land</td>
<td>1,380,000</td>
<td>1,380,000</td>
</tr>
<tr>
<td>Constructions</td>
<td>6,619,073</td>
<td>6,072,817</td>
</tr>
<tr>
<td>Technical installations</td>
<td>25,862</td>
<td>21,813</td>
</tr>
<tr>
<td>Material and other tangible assets</td>
<td>34,191</td>
<td>28,551</td>
</tr>
<tr>
<td>Tangible assets in progress</td>
<td>577,675</td>
<td>577,675</td>
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<tr>
<td><strong>Total fixed assets</strong></td>
<td>8,861,348</td>
<td>6,250,425</td>
</tr>
<tr>
<td><strong>Current assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advances &amp; prepayments on orders</td>
<td>15,130</td>
<td>106,029</td>
</tr>
<tr>
<td>Backers’ debts</td>
<td>6,211,619</td>
<td>1,114,198</td>
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<tr>
<td>Other receivables</td>
<td>1,890,532</td>
<td>1,763,607</td>
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<tr>
<td>Investment securities</td>
<td>4,725,241</td>
<td>2,690,381</td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
<td>3,123,412</td>
<td>5,313,737</td>
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<tr>
<td>Prepaid charges</td>
<td>99,491</td>
<td>98,606</td>
</tr>
<tr>
<td><strong>Total current assets</strong></td>
<td>16,065,425</td>
<td>11,086,558</td>
</tr>
<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td>24,926,773</td>
<td>20,723,798</td>
</tr>
</tbody>
</table>

### LIABILITIES (EUROS)

<table>
<thead>
<tr>
<th></th>
<th>31/12/2018</th>
<th>31/12/2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Association funds</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-profit organisation funds</td>
<td>7,751,360</td>
<td>5,752,018</td>
</tr>
<tr>
<td>Reserve for various projects</td>
<td>300,000</td>
<td>1,300,000</td>
</tr>
<tr>
<td>Fiscal year outcome</td>
<td>36,942</td>
<td>999,342</td>
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<tr>
<td>Investment subsidies</td>
<td>100,000</td>
<td></td>
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<tr>
<td><strong>Total non-profit organisation funds</strong></td>
<td>8,088,302</td>
<td>8,151,360</td>
</tr>
<tr>
<td><strong>Reserves and restricted funds</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reserves for risks and costs</td>
<td>380,000</td>
<td>460,000</td>
</tr>
<tr>
<td>Restricted funds</td>
<td>1,463,036</td>
<td>4,016,593</td>
</tr>
<tr>
<td><strong>Total provisions and restricted funds</strong></td>
<td>1,843,036</td>
<td>4,476,593</td>
</tr>
<tr>
<td><strong>Debts</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loans and other borrowings</td>
<td>4,800,077</td>
<td>5,151,677</td>
</tr>
<tr>
<td>Accounts payable</td>
<td>1,624,844</td>
<td>1,196,839</td>
</tr>
<tr>
<td>Tax and social liabilities</td>
<td>558,382</td>
<td>611,100</td>
</tr>
<tr>
<td>Others</td>
<td>227,060</td>
<td>428,013</td>
</tr>
<tr>
<td>Deferred income</td>
<td>7,170,114</td>
<td>708,216</td>
</tr>
<tr>
<td><strong>Total debts</strong></td>
<td>14,380,476</td>
<td>8,095,845</td>
</tr>
<tr>
<td><strong>TOTAL LIABILITIES</strong></td>
<td>24,311,814</td>
<td>20,723,798</td>
</tr>
</tbody>
</table>
## INCOME STATEMENT
*(EUROS)*

<table>
<thead>
<tr>
<th></th>
<th>31/12/2018</th>
<th>31/12/2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Operating income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fundraising</td>
<td>12,899,934</td>
<td>14,778,868</td>
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<tr>
<td>Sponsorship income</td>
<td>1,551,943</td>
<td>1,722,965</td>
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<tr>
<td>Other income</td>
<td>217,192</td>
<td>15,048,763</td>
</tr>
<tr>
<td>Operating subsidies</td>
<td>2,868,788</td>
<td>2,727,457</td>
</tr>
<tr>
<td><strong>Total (I)</strong></td>
<td>17,537,857</td>
<td>34,278,053</td>
</tr>
<tr>
<td><strong>Operating expenses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other purchase and external expenses</td>
<td>11,971,744</td>
<td>12,684,233</td>
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<tr>
<td>Tax and social contributions</td>
<td>306,379</td>
<td>277,816</td>
</tr>
<tr>
<td>Salaries and payroll</td>
<td>2,923,954</td>
<td>2,265,232</td>
</tr>
<tr>
<td>Payroll taxes</td>
<td>1,185,621</td>
<td>1,016,378</td>
</tr>
<tr>
<td>Depreciation</td>
<td>301,801</td>
<td>291,243</td>
</tr>
<tr>
<td>Reserves for risks</td>
<td>380,000</td>
<td>380,000</td>
</tr>
<tr>
<td>Other charges</td>
<td>1,160,831</td>
<td>16,957,070</td>
</tr>
<tr>
<td><strong>Total (II)</strong></td>
<td>17,850,330</td>
<td>33,871,971</td>
</tr>
<tr>
<td><strong>Operating surplus/(deficit) (I)-(II) = (III)</strong></td>
<td>(312,472)</td>
<td>406,081</td>
</tr>
<tr>
<td><strong>Financial income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other interest and similar income</td>
<td>53,502</td>
<td>50,892</td>
</tr>
<tr>
<td>Release of reserves</td>
<td>10,835</td>
<td>8,021</td>
</tr>
<tr>
<td>Foreign exchange gains</td>
<td>40,567</td>
<td>7,559</td>
</tr>
<tr>
<td>Net income from sale of shares</td>
<td>15,357</td>
<td></td>
</tr>
<tr>
<td><strong>Total (IV)</strong></td>
<td>120,261</td>
<td>66,472</td>
</tr>
<tr>
<td><strong>Financial expenses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interest payable and similar expense</td>
<td>50,694</td>
<td>53,701</td>
</tr>
<tr>
<td>Foreign exchange losses</td>
<td>27,400</td>
<td>76,742</td>
</tr>
<tr>
<td>Net Expense from sale of shares</td>
<td>85,716</td>
<td></td>
</tr>
<tr>
<td><strong>Total (V)</strong></td>
<td>163,810</td>
<td>130,442</td>
</tr>
<tr>
<td><strong>Financial surplus/(deficit) (IV)-(V) = (VI)</strong></td>
<td>(43,549)</td>
<td>63,971</td>
</tr>
<tr>
<td><strong>Current surplus/(deficit) (III)+(VI) = (VII)</strong></td>
<td>(356,021)</td>
<td>342,111</td>
</tr>
<tr>
<td><strong>Non-recurring income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>On management operations</td>
<td>6,685</td>
<td>894</td>
</tr>
<tr>
<td>On capital transactions</td>
<td>100,000</td>
<td></td>
</tr>
<tr>
<td>Release of provisions</td>
<td></td>
<td>167,832</td>
</tr>
<tr>
<td><strong>Total (VIII)</strong></td>
<td>106,685</td>
<td>168,726</td>
</tr>
<tr>
<td><strong>Non-recurring expenses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>On management operations</td>
<td>127,197</td>
<td>27,858</td>
</tr>
<tr>
<td>On capital transactions</td>
<td>2,137,450</td>
<td>5,375,188</td>
</tr>
<tr>
<td>Depreciation &amp; reserves</td>
<td>31,196</td>
<td></td>
</tr>
<tr>
<td><strong>Total (IX)</strong></td>
<td>2,264,647</td>
<td>5,434,242</td>
</tr>
<tr>
<td><strong>Non-recurring surplus/(deficit) (VIII)-(IX) = (X)</strong></td>
<td>(2,157,962)</td>
<td>(5,265,516)</td>
</tr>
<tr>
<td>Unused funds carried forward from previous years</td>
<td>3,424,713</td>
<td>7,707,488</td>
</tr>
<tr>
<td>Projected use of allocated funds</td>
<td>(871,156)</td>
<td>(1,782,745)</td>
</tr>
<tr>
<td>Income taxes</td>
<td>2,632</td>
<td>1,995</td>
</tr>
<tr>
<td><strong>TOTAL INCOME</strong></td>
<td>21,189,516</td>
<td>42,220,738</td>
</tr>
<tr>
<td><strong>TOTAL EXPENDITURE</strong></td>
<td>21,152,574</td>
<td>41,221,396</td>
</tr>
<tr>
<td><strong>SURPLUS/(DEFICIT)</strong></td>
<td>36,942</td>
<td>999,342</td>
</tr>
</tbody>
</table>
NOTES TO THE FINANCIAL STATEMENTS • 84 - 85

VOLUNTARY IN-KIND CONTRIBUTIONS (EUROS)

<table>
<thead>
<tr>
<th></th>
<th>31/12/2018</th>
<th>31/12/2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Volunteers</td>
<td>2,521,930</td>
<td>2,618,108</td>
</tr>
<tr>
<td>In-kind donations (services)</td>
<td>453,287</td>
<td>669,422</td>
</tr>
<tr>
<td>In-kind donations (goods)</td>
<td>187,939</td>
<td>329,810</td>
</tr>
<tr>
<td>Total voluntary in-kind contributions</td>
<td>3,163,156</td>
<td>3,617,339</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenses</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Social aid missions</td>
<td>1,276,739</td>
<td>1,257,529</td>
</tr>
<tr>
<td>Fundraising related costs</td>
<td>1,267,027</td>
<td>1,586,822</td>
</tr>
<tr>
<td>Operational costs and others</td>
<td>619,390</td>
<td>772,989</td>
</tr>
<tr>
<td>Total voluntary in-kind contributions</td>
<td>3,163,156</td>
<td>3,617,339</td>
</tr>
</tbody>
</table>

• Introduction
The financial year ended 31 December, 2018 represents 12 months Accounts are established and presented in euros.
At 31 December 2018, balance sheet before affecting the surplus was €24,311,81. The year produced a surplus of €36,942.
The information presented hereafter represents an integral part of the annual financial statements approved by the Board of Directors.

• Note 1: General assessment rule
The annual financial statements are prepared in accordance with regulation no. 99.01 of 16 February 1999 of the Comité de la Réglementation Comptable (French accounting regulation committee) and ANC regulation no. 2014-03 of 5 June 2014 relating to the General Accounting Plan, amended by ANC regulations no. 2015-06 of 23 November 2015 and 2016-07 of 4 November 2016.
The conventions below have been applied in observance of the principle of prudence and in accordance with the following basic rules:
- Going concern,
- Consistency of accounting policies from one financial year to the next,
- Independence of financial years.

• Note 2: Changes in presentation, assessment or accounting methods
Changes in accounting presentation of the items listed below have been introduced for the 2018 accounts, with no impact on the results.
The costs associated with employees with employment contract in the country where they operate are now accounted for in personnel costs and no longer as external costs. For 2018, this translates into an increase in items “Employee salaries” and “Social contributions” of around €440,000, compensated by the equivalent reduction under item “Other external purchases and expenditure”. Transactions effected in foreign currencies are now converted into euros at the average official monthly rate and no longer at the rate used by the bank. The difference between the official rate and the collection/disbursement rate is recorded as an exchange rate gain or loss in the financial results.

For 2018, this translates into noticeable variations in items “Foreign exchange gains”, and “Foreign exchange losses” in the accounts.

Recording of deferred income is usual for all funding across several accounting periods, spreading the income from multi-year funding across the relevant periods, and not solely in the period in which the agreement was signed. Income from multi-year agreements is accounted for in its totality, and appears in the annual results as a function of the periods or stages of income attribution in the agreement or, by default, on a pro rata temporis basis. The part that is associated with future periods is recorded in the balance sheet under “Deferred income”. In addition, if the portion assigned to the period is not fully used at 31/12, a dedicated fund is recorded for the remaining portion.

All of these changes are designed to present a more precise reflection of the organisation’s activities in the annual accounts.

• Note 3: Significant events
2018 has seen La Chaîne de l’Espoir continuing its social aid missions and reforming its structure while maintaining a satisfactory financial balance. The André Festoc Paediatric Surgery Unit (UCPAF), construction of which started in April 2017, was commissioned in September 2018. The asset has thus been transferred to its partner, the Fondation Pour l’Enfance which owns the building in which the unit is located - the Le Luxembourg Mother and Child Hospital in Bamako. This transfer adds around 2 million euros to the income and expenditure accounts for the organisation, with no significant impact on the financial results.

As a reminder, last year, La Chaîne de l’Espoir transferred three similar structures which had a non-recurring effect of an increase of more than 20 million euros to the income and expenditure accounts for 2017.

La Chaîne de l’Espoir has continued to bolster its teams to have increased in-house skills, ensure completion of its strategic plan and increase the quality of its financial resource management and the management of risks.

The number of employees at head office rose from 44
to 50 with, in particular, the recruitment of a Medical Director, an Internal Audit and Control Manager, and reinforcements for the Management controls and Programmes teams.

Finally, la Chaîne de l’Espoir set up CDE Medical Engineering, a company with a simplified structure (SASU) of which it is the sole shareholder. This entity will participate in revenue-earning advice and guidance activities in medical construction projects. Its profits will be re-invested in the principal activities of the Association. A shareholding has thus been recorded in the assets of La Chaîne de l’Espoir for 2018, to the level of the issued capital of the SASU.

• **Note 4: events occurring after closing the accounts**

On 18 February 2019, the Board of Directors approved the change in the Education programme designed to have greater efficiency in managing the funds received. The principle of sponsoring children or their community will be oriented more to a financial support for the Education programmes with a donor relationship similar to that used in the Treatments programme.

On 01/01/2019, la Chaîne de l’Esper takes over two programmes, formerly handled by Médecins du Monde, which strengthen the organisation’s actions in foreign countries and the themes at the heart of its social activities:
- support for children hospitalised in France
- paediatric heart surgery in Madagascar

• **Note 5: assets**

The Association’s assets are recorded and valued according to the standards appropriate to each type of asset, at the cost of acquisition (price and associated costs) or at the cost of production.

**Note 5-1: Fixed assets located in France**

Assets situated in France, at the Association’s head office, are depreciated using the straight line method over the economic life of the asset:
- Other intangible assets (software) .......... 3 years
- Head office building ........................................... 25 years

• Fixtures and fittings and additions
  - to head office building.......................... 8 and 10 years
• Technical installations and equipment ........ 3 years
• General equipment, fixtures and fittings ...... 5 years
• Transport equipment................................... 3 years
• Office and computer equipment............... 3 years

**Note 5-2: Fixed assets located abroad**

As part of its activity, the association may have to purchase property meeting the accounting definition of fixed assets and located in countries other than France.

Considering:

a) the specific context
  - geographical isolation making it difficult to monitor the asset’s physical existence,
  - special operational conditions causing uncertainty with regard the physical state of the assets,
  - specific nature of the acquisitions made as part of the associative project and designed for a defined local use,
  - agreements made with funding institutions,

b) the use of the accounting principle of prudence.

These equipment assets are counted directly under mission expenditure.
Variants encountered during the year in question are as follows:

### GROSS FIXED ASSETS (EUROS)

<table>
<thead>
<tr>
<th></th>
<th>31/12/2017</th>
<th>Allocations</th>
<th>Funds used</th>
<th>31/12/2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Software</td>
<td>122,478</td>
<td>77,261</td>
<td>45,217</td>
<td></td>
</tr>
<tr>
<td>Brands</td>
<td>19,602</td>
<td></td>
<td>19,602</td>
<td></td>
</tr>
<tr>
<td>Intangible assets in progress</td>
<td>78,563</td>
<td>4,867</td>
<td>83,430</td>
<td></td>
</tr>
<tr>
<td>Intangible assets</td>
<td>220,644</td>
<td>4,867</td>
<td>77,261</td>
<td>148,250</td>
</tr>
<tr>
<td>Head office land</td>
<td>1,380,000</td>
<td></td>
<td>1,380,000</td>
<td></td>
</tr>
<tr>
<td>Head office building</td>
<td>6,371,163</td>
<td></td>
<td>6,371,163</td>
<td></td>
</tr>
<tr>
<td>Fixtures, fittings and improvements to head office building</td>
<td>247,909</td>
<td></td>
<td>247,909</td>
<td></td>
</tr>
<tr>
<td>Technical installations and equipment</td>
<td></td>
<td>25,862</td>
<td></td>
<td>25,862</td>
</tr>
<tr>
<td>General equipment, fixtures and fittings</td>
<td>41,863</td>
<td>41,863</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transport equipment</td>
<td>7,500</td>
<td></td>
<td>7,500</td>
<td></td>
</tr>
<tr>
<td>Office and computer equipment</td>
<td>6,288</td>
<td>26,691</td>
<td>6,288</td>
<td>26,691</td>
</tr>
<tr>
<td>Tangible assets in progress - Head office</td>
<td>76,942</td>
<td>41,566</td>
<td>118,508</td>
<td></td>
</tr>
<tr>
<td>Tangible assets in progress - MDES</td>
<td>459,167</td>
<td></td>
<td></td>
<td>459,167</td>
</tr>
<tr>
<td>Tangible assets in progress - UCPAF</td>
<td>1,238,397</td>
<td>899,052</td>
<td>2,137,450</td>
<td></td>
</tr>
<tr>
<td>Tangible assets</td>
<td>9,821,730</td>
<td>1,000,671</td>
<td>2,185,601</td>
<td>8,636,800</td>
</tr>
<tr>
<td>Shares - CDE Medical Engineering</td>
<td></td>
<td>50,000</td>
<td></td>
<td>50,000</td>
</tr>
<tr>
<td>Deposits and guarantees</td>
<td>29,401</td>
<td>10,656</td>
<td>13,758</td>
<td>26,298</td>
</tr>
<tr>
<td>Financial assets</td>
<td>29,401</td>
<td>60,656</td>
<td>13,758</td>
<td>76,298</td>
</tr>
<tr>
<td><strong>GRAND TOTAL</strong></td>
<td><strong>10,071,774</strong></td>
<td><strong>1,066,194</strong></td>
<td><strong>2,276,620</strong></td>
<td><strong>8,861,348</strong></td>
</tr>
</tbody>
</table>

### DEPRECIATION (EUROS)

<table>
<thead>
<tr>
<th></th>
<th>31/12/2017</th>
<th>Allocations</th>
<th>Funds used</th>
<th>31/12/2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Software</td>
<td>102,798</td>
<td>9,840</td>
<td>77,261</td>
<td>35,377</td>
</tr>
<tr>
<td>Brands</td>
<td>19,602</td>
<td></td>
<td>19,602</td>
<td></td>
</tr>
<tr>
<td>Intangible assets</td>
<td>122,401</td>
<td>9,840</td>
<td>77,261</td>
<td>54,980</td>
</tr>
<tr>
<td>Head office building</td>
<td>254,847</td>
<td>254,847</td>
<td>509,693</td>
<td></td>
</tr>
<tr>
<td>Fixtures, fittings and improvements to head office building</td>
<td>10,532</td>
<td>26,031</td>
<td>36,562</td>
<td></td>
</tr>
<tr>
<td>Technical installations and equipment</td>
<td></td>
<td>4,049</td>
<td></td>
<td>4,049</td>
</tr>
<tr>
<td>General equipment, fixtures and fittings</td>
<td>40,467</td>
<td>1,395</td>
<td>41,863</td>
<td></td>
</tr>
<tr>
<td>Transport equipment</td>
<td>7,500</td>
<td></td>
<td>7,500</td>
<td></td>
</tr>
<tr>
<td>Office and computer equipment</td>
<td>6,288</td>
<td>5,362</td>
<td>6,288</td>
<td>5,362</td>
</tr>
<tr>
<td>Tangible assets</td>
<td>312,134</td>
<td>291,961</td>
<td>48,151</td>
<td>555,943</td>
</tr>
<tr>
<td><strong>GRAND TOTAL</strong></td>
<td><strong>434,534</strong></td>
<td><strong>301,801</strong></td>
<td><strong>125,412</strong></td>
<td><strong>610,923</strong></td>
</tr>
</tbody>
</table>

**Note 6: receivables**

Receivables are valued at their nominal value.
If there appears a risk of not recovering an item, depreciation is applied.

<table>
<thead>
<tr>
<th></th>
<th>Amount</th>
<th>- 1 year</th>
<th>1 to 5 years</th>
<th>+ 5 years</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Backers’ debts</strong></td>
<td>6,211,619</td>
<td>2,390,921</td>
<td>3,820,698</td>
<td></td>
</tr>
<tr>
<td>French Development Agency</td>
<td>5,656,069</td>
<td>1,956,069</td>
<td>3,700,000</td>
<td></td>
</tr>
<tr>
<td>Aga Khan Foundation</td>
<td>395,550</td>
<td>274,852</td>
<td>120,698</td>
<td></td>
</tr>
<tr>
<td>European Union</td>
<td>160,000</td>
<td>160,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Other receivables</strong></td>
<td>1,890,532</td>
<td>1,690,532</td>
<td>200,000</td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>8,102,151</td>
<td>4,081,453</td>
<td>4,020,698</td>
<td></td>
</tr>
</tbody>
</table>
• Note 7: Investment securities
Investment securities are recognised in the balance sheet at acquisition cost. Disposals are accounted for using the FIFO method. Investments are made in guaranteed-capital assets, therefore risk-free.

Variants encountered during the year in question are as follows:

<table>
<thead>
<tr>
<th></th>
<th>31/12/2017</th>
<th>Allocations</th>
<th>Funds used</th>
<th>31/12/2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>L’Oréal shares</td>
<td>2,094</td>
<td></td>
<td>2,094</td>
<td></td>
</tr>
<tr>
<td>BNP shares</td>
<td></td>
<td>750,427</td>
<td>750,267</td>
<td>159</td>
</tr>
<tr>
<td>Agéas capitalisation contract</td>
<td>1,038,523</td>
<td>5,429</td>
<td></td>
<td>1,043,952</td>
</tr>
<tr>
<td>Vie plus capitalisation contract</td>
<td>1,664,636</td>
<td>16,494</td>
<td></td>
<td>1,681,130</td>
</tr>
<tr>
<td>Cholet-Dupont capitalisation contract</td>
<td>2,000,000</td>
<td></td>
<td>2,000,000</td>
<td></td>
</tr>
<tr>
<td><strong>GRAND TOTAL</strong></td>
<td><strong>2,705,253</strong></td>
<td><strong>2,772,350</strong></td>
<td><strong>752,361</strong></td>
<td><strong>4,725,241</strong></td>
</tr>
</tbody>
</table>

In 2015, a reserve for depreciation was recorded for the Vie plus capitalisation contract, adjusted every year as a function of the value of the contract. In 2018, the reserve of €10,835 was lifted. The reserve remaining in the accounts at 31/12/2018 amounted to €4,035.

• Note 8: Cash and cash equivalents
Liquidities in France and in foreign missions (banks and savings accounts) include amounts in foreign currencies.

They have been valued in euros at the rate applicable on 31st December. Any exchange differences at year end have been recorded as exchange rate gains and losses in the financial results.

• Note 9: Liabilities regularisation account

Note 9-1: Deferred income

<table>
<thead>
<tr>
<th></th>
<th>- 1 year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Receivables (Credit notes to be received)</td>
<td>83,777</td>
</tr>
<tr>
<td>Other accrued income</td>
<td>34,187</td>
</tr>
<tr>
<td><strong>TOTAL DEFERRED INCOME</strong></td>
<td><strong>117,964</strong></td>
</tr>
</tbody>
</table>

Note 9-2: Deferred income

<table>
<thead>
<tr>
<th></th>
<th>- 1 year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating expenses</td>
<td>99,491</td>
</tr>
<tr>
<td><strong>TOTAL PREPAID CHARGES</strong></td>
<td><strong>99,491</strong></td>
</tr>
</tbody>
</table>

• Note 10: Non-profit organisation funds
La Chaîne de l’Espoir relies on two types of reserve:
- funds void of any repossession right, aimed at securing the future of the organisation
- Project reserves, aimed at funding operational projects

Variants encountered during the year in question are as follows:

<table>
<thead>
<tr>
<th></th>
<th>31/12/2017</th>
<th>Allocations</th>
<th>Funds used</th>
<th>31/12/2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funds void of repossession rights</td>
<td>5,752,018</td>
<td>1,999,342</td>
<td></td>
<td>7,751,360</td>
</tr>
<tr>
<td>Africa projects reserve</td>
<td>300,000</td>
<td></td>
<td></td>
<td>300,000</td>
</tr>
<tr>
<td>Afghanistan projects reserve</td>
<td>1,000,000</td>
<td>1,000,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Earnings 2017:</td>
<td>999,342</td>
<td></td>
<td>999,342</td>
<td></td>
</tr>
<tr>
<td>Earnings 2018:</td>
<td></td>
<td>36,942</td>
<td>36,942</td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL NON-PROFIT ORGANISATION FUNDS</strong></td>
<td><strong>8,051,360</strong></td>
<td><strong>2,036,284</strong></td>
<td><strong>1,999,342</strong></td>
<td><strong>8,088,302</strong></td>
</tr>
</tbody>
</table>

Information related to earnings appropriation is included in the minutes of the General Meeting of 11 June 2018.
• **Note 11: investment subsidies**
  Variants encountered during the year in question are as follows:

<table>
<thead>
<tr>
<th>31/12/2017</th>
<th>Allocations</th>
<th>Funds used</th>
<th>31/12/2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ile de France Region - Mali - equipment</td>
<td>100,000</td>
<td>100,000</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>100,000</td>
<td>100,000</td>
<td></td>
</tr>
</tbody>
</table>

The investment subsidy granted in 2017 by the Ile-de-France Region has been used to fund the purchase of medical equipment as part of the construction of the André Festoc Paediatric Surgery Unit (UCPAF).

• **Note 12: reserves for risks and costs**
  A reserve is recognised for risks identified at year-end with a reasonable probability of occurring and representing a significant amount.
  Variants encountered during the year in question are as follows:

<table>
<thead>
<tr>
<th>31/12/2017</th>
<th>Allocations</th>
<th>Funds used</th>
<th>31/12/2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Litigation reserve</td>
<td>80,000</td>
<td>80,000</td>
<td></td>
</tr>
<tr>
<td>Risk reserve</td>
<td>380,000</td>
<td>380,000</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>460,000</td>
<td>380,000</td>
<td></td>
</tr>
</tbody>
</table>

The reserve for industrial tribunal litigation, no longer applicable, has been reintegrated during the year. The reserve for risks covering the operations in Iraq, recorded in the 2017 accounts for an amount of €380,000 has been kept in place.

• **Note 13: restricted funds**
  Restricted funds record the part of the resources affected by third party investors for designated projects which have not been used at the end of the accounting year. Variants encountered during the year in question are as follows:

<table>
<thead>
<tr>
<th>31/12/2017</th>
<th>Appropriations</th>
<th>Funds used</th>
<th>31/12/2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mali - UCPAF</td>
<td>2,022,228</td>
<td>2,022,228</td>
<td></td>
</tr>
<tr>
<td>Children's House Senegal</td>
<td>405,535</td>
<td>405,535</td>
<td></td>
</tr>
<tr>
<td>Care programme - Other projects</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Care in Afghanistan</td>
<td>55,020</td>
<td>68,142</td>
<td>50,550</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>40,757</td>
<td>40,757</td>
<td></td>
</tr>
<tr>
<td>Benin</td>
<td>38,379</td>
<td>23,407</td>
<td>38,379</td>
</tr>
<tr>
<td>Comoros</td>
<td>181,875</td>
<td>181,875</td>
<td></td>
</tr>
<tr>
<td>Mali</td>
<td>147,050</td>
<td>344</td>
<td>147,050</td>
</tr>
<tr>
<td>Iraq</td>
<td>255,286</td>
<td>86,831</td>
<td>255,286</td>
</tr>
<tr>
<td>Senegal - CCPC</td>
<td>63,843</td>
<td>63,843</td>
<td></td>
</tr>
<tr>
<td>Care in Senegal</td>
<td></td>
<td>67,261</td>
<td>67,261</td>
</tr>
<tr>
<td>Lebanon</td>
<td>32,549</td>
<td>22,585</td>
<td>32,549</td>
</tr>
<tr>
<td>Jordan</td>
<td>250,304</td>
<td>73,759</td>
<td>250,304</td>
</tr>
<tr>
<td>All areas</td>
<td></td>
<td>9,112</td>
<td>9,112</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Benin</td>
<td>7,570</td>
<td>9,686</td>
<td>7,570</td>
</tr>
<tr>
<td>Democratic Republic of Congo</td>
<td>75,000</td>
<td>24,792</td>
<td>75,000</td>
</tr>
<tr>
<td>Thailand</td>
<td>240,493</td>
<td>351,849</td>
<td>240,493</td>
</tr>
<tr>
<td>Togo</td>
<td>96,734</td>
<td>4,150</td>
<td>96,734</td>
</tr>
<tr>
<td>Haiti</td>
<td>19,890</td>
<td>19,890</td>
<td></td>
</tr>
<tr>
<td>All projects</td>
<td>124,839</td>
<td>88,480</td>
<td>124,839</td>
</tr>
<tr>
<td>TOTAL</td>
<td>4,016,593</td>
<td>871,156</td>
<td>3,424,713</td>
</tr>
</tbody>
</table>

The Comoros restricted fund represents funding received from the Indian Ocean Regional Health Agency during the 2016 accounting year. For reasons related to the political context, independent of any will on the behalf of the Association, no resources have been devoted to the Comoros project, in perfect transparency with the donor. The restricted fund is therefore still present at 31/12/2018.
**Note 14: Debts**
Debts are valued at their nominal value. Bank loans were negotiated in 2016 for an initial sum of €5,500,000 to fund the acquisition of La Chaîne de l’Espoir’s headquarters.

Payment dates at the close of the year are as follows:

<table>
<thead>
<tr>
<th>Financial debt</th>
<th>Amount</th>
<th>- 1 year</th>
<th>1 to 5 years</th>
<th>+ 5 years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Borrowings</td>
<td>4,798,791</td>
<td>353,282</td>
<td>1,431,286</td>
<td>3,014,223</td>
</tr>
<tr>
<td>Other financial debts</td>
<td>1,286</td>
<td>1,286</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Diverse debt</strong></td>
<td><strong>2,410,285</strong></td>
<td><strong>2,410,285</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supplier debts and associated accounts</td>
<td>1,624,844</td>
<td>1,624,844</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tax and social liabilities</td>
<td>558,382</td>
<td>558,382</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other debts</td>
<td>227,060</td>
<td>227,060</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>7,210,362</strong></td>
<td><strong>2,764,853</strong></td>
<td><strong>1,431,286</strong></td>
<td><strong>3,014,223</strong></td>
</tr>
</tbody>
</table>

**Note 15: liabilities regularisation account**

**Note 15-1: Total accrued charges**

| Trade payables and related accounts | 416,437 |
| Tax and social liabilities | 310,242 |
| Other financial debts | 34,666 |
| **TOTAL CHARGES A PAYER** | **761,345** |

**Note 16: off-balance sheet commitments**

**Note 16-1: Retirement indemnities**
Retirement indemnities are calculated using the retrospective method of projected credit units.

The base salary is defined as the final salary plus entitlements calculated based on the final pro-rata length of service.

This method complies with the method described in IAS 19. The amount of retirement indemnities for employees present as of 31 December 2018 has been estimated at €102,071.

No provision was recognised for the financial year ended on 31 December 2018.

Indemnities have been estimated based on the provisions of the French Labour Code (in the absence of any specific collective agreement) and the mortality tables in force at that date.

For the calculation of the indemnities, the following assumptions have been used:
- Expected rates of salary increase: 2% (inflation)
- Staff turnover: 0%
- Life expectancy: INSEE 0709 mortality table
- Discount rate: 1.57%
- Age at retirement: 67 (for all)
- Applicable collective agreement: none (provisions of the French Labour Code)
**Note 16-2: Leasing**

<table>
<thead>
<tr>
<th>Contract no.</th>
<th>Total invested</th>
<th>Paid in 2018</th>
<th>To be paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Konica Copier 218913FE0/1</td>
<td>178,566</td>
<td>56,235</td>
<td>28,117</td>
</tr>
<tr>
<td>Konica Badges 218913FE0/2</td>
<td>13,686</td>
<td>3,018</td>
<td>755</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>192,252</strong></td>
<td><strong>59,253</strong></td>
<td><strong>28,872</strong></td>
</tr>
</tbody>
</table>

**Note 16-3: Project-linked commitments**

As part of its social missions, La Chaîne de l’Espoir has agreed to provide financial support to the following partners:

- The Fondation pour l’Enfance in Mali / the ‘Le Luxembourg’ Mother and Child Hospital, for medical and surgical treatment of children within the framework of assistance during the start of operations in the André Festoc Paediatric Surgery Unit (agreement dated 20/03/2019; €300,000 in 2019)

- The CHU Fann in Senegal, for hospital staff training in the framework of support for the Cuomo Paediatric Heart Centre (agreement dated 15/06/2015; €360,000 between 2019 and 2021)

In addition, la Chaîne de l’Espoir signed a leasing agreement with purchase option with Siemens Financial Services for a duration of 36 months (€726,400 between 2019 and 2021).

In this contract, the organisation commits to lease an AERA MRI machine for the account of its partner the French Medical Institute for Mother and Child (FMIC). The latter agrees, in turn, through a sub-leasing agreement dated 19/09/2018, to reimburse the Association according to the same schedule of repayments.

**Note 16-4: Legacies**

Legacies in progress, accepted by the Board of Directors in 2018 or earlier, and not yet received as at 31 December 2018, are estimated for a total amount of €1,687,800.

**Note 17: voluntary in-kind contributions**

During the financial year 2018, La Chaîne de l’Espoir received voluntary donations in kind which have not been specifically itemised in the accounts. These appear at the end of the result account, and represent around €3,163,156 for the full year.

**Note 17-1: Other volunteers**

Numerous surgeons, doctors, nurses, anaesthetists and other technical medical personnel, go unpaid into the field on specific social missions for the organisation.

Other volunteers have been equally effective in other areas of the organisation's activities - at head office and in the regional branches or as hosting families.

An accurate measurement of the activity of all volunteers, in the field, at head office in Paris or in the regional branches and by the host families provides a view, by type, of the number of volunteer days devoted to the organisation, and serves to calculate the resulting contribution. Thus, in 2018, some 16,500 man-days of committed voluntary work was delivered to La Chaîne de l’Espoir.

**Note 17-2: Medical consumables and equipment income**

An estimated €187,939 worth of medical equipment and disposable goods were donated by various hospital facilities and laboratories in 2018.

**Note 17-3: Communication and public relations**

During the year 2018, La Chaîne de l’Espoir benefited from audio and television broadcast of information messages provided free of charge.

These services were estimated at €440,977.

**Note 17-4: Skills-based sponsorship**

In 2018, the ALTEN Company seconded one employee to La Chaîne de l’Espoir for an estimated amount of €12,310.
• **Note 18: Employees**
The employee complement of the organisation is calculated as at 31 December, taking into account the employees in France, aligned to equivalent full-time, based on the average number of employees in place each month.

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management positions</td>
<td>27</td>
<td>21</td>
<td>20</td>
</tr>
<tr>
<td>Non-management positions</td>
<td>23</td>
<td>23</td>
<td>22</td>
</tr>
<tr>
<td><strong>TOTAL NUMBER OF EMPLOYEES</strong></td>
<td><strong>50</strong></td>
<td><strong>44</strong></td>
<td><strong>42</strong></td>
</tr>
</tbody>
</table>

At 32/12/2018, the organisation had 61 employees working the field.

• **Note 19: Auditor’s fees**
Audit’s fees for year ended 31 December 2018 amounted to €27,216 including taxes. This relates to the legally-required mission to audit the financial statements and due diligence on certain project audits.

• **Note 20: remuneration paid and benefits in kind**
  
  **Note 20-1: Remuneration and benefits in kind of members of the Board of Directors**
  Members of the Board of Directors receive no remuneration and do not benefit from any particular advantage in kind related to their function. The organisation’s statutes do not allow for any attribution of assets to the members of the Board of Directors at any time.

  **Note 20-2: Remuneration and benefits in kind of the three most senior managers**
  Article 20 of law no. 2006-586 of 23 May 2006 concerning associative volunteering and associative commitment requires that: “associations whose annual budget is greater than €150,000 […] must publish, each year, in the annual accounts, the remunerations of the three most senior volunteer and salaried managers as well as the level of their benefits in kind”. The three most senior managers in the Association are the Chairman, the Director General and the Assistant Director General. For the year 2018, the gross annual amount of their remuneration and advantages in kind amounted to €166,432.

• **Note 21: annual Use of Resources account**
The Use of Resources Account is established using the elements of the annual accounts to give:
- overall information concerning uses (column 1) and resources (column 2) for the year
- allocation by usage (column 3) of just those funds collected from the general public as well as the follow-up on funds received prior to the current year (column 4).

  **Note 21-1: Uses**
The uses in the Use of Resources Account are identified from the accounting analysis used by the Association, under the three usage categories: Social aid missions, Fundraising expenses, and Running costs. Direct costs are affected by heading as a function of the departments and activities as a function of the nature of such activities.

  Activity-related expenses which may be associated with several headings in the Use of Resources Account are broken down between the headings concerned as a function of the number of persons and the workload occasioned by the various activities.

  This concerns the following expenses:
- personnel costs (remuneration and social charges) linked to administrative, financial and human resources management for head-office social aid missions and to the development of management procedures and tools for internal control (charges A); salaries split in this way amount to 49% of the total headquarters salary bill for the Association.
- headquarters overheads: energy, supplies and printing, general maintenance, postage, fixed telephones and Internet (charges B)
- overheads for mobile telephones (charges C)

  The breakdown of these expenses between the various headings is done using the allocation keys as follows:

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treatment of Children in France</td>
<td>4%</td>
<td>7%</td>
<td>10%</td>
</tr>
<tr>
<td>Medical missions and training, building</td>
<td>49%</td>
<td>44%</td>
<td>80%</td>
</tr>
<tr>
<td>Education</td>
<td>11%</td>
<td>7%</td>
<td></td>
</tr>
<tr>
<td>Fundraising expenses</td>
<td>14%</td>
<td>15%</td>
<td></td>
</tr>
<tr>
<td>Private and public fundraising costs</td>
<td>14%</td>
<td>20%</td>
<td></td>
</tr>
<tr>
<td>Head office costs</td>
<td>8%</td>
<td>7%</td>
<td>10%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Social aid missions
Expenses directly associated with Treatment of Children in France are accounted for under those direct actions carried out in France:

- cost of care of foreign children treated in France, including the following types of expenditure:
- potential expenses reimbursed to the volunteer host family: visits to the hospital, stays of convalescence, etc.
- hospital costs (stay, surgery, etc.) in Paris and/or in the provinces
- transport (ambulance, plane, etc.)
- ancillary costs: analyses, drugs, X-rays
- salaries of staff managing this department internally

Funds collected from the general public fund expenses incurred in France. Expenses directly associated with training and construction projects abroad are accounted for under those direct actions effected outside France:

- costs of medical and surgical teams on missions in African countries, Asia and the Middle East for carrying out surgical operations and training activities
- dispatching medical equipment and supplies, drugs and other consumables
- payments to organisations with which the organisation is partially or totally committed for operational activities under the terms of existing agreements
- sponsorship in African and Asian countries and operating cost of regional branches

Certain foreign programmes are carried out by local partners. The amounts which are disbursed for social aid missions are recorded under the heading “disbursement to a central or other organisation”.

Missions carried out abroad are financed in part by funds collected from the general public and in part by private and institutional funds.

Fundraising costs
This heading contains all the expenses required for fundraising appeals with the general public (marketing campaigns, appeal and mailing costs, handling the donations and costs associated with tax receipts, managing legacies), for obtaining funding from private partners and subsidies from institutional organisations or local authorities.

Operating costs
This heading contains the running costs associated with the headquarters building of La Chaîne de l’Espoir.

Note 21-2: Resources
Resources collected from the general public
This contains designated and non designated funds collected from the general public, including sponsors’ payments, designed to cover health and education costs of children living in Thailand, India, Nepal, Togo, Benin and Haiti. Legacies received by the organisation are also included in this section.

Other private funds
Section including funds from corporate sponsorship and French and foreign foundations collected during the year.

Subsidies and other public assistance
This section presents the funds from institutional organisations for programmes, defined by La Chaîne de l’Espoir, for which they provide part of the funding.

Other income
This section contains various management income, financial income, exceptional income and subscriptions.

Unused designated funds carried forward from previous years
This section shows the use of funds designated for specific projects which were unused at the end of the previous year.

Balance of resources collected from the general public which were not designated and remained unused at the end of the year. The amount in this box is zero, insofar as funds collected from the general public have been spent or designated during the year in which there were received.
### RESOURCE EMPLOYMENT ACCOUNT

#### USES

<table>
<thead>
<tr>
<th>Description</th>
<th>Uses in 2018 = results account (1)</th>
<th>Allocation of funds raised from the general public and used in 2018 (3)</th>
<th>RESOURCES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1- SOCIAL AID MISSIONS SOCIALES</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1- Carried out in France</td>
<td>1,833</td>
<td>1,747</td>
<td>1.1- Donations and legacies collected</td>
</tr>
<tr>
<td>- Directly cashed shares</td>
<td>1,798</td>
<td>1,712</td>
<td>- Non-designated manual donations</td>
</tr>
<tr>
<td>- Payments to other bodies active in France</td>
<td>35</td>
<td>35</td>
<td>- Designated manual donations</td>
</tr>
<tr>
<td>1.2- Carried out abroad</td>
<td>13,233</td>
<td>7,806</td>
<td>- Other non-designated legacies and donations</td>
</tr>
<tr>
<td>- Directly cashed shares</td>
<td>12,316</td>
<td>7,030</td>
<td>- Legacies and other designated charitable donations</td>
</tr>
<tr>
<td>- Payments to a central body or other bodies</td>
<td>917</td>
<td>776</td>
<td></td>
</tr>
<tr>
<td>2- FUNDRAISING RELATED COSTS</td>
<td>4,595</td>
<td>3,414</td>
<td></td>
</tr>
<tr>
<td>2.1- Fundraising expenses</td>
<td>3,414</td>
<td>3,414</td>
<td>2.2- Fundraising expense for other private funds</td>
</tr>
<tr>
<td>2.2- Fundraising expense for other private funds</td>
<td>849</td>
<td></td>
<td>3- OPERATING COSTS</td>
</tr>
<tr>
<td>2.3- Costs related to applications for grants and other public subsidies</td>
<td>333</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3- OPERATING COSTS</td>
<td>620</td>
<td>299</td>
<td></td>
</tr>
<tr>
<td>Sub-total</td>
<td></td>
<td></td>
<td>17,685</td>
</tr>
<tr>
<td>I- TOTAL USES IN THE PERIOD REGISTERED IN THE RESULTS ACCOUNT</td>
<td>13,266</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II- APPROPRIATION OF RESERVES</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>III- COMMITMENTS TO BE FILLED FROM DESIGNATED RESOURCES</td>
<td>871</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IV- ANNUAL SURPLUS</td>
<td>37</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GRAND TOTAL</td>
<td>21,190</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### RESOURCES

<table>
<thead>
<tr>
<th>Description</th>
<th>Resources collected in 2018 = results account (2)</th>
<th>Monitoring of funds raised from the general public and used in 2018 (4)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1- Donations and legacies collected</td>
<td>13,243</td>
<td>13,243</td>
<td></td>
</tr>
<tr>
<td>2- OTHER PRIVATE FUNDS</td>
<td>1,208</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.2- Fundraising expense for other private funds</td>
<td>849</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3- SUBSIDIES AND OTHER PUBLIC ASSISTANCE</td>
<td>2,699</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.3- Costs related to applications for grants and other public subsidies</td>
<td>333</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I- TOTAL RESOURCES IN THE PERIOD REGISTERED IN THE RESULTS ACCOUNT</td>
<td>17,685</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II- REMOVAL OF RESERVES</td>
<td>80</td>
<td></td>
<td></td>
</tr>
<tr>
<td>III- UNUSED FUNDS CARRIED FORWARD FROM PREVIOUS YEARS</td>
<td>3,425</td>
<td></td>
<td>23</td>
</tr>
<tr>
<td>IV- CHANGES IN RESTRICTED FUNDS COLLECTED FROM THE GENERAL PUBLIC</td>
<td>23</td>
<td></td>
<td></td>
</tr>
<tr>
<td>V- INADEQUACY OF RESOURCES FOR THE YEAR</td>
<td>3,425</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GRAND TOTAL</td>
<td>21,190</td>
<td></td>
<td>21,190</td>
</tr>
</tbody>
</table>

#### EQUATIONS OF VOLUNTARY IN-KIND CONTRIBUTIONS

- **Social aid missions**: 1,277
- **Fundraising related costs**: 1,267
- **Operational costs and others**: 619

**Total**: 3,163

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**Evaluation of Voluntary In-kind Contributions**

- **Social aid missions**: 1,277
- **Fundraising related costs**: 1,267
- **Operational costs and others**: 619

**Total**: 3,163
Members’ meeting concerning the approval of the financial statements for the year ended 31 December, 2018.

To the Annual General Meeting of the Association La Chaîne de l’Espoir,

In our capacity as Statutory Auditor of your Association, we hereby report to you on regulated agreements. It is our responsibility to communicate to you, based on information provided to us, the principal terms and conditions of those agreements brought to our attention, or which we may have discovered during the course of our audit, without our being required to express an opinion on their usefulness and appropriateness, nor to search for the existence of other agreements. It is your responsibility, according to the terms of article R. 612-6 of the French Commercial Code, to assess the interest involved in respect of the conclusion of these agreements for the purpose of approving them. We performed the procedures we deemed necessary in accordance with the professional guidelines of the French National Institute of Statutory Auditors (Compagnie Nationale des Commissaires aux Comptes) relating to this mission.

These procedures consisted in verifying the consistency of the information provided to us with the relevant source documents.

- Agreements submitted to the approval of the members’ meeting

Agreements signed in the course of the year just ended.

In compliance with Article L. 612-7 of the French Commercial Code, we have been advised of the following agreement, mentioned in Article L. 612-5 of the French Commercial Code, which was signed in the course of the previous year.

Agreement with the Institut Médical Français pour l’Enfant (French Medical Institute for Children-FMIC) Afghanistan:
Director concerned: Éric CHEYSSON
Agreement on the treatment of indigent children.
The expenses recorded for the year ended December 31, 2018 amount to €2,233,889.

Paris-La Défense, 5 June 2019
Auditor
Deloitte & Associés

Jean-Pierre VERCAMER
The mandate of the European Commission’s DG ECHO is to “provide needs-based humanitarian assistance to the people hit by man-made and natural disasters with particular attention to the most vulnerable victims. Aid is channelled impartially to the affected populations, regardless of their race, ethnic group, religion, gender, age, nationality or political affiliation.”

In 2013, La Chaîne de l’Espoir, like almost 200 other European NGOs, became a partner of the DG ECHO by signing the Framework Partnership Agreement (FPA), which was renewed in 2014.

In 2018/2019, the DG ECHO renewed its financial support, initiated in 2016, by contributing to the implementation of La Chaîne de l’Espoir’s project in Jordan.

This project focused on access to orthopaedic, cardiac, medical and surgical treatment helping to save lives and improve the living conditions for children and young adult refugees, notably Syrian, but also Jordanians in extremely vulnerable situations. The integrated approach developed by this project is threefold.

- Reinforcing the referral process in order to supply patients with a portfolio of services suited to their needs and state of health, including mental health, and their protection.
- Orthopaedic and heart operations, including actions for early detection and post-operative medical follow-up, as well as psychosocial support.
- Training and skill enhancement for the healthcare professionals in the Jordanian hospitals which host La Chaîne de l’Espoir’s medical teams.

AFD
FRENCH DEVELOPMENT AGENCY

The AFD is the pivotal operator in French bilateral aid. It is a public institution, with both commercial and industrial priorities, which is charged with supporting the development policies of the government with a double role - act both as a development bank and as a development agency.

In 2018, the AFD renewed its support for a further 4 years for the actions of La Chaîne de l’Espoir in Afghanistan. This programme contributes to the improvement of the treatment possibilities, notably tertiary, in the French Medical Institute for Mother and Child (FMIC) in Kabul through 3 components of the project: 1) capacity building for the FMIC staff through short, medium and long term training, 2) support for structuring medical expertise in Afghanistan using the support programme for postgraduate training at the FMIC and 3) access to treatment for the most disadvantaged sections of the population, in particular for mothers and children using the social aid funds of the FMIC and the ‘Children’s Pavilion’.

Also, in 2017, the AFD granted financial support over 3 years for the integrated project which La Chaîne de l’Espoir is carrying out in Burkina Faso, and which started in January 2018. This project is for prevention and treatment of children suffering from noma and facial diseases and malformations through awareness programmes for the population, specialised surgery, increasing the knowledge of civil society in addition to medical treatment and follow-up.
At the end of 2018, the AFD confirmed its 3-year financial contribution for a health education project in Togo, which got under way in January 2019. This is an integrated project for improving health and well-being in schools. It comprises awareness sessions in schools concerning water, sanitation, hygiene, non-violence and the right for healthy relations between the sexes.

This will be handled through action plans with the children on these subjects, by a strengthening of the capabilities of the school community and by treating vulnerable children.

The CDCS is the main tool for humanitarian aid in the hands of the French Ministry for Europe and Foreign Affairs. Its role is to “ensure help and protection for vulnerable people and to respond to the fundamental needs of populations hit by natural disasters or armed conflicts - access to water, sanitation, food, shelter and medical care.”

The CDCS has several missions and units, of which:
1. The Mission for Humanitarian Action coordinates the State’s emergency response for humanitarian assistance and facilitates the relations between the various partners (NGOs, international organisations, etc.);
2. The Stabilisation Mission for which there are two main ‘objectives’: first, the re-establishment of a State of Law and, secondly, direct support for the population and civil society in countries exiting from a crisis to enable them to keep their heads above water and help in the reconstruction of their country.

The financial support provided by the CDCS since 2016 in support of actions run by La Chaîne de l’Espoir in the Middle East (Kurdistan, Lebanon) was renewed in 2018.

In Iraqi Kurdistan, La Chaîne de l’Espoir’s actions have a double objective:
1) provide an answer to the needs of the most vulnerable populations, in particular refugees and other displaced persons, and those of local populations in the Doihuk district by ensuring access to the medical and surgical units in the region’s health establishments; 
2) help in stabilising the country by reinforcing the support for the decentralised health establishments in the north of Iraq, specifically by improving the competence of the local medical and surgical teams.

In Lebanon, the programme’s objectives are to improve access to medical and surgical treatment for vulnerable children, particularly Syrian refugee children suffering from disease or orthopaedic malformations.

As part of its ‘International Actions’ measures, the CR–IDF has set itself the objective of contributing to the 17 sustainable development objectives adopted in 2015 by the United Nations General Assembly.

In particular, the region will focus on the areas of education, health, urban development, the fight against climate change, access to water and food safety and security.

In 2018, La Chaîne de l’Espoir was helped by a subsidy from the CR-IDF to fund in part certain medical, biomedical equipment and instruments for the paediatric heart surgery unit built by the organisation within the ‘Le Luxembourg’ Mother and Child hospital complex in Bamako.

This funding has helped setting up an appropriate structure for the medical and surgical needs of children suffering from heart disease in Mali and the surrounding region.
Acknowledgements
Our partners in 2018

La Chaîne de l’Espoir expresses its sincere appreciation to all the private partners who have provided us with financial support, donations in kind, skills-based donations, or provision of space for outdoor advertising.

• **Private companies**

• **Foundations and corporate foundations**

• **Institutions**
  French Development Agency, Indian Ocean Regional Health Agency, French Embassies and Consulates in countries where La Chaîne de l’Espoir is working, The Crisis and Support Centre at the Ministry of Foreign Affairs, the Ile-de-France Regional Council, the Monaco Department of International Cooperation, Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO), Institut National des Hautes Etudes de la Sécurité et de la Justice (INHESJ), Ministry of Foreign Affairs, Ministry of Defence, Préfecture de la Réunion.

• **Hospital establishments**
  Assistance Publique / Hôpitaux de Paris, the Cardio-Thoracic Centre in Monaco, the Medical Centre of the Château des Côtes Les Loges in Josas, the Cardiac Rehabilitation Centre les Grands Prés, the Blood Transfusion Centre in Dijon, the hospital complex of Sainte Anne, the teaching hospitals in Caen, Dijon, Lausanne, Nantes, Rennes, Toulouse, Tours and the Félix Guyon in La Réunion, the following clinics - Bréthéché in Nantes, Boulogne-Billancourt, Le Parc Lyon, Jouvenet Paris, Louis Pasteur Toulouse, Médiplôle Garonne, and Paul d’Egines Champigny-sur-Marne, the following Parisian hospitals - Bichat, Armand Trousseau, Georges Pompidou European, Necker-Enfants Malades, Robert Debré, Saint-Joseph, the Haut l’Évêque Pessac Hospital Bordeaux, the Hospital de la Timone Marseille, the Hospices Civils in Lyon, the Montsouris Institute.

• **Our operational partners**
  Aviation sans Frontières, Bambini Cardiopatici Nel Mondo, Bien-Etre et Développement, Bilaadga, Cadéia de Esperança, CPCS Child Protection Centres and Services in Nepal, Children and Future, Coordination Sud, Ensemble pour Eux, Face au Monde, Fondation Children of Africa, Fondation

**Associations**

AB CFAO, American Dental Club of Paris, Association of the 20 kilomètres de Paris, Association Cabourg J’aime, Association Jubile Automobile, Club des Entreprises d’Evreux, National College of French Gynaecologists and Obstetricians, European Heart for Children, Fédération Opéra, Grande Loge Traditionnelle et Symbolique Opéra, Kiwanis, La Voix de l’Enfant, Lions Clubs, Rotary Clubs, European Cardiology Society, the Learned Society for orthopaedic and trauma surgery, Talents et Partage, UNOSEL.

**Advertising networks and media agencies**

La Chaîne de l’Espoir thanks the advertising networks and media agencies for providing free advertising space: Amaury Médias, FranceTV Pub, France 24, France Bleu, Groupe TF1, Groupe 1981, Ideas Média, L Média, Lagardère Publicité, LCP, Le nouvel Economiste, Malesherbes Publications, Mondadori, Multi Presse, Radio France, Remics et Compagnie, RFE Vinci Autoroutes et RTL, TV5 Monde, … as well as all the local radios which contributed to the end-of-year campaign “#CasseTaTirelire (Break open your piggy-bank)”. La Chaîne de l’Espoir also thanks all national and regional media (television, radio, print press and web) that have relayed and supported its news in France and abroad.

**Local authorities, general Councils and municipalities**

**Educational institutions and higher education ‘grandes écoles’**

**Our private donors and our sponsors**

**Our medical and paramedical teams, our host families, our volunteers, our reporters, our photographers…..**

**Our ambassadors**


**SPECIAL MENTION**

La Chaîne de l’Espoir would like particularly to highlight the commitment of the Atos Group which supports projects devoted to children, through its participation in the No Finish Line Paris by Siemens event. For the past 4 years, participation has continued to grow.

In 2018, the Atos Team comprised 390 employees who managed to cover a total of 5,723 kilometres during the 5 days of the event.

A huge thank you to you all!
Photo credits
Bernard Matussière, Child Protection Centres and Services - CPCS, Chantal Chazelet, Mother and Child hospital in Bingerville - HME, French Medical Institute for Mother and Child - FMIC, Instituto Do Coração - ICOR, La Chaîne de l’Espoir, La Chaîne de l’Espoir Luxembourg, Natalia Kovachevski, Oriane Zerah, Pascal Deloche / GODONG, Philippe Lissac / GODONG, Pascal Stelletta, PROCAM, Sébastien Rieussec, URDA.

Drafting, creation, mock-up and printing
La Chaîne de l’Espoir.

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